



Convenience Advertising

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CONVENIENCE ADVERTISING

**AS A MEDIUM FOR AIDS-PREVENTION
AMONG "RISK TAKING" YOUTH**

EVALUATION OF A PILOT PROJECT

PETER BLANKEN AND JOLANDA TENHOLTER

IVO

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INTRODUCTION

1

1.1 Background to the Research

The project group "AIDS and Drug Use" of the Netherlands Institute for Alcohol and Drugs (NIAD) has established that HIV/AIDS-prevention activities developed in a drug education context do not reach certain groups of young people. In particular youth, who not only are at risk through their sexual behaviour, but youth who have started to inject drugs and are running the risk of contracting and spreading HIV/AIDS. This target group of "risk taking youth" is similar to what was formerly named "fringe youth groups and marginalised, disadvantaged youths, including young people who are confronted with a wide variety and/or multiple problems." ¹ NIAD has noted that an additional risk factor for these groups is frequenting or associating with groups that inject drugs. ²

In conjunction with Foundation Mainline (a user organisation), the Rutgers Stichting (the national sexual health clinic) and Convenience Advertising Ltd., the NIAD project group "AIDS and Drug Use" developed a pilot project, using the medium of convenience advertising. The aim of the project was to alert risk taking youth to engage in safe behaviour and to convince the target group of the relevance of HIV/AIDS prevention.

The objective of this project is to examine whether Convenience Advertising as a method offers possibilities for AIDS-prevention to target 'risk taking youth', with regard to both, safe sex and safe drug use. The project aims to act as a 'reminder' for the target group. The focus of the project is not as much on the transfer of knowledge, as on highlighting safe behaviour and on convincing the target group that the message is relevant for them. ³

Convenience advertising is a communication medium which involves the display of A4 posters with intentional messages for specific target groups. The posters are displayed on doors and walls of (semi-) public amenities, namely toilets. The functional characteristics of public toilets are taken into account: "*In cubicles, a transient population carries out simple bodily functions requiring little conscious attention. For a few minutes, therefore, these people are a 'captive audience' with little else to do than pay attention to graffiti.*" ⁴

In order to determine locations for broadcasting *the convenience advertising* messages, a location profile was arrived at. ⁵ Locations were chosen in the business centre from central and surrounding Rotterdam, and ranged from coffee shops¹ (hash cafes) and (blow-) cafes² to discos that are predominantly frequented by young people (16-25 years of age). The locations for this project needed to fulfil a social function and have at least one properly accessible toilet.

Previous research in *convenience advertising* as a medium in HIV/AIDS prevention campaigns among students in Australia, Scotland and Ireland, supports its suitability. ^{6 7 8 9} The usefulness of

¹ coffee shop for the consumption of non alcoholic beverages and marijuana

² (blow) cafe for the consumption of alcohol and marijuana

this medium was confirmed by the percentage of students who were interviewed and who recalled at least one of the *convenience* messages (66-82%). Because of perceived social-cultural differences between the above mentioned Anglo-Saxon countries and the Netherlands, but even more because of the target group's specific characteristics which were focussed on in the Dutch campaign and the preferred chosen locations, the Institute for Addiction Research (Instituut voor Verslavingsonderzoek - IVO), at the request of NIAD, evaluated the pilot project *convenience advertising*.

IVO was not involved in the development or the execution of the pilot project, and only had responsibility for the scientific evaluation of (i) to what extent the target group had been reached and (ii) how much the target group had noted and appreciated the message about HIV/AIDS-prevention broadcast via *convenience advertising*.

1.2 Content of this Research Report

In this research report, the following chapter (by Franz Trautmann of the Project AIDS and Drug Use, NIAD) deals extensively with the goal, the set up and the content of the *convenience advertising* HIV/AIDS-prevention campaign. Chapter three deals with the goal and the methodology of the evaluation research. In the following chapters the outcomes of the project are presented. In chapter 4, the backgrounds of the visitors of the (blow-) cafes and discos are described. Following on from this in chapter 5, the recognition and the value of the *convenience advertising* campaign are discussed. In chapter 6 some direct results of the campaign, in particular with regards to the sale of condoms, are discussed. This chapter also includes a tentative description of the three sub-groups who frequent (blow-) cafes and discos, using their response to the campaign as an important identifying criteria. The final chapter offers a brief summary of the most important project results and offers some conclusions.

1.3 Notes

1. Trautmann, December 1993: Pp: 4 and 5
2. Trautmann, December 1993: Pp 5
3. Trautmann, December 1993: Pp 4
4. Mugford, 1991: Pp 3
5. Mainline, September 1993
6. Kitzinger, 1993
7. O'Beirne, 1992
8. Mugford, 1990
9. Mugford, 1989

PILOT-PROJECT CONVENIENCE ADVERTISING: PROJECT DESCRIPTION

2

By: Franz Trautmann
The Netherlands Institute for Alcohol and Drugs
Project "AIDS and Drug Use
Utrecht, December 1993

2.1 Outline of the Problem

Several sources have indicated that drug support in conjunction with HIV/AIDS prevention activities has not reached "risk taking youth" with the desired outcome. ^{1,2}We talk of "risk taking youth" as those who not only place themselves at risk through their sexual behaviour, but who are also experimenting with injecting drug use.

Noted problems in relation to this expressed concern include:

- insufficiently focussed information and dissemination of information to the target group(s);
- attitudinal and social norm related problems which effect these youth to prioritise safe sex and safe drug use;
- insufficient knowledge and detailed information by "risk taking youth".

During the last few years, several organisations have attempted to reach out to this target group. An example is the by the GVO Amsterdam designed "Rubber-in-the-house" campaign. ¹ Then there are some materials, which, although initially designed for general youth, have some appeal to risk taking youth. Examples of these materials include, "check it out"; ³ the "sex card" designed by the SOA Foundation and the pamphlet "Stop AIDS, Safe Sex". ⁴

The majority of information material on HIV/AIDS does not draw attention to the risks of infection through injecting drug use. However, there are a few exceptions which mention safe drug use perfunctorily. The work book, "AIDS prevention activities for youth work", in the chapter "About AIDS and sex" only includes information about safe sex. ⁵ In AIDS prevention materials for young people, the use of drugs and alcohol only receives attention in relation to a (possible) negative outcome for safe sex.

It would therefore seem worthwhile to attempt an HIV/AIDS prevention campaign which not only pays attention to safe sex but also includes safe use messages. The methodology developed by *Convenience Advertising* would seem to us to offer a promising medium for such a campaign.

Convenience Advertising is an Australian company that develops and implements publicity campaigns using permanent displays (A4 poster format) which are displayed in toilets (on the insides of toilet doors and above urinals and wash basins). Their approach is comparable to the approach of Publex (outdoor advertising) which uses advertising displays near tram stops and in illuminated display cabinets. Both approaches encourage shared responsibilities; leaving the

responsibility for external conditions, such as maintenance, installation and replacements of the message to the company; and the responsibility for the content and formatting of the messages to the interested organisation(s) and concern(s). The basic premise of the approach of *Convenience Advertising* is that individuals can *conveniently* access messages in toilets (convenience and toilet have a double meaning in both the Dutch and the English language). The relaxed singular purpose of 'using the toilet' facilitates absorbing the message. This approach can be used for both commercial and ideological advertisements. HIV/AIDS-prevention campaigns in Ireland and Australia have both used this medium. The evaluation of these campaigns have shown encouraging results.

The specific 'individual' strategy, of using the 'intimacy' of a toilet visit, is not only effective by itself, but offers further interesting possibilities regarding the content and format of the message. Because in this environment one can make use of the toilet graffiti-culture to focus on the HIV/AIDS-prevention message, in more or less neutral and/or indirect ways.⁶

2.2 Goal

The purpose of this project is to find out whether *Convenience Advertising* as a medium offers functional possibilities for HIV/AIDS-prevention among "risk taking" youth in regards to safe sex and safe use. The pilot is focused to act as a "reminder" for the target group. The main function is not the transfer of knowledge but to highlight safe behaviour and to convince the target group that the message is also relevant to them.

2.3 Target Group

The description "risk taking youth" is not simple, because the term is rather vague. In practice it is difficult to identify youth running a higher risk with drug use. For practical purposes, we can only identify possible risk factors. We can state, that the target group is, more or less, similar to what we used to call "youth fringe groups" and "youth from disadvantaged backgrounds", such as young people who are confronted with a variety of problems (school, job, family situation, housing, leisure time, health, police/the law, etc.). It can be noted that an additional risk factor is mixing with groups that are beginning, or that have started, to inject drugs. Further differentiation between the target group and specific participatory groups is not attempted. Because of the small scale of the pilot study it is not considered necessary nor useful to pay special attention to youth frequenting specific sub-cultural groups.

2.4 Methodology and Content

After preliminary research to conduct the pilot project in coffee shops (hash cafes) in Amsterdam, it was decided to develop a project proposal for Rotterdam. Rotterdam was chosen following a presentation of the idea to the section AIDS and drugs of the AIDS platform and the drug prevention platform there. The project received support from representatives of local organisations.

The project is a joint undertaking of the following parties:

- Convenience Advertising;
- Stichting Mainline (an organisation representing the needs of drug users);
- The Rutgers Stichting (national sexual health clinics - equiv. Australian Family Planning);
- The project "AIDS and Drug Use" of NIAD.

To ensure that the content and the direction of the project matched the Rotterdam scene, a pilot group was formed consisting of representatives of the above mentioned organisations with additional representatives of:

- The GGD Rotterdam (Local Health Department);
- Odyssee/HADON (Local user support group).

During preliminary talks a few basic points were formulated for the pilot campaign:

- As mentioned before, the campaign is to act as a reminder and is not specifically designed for the transfer of knowledge. A renewed focus on the importance of safe behaviour and an attempt to convince young people that HIV/AIDS-prevention is relevant to them.
- The toilet-situation (graffiti-culture) can be used to focus directly on HIV/AIDS-prevention.
- The accent of this pilot study will predominantly focus on safe sex, although safe use will be included.
- The number of locations for the pilot project will be 50. In the first instance, locations for a *convenience advertising* campaign were identified as establishments frequented by young people, namely, bars/pubs, discos, coffee shops (hash cafes), etc.. Other establishments, such as youth centres and especially designed centres for non-school attenders, etc. which are also places where one can find the target group, were not included. There are two reasons why these were not included in the pilot campaign; (1) education and social-cultural work often include HIV/AIDS-prevention activities already; (2) the possibility exists that HIV/AIDS-prevention via these channels will be negatively evaluated by the target group and regarded as uninteresting or patronising. An approach through their favourite hang-outs may be seen as more neutral or even as more positive.

Making contact with youth who are not yet injecting drugs, or with those who are experimenting with use outside the injecting drugs scene, limits the scope of the campaign. First, the target group will not so readily identify with so called hard drug users. In general, one does not regard oneself as a drug user, so there is a non-acceptance of this identity. Secondly, the dissemination of detailed information on safe drug use to youth who are already engaged in drug use is beset with a number of problems. There is a fear, rightly or wrongly, among parents but also among professionals, that young people will get ideas after receiving critical information.

Possible ideas for the *pilot*, on how to deal with HIV/AIDS infection in relation to injecting drug use, which took into account the above mentioned considerations, included:

- a story about STDs and AIDS can be a means of passing critical information about transmission;
- using the connection of alcohol- and drug use and unsafe sex;
- including information on "piercing" and tattooing;
- using the message "just in case of" and/or "telling your friends who are users".

2.5 The Experiment

2.5.1 Choice of Locations

The choice of locations was based on information, advice and discussions with the relevant Rotterdam based authorities. Consideration was given to criticism on an earlier proposal to only use coffee shop (hash cafes). The critical consideration was that managers/owners of coffee shops (hash cafes) would not want to be identified with the sale of "injecting" drugs and therefore (could) reject the part of the campaign that focuses on the risks involved in injecting drugs. In relation to this consideration, it was furthermore noted that at present coffee shops (hash cafes), being part of the Dutch drug reform policy, already receive a fair share of criticism. A pilot campaign including only coffee shops (hash cafes), could be interpreted wrongly and could add fuel to the already existing public and political opinion that coffee shops (hash cafes) also sell injecting drugs.

This criticism influenced a change in the approach of the pilot study. As mentioned before, the choice of the locations in Rotterdam was broadened to include discos, youth cafes/bars, coffee shops (hash cafes), etc., which function as establishments frequented by the target group. The choice of the coffee shops (hash cafes) was further fine tuned, so that these locations, preferably, would not have an exclusive "soft drugs-image", but would sell alcohol in addition to soft drugs. It needs to be mentioned here that in Rotterdam there is very little distinction between establishments which sell soft drugs and which sell alcohol.

An important criteria in the pilot project is that the establishments, just like other food and beverage places and youth centres, fulfil an important role in the daily life of young people and that they spend an important part of their leisure time there (Leisure time, not necessarily meaning "officially sanctioned time off", but also time taken off against existing rules and regulations). It appears that youth who are truant from school, but also youth with problems who stay at home, regularly visit, what they consider, "attractive establishments" which are open during the day. This fact is also reported by outreach youth workers. Truanting, or just experiencing problems at school or at home, are important factors in defining the target group "risk taking" youth.

It is important to realise, that it is problematic and rather useless to discriminate between youth injecting drugs and those who are not, because there are not only youth who are long term injecting drug users, but also those who are just starting or who are still experimenting. First, it is not possible to recognise an injecting drug user, or someone who experiments or has just started to use. The fact is that a young person using drugs often goes unnoticed. The findings of an

anonymous questionnaire, conducted as part of the Project "No-Risk" and by outreach workers of the Foundation Drug-Aid Deventer, to survey visitors to a youth centre in Deventer supports this notion.¹ The results of the questionnaire suggest that a certain number of young people had injected drugs and were in need of information and advice/help. The people working on this Project were not aware of this fact. People who inject drugs, whether we like it or not, use "general public" facilities, whether these are public places, public transport, shops, or what ever else. It is therefore, impossible for coffee shops (hash cafes), or any other business to avoid serving "injecting users". The only, and therefore often chosen, approach is to refuse drug use on the premise. Secondly, it is against the basic premise of Dutch government policy, which endorses comprehensive normalisation, to single out and/or to discriminate against injecting drug users. Regulations are never explicitly intended against the user.

As a first step to facilitate the choice of locations, a list of almost 70 locations was compiled from a list of all possible establishments. Local observations were used in this process. From these 70 establishments, 50 were chosen which were considered most suitable, including, 8 discos, 13 bars where *only* alcohol is served and 29 bars where both marijuana and alcohol is sold.

The chosen locations were visited by employees of *Convenience Advertising* (between the end of December 1993 and the beginning of January 1994). The owners/managers of the establishments were given information about the objective and the design of the campaign. This contact was purely a business arrangement between *Convenience Advertising* and the partaking establishments. This is confirmed by the small remuneration the establishments receive for displaying the A4 posters. In case of non-participation (refusal), one of the 20 non-chosen establishments of the original list will be added to the new list to maintain, as much as possible, the target of 50 participating establishments.

2.5.2 *Content of the Pilot Campaign*

After having made an inventory and site visits of the chosen locations, a decision was made to reject the original idea of making sex-specific posters. It became evident that several establishments frequented by the target group did not have separate male and female toilets. The idea to post more detailed informations on "sit-on" toilets, than for instance above urinals, was also rejected; simply because, time spent in toilets is usually not much longer than in urinals. A most likely reason is that the amenities in the chosen establishments are predominantly used for urinating. It was also noted that the lighting in the toilets in several locations was not good.

On the basis of these findings a choice was made for posters with limited text which were targeted to both sexes. Keeping in mind that the objective of the pilot was that the posters only function as a "reminder" to convince the target group that the message is also relevant for them, a decision was made to pitch the design to catch a person's immediate attention. The desired design should be simple, have an immediate appeal and catch people's direct attention. In conjunction with an

¹The results of the questionnaire, which was part of the Project "No-Risk" have never been finalised and published. The outcome mentioned here are based on raw data from the questionnaire and personal comments from A. Krassenberg, co-collaborator of the Project "No-Risk".

advertising agency, a combination of a "catchy" text carrying a simple message with a poignant image was selected.

In the search for an acceptable approach to reach the target group, the previously held confrontational humour of a recent Dutch fireworks campaign came to mind with its slogan (" thanks to the short fuse, you finally got your 'runt' "). From experience with HIV/AIDS-prevention for the target group, but also from information gathered from talks with youth from the target group, it seemed that an in your face confrontational approach laced with humour would have some appeal.^{8 2 9}

In weighing up alternatives for the approach, it became of prime importance to consider the possible drawbacks and negative experiences of using an exclusively hard hitting approach which, after all, is not meant to only instil fear. In England, a number of HIV/AIDS- and drug-prevention campaigns, which used the hard hitting approach (confrontation with death and disease) have demonstrated that campaigns which instil fear do not achieve desired outcomes. In the Netherlands, therefore, people have tried to use a more positive approach with a focus on alternative behaviour patterns. Nevertheless, there have been some campaigns during the last few years which deviated from a positive approach, such as, the posters which appeared in Amsterdam "AIDS, the deadly bite of love", or the billboard size penis on the advertisement of the marketed condom Freestyle with the message "Dickhead use it" on it.

One often noted concern of the more positively formulated approaches has been that this approach does not reach the marginalised target group.^{1 10} An experiment with a different approach is therefore warranted. The combination of confrontation and humour, which should ward off concerns of an approach which only instils fear, seems to offer the best perspective for a positive outcome.

The above mentioned deliberations formed the basis for the following formula:

- The *eye catcher* on the posters is a question about how one can obtain something or reach something which is considered attractive to the target group;
- the image behind the *eye catcher* provides an unexpected unattractive response, which weakens the attractive proposal;
- the *tag line* consists of a phrase that clarifies the relationship between the elements and suggests that the reader is able and capable to avoid the initial proposal.

The humour comes out in the combination of the three elements. To ensure that different posters are recognisable as parts of the same campaign, the same design is used on all the posters in addition to one *tag line* (with two variations).

Mainline presented the steering committee with ten different designs. These were discussed by this committee and some were modified or rejected. One suggestion by a member of the steering committee, to add a brief text on the posters with information on where to purchase condoms and on where to access drug support services, was included. Based on the design of "Condoman" from an Australian HIV/AIDS campaign by *Convenience Advertising*, a three line text, which was not a part of the actual design - was added at the bottom of the poster.

The poster mock ups were shown to a number of experts (contact persons and trainers of the regional project "AIDS and Drug Use", representatives of relevant organisations, outreach youth workers, etc.) and to about twenty young people in two towns (Rotterdam and Zaanstad). In general, the reactions were positive. The experts certainly valued the approach as an experiment. The young people regarded the concept of the campaign very positively. Both the formula (confrontation - humour) and the message were well understood. It was remarkable that some of the young people elaborated on the theme without being asked to do so. This resulted in a number of suggestions, one of which was incorporated into the final campaign material.

2.6 Evaluation

Convenience Advertising undertakes to take care of the maintenance work, which involves putting up and changing the messages. This ensures that every second week employees of the agency check whether the posters are damaged or have been taken away. Through this process comments and related graffiti can be noted. These notes provide important additional data for the evaluation of the campaign. The following questions also seem an important part of the evaluation:

- how much of the message is recalled by members of the target group;
- how much of the message is understood by members of the target group;
- how much is the message appreciated by the target group and considered interesting, useful and/or relevant.

The Institute for Drug Research (IVO) of the Erasmus University in Rotterdam agreed to undertake the evaluation-research. The "AIDS Fonds" (Trust) bore the additional costs.

Depending on the outcome of this evaluation, a decision will be made on whether a more extensive HIV/AIDS- prevention campaign for "risk taking youth", using *convenience advertising* principles is useful. This could happen with the help from financial sponsors, and could include broadening the definition of the target group.

2.7 Timetable and Duration

Preliminary work on developing the campaign commenced in September 1993. The duration of the campaign was six months, beginning in February 1994. Evaluation of the project occurred both during and after the active campaign.

2.8 Budget

The cost of the campaign is approximately f 50.000 (Aus \$40.000). It is funded through the project "AIDS and Drug Use" of NIAD. IVO has requested a subsidy for the evaluation.

2.9 Notes

1. Jezek, 1991
2. Trautmann and Buning, 1993
3. Beumer, Braecken, Brouwer, et al., 1991
4. Poelman, 1992
5. Freericks en Van de Vegte, 1993
6. Mugford, 1992
7. Folkers, 1991
8. Rocks, 1991
9. Trautmann, 1992
10. Hesterman, 1988

A COMBINED ETHNOGRAPHIC AND SURVEY STUDY 3

In comparison with several other campaigns undertaken in the Netherlands this project comprises a number of new elements. First, there is the new medium *convenience advertising*, whereby the prevention message is displayed in toilets in semi public places. Secondly, a decision is made to "strike a different note" and replace the popular message, "I'll only have safe sex, or no sex", with a tougher more confrontational one, "AIDS, without a condom or clean needle you are a bloody idiot". Lastly, this campaign is pitched at a very specific and difficult to define target group, namely, those youth ".....who are confronted with a multitude of problems (school, jobs, family background, housing, leisure time, police, the legal system, etc.)" and youth who take risks with their sexual behaviour and/or are experimenting with injecting drugs." ¹

The pilot project's main purpose was to investigate (1) whether the method of *convenience advertising* offers possibilities to reach out to "risk taking youth" with regards to safe sex and safe use, and (2) to act as a "reminder" for the target group. Its main function is not so much the transfer of knowledge, but in highlighting safe behaviour and convincing the target group that the message is relevant for them. ²

The goal of the evaluation is primarily to investigate how much the target group has noted the HIV/AIDS-prevention message implemented by *convenience advertising* and whether they perceived this form of HIV/AIDS-prevention as relevant. In addition, an attempt is made to indirectly gauge the effectiveness of the campaign. An important factor that will be looked at, (1) possible changes in condom sales in a number of locations, and (2) possible changes in the number of telephone enquiries which are received at the drug support service of HADON/Odysee.

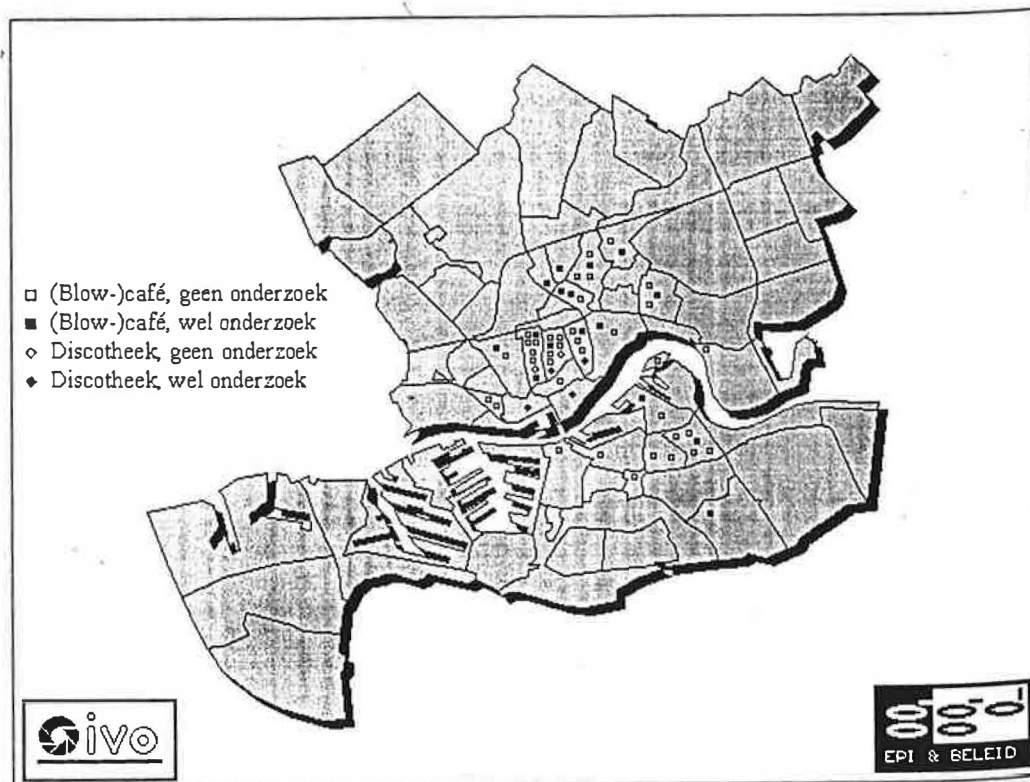
3.1 Research Questions

The research needs to specifically answer the following questions:

1. What in fact happens with the *convenience advertising* message? An employee of the *Convenience Advertising Ltd. Agency* visits every campaign location every two weeks and reports, through maintenance reports the state of the displays (whether the displays have been damaged, whether they have vanished and whether graffiti has been added by visitors to the locations).
2. How does the target group perceive this HIV/AIDS-prevention campaign via the medium *convenience advertising*? Important factors include, how much of the message is recalled and appreciated because it is, relevant, shocking, understanding or providing information.
3. Is there a relationship between respondent characteristics (socio-demographic and risk taking factors) and the recall and the appreciation of the *convenience* messages?
4. What is the attitude of the "risk group" with regards to "safe sex" and "safe drug use", and is this attitude related to the recall and the appreciation of the *convenience* HIV/AIDS-prevention messages?

- 5 What is the effect of the *convenience advertising* campaign on:
- The sale of condoms from public condom vending machines, which are referred to on the displays? It will be investigated whether, because of the campaign, there is a change in the amount of condoms sold from public condom vending machines, which are referred to in five of the six displays.
 - The sale of condoms from condom vending machines which are installed in a number of the locations? It will be investigated whether there is an increase in the sale of condoms from the start of the campaign from locations which already had installed condom vending machines before the start of the campaign.
 - The installation of condom vending machines in locations which did not have these at the start of the campaign? It will be noted in which location condom vending machines were installed at the start of the campaign and which locations installed condom vending machines as a direct result of the campaign.
 - The telephone information service of the drug aid service HADON/Odysee, which is once mentioned in the displays? HADON/Odysee will register whether, after the start of the campaign, there is an increase in telephone counselling and will endeavour to find out, whether the enquiry is because of the *convenience* message.

Figure 3.1
Map of Rotterdam with Surrounding Area indicating Locations



3.2 Research Methodology

This HIV/AIDS-prevention project includes 63 locations chosen from the commercial entertainment circuit in Rotterdam. The locations consist mostly of coffee shops (hash cafes) and (blow) cafes and a few discos. Because it is impossible in the evaluation project to include all visitors frequenting all the locations, a choice is made to include certain coffee shops (hash cafes) and (blow) cafes and discos and to exclude others. The determining factors for choosing locations are; (1) critical criteria which have previously been identified for a profile outline for locations participating in the campaign³, and (2) the experiences which are collated during the initial inventory fieldwork, which included visiting most of the locations (see the next page for a sample of some of the field notes - first impressions of the location visits). In the location selection process, an attempt is made to obtain an even spread of locations across the city and to consider the possible relationship between the nature of the locations (that is to say: coffee shops (hash cafes and (blow) cafes in relation to discos) and the effect of the *convenience advertising* campaign. Data collection was achieved in 16 (blow) cafes and four discos (see Figure 3.1).¹ The evaluation of the *convenience advertising* HIV/AIDS-prevention campaign is a qualitative, ethnographic field study in combination with the quantitative results of a survey conducted among visitors to several locations.

3.2.1 *The Qualitative Evaluation*

During the *convenience advertising* project ethnographic field work was used in a few of the locations. Through the qualitative evaluation of the reactions of the target group to the *convenience advertising* message (through observations and talks/interviews), an attempt is made to contact drug users who were starting to inject, or who frequented groups who inject drugs. Relatively little is known about this group in relation to their initial injecting drug experience and their attitude to save sex and safe use.⁴ In this context, an ethnographic research methodology seems very appropriate.^{5,6,7} In this ethnographic fieldwork the community field worker plays an important role. The community field worker is someone, who from her/his own personal experience is familiar with the behaviour, special rituals and social networks of several (sub) groups of youth taking risks, and who is therefore trusted by the group. The extensive value of this experience and knowledge is important for several aspects of the research: the mapping and localising of the group at risk; the development of trust between the target group and the research team; and not in the least, the interpretation of the data.

3.2.2 *The Quantitative Evaluation*

For the research a structured interview is conducted with 280 visitors in the participating locations. An attempt is made to approach an equal number of female and male respondents and to include an equal division of the different locations. This means that approximately 70 female and 70 male

¹The city plan reproduction of Rotterdam is reproduced from the Rodis Vision program of the Health Services of the Council of Rotterdam e.o., Division Epidemiology Management: J. Toet, H. van Oers and P. Huijnen.

visitors are interviewed in the coffee shops (hash cafes) and (blow) cafes as well as in the discos.

Field Notes:

Tuesday 03 May 1994, 15.45 pm: S...

S... seems to be a typical senior blow cafe, with a stable public, many regulars for whom it seems to be the local bar. Sometimes, a lost youth wonders in to buy a piece of stuff only to leave again straight away. There are separate female and male toilets, the posters are clearly displayed. Approximately 80% of the people are white and locals, the rest seem to have different cultural backgrounds. The ages vary from approximately 25 - 50 years. The atmosphere is friendly, people talk at the bar and the music is not very loud. Conversations seem to focus on soccer and music (). People are clearly older than the target group. Drug use is limited to blowing and off and on a snuff of coke.

Tuesday 03 May 1994, 17,15 pm: R...

R... is a youth cafe for more progressive youth. The music is loud here, hard Core, Grunge and Trash Metal. The comings and goings are constant. This is a busy place. There are separate toilets, posters again well displayed. The number of girls and guys is about the same, although there are more guys inside. Their ages range from about 18 - 30 years. Multi-racial. People who come here seem to know each other quite well, apart from the people who only come in to buy stuff and who leave again. People who stay (there are quite a few of these) are the regulars. Because of the "different" image of the regulars, I don't think that many outsiders would choose to come to this place. The place seems to have created its own ambience. "Typical" students or wagging school kids would not easily come in for a beer or even a blow. I think this is part of the target group (). Drug use plays a major role and seems to be the main occupation of the people here. They seem to be out of work and nor to attend school. I heard them talk about going out, the drugs that are part of that scene and "the meaning of life".

Tuesday 03 May 1994, 1.45 pm: SH...

A small coffee shop (hash cafe) with House music. To-day there are four regulars. I think that a small number of small regulars come to this place to talk. Today there are three Dutch guys and one Marocain, no girls present. There is one toilet with poster display. Ambience? Hard to tell with only four present. There did not seem a lot to discuss. The music was loud. I am sure that this is part of the target group.

Friday 27 May 1994, 20.00 pm: SH

Friday night - shopping night - after my report of May 3, I have returned to visit this place again. I have to change my previous comments drastically. Tonight was a very busy night with lots of kids that belong to the target group. Upstairs on the first floor is a pool table. I haven't heard any House music to-night. To do justice to this project and to get a real picture of what really happens in these establishments, I need time to visit all the places on the list several times. The times that I have visited have only revealed a moment in time which may not be representative of what really happens.

Wednesday 04 May 1994, 16.00 pm: H...

H... is quite a big music-, blow cafe, where all sorts of music is played, except the real hard House. You won't find any Housers in this place either. There is a small but stable group of people here, not many come and go. There are separate amenities with posters displayed in the toilets. There has been quite a bit of discussion about the posters, but I seem to have missed that according to one of the regulars. The interest in the discussion had somewhat abated. There are the same number of women and men, because this is considered a women friendly business (). The atmosphere is good. People are "peace loving" and blow in a so-called peace atmosphere. This is a meeting point for "house breakers" (krakers) (). The conversation is rather depressing and relate to awful things that happen. According to H... customers there are many things that can go wrong. This is, probably the target group. The age ranges right and I think that the sexual behaviour and the drug uses are right too.

Friday 06 May 1994, 16.00 pm: F...

F... is a youth bar annex blow cafe. In the back there is a practice space which can be rented by bands. The business has a stable group of regulars, who all live nearby. They come in, go home and return again. That is why, at different times of the day, you can see the same faces again. There are separate female and male toilets. The ratio of girls and boys is almost the same, although again here there seem to be more guys than girls inside. This seems to be the case every where. The majority is white, and yes, House music was being played. Probably, next time when I come it won't, but this time it was. I did notice real Gabbers, in track suits with shaved heads. Discussions were loud and course about going out, getting pissed and women, as well as drugs. If I want to achieve anything here, I'll have to come back quite a few times, so that people will recognise me and include me in their conversations. That is most likely worth the effort, because it is clear that this is part of the target group. They are young and they want something!!!

Friday 06 May 1994, 1715 pm: S...

S... is a coffee shop which looks like a lounge with a bar installed. It is really an ordinary lounge with below a shop. The business consists of two floors, downstairs are the toilets, table football and poker machines. When you are upstairs, you really don't see what is happening downstairs. Upstairs they sell behind the bar ready made joints and stuff and weed. There is no separate dealer, the girl behind the bar sells lemonade beer and dope. Most people come here to buy. A small group are regulars and come every day. These people appear to have a kind of credit which will be paid off once in a while. You have to ask for a key at the bar to go to the ladies. The majority of people attending are white Caucasian, apart from some Marocain guys (16 year) who play table football. People prefer these boys not to come in. The posters are displayed behind the bar. The atmosphere is loud and course. Almost every regular works and visits to blow or to play the pokies between breaks. There are very few women, and the women who visit are girl friends of one of the guys. On weekend nights it is quite busy, but during the day through the week not so much. The age lies between 16 and 30 years. This is part of the target group, although nobody wags school or is without work. People act tough about sex and drugs. The guys are difficult to approach, they consider everything stupid and therefore don't want to talk.

3.3 Selection of Respondents

With the help of a selection process, visitors to the establishments were approached, both during the afternoons and during the evenings. In the discos, every fifth visitor was approached after a certain time (T_i) and using the same principle, in the (blow) cafes every third visitor was approached. Exceptions in the selection process were the quiet (blow) cafes, where every woman was approached to be included in the project. Based on the experiences of the field workers, a decision was made that the (two) female interviewers would only approach female customers, and that the (three) male interviewers would only approach male customers in the locations (See following field note).

It has been noted that people are still rather shocked and react strangely to questions about sex if these are posed by a woman to a man, or vice versa. I have interviewed some guys who reacted quite obscenely to the questions about condom use ("Do you feel like it?"); and Bas (male) interviewed a girl who was quite uncomfortable. She showed this by her nervous giggle and her initial stupid answer ("He, what has that got to do with it?"). [Field note: 28 June 1994; 19:30 - 23:00 pm; (blow) cafe]

Because, as the night progressed a number visitors became too intoxicated by legal and/or illegal drugs to respond to the posed questions in a way which was meaningful to the interviewer, a decision was made to approach visitors as they entered the premises.¹ Despite this strategy, it became apparent (according to the interviewer) that almost half of the interviewees were intoxicated from alcohol or other drugs (47%). However, this influenced the results of the interview of only six respondents (2%).

Those respondents who participated in the research project and who showed an interest, were asked if they would like to receive an extensive summary of the results.

During an earlier research project, a comparable method for the selection of visitors to coffee shops (hash cafes) in Amsterdam was used. Here the response rate was 75%.¹⁰ In one of the few evaluation studies by *convenience advertising*, which did not involve students but visitors to two entertainment venues in Ireland, one out of three visitors was approached for an interview.

¹¹ In the Ireland study the response rate was 74%.¹²

The finally selected group of interviewees can not be considered a random sample of the Rotterdam night life population, because of the narrow focus on the locations in which the campaign and the research was conducted. According to sex, and according to the nature of the location, additional grouping was carried out. It can be accepted, however, that the final research group was reasonably representative of the visitors to the selected locations. From the non-respondents the (nature) of the locations and the sex were noted, and a rough guess of their ages was made. As much as possible, the reasons for their non-response were asked and noted. From these data a small non-response analysis was conducted (See Chapter 4.1 The research group).

¹ Before starting the interview the relevant person was asked whether s/he had visited the location before the beginning of the *convenience advertising* campaign.

In the coffee shops (hash cafes) and (blow) cafes, and in some of the discos, approximately 40 visitors were approached for a more extensive, open ended, interview. However, only 16 more formal interviews were eventually conducted, while informal talks were held with more than 40 visitors in various locations. Records were kept in field notes. In the selection process for respondents, in the first instance, an attempt was made to get an equal division according to sex, but also to get the widest possible variety of people in terms of background characteristics and risk factors.

3.4 The Research Tool

A questionnaire, largely based on existing questionnaires, was used for the research. The questionnaire comprised predominantly pre-coded and a small number of open ended questions. The following aspects were covered in the questionnaire:

- social-demographic characteristics;
- "risk" factors;
- recognition and appreciation of the *convenience* messages;
- attitude in relation to "safe sex" and "safe drug use".

In addition to the results of the interviews, structured observations, using a minimal observation scheme, and more unstructured observations were used during the ethnographic fieldwork. The results were recorded in field notes.¹³

3.5 Data Analysis

An analysis of the quantitative data was achieved with the help of SPSS,¹⁴ while the qualitative data were organised using the software program Ethnograph.¹⁵ In addition to a frequency distribution with accompanying confidence intervals, uni-variate analysis techniques, such as the Chi-Square test (categorical variables), and the T-test and variance analysis (continuous variables) were used in the analysis of the quantitative data.^{14 16} Given the stratified selection according to location and sex, for as far as there was an overlap, the results for male and female visitors and for visitors to (blow) cafes and discos was presented separately.

The qualitative data was analysed in relation to "specificity" (for example, descriptions which represent a new perspective) and to "frequency" (that is to say, descriptions which represent the viewpoint of several respondents), as has been outlined by Zinberg¹⁷ and others.

3.6 Notes

1. Trautmann, 1993: Pp 5 and 1.
2. Trautmann, 1993: Pp 4.
3. *Mainline*, September 1993.
4. Trautmann and Buning, 1993.
5. Lambert and Wiebel, 1990.
6. Moore, 1993.
7. Power, 1989.
8. Hendriks; Blanken and Adriaans, 1992.
9. Grund, 1993.
10. Korf; Blanken and Nabben, 1991.
11. O'Beirne, 1992.
12. O'Beirne, 1993.
13. Sellitz; Wrightsman and Cook, 1976.
14. Nie; Hull; Jenkins; Steinbrenner and Bent, 1975.
15. Seidel; Kjolseth and Seymour E, 1988.
16. Noether, 1976.
17. Zinberg, 1984.

VISITORS TO (BLOW) CAFES AND DISCOS

4

4.1 The research group

The response rate for the quantitative visitors survey is reasonable. (See Figure 4.1). Of the 386 people who were approached in the coffee shops (hash) cafes and (blow) cafes and who met the inclusive research criteria,¹ almost three quarter (72%) agreed to cooperate. This response rate is in line with comparable location research done in Amsterdam and Dublin.¹² The response rate for visitors to the discos is slightly lower (70%) in comparison with visitors to the (blow) cafes (74%),³ which is likely to be related to the different reasons why people visit discos or (blow) cafes. Additionally, a difference is noted between male and female visitors; respectively 65% and 81%,⁴ and between older (62%) and younger (78%).⁵

The final grouping of the interviewees of the location survey is not representative of the "going out population" of Rotterdam. In one way, this is the result of the stratification of the random sample according to sex (final result 49.6% female) and the nature of the location (final result 55% visitors of (blow) cafes). Through the high non-response rate among visitors 26 years and older, there is also a distortion in the age range of the respondents group. This last factor is not too important for the evaluation of the *convenience advertising* AIDS prevention campaign, because the campaign is targeted at risk taking youth, whereby youth are defined as "26 years and younger".

In addition to the many (non) structured observations and discussions that took place and were recorded during the ethnographic field work, 16 visitors to the different locations were interviewed in greater depths. These were people, with the exception of one, who were contacted in the (blow) cafes. The number of open ended interviews was fewer than was originally planned. The willingness to talk about the *convenience advertising* campaign was good in general. However, a lot of effort was made, often in vain, to make more formal arrangements for an interview. The field notes below support this:

Friday 19 June, 13:00 - 15:00 pm

I have managed to organise an interview with a girl who belongs to the target group. We haven't got a definite date, because I felt that I shouldn't insist too much. We agreed to meet in F... sometime this week.

Monday 13 June 1994, 13:00 pm

A pity I didn't see K... today. It was very quiet, but I was very early I suppose.

Tuesday 14 June 1994, 12:00 am.

Trying to see F... and to do some shopping and met K... I talked to her briefly, but without much result, because she was so stoned. I have been able to make an appointment with her for this Thursday. She invited me to her house, I am interested.

Thursday 16 June 1994, 20:30 pm

I arrived on time at K...'. At the beginning of the street, I heard already a lot of shouting and carrying on. The closer I got, the louder it became. She was indeed having an incredible fight with her boyfriend. I hung around for a while, rode around the block and when I returned she was standing outside crying. She asked if we could please change the interview to next week. Of course (I was pissed off). It is now going to be next Tuesday

¹The inclusive criteria was that one should have visited the location where one was approached at least once during the last six months.

Convenience advertising as a medium for AIDS-prevention among "risk taking" youth

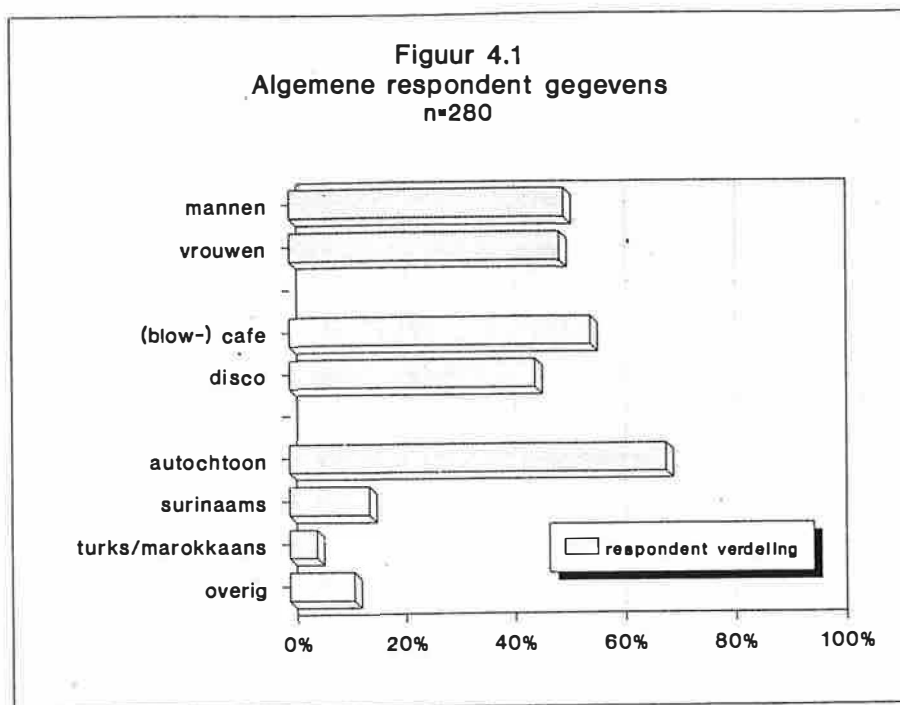
Tuesday 21 June 1994, 13:30 pm and 19:30 pm.

This afternoon again I paid K... a useless visit. She was sick in bed. It is rather annoying, but I still want to keep trying, because, in a way, I feel it might be an interesting interview. Tonight i had an appointment with a guy at about 8:00 pm in F ..., but he also did not turn up.

Wednesday 22 June 1994, 20:00-24:00 pm.

Tonight I went unexpectedly to K..., because I finally wanted to conduct the interview. I had some more energy this evening-night and thought why not just pass her house. When I arrived in the street, she told me that she was about to go out to get some fresh air, because she felt stale from being indoors. When I suggested to do the interview, she hesitated, because it meant spending another evening at home. When I told her however, that my visit was again in vain, she thought that this wasn't fair to me either and agreed to talk. But before that, she wanted to buy a "blow" and she asked me to wait for her on the pavement. I did as she asked, and after about 15 minutes she returned with "blow" and a big bag of sweets. She had also brought the guy next door - who supplied her with the "blow" according to me - as support. I had met this next door neighbour already before in F... A young kid who blows and always has a lot to say. (). K...'s boyfriend, who was fixing his motorbike downstairs in the street, () came upstairs every half hour and felt obliged to contribute with some interesting comment. The sweets, which would have easily cost ten guilder (Aus \$8.00) were finished at the end of the evening. They knew how to eat sweets and to blow!

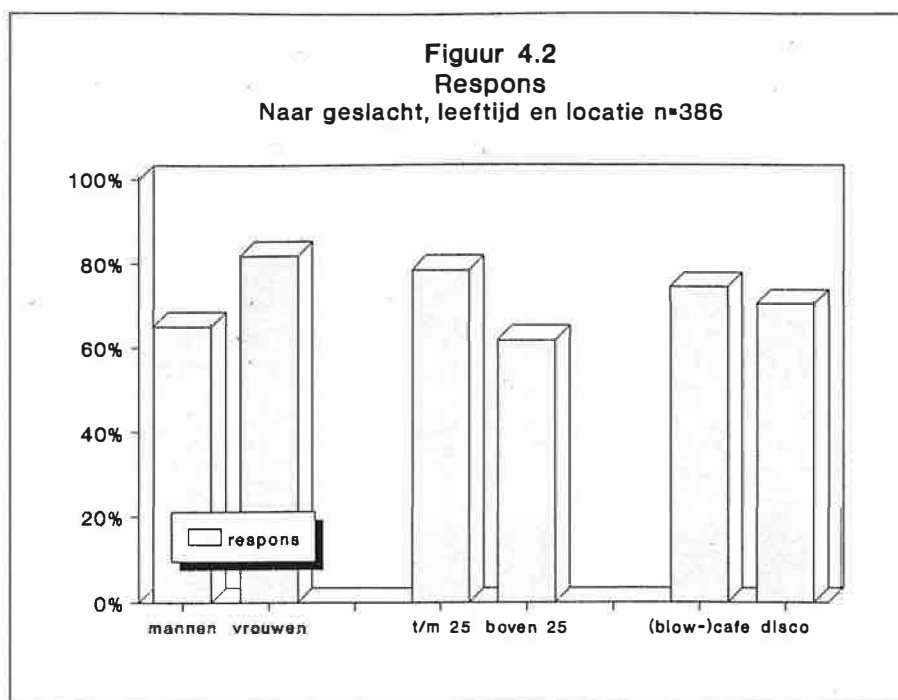
Figure 4.1
General Data on the Respondents
(N=280)



Another problem of the ethnographic field work was that a considerable amount of the visitors to the establishments was often quite intoxicated by alcohol and/or cannabis. This often prevented the interviewee to maintain a coherent conversation about the campaign. The conversation noted below, between two young visitors and the field worker (CF), was conducted in a (blow) cafe accompanied by the thumping music of the double bass of the house music:

- J (male): This is the only one I've seen. And this one. These are the only two I've seen. Let's see. This one we didn't want, we didn't display that one on purpose, that one with the needles, this one, because we just don't want anything to do with needles. Only these two are always displayed here. These two.
- CF: So the rest was never really displayed here?
- J (male): No, because we really don't want to have anything to do with needles. Only these two are displayed. In the ladies' toilet and in the gents' toilet. We don't want anything to do with needles.
- CF: What do you think of the other ones?
- J (male): No, I don't like that one, with the needles. But, eh, I think, eh, in general most of the public will come, I also think, if it has to do with needles, eh, but with needles we don't want anything to do with needles. No, no.
- CF: But, why? Why do you think that?
- J (male): Now eh, you've got it in your own hands. If you don't do anything stupid then you can and then you don't need to display this thing.
- M (female): Yes, but if people are very young? They don't know that, do they? They need to know!
- J (male): Everybody gets sex education, they all know how to use a condom. I mean, people themselves, they are not stupid.
- M (female): You're indeed stupid if you don't use a condom. Then you are really stupid. But how do people know about that?
- J (male): Do people come out of a coconut, or so? In Holland people are told all that from very young onwards (). Before, when there were only Dutch people, you never heard about all this cancer business. AIDS this and AIDS that (). Before, they also said: This isn't good and that isn't good. They themselves, are making the people crazy. That is the point. Really, that's what I think. I don't need to explain that. Before, if you, before you made coffee in a pot which was put inside a nylon stocking. You didn't hear then this and that is bad for you. But now you hear: this is bad and that is bad. Because then make everything bad. Then want to push this down your throat. And that is what I want to tell you. Then make out what is bad for you, while before, you never heard a word of that. No never, but anyway, before there wasn't such a gossip mongering about cancer, because before you could just grow carrots in your garden, grow radishes. No, because they say: This is bad and that is bad. Then make out what is bad for you. Before, it was never not bad. Before, also with the animals, before, you got a dog, if you had a dog, the dog could also eat everything, the dog ate everything that the family ate. And now? Now it is all bad all of a sudden, because now you have to use Bonzo (*Pat*). Well, that is all nonsense.
- CF: But if you had to make one (*poster*), how would you do that?
- J (male): Listen to me, no just listen. Before you heard nobody complain, and now you hear, it is a bad government, eh. This isn't good, that isn't good. You are not allowed to eat this, you are not allowed to eat that. But before, you never heard about that (). I have, I have, believe me, I respect you, that you are going around with these things. Really, I have respect for you, that you do these things. I really respect you for that, because you use your free time for that. But you're not going to achieve a thing, I respect you, that you are going around with those things. But I just say: You are not going to achieve anything. I respect you, but my viewpoint is: What you are doing is pretty hopeless. That is my view point. And I respect you for it, but what you are trying to do is hopeless.

FIGURE 4.2
Response According to Sex, Age and Location
(N=386)



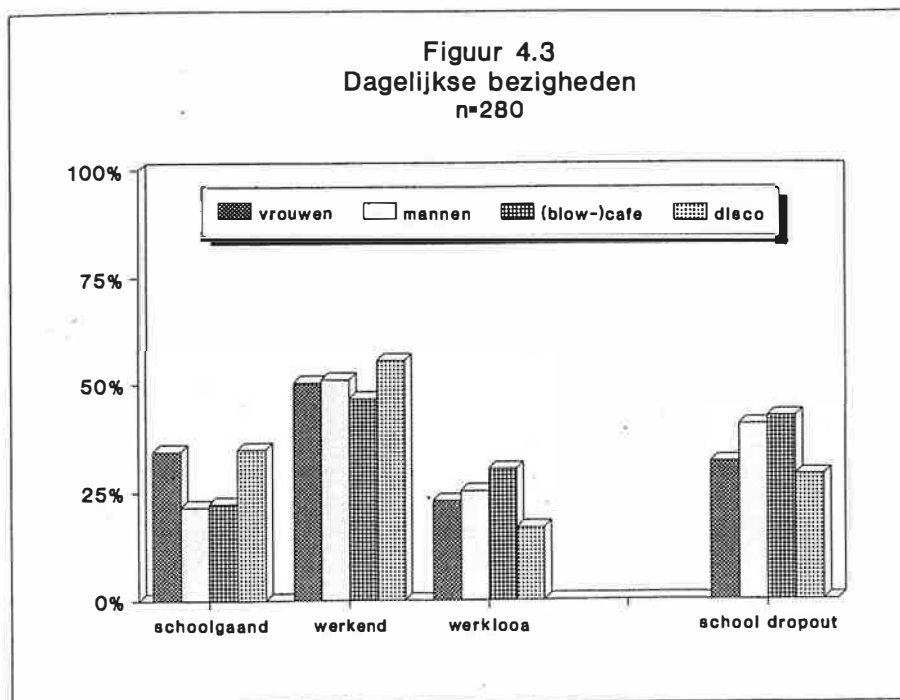
4.2 Some Demographic and Background Characteristics

As described in Chapter three (3.3 Selection process of Respondents), 280 visitors were approached using specific selection criteria. The final target group consisted of half women and half men. Eventually, the target group was also reasonably divided according to the nature of the locations: in (blow) cafes 154 (55%), and in discos 126 (45%) visitors were interviewed.

On average, the women are two years younger than the men: respectively 22 and 24.5 years. ⁶ More than two thirds of the visitors to the (blow) cafes and discos originated from the Netherlands (68%), the other visitors predominantly originated from Surinam (15%; mostly Creole) and had Turkish or Marocain (5%) backgrounds. It needs to be noted that there was a minority of women among the Turkish and Marocain respondents (See Figure 4.2).

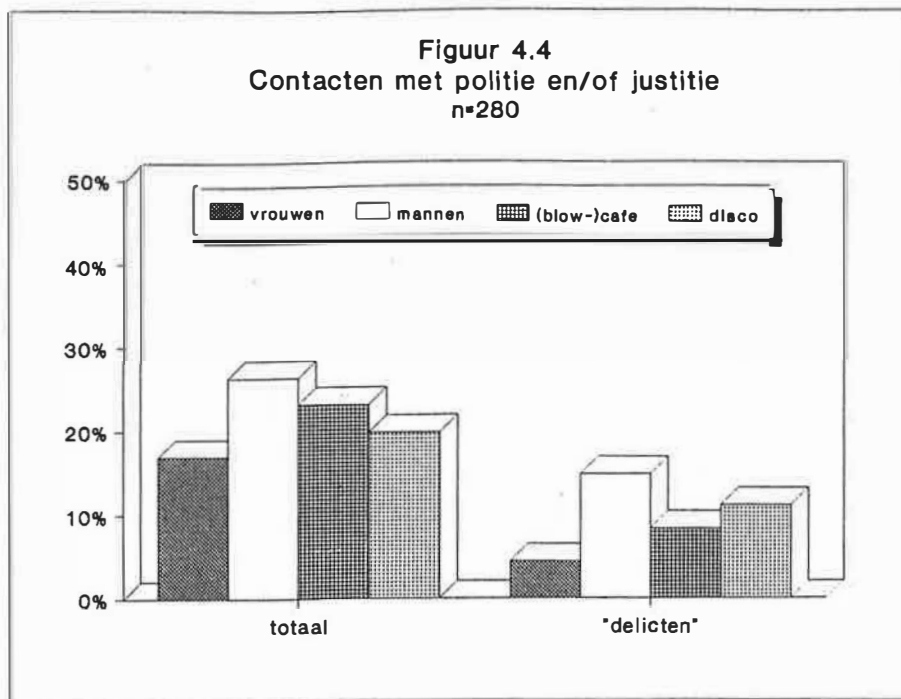
The living arrangements of the interviewed visitors reveal that approximately one third (31%) live with their parents or other family, one third co-habitat with a partner and/or children (30%) and a similar size group (34%) lives alone. A small number indicated that they live with "others", either in a group house, or change their living arrangements frequently. One in ten of the interviewees indicated that they did not have a permanent place to live. These interviewees tend to live in disused houses, move from one place to another, or live in a "controlled environment" (such as a hospital or prison/watch house). The number of interviewed visitors to (blow) cafes without regular permanent living arrangements (12%) was larger than the number of interviewed visitors to discos (6%). However, this difference is statistically not significant. ⁷

FIGURE 4.3
Daily Activities
(N=280)



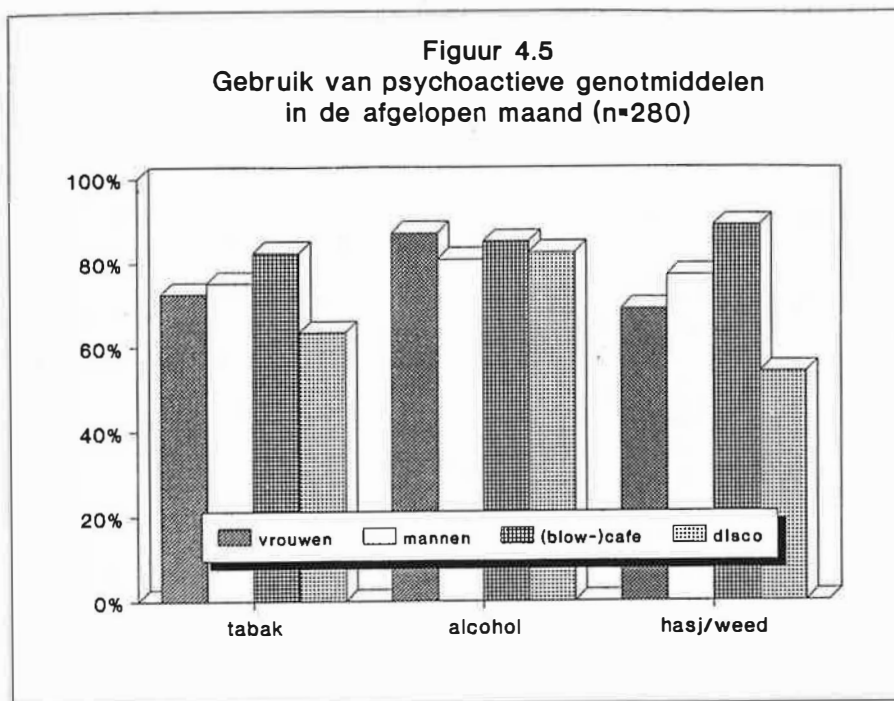
Female respondents were more likely to be still at school or students than male respondents (respectively: 34% and 22%). The visitors of discos were more likely school kids or students, than the visitors of (blow) cafes: respectively 35% and 22%.⁹ (See also Figure 4.3). Half the respondents (50%) were in paid jobs and the others (24%) were without work. The percentage of people without work was much higher among the visitors to (blow) cafes (30%), than among the visitors to the discos (17%).¹⁰ It follows, that half of the visitors receives an income from paid work (50%) and almost one third (30%) receives a Government welfare allowance. In addition, there is often a mention of student allowance (17%) and of "income from family, partner or friends" (pocket money: 17%). A small number (five female) visitors to the (blow) cafes and discos (1.8%) indicated that their income results from prostitution, and seven respondents - all except one are visitors to the (blow) cafes - indicated that an important part of their income results from dealing. The majority of the interviewees had finished, or was undertaking, a course at secondary or tertiary levels (20% lower technical education; 24% adult secondary education; and 25% tertiary vocational courses). More than one third of the respondents had finished without obtaining a diploma. This seems to happen more often among the visitors to the (blow) cafes (42%) than among the visitors to the discos (29%).¹¹ (See also figure 4.3).

FIGURE 4.4
Police and/or Legal Contacts
(N=280)



More than one in five of the interviewed visitors to the (blow) cafes and the discos indicate that (during the last twelve months before the interview) they have been in contact with the police and/or the legal system (22%). This was more prevalent among men (26%) than among women (17%), a difference which is (just) not significant.¹² The men (15%) have had significantly more contacts with the police and/or legal system than the women (4%) for offences related to stealing and violence, or for breaking the opium-law.¹³ (See also Figure 4.4).

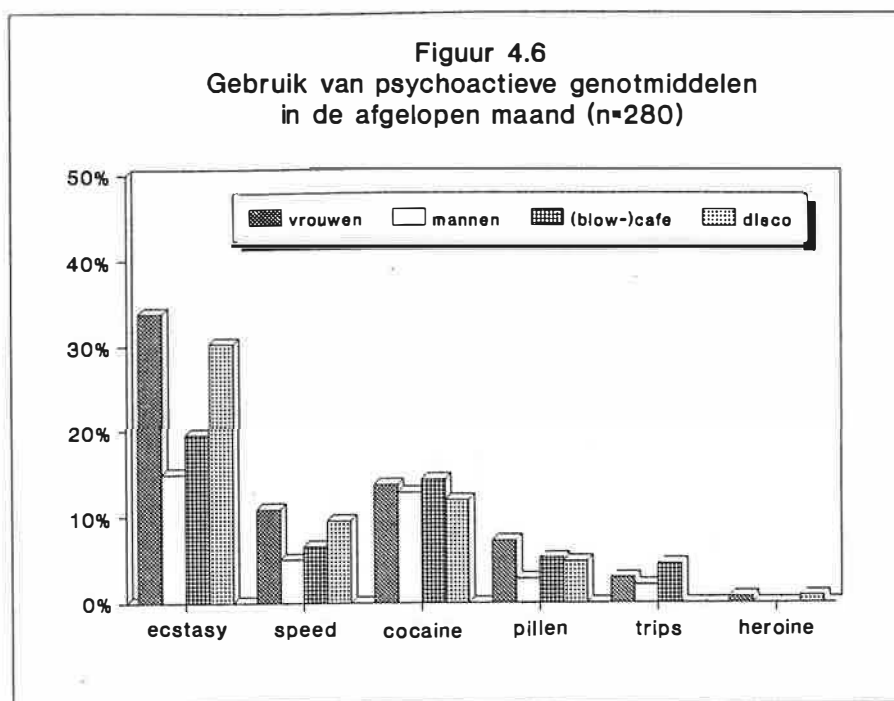
FIGURE 4.5
Use of Psycho-active Drugs in the Last Month
(N=280)



4.3 Leisure Time Activities

The night life of the interviewed visitors to the (blow) cafes and discos is marked by many activities happening outside the home. Less than one out of five respondents (18%) reported staying at home most evenings (five to seven evenings). Almost half of the male visitors to the different locations (47%) reported spending time, few (one or two) or no evenings, at home (this compares to 32% for the female visitors).¹² The majority of the respondents (67%) visits a (blow) cafe or coffee shop (hash cafe) weekly, or had at least once this month visited a disco, house party or a "rave"(70%). A less frequent pursued activity is going to the movies or the theatre: Half the female (51%) and slightly more than one third of the male (38%) respondents had visited a cinema or theatre once or more often in the month preceding the interview.¹⁵ In relation to playing sport no (significant) difference was noted between men and women. It appears that visitors to discos more often engage in sport than visitors to coffee shops (hash cafes), respectively: 63% and 46%.¹⁶

Figure 4.6
Use of Psycho-active Drugs
During the Last Month
(N=280)

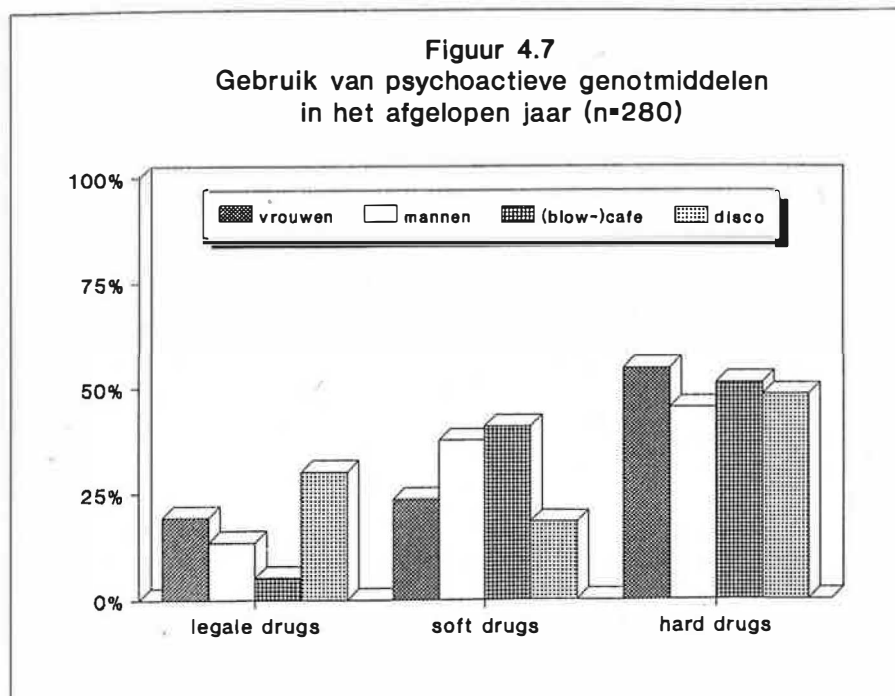


4.4 Use of Legal and Illegal Psycho-active Drugs

As can be seen in figure 4.5 the respondents have extensive experience with the use of legal and illegal psycho-active drugs. The majority of the interviewees uses ¹alcohol (84%) and/or tobacco (74%). It is worthy of note that the visitors to the discos use significant less tobacco (63%) than the visitors of the (blow) cafes (82%). ¹⁷ The use of cannabis is (understandably) higher among the visitors to the (blow) cafes (89%) than among the visitors to the discos (54%), ¹⁸ although even one out of ten visitors to the (blow) cafes reports not to have used cannabis. The drug ecstasy is more often used by the visitors to the discos (30%) than by the visitors to the (blow) cafes (19%), ¹⁹ and - something which is quite remarkable - more often by women (34%) than men (15%). ²⁰ (See also Figure 4.6). The fieldwork does not support this marked difference. Although, a certain number of respondents reported about the use of ecstasy by women and the effect that this is supposed to have:

...they don't give a damn, they're only interested in their dicks, and the women their cunts, they are all going up and down: Come on, it's weekend. ecstasy pills, hoopla: So that's going to be a good night." That is the first thing you hear. That's true. In every joint where I come, and I use ecstasy myself and I still use it, because I am not ashamed of it, because I like it and I have my regular guy at home and I do it at home, you know. I take my kicks at home, you know. But usually, if, as soon as I am out, in every women's loo, where I usually hang out for hours, because I really can stay there for hours, cause it's very nice there, and I always hear people say: "I am so hot, I am this". And that's all because of the ecstasy pill or a snuff of coke.
 [K female, 27 years, respondent from a (blow) cafe]

Figure 4.7
 Use of Psycho-active Drugs
 During the last twelve months



¹When the text uses the word "use" without "recent" it refers to use on one or more days during the month prior to the interview. When "recent use" is used it refers to: At least once during the last twelve months prior to the interview.

Additionally, a minority of the interviewees indicated to have used speed (8%), cocaine (13%), "pills" (15%) and trips (5%). Only visitors to the (blow) cafes reported that they had used these drugs during the thirty days prior to the interview.

As far as "recent" (during the last twelve months prior to the interview) use of psycho-active drugs is concerned, it appears that among the total group of respondents there are only three people (all visitors to discos) who have not used legal or illegal drugs. Recent use of tobacco only is limited to one out of six visitors to the discos (not among respondents in the (blow) cafes), while recent use of alcohol only is non-existent. In addition with regard to the use of legal drugs, it appears that almost one in three interviewees recently used cannabis (sometimes in combination with or at the same time other legal drugs). (See also Figure 4.7). Half the interviewees indicated that they have used one or more illegal drugs. In addition to ecstasy (36%), cocaine (26%) and speed (18%) were mentioned. (See Figure 4.6). Between men and women ²¹and between visitors to the (blow) cafes and discos ²² are small significant differences.

Finally, eight respondents (3%) indicated that they have injected drugs. Three indicated only incidental use (less than five times) more than one year ago. The other five respondents have more extensive experience with injecting drugs (more than 25 times), three of these had injected drugs recently, that is to say, during the last twelve months before the interview.

Although, experimenting with injecting drugs among the interviewees to the (blow) cafes and the discos is limited, which is supported by the field work during which only one person was found to use heroin regularly, the majority of the interviewees indicated to knowing one or more people who inject drugs. The women (50%) reported twice as often as the men (25%), that they knew injecting drug users. ²³ The percentage of the visitors to the (blow) cafes that know injecting drug users is higher than that of the visitors to discos (respectively: 46% and 28%). ²⁴ Visitors who know of other people who inject drugs indicated that most people they know have injected drugs recently (69 of 103 = 67%).

4.5 Sexual Contacts

Seventeen percent of the respondents indicated that they did not have sexual contact during the twelve months before the interview. (See Figure 4.8). The majority of the other interviewees (N=229) reported to only have sex with partners of the other sex (98%). Four respondents indicated to have bisexual contact and one respondent is homosexual. Almost half of the visitors to the (blow) cafes and discos (47%) indicated that they only have sex with their regular partner, and one quarter (25%) have sex with different partners. Almost one in ten interviewees (9%) indicated that they have sex with their regular partner as well as with other partners. Women as often as men reported to have sex with other partners. ²⁵ The visitors of the (blow) cafes (46%) reported more often than the visitors of the discos (38%) to have other partners, but the difference is not significant. ²⁶

Figure 4.8
Sexual Contact
(N=278)

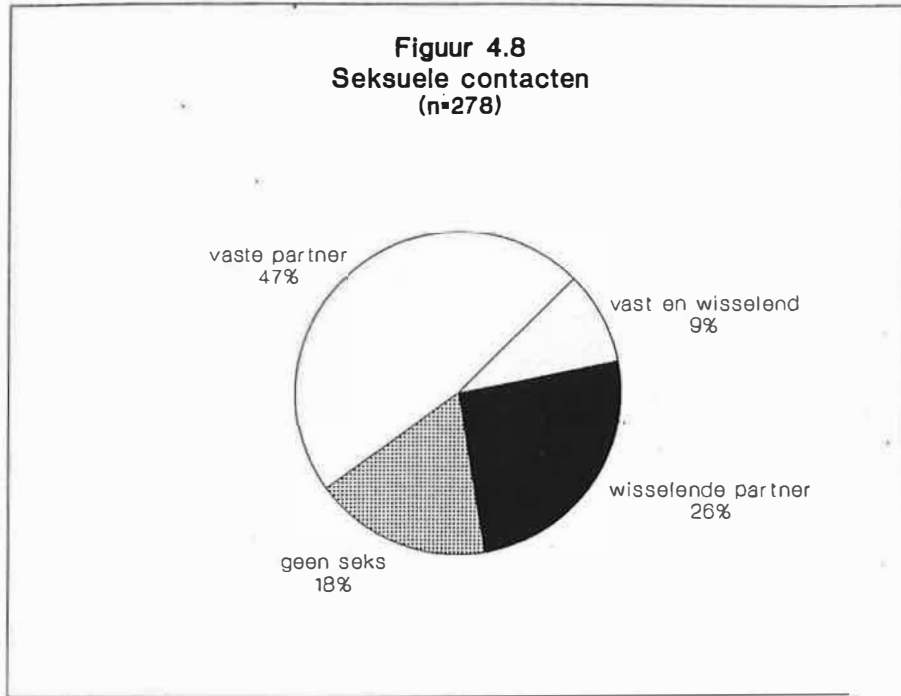
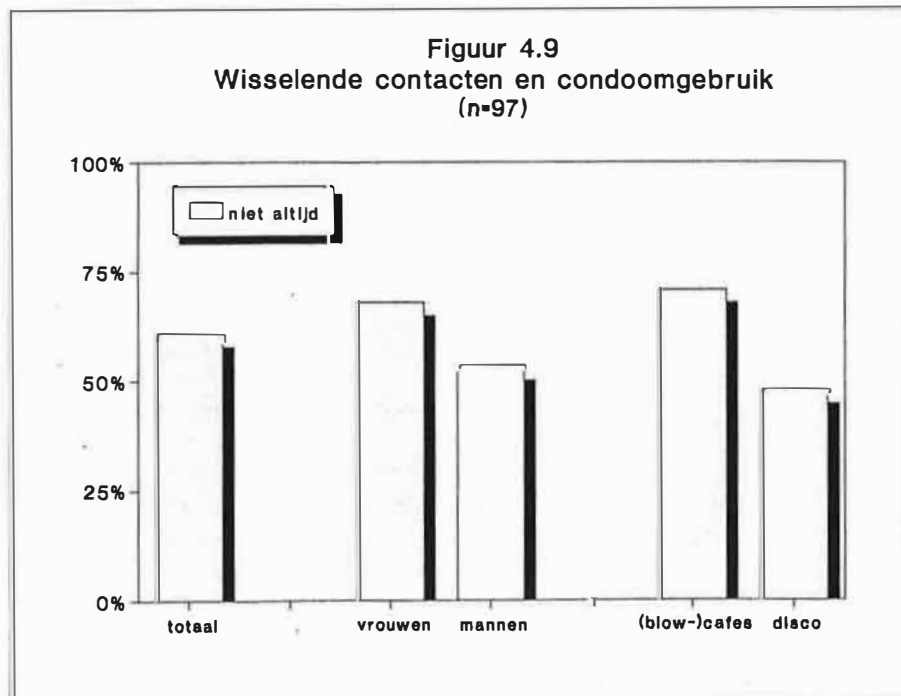


Figure 4.9
Other Sexual Contact including Condom Use
(N=97)



When a "careful" operational definition in relation to unsafe sexual behaviour¹ is mentioned, it appears that one quarter (26%) of the interviewees (N=229) takes risks in their sexual behaviour. In considering only the respondents with other partners, with or without a regular partner, (N=97), it appears that 61% of them does not always has safe sex. Additionally, it appears from Figure 4.9 that the majority of the visitors to the (blow) cafes who are having sex with different partners (71%) and half of the visitors to the discos with different partners (48%) do not always use a condom.²⁷ Between female and male interviewees this difference is smaller and not significant (respectively: 68% and 53%).²⁸

4.6 Summary

For the research a reasonable random sample was collected of visitors who frequented a selection of (blow) cafes and discos in which the campaign was conducted. From the results of the structured interviews it appeared that the majority of interviewees are without work and/or have prematurely finished their schooling. Next to legal drugs, such as alcohol and tobacco and illegal soft drugs (cannabis), half the interviewees use illegal hard drugs, namely ecstasy and to a lesser extent cocaine and other drugs. A few visitors also sometimes inject drugs and a large part of the interviewed visitors to (blow) cafes and discos know people who inject drugs. Approximately, one in six visitors to the (blow) cafes and discos have not had sexual contacts during the last twelve months. Almost half of the interviewees only have sex with a regular partner. In contrast, approximately, one third of the visitors has different partners and of those almost two thirds indicated that they do not always use a condom.

In summary, it would seem that the *convenience advertising* pilot campaign took place in locations of the entertainment circuit in Rotterdam, where you can find youth who satisfy the criteria of the target group. In the next chapters attention will be given to the reactions to the campaign by the visitors to the (blow) cafes and discos.

¹It concerns here, risk taking behaviour in relation to sexual contacts when a respondent has changing partners (with or without a regular partner) and not always uses a condom.

4.7 Notes

1. Korf; Blanken and Nabben, 1991
2. O'Beirne M, 1993
3. $\text{Ch}^2 = .8$; $p = .379$
4. $\text{Ch}^2 = 12.9$; $p = < .001$
5. $\text{Ch}^2 = 11.2$; $p = < .001$
6. T-value = 3.17; $p = .002$
7. $\text{Ch}^2 = 2.9$; $p = .088$
8. $\text{Ch}^2 = 5.7$; $p = .016$
9. $\text{Ch}^2 = 5.4$; $p = .020$
10. $\text{Ch}^2 = 6.9$; $p = .008$
11. $\text{Ch}^2 = 5.4$; $p = .019$
12. $\text{Ch}^2 = 3.5$; $p = .060$
13. $\text{Ch}^2 = 8.3$; $p = .003$
14. $\text{Ch}^2 = 5.7$; $p = .016$
15. $\text{Ch}^2 = 5.0$; $p = .078$
16. $\text{Ch}^2 = 20.3$; $p = < .001$
17. $\text{Ch}^2 = 12.9$; $p = < .001$
18. $\text{Ch}^2 = 42.8$; $p = < .001$
19. $\text{Ch}^2 = 4.2$; $p = .038$
20. $\text{Ch}^2 = 13.6$; $p = .001$
21. $\text{Ch}^2 = 2.4$; $p = .120$
22. $\text{Ch}^2 = 0.2$; $p = .630$
23. $\text{Ch}^2 = 18.8$; $p = < .001$
24. $\text{Ch}^2 = 9.5$; $p = .001$
25. $\text{Ch}^2 = 1.3$; $p = .225$
26. $\text{Ch}^2 = 1.2$; $p = .264$
27. $\text{Ch}^2 = 5.4$; $p = .019$
28. $\text{Ch}^2 = 2.2$; $p = .135$



Hoe kom je in de spotlight?

Aids. Zonder condoom ben je de lul.

Je kunt het aidsvirus krijgen door onveilige sex. Neuk daarom altijd met een condoom. Voor kinderen zijn speciale condooms nodig.

Condoomautomaten (bullen): Westkruiskade 11, Bergweg 4, Noordindienstraat 14, Schouwag 98, Vaerendampden 15,
Ambachtsplein 34, Kerstroosstraat 9, Groene Hilledijk 186, Spinozaweg 499

Anonieme informatie over aids: Aids-Infolijn: 06 022 22 20 (gratis, maandag t/m vrijdag van 14.00 tot 22.00 uur)

Hoe krijg je continuu 260 bpm?

Aids. Zonder condoom ben je de lul.

Je kunt het advies van krijgen door veilige sex. Denk daarom altijd aan een condoom. Voor specifieke informatie raadpleeg:
Condoomautomaten (buiten): Westkruisweg 11, Bergweg 4, Noordvlietstraat 14, Smeeweg 98, Saerdaatmarkt 15, Apollonvliet 16, Kerkhofstraat 17, Groot Huisdijk 124, Gennepweg 431
Aanvullende informatie over aids: Aidslijn 06 992 22 20 (gratis, maandag t/m vrijdag van 14.00 tot 22.00 uur)

Hoe raak je in één klap je schulden kwijt?

Aids. Zonder condoom ben je de lul.

Je kunt het advies van krijgen door veilige sex. Denk daarom altijd aan een condoom. Voor specifieke informatie raadpleeg:
Condoomautomaten (buiten): Westkruisweg 11, Bergweg 4, Noordvlietstraat 14, Smeeweg 98, Saerdaatmarkt 15, Apollonvliet 16, Kerkhofstraat 17, Groot Huisdijk 124, Gennepweg 431
Aanvullende informatie over aids: Aidslijn 06 992 22 20 (gratis, maandag t/m vrijdag van 14.00 tot 22.00 uur)

RECOGNITION AND VALUE OF THE *CONVENIENCE* ADVERTISING AIDS-PREVENTION CAMPAIGN

5

5.1 Recall of the *convenience advertising* messages

The visitors to the (blow) cafes more often spontaneously recalled one or more of the *convenience messages* than the visitors to the discos: respectively 82% and 60%.¹ They also recalled on average, more of the messages than the visitors to the discos: respectively 2.1 and 1.4 messages.² However, when the respondents were presented with the different *convenience* messages and asked which ones they had seen before (recognition), the differences between the two groups were smaller. Nevertheless, the visitors to the (blow) cafes recognised more often one or more of the messages than the visitors to the discos: respectively 91% and 77%; and respectively 3.3 versus 2.3 messages.^{3 4}

Of the messages recognised most frequently, the first message ("How can you get a bath every day?", abbreviated: Bath) and the third message ("How do you reach continuously 260 BPM? (beats per minute)", abbreviated BPM), are mentioned most often. Together with the second message ("How can you get rid of all your debts in one go?"), abbreviated Debts), these are the ones which are recognised most frequently. (See also Figure 5.1). Again, visitors to the (blow) cafes recall and recognise the messages more often than the visitors to the discos. It is interesting to note that there is only a small difference in the recall of the BPM - message between the respondents of the (blow) cafes and discos: respectively : 54% and 41%.⁵ This is understandable as the content of the message BPM (beats per minute) relates to the terminology of the house music. House music plays an essential role in almost all the discos where the *convenience advertising* AIDS-prevention messages are displayed, whereas this is only the case in a small number of the (blow) cafes.

It needs to be noted, that the relatively low percentage of recall of the Jackpot message may be related to the fact that this message was not displayed in all locations. This becomes apparent from the notes below, which are taken from the "Installation report *Convenience Advertising* pilot Project Rotterdam"¹. Some manager/owners did not want their business to be associated with (injecting) drug users:

Blowcafes P... and G...: The manager of these cafes would like to cooperate to the project. He insisted, however, that there could be no display of injection messages in either cafe. His reasons were: "No junkies come here", he was also worried about the association of soft drugs with hard drugs. (Installation report *Convenience Advertising Ltd.*, March 1994)

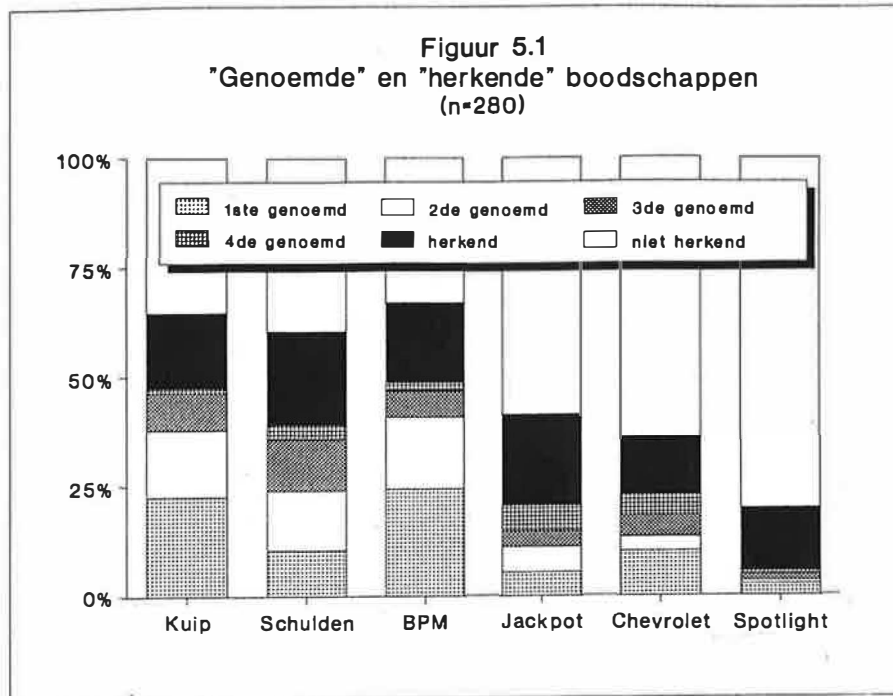
(Blow) cafe F...: The owner was very positive about the campaign ..., but he... did not find it appropriate to display a message about injecting in a soft drug environment. (Installation report *Convenience Advertising Ltd.*, March 1994)

(Blow) cafe B...: The manager of this location was very positive about the campaign ... but did not want a message about injecting because visitors could think, "that it is OK to inject in the toilets". (Installation report *Convenience Advertising Ltd.*, March 1994)

¹Installation Report of the NIAD/Mainline/Rutgers Stichting/ *Convenience Advertising* Pilot Project in Rotterdam. Amsterdam/Liverpool: *Convenience Advertising Ltd.*, March 1994

The last two posters, Spotlight and Chevrolet had not yet, at the time of the inquiry, been long enough in circulation to obtain reliable data on percentages of recall comparable to those of the other messages.

Figure 5.1
Recalled and recognised messages
(N=280)



5.2 Recognition of the tag line in the messages

As shown before, five of the six visitors to the (blow) cafes and discos have seen one or more of the *convenience* messages. Of the (234) respondents by far the greatest majority can instantly recall (86%) or recognise (97%) the tag line "AIDS, without a condom you're bloody dickhead". (See also Figure 5.2). The *convenience* poster which refers to the importance of safe drug use was recalled/recognised by less than half the respondents (41%). Of these 116 respondents the men more often than the women instantly recalled the tag line "AIDS, without a clean fit, you're a bloody idiot": respectively 50% and 24%.⁶ This difference between male and female visitors disappeared when visitors were asked to only recognise this tag line. In total, three quarter of the respondents (76%) who had seen this message, recognised the tag line " AIDS, without a clean fit

you're a bloody idiot". The recognition of the "clean fit" tag line occurred considerably less often than the recognition of the "condom" tag line. From the results of the ethnographic fieldwork and the interviews it became evident that, when the Jackpot message was in circulation, some of the visitors, especially from the (blow) cafes, did no longer absorb the tag line of the posters. The focus was only on the picture with the accompanying text.

K (fem.): And this: "How do you win the Jackpot?" You know, that is a bit more sarcastic, yes they all are a bit sarcastic, but, "How do you win the Jackpot?" As if you should be pleased about that, you know.

CF: Have you seen this? that this one is different too?..... The message of the Jackpot which is on that one?

F (fem.):No.

R (male): Yes, these have to do with injections/needles. So, if you take a clean needle and not a used one of your mate who just sat next to you.

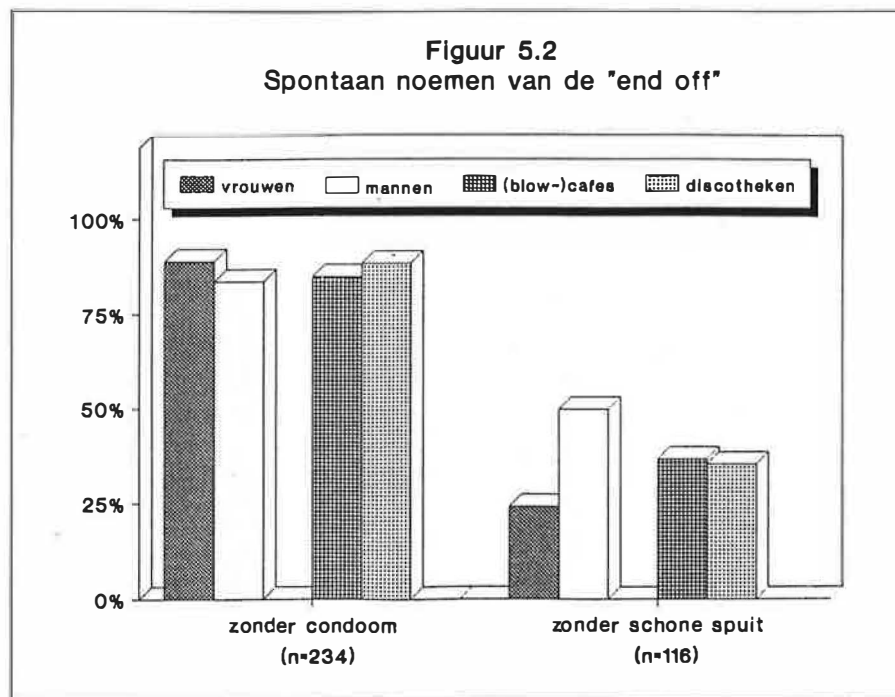
K (fem.): Oh yes, I see! Get going.

R (male): And winning the Jackpot, you know: that you just shot: Bang!

K (fem.): Yes, but that is also, that happens also if you continuously sleep with different guys. Than you get the Jackpot too.

The so-called "extra" information, which is printed underneath the *convenience* posters, as can be seen in Figure 5.3, was more often read by visitors to the (blow) cafes than by visitors to the discos (respectively 55% and 40 %).

Figure 5.2
Spontaneous recall of the tag line



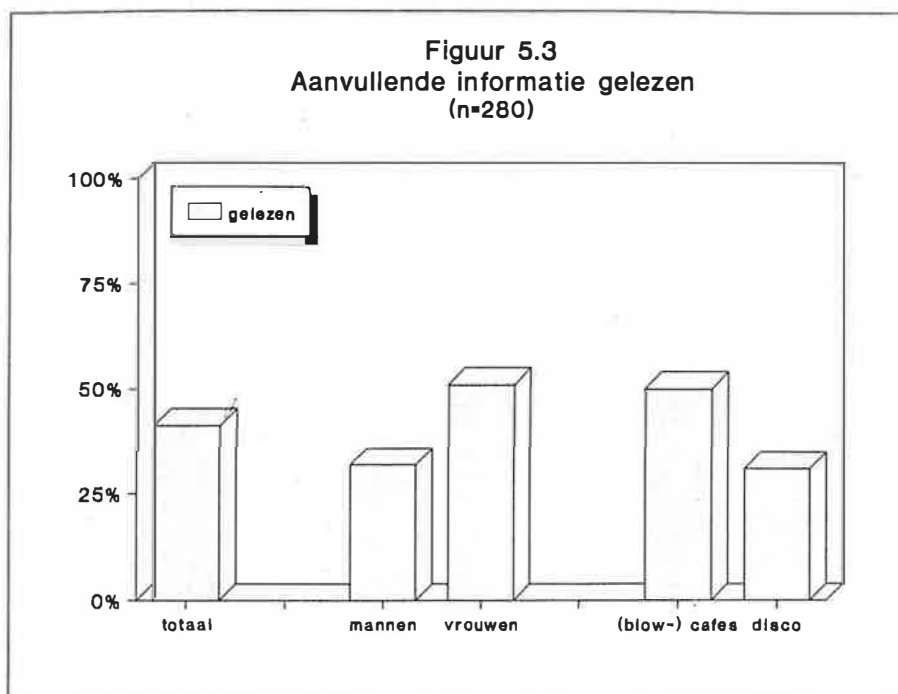
The results of the ethnographic fieldwork demonstrate that some visitors to the (blow) cafes and the discos had not read the extra information, because they had not been able to read the fine print while being intoxicated:

No, I haven't read those small letters, I could not have read them then (laughs)
[P (male, 21 years, respondent in a disco)]

In other talks people mentioned, that they thought the small print would tell them who the makers of the campaign were. This becomes apparent from the response to the question: "The small print, did you read that?"

No, that is not very clear, you would not even read that. You just think: Oh they are the makers of that picture.
[C (female), respondent from a (blow) cafe]

Figure 5.3
Reading of Extra information
(N=280)



The following analysis is restricted to the 116 respondents who indicated to have read the extra information (49% of the respondents had at least read one message). It needs to be mentioned, that the majority of the respondents knew that the AIDS virus is transmitted through "unsafe" sex, and that people should therefore use condoms (81%), while even more people (93%) recognised this fact. Almost two third of the visitors who recognised the *convenience* campaign and who had read the extra information, could report that the extra information referred to a number of "public" condom vending machines (60%), while 84% of the respondents recognised the extra information. Lastly, one out of three respondents could tell that the extra information refers to the AIDS-info line (35%), which was recognised by two third of the visitors (70%).

Of the total visitors group, less than half (41%) recognised the "Jackpot", and of these 116 people, approximately two third (62%) had read the extra information. We are talking here about 72 people, who are predominantly visitors to the (blow) cafes (65%). Within this group, the men rather than the women could report that the AIDS virus is transmitted through "unsafe" injecting⁸, and that anonymous information can be obtained from Odysse/HADON.⁹

5.3 The Value of the *convenience advertising* Campaign

In relation to valuing the *convenience advertising* campaign visitors to the establishments were asked how¹:

- a "confrontational" they found the location of the posters (in the toilets);
- b shocking (course or tough) they found the messages of the campaign;
- c clear (understanding) they found the messages on the posters;
- d much new information the messages contained for them;
- e relevant the messages were for them.

One of the two new elements in this *convenience advertising* AIDS-prevention campaign is the medium through which the messages were broadcasted to the target group: The placement of the messages in the amenities of (semi) public buildings, in this case (blow) cafes and discos. It appeared that more than half the visitors of the (blow) cafes and the discos (54%), found the way in which the campaign was conducted (presenting them unexpectedly with the *convenience advertising* AIDS-prevention message) confrontational. However, this did not mean that they rejected the message. This becomes apparent by the high percentage of recognised messages and their content and from the reactions of the visitors to the (blow) cafes and discos, which could be recorded during the ethnographic fieldwork:

I don't think that many people pay much attention, that's what I think. (). Yes, you do look at them, because it does register, really. But I also think, that many people, towards the end of the evening may just have forgotten it again. It is superficial. It draws your attention briefly, but after that it is gone again. [H (female), 20 years, respondent in a (blow) cafe]

If you are an evening in < the disco >, let's talk about that, you are quite relaxed for a moment on the toilet, that's really when you have some time to yourself. From that point, it's the perfect place. They shouldn't hang it in front of the stage, cause that would be the last thing I'll look at then. As far as that, it's a good place. I could not think of another place where you could hang it. It really is a toilet poster. Just like a toilet-calender, a year calender, those also hang in the toilet. (). Those are the things you hang in the toilet where you look at them briefly and you start to think about them.

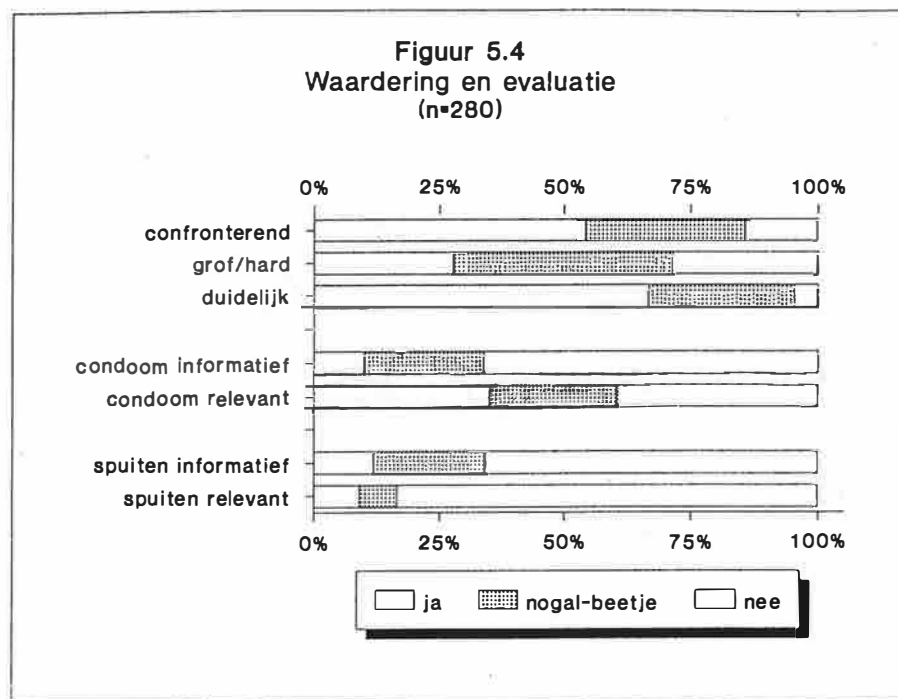
¹Indicate on a point scale of 4 ("no"; "a little"; "rather"; "yes")

It really is the best place for this poster. [P (male), 21 years, respondent in a disco]

It was often difficult to engage the visitors to the establishments in Rotterdam for an extensive reaction to the campaign, as can be deduced from the following response to the question, "What do you think about displaying them in the toilet?"

Yes, well. What do I think about it? People should display in the toilet what they want. I, it's useful, it's just useful, what else can I say? [J (male), 19 years respondent from a (blow) cafe]

Figure 5.4
Appreciation and Evaluation
(N=280)



The second new element in this pilot campaign is the format which was chosen for the content of the AIDS-prevention message. In contrast to the approaches in many other campaigns, a choice was made for a hard hitting, more confrontational approach, in some ways comparable to the SIRE-campaigns which had been organised to prevent the irresponsible use of fireworks. The

extent to which the respondents valued the content of the campaign as shocking (coarse/crude or tough) varied greatly, as is reflected in Figure 5.4 and in the following quotes:

If you see them for the first time, then you think about them. Eh, wait. Then you realise all of a sudden what it means: Really a sarcastic or cynical message and rather crude, that's what I also find. (). The whole poster associates with AIDS, the text as well as the picture, but I can imagine that people are really shocked by these pictures, for instance. But I find it the worst aspect of society nowadays, that if you want to show people something, this can only happen in a confrontational way and that a soft approach does not work any more. It's only getting harder, short tough messages with shocking pictures, and that - so it seems - is "in". And I really mean that. In one way I can see the need, because that is how the world is nowadays. I mean: Half measures don't work any more. On the other hand I really feel: I don't care about things so much any more. When I walk outside, I see all these screaming texts coming at me. And now this. Now you get confronted with this when you go to the toilet. [A (male), 27 years, respondent in a (blow) cafe]

They can become tougher, as far as I'm concerned. According to me you should point this out to people more often. If you want, say, if you want to have a really tough campaign, then you can use text that really hit home the message, according to me. That's what you find in England, then you really get ..., those are really coarse, but those do appeal to you. [C (female), 23 years, respondent in a (blow) cafe]

However, it appears that the shock people experienced after reading the prevention message did not result in a rejection of the content.

And if you see it, just like that it's quite a shock. Sad. The whole thing is sad. And if you are forced to see the real facts, just like this on a picture, then you think: Ah, yes, you should really be very careful, of course. These are very explicit, these are, if you think about it. that's what I think. [H (female), 20 years, respondent in a (blow) cafe]

Next is being asked how clear and intelligible the messages were. Male respondents more often than female respondents expressed that the messages were clear and intelligible: respectively 74% and 60%.¹⁰ In part this difference could be explained by the fact that some female respondents experience difficulty with the BPM-message.

... But these are tough, yes, I find them real tough. But no, this one I don't understand: "How do you get 260....?" You have to understand that. [K (female), 27 years, respondent in a (blow) cafe]

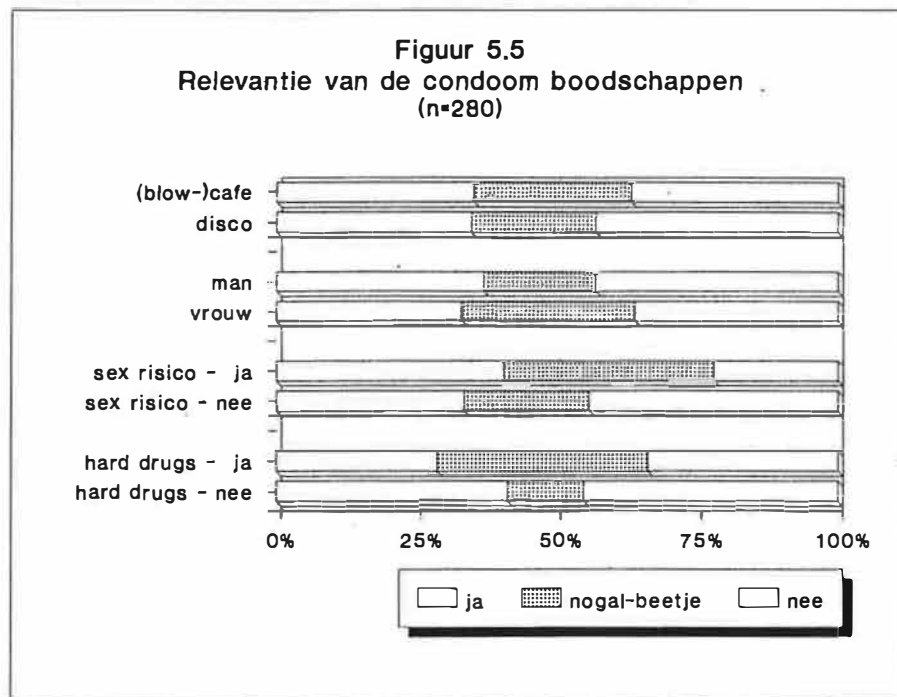
It appears that both, the messages which pointed out safe sex and the messages which pointed out safe use contained little, or no new information for most of the respondents to the (blow) cafes and the discos.¹ Male respondents more often than female respondents indicated that the condom message did contain new information for them: respectively 17% and 3%.¹¹ A comparable result is obtained from the clean fit message, which also contained more often new information for male rather than for female respondents: respectively 21% and 3%.¹²

With regards to the relevance of the condom messages (See Figure 5.5), more than one third of the interviewees (35%) indicated that they found the message relevant. There is no difference between female and male respondents, nor between visitors to the (blow) cafes and the discos. There is a significant relation between the condom message and correspondents having safe or unsafe sex. This means that respondents, who have different sexual contacts (with or without a regular partner) and who do not always use a condom, evaluate the *convenience advertising* message as more relevant, than interviewees who do not take risk during sexual contacts: respectively 1.7 and 1.2 (using a point scale of four, ranging from "no"; "a little"; "rather" to "yes").¹³

¹This is no surprise given the objective of this pilot *convenience advertising* AIDS-prevention campaign: "The pilot is focused on acting as a "reminder" for the target group. It is not to disseminate information, but to highlight safe behaviour..." (Trautmann F, December 1993: pp 4)

Now, eh, I know, it puts a little bit the cat among the pigeons, eh. People are sometimes totally euphoric from somebody and want to go to bed with that person. And if I am chatting up a girl somewhere, not that this happens very often, but, then you see that thing and you think, "Oh yes, use a condom, well better not have a one night stand." Yes, it does something, it does influence you: "Yes, and then there is also AIDS" and then you give the game away. Yes, I give it away. But I mean, if you really are smitten, and you think tonight is the night and you see the thing displayed, then you think: Oh yes, I'll have to get some condoms, or so." [J (male) 19 years respondent in a (blow) cafe]

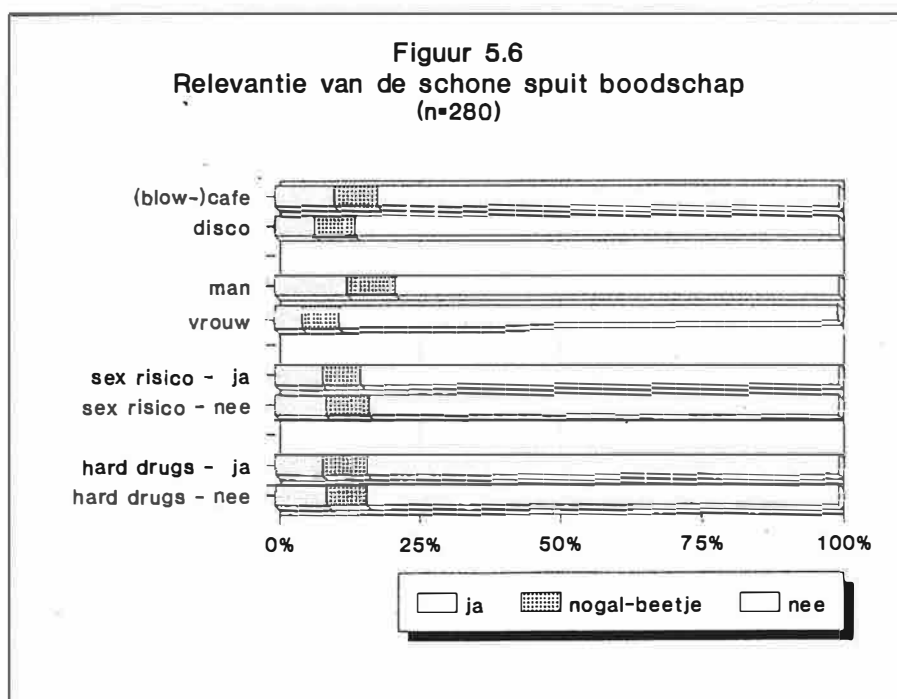
Figure 5.5
Relevance of the Condom Message
(N=280)



In contrast, the clean needle message (See Figure 5.6) was not considered very relevant by many respondents (6%).

CF: *Eh, that's a pity, nobody sees that, really. Have a good look at that.*
 J (M): *AIDS?*
 CF: *Yes, have a look over here.*
 J (M): *Without a clean needle you're a bloody idiot. This?*
 CF: *Yes, that is a different one than this one!*
 J (M): *Yes, yes, And the others? Those are all without a condom?*
 CF: *What do you think about them?*
 J (M): *Well, if you inject, then you really are not very responsible. So, I don't know. I think, you are not going to take too much notice. But I can't really say very much about it, I don't inject*
 CF: *No, but what do you think about displaying those?*
 J (M): *What do I think? Yes, it is functional. I think that if someone reads it, oh, I don't know. If you are in the toilet of the coffee shop (hash) cafe and you want to inject, or so, and you are there with an unclean needle and you see that? I don't know if you are really going to look at that? Would junkies really look at that? They live totally in their own world? Where is my vein? I think that they won't see it, really. But yes But, should you ever inject, then you know now that if you don't use a clean needle, then that is wrong.*
 CF: *But did you know that already?*
 J (M): *Yes, yes.*

Figure 5.6
 Relevance of Clean Needles
 (N = 280)



5.4 Notes

1. $\chi^2 = 17.0$; $p < .001$
2. T - value = 3.6; $p < .001$
3. $\chi^2 = 10.3$; $p = .001$
4. T - value = 4.6; $p < .001$
5. $\chi^2 = 4.8$; $p < .027$
6. $\chi^2 = 8.3$; $p = .003$
7. $\chi^2 = 5.0$; $p = .025$
8. $\chi^2 = 28.8$; $p < .001$
9. $\chi^2 = 7.0$; $p = .008$
10. $\chi^2 = 12.9$; $p = .004$
11. $\chi^2 = 15.5$; $p = .001$
12. $\chi^2 = 9.9$; $p = .018$
13. F - ratio = 4.2; $p = .040$

FACTUAL RESULTS

6

This chapter will elaborate firstly, on what in fact happened to the messages in the locations, and secondly, on what the effects of the *convenience advertising* campaign were in relation to the sales of condoms and the telephone enquiries to obtain information about drugs and clean needles.

6.1 Damage to and the Loss of the Messages

After installation of the A4 posters, every two weeks an employee of *Convenience Advertising Ltd.* visited the locations which were involved in the campaign.¹ A prior determined rotation scheme ensured that old messages are replaced by new ones. At the same time of the maintenance visit it is noted whether the messages are damaged, have vanished or need replacing. Additionally, it is noted whether graffiti has been added around the messages. The results of the visits were recorded in so-called maintenance reports.^{2 3 4}

In the installation- and first maintenance report of *Convenience Advertising Ltd.* the period from the second half of February until mid April is reported on. During this period the first messages ("Bath" and "Debts") were installed. It became evident that, during the period of the first four maintenance visits, respectively 8%, 11%, 10% and 6% of the messages had been damaged or had disappeared. It became clear that, twice as many messages in the male toilets were in need of a change than in the female toilets.²

Based on reports, relating to the next nine maintenance visits, which are written during the period of the beginning of May until the beginning of September (inclusive) 1994,^{3 4} the following part of the chapter will deal more specifically with the damage to and the disappearance of the messages (See Figure 6.1). The "Debts" message was most often damaged or seemed to just disappear (20%). The replacement percentage of the other messages was around 10%. The total percentage of the (in total more than two thousand) messages which needed replacing was just over 11%. From Figure 6.1, it is evident that the messages in the male toilets disappeared three times more likely (17.5%) than in the female toilets (5.8%). The greatest difference occurred with the "Debts" messages, of which 33% in the men's toilets and 8% in the women's toilets were damaged or disappeared. Lastly, it became evident that there was no difference in the percentage of damage or disappearance of the messages in the (blow) cafes or the discos (both more than 11%).

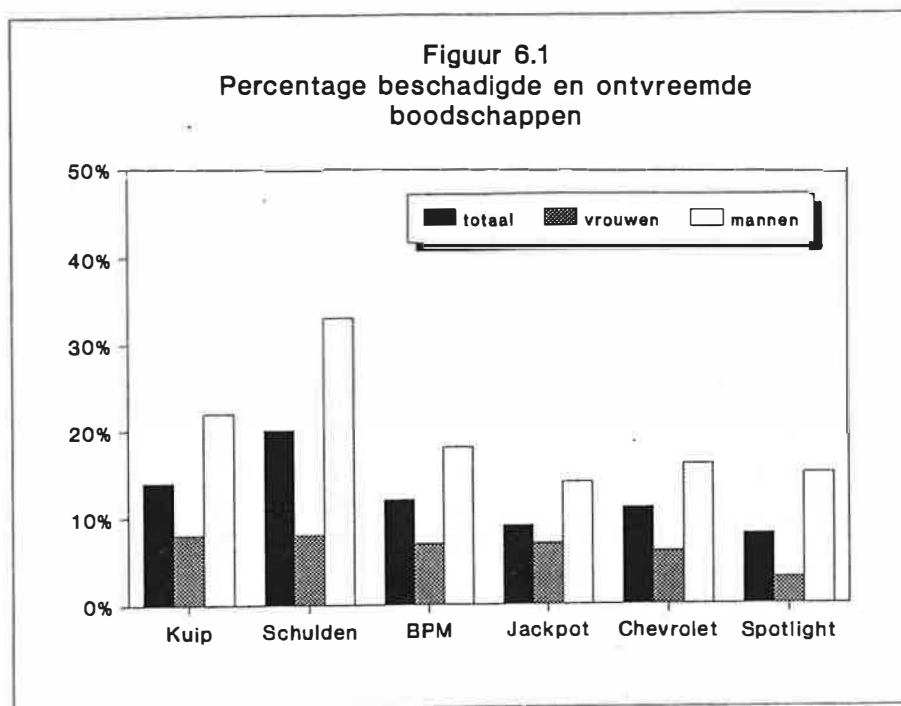
6.2 Condom Vending Machines and Sales

At the start of the *convenience advertising* campaign condom vending machines are present in a total of seven of the locations. Over time, stimulated by the AIDS-prevention campaign, eleven other locations also installed condom vending machines. The total number locations with condom vending machines therefore stands at 18.

(blow) cafe S...: The owner is very pleased with the campaign. He himself went to buy one and... the vending machines are installed [maintenance visit Nr. 1]²

(Blow) cafe S...; In the mean time in his location condom sales are; one packet of condoms in the women's toilet and three packets in the men's toilet. [maintenance visit Nr. 4]²

Figure 6.1
Percentages of Damaged or Lost Messages



Few exact details are known about the number of condoms sold in the locations before the start of the campaign. From the maintenance reports of *Convenience Advertising Ltd.* it becomes evident that sales differ between locations, but sales also vary within locations.

(Blow) cafe H...: In the mean time they have installed a condom vending machine, but the sales are disappointing. The owner intends to return it shortly. The condom vending machine hangs in the cafe itself and the sale is, after two weeks, two packets per week. [Maintenance visit Nr. 4]²

(Blow) cafe H...: The condom vending machine is still there, despite the owner's threat, that it should go because there have not been any sales. [Maintenance visit Nr. 6]²

In a number of (blow) cafes and discos, condoms are sold from the bar or from the toilet/wardrobe lady. This becomes evident from the following field notes:

Asked for reaction by visitors to the campaign, the toilet/wardrobe lady says: "They read it, but they don't talk about it. They never say very much any way" The wardrobe lady does acknowledge, however, that there is much talk about the posters. "There is also an increase in demand for condoms", she says, "especially by the boys". The boys buy a packet of cigarettes and sweets and then also ask for a condom. The condom is put away between the cigarettes and the sweets. Per month, she sells over the counter approximately 12 packets of condoms. [Field note: 26 august 1994; 24.00 - 04.00 am; Disco]

I have gone to the toilet/wardrobe lady to inquire about the reactions to the posters. She told me that this campaign should really go ahead: The reactions were very positive and her sales in condoms had considerably increased, by more than one and a half. Sometimes the vending machine was out of action, she therefore always kept some loose ones, so that the condom sales could continue. [Field note; 15 July 1994; 24.00 - 01.30 am; disco]

On the five posters which refer to safe sex, among other things, nine public condom vending machines are referred to. It has not been possible however to obtain reliable data about the amount of sales from these vending machines during the periods, before, during and after the *convenience advertising* campaign.⁵

6.3 Telephone Enquiries in Relation to Drugs and Clean Needles

Part of the Jackpot message, which relates to safe use, refers to HADON/Odyssee (a Rotterdam drug aid agency) to obtain information about drugs and clean needles. During the campaign HADON did not receive additional telephone enquiries from people indicating that they contacted them as a result of their knowledge of the *convenience advertising* message. In fact, there had not been a change in the number of telephone contacts, either in the period before, during and/or after the campaign.⁶

6.4 Notes

1. Installation report of the NIAD/ Mainline/ Rutgers Stichting/ *Convenience Advertising* Pilot Project in Rotterdam, Amsterdam/ Liverpool: *Convenience Advertising Ltd.*, March 1994.
2. Maintenance report of the NIAD/ Mainline/ Rutgers Stichting/ *Convenience Advertising* Pilot Project in Rotterdam, Amsterdam/Liverpool: *Convenience Advertising Ltd.*, March 1994.
3. 2nd Maintenance report of the NIAD/ Mainline/ Rutgers Stichting/ *Convenience Advertising* Pilot Project in Rotterdam, Amsterdam/Liverpool: *Convenience Advertising Ltd.*, July 1994.
4. 3rd Report of NIAD/ Mainline/ Rutgers Stichting/ *Convenience Advertising* Pilot Project in Rotterdam, Amsterdam/Liverpool: *Convenience Advertising Ltd.*, September 1994.
5. Mrs Y. van der Sluis, Rutgers Stichting, personal comment, 20 March 1995.
6. Dr J. Kagel and Dr O. Doosje, HADON/Odyssee, personal comment, 26 October 1994.

RISK TAKING YOUTH AND CONVENIENCE ADVERTISING 7

It would seem that in the (blow) cafes and discos, which were selected for the *convenience advertising* AIDS-prevention campaign in Rotterdam, a clear differentiation can be found between different sub-groups of visitors. It is not intended in this chapter to divide the going out (the "raging") population of Rotterdam into a small number of sub-groups on the basis of the collected data, which is after all based on observations, conversations, interviews and the experiential knowledge of the community field worker. After all, the diversity of cultures, sub-cultures and sub-sub-cultures is immensely complex. Nevertheless, there appears to be a kind of three fold division among the visitors of the different locations, which is predominantly related to their appreciation of the *convenience advertising* AIDS-prevention campaign. Resulting from this perceived three fold division an attempt is made in this chapter to briefly type cast three sub-groups of visitors which are in most aspects heterogeneous, but which have also become somewhat differential during the fieldwork. Nothing can be said about the size of the sub-groups, nor that the divisions are mutually exclusive.

7.1 The "Blowing" and Spiritual People

This first group, of mostly (blow) cafe visitors, varies in age from approximately 18 to 26 years. The men/women ratio is about the same. Educational levels in this group seem to be, overall, slightly higher than those in the other groups. Many have attended secondary or further education in courses like the Social Sciences, Fine Art, Graphics, some have attended the Conservatory. Less than half of this group works, if they do it is mostly in graphics or in the social services area. Some have finished their studies in the fine arts or music. For a number of people not to work is their preferred option. They give priority to self-development and try to expand their creative skills. A number of these people have resigned from positions in well established firms to focus more on their self-development and self-actualisation. A large part of this group moves (on the periphery) in the music world. Music, both making it and listening to it, plays an important role in their life.

To expand their self-knowledge and to engage in the more spiritual parts of life is of great importance to the visitors of the (blow) cafes. The use of cannabis (and other hallucinogen drugs) is facilitating their process of introspection. The life and the person her/himself is extensively being looked at and analysed.

J..., a 19 year old guy, who was seen in a (blow) cafe, responded to the question "When you are going to school, do you smoke a joint, before you go?" in the following way:

No. Before yes, but I noticed that I, if I had maths subjects before, I couldn't do these. I saw all these numbers go like this. But now I don't take maths anymore, because I am not very good at maths anyway. So, now I really could. I find it in history really nice, but I just don't do it anymore, I've had enough of it really. You attend class with these half open eyes. I rather keep it for when I am playing my guitar at night. Or when I am writing something, then it can help me to get another perspective, to do the things I am doing. [J (male) 19 years, (blow) cafe]

Often drug use combines with specific mood changes like depressions, fears, or hallucinations, which could, or could not, be the result of the psycho-active drugs.

Most people in this group have taken note of the posters and the messages and have thought about them. The message and the campaign are in general appreciated by them. Even so, people within this group regularly have sex without a condom. Sex being an activity you do not do with everybody. It is generally accepted that sexual partners are chosen with care:

You do get confronted with AIDS. I mean, I think, Aids itself, is a good disease against the world population and so. But, yes, I think it's better to avoid it. How can I say. I don't use a condom when I have sex, because I don't like it, I really don't like it at all. And, now I only have it with some one I really know very well. After you have had a relationship with that person for a few months. It is just safer. Anyway, if someone is on the pill and you use a condom and then the relationship is not working out, then you have sex again without one. [J..., 19 years, male, (blow) cafe]

7.2 Weekend "Ragers" with a Feeling of Responsibility

The second group refers especially to people, who have one or more responsible tasks to do in life and who like to go out on the town in Rotterdam in the weekend. They think it's very important that you get out of the house on the weekend. Their age range lies, like that of the first group, approximately between 18 - 26 years. Men seem to be a little more prevalent in this group than women (respectively approximately 60% and 40%). Their education levels range from lower technical education to secondary adult education (HAVO or MAVO). The men often work in offices, in the building trade, in shops, or in the harbour of Rotterdam. The women almost all work in an office, in a shop, at a hairdresser, etc.. Most of them work full time. Through the week they seldom "move" among the party goers in the (blow) cafes and discos, because every weekday morning they need to feel healthy and especially, they need to get up early. In the weekends however they plunge into the night life to let off steam.

To achieve this they consume vast quantities of psycho-active drugs, among these alcohol, cannabis and ecstasy, and also cocaine and speed. The kicks, the rush, the euphoria that they get from the drugs is most important. They remain conscious of their daily responsibilities, although these are not always considered in their behaviour. In general, it can be said that their drug use is under control, although that does not mean that no excessive behaviour occurs. The self control seems to lie more in their choice of times, but not in the amount that will be consumed on those days. This becomes apparent from the interview with P.. (21 years, male respondent in a disco):

- CF: *When you go raging, are you staying away the whole weekend, or are you just going for the night?*
P(M): *On Saturday I always go out. It could be as late as eight, but usually not later. I can't sleep then anymore, you can understand that, so you go somewhere, just somewhere, or at some one's house. sometimes at home, but that is not so good.*
- CF: *And what do you use then? Ecstasy?*
P(M): *Yes almost always.*
- CF: *But you told me, there were times when you were raging every weekend?*
P(M): *Yes, () and I stopped liking it then. After you came home, and you had two or three pills it made you think Was it really all that much fun? You are so far gone that you really can't make a lot of contacts. That resulted in a bit of an depression during the week. Now I am a little bit more conscious of how I use them. Let's say. It's nice but with moderation. I have to say though, I don't like it that much, but without ecstasy I don't like raging. I have much less fun then. A pill just takes away your inhibitions, that is just nice. All week you live according to the rules and it's nice when they disappears for a little while. A moment of bliss. What happens in the long run? I think about that sometimes, but then I think: It won't be all that bad. And then, when I go out I'll use a few blows as well, I do that always. Before and after. Otherwise I can't sleep. just to quieten down a bit. ().*

CF: You are still at school. Are you always attending?
P(M): Yes I have a feeling of responsibility. The same for my work, if I am late, I really feel shittim. Then I ride my bike bloody fast to my holiday job. I am always on time, you know. I just feel so responsible. Just as well. (). Yes if I really do it a lot (use ecstasy), like I did a year ago, then Mondays are real tough and Tuesday too, but I still go. I have never stayed home. I have something of: You know it and you are going to do it. Like the slogan: A man at night, a men the next morning. something like that.

The sexual contacts of this group of 'ragers' are usually safe and they often have a regular partner. If they engage in changing sexual contacts their feeling of responsibility is usually so great, that they will use a condom - but not always.

This group also has noted the message and the campaign. For these youth the message is a *reminder* in relation to their own behaviour. The feeling of responsibility is great among this group, but it isn't full proof.

At a certain moment I asked them (two young guys) about the poster. They had both different opinions. One thought that the posters were completely useless, while the other thought they were very useful. The guy who said they are useless, thinks that nobody will bother about them: "Everybody has sex without one anyway". The other agreed to this, but thinks that the posters are useful because someone may be sitting on the fence: "People who think about it, will get such a shock when they read the poster, that they will use a condom the next time". [Field note: 17 August 1994; 14:00 PM- 19:00 PM; (blow) cafe]

7.3 The Uncaring "Ragers"

The third group of "ragers" who hit the Rotterdam night scene, is the youngest, in comparison with the other two groups. Their ages vary approximately from 16 to 23 years. The men are clearly in the majority in this group in comparison with the women (respectively approximately 75% and 25%). Education levels in this group are by far the lowest; primary school and unfinished technical education. Almost none of them work, because "*there is no work*". Considering their schooling and work experience, this group may have difficulty finding work. Some in this group indicate that they don't feel like "*working for f100,00 (Aus \$80,00) more than the dole*".

We are talking here, predominantly, about visitors to (blow) cafes and discos, who neither work nor go to school and for whom *sex and drugs and rock and roll* form the most important part of their nights and their days. This group maintains an indifferent attitude to the possible consequences of drug use and unsafe sex. A lot of alcohol is being consumed and there is a lot of "blowing". With the exception of heroin, "all" available drugs are used. In this group, to have status and/or to be tough and interesting one has to use as many and as often psycho-active drugs as possible.

The use of condoms in sexual encounters is a totally unimportant issue for them. Most in the group are convinced that they don't run the risk of transmission with HIV or any other transmittable diseases. Their knowledge about HIV/AIDS and its transmission is minimal and is mostly based on faulty thinking, which becomes evident from a conversation between two respondents from a (blow) cafe (K female, 27 years and R (male), 22 years).

Convenience advertising as a medium for AIDS-prevention among "risk taking" youth

- K (F): *No, but why not, if you are going to rage why not have a condom in your pocket?*
R (M): *Because I don't know any one who died of it.*
K (F): *Because you are single. But if someone close to you had died of AIDS by just fucking?*
R (M): *Why all of a sudden should you die through fucking, while for years, for ages, people who did not know each other had sex OK? And now all of a sudden, in the last ten years AIDS has come up? Only through....*
K (F): *...Yes through sex, through bizarre sex. Through the bizarre sex it is now common. It isn't through sex, but it is through bizarre sex, because people are just going far out, man. For example with SM, that is very fashionable now. But do you know what you are doing? You know, but do you know: It is in, but some people are really going very far. I have seen films when there is also blood and so, and shit. And shit and blood and sperm, OK? These are the main things, really?*
CF: *Blood, yes exactly. Have a look....*
R (M): *....Hello, no ...*
K (F): *... And shit, yes, that is a kind of bacteria, I think. Have a look, how far out they will go, that isn't normal anymore.*
R (M): *Not joking, you know every body IT's a blood disease. It only gets out in the open through sexual contact, etc., through contact with someone else. Because, look at the hospitals: If you need a blood transfusion, you will also get AIDS.*
K (F): *Yes, but that has been from an AIDS patient.*
R (M): *No, even then, AIDS can be positive or negative, eh? And you are the other one and eh presto, you've got it.*
K (F): *No, it doesn't work like that.*
R (M): *You know how many people got infected in Germany?*
K (F): *You have to have someone who is zero-positive. And then you get AIDS too, but not by combining the two, or something like that.*
R (M): *No, AIDS is a blood disease. Everybody has got it. Your blood just different coats, and so you have different kinds of AIDS, but they can't fix it, because it wears different coats.*
K (F): *What I used to do, I wouldn't do anymore in any case. What I used to do. To rage and rage, and I have done many more things, you know. I worked, for example, in a time when we didn't know anything. You know.*

They think that they know with whom they are having sex and are of the opinion that HIV/AIDS only occurs among "dirty people".

To-day I talked with A (male), a Marocain guy who attends the (blow) cafe. He thinks the campaign is all nonsense: *"The only ones who are going to get it (AIDS) are the homos".* And *"I suppose that these are the people who are on the pictures? Look how old they are. Crazy".* No he didn't have to be worried because he knew exactly with whom he slept. After all, these were all young girls, who did not have a lot of experience (otherwise he didn't want them). Who would they get it from? No he really wasn't very concerned about it at all. According to him, his friends weren't either. , because everybody thought like him. Even so, he asked himself, whether there were really women with AIDS. How could that happen? *"But of course there were some "dirty people" who did it both with men and women".* But he would not want to know these people. No, he wasn't worried. [Field note: 05 September 1994; 16:00-21:00 pm (blow) cafe]:

In short, they don't understand it and also they don't want to know. "Go away you who is pointing the finger!"

To-day again no women in the shop. there was a loudmouth however, who wanted to tell me about the hypocritical cancer posters that I was promoting. "Why?", did I ask (making sure he knew that I did not come to promote the posters). "Why?" he shouted. *"Don't you know that yourself? These posters tell that you can have safe sex, if you use a condom! Now that isn't true at all. Don't you know that the thing can tear easily. And do you know that lubricants and some soaps can deteriorate them, so that they become porous? Go to the hospital and speak with a doctor, he can tell you how safe they are. Safe? My nose. Cancer posters that is what they are. And that is all I want to say about them!"* [Field note 16 September; 16:00 - 19:00 pm (blow) cafe]

This group takes on an indifferent attitude towards the *convenience advertising* campaign: "I am here to have a good time and I don't want to hear about this nonsense." Often the posters are not well understood and people haven't got anything sensible to say about them.

There are two girls inside with whom I have a short conversation. They have got the idea, that it is all a bit much. Wherever you go, you see something about AIDS. It happens so often that it doesn't mean very much any more. The shock effect has worn off, and that is the same for the posters. () F (male) who is very busy entertaining the ladies, thinks it is all bull shit. "You have to enjoy life a bit more instead of worrying about it all the time." The only sensible thing he could say about the posters was, that to him "they only invited him to piss on them." [Field note: 27 September, 16:00 - 19:00 pm; (blow) cafe]

SUMMARY AND CONCLUSION

8

In 1994 the Netherlands Institute for Alcohol and Drugs (NIAD, project AIDS and Drug Use), in collaboration with the organisation Mainline, the Rutgers Stichting and Convenience Advertising Ltd. conducted an HIV/AIDS-prevention campaign which primary goal was to point out to youth taking risks the importance of safe sex and safe use. In the first instance, the campaign was meant to act a *reminder* and to convince the target group that the HIV/AIDS-prevention message is also relevant for them. "*Convenience advertising*" was chosen as a medium, a communication tool which in the form of poster displays on the walls and doors of (semi) public amenities buildings, casts targeted messages to specific target groups. In 63 locations of commercial night life venues in Rotterdam (in discos and (blow) cafes) six different graphic messages on A4 posters were displayed which focused on the importance of safe sex (five messages) and safe drug use (one message).

The evaluation of the this *convenience advertising* HIV/Aids-prevention campaign comprises two parts, a qualitative ethnographic field study combined with the results of a quantitative survey of 280 visitors to the discos and (blow) cafes, who were a-selectively approached to be surveyed (no random sample). The objective of the evaluation was to determine in how far the target group had noticed the via *convenience advertising* narrow casted HIV/AIDS-prevention messages and in how far they appreciated this approach to HIV/AIDS-prevention. Indirectly, an attempt is made to establish the effects of the campaign in relation to changes in the sales of condoms in certain establishments and changes in the number of telephone enquiries to the drug support service HADON/Odyssee.

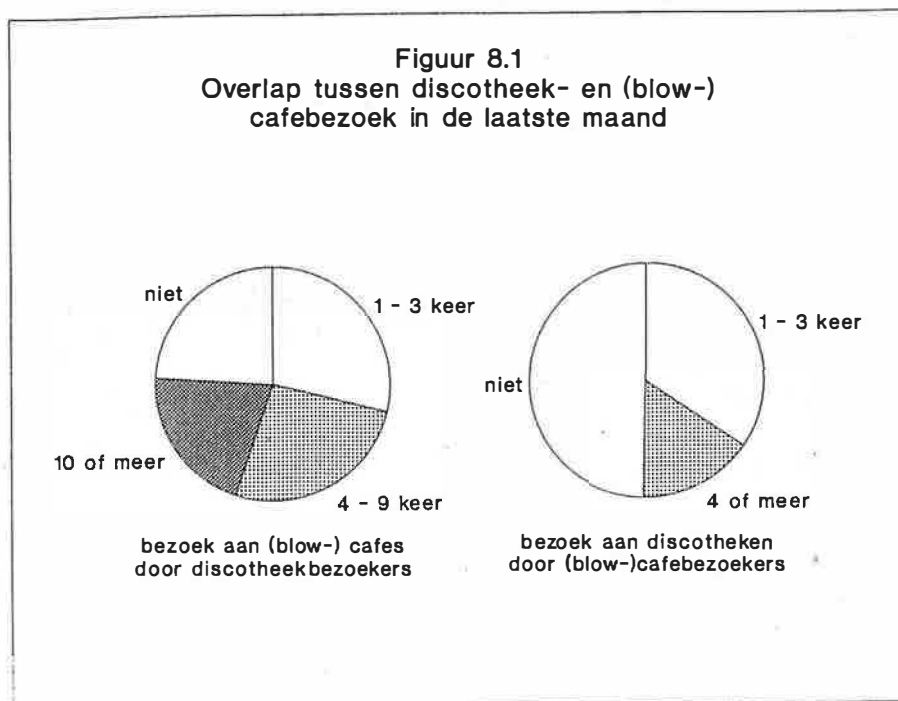
8.1 The Visitors to the (Blow) Cafes and Discos

The pilot project *Convenience Advertising* is intended to reach youth who run the risk to contract HIV/AIDS via unsafe sex or unsafe drug use and who are not likely targeted by, or for whom established AIDS-prevention campaigns do not have much appeal. In more concrete terms, the target group is described as youth who are confronted with problems at several levels.

In the research and in the presentation of the results, depending on the location where contacts were made, a distinction is made between visitors to the (blow) cafes and to the discos. Of course, this statistical distinction can not produce a realistic picture of the going out behaviour of the people involved. As becomes evident from Figure 8.1, almost half of the visitors to the discos also visit a (blow) cafe or coffee shop at least once per week (47%). In contrast, the majority of the visitors to the (blow) cafes (50%) visit a disco, a rave or a house party less than once per week.

In the establishments where the AIDS-prevention messages/posters are displayed the majority of the visitors are youth (up to and including 25 years of age: 71%), almost one quarter does not have work. Half of the youth have paid jobs and the rest are still going to school or are tertiary students. More than one third of the interviewees have finished their schooling.

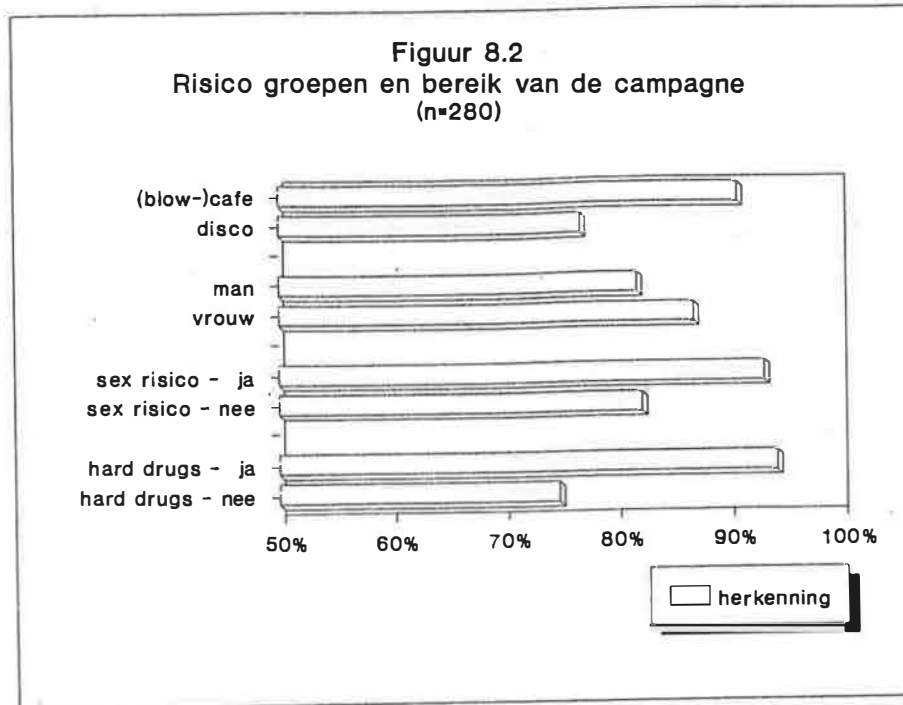
Figure 8.1
Overlapping visits to the Discos and the (Blow) cafes
during the preceding month



8.2 Outreach and Value of the Campaign

One of the most important goals of the pilot project *convenience advertising* is to highlight to "risk taking" youth the importance of safe behaviour to prevent the infection or transmission of the HIV/AIDS virus and to convince them that this message is relevant for them. It seems that the first part of the above stated goal of the campaign has been successful in reaching the majority of the visitors to the night life establishments in Rotterdam. Especially the visitors to the (blow) cafes have noted the campaign (91% - See Figure 8.2). It also appears that respondents who had recently used illegal drugs (mostly ecstasy and cocaine) more often had taken note of the messages than those interviewees who had not used hard drugs during the last twelve months prior to the interview (respectively 94% and 75%).¹ Lastly, it appears that, the visitors to the locations who have had different sexual partners without always using a condom, more often could recall or recognise one or more messages than visitors who did not have unsafe sex (respectively 93% and 82%).²

Figure 8.2
Risk Groups in Relation to the Outreach of the Campaign
(N=280)



Not only could the majority of the interviewees spontaneously recall or recognise one of the messages, but the majority (86%) of those who recognised the message "safe sex" (N=234), could also spontaneously recite the *end off* (AIDS, without a condom you're a bloody idiot). In relation to the 'safe drug use' message this percentage was significantly lower; fewer than half of the interviewees who recognised the message, could recite the *end off* (AIDS, without a clean needle you're a bloody idiot). Three quarters of the interviewees did recognise the *end off*, however.

The positive response of the recognition of the messages, combined with the more qualitative data from the ethnographic fieldwork and the unstructured interviews clearly indicates that through the *convenience advertising* medium a very great number of youth who frequent the night life circuit can be reached. The campaign did not set out to increase the target group's knowledge about the transmission of the HIV/AIDS virus. This is confirmed from the feedback on the informative value of the messages. Only some of the respondents indicate that the messages contain new information for them. It becomes evident, that visitors to (blow) cafes and discos who practice unsafe sex more often consider the relevance of the safe sex message of the campaign, than visitors with changing sexual contacts who claim to use condoms (31%). Relatively few of the interviewees (6%) consider the safe drug use relevant for them.

8.3 Unsafe Sexual Contacts and Unsafe Drug Use

During the ethnographic field work it did become apparent that there is much confusion about HIV and AIDS, in particular about the risks involved practising unsafe sex. Almost two third of the respondents with changing partners indicate, citing different reasons, that they do not always use a condom.

Partly as a result of the campaign, eleven locations decided to install condom vending machines. At the start of the campaign seven locations already had a condom vending machine installed. The sales of condoms varies greatly between, but also within locations it varies over time. It was impossible to obtain data on variations in condom sales from the public condom vending machines which are referred to, in small print, at the bottom of each of the five safe sex messages.

Another objective of the *convenience advertising* HIV/AIDS-prevention campaign was to point out the importance of safe use to youth who are beginning to experiment with injecting drugs and who are most likely getting in contact with injecting drug users. From the results of the ethnographic field work as well as from the survey among visitors to the discos and (blow) cafes, it becomes apparent that the use of legal and illegal psych-active drugs is wide spread. In addition to a high incidence of smoking tobacco, consuming alcohol, and using cannabis, half the interviewees had used ecstasy, cocaine and/or amphetamines (during the last twelve months prior to the interview). Only a very small number of respondents had, at some time, injected drugs. These were the people who, either had a lot of experience injecting drugs, or who more than a year ago had experimented (less than five times) injecting drugs. Almost one in three of the interviewees indicated that they knew people who (recently) had injected drugs.

The fine print at the bottom of the fourth message ("How do you win the Jackpot? - AIDS, without a clean needle you're a bloody idiot") refers to the HADON/Odyssee telephone number for information regarding drugs and clean needles. This notice did not seem to lead to an increase in telephonic enquiries and people who rang for information never indicated that they wanted this information because of the *convenience advertising* campaign.

8.4 Convenience Advertising as a Reminder

In conclusion, resulting from the data of the ethnographic fieldwork, very hesitantly, a typology can be made of three groups of visitors, using their reactions to the HIV/AIDS-prevention messages as selection criteria. It is unclear from the data however, to determine the size of the three groups.

The first group is described as youth who blow and for whom the use of cannabis and other mind changing drugs facilitates introspection and increased self-knowledge. This group has noted the HIV/AIDS-prevention campaign, which has been extensively been discussed by them. Although they clearly know the risks of unsafe sex, the use of condoms seems not a real issue for them. Their argument is that sex should be a "natural" act and that you need to choose your partners with care.

A second group, differentiated from the other groups during the field work, are youth who often still attend secondary/tertiary or vocational courses or who are working. Many have regular partners. During the weekends they use quite a lot of drugs. These youth have also noted the messages. Although, they often have a regular partner this does not mean that they do not have sex with other partners. For this group the safe sex message seems to act as a *reminder*.

Finally, there is a third group of youth, who are predominantly without work and with less formal education. They have adopted an indifferent attitude towards the campaign. An important pursuit of this group seems to be excessive drug use and (many) changes of sexual partners. The use of condoms does not seem to play an important role in this group, because many youth are convinced that they do not run any risks from the transmission of HIV/AIDS or other STDs. Often the youth indicate that they have not understood the message.

8.5 Notes

1. $\chi^2 = 20.0$; $p < .001$
2. $\chi^2 = 3.8$; $p = .050$

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