

<b>COMPLAINT NUMBER</b>	19/056
<b>COMPLAINANT</b>	K Thomas & 6 Others
<b>ADVERTISER</b>	Family First New Zealand
<b>ADVERTISEMENT</b>	Family First New Zealand, Out of Home
<b>DATE OF MEETING</b>	26 February 2019
<b>OUTCOME</b>	Not Upheld

## SUMMARY

The billboard advertisement for Family First NZ has the text “Marijuana has a ‘kids menu” in big green letters. To the right of this text is a photo of different cannabis products, some of which appear to be sweets. To the right of this photo are the words “Don’t legalise”. At the bottom of the billboard is the website address [www.SayNoToDope.org.nz](http://www.SayNoToDope.org.nz) and an authorisation statement confirming the advertiser is Family First.

There were seven complaints about this advertisement. The Complainants were concerned the ad was misleading, making an unsubstantiated claim and played on fear. One Complainant was concerned the ad would stigmatise young people who use medical cannabis.

The Advertiser said the international marijuana industry targets young people with child-attractive, child-friendly products. The billboard is designed to inform the public about the range of products available overseas and to provoke debate and discussion.

The Complaints Board said the advertisement draws the public’s attention to some of the different types of cannabis products that might be available for sale in New Zealand, if recreational cannabis is made legal.

The Complaints Board agreed the advertisement did not contain anything indecent, exploitative or degrading, did not cause fear or distress and was socially responsible.

The Complaints Board ruled the complaints were Not Upheld.

### **[No further action required]**

Please note this headnote does not form part of the Decision.

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## COMPLAINTS BOARD DECISION

The Chair directed the Complaints Board to consider the complaints with reference to Principle 1 Social Responsibility, Rule 1(c) Decency and Offensiveness, Rule 1(g) Fear and Distress, Principle 2 and Rule 2(b) Truthful Presentation and Rule 2(e) Advocacy Advertising of the Advertising Standards Code.

Principle 1 required the Board to consider whether the advertisement had been prepared and placed with a due sense of social responsibility to consumers and to society.

Rule 1(c) required the Board to consider whether the advertisement contained anything that is indecent, or exploitative or degrading, or likely to cause harm, or serious or widespread offence, or give rise to hostility, contempt abuse or ridicule.

Rule 1 (g) required the Board to consider whether the advertisement contained anything that might cause fear of distress without justification.

Principle 2 required the Board to consider whether the advertisement was truthful, balanced and not misleading.

Rule 2(b) required the Board to consider whether the advertisement was misleading or likely to mislead, deceive or confuse consumers, abuse their trust or exploit their lack of knowledge. This includes by implication, inaccuracy, ambiguity, exaggeration, unrealistic claim, omission, false representation or otherwise. Obvious hyperbole identifiable as such is not considered to be misleading.

Rule 2(e) required the Board to consider whether the advertisement was advocacy advertising, and, if so, whether the identity and position of the advertiser was clearly stated. Opinion in support of the advertiser's position must be clearly distinguishable from factual information. Factual information must be able to be substantiated.

The Complaints Board said the advertisement before it fell into the category of advocacy advertising and noted the requirements of Rule 2(e) of the Advertising Standards Code. This Rule required the identity of the advertiser to be clear; opinion to be distinguished from factual information and factual information must be able to be substantiated. The Advocacy Principles developed by the Complaints Board in previous decisions considered under rule 11 of the Code of Ethics remain relevant. They say:

1. That section 14 of the Bill of Rights Act 1990, in granting the right of freedom of expression, allows advertisers to impart information and opinions but that in exercising that right what was factual information and what was opinion, should be clearly distinguishable.
2. That the right of freedom of expression as stated in section 14 is not absolute as there could be an infringement of other people's rights. Care should be taken to ensure that this does not occur.
3. That the Codes fetter the rights granted by section 14 to ensure there is fair play between all parties on controversial issues. Therefore, in advocacy advertising and particularly on political matters the spirit of the Code is more important than technical breaches. People have the right to express their views and this right should not be unduly or unreasonably restricted by Rules.
4. That robust debate in a democratic society is to be encouraged by the media and advertisers and that the Codes should be interpreted liberally to ensure fair play by the contestants.
5. That it is essential in all advocacy advertisements that the identity of the advertiser is clear.

## **The Complaints Board ruled the complaints were Not Upheld.**

### **The Complaints**

There were seven complaints about this advertisement. The Complainants were concerned the advertisement was misleading, making an unsubstantiated claim and played on fear. One Complainant was concerned the advertisement would stigmatise young people who take medical marijuana.

### **The Advertiser's response**

The Advertiser said the international marijuana industry targets young people with child-attractive, child-friendly products. The billboard is designed to inform the public about the range of products available overseas and to provoke debate and discussion.

### **Complaints Board Discussion**

#### *Consumer Takeout*

The Complaints Board said the consumer takeout of the advertisement was there are many different types of cannabis products, and if cannabis is legalised, some of these products could be attractive to children.

#### *Is it an advocacy advertisement?*

The Complaints Board agreed the advertisement fitted the definition of an advocacy advertisement and the identity of the Advertiser, Family First, a well-known organisation, was sufficiently clear. The Complaints Board said the view of the Advertiser was also clear as the advertisement included the website address: [www.SayNopetoDope.org.nz](http://www.SayNopetoDope.org.nz). The Complaints Board noted that a referendum is to be held at the 2020 New Zealand general Election on the question of whether to legalise the personal use of cannabis.

#### *Does the advertisement contain anything indecent, exploitative or degrading?*

The Complaints Board said the advertisement draws the public's attention to some of the different types of cannabis products that might be available for sale in New Zealand, if recreational cannabis is made legal. The Complaints Board agreed the advertisement did not contain anything indecent, exploitative or degrading.

#### *Does the advertisement cause fear or distress, without justification?*

The Complaints Board considered the concerns of the Complainant who said the advertisement stigmatises those who might use medical cannabis for health purposes. The Complaints Board said the advertisement refers to the use of recreational cannabis, not medical cannabis, which was made legal in 2018. Medical cannabis is a very different product to recreational cannabis, as it does not contain the psycho-active ingredient THC. The Complaints Board agreed the advertisement did not cause fear or distress.

#### *Is the advertisement socially responsible?*

Taking all of the above into consideration, the Complaints Board agreed the advertisement was socially responsible.

The Complaints Board ruled the advertisement was not in breach of Principle 1, Rule 1(c), Rule 1(g), Principle 2 or Rule 2(b) of the Advertising Standards Code.

The Complaints Board ruled the complaints were Not Upheld.

## **DESCRIPTION OF ADVERTISEMENT**

The billboard advertisement for Family First NZ has the text "Marijuana has a 'kids menu'" in big green letters. To the right of this text is a photo of different cannabis products, some

of which appear to be sweets. To the right of this photo are the words "Don't legalise". At the bottom of the billboard is the website address [www.SayNoToDope.org.nz](http://www.SayNoToDope.org.nz) and an authorisation statement confirming the advertiser is Family First.

#### **COMPLAINT FROM K THOMAS**

The misleading information and flagrant scaremongering in this billboard by Family First contravenes the first 2 principles of the therapeutic and health advertising code. As a mother to a 4yr old son with refractory epilepsy who requires prescribed marijuana to reduce the impact of his seizures I find this billboard deeply offensive. The implications that marijuana is inherently bad or illegal and paediatric administration is essentially abusive by nature, stigmatises patients like my son and caregivers like me who have exhausted other AEDs which do not provide the same relief and other positive outcomes such as progressing through milestones, social integration and other cognitive behavioural gains. I find it exploits lack of knowledge around necessary use for therapeutic use and plays on fears that children will suffer from legalisation when evidence based research indicates young people in Portugal (legalised 2001) use drugs less than in Britain and associated harms from drugs (health impacts and crime) have also decreased

#### **COMPLAINT FROM A MCINROE**

This billboard is blatantly misleading, plays on fear, by implicating ideals of a small group to stir up issues. This billboard is a scare tactic being used to manipulate a group of people - beyond inappropriate. Needs to be removed and Family First need to be reminded of our LAWS, we do not engage in fear mongering.

#### **COMPLAINT FROM B GRAHAM**

This billboard is entirely misleading and heavily biased. It does not abide by the code of conduct that it is dishonest and will be harmful to truthful and honest discussions around the Legalization of Marijuana referendum.

If we are to behave as a proper society we cannot have people advertising with lies and dishonesty.

#### **COMPLAINT FROM E WILLIAMS**

This ad is a blatant twist on provable and established facts. It is clearly designed to inflame fear around the issue of marijuana as well as encourage distrust of our current government that is engaging in the debate.

#### **COMPLAINT FROM M WALLIS**

This billboard is advertising that "Marijuana has a kid's menu", arguing against potential legalisation. This is a clear breach of the advertising standards code as it is obviously attempting to mislead uninformed people that if marijuana is legalised it will be marketed and sold to children. This is completely untrue, all current legalised states have adult minimum ages (usually 21), as would New Zealand if it were to go through.

#### **COMPLAINT FROM S RUMSEY**

This advertising is deceiving stating that medicine will be manufacture for children - when in truth - once medicinal cannabis is present in NZ and made in NZ - it is assuming that it will look like candy. There is no basis for this position and it's deceiving and disrespectful towards those that use cannabis as medicine. Their campaign is full of misinterpretation and lies. The only "facts" they use are unsubstantiated and wrong. Billboards are currently out in Christchurch along with fliers to be handed out with stating dribble that is not factual. I ask - Is it really okay to lie to people and put that up on a billboard?

#### **COMPLAINT FROM S INABA**

The advertising makes the unsubstantiated claim that edibles with cannabis products is marketed towards children and that "legalizing" will create a "kids menu". The billboard is displayed in Christchurch in the intersection between Moorhouse Ave and Ferry road.

## CODES OF PRACTICE

### ADVERTISING STANDARDS CODE

**Principle 1: Social Responsibility:** Advertisements must be prepared and placed with a due sense of social responsibility to consumers and to society.

**Rule 1(c): Decency and Offensiveness:** Advertisements must not contain anything that is indecent, or exploitative or degrading, or likely to cause harm, or serious or widespread offence, or give rise to hostility, contempt abuse or ridicule.

**Rule 1(g): Fear and distress:** Advertisements must not cause fear or distress without justification.

**Principle 2: Truthful Presentation:** Advertisements must be truthful, balanced and not misleading.

**Rule 2(b): Truthful Presentation:** Advertisements must not mislead or be likely to mislead, deceive or confuse consumers, abuse their trust or exploit their lack of knowledge. This includes by implication, inaccuracy, ambiguity, exaggeration, unrealistic claim, omission false representation or otherwise. Obvious hyperbole identifiable as such is not considered to be misleading.

**Rule 2(e): Advocacy Advertising:** Advocacy advertising must clearly state the identity and position of the advertiser. Opinion in support of the advertiser's position must be clearly distinguishable from factual information. Factual information must be able to be substantiated.

### RESPONSE FROM ADVERTISER, FAMILY FIRST NEW ZEALAND



Contact person for advertising complaints	Bob McCoskrie
Name and contact at creative agency	Nil
Name and contact at media agency	Nil
A basic, neutral description of the advertisement	Billboard opposing legalisation of marijuana
Date advertisement began	Saturday 9 February
Where the advertisement appeared (all locations e.g. TV, Billboard, Newspaper)	12mx3m billboard - Christchurch

Website	
Is the advertisement still accessible – where and until when?	Yes – until 9 March
A copy of digital media file(s) of the advertisement – if the complaint relates to on-screen graphic, please send a broadcast quality version.	n/a
Who is the product / brand target audience?	Families
Clear substantiation on claims that are challenged by the complainant.	See further submissions
The response from the advertiser is included in the published decision. The ASA is not able to accept confidential or proprietary information. Please contact the Complaints Manager if this is an issue.	n/a
<b>For Broadcast advertisements:</b>	
A copy of the script	
A copy of the media schedule and spot list (Please remove all financial information)	
CAB key number and rating	
<b>For Digital advertisements:</b>	
What platform tools have you used to target your audience?	

## ADDITIONAL SUBMISSIONS TO THE A.S.A.

### PURPOSE OF THE ADVERTISEMENT

We believe it is time to end the practice of illustrating all marijuana-related news stories and educational materials with the same overused photos of a marijuana plant. The public deserves to be informed about the wide variety of products and THC potencies sold in legal marijuana markets around the world.

What is [now known](#) due to decades of fighting the tobacco industry (in 2016, cigarette and smokeless tobacco companies spent \$9.5 billion on advertising and promotional expenses in the United States alone, more than \$26 million



each day, to advertise and promote cigarettes — [US Centre for Disease Control](#)) and the courage of industry whistle-blowers, is that tobacco firms and vested interest groups actively obscured, lied and denied cigarette harms and **made concerted marketing efforts to target the young.**

Big Marijuana are deliberately targeting their products at the young. The earlier they can get someone addicted, the better for business.

## BACKGROUND

**Teen: Colorado voters were duped into legalising recreational marijuana**  
*“It’s [marijuana industry] all so misleading, and there’s a lot of trickery going on because there are big money and politics in this and not enough people standing up to do the right thing because they’re afraid of losing something — like money, power, privilege or image. I compare it to Big Tobacco and bogus 1950s ads pushing everyone to smoke cigarettes — you know, as an expression of personal freedom and with a mythical 9 out of 10 doctors saying it’s all right. Only this time, it’s not just a buzz from some nicotine we’re talking about. Weed is a psychoactive, mind-altering substance. It is addictive. And I don’t care what anyone says; it is being marketed to kids.”*

[Nineteen-year-old Kaleb](#) is 41 days and seven hours sober from his marijuana addiction (2015)

When people think about “marijuana”, they probably immediately think about a joint.

But legalising marijuana will be far more than that. People will be popping it between classes, sucking on it while driving, drinking it before work, chewing on it while they talk to others, and eating it as a dessert.

The trend in commercialised marijuana markets is toward distilled active ingredients (cannabinoids) — in particular, tetrahydrocannabinol (THC). THC is the psychoactive ingredient in marijuana that affects the mind or behaviour and alters perception, mood or consciousness. In legalised markets, the profit margins are [very high](#) for processed marijuana products while the price of marijuana bud has [fallen sharply](#).

Consequently, the market share of bud has fallen and **the market share of THC-infused edibles and THC concentrates continues to rise.** In some markets, [processed products](#) now [comprise](#) more than half of sales.

Not This...



...But This



Source: Marijuana Business Journal, other open source media

Researchers say that the cannabis market is evolving in ways that make it different from the tobacco and alcohol markets. In addition to marijuana, myriad cannabis products (e.g., edibles, concentrates, infusions, tinctures, lotions, and butters) are available and heavily marketed. These products can be smoked, eaten, vaped, or used topically. Many of these products are easily transportable and readily concealed or disguised.

Even when parents try to keep it away from them, children go for sweets. Cartoon-like characters and bright colours will always attract children. It's logical that school-age children could be so attracted to the packaging that they would not bother to read.

Both the manufacturing of marijuana sweets and the packaging make them so appealing. Edible pot processors make products that closely imitate familiar products, like *Cap'N Crunch* cereal and *Pop Tarts*. One company's *Pot-tarts* are hard to distinguish from Kellogg's *Pot-tarts*.

## EDIBLES

THC concentrate is mixed into almost any type of food or drink. The potency of edibles (several times that of an average joint) and **their attractiveness to kids have led to serious problems in legalised states like Colorado**. THC-infused products include: coffee, ice-cream, baked goods, lolly-pops, fizzy drinks, water bottles, tea, hot cocoa, breath mints & spray, intimate oils, pills, lollies, chewing gum, marinara sauce, baklava, and many more. These new products can be delivered rectally, nasally, vaginally or squirted into the eye to reach the bloodstream faster and deliver a quicker high.

Have a look – [THCPHOTOS.ORG](http://THCPHOTOS.ORG)





SINCE MARIJUANA BECAME LEGALIZED AND COMMERCIALIZED IN COLORADO, THE PRODUCTS HAVE EXPANDED BEYOND BUDS TO INCLUDE HIGHLY-PROCESSED, HIGHLY-POTENT FORMS WITH MULTIPLE METHODS OF INTAKE.



## THIS IS TODAY'S MARIJUANA

[CLICK TO VIEW PHOTOS](#)

Source: *THCphotos.org (Colorado)*

### VAPING

Vape pens can combust THC or weed in just about any form and do it without leaving a smell. **A student could be eating, chewing, sucking on or drinking THC at school, and even vaping in class.**

The tiny combination of plastic, glass, and metal is a disposable cannabis oil cartridge. It is easily carried in your pocket, and produces little-to-no smell when consumed. You simply screw it into an inexpensive, rechargeable pen and inhale. That's it. It's this tiny device that's quickly taking over cannabis consumption.



Since Colorado, Washington, Oregon, Alaska, and the District of Columbia (Washington, DC) legalised marijuana, **past-month use of the drug has continued to rise above the national average among youth aged 12–17** in all five jurisdictions (NSDUH, 2006-2017)

Researchers at the Centers for Disease Control and Prevention (CDC) surveyed some 20,000 students in grades 6-12 about their marijuana use in e-cigarettes. E-cigarettes typically contain nicotine, but many of the [battery-powered devices](#) can vaporise other substances, including marijuana. They found that nearly 1 in 11, or 2.1 million middle and high school students used marijuana in e-cigarette devices. In legal states people can buy cartridges of high-potency cannabis oil that fit into many e-cigarette



devices. The [popular Juul](#) does not make marijuana pods, but users can refill Juul's *nicotine* cartridges with cannabis oil.

This has all heightened **health concerns about the new popularity of vaping among teens**.

## HIDDEN BIG MARIJUANA PRODUCTS

Myriad cannabis products (e.g., edibles, concentrates, infusions, tinctures, lotions, and butters) are available and heavily marketed. These products can be smoked, eaten, vaped, or used topically. Many of these products are easily transportable and readily concealed or disguised. **One recent study showed increased use by 14-18 year olds of newer forms of consumption – vaping and edibles**. Students say vaping is everywhere and 'it's easy to hide'.

A RAND Corporation study recently published by the journal Drug and Alcohol Dependence found that **adolescents who view more advertising for medical marijuana are more likely to use marijuana**, express intentions to use the drug and have more-positive expectations about the substance.

## NEW FRONTIERS

In August, a Colorado committee considered how to regulate a new generation of marijuana-based products that illustrate just how far commercialisation has extended. **These [new products](#) can be delivered rectally, nasally, vaginally or squirted into the eye to reach the bloodstream faster and deliver a quicker high** (see products right)



## EFFECT ON YOUNG PEOPLE

New Zealand has some of the richest data on the adverse consequences of cannabis use coming from two major studies: the [Christchurch Health and Development Study](#) (CHDS) and the [Dunedin Multidisciplinary Health and Development Study](#) (DMHDS).

The CHDS is a study of a cohort of 1265 children born in 1977 who have been studied to the age of 35. The study has now published 30 scientific papers on the issue of cannabis. This research shows that:

\* Cannabis use by cohort members was common, with over 75 per cent reporting use, and in the region of 15 per cent developing a pattern of heavy use and dependence at some point.

\* The use of cannabis was associated with increased risks of a number of adverse outcomes including: educational delay; welfare dependence; increased risks of psychotic symptoms; major depression; increased risks of motor vehicle accidents; increased risks of tobacco use; increased risks of other illicit drug use; and respiratory impairment. These effects were most

evident for young (under 18-year-old) users and could not be explained by social demographic and contextual factors associated with cannabis use.

Daily marijuana use among youth who begin before the age of 17 significantly increases the risk of suicide attempts. Researchers led by the National Drug and Alcohol Research Centre at the University of New South Wales (and including New Zealand researchers) [analysed](#) results of three large, long-running studies from Australia and New Zealand involving nearly 3,800 people. Teenagers who start smoking cannabis daily before the age of 17 are seven times more likely to commit suicide, a [study](#) has found.

Colorado toxicology reports [show](#) the **percentage of adolescent suicide victims testing positive for marijuana has increased.** (*Colorado Department of Public Health & Environment [CDPHE], 2017*).

## HOSPITALISATION

The number of teenagers sent to emergency rooms more than quadrupled after marijuana was legalised in Colorado — mostly for mental health symptoms, researchers [reported](#) in 2017.

A 9 y/o child in the US state of New Mexico [suffered a bad reaction](#) after mistaking her parent's medical marijuana gummy bears for regular lollies and sharing them with her friends at school. Four students at the Albuquerque School of Excellence ingested the gummies and suffered sickness, including one child who passed out on the floor.

[Pot-laced Oreos send Oregon students to hospital.](#)

[Florida students hospitalized after eating marijuana candy](#) – Candies were brought to school by a 12-year-old, who proceeded to share with six other students. Police identified the candies as Green Hornet Fruit Punch Gummies, which contained 10 milligrams of THC each. The product is illegal in Florida.

The legal limit of how much THC could be put in an edible in Colorado was 10mg. The majority of THC gummy bears contain 40 milligrams of THC in each one.

## OTHER EXAMPLES OF MARIJUANA PRODUCTS

They look like products for children.





In Colorado and California – and now Canada, **marijuana entrepreneurs are using deceptive packaging which are enticing to youngsters. Many candies look like children’s favourites, such as**

Reese’s Peanut Butter Cups and Gummy Bears.



For example, the Hershey Co. [filed and won](#) a trademark infringement lawsuit against Tincture Belle, a Colorado marijuana edibles company, claiming it makes four pot-infused candies that too closely resemble iconic products of the chocolate maker.

The specific lollipops products which mimic the look of Hershey’s candies are:

*Ganja Joy*, like *Almond Joy*; *Hasheath*, which looks like *Heath Bars*; *Hashees* which resemble *Reese’s peanut cups*, and *Dabby Patty*, made to look like York peppermint patties. The company’s website says its products “*diabetic safe and delicious*” and helpful with a variety of issues, including pain, headaches and insomnia.

**Hershey says the products are packaged in a way that will confuse consumers, including children.** The lawsuit alleges that Tincture Belle “*creates a genuine safety risk with regard to consumers*” who may inadvertently eat them thinking they are ordinary chocolate candy. Other pot candies look like *Kit Kats*, *Milky Ways*, *Nestle’s Crunch* and *Butterfingers* (see below). **Children, not surprisingly, think these products are for them.**



Vancouver products 2018

## CONCLUSION

The US Attorney for the District of Colorado published an article in the *Denver Post* last September entitled [“It’s high time we took a breath from marijuana commercialization, Colorado.”](#)

*“It’s a profit opportunity. Which is also how they see our youth. Which is why in Colorado they now sell marijuana-consumption devices that avoid detection at schools, like vape pens made to look like high-lighters and eye-liner.”*

*These are the same marketers who advertise higher and higher potency marijuana gummi candy, marijuana suppositories, and marijuana “intimate creams.” This aggressive marketing makes perfect sense in addiction industries like tobacco, alcohol, opioids, and marijuana. These industries make the vast majority of their profits from heavy users, and so they strive to create and maintain this user market.*

***Especially when users are young and their brains are most vulnerable to addiction.”***

**We absolutely stand by the messaging of this billboard.** The marijuana industry is targeting young people with child-attractive child-friendly products.

The public of New Zealand are not getting this information.

Our billboard is designed to raise this inconvenient truth - and to provoke debate and discussion.



SayNopeToDope.org.nz

Authorized by Family First NZ, 28 Davies Ave, Manukau City 2242

## RESPONDING TO SPECIFIC COMPLAINTS

Thank you for the copies of the complaints. Responding to them...

1. **S Inaba** says *“The advertising makes the unsubstantiated claim that edibles with cannabis products is marked (sic) towards children and that "legalizing" will create a "kids menu"”*.

It is not an unsubstantiated claim. It is a huge concern held and argued by many NGO's and even legislators in US states where there has been legalisation – as shown in detail above.

2. **K Thomas** says *“The misleading information and flagrant scaremongering in this billboard by Family First contravenes the first 2 principles of the therapeutic and health advertising code. As a mother to a 4yr old son with refractory epilepsy who requires prescribed marijuana to reduce the impact of his seizures I find this billboard deeply offensive. The implications that marijuana is inherently bad or illegal and paediatric administration is essentially abusive by nature, stigmatises patients like my son and caregivers like me who have exhausted other AEDs which do not provide the same relief and other positive outcomes such as progressing through milestones, social integration and other cognitive behavioural gains. I find it exploits lack of knowledge around necessary use for therapeutic use and plays on fears that children will suffer from legalisation when evidence based research indicates young people in Portugal (legalised 2001) use drugs less than in Britain and associated harms from drugs (health impacts and crime) have also decreased.”*

K Thomas is firstly confusing two totally separate issues. She is talking about cannabis medicine. This billboard is about legalising **recreational** dope – which is what the Referendum is about.

Actually, Family First *supports* researched and effective medicinal marijuana – which was made legal last year! But that's not what the billboard is about.

The complaint by **S Rumsey** also fails to separate the two issues.

However, **K Thomas** is also wrong about Portugal. Between 2012 and 2017 [Lifetime Prevalence statistics](#) for alcohol, tobacco and drugs for the general population (aged 15-64) have *risen* by 23%. The study saw an *increase* from 8.3% in 2012, to 10.2% in 2016/17, in the prevalence of illegal psychoactive substance use. “*We have seen a rise in the prevalence of alcohol and tobacco consumption and of every illicit psychoactive substance (affected by the weight of cannabis use in those aged 15-74) between 2012-2016/17.*”

(Read more about Portugal <http://saynopedope.org.nz/portugal/> )

3. The complaints by **A McInroe**, **B Graham**, **M Wallis** and **E Williams** do not have any substance to them, and don't warrant any response. They simply disagree with us – which they're entitled to do.

**None of these complaints have identified any specific breaches of advertising standards.**

## **RESPONSE FROM MEDIA, GO MEDIA**

Thanks for getting in touch to make us aware about this complaint.

With the upcoming referendum, we will witness many organisations will be putting forward their version of the truth.

We don't believe Go Media is in any position to respond to the subject matter that the advertiser claims.

Family First are an established reputable organisation so we have taken them at their word that what they are communicating is true & accurate.

This is a matter best managed by the advertiser 'Family First' directly. If the complaint is upheld then of course we will promptly pull the campaign down.

### **APPEAL INFORMATION**

According to the procedures of the Advertising Standards Complaints Board, all decisions are able to be appealed by any party to the complaint. Information on our Appeal process is on our website [www.asa.co.nz](http://www.asa.co.nz). Appeals must be made in writing via email or letter within 14 days of receipt of this decision.