

HIGH-IMPACT RESEARCH OPPORTUNITY:

Learn from successful behavior change efforts in related fields

While the evidence base for successful interventions in SUD prevention is relatively slim, there have been successful behavior change efforts in related fields that can provide a jumping-off point for further research. Anti-tobacco and anti-drunk-driving campaigns have both had successes with efforts focused on changing perceptions of what's normal in one's peer group (see box on following page). Other insights from behavioral science might be relevant as well. Researchers are learning more and more about the way small tweaks to the wording of a message can change people's responses, as well as the importance of choosing the right messenger.¹⁹⁵

Behavior change research can also tell us a great deal about what doesn't work—and what may even cause harm. It may make intuitive sense that telling kids about the dangers of drug use would keep them away from drugs, but research has demonstrated that it doesn't work. D.A.R.E. (Drug Abuse Resistance Education), a popular school-based program delivered by police officers, was used in 80% of American school districts in 2001.¹⁸⁹ The program was started and delivered by police officers and focused on educating children and teens about the risks of drug use. Somewhat infamously, however, multiple studies have shown that D.A.R.E. had no effect on substance use behavior in teens and may even have increased some participants' curiosity about substance use.¹⁹⁰ Similarly, the much-touted and still publicly funded Meth Project uses graphic and shocking ads to illustrate the dangers of meth, but researchers found that it had no effect on actual meth use.¹⁹⁸

The same pattern holds in anti-tobacco campaigns. Teens actually overestimate the risk of smoking, but that doesn't translate to any change in their behavior.¹⁹⁹ A related sector, criminal justice, also shows this effect: Scared Straight, the popular program in which prison inmates warn children away from a life of crime, has actually been shown to increase the likelihood of juvenile delinquency.²⁰⁰

Avoiding scare tactics does not mean avoiding honest discussion and education. Consider the depiction of teenage pregnancy in the MTV reality series "16 and Pregnant." The show is marketed to adolescents and follows the lives of pregnant teens and their families, exposing youth to information that would otherwise be less visible, particularly in areas that utilize abstinence-only education. Research shows that "16 and Pregnant" led to increased online searches for information regarding birth control and teen pregnancy. Researchers link that increase in knowledge to a marked change in behavior and a decline in teen birth rates during the first 18 months following the show's release. Declining abortion rates during the same time indicate the reduced birth rates were the result of fewer pregnancies.²⁰¹

The line between appropriate information and scare tactics can be difficult to find, making it a potentially valuable area for further investigation.

Any teenager could explain why [scare tactics don't work]. For them, a cigarette is not a delivery system for nicotine. It's a delivery system for rebellion. Kids take up smoking to be cool, to impress their friends with their recklessness and defiance of adults. They know that smoking is dangerous. ... Danger is part of a cigarette's appeal.

—Tina Rosenberg, journalist, on why tobacco companies support scare-tactic advertising²⁰²

PROMISING INNOVATION TARGET: Using social norms to spur behavior change

The theory: As the advertising industry has long known, people are influenced by what they perceive as the behavior of their peers. Using media to change the perceptions of what's normal in substance use might help reduce use by removing the powerful incentive to fit in.

The model: The 1998 Truth Campaign, a counter-marketing campaign to reduce smoking among Florida teens, used an advertising agency to produce billboards and television ads aimed at exposing the tobacco industry's lies and manipulations toward teens, using teens themselves as the messengers. It worked by creating a new target for teens to rebel against—the tobacco industry rather than the public health establishment—and by creating a visible peer group of teens who weren't taken in by Big Tobacco. That gave kids a new, healthier social norm.

The 1988 Harvard Alcohol Project aimed to spread the concept of the “designated driver” throughout America. With the support of leading television networks and Hollywood studios, writers inserted drunk driving prevention messages (including references to designated drivers) into scripts of popular shows such as “Cheers” and “L.A. Law” over a four-year period.

What we know: The anti-tobacco campaign was successful: Florida teen smoking rates were cut in half in less than a decade.²⁰³ The designated driving campaign was also successful: a 1991 poll showed that 9 out of 10 respondents were aware of the designated driver program. Researchers believe that the initiative was a major contributing factor to the 30% decline in alcohol-related traffic fatalities from 1988-1994, a decrease that saved over 50,000 lives.²⁰⁴

What we hope to learn: Both of these campaigns were launched over a decade ago, when media consumption patterns were different and there were fewer alternate avenues for social norm messages. More work is needed to understand how similar efforts might be adapted to the new media landscape. More research could also illuminate how well these programs can work when there's a strong social norm reinforcing the targeted behavior. For example, can an ad campaign counteract the celebration of drinking on a college campus?

Implications for funders: Media campaigns can make a difference, but they're likely to be more effective if they're developed based on what we know about human behavior—in particular, tapping into the powerful drive to fit in with one's peers. Funders should be wary of prevention efforts that are overly focused on highlighting risks, despite the intuitive appeal that many of these programs hold. Better evidence can reduce spending on unsuccessful efforts and help the field get closer to what works.

LEARN MORE & TAKE ACTION

Many public health schools have departments dedicated to using behavioral science to improve health. Researchers in these departments can be a great place to start. Organizations like the Partnership for Drug-Free Kids (www.drugfree.org/) that support ad campaigns and other kinds of outreach can also be partners in this research.

The University of Pennsylvania's Annenberg School (www.asc.upenn.edu) and other schools of communication are good resources for more information about the role media can play.

