Prevention Messaging and Advocacy: Getting Your Message Out

Prepared by
David S. Anderson, Ph.D.
Professor Emeritus of Education and Human Development
George Mason University
danders@gmu.edu  www.caph.gmu.edu

Why Attention to Prevention Messaging and Advocacy?

• High Levels of Misinformation Among General Population on Drug/Alcohol Issues
  • Denial and Resistance to Our Efforts
  • Lack of Positive Momentum
  • Lack of Professional Training
  • Many Professionals Don’t Feel Confidence or Skilled to Speak up

HEAVY DRINKING RATES and CAMPUS EFFORT

Percent of Student Use

Heavier Drinking — Campus Effort
(Monitoring the Future — College Alcohol Survey)
Webinar Aims

- Learning more effective communication strategies for reaching students
- Gain skills for persuasive communication
- Enhance confidence with advocacy

The Importance of Our Work

“Science allows us to communicate across the seas and fly about the clouds, to cure disease and understand the cosmos, but those same discoveries can be turned into ever more efficient killing machines.”

“The wars of the modern age teach us this truth. Hiroshima teaches this truth. Technological progress without an equivalent progress in human institutions can doom us. The scientific revolution that led to the splitting of an atom requires a moral revolution as well.”

President Barack Obama  May 27, 2016
“Lessons of Hiroshima and Orlando”
Communication Planning Steps

Step 1: Clarify Outcomes
Step 1: Clarify Outcomes

Be clear with what you want the audience to know, feel and do.

Be focused and specific.

Make sure your communication points to a next step.

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Step 2: Build a Plan

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GET INVOLVED
FOR INDIVIDUALS & NEIGHBORHOODS

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GET INVOLVED
FOR COMPANIES AND ORGANIZATIONS

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Step 2: Build a Plan

Be clear, be focused, be deliberate, be planful.

Know your theoretical underpinnings.

Distinguish between what you want to PREVENT and what you want to PROMOTE.

Message Communication

Who originates the message

Source

Composition

Strategy

Channel

Audience

Impact

Who transmits the message

Plan of action to create change: Know – Feel – Do

Message designed with structure, content and style, with knowledge of the audience in mind

Route of delivery (medium, approach); vehicle(s) for implementing the strategy

Who decodes the message

Degree of influence and persuasion experienced by the receiving audience

Stages of Change Model

<table>
<thead>
<tr>
<th>Stage</th>
<th>Definition</th>
<th>Potential Change Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Precontemplation</td>
<td>Has no intention of taking action within the next six months</td>
<td>Increase awareness of need for change; personalize information about risks and benefits</td>
</tr>
<tr>
<td>Contemplation</td>
<td>Intends to take action in the next six months</td>
<td>Motivate; encourage making specific plans</td>
</tr>
<tr>
<td>Preparation</td>
<td>Intends to take action within the next thirty days and has taken some behavioral steps in this direction</td>
<td>Assist with developing and implementing concrete action plans; help set gradual goals.</td>
</tr>
<tr>
<td>Action</td>
<td>Has changed behavior for less than six months</td>
<td>Assist with feedback, problem solving, social support, and reinforcement</td>
</tr>
<tr>
<td>Maintenance</td>
<td>Has changed behavior for more than six months</td>
<td>Assist with coping, reminders, finding alternatives, avoiding slips/relapses (as applicable)</td>
</tr>
</tbody>
</table>

Theory at a Glance
### Health Belief Model

<table>
<thead>
<tr>
<th>Concept</th>
<th>Definition</th>
<th>Potential Change Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Susceptibility</td>
<td>Beliefs about the chances of getting a condition</td>
<td><em>Define what population(s) are at risk and their levels of risk</em></td>
</tr>
<tr>
<td></td>
<td></td>
<td><em>Tailor risk information based on an individual’s characteristics or behaviors</em></td>
</tr>
<tr>
<td></td>
<td></td>
<td><em>Help the individual develop an accurate perception of his or her own risk</em></td>
</tr>
<tr>
<td>Perceived Severity</td>
<td>Beliefs about the seriousness of a condition and its consequences</td>
<td><em>Identify the consequences of a condition and recommended action</em></td>
</tr>
<tr>
<td>Perceived Benefits</td>
<td>Beliefs about the effectiveness of taking action to reduce risk of seriousness</td>
<td><em>Specify how, when, and where to take action and what the potential positive results will be</em></td>
</tr>
<tr>
<td>Perceived Barriers</td>
<td>Beliefs about the material and psychological costs of taking action</td>
<td><em>Offer reassurance, incentives, and assistance; correct misinformation</em></td>
</tr>
<tr>
<td>Cues to Action</td>
<td>Reasons that activate “readiness to change”</td>
<td><em>Provide “how to” information, promote awareness, and employ reminder systems</em></td>
</tr>
<tr>
<td>Self-Efficacy</td>
<td>Confidence in one’s ability to take action</td>
<td><em>Provide training and guidance in performing action</em></td>
</tr>
<tr>
<td></td>
<td></td>
<td><em>Use progress goal setting</em></td>
</tr>
<tr>
<td></td>
<td></td>
<td><em>Give verbal reinforcement</em></td>
</tr>
<tr>
<td></td>
<td></td>
<td><em>Demonstrate desired behaviors</em></td>
</tr>
</tbody>
</table>

### Aristotle’s Forms of Proof

<table>
<thead>
<tr>
<th>Concept</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Logos</td>
<td>Emphasizing a rational and logical approach, building upon scientific foundations. Often used to highlight assumptions upon which decisions are made, including challenging faulty assumptions.</td>
</tr>
<tr>
<td>Pathos</td>
<td>Addressing the emotions, aims, feelings, and social desires of individuals. Can tie into insecurities. Often linked to tragic events without attention to rational arguments.</td>
</tr>
<tr>
<td>Ethos</td>
<td>Promoting a quality character among the audience, through engaging in trustworthy sources. It is helpful to evoke good sense, good moral character, knowledge, and authority to gain the confidence of the audience.</td>
</tr>
</tbody>
</table>

### PREVENT vs. PROMOTE

<table>
<thead>
<tr>
<th></th>
<th>PREVENT</th>
<th>PROMOTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violence</td>
<td>Accurate knowledge</td>
<td></td>
</tr>
<tr>
<td>Injury</td>
<td>Parental skills and awareness</td>
<td></td>
</tr>
<tr>
<td>Death</td>
<td>Development of personal norms</td>
<td></td>
</tr>
<tr>
<td>Ignorance about AOD Effects</td>
<td>Healthy choices</td>
<td></td>
</tr>
<tr>
<td>Stigma of AOD “fun”</td>
<td>Resistance and refusal skills</td>
<td></td>
</tr>
<tr>
<td>Adverse effects</td>
<td>Treatment services readily available</td>
<td></td>
</tr>
<tr>
<td>Family issues, neglect</td>
<td>Intervention skills</td>
<td></td>
</tr>
<tr>
<td>Car crashes</td>
<td>Awareness of effects of substances</td>
<td></td>
</tr>
<tr>
<td>Adolescent drug use</td>
<td>Further research</td>
<td></td>
</tr>
<tr>
<td>Distribution of unregulated drugs</td>
<td>Consistent enforcement</td>
<td></td>
</tr>
<tr>
<td>Diseases associated with AOD use</td>
<td>Variety of positive activities</td>
<td></td>
</tr>
<tr>
<td>Use of tobacco</td>
<td>Mental health</td>
<td></td>
</tr>
<tr>
<td>Unintended consequences</td>
<td>Sober drivers</td>
<td></td>
</tr>
</tbody>
</table>
Step 3: Identify Strategies and Channels

<table>
<thead>
<tr>
<th>Brochure</th>
<th>Poster / poster series</th>
<th>Sticker</th>
<th>Banner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Radio announcement</td>
<td>Television spot</td>
<td>Cable banner</td>
<td>Screen saver</td>
</tr>
<tr>
<td>Facebook</td>
<td>Twitter</td>
<td>Fact sheet</td>
<td>Electronic signage</td>
</tr>
<tr>
<td>Speech</td>
<td>Workshop</td>
<td>Flash lecture</td>
<td>Presentation</td>
</tr>
<tr>
<td>T-Shirt</td>
<td>Post card</td>
<td>Resource guide</td>
<td>Bracelets</td>
</tr>
<tr>
<td>Checklist</td>
<td>Newsletter content</td>
<td>Letter to editor</td>
<td>Self-test</td>
</tr>
</tbody>
</table>
Step 4: Gather Tools and Resources

- Logos, Pathos and Ethos
- Data, Numbers, Facts
- Examples or Testimonials
- Expert Opinions
- “What If” Scenarios
- Creative Epidemiology
- Social Marketing
- Social Norms Marketing
- Positioning
- Linking and Pairing
- Miscellaneous: humor, acronym, easy phone number, memorable website
Step 5: Make It Persuasive

The Consequences of College Drinking

- Death: 1,000 college students die from alcohol-related unintentional injuries.
- Assault: More than 666,000 college students are assaulted by another student who has been drinking.
- Unsafe Sex: More than 100,000 students report having been too intoxicated to have sex.
- Sexual Abuse: More than 97,000 students are victims of alcohol-related sexual assault or date rape.
- Injury: Nearly 600,000 students receive unintentional injuries while under the influence of alcohol.
- Academic Problems: One-quarter of college students report academic problems due to their drinking.
Step 5: Make It Persuasive

Credible
[Sources; sponsoring agencies]  Current

Attention-getting
[inviting; appealing; colorful]  Points to the next step

Clear & understandable
[not too simple or complex]  Actionable

Personally relevant
[applicable]  Connect to audience

Blend facts & emotion
[message, words, images, style]  Uniform

Free of errors
[proper grammar, spelling]  Appropriate formatting

Visually engaging
[color contrast; date with day of week]  Consistent

Blend facts & emotion
[message, words, images, style]  Uniform

Free of errors
[proper grammar, spelling]  Appropriate formatting

Visually engaging
[color contrast; date with day of week]  Consistent
Step 6: Review

Have an evaluation plan
- Have this at the beginning
- Engage others to provide assistance

Assess the messaging
- Was the message heard or seen?
- What was its reach?
- Did it reach the desired audience?
- What message was heard?
- Did it promote/encourage someone to act?

Do focus groups
- What messages are students hearing?
- What messages would resonate with them?
- Have discussions with RAs (e.g.,) to assess what messages they intend to send (and compare with what was heard).

Messages About Alcohol from Teachers/Counselors

From Understanding Teen Drinking Cultures in America Study
https://caph.gmu.edu/resources/highschool/review
“Quick Start Guide”

Webinar Aims

* Learning more effective communication strategies for reaching students
* Gain skills for persuasive communication
* Enhance confidence with advocacy
Articulating and marketing the message and philosophy of the campus-based effort requires a clear message and policy statements, which are based in the philosophy.

Advocacy Tips

- Be prepared
- Speak up
- Offer progress reports or status updates
- Frame the issue within the institutional context (mission statement, strategic priorities)
- Don't set self up for failure with large, unachievable goals
- Build a strategic plan with measures and milestones
- Equip the decision-makers with tools, speaking points
- Acknowledge how much others don’t know about this issue (prevention, dependence, recovery)
- Remember that this is an uphill battle
- Be educated, learn, study, ask, write
- Use resources and data (e.g., Action Steps for College Leaders, Wellness Issues for Higher Education)
- Have the courage to speak up
Draft Discussion Points:
One page summary with accompanying briefing book

- Acknowledge the depth and breadth of the problems associated with drugs and alcohol
- Believe that most drug and alcohol problems are preventable
- Accept that colleges and universities have a unique leadership role in addressing these problems.
- Recognize the most professionals learn on the job.
- Know about the students who are coming to campus.

Action Steps for College Leaders:
What Leaders Should Know

- Acknowledge the depth and breadth of the problems associated with drugs and alcohol
- Believe that most drug and alcohol problems are preventable
- Accept that colleges and universities have a unique leadership role in addressing these problems.
- Recognize the most professionals learn on the job.
- Know about the students who are coming to campus.

From “New Directions for Substance Abuse Prevention”
Change: November/December 2011
Action Steps for College Leaders: What Leaders Should Say

- Talk about the issue
- Listen to the professionals who are dealing with drug and alcohol issues and learn from their clinical experience.
- Insist that a variety of people be involved with this issue.
- Applaud good work.

*From “New Directions for Substance Abuse Prevention” Chang, November/December 2011*

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Action Steps for College Leaders: What Leaders Should Do

- Ensure that the campus dedicates attention to this issue through the use of a designated coordinator, task force, or commission and that it assess the effectiveness of its efforts on a regular basis.
- Make sure that the aims of the campus-based efforts are reasonable, appropriate and achievable.
- Invest in a range of long-range substance abuse services.
- Encourage the development of innovative strategies, and then assess them.
- Ensure that sufficient resources are available.
- Demonstrate bold leadership by being engaged and caring.

*From “New Directions for Substance Abuse Prevention” Chang, November/December 2011*

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CollegeAIM, with its matrix-based tool, guide, website, and related resources, is meant to be used in conjunction with your school's own processes for anticipating and responding to the needs of your student body, campus environment, and surrounding community. You probably already apply a variation of these steps for college prevention programs:

- Assess the problems on your campus and set priorities.
- Select strategies by exploring evidence-based interventions.
- Plan how you'll carry out the chosen strategies and how you'll measure results, and
- Take action—implement the chosen strategies, evaluate them, and refine your program.

CollegeAIM supports the second step, select strategies. For help with the other phases, please see the Supporting Resources section.

[www.collegedrinkingprevention.gov](http://www.collegedrinkingprevention.gov)
The U. S. Surgeon General recently stated that he wants to move the U.S. to a “prevention-based society.”

He stated his vision that “every institution .... recognizes and embraces the role that it can play in improving health.”

The Washington Post

April 24, 2015

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