

Creating Persuasive Media Messages



William D. Crano, PhD

Professor of Psychology & Director

Health Psychology and Prevention Science Institute

Claremont Graduate University

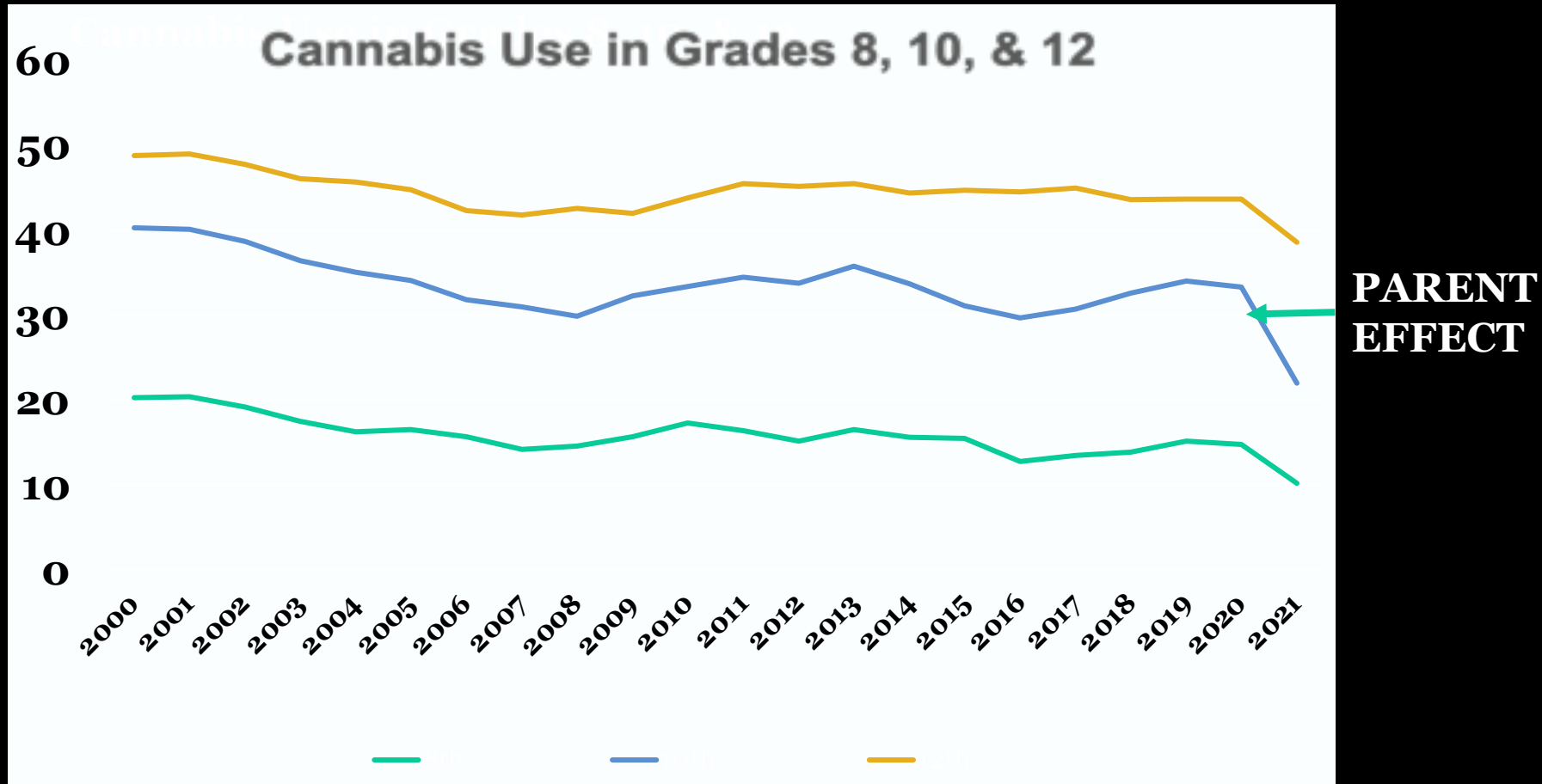
William.Crano@cgu.edu

The U.S. National Youth Anti-drug Media Campaign:

What was, and what might have been...

- Success of media campaigns is far from guaranteed
- From 1998-2002, the USA spent \$1,400,000,000 to administer the National Youth Anti-drug Media Campaign
- National campaign, with major target – 12-18 year olds
- Despite these expenditures, the evaluators of the campaign were forced to conclude the following:
 - Greater exposure to the campaign was associated with weaker anti-drug norms and increases in the perceptions that other [youth] used marijuana
 - And, in some measurement periods, **greater use** of marijuana was associated with **higher frequency of exposure** to the preventive ads

Marijuana use by US youth across time: Combined effects of supply and demand reduction efforts over the years, and after \$\$billions expended



Does it matter that our efforts have not succeeded?

Yes! Because...

Marijuana use by adolescents is linked to:

- Learning deficits & inferior academic achievement
- Higher levels of aggression and delinquency
- Higher likelihood of car-related injury (self & others)
- Poorer relations with parents
- Greater risks of contracting sexually transmitted diseases
- More positive attitudes toward drugs and drug use
- Today's marijuana is 17x more powerful in the 1960s than earlier versions
- Addiction: more adolescents enter treatment with a primary diagnosis of marijuana dependence than for all other illegal drugs combined.
- **More associations with delinquent and drug-using friends**
- **Much higher risk of dangerous drug use in adulthood**
- **Interference with normal brain development in youth**



Three reasons why media have failed to deliver positive outcomes

- **Failure to understand mass media**
 - What are they designed to do?
 - What are they NOT designed to do?
- **Failure to understand of persuasion**
 - What must we do to induce people to adopt our advice, especially when they do not want to do so?
 - Not enough to inform. Must overcome resistance or apathy
- **Failure to understand how these features interact**
 - That is, how do we integrate the reach and immediacy of the media with our understanding of persuasion to create successful media-based prevention campaigns?



What are the essential features of the mass media? That is, what are media best designed to do?

- Fundamental features of mass media – what they are designed to do:

Engage -- Instruct -- Persuade

- In a substance prevention context using media to deliver the preventive communication, all three of these factors **must** be present, along with a process that questions and undermines established pro-drug attitudes, if they are part of the target's belief system
- If any of these features is ignored or poorly implemented, the media-based prevention attempt is not likely to succeed, or will be less than optimally effective

What are the critical features of persuasive communications? What must they do?

- After considering many established, evidence-based theories of persuasion, we find that effective media
 - Assume initial resistance
 - Are designed to accomplish three CRUCIAL functions (see Hovland et al.):
 - Raise a question in about the advisability of an action or belief, and undermine the answer with strong communications that are difficult to counter
 - Provide information that answers the question, relieving the stress of belief disconfirmation
 - Reinforce acceptance of the message
- To enhance effectiveness, we add...
 - Target or tailor the persuasive message to unique susceptibilities of the group or individual to enhance message effects

How can we integrate the critical media and persuasion features?

The EQUIP algorithm

- The EQUIP algorithm integrates the essential features of the media
- It details the central features of persuasive media-based prevention communications
- It suggests a procedure for designing successful media-based messages, based on strong scientific evidence

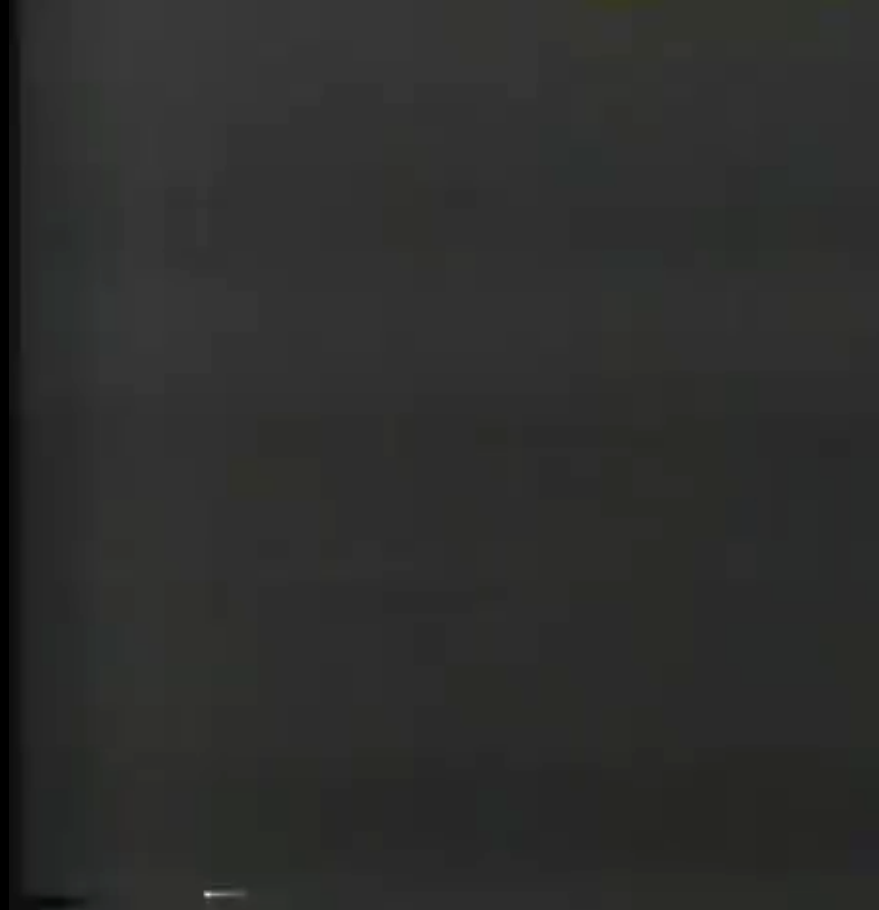


The EQUIP Model

- **Engage:** Attract and maintain attention of your audience
 - **Question:** Raise question in mind of receiver about the attitude
 - **Undermine:** Destabilize this attitude
 - **Inform:** Provide plausible replacement of existing belief
 - **Persuade:** Provide incentives for agreement with your message
-
- The **EQUIP** model assumes resistance;
 - It integrates functions critical in persuasion;
 - It assumes the appropriate audience is targeted,
 - It supplies a guiding framework for media-based substance prevention



The signature ad of a national anti-drug media campaign in the U.S.



Does this ad satisfy our **EQUIP** criteria?

- Certainly not all of them:
 - **ENGAGE**: Did it attract people's attention? Yes, initially.
 - **QUESTION**: Did it raise a question in viewers' minds? No.
 - **UNDERMINE**: Did it threaten existing beliefs & provide alternative? No.
 - **INFORM**: Did it tell you how to avoid frying your brain? No.
 - **PERSUADE**: Was it persuasive? No. It is telling me to avoid a drug, but not how to do so, or why I should do so. It will not succeed.
- BUT, everyone remembers the 'this is your brain on drugs' ad!
- There is a difference between an ad's **memorability** and its **persuasiveness**. This ad was memorable – but not persuasive.
- This was a creative and memorable ad that satisfied only one of the **EQUIP** criteria - **ENGAGE**. As we might expect, evidence showed it had no preventive effect.

“The Truth”: Humor & irony often succeed





What to do? Back to Basics



- We assume adolescents do not always believe what they are told, especially when dealing with psychotropic drugs
 - Social psychologists call this “resistance”
- If this is so, then overcoming resistance may result in positive persuasive effects
- There is considerable literature, built up over the past 6 decades that suggests what to do and how to do it
- This literature fits perfectly with our EQUIP requirements, and facilitates our attempts to integrate preventive media with persuasion



Given these understandings, we try to...

- Make resistance difficult, impossible, or apparently unnecessary



- Target or tailor the persuasive message to unique susceptibilities of the group or individual to enhance message effects



- Always engage parents in adolescent prevention campaigns



Our early research



- Divided receivers into:
 - **Resolute nonusers**
 - **Vulnerable nonusers**
 - **Users**
- This is different from the usual treatment model, which often divides users into groups [experimenters, established, addicted or SUD.]
- In a cessation context, we might distinguish users on the depth of their SUD – probably different messages work better depending on the individual’s degree of SUD
- Our division reflects our focus on **prevention**, rather than treatment
 - It is considerably **easier to prevent** initiation than to treat SUDs – and costs much less to prevent

Our approach? Following the **EQUIP** model, we attempted to mitigate resistance

- Started with focus groups to judge our initial attempts at creating persuasive communications – revise & rerun
- Then, in a new sample, pretest to determine & differentiate resolute nonusers from vulnerable users from users in their responses to the communications
- Deliver an anti-inhalant communication to randomly selected subjects (youth, 11-14 years old)
 - Independent variables were:
 - **User status** (resolute non-user, vulnerable non-user, user)
 - **Source** (attractive high school student vs. MD)
 - **Apparent Target of Communication** (parent vs. adolescent)
– misdirection*
 - *Misdirection is meant to lessen our audience's perceptions of the need to resist our message

Example of Misdirection

- “Parents [Students], I’d like to talk to you today about an important issue...message attacked illicit substance use
 - Middle-school youth significantly more persuaded by “Parents” ad. Why resist a message to Mom?
- Other successful campaigns
 - Arizona anti-smoking campaign –
 - Second-hand smoke ads directed to parents worked... on adolescents as well as parents!
 - Adolescents had no need to resist
 - Parents – the anti-drug” national campaign worked well. Why?
 - It informed parents -how to react to their kids’ substance use
 - And, because their children did not resist the anti-marijuana communication directed to their parents

Some of our studies that tested the strength of parents' actions on children's substance misuse

- Meta-analysis of 17 studies involving 35000 respondents
- **Link between parental monitoring (as reported by child) and marijuana use**
 - Results indicated a statistically significant negative relation between monitoring and adolescent marijuana use
 - **Stronger in girls than boys ($r = -.31$ vs. $-.19$)**
 - **Stronger when monitoring was defined in terms of knowledge ($r = -.32$ vs. $-.19$).**
 - **Strong evidence against file drawer effect: 7,358 studies of nil effects required to render overall result statistically non-significant**



Family structure and children's substance misuse – Study 4

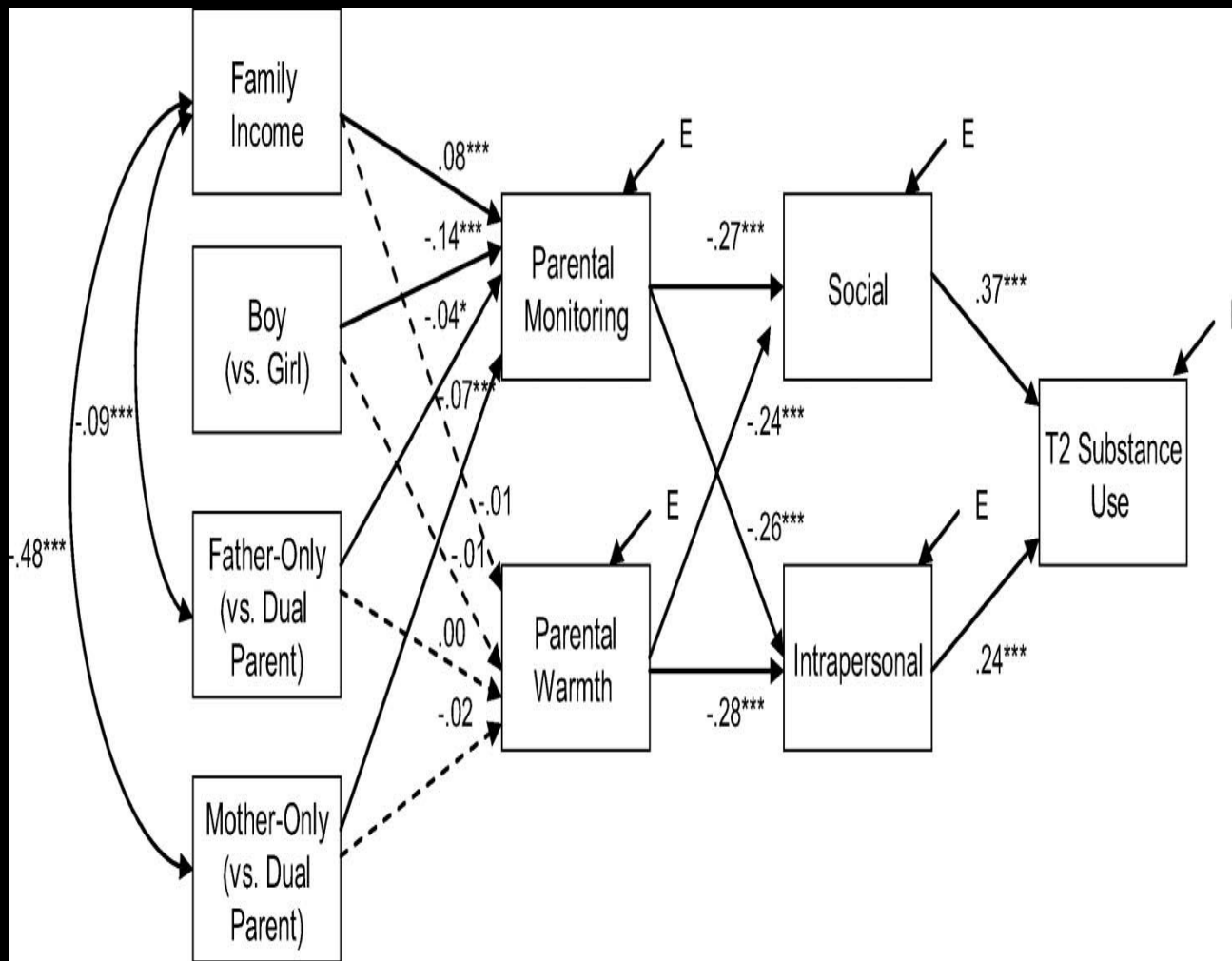


- **Modeling parental effects based on what we know**
 - Family dissolution is disruptive, often causing severe financial strain, often affecting **women more than men in the US**
 - **Time at work = time not at home monitoring adolescent children**
 - Children may turn to peers as sources of normative information, but peers often are not the best sources of normative information
 - **Misperception of norms of proper behavior may cause problems**

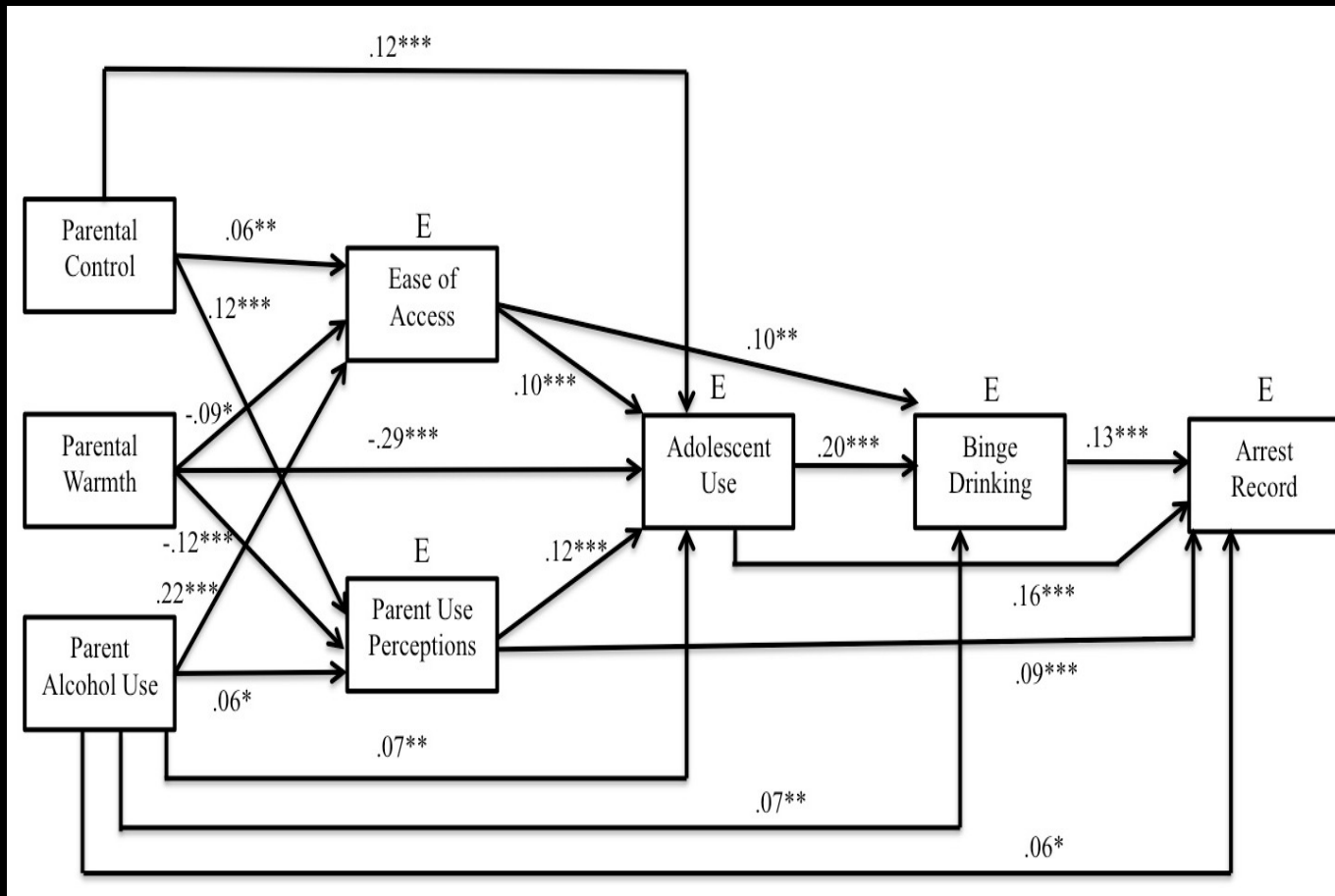
Used these well-accepted possibilities to build a structural model linking parent and child variables with adolescents' ($N = 4173$) marijuana usage one year later

*Hemovich, Lac, & Crano (CGU)

Parental effects on preventing their children's marijuana use



Path analytic model of parental effects on children's binge drinking and arrests across 14 years



What communication prevention specialists and policy makers should do to mount a successful campaign?

- First principle: Work to overcome resistance to your appeals
 - **Engage** your audience
 - **Question** existing (pro-drug) attitudes
 - **Undermine** this answer
 - **Inform** –attitudes are affected by information from strong messages
 - **Persuade** – incentivize adoption of your answer – show why it should be adopted
- **Do not over-promise or over-threaten**; fear arousal usually fails; unbelievable ads often result in future failures, because they generate stronger resistance to later persuasion campaigns
- For youth campaigns, **involve parents as opinion leaders**, if possible;
- **If not possible, make it possible**

Thank you for your
kind attention



Claremont

GRADUATE UNIVERSITY

William.crano@cgu.edu