# Scare Tactics: The Good, the Bad, the Ugly

## **Scare Tactics: A Proposed Definition**

Over-dramatization of the dangers of drug use in order to increase the motivation to avoid drugs; emphasizing the worst dangers of drug use in order to create fear and anxiety, in hopes that the *fear alone* will prevent or stop risky behaviors.

#### **Risks of Scare Tactics**

- Often youth dismiss these messages, as a defense to the feeling of fear. "That could never happen to me" or "I know people who do that, and they are fine." Sometimes youth laugh at these messages as a defense.
- Youth have a different filter than adults. They have less life experience to put the
  message in context and due to the status of their brain development they lack the
  judgment and impulse control needed to carry the impact of the message to the
  moment of choice.
- Youth may disbelieve other prevention messages, if the source seems unreliable.
- Scare tactics may actually enhance the attractiveness of drug use for high-sensation seekers, impulsive youth and risk takers.
- By focusing on the behavior of the minority we risk encouraging further dangerous behaviors. Strong warnings can send unintended messages like, "Drug use must be a big problem with lots of people doing it and resistance must be difficult."

# **Goals of Effective Message Design**

• Scientifically credible information on the negative consequences of using, presented in a developmentally appropriate way as part of a comprehensive program which includes skill development and action steps to avoid these consequences.

OR

Scientifically credible information on the benefits of NOT using, presented in a
developmentally appropriate way as part of a comprehensive program which includes
skill development and action steps to follow through with healthy choices.

#### Is there a role in prevention for personal stories?

- Yes! But not when educating youth, and with caution in other settings.
- Advocacy with community leaders, policy makers
- Obtaining community buy-in
- Educating parents (But need to follow-up with skills development!)
- AND ...
  - Is the story-teller READY to tell their story?
  - Story MUST be tied to a goal (should never be a "stand alone" strategy)
    - WHO am I talking to? Appropriate?
    - WHY am I speaking? Goal? Call to Action?
    - HOW does my story fit into a comprehensive approach with this audience?



## Message Design: Factors to Consider

- Is fear the primary element of the message?
- Can it stand the test of time?
- Will it erode by the light of truth or experience?
- Does it include concrete steps to avoid the problem?
   (Action messages cannot be about what NOT to do.)

# Messages can appeal to:

**Emotions** 

Most effective if positive emotions!

Self-esteem

Humor

Logic or reason

Positive modeling of other behaviors

# **Social Marketing**

- "Selling" health behaviors
- More than a traditional public awareness campaign
- Planned process
  - Identify clear target audience
  - Establish specific goals & objectives
  - Define the message
  - Identify the best media "channel"
  - Pre-test the message/materials
  - Implement
  - Evaluate
  - Refine
- Lessons learned: Rigorous planning process needed
  - Must reinforce core needs
  - Must TEST the messages!
  - Evaluation is crucial
  - Scare tactics don't work
  - These campaigns don't work alone, must be combined with other prevention strategies

# **Social Norms Marketing**

- Research shows many youth:
  - > overestimate the permissive attitudes of their peers, and
  - > underestimate the extent of peer support for & engagement in healthy behaviors.
- Social norming campaigns correct misperceptions of the norm

