National Leadership Forum’s speaker, Nathaniel Kendall-Taylor, PhD, shares his insight on prevention messaging and substance abuse communication.

**What challenges current substance abuse prevention communication?**

Over nearly two decades of research, we have found that prevention concepts are difficult to understand and, as a result, people don’t prioritize prevention-based social policies. People do understand individual acts and behaviors associated with prevention, such as going to the doctor for annual well-visits, getting immunization shots, and getting screened for cancer after a certain age. But they struggle to understand prevention outside of an individual behavior context. They don’t understand how structural factors, such as the density of liquor stores in a neighborhood or exposure to media stories that glorify substance use, contribute to substance abuse. And people struggle to think about how we might reorganize these structures so that we can prevent substance abuse and support better outcomes across populations. To put it simply, people understand prevention on an individual level—what it might look like inside the doctor’s office. But they don’t understand what it looks like outside of the doctor’s office, in our homes, schools, workplaces, and communities. Complicating the communication of prevention is its imperceptibility; when prevention “works,” abuse and addiction don’t materialize. This makes it hard for people to see and understand the value of prevention—and then to push for policies to promote it in society.

**How does media affect substance abuse prevention communication?**

In general, the media tell what we call “episodic” stories about social problems—stories about individuals that go into great detail about their unique experiences. They might lead a story about opioid use with an anecdote about a woman who becomes addicted to painkillers after back surgery, loses her job, then her home, and finally, custody of her children. The media uses graphic, granular detail about these kinds of worst-case scenarios to “hook” the reader with attention-grabbing leads, which are then illustrated with compelling close-up photos of individuals. The media doesn’t often tell “thematic” stories about the systemic factors that contribute to substance abuse or how we as a society can prevent it, and visuals to illustrate structural conditions are rarely used. Images are almost always of people. Even when reporters, editors, and producers do “widen the lens” and tell systemic stories, they often fail to explain how the systemic causes of abuse have systemic consequences or how we can prevent abuse with large-scale policy solutions.

On the whole, people who study media coverage of substance abuse have found that media stories are sensationalistic and devoid of meaningful information about how to effectively prevent and address substance use and addiction issues. On adolescent substance use in particular, the media tells two very different narratives. On one hand, the media normalizes adolescent substance use, which substantiates public beliefs that experimentation is natural, inevitable, and largely acceptable. At the same time, media stories frame the use of drugs other than alcohol and marijuana as a crisis that inevitably results in severe addiction. Both narratives have similar effects on public thinking: if use is a normal part of adolescent development, then the importance of prevention and early intervention is difficult to understand. Similarly, if severe addiction is the inevitable result of use of substances other than alcohol and marijuana, then early intervention is seen as futile.

**Should adolescent substance abuse prevention be framed differently? How?**

Yes. First, advocates must emphasize and explain how prevention and early intervention work—not on an individual level but from a social determinants perspective. People must understand how prevention works and why it matters. Prevention must become part of the American ideal, firmly entrenched in our collective psyche. Second, advocates should avoid talking about personal choices. Acknowledging the role of individual agency and emphasizing people’s ability to change may seem like a good idea given that this aligns with public thinking. But this will likely cause the public to think about substance use as an individual problem rather than a social one. Third, explain how systems are designed and can be redesigned. To combat the public’s sense of fatalism about this issue, the sector needs to emphasize the intentionality and mutability of systems—that the systems that we have are the result of choices we make and that we can remake them through different choices. This is a truly fundamental task. It is necessary to both increase the salience of substance abuse prevention and build support for solutions.