



# **REFRAMING ADOLESCENT SUBSTANCE USE AND ITS PREVENTION**

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**A COMMUNICATIONS PLAYBOOK**

# Welcome to the *Reframing Adolescent Substance Use and Its Prevention* playbook, a step-by-step guide to using evidence-based framing strategies to communicate about adolescent substance use.

Advocates want to build widespread support for the protective factors that can prevent adolescent substance use, but members of the public hold pre-existing assumptions about adolescents and substance use that act like roadblocks to that goal. Steering the conversation around these obstacles takes an understanding not only of *what* to say but also of *how* to say it. While some communications strategies will speed advocates toward their goal, others will slow them down or even halt progress completely.

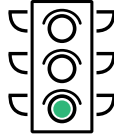
With support from the Conrad N. Hilton Foundation, the FrameWorks Institute has conducted extensive multi-method research to develop and test effective strategies for communicating about these issues with the public. The research base includes the following:

1. Interviews with Hilton Foundation staff and a panel of experts
2. 66 on-the-street interviews with members of the public in Philadelphia and Charleston
3. Three large-scale survey experiments sampling nearly 6,000 members of the public

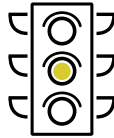
4. Persistence trials and peer discourse sessions with 24 members of the public in Denver and Baltimore
5. Peer discourse sessions with 13 health practitioners.

The findings are presented here as a set of field-tested framing strategies that can move advocacy communications goals forward more quickly and help the public catch up to experts' understanding of prevention strategies for adolescent substance use—what they are, how they work, and why they matter.

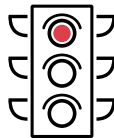
If framing is the vehicle that can carry your communications to their intended destination, then this playbook is the owner's manual. Inside, you'll find explanations of each framing strategy, models that illustrate how to apply it to a message, and helpful user notes. The guide is divided into three sections: strategies that get the green light, those that require users to proceed with caution, and those that should come with a flashing red signal to stop, as summarized in the following chart.



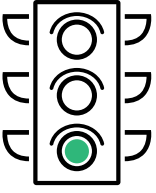
- **GO:** Pair the value of ***Moral Responsibility*** with explanations of the effects of adolescent substance use.
- **GO:** Use the ***Boiling Over*** metaphor to correct misperceptions and boost understanding.
- **GO:** Explain primary care providers' role in preventing adolescent substance use.
- **GO:** Feature pediatricians and adolescents as messengers.
- **GO:** Use alternatives to the word “screening” whenever possible.



- **CAUTION:** The order of your message matters, so curb the impulse to open with an appeal to the value of prosperity.
- **CAUTION:** Think twice before hitting the gas on analogies to other health problems, which is a largely ineffective strategy.



- **STOP:** Don't appeal to the value of health and happiness.
- **STOP:** Don't let the term “screening” drive solo.



# GO!

## Strategies to move your communications forward.

**GO:** Pair the value of *Moral Responsibility* with explanations of the effects of adolescent substance use to increase public support for evidence-based policies and programs.

The public's prevailing viewpoints about adolescent substance use are that it is a "natural" part of adolescents' developing social identity and that only parents and adolescents themselves are responsible for making sure it doesn't get out of hand. As a result, members of the public don't see the need for the kinds of evidence-based interventions and protective factors that experts recommend. From this standpoint, experimentation isn't much of a problem—or it's only a problem for families to worry about, not the public. If you want people to conclude otherwise, you need to help them get there.

Values are widely shared principles or beliefs that can prime your audience to see an issue from a certain perspective. Used at the start of your message, values set the course and tone for the conversation that follows; reinforcing them throughout the discussion keeps your audience on track. But not every value works to your advantage.

In a large-scale experiment, FrameWorks researchers tested several values and found that an

appeal to *Moral Responsibility* (the idea that adults have a moral obligation to protect adolescents from harm), paired with an explanation of the effects of substance use on adolescents' development, most productively shifted public attitudes about adolescent substance use and its prevention. In particular, this combination:

- Helps the public see health care providers' role in addressing adolescent substance use;
- Fosters public belief in a collective obligation to prevent and reduce substance use among youth; and
- Builds public support for evidence-based policies and programs that prevent or address adolescent substance use—including publicly funding such programs.

*The Moral Responsibility + Explanation of Developmental Effects* framing combination positions the prevention and reduction of adolescent substance use as a collective responsibility. Consider the following example:

"As adults, we have a responsibility to do everything we can to make sure our young people grow up to have healthy, strong futures. And one thing that stands in the way of that is drug and alcohol use. Drinking and substance misuse can negatively affect young people's school performance, future job prospects, and physical and mental health, damaging their lives well into adulthood. But together, this is something we can prevent from happening. It's our job to support policies and programs that prevent and reduce drug use among adolescents."

Remember, pairing the value with the explanation of effects is key. While some values can stand alone,

FrameWorks' research found that in communicating about adolescent substance use, the positive frame effects from appealing to *Moral Responsibility* appeared only when coupled with an explanation of the harmful developmental effects of substance use. The opposite was also true: Exposing members of the public only to an explanation of the harmful consequences of adolescent substance use had no positive effects.

Here's the bottom line: Begin messages about preventing and reducing adolescent substance use with the one-two formula of *Moral Responsibility + Explanation of Developmental Effects*.

### ✓ RECOMMENDATION IN ACTION:

Sample social media post with *Moral Responsibility + Explanation*

The screenshot shows a Facebook post interface. At the top, the Facebook logo and navigation icons are visible. Below is a search bar. The post is from a profile named "Sample Profile" with a profile picture of a park. The post text reads: "Three cheers for the town of Spring Park, the recipient of this month's Operation Future award for its community-wide commitment to young people's health and wellbeing! After seeing rates of adolescent substance use increase, the town council teamed up with local doctors, school officials, and youth organizations to host a symposium, 'It's on Us,' to share ideas and generate a plan to prevent substance use among Spring Park youth. 'We know substance use can affect adolescents' long-term physical and mental health and school performance, and we have an obligation to these kids to keep them safe and healthy,' said Spring Park Mayor Ana Jackson. The symposium generated a lot of buzz—no pun intended—and the town is implementing ideas that emerged at the event. These include a campaign to get local pediatricians to pledge publicly to have conversations about substance use with patients at regular checkups and a rezoning committee to look for opportunities to distance liquor stores from school zones, the community center, and the public library. The symposium has spun off into a regular community conversation series focused on healthy youth. Read more: bitly.link.org". To the right of the post, there is a text box containing a paragraph: "Communicating about a social issue is like walking into a busy public square: You're never the only one there. Instead of gliding smoothly to its target, your message has to try not to bump into the pre-existing assumptions and competing ideas that members of the public apply to your message, which can keep it from getting through. When talking about adolescent substance use, for example, these assumptions include the widely shared beliefs that experimentation with substance use is 'natural,' that some substances (alcohol, marijuana) are benign, and that substance use affects only the social rather than the biological development of adolescents." Below this paragraph is another text box: "To learn more about the assumptions and biases that can crowd out experts' messages about adolescent substance use and its prevention, read the following FrameWorks report: '[It's a Rite of Passage': Mapping the Gaps between Expert, Practitioner, and Public Understandings of Adolescent Substance Use.](#)'"

**GO: Use the *Boiling Over* metaphor to correct common misperceptions and promote public support for protective factors.**

When communicating with the public, remember that you are translating expert knowledge. It's important to explain key concepts in language your audience can understand and remember. Explanatory metaphors can help by comparing an unfamiliar idea or concept to a common event, object, or process to make the idea or concept memorable, and "easy to think."

While members of the public understand many of the *risk* factors for adolescent substance use (such as parental or peer use), they lack an understanding of how *protective* factors prevent or mitigate adolescent substance use—knowledge that is key to public support for effective programs and interventions that can prevent and reduce substance use early. To bridge this gap between expert and public understanding, FrameWorks tested several metaphors (for more details on FrameWorks research methods, read the report *Turning Down the Heat on Adolescent Substance Use*). The *Boiling Over* metaphor proved most effective:

*When adolescents experiment with alcohol and other drugs, it can heat up and boil over into a bigger problem. By creating environments that keep the heat down for adolescents, we can prevent substance use from boiling over into a bigger problem.*

By comparing substance use to heat on a stove burner, the *Boiling Over* metaphor explains how controlling the environmental factors that contribute to adolescent experimentation and its escalation can prevent or reduce substance use and its consequences. This analogy reframes adolescent substance use as both *preventable* and *remediable*, steering members of the public away from their deeply shared belief that experimentation is inevitably escalatory and

irreversibly harmful.

What's more, the metaphor proved to be exceptionally memorable: In persistence trials,<sup>1</sup> *Boiling Over* passed easily from participant to participant without losing its intended meaning. "Sticky" metaphors amplify advocates' reach by spreading from the original audience to wider circles in a ripple effect.

The *Boiling Over* metaphor is also flexible in that it can be creatively adapted to a wide variety of messages, as in the following examples:

- ***The pot won't heat up if the stove isn't turned on.*** This metaphor can be used to explain how prevention works and to talk about the relationship between social factors and adolescent development.
- ***Even when things start simmering, adjusting the heat can temper the situation.*** This metaphor can be used to explain that intervention can make a difference and good outcomes are possible at any point.
- ***Lowering the heat can be a simple but effective correction.*** The metaphor can be used to introduce the idea that intervention can be as simple as a conversation between a pediatrician and an adolescent patient about substance use, fostering public optimism that feasible interventions exist.
- ***Evidence-based programs and policies can prevent adolescent experimentation from boiling over.*** Use the metaphor to keep the focus, and the responsibility, on contextual factors.

Above all, remember that good metaphors are flexible by design and work best when given a chance to "breathe" throughout a message, so be creative with *Boiling Over*. The following chart of words, phrases, and images offers ideas for extending the metaphor without repetition.

<sup>1</sup> Persistence trials are a group-based research method in which pairs of participants pass a metaphor to one another in conversation, thus enabling researchers to study how explanatory metaphors affect the public's reasoning and are communicated in social discourse.



## Meaning Map — *Boil Over*

### Related words and phrases

Boil / Rolling boil / Cook / Heat Up / Froth / Raise the heat / Steam / Bubble up / Simmer  
Stew / Warm / Foam / Turn the flame on high

### Antonymic words and phrases

Turn down / Lower / Temper / Turn off the heat / Let sit until cool / Reduce / Cool down  
Adjust the heat / Remove from the heat

### Visuals

Stoves / Pots / Flames / Smoke / Smoking pans / Temperature settings / Whistling teakettles  
Boiling liquids / Kitchen thermometers / Cookbooks / Recipes



## User Note:

Expert opinions on substance use vary when it comes to zero-use recommendations and the risks of low-level use by adolescents, but FrameWorks' research findings show that the *Boiling Over* metaphor works across the field's various communications goals.

The metaphor uses the heat of a stove to explain how environmental conditions can be controlled to keep adolescents from misusing substances ("keep a pot from boiling over"). The version of the metaphor used in peer discourse testing did not explicitly state that "a cool pot" meant zero use of substances. Some participants therefore interpreted that analogy to mean keeping adolescents' substance use at low levels rather than preventing their use entirely. Consequently, the metaphor did not change the public assumption that adolescent experimentation with substances is normal and acceptable, which accords with some advocates' positions on the issue as well.

But the metaphor also works for advocates who *do* want to problematize adolescent substance experimentation of any kind: Just take the temperature down even further by explicitly equating "a cold pot" with zero use. Applying the metaphor in this way can prevent the public from defaulting to the idea that experimentation is "natural."



https://www.cyaf.org

## Colorado Youth Action Forum Announces New “Chill Places, Cool Kids” Adolescent Substance Use Prevention Initiative

Denver, CO – The Colorado Youth Action Forum launches a new initiative today, “Chill Places, Cool Kids,” aimed at preventing substance use among children aged 10 to 18 by addressing the community conditions that create a warm environment for substance use and experimentation.

Funded by a state innovation grant, “Chill Places, Cool Kids” is inspired by recent research showing the effectiveness of environment-based interventions in reducing substance use among young people.

“Adolescence is a sensitive time for brain development; there’s a lot cooking in there during the adolescent years, and when you put substance use in the mix, things can boil over,” said Frank Haskins, a Denver pediatrician and volunteer consultant to the campaign. “The ‘Chill Places, Cool Kids’ campaign is about encouraging communities to turn down the heat by taking steps to create environments that make it easier for adolescents to avoid substance use—which can have huge carryover effects on their schooling, future job prospects, and long-term health.”

The initiative encourages communities across the state to lower substance-use rates by adopting evidence-based best practices in school and health care settings and zoning laws that keep liquor stores out of proximity to places where adolescents congregate, such as schools, libraries, and malls.

“Environments play a big role in how likely kids are to try substances like alcohol or marijuana—and as adults we have the power, the opportunity, and the obligation to design environments that can temper drug use among adolescents,” said executive director Whitney Harrison.

To mark the launch, the initiative is hosting a statewide event, “Chill Out, Colorado!” At community meetings across the state, pediatricians, policymakers, and school officials will lead conversations based on the “Chill Places, Cool Kids” community toolkit. Staff from the Colorado Youth Action Forum and substance-use experts will also be present at the meetings to answer questions and discuss actions communities can take to adopt effective measures to prevent adolescent substance use.

More information, including a calendar of upcoming events across Colorado, resources for elected officials and medical professionals, and information for communities on how to get involved, is available on the campaign’s website, [bitly.link.org](https://bitly.link.org).

For media inquiries, please contact Jesse Davis at 773-XXX-XXXX.



## **GO: Explain primary care providers' role in preventing adolescent substance use.**

Overwhelmingly, the public sees adolescent substance use as a social problem, not a health concern. Consequently, members of the public fail to understand the role primary care providers can and should play in preventing and mitigating young people's substance use through screenings at regular checkups. The public's skepticism about the validity of such interventions is based on a set of dominant assumptions:

- Screening means biological testing. Therefore, standardizing pediatrician screenings for substance use would be an invasion of adolescents' privacy and not a suitable intervention for all adolescents.
- Physician-patient confidentiality may not hold with pediatricians. Therefore, adolescents are unlikely to be honest with their pediatricians about substance use,

thus rendering the intervention ineffective.

- There are no clear ways pediatricians can prevent adolescent substance use.

Sometimes the best framing strategy is also the most obvious: Careful explanation works best here. When FrameWorks researchers exposed members of the public to a detailed explanation of what primary care providers can do to prevent substance use, taking care to address the sources of skepticism described above, participants' understanding of pediatricians' role in treating adolescent substance use as a health issue improved significantly compared to a control group that received no explanation.

In conclusion, take the time to fully explain—not just assert—health care providers' role in preventing adolescent substance use. Be sure to include language that allays the public's concerns about invasiveness, confidentiality, and what pediatricians actually can do.

### **✓ RECOMMENDATION IN ACTION: Sample Letter to the Editor with explanation**

To the *Gazette* Editor:

As a high school guidance counselor, I was pleased to read the March 15 article "Communities Look to Adults to Prevent Adolescent Drug Use," and I agree that we all have an obligation to do right by our young people. However, the article neglected to mention one important group of adults who can do more to prevent and reduce adolescent drug use: primary care physicians.

Pediatricians see patients at routine annual checkups, often treating the same children from birth to high school graduation, and therefore have both a regular opportunity to talk with adolescents and an existing relationship with them that can make conversations about substance use seem natural and easy. Adolescents can feel comfortable talking to pediatricians about drinking and drug use because anything a patient tells a pediatrician can be just between them (unless the patient is in imminent danger). Pediatricians can also give young patients information about how drinking and drug use can affect their health, as well as refer them to any help they might need, such as putting them in touch with a mental health professional.

Research shows that these types of conversations between pediatricians and young people are an effective means of reducing substance-use rates. We need to make it standard practice for pediatricians to ask their adolescent patients about substance use.

## **GO: Feature pediatricians and adolescents as messengers.**

While explanatory messages about health care providers' role build the public's understanding of adolescent substance use as a health concern, they fail to build public support for policy-based interventions. To overcome this framing challenge, FrameWorks' researchers turned to another frame element: messengers. Who delivers a message can influence the perceived credibility of the information, which can in turn determine how deeply the public supports the proposed solution.

In a large-scale experiment, FrameWorks found that two messengers in particular— adolescents and pediatricians—significantly increased public support for evidence-based policies to prevent

and address adolescent substance use. An adolescent expressing support for primary care providers' efforts to prevent adolescent substance use counters public skepticism about adolescents' willingness to be honest about their substance use in a health care setting. Pediatricians' perceived role as experts is likely why their messages allay the public's concern that primary care providers can't engage with adolescents well enough to form an effective "front line" against adolescent substance use.

Here's the main takeaway: If you plan to use messengers in your communications about adolescent substance use, pediatricians and adolescents yield the best results.

### **RECOMMENDATION IN ACTION: Radio PSA script with an adolescent messenger**

Fade in.

[Sounds of a co-ed group of young people playing an informal game—pick-up basketball, flag football, etc. Sounds of laughter, voices calling and talking over each other. The voice of one member of the group, ALEX, rises above the rest as the other voices fade. ALEX begins speaking directly to the audience.]

ALEX

Contrary to popular opinion, young people just want to grow up, do well in school, make our families and communities proud, and maybe even change the world for the better while we're at it. These aren't exactly the easiest years of our lives, though, and we could use some help along the way. Especially with stuff like alcohol and drugs. Research shows that early intervention is one of the most effective ways to prevent and reduce adolescent

drug use. “Early intervention” is adult-speak for something that can be as simple as a conversation between a pediatrician and a patient. When doctors talk to young people about substance use, they can answer our questions honestly, and we know it’ll just be between us and them. And they’re professionals, so if we do have a problem, they’ll know how to get us the help we need. Problem is, those conversations aren’t routine because not every doctor knows what a lifeline they can be. Let’s change that. Let’s make substance-use conversations as much a part of our checkups as old magazines in the waiting room, or elevator music, or . . . Well, you get the idea. Familiar. Routine.

[Background noise of adolescents playing a game starts to grow again. A voice calls ALEX’s name.]

ALEX

The truth is, to help prevent and reduce adolescent substance use, pediatricians don’t have to have all the answers. They just have to be willing to ask the question.

### **GO: Use alternatives to the word “screening” whenever possible.**

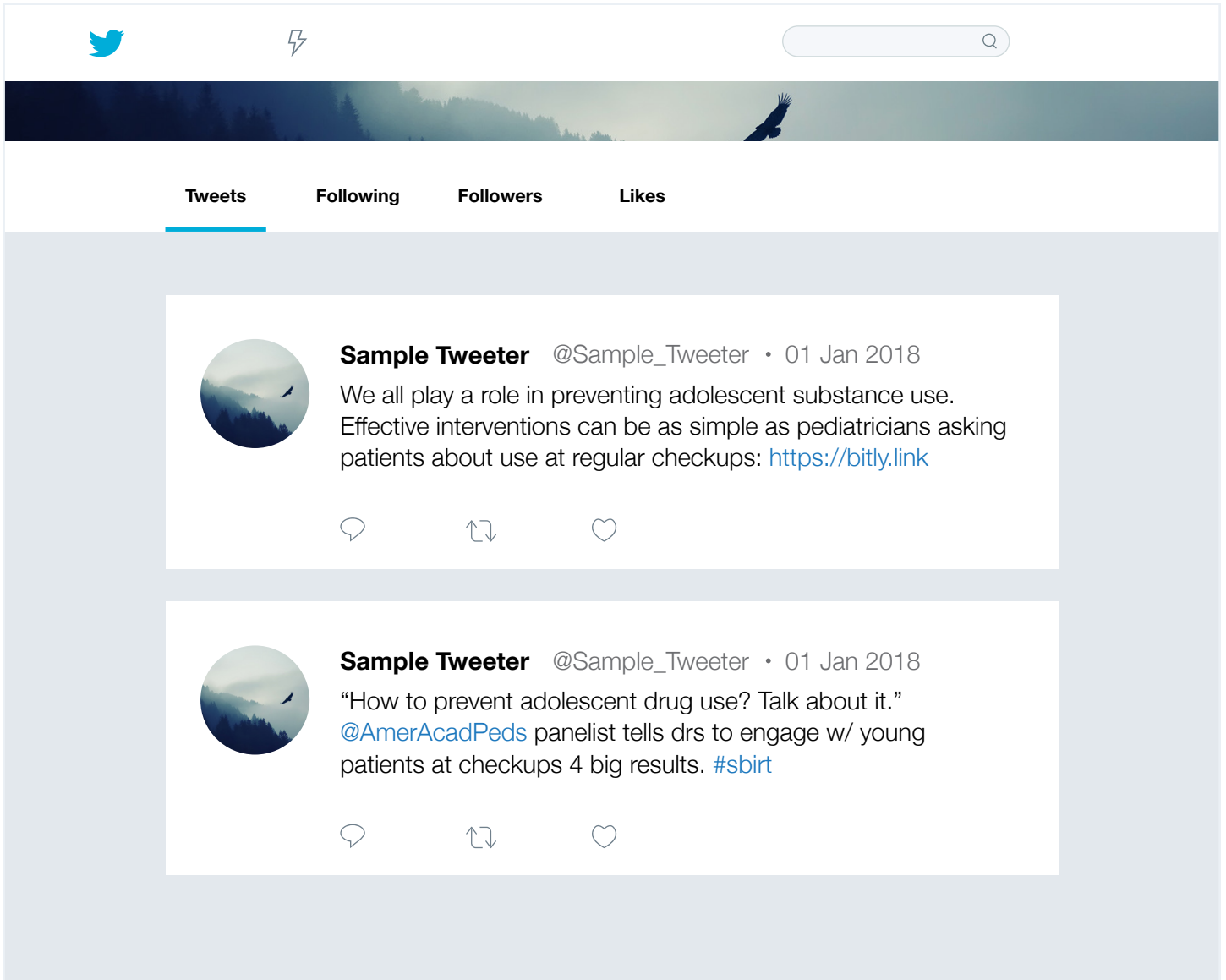
The Shakespearean heroine Juliet famously asks, “What’s in a name?” FrameWorks’ researchers would reply, “Well, quite a bit, actually.”

In on-the-street interviews, members of the public indicated time and again that the word “screening” alarms them. Americans are deeply opposed to routine collection of biological samples from adolescents to test for signs of alcohol or drug use, and FrameWorks’ research found that 75 percent of those who were exposed only to the word “screening” believed it referred

to invasive biological testing. Many of those surveyed also believed the purpose of screening is to punish adolescents caught using substances, indicating the word connotes surveillance and threat, which limits public support for the practice.

In contrast, replacing the word “screening” with phrases like “asking about use” or “having a conversation about use” significantly increased public support for intervention through primary care providers. Besides being less alarming, these alternatives also offer more explanation of what screening entails.

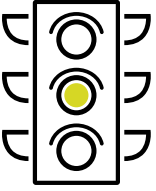
✓ **RECOMMENDATION IN ACTION:** Sample tweets with alternatives to the word “screening”



The image shows a screenshot of a Twitter profile page. At the top, there is a navigation bar with the Twitter logo, a lightning bolt icon, and a search bar. Below this is a header image of a forest with a bird in flight. The profile navigation tabs are 'Tweets', 'Following', 'Followers', and 'Likes', with 'Tweets' selected. Two tweets are displayed:

**Sample Tweeter** @Sample\_Tweeter • 01 Jan 2018  
We all play a role in preventing adolescent substance use. Effective interventions can be as simple as pediatricians asking patients about use at regular checkups: <https://bitly.link>

**Sample Tweeter** @Sample\_Tweeter • 01 Jan 2018  
“How to prevent adolescent drug use? Talk about it.”  
[@AmerAcadPeds](#) panelist tells drs to engage w/ young patients at checkups 4 big results. [#sbirt](#)



# SLOW DOWN!

## Strategies that require caution.

**CAUTION:** Curb the impulse to frame adolescent substance use and prevention as an issue of economic wellbeing or prosperity.

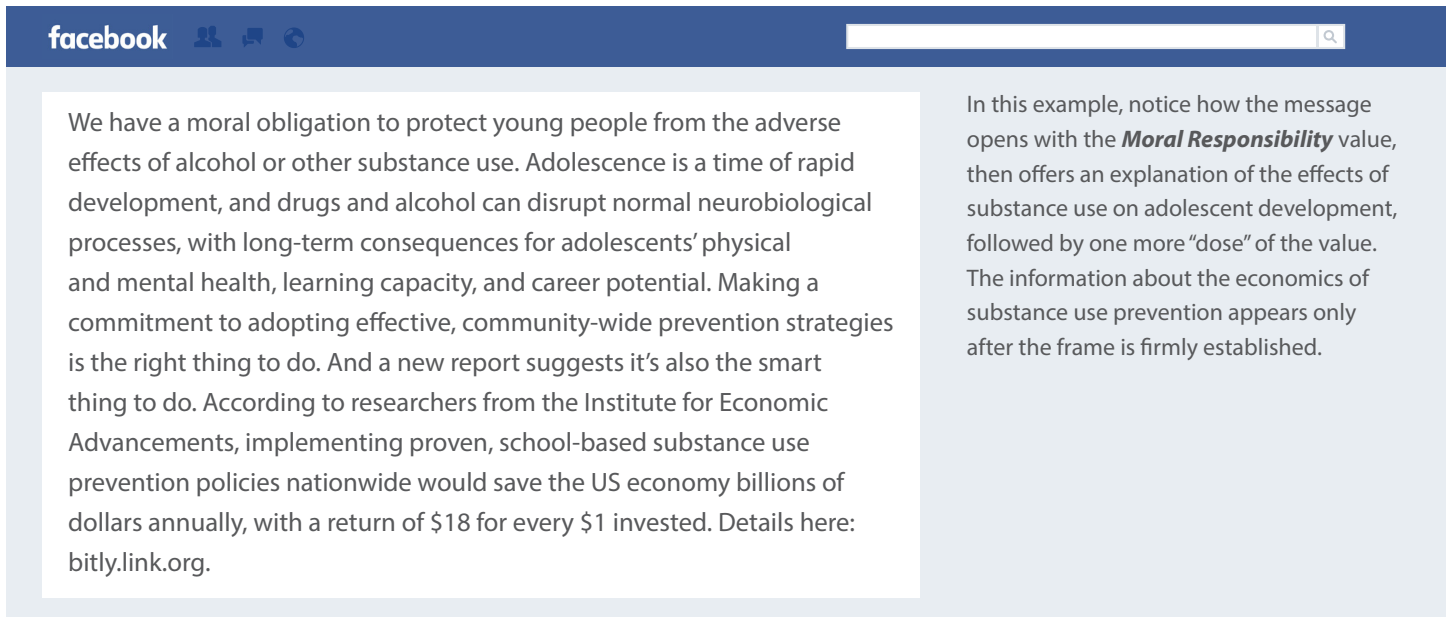
Given the constant hum of media stories on economic downturns and recoveries, tying adolescent substance use to the nation's economic prospects may be tempting, but not so fast! Remember, values communicated at the start of a message guide the public's interpretation of everything that follows, so the order of your frame elements matters.

In FrameWorks' research to discover which values best engage the public on adolescent substance use, economic wellbeing performed well in only one of five categories of outcome measures. While an appeal to prosperity improves the public's understanding of adolescent substance use as a health issue, it doesn't increase the public's belief in collective action, support for evidence-based solutions, or sense of responsibility to address the issue.

In summary, if your message must include the positive economic impact of programs that address adolescent substance use, put this one-trick pony in the middle of the show, not as the opening act.

## ✓ RECOMMENDATION IN ACTION:

Social media post that includes an appeal to *Prosperity* as content, not as the opening value

A screenshot of a Facebook post. The top bar is dark blue with the Facebook logo and navigation icons. The post content is in a white box with a light blue border. The text discusses the moral obligation to protect young people from substance use and mentions a report from the Institute for Economic Advancements. A search bar is visible at the top right of the post area.

facebook

We have a moral obligation to protect young people from the adverse effects of alcohol or other substance use. Adolescence is a time of rapid development, and drugs and alcohol can disrupt normal neurobiological processes, with long-term consequences for adolescents' physical and mental health, learning capacity, and career potential. Making a commitment to adopting effective, community-wide prevention strategies is the right thing to do. And a new report suggests it's also the smart thing to do. According to researchers from the Institute for Economic Advancements, implementing proven, school-based substance use prevention policies nationwide would save the US economy billions of dollars annually, with a return of \$18 for every \$1 invested. Details here: [bitly.link.org](https://bitly.link.org).

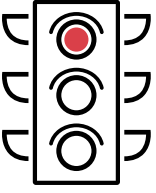
In this example, notice how the message opens with the **Moral Responsibility** value, then offers an explanation of the effects of substance use on adolescent development, followed by one more "dose" of the value. The information about the economics of substance use prevention appears only after the frame is firmly established.

### **CAUTION:** Think twice before hitting the gas on analogies to other health problems.

FrameWorks' researchers tested three common analogies—lead poisoning, high blood pressure, and asthma—that advocates use to explain the issues associated with adolescent drug use, and most of them failed. While an analogy to another health problem seems like a solid strategy to promote public support for early intervention and prevention of adolescent substance use, the challenge is that the public has a hard time seeing how contextual factors (a neighborhood's safety, air quality, access to health care, proximity to grocery stores, enforcement of housing regulations, and so on) play a role in individual health outcomes. Instead, members of the public reason that individuals are responsible for their own health: To avoid asthma, stop smoking; to avoid high blood pressure, stop eating fast food. Remember, analogies work by comparing the unfamiliar to the familiar. Since public health issues are not well understood by the public, using them as analogies is unlikely to achieve the desired effect.

In FrameWorks' experiments, only the asthma analogy showed any productive effects at all, though even these were limited to improving public understanding of the environmental risk factors that can influence adolescent substance use. The analogy did not increase public understanding of protective factors, support for evidence-based policies, or support for publicly funded solutions. Participants in the experiments couldn't carry the analogy to its conclusion; the difficulty people have in thinking of environmental solutions for asthma likely contributed to the analogy's failure to help people understand protective factors for adolescent substance use.

In short, asthma is the only health problem that FrameWorks found to be comparable to adolescent substance use, but it only helps the public understand the problems, not the solutions. You'd be better off using the *Boiling Over* metaphor in your messages.



# STOP!

## Strategies to avoid.

### **STOP: Don't appeal to health and happiness.**

All advocates share a passion for improving the lives of others. You want young people to thrive, and your commitment to that ideal is what drives you. While this is understandable, remember that communicating with the public is different from communicating with peers in the field. The health and happiness of adolescents may be worthy goals to you, but when FrameWorks researchers tested this values in a large-scale experiment, the results were—well, neither happy nor healthy.

Appeals to *Moral Responsibility* prime the public to see adolescent substance use as a public concern, and appeals to prosperity illustrate the collective benefit of addressing the issue. Appeals to adolescents' health and happiness, on the other hand, reinforce the public's entrenched belief that these ideals are a matter of individual choice and therefore require no collective action, which is why such appeals not only proved wholly ineffective but even showed negative (though not statistically significant) effects in four of the five categories of outcome measures.

A clever framer might try appealing to a more global sense of health and happiness. Therefore, FrameWorks also tested a collectivized appeal to the "health and happiness of our communities and our country," but this produced no better results.

The verdict is clear: Put the brakes on this strategy.

**STOP: Don't let the term "screening" drive solo.**

The most effective framing strategy for messages about screening adolescent substance use is to use alternatives such as "asking about substance use" or "having a conversation about substance use." In addition to avoiding the negative connotations of the word "screening," these alternatives more clearly describe what happens during a screening.

In some cases, however, the "s-word" is unavoidable, such as when you have to explain what the acronym SBIRT (screening, brief intervention, and referral for treatment) stands for. The best strategy in these cases is to pair the term "screening" and its variants with one of the alternatives, as in "screen by asking" or "screen by having a conversation about substance use." Adding an alternative phrase to your message is like popping the clutch: It's not as effective as using the key to start the car, but it still gets you on your way.

Strategic framing can be a challenge not only because the most effective frames are often counterintuitive but also because your messages aren't the only cars on the road. For a closer look at the stories and strategies currently driving public discourse on adolescent substance use, read [Telling Stories that Explain](#), FrameWorks' analysis of how news media and advocacy organizations are framing adolescent substance use.



# CONCLUSION

**CLOSING:** Framing is both art and science. The evidence-based strategies in this playbook can guide your framing choices, but remember that these strategies are like a carpenter’s hammer and nails: They can be used in lots of ways for many different projects. By frequently and creatively applying communications tools to messages across your channels—short and long, formal and colloquial, in print and out loud—you can move the public conversation about adolescent substance use and its prevention forward, faster.



## SUMMARY OF RECOMMENDATIONS:

- **GO:** Pair the value of *Moral Responsibility* with explanations of the effects of adolescent substance use.
- **GO:** Use the *Boiling Over* metaphor to correct misperceptions and boost understanding.
- **GO:** Explain primary care providers’ role in preventing adolescent substance use.
- **GO:** Feature pediatricians and adolescents as messengers.
- **GO:** Use alternatives to the word “screening” whenever possible.
  
- **CAUTION:** The order of your message matters, so curb the impulse to open with an appeal to the value of prosperity.
- **CAUTION:** Think twice before hitting the gas on analogies to other health problems, which is a largely ineffective strategy.
  
- **STOP:** Don’t appeal to the value of health and happiness.
- **STOP:** Don’t let the term “screening” drive solo.



This playbook and the research on which it is based were generously funded by the Conrad N. Hilton Foundation, in order to further advance its work on adolescent substance use prevention and early intervention.

### **About the FrameWorks Institute**

The FrameWorks Institute is a nonprofit think tank that advances the nonprofit sector's communications capacity by framing the public discourse about social problems. Its work is based on Strategic Frame Analysis®, a multi-method, multidisciplinary approach to empirical research. FrameWorks designs, conducts, publishes, explains, and applies communications research to prepare nonprofit organizations to expand their constituency base, to build public will, and to further public understanding of specific social issues—the environment, government, race, children's issues, and health care, among others. Its work is unique in its breadth—ranging from qualitative, quantitative, and experimental research to applied communications toolkits, eWorkshops, advertising campaigns, FrameChecks®, and in-depth FrameLab study engagements. In 2015, it was named one of nine organizations worldwide to receive the MacArthur Foundation's Award for Creative and Effective Institutions.

Learn more at [www.frameworksinstitute.org](http://www.frameworksinstitute.org).

*Writing credits: Jennifer Nichols, Moira O'Neil.*

*Design credits: Oluwasegun Adesina, Chris Vo.*

