

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: "Smith, Karen (OD ("Smith, Karen (OD/ORS)" <smithk@nihrrlib.ncrr.nih.gov> [UNKNOWN])

CREATION DATE/TIME:29-JUL-1999 14:56:36.00

SUBJECT: RE: REQUEST

TO: Paul A. Gaist (CN=Paul A. Gaist/OU=OPD/O=EOP [OPD])
READ:UNKNOWN

TEXT:

Here's some initial info for you, Paul. Look at it before you print it out -
it's almost 200 pages because I (perhaps foolishly), downloaded the full-text of
the articles where possible. I have some other references to go through, which
I will probably e-mail to you later today. (Looks like you've got your weekend
work ahead of you.)
Karen

-----Original Message-----

From: Paul_A._Gaist@opd.eop.gov [mailto:Paul_A._Gaist@opd.eop.gov]
Sent: Thursday, July 29, 1999 11:34 AM
To: Smith, Karen (OD/ORS)
Subject: RE: REQUEST

Karen:

Yikes - this is something that would be so helpful to me if you could do this before you leave at the end of this week (nice how I put that huh, since the "end of the week" is tomorrow!). I need to find the literature (research and otherwise) that addresses the efficacy/effectiveness of public services announcements (often referred to as "PSAs") -- yes - the focus is on HIV/AIDS PSAs, but if there are pieces that speak to the efficacy of PSAs in a generic sense, that would be potentially useful as well. Much of the HIV PSA work has been done by CDC and other non-Govt orgs, but it is probably that research/evaluation studies have been conducted and published on these PSA campaigns.

Sorry for the time line, but this came to me 10 minutes ago, with a time to give a synopsis report (with back up materials) 9 a.m. Monday morning.

Much much appreciated - Paul

I am at an all day meeting(s) - but you can reach me by cell phone (240) 432-8657; if I don't answer, leave a message and I'll call you back asap.

- Paul

TEXT:

{\rtf1\ansi\deflang1033\deff0{\fonttbl
{\f0\fnil\fcharset0\frq2 Times New Roman;}}{\colortbl
\red0\green0\blue0;}
{\stylesheet{\fs20 \snext0 Normal;}
\margl1440\margr1440\ftnbj\ftnrestart\aftrnarr \sectd \sbknone\endnhere
{*\pnseclvl1\pndec\pnstart1 {\pntxta .}}
{*\pnseclvl2\pnlcltr\pnstart1 {\pntxta .}}
{*\pnseclvl3\pnlcrm\pnstart1 {\pntxta .}}
{*\pnseclvl4\pndec\pnstart1 {\pntxtb (}{\pntxta)}}
{*\pnseclvl5\pnlcltr\pnstart1 {\pntxtb (}{\pntxta)}}
{*\pnseclvl6\pnlcrm\pnstart1 {\pntxtb (}{\pntxta)}}
{*\pnseclvl7\pndec\pnstart1 {\pntxta .}}
{*\pnseclvl8\pnlcltr\pnstart1 {\pntxta .}}
{*\pnseclvl9\pnlcrm\pnstart1 }

\pard \qj\sl0
{\plain \fs20 >>> TNVT _ Dialog, to host 192.132.3.254 \par
{\plain \fs20 \par
{\plain \fs20 \par
{\plain \fs20 Estimated cost of output requested is: \$133.30 \par
{\plain \fs20 Are you ready to receive all output? (Yes/No/Help) \par
{\plain \fs20 ?n \par
{\plain \fs20 TYPE Command cancelled. \par
{\plain \fs20 ?t 15/3,ab/all \par
{\plain \fs20 >>>No matching display code(s) found in file(s): 146, 180, 258,
468, \par
{\plain \fs20 636_637, 655, 660, 665, 861 \par
{\plain \fs20 \par
{\plain \fs20 Estimated cost of output requested is: \$102.20 \par
{\plain \fs20 Are you ready to receive all output? (Yes/No/Help) \par
{\plain \fs20 ?n \par
{\plain \fs20 TYPE Command cancelled. \par
{\plain \fs20 ?t 15/9/all \par
{\plain \fs20 \par
{\plain \fs20 Estimated cost of output requested is: \$133.30 \par
{\plain \fs20 Are you ready to receive all output? (Yes/No/Help) \par
{\plain \fs20 ?y \par
{\plain \fs20 \par
{\plain \fs20 15/9/1 (Item 1 from file: 9) \par
{\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
{\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par
{\plain \fs20 \par
{\plain \fs20 02460248 01960597 (THIS IS THE FULLTEXT)
\par
{\plain \fs20 Georgia_Pacific Stresses Hygiene \par
{\plain \fs20 (Georgia_Pacific creates Georgia_Pacific *Health* Smart Instit
ute to \par
{\plain \fs20 provide guidance on sanitary practices; places *Health* Smart

label on \par
{{\plain \fs20 various paper products) \par
{{\plain \fs20 Brandmarketing, v VI, n 4, p 34 \par
{{\plain \fs20 May 1999 \par
{{\plain \fs20 DOCUMENT TYPE: Journal ISSN: 0018\3660 (United States) \par
{{\plain \fs20 LANGUAGE: English RECORD TYPE: Fulltext \par
{{\plain \fs20 WORD COUNT: 503 \par
{{\plain \fs20 \par
{{\plain \fs20 TEXT: \par
{{\plain \fs20 By RICHARD TURCSIK \par
{{\plain \fs20 \par
{{\plain \fs20 ATLANTA __ Did you know more than a billion germs can grow on
that sponge \par
{{\plain \fs20 sitting on your kitchen sink counter after just one day? \par
{{\plain \fs20 \par
{{\plain \fs20 Thanks to the Georgia_Pacific Health Smart Institute, millions
of consumers \par
{{\plain \fs20 are now learning about this and other not_so_fun germ facts. T
hey are also \par
{{\plain \fs20 learning about how using paper towels, napkins and other paper p
roducts can \par
{{\plain \fs20 substantially reduce the incidence of food_borne illness at hom
e and on the \par
{{\plain \fs20 road. \par
{{\plain \fs20 \par
{{\plain \fs20 Georgia_Pacific created the Health Smart Institute to evaluate
and \par
{{\plain \fs20 facilitate ways to improve personal and family hygiene practices
, including \par
{{\plain \fs20 using disposable paper products, like paper towels, toilet tissu
e, facial \par
{{\plain \fs20 tissues and napkins. \par
{{\plain \fs20 \par
{{\plain \fs20 The promotion is being guided by the Institute's Advisory Board,
which is \par
{{\plain \fs20 composed of five leading health experts in the hygiene, infectio
us \par
{{\plain \fs20 diseases, infection_prevention and control, food_borne pathoge
ns and \par
{{\plain \fs20 microbiology fields. The experts are paid a stipend for helping
\par
{{\plain \fs20 Georgia_Pacific develop the guidelines. \par
{{\plain \fs20 \par
{{\plain \fs20 photo omitted \par
{{\plain \fs20 \par
{{\plain \fs20 To educate the public, Georgia_Pacific here has placed a Health
Smart logo \par
{{\plain \fs20 on all its packages of Sparkle, Angel Soft, Coronet and MD paper
products. \par
{{\plain \fs20 \par
{{\plain \fs20 The logo began appearing on the packaging late last summer, foll
owed by a \par
{{\plain \fs20 public_relations campaign in the fourth quarter. Television com
mercials and \par

print ads broke on Valentine's Day, and in-store materials, including floor ads, are available. The ads tout the benefits of using paper products to combat germs and disease. Tips are also printed on the back of the packages. The campaign is also being backed with a toll-free phone number (1-877-GPCLEAN) and a Web site (www.gphealthsmart.com). And the effort has begun to pay off. "We are experiencing double-digit growth and we are outpacing the category in gaining market share," Rob Lorys, director of marketing for the Packaged Products Group at Georgia-Pacific, told Brand Marketing. He said the campaign is breathing life into a previously mature category that only saw growth from new product introductions, like double rolls of toilet paper or ultra paper towels. "This new positioning platform for all of our brands will benefit the entire paper category -- toilet tissue, paper towels, facial tissue, paper napkins," Lorys said. "We have percentage growth estimates that this positioning platform will result in more people using paper products because of the messages we are sending out there to the effectiveness of paper in removing germs," he noted. For example, according to the Health Smart Institute, washing an apple in water removes about 75% of its contaminating germs, but rinsing and drying with a paper towel can remove up to 99% of germs. The Institute also suggests drying your hands with clean paper towels after washing, and using paper towels to turn the faucets on and off. Barry Michaels, product development manager at Georgia-Pacific, said the idea for the Home Health Institute originated from a similar program

}{\plain \fs20 Georgia_Pacific had developed for its commercial paper division
 in 1993, \par
 }{\plain \fs20 shortly before the Jack_In_The_Box E. coli incidents on the W
 est Coast. \par
 }{\plain \fs20 \par
 }{\plain \fs20 "We did research and realized how important paper products could
 be in \par
 }{\plain \fs20 terms of personal health," Michaels said. \par
 }{\plain \fs20 \par
 }{\plain \fs20 Copyright 1999 Fairchild Publications, a division of C
 apital \par
 }{\plain \fs20 Cities Media, Inc. \par
 }{\plain \fs20 \par
 }{\plain \fs20 \par
 }{\plain \fs20 COMPANY NAMES: GEORGIA_PACIFIC CORP \par
 }{\plain \fs20 INDUSTRY NAMES: Paper products \par
 }{\plain \fs20 PRODUCT NAMES: Tissue paper and stock including sanitary (2620
 56) \par
 }{\plain \fs20 CONCEPT TERMS: All market information; Marketing campaign \par
 }{\plain \fs20 MARKETING TERMS: All campaign; All general; All media; All prod
 uct \par
 }{\plain \fs20 marketing; Campaign *effectiveness*; General product marketing
 ; \par
 }{\plain \fs20 Point_of_purchase; *Public* *service* *advertising* \par
 }{\plain \fs20 GEOGRAPHIC NAMES: North America (NOAX); United States (USA) \par
 }{\plain \fs20 \par
 }{\plain \fs20 \par
 }{\plain \fs20 15/9/2 (Item 2 from file: 9) \par
 }{\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
 }{\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par
 }{\plain \fs20 \par
 }{\plain \fs20 02262624 01675391 (THIS IS THE FULLTEXT)
 \par
 }{\plain \fs20 TACKLING POOR COMMUNICATION \par
 }{\plain \fs20 (*Health* Authorities ad campaigns to educate public about appro
 priate use \par
 }{\plain \fs20 of GPs viewed) \par
 }{\plain \fs20 Community Pharmacy, p 14 \par
 }{\plain \fs20 October 1998 \par
 }{\plain \fs20 DOCUMENT TYPE: Journal ISSN: 0960_376X (United Kingdom) \par
 }{\plain \fs20 LANGUAGE: English RECORD TYPE: Fulltext \par
 }{\plain \fs20 WORD COUNT: 511 \par
 }{\plain \fs20 \par
 }{\plain \fs20 ABSTRACT: \par
 }{\plain \fs20 Article presents re_education efforts of two *Health* Authoriti
 es (HAs) for \par
 }{\plain \fs20 local populations in order to improve communication and reduce \par
 }{\plain \fs20 inappropriate use of primary healthcare providers and out_of_h
 ours GP \par
 }{\plain \fs20 calls, which currently cost the NHS some UKPd14 mil. Twelve HAs

in the

{\plain \fs20 Northern & Yorkshire region and the regional office implemented

a

{\plain \fs20 UKPd100,000 TV campaign produced by professionals in order to im

prove

{\plain \fs20 patients' propriety in using GPs. This was followed up with a UK

Pd11,000

{\plain \fs20 *evaluation* study. The HA statistics showed that patients aged

20_50

{\plain \fs20 accounted for nearly 25% of the out_of_hour calls in the Teess

ide area,

{\plain \fs20 making off_peak TV the medium of choice. The Somerset HA joined

up with

{\plain \fs20 North & East Devon, South & West Devon, Cornwall & Isles of Scil

ly to

{\plain \fs20 provide UKPd57,000 for a local campaign that used a cartoon HUTH

Y (Help Us

{\plain \fs20 To Help You) family in TV and radio ads. The article reports on

the

{\plain \fs20 successes of each program. \par

{\plain \fs20 \par

{\plain \fs20 TEXT: \par

{\plain \fs20 Speakers at the PAGB's NHS 50th Anniversary Debate, where the fi

ndings of

{\plain \fs20 the PAGB Everyday Healthcare Study were aired, believe the basis

for

{\plain \fs20 pharmacy's PR crisis lies with patients' confusion over the role

, and

{\plain \fs20 training of the pharmacist. But much can be done to redress a si

tuation of

{\plain \fs20 poor communication. Inappropriate use of the primary healthcare

team and

{\plain \fs20 unnecessary out_of_hours GP calls currently cost the NHS aroun

d #14

{\plain \fs20 million. Here, two Health Authorities, on different budgets, sho

w how they

{\plain \fs20 re_educated their local population. \par

{\plain \fs20 \par

{\plain \fs20 Northern & Yorkshire HAs _ a regional campaign \par

{\plain \fs20 \par

{\plain \fs20 Twelve Health Authorities in the Northern & Yorkshire region, pl

us the

{\plain \fs20 regional office, clubbed together to run a #100,000 professional

ly_ \par

{\plain \fs20 produced regional TV campaign to encourage people to make more a

ppropriate

{\plain \fs20 use of GPs. They followed up the promotion with an #11,000 evalu

ation

{\plain \fs20 study. \par

{\plain \fs20 According to HA statistics, the 20_50 year old age group accoun

ts for

{\plain \fs20 almost 25 per cent of out_of_hours calls in the Teesside area.

Off_peak TV

{\plain \fs20 was, therefore, felt to be the most appropriate and value_for_

money target \par

{{\plain \fs20 medium. Back_up included: GP surgery leaflets, posters, a leaflet drop and \par

{{\plain \fs20 PR. \par

{{\plain \fs20 \par

{{\plain \fs20 Market research revealed a 40 per cent recall of the primary advertising \par

{{\plain \fs20 message: 'Call your doctor up before you call your doctor out' and a 40 per \par

{{\plain \fs20 cent increase in the number of people who said they would accept advice \par

{{\plain \fs20 over the telephone if the GP did not believe a visit was necessary. \par

{{\plain \fs20 Campaign organisers said pooling resources resulted in a high cost campaign \par

{{\plain \fs20 at minimal individual cost. Key to the success was careful research into \par

{{\plain \fs20 the target audience's beliefs and motivations. \par

{{\plain \fs20 \par

{{\plain \fs20 South and West _ a local campaign \par

{{\plain \fs20 \par

{{\plain \fs20 Somerset HA linked with North & East Devon, South & West Devon, Cornwall & \par

{{\plain \fs20 Isles of Scilly in 1996 to pool #57,000 for a local campaign that \par

{{\plain \fs20 followed_up a second national initiative encouraging better use of primary \par

{{\plain \fs20 healthcare professionals. \par

{{\plain \fs20 \par

{{\plain \fs20 Its campaign centred around a fictional cartoon HUTHY family (an acronym of \par

{{\plain \fs20 Help Us To Help You) who appeared in a 30_second local TV and radio \par

{{\plain \fs20 campaign, advertising a consumer self_help leaflet. Following the campaign, \par

{{\plain \fs20 the number of requests for leaflets and the number of night visits were \par

{{\plain \fs20 tracked and county GP practices, pharmacies, opticians and dentists were \par

{{\plain \fs20 sent a feedback questionnaire. In the immediate campaign aftermath, 781 \par

{{\plain \fs20 calls were logged, predominantly from the Somerset and Devon areas. At the \par

{{\plain \fs20 time of the HUTHY campaign in Somerset, the number of calls to the GP fell \par

{{\plain \fs20 by 34 per cent compared to the previous week and night visits fell 5.25 per \par

{{\plain \fs20 cent to 16,439 and later to 15,840. While other initiatives were also \par

{{\plain \fs20 on_going during this period, the steep drop was attributed to the campaign. \par

{{\plain \fs20 \par

{{\plain \fs20 The anecdotal feedback was mixed, however. Generally, it was felt that \par

}{\plain \fs20 patients were not aware of the campaign, nor had read the guide.
 Around 27 \par
 }{\plain \fs20 per cent did think the campaign had affected the number of inappropriate \par
 }{\plain \fs20 call\ _outs and 17 per cent felt that it had promoted better use of the \par
 }{\plain \fs20 primary healthcare team. \par
 }{\plain \fs20 \par
 }{\plain \fs20 A fifth felt it had increased the home treatment of minor ailments. \par
 }{\plain \fs20 \par
 }{\plain \fs20 Copyright 1998 Miller\ _Freeman plc \par
 }{\plain \fs20 \par
 }{\plain \fs20 INDUSTRY NAMES: *Health* care delivery; Insurance; Retailing non_food \par
 }{\plain \fs20 PRODUCT NAMES: Drug stores and proprietary stores (591000); Hospital and \par
 }{\plain \fs20 medical service plans (632400); Health care services (800000); \par
 }{\plain \fs20 Administration of public health programs (943000) \par
 }{\plain \fs20 CONCEPT TERMS: All product and service information; Costs \par
 }{\plain \fs20 MARKETING TERMS: All campaign; All general; All media; Association \par
 }{\plain \fs20 advertising; Cooperative campaign; *Public* *service* *advertising*; \par
 }{\plain \fs20 Radio; TV advertising; Ad volume \par
 }{\plain \fs20 GEOGRAPHIC NAMES: European Union (EUCX); United Kingdom (UNK); Western \par
 }{\plain \fs20 Europe (WEEX) \par
 }{\plain \fs20 \par
 }{\plain \fs20 \par
 }{\plain \fs20 15/9/3 (Item 3 from file: 9) \par
 }{\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
 }{\plain \fs20 (c) 1999 Resp. DB Svcs. All rights reserved. \par
 }{\plain \fs20 \par
 }{\plain \fs20 02239992 01631782 (THIS IS THE FULLTEXT) \par
 }{\plain \fs20 Mich. AFD Starts Drive For Safer Food Handling \par
 }{\plain \fs20 (Associated Food Dealers of Michigan launches state_wide food safety \par
 }{\plain \fs20 campaign that follows guidelines of nationally sponsored Fight BAC! \par
 }{\plain \fs20 safety campaign) \par
 }{\plain \fs20 Supermarket News, v 48, n 36, p 33+ \par
 }{\plain \fs20 September 07, 1998 \par
 }{\plain \fs20 DOCUMENT TYPE: Journal ISSN: 0039_5803 (United States) \par
 }{\plain \fs20 LANGUAGE: English RECORD TYPE: Fulltext \par
 }{\plain \fs20 WORD COUNT: 717 \par
 }{\plain \fs20 \par
 }{\plain \fs20 ABSTRACT: \par
 }{\plain \fs20 The Associated Food Dealers of Michigan has begun a state_wide food safety \par
 }{\plain \fs20 campaign that follows the guidelines of the nationally sponsored

Fight BAC! \par

{{\plain \fs20 safety campaign. Independent retailers in Michigan are using the program to \par

{{\plain \fs20 train workers and educate consumers on how to prevent bacterial \par

{{\plain \fs20 contamination of food and food_borne illnesses. Over 100 retailers are \par

{{\plain \fs20 participating in the program, which emphasizes 4 main points about \par

{{\plain \fs20 preparing and storing food safely. The Associated Food Dealers has also \par

{{\plain \fs20 issued press releases offering a free Fight Bac! brochure to consumers. \par

{{\plain \fs20 Hollywood Supermarkets (Detroit), a 4_unit retail chain, began using the \par

{{\plain \fs20 Associated Food Dealers' program 3 months ago. It also uses Fight Bac! \par

{{\plain \fs20 graphics in shopping circulars in which the self_service meat and deli \par

{{\plain \fs20 departments are featured. \par

{{\plain \fs20 \par

{{\plain \fs20 Meanwhile, the Detroit Free Press released a report on several food safety \par

{{\plain \fs20 violations and *health* department infractions at some supermarkets in the \par

{{\plain \fs20 Detroit area. It based its ratings on the letter_grade *evaluation* system \par

{{\plain \fs20 used by regulators to determine inspection priorities and decide how often \par

{{\plain \fs20 a store should be inspected. Stores with the lowest rating are inspected \par

{{\plain \fs20 every 2 months due to a relatively high number of citations during a \par

{{\plain \fs20 previous visit. One of the retailers mentioned in the Detroit Free Press \par

{{\plain \fs20 articles as having received a poor rating was VOS Buying Group's (Warren, \par

{{\plain \fs20 MI) Vegas Foods. Frank Ancori, president of VOS Buying Group, a 12_unit \par

{{\plain \fs20 chain, said that the company has made food safety a primary focus and \par

{{\plain \fs20 trains its employees to use Fight Bac! materials. \par

{{\plain \fs20 \par

{{\plain \fs20 TEXT: \par

{{\plain \fs20 By MINA WILLIAMS \par

{{\plain \fs20 \par

{{\plain \fs20 SOUTHFIELD, Mich. (FNS) __ As the Associated Food Dealers of Michigan here \par

{{\plain \fs20 embarked on its own state_wide food safety campaign, the Detroit Free Press \par

{{\plain \fs20 reported a number of food safety violations and health department \par

{{\plain \fs20 infractions at area supermarkets. \par

{{\plain \fs20 \par

}}\plain \fs20 To area retailers' dismay, the newspaper based its stories on a letter \par
}}\plain \fs20 evaluation system regulators use to establish inspection priorities. This \par
}}\plain \fs20 A__through__E system helps health department officials determine how \par
}}\plain \fs20 frequently a store should be inspected. E__rated stores, for example, are \par
}}\plain \fs20 inspected on a two__month schedule because they received a relatively high \par
}}\plain \fs20 number of citations during a prior visit. \par
}}\plain \fs20 \par
}}\plain \fs20 With the increase in high__risk foods being sold at supermarkets, more and \par
}}\plain \fs20 more retailers are trying to establish policies and practices that will \par
}}\plain \fs20 reduce the risk of bacterial contamination. \par
}}\plain \fs20 \par
}}\plain \fs20 The food safety campaign mounted by the AFD follows the guidelines of the \par
}}\plain \fs20 nationally sponsored Fight BAC! food safety campaign. Area independents are \par
}}\plain \fs20 using the program to train a revolving labor pool and educate customers \par
}}\plain \fs20 about preventing bacterial contamination. \par
}}\plain \fs20 \par
}}\plain \fs20 More than 100 retailers are participating in the program, which stresses \par
}}\plain \fs20 four key principles for safely preparing and storing food: washing hands \par
}}\plain \fs20 and surfaces often, preventing cross contamination, cooking foods to proper \par
}}\plain \fs20 temperatures and refrigerating food promptly. In addition to the retailer \par
}}\plain \fs20 materials, the AFD issued press releases offering consumers a free Fight \par
}}\plain \fs20 BAC! brochure that explains the four steps in easy__to__understand and \par
}}\plain \fs20 simple__to__remember terms. \par
}}\plain \fs20 \par
}}\plain \fs20 "Food safety is the No. 1 concern for those in the food industry in this \par
}}\plain \fs20 country," said Joe Sarafa, president of the AFD. "We are taking it to the \par
}}\plain \fs20 next level in Michigan and making sure the details are in place to help \par
}}\plain \fs20 prevent cases of food__borne illness that can be prevented in the home." \par
}}\plain \fs20 \par
}}\plain \fs20 Participating retailers view the AFD's effort as a way to keep food safety \par
}}\plain \fs20 on the minds of retail associates and consumers. \par
}}\plain \fs20 \par
}}\plain \fs20 "We want to be proactive," said Torn Welsh, owner of Hollywood \

par
}}\plain \fs20 Supermarkets, a four_unit chain in the Detroit area. "We starte
d using the \par
}}\plain \fs20 program three months ago. Our department managers are trained so
far, but \par
}}\plain \fs20 we are just getting started. We want to do it right at the store
level and \par
}}\plain \fs20 get this information to our consumers." \par
}}\plain \fs20 \par
}}\plain \fs20 To reach consumers, the operator also uses Fight BAC! graphics i
n \par
}}\plain \fs20 circulars, on the center spread where the self_service meat and
deli \par
}}\plain \fs20 departments are featured. The color logo and safe handling tips
give \par
}}\plain \fs20 consumers information they may not have had before, Welsh said.
\par
}}\plain \fs20 \par
}}\plain \fs20 The fact that the meat and deli departments are service_oriente
d gives \par
}}\plain \fs20 associates an opportunity to use the information in consumer edu
cation \par
}}\plain \fs20 efforts. \par
}}\plain \fs20 \par
}}\plain \fs20 "The program has forced us to aggressively determine the need fo
r our staff \par
}}\plain \fs20 to make food safety a priority and a primary focus," said Frank
Ancori, \par
}}\plain \fs20 president of 12_unit VOS Buying Group, Warren, Mich. Employees
of VOS are \par
}}\plain \fs20 trained to use the Fight BAC! materials. \par
}}\plain \fs20 \par
}}\plain \fs20 VOS' Vegas Foods was one of the retailers mentioned in the newsp
aper \par
}}\plain \fs20 expose. Ancori told SN that one unit's D rating was based on the
fact that \par
}}\plain \fs20 a deli clerk did not his wash hands between customers, even thou
gh the \par
}}\plain \fs20 clerk did change gloves. Inspectors found dust on the ceiling an
d a cracked \par
}}\plain \fs20 wall tile. \par
}}\plain \fs20 \par
}}\plain \fs20 "(As) opposed to maggots in the meat grinder, which placed anothe
r \par
}}\plain \fs20 operator's store in the same poor rating, my infractions were mi
nimal and \par
}}\plain \fs20 were immediately corrected. We were in full compliance the next
\par
}}\plain \fs20 inspection," said Ancori. \par
}}\plain \fs20 While sales remain unaffected following the report, Ancori did s
ay \par
}}\plain \fs20 customers were questioning the articles. "One customer asked how
she could \par
}}\plain \fs20 be shopping in the store for four years and not see anything wro

ng, and now \par
}}\plain \fs20 she is reading that the store got a poor rating," he said. "The stories do \par
}}\plain \fs20 not indicate how we received the rating, only what the rating was." \par
}}\plain \fs20 \par
}}\plain \fs20 Welsh also expressed concern that the newspaper reports wrongly implied \par
}}\plain \fs20 that the letter ranking _ _ designed merely to set the frequency of \par
}}\plain \fs20 inspections _ _ grades the actual cleanliness of facilities. One of his \par
}}\plain \fs20 units producing salads for the rest of the chain, and he fears its lower C \par
}}\plain \fs20 or D rank might be misinterpreted by the public as an actual food safety \par
}}\plain \fs20 grade. \par
}}\plain \fs20 \par
}}\plain \fs20 In the wake of the media reports, the Michigan Food and Beverage \par
}}\plain \fs20 Association has asked Gov. John Engler to make food safety a top priority. \par
}}\plain \fs20 \par
}}\plain \fs20 Copyright 1998 Fairchild Publications, a division of Capital \par
}}\plain \fs20 Cities Media, Inc. \par
}}\plain \fs20 \par
}}\plain \fs20 \par
}}\plain \fs20 COMPANY NAMES: ASSOCIATED FOOD DEALERS OF MICHIGAN; HOLLYWOOD SUPERMARKETS \par
}}\plain \fs20 ; VOS BUYING GROUP \par
}}\plain \fs20 PRODUCT NAMES: Food stores (540000) \par
}}\plain \fs20 CONCEPT TERMS: All company; All market information; All product and \par
}}\plain \fs20 service information; Joint venture; Marketing campaign; Number outlets; \par
}}\plain \fs20 Public relations; Quality \par
}}\plain \fs20 MARKETING TERMS: All general; All media; Association advertising; Print \par
}}\plain \fs20 advertising; *Public* *service* *advertising* \par
}}\plain \fs20 GEOGRAPHIC NAMES: North America (NOAX); United States (USA) \par
}}\plain \fs20 \par
}}\plain \fs20 \par
}}\plain \fs20 15/9/4 (Item 4 from file: 9) \par
}}\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
}}\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par
}}\plain \fs20 \par
}}\plain \fs20 02226188 (THIS IS THE FULLTEXT) \par
}}\plain \fs20 Education and Prevention Evidence that *HIV* Prevention Saves Lives and \par
}}\plain \fs20 Dollars Presented \par
}}\plain \fs20 (Study finds only 3,995 *AIDS* infections must be prevented annually to \par

{{\plain \fs20 result in cost_savings from education and prevention programs
)\par
{{\plain \fs20 AIDS Weekly Plus, p N/A \par
{{\plain \fs20 August 10, 1998 \par
{{\plain \fs20 DOCUMENT TYPE: Newsletter ISSN: 0884_903X (United States) \pa
r
{{\plain \fs20 LANGUAGE: English RECORD TYPE: Fulltext \par
{{\plain \fs20 WORD COUNT: 859 \par
{{\plain \fs20 \par
{{\plain \fs20 ABSTRACT: \par
{{\plain \fs20 According to findings on *AIDS* education and prevention, presen
ted by the \par
{{\plain \fs20 US Centers for Disease Control and Prevention (CDC), *AIDS* prev
ention has \par
{{\plain \fs20 been *effective*, saving both money and lives. Using economic mo
deling \par
{{\plain \fs20 tools developed by CDC scientists which compare lifetime treatme
nt costs \par
{{\plain \fs20 against current national investment in *HIV* prevention to deter
mine, the \par
{{\plain \fs20 study found that only 3,995 infections must be prevented annuall
y to result \par
{{\plain \fs20 in cost_savings, and only 1,255 infections must be prevented fo
r the \par
{{\plain \fs20 investment to be cost_ *effective*. David Holtgrave, PhD, NCHSTP
, and \par
{{\plain \fs20 colleagues estimate current lifetime treatment costs for *HIV* n
ow averages \par
{{\plain \fs20 \$154,402, representing the money saved per infection averted thr
ough \par
{{\plain \fs20 prevention. Full text looks at *AIDS* prevention programs and co
st savings \par
{{\plain \fs20 resulting from such programs. \par
{{\plain \fs20 \par
{{\plain \fs20 TEXT: \par
{{\plain \fs20 Cost_effectiveness estimates, combined with the most comprehens
ive \par
{{\plain \fs20 evaluation to date of available prevention research, leave no do
ubt that \par
{{\plain \fs20 the nation's efforts to prevent HIV infection have paid off. The
U.S. \par
{{\plain \fs20 Centers for Disease Control and Prevention (CDC) believes the fi
ndings, \par
{{\plain \fs20 presented at the 12th International AIDS Conference, held in Gen
eva, \par
{{\plain \fs20 Switzerland, June 28 _ July 3, 1998, will help HIV prevention p
rograms make \par
{{\plain \fs20 the best use of limited resources by basing program decisions on
the \par
{{\plain \fs20 science of what works best for populations at risk. "We have mor
e evidence \par
{{\plain \fs20 than ever before that prevention works and that it saves dollars
in \par
{{\plain \fs20 addition to lives," said Helene Gayle, MD, M.P.H., CDC. CDC scie

ntists have \par
}\plain \fs20 developed tools for estimating the economic impact of HIV preven
tion \par
}\plain \fs20 programs in the era of advanced combination therapies. The econ
omic model \par
}\plain \fs20 estimates lifetime treatment costs (based on treatment scenarios
, and \par
}\plain \fs20 balances those costs against the current national investment in
HIV \par
}\plain \fs20 prevention to determine what level of success is needed to save
the nation \par
}\plain \fs20 money. The findings indicated that only 3,995 infections must be
prevented \par
}\plain \fs20 annually to actually result in cost_savings, and only 1,255 inf
ections must \par
}\plain \fs20 be prevented for the investment to be cost_effective. "We found
that even \par
}\plain \fs20 if only a relatively small number of infections are prevented ea
ch year, \par
}\plain \fs20 HIV prevention programs save money," said David Holtgrave, Ph.D.
, NCHSTP. \par
}\plain \fs20 "Given what we know about prevention effectiveness, we believe t
hat the \par
}\plain \fs20 number of infections actually prevented greatly exceeds the cost
_saving \par
}\plain \fs20 level." Holtgrave and colleagues estimate that the present cost
of lifetime \par
}\plain \fs20 treatment for HIV now averages \$154,402. This amount represents
the money \par
}\plain \fs20 saved per infection averted through prevention. By dividing the
national \par
}\plain \fs20 prevention budget of \$616.79 million by the resources saved per
infection \par
}\plain \fs20 prevented, he is able to determine the minimum number of infecti
ons that \par
}\plain \fs20 would have to be prevented to save money. To determine the numbe
r of \par
}\plain \fs20 infections that would have to be averted in order to conclude \p
ar
}\plain \fs20 cost_effectiveness, researchers add to the medical costs an est
imate of \par
}\plain \fs20 what society is willing to pay per year of life saved. This est
imate is \par
}\plain \fs20 derived from analysis of investment in other life_saving interv
entions, \par
}\plain \fs20 such as kidney dialysis and mammography. Researchers believe th
at the \par
}\plain \fs20 greatest benefit of these models are to program planners attempt
ing to make \par
}\plain \fs20 tough decisions about which prevention programs can make the big
gest \par
}\plain \fs20 impact. "Combining this tool with research on which intervention
s work most \par
}\plain \fs20 effectively to prevent infection will allow those who allocate r

resources to ensure they are used most appropriately," stressed Holtgrave. Other CDC presentations at the conference presented the most comprehensive evidence to date that HIV prevention programs are effective. CDC researchers have assimilated and analyzed all available studies to date that evaluate the impact of prevention programs and created a database called Prevention Research Synthesis (PRS). The PRS database incorporates all well-conducted evaluations of the full range of HIV prevention programs, from school-based education to street outreach for injection drug users. By conducting a meta-analysis on these studies, researchers can determine their overall impact. CDC researcher Ellen Sogolow, Ph.D., presented the overall findings, based on 46 U.S. studies of more than 18,000 individuals, indicating that participants significantly reduced their risk behaviors following the program interventions. "The picture that results is clear. Well designed HIV prevention programs have had a positive impact," said Sogolow, "And they have made a difference for a wide range of populations at risk." CDC behavioral scientist, Salaam Semaan, Dr. PH., presented a subset of the overall analysis that looks at the impact of programs designed to reduce sexual risk behaviors among injection drug users, one of the most difficult to reach populations. Because of the dangerous intersection of drug-related and sexual risk behaviors, programs for injection drug users must strive to reduce not only drug-related risks, but also sexual risks. Semaan and colleagues analyzed the combined impact of twenty-nine studies on the risk behaviors of over 11,000 injection drug users and found an overall positive effect. The vast majority of the interventions were effective in reducing sexual risk behaviors among injection drug users, and none of the interventions were harmful. "Our findings suggest that effective behavior change programs can slo

w the \par
{{\plain \fs20 sexual spread of HIV among injection drug users and their partne
rs," said \par
{{\plain \fs20 Semaan. "Our challenge will be to help communities design progr
ams that \par
{{\plain \fs20 combine these approaches with the most effective interventions f
or reducing \par
{{\plain \fs20 drug_related risks." An analysis of the effectiveness of progra
ms to reduce \par
{{\plain \fs20 drug_related risk behaviors is underway and expected to be comp
lete in the \par
{{\plain \fs20 coming months. Sogolow discussed several CDC systems for putting
the best \par
{{\plain \fs20 prevention research into the hands of communities affected, incl
uding the \par
{{\plain \fs20 PRS database. Sogolow also presented CDC prevention modules whic
h help \par
{{\plain \fs20 communities reproduce effective HIV prevention programs. Severa
l \par
{{\plain \fs20 prevention modules were discussed, including a video_based disc
ussion group \par
{{\plain \fs20 intervention for minority women at high risk and an outreach pro
gram to \par
{{\plain \fs20 influence peer opinion leaders that reach young gay men. "CDC's
role is to \par
{{\plain \fs20 provide communities the best science available to guide preventi
on \par
{{\plain \fs20 efforts," said Sogolow. "Pulling the best prevention research t
ogether \par
{{\plain \fs20 into a tool that can be used to analyze, evaluate, and replicate
\par
{{\plain \fs20 scientifically sound programs is the first step toward extending
their \par
{{\plain \fs20 reach." \par
{{\plain \fs20 \par
{{\plain \fs20 Copyright 1998 Charles W. Henderson \par
{{\plain \fs20 \par
{{\plain \fs20 \par
{{\plain \fs20 \par
{{\plain \fs20 INDUSTRY NAMES: Pharmaceutical \par
{{\plain \fs20 PRODUCT NAMES: AIDS therapeutic agents (283403); Administratio
n of public \par
{{\plain \fs20 health programs (943000) \par
{{\plain \fs20 CONCEPT TERMS: All government; All product and service informat
ion; Costs; \par
{{\plain \fs20 Government assistance \par
{{\plain \fs20 MARKETING TERMS: All general; *Public* *service* *advertising*
\par
{{\plain \fs20 GEOGRAPHIC NAMES: North America (NOAX); United States (USA) \par
par
{{\plain \fs20 \par
{{\plain \fs20 \par
{{\plain \fs20 15/9/5 (Item 5 from file: 9) \par
{{\plain \fs20 DIALOG(R)File: 9:Business & Industry(R) Jul \par
{{\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par

{{\plain \fs20 \par
{{\plain \fs20 02194750 (THIS IS THE FULLTEXT) \par
{{\plain \fs20 Michigan legislation designed to increase organ/tissue donation
goes into \par
{{\plain \fs20 *effect* July 1 \par
{{\plain \fs20 (*Effective* 7/1/98, Michigan will try to increase awareness of
the need \par
{{\plain \fs20 for organ/tissue donors, hoping to add 500,000 names to the cu
rrent \par
{{\plain \fs20 16,000 registered donors) \par
{{\plain \fs20 Transplant News, v 8, n 12, p 6 \par
{{\plain \fs20 June 30, 1998 \par
{{\plain \fs20 DOCUMENT TYPE: Newsletter ISSN: 0005_2175 (United States) \pa
r
{{\plain \fs20 LANGUAGE: English RECORD TYPE: Fulltext \par
{{\plain \fs20 WORD COUNT: 421 \par
{{\plain \fs20 \par
{{\plain \fs20 TEXT: \par
{{\plain \fs20 A package of bills designed to improve organ and tissue donation
rates in \par
{{\plain \fs20 Michigan will go into effect on July 1. \par
{{\plain \fs20 \par
{{\plain \fs20 Michigan lags far behind the national per capita rate of organ d
onation, \par
{{\plain \fs20 ranking 45th of 50 states. The new law seeks to increase rates b
y \par
{{\plain \fs20 identifying potential organ and tissue donors through the driver
's license \par
{{\plain \fs20 application and renewal process and by heightening public awaren
ess of \par
{{\plain \fs20 donation and transplantation. Currently, only 16,000 Michigan re
sidents \par
{{\plain \fs20 have signed organ donor cards. It is hoped the legislation will
add nearly \par
{{\plain \fs20 one_half million new names, said Tammie Havermahl, public educa
tion \par
{{\plain \fs20 director of the Transplantation Society of Michigan. \par
{{\plain \fs20 \par
{{\plain \fs20 Havermahl said she has a goal of getting the 500,000 names on th
e registry \par
{{\plain \fs20 by next spring. \par
{{\plain \fs20 \par
{{\plain \fs20 In a related action, the Michigan secretary of state's office an
nounced a \par
{{\plain \fs20 pilot program intended to expand the Gift of Life Donor Registry
. \par
{{\plain \fs20 Postage_paid, pre_addressed postcards will be provided to resi
dents \par
{{\plain \fs20 renewing a driver's license or state identification card. Those
wishing to \par
{{\plain \fs20 have their names placed on the registry need only fill out the c
ard and \par
{{\plain \fs20 mail it to a central depository in Lansing, where it will be opt
ically \par

{{\plain \fs20 scanned and transferred to the registry. The registry is queried upon each \par
{{\plain \fs20 death in the state. \par
{{\plain \fs20 \par
{{\plain \fs20 Nationwide, demand for anatomical gifts far exceeds supply. While 80% of \par
{{\plain \fs20 the U.S. population indicates support of organ donation, nationally only \par
{{\plain \fs20 30% of persons__20% in Michigan__are potential donors. Currently, 2,400 \par
{{\plain \fs20 Michigan patients are on transplant waiting lists; 40 have died so far this \par
{{\plain \fs20 year waiting for donor organs. \par
{{\plain \fs20 "Public education and endorsement, together with family discussion, are key \par
{{\plain \fs20 to eliminating this public health crisis," said Tom Beyersdorf, executive \par
{{\plain \fs20 director of the Transplantation Society. "This law helps clarify and \par
{{\plain \fs20 promote the use of the Michigan driver's license as a means of indicating \par
{{\plain \fs20 one's intent to become an organ and tissue donor, encourage family \par
{{\plain \fs20 discussion, and allow potential organ and tissue donors to enroll in the \par
{{\plain \fs20 donor registry." \par
{{\plain \fs20 \par
{{\plain \fs20 Pennsylvania, Florida, and Illinois lead the way in state initiatives to \par
{{\plain \fs20 raise donation rates. Programs in the three states feature driver's license \par
{{\plain \fs20 registries as well as funding for public education and mass media \par
{{\plain \fs20 advertising. The programs also mandate that hospital personnel actively \par
{{\plain \fs20 facilitate donation at every opportunity. \par
{{\plain \fs20 \par
{{\plain \fs20 "Whether it is through the registry or via the back of the driver's \par
{{\plain \fs20 license, our process remains the same," said Beyersdorf. "The donation \par
{{\plain \fs20 information is presented to the family. The family must provide written \par
{{\plain \fs20 permission for organ recovery. When the wishes of the deceased are known, \par
{{\plain \fs20 the family invariably will honor those wishes." \par
{{\plain \fs20 \par
{{\plain \fs20 Copyright 1998 Transplant Communications, Inc. \par
{{\plain \fs20 INDUSTRY NAMES: *Health* care delivery \par
{{\plain \fs20 PRODUCT NAMES: Health and allied services, misc (809900) \par

{{\plain \fs20 CONCEPT TERMS: All government; All market information; Marketing campaign; \par
{{\plain \fs20 New laws; Users \par

{{\plain \fs20 MARKETING TERMS: All campaign; All general; *Public* *service*
\par
{{\plain \fs20 *advertising*; Regional campaign \par
{{\plain \fs20 GEOGRAPHIC NAMES: North America (NOAX); United States (USA) \par
par
{{\plain \fs20 \par
{{\plain \fs20 \par
{{\plain \fs20 15/9/6 (Item 6 from file: 9) \par
{{\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
{{\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par
{{\plain \fs20 \par
{{\plain \fs20 02132961 (THIS IS THE FULLTEXT) \par
{{\plain \fs20 Drug Money: Part 2 \par
{{\plain \fs20 (A look at whether the \$2 bil to be ponied up for drug preventio
n \par
{{\plain \fs20 advertising and education will really work) \par
{{\plain \fs20 Brandweek, v 39, n 17, p 20+ \par
{{\plain \fs20 April 27, 1998 \par
{{\plain \fs20 DOCUMENT TYPE: Journal ISSN: 1064_4318 (United States) \par
{{\plain \fs20 LANGUAGE: English RECORD TYPE: Fulltext \par
{{\plain \fs20 WORD COUNT: 2094 \par
{{\plain \fs20 \par
{{\plain \fs20 ABSTRACT: \par
{{\plain \fs20 The ONDCP strategy involves a three phase effort; the first, hav
ing begun \par
{{\plain \fs20 in January and still running, is a 12_city test of \$20 million
in paid \par
{{\plain \fs20 anti_drug ads, during which the office is *evaluating* its tact
ics based on \par
{{\plain \fs20 focus groups, phone interviews and community feedback. Phase Two
expands \par
{{\plain \fs20 the campaign nationally, with \$65 million in paid ads starting i
n May or \par
{{\plain \fs20 June, 1998. Phase Three, which starts in the fall of 1998, alloc
ates \$93 \par
{{\plain \fs20 million in paid integrated media.The integrated media plan will
utilize \par
{{\plain \fs20 high_impact media, sports and entertainment events and "non_tr
aditional" \par
{{\plain \fs20 media such as video trailers, video_store handouts, mall arcade
s and even \par
{{\plain \fs20 basketball backboards. Porter Novelli (Washington, DC) is implem
eting Phase \par
{{\plain \fs20 One, with ads that encompass five strategic themes, based on stu
dy of \par
{{\plain \fs20 academic papers, data and other research material supplied by th
e PDFA, as \par
{{\plain \fs20 well as on two two_day conferences of ad people, physicians and
public \par
{{\plain \fs20 *health* experts: 1. Instill belief that drug use is not common;
2. enhance \par
{{\plain \fs20 negative social consequences of use; 3. the positive aspects of
being \par
{{\plain \fs20 drug_free; 4. enhance the variety of personal and social skills

; 5. \par
}\plain \fs20 positive use of time. Why, for example, aren't beer, liquor and tobacco \par
}\plain \fs20 included in the PDFA's and ONDCP's mandate, when, historically, youth are \par
}\plain \fs20 curious about and start out on those substances before they try marijuana \par
}\plain \fs20 or are tempted by their first mushrooms. Add to that the hundreds of \par
}\plain \fs20 millions of dollars a year spent by advertisers of those products to reach \par
}\plain \fs20 kids, and it's hard to justify their exclusion. But then, this is where the \par
}\plain \fs20 moral high\ _road runs smack into the rocky cliff of political pragmatism. By \par
}\plain \fs20 not including them, for whatever reason, the *effectiveness* of the \par
}\plain \fs20 campaign may be weakened. But it only further blurs a picture already made \par
}\plain \fs20 fuzzy by a dearth of sound research and, thus, the most basic "account \par
}\plain \fs20 supervision." This anti_drug effort may well be the model for other public \par
}\plain \fs20 causes co_funded by the public and private sectors, and it could prove a \par
}\plain \fs20 poor precedent. \par
}\plain \fs20 \par
}\plain \fs20 TEXT: \par
}\plain \fs20 ONDCP STRATEGY \par
}\plain \fs20 The ONDCP strategy involves a three phase effort; the first, having begun \par
}\plain \fs20 in January and still running, is a 12_city test of \$20 million in paid \par
}\plain \fs20 anti_drug ads, during which the office is evaluating its tactics based on \par
}\plain \fs20 focus groups, phone interviews and community feedback. That said, one \par
}\plain \fs20 high_ranking executive involved in the program terms it superficial at \par
}\plain \fs20 best. Phase Two expands the campaign nationally, with \$65 million in paid \par
}\plain \fs20 ads starting in May or June. Phase Three, which starts in the fall, \par
}\plain \fs20 allocates \$93 million in paid integrated media. \par
}\plain \fs20 \par
}\plain \fs20 The integrated media plan, as with any brand image push these days, is to \par
}\plain \fs20 get the money "to look bigger" than what the paid and donated media time \par
}\plain \fs20 adds up to, this through high_impact media, sports and entertainment events \par
}\plain \fs20 and "non_traditional" media such as video trailers, video_store handouts, \par
}\plain \fs20 mall arcades and even basketball backboards. The idea is to crea

te an \par

{{\plain \fs20 "effective, continuous presence" for the messages, said Michael Marks, \par

{{\plain \fs20 senior vice president of Creative Media, N.Y. \par

{{\plain \fs20 \par

{{\plain \fs20 "We have to keep hammering the message home, just like the Nike swoosh," \par

{{\plain \fs20 said Judy Cushing, president of National Family Partnership, Portland, \par

{{\plain \fs20 Ore., an organization of concerned parents. \par

{{\plain \fs20 \par

{{\plain \fs20 For Phase 1, being implemented by Porter Novelli, Washington, ads encompass \par

{{\plain \fs20 five strategic themes, based on study of academic papers, data and other \par

{{\plain \fs20 research material supplied by the PDFA, as well as on two two_day \par

{{\plain \fs20 conferences of ad people, physicians and public health experts: \par

{{\plain \fs20 \par

{{\plain \fs20 1. Instill belief that drug use is not common; that kids overestimate the \par

{{\plain \fs20 prevalence of use. Debunk the myth that everyone is doing it to keep kids \par

{{\plain \fs20 from trying in the first place. ("Four out of five kids don't smoke pot.") \par

{{\plain \fs20 \par

{{\plain \fs20 2. Enhance negative social consequences of use. (Girl storming out of \par

{{\plain \fs20 pothead ex_boyfriend's room.) \par

{{\plain \fs20 \par

{{\plain \fs20 3. The positive aspects of being drug_free. (Rad skateboarder in action.) \par

{{\plain \fs20 \par

{{\plain \fs20 4. Enhance the variety of personal and social skills. Yes, refusal skills, \par

{{\plain \fs20 but also future_oriented skills needed to have a bright future. (I need to \par

{{\plain \fs20 graduate, I need to have fun, I need a job, I need to be a kid.) \par

{{\plain \fs20 \par

{{\plain \fs20 \par

{{\plain \fs20 5. Positive use of time. (Girl winning first_place in a gymnastics meet.) \par

{{\plain \fs20 \par

{{\plain \fs20 Are they on target? \par

{{\plain \fs20 \par

{{\plain \fs20 "This is your brain on drugs" is the best recalled anti_drug ad in the \par

{{\plain \fs20 history of the genre; a new ad has extended that equity, showing a woman in \par

{{\plain \fs20 a kitchen holding up an egg, "This is your brain," and smashing the egg \par

{{\plain \fs20 with a frying pan, "This is your brain on heroin." She then rants \par

{{\plain \fs20 \par

{{\plain \fs20 rest of the room with the cast_iron pan to show the devastation that heroin \par
}}{\plain \fs20 wreaks on home, career and family. Another ad shows a middle_aged mother \par
}}{\plain \fs20 feeding someone, presumably a baby, oatmeal by spoon. The payoff is that \par
}}{\plain \fs20 she's actually feeding her teenage son whose brain has been fried by \par
}}{\plain \fs20 inhaling household chemicals. \par
}}{\plain \fs20 \par
}}{\plain \fs20 While ad agencies' good intentions are as true as any other partner in the \par
}}{\plain \fs20 mix, most are also too taxed to put the same level of rigorous research and \par
}}{\plain \fs20 account planning into a PDFA ad that they might for a paying client. If \par
}}{\plain \fs20 they do read the research, chances are it's supplied by the PDFA. Most \par
}}{\plain \fs20 agencies, in fact, view the experience as merely a creative exercise in the \par
}}{\plain \fs20 name of good citizenry. But a lack of the checks and balances proper \par
}}{\plain \fs20 research can provide may lead to work that, while creative, can hinder the \par
}}{\plain \fs20 desired effect. \par
}}{\plain \fs20 \par
}}{\plain \fs20 A 1996 ad by agency Hampel Stefanides, N.Y., used a young woman's account \par
}}{\plain \fs20 of her and her boyfriend's heroin addiction. Parents to an infant, he \par
}}{\plain \fs20 succumbed to an overdose, and the young mother called for help. She quite \par
}}{\plain \fs20 credibly says she lost custody of her baby and wails, "I'm not allowed to \par
}}{\plain \fs20 see her." Problem is, the scene runs counter to social work theory and \par
}}{\plain \fs20 practice in just about any U.S. jurisdiction. Addicted parents are \par
}}{\plain \fs20 encouraged, even required, to visit their children in foster care; failure \par
}}{\plain \fs20 to do so is a good way to permanently lose custody. Hampel Stefanides \par
}}{\plain \fs20 creative director Dean Stefanides said the story line was deliberately \par
}}{\plain \fs20 "fuzzy," so as to protect any real addicts' identity. \par
}}{\plain \fs20 \par
}}{\plain \fs20 "No one knows what's made up or not," Stefanides said. "If it's incorrect, \par
}}{\plain \fs20 it's all done to have kids stay off drugs. Maybe there should be more \par
}}{\plain \fs20 research." \par
}}{\plain \fs20 \par
}}{\plain \fs20 He referred other questions to the ad's director, Bobby Sheehan of Pure \par

}}\plain \fs20 Film. "I don't make documentaries," Sheehan said. "I make film stories. The \par
}}\plain \fs20 intention is not to deceive, but hopefully to make a dramatic point." \par
}}\plain \fs20 \par
}}\plain \fs20 Which might be fine, except that the hyperbole seems to be taking on a life \par
}}\plain \fs20 of its own. In a recent Newsday op_ed item, Steven Donziger, policy \par
}}\plain \fs20 director of the Partnership for Responsible Drug Information, recalled one \par
}}\plain \fs20 PDFa newspaper ad that claimed "20% of all children have tried an inhalant \par
}}\plain \fs20 by the eighth grade." First, Donziger quotes a 1996 U.S. Health and Human \par
}}\plain \fs20 Services survey that only 5.9% of children aged 12_17 had ever tried an \par
}}\plain \fs20 inhalant. Second, he states, the "everybody's_doing_it" tagline "virtually \par
}}\plain \fs20 invite(s) children to try inhalants." \par
}}\plain \fs20 \par
}}\plain \fs20 photo omitted \par
}}\plain \fs20 \par
}}\plain \fs20 Another critic, Kendra Wright of Falls Church Va._based Family Watch, a \par
}}\plain \fs20 network of organizations concerned about drug policy, said one ad she saw \par
}}\plain \fs20 in the Washington test area worries her. "My 15_year_old step_son had no \par
}}\plain \fs20 idea that you could get high on household cleaners until he saw the ad \par
}}\plain \fs20 warning against their use." \par
}}\plain \fs20 \par
}}\plain \fs20 One anti_heroin ad, according to critics, may have simply compounded \par
}}\plain \fs20 problems for one of the campaign's target markets. The TV spot features a \par
}}\plain \fs20 teenage boy decrying the drug's destruction of his life, from unemployment \par
}}\plain \fs20 to homelessness to what's presented as the extreme degradation: "...and now \par
}}\plain \fs20 I have sex with men for money to support my drug habit." This stirred the \par
}}\plain \fs20 ire of the Gay & Lesbian Alliance Against Defamation (GLAAD), which called \par
}}\plain \fs20 the ad "patently homophobic." GLAAD maintained the ad used "homosexuality \par
}}\plain \fs20 as a scare tactic" and potentially "exacerbate(d) higher_than_average risks \par
}}\plain \fs20 gay and lesbian youth face for substance abuse and suicide by implying that \par
}}\plain \fs20 being gay is worse than being addicted to heroin." Once the civil rights \par
}}\plain \fs20 watchdog group started whipping up a protest campaign, PDFa agreed

ed to \par
}}\plain \fs20 excise the offending portions of the commercial. \par
}}\plain \fs20 Finally, the most famous PDFA mistake involved the brain wave su
pposedly of \par
}}\plain \fs20 a pot smoker. It turned out the flat line was either that of a c
oma \par
}}\plain \fs20 patient, or the monitor just wasn't hooked up to anyone. Account
s differ. \par
}}\plain \fs20 Either way, these sorts of misguided efforts undercut the PDFA's
\par
}}\plain \fs20 effectiveness. \par
}}\plain \fs20 \par
}}\plain \fs20 "Like most pro bono groups, the PDFA won't do disaster checks on
rough cuts \par
}}\plain \fs20 or the finished ads," said Harvard's DeJong. He feels the PDFA n
eeds more \par
}}\plain \fs20 input from behavioral scientists who know how to translate publi
c health \par
}}\plain \fs20 theory into messages that produce behavioral change. "But the PD
FA is \par
}}\plain \fs20 resistant, they want to restrict it to advertising folks," he sa
id. \par
}}\plain \fs20 \par
}}\plain \fs20 Vermont's Worden agrees. A behavioral scientist might better gau
ge if an ad \par
}}\plain \fs20 is too abstract for a particular age. One ad in particular, whic
h shows a \par
}}\plain \fs20 good-looking boy on a skateboard head across his comfy suburb t
o share a \par
}}\plain \fs20 joint with a friend, would've been flagged by a good public heal
th maven, \par
}}\plain \fs20 Worden said. "That's just too much modeling of the activity in t
oo \par
}}\plain \fs20 attractive a way," he said. \par
}}\plain \fs20 \par
}}\plain \fs20 PDFA's creative chief Doria Steedman said focus group testing of
finished \par
}}\plain \fs20 ads is now being done, and retorts that her organization gets al
l the \par
}}\plain \fs20 advice it can from everyone it can. "It's not done by two guys s
itting \par
}}\plain \fs20 around a room," she said. \par
}}\plain \fs20 \par
}}\plain \fs20 ZERO TOLERANCE \par
}}\plain \fs20 \par
}}\plain \fs20 Another big area of credibility with the youth audience is the p
rogram's \par
}}\plain \fs20 focus on marijuana as a gateway drug to more serious abuse, long
a puritan \par
}}\plain \fs20 mantra but hardly an established fact. Public health experts, in
cluding Dr. \par
}}\plain \fs20 Johnston's research, say that approximately 18% of youth who try
marijuana \par
}}\plain \fs20 go on to more serious drugs. \par

}}\plain \fs20 \par
}}\plain \fs20 photo omitted \par
}}\plain \fs20 \par
}}\plain \fs20 "Pot is hardest (of drugs to depict) because it's so accepted, s
o \par
}}\plain \fs20 normalized," said the ONDCP senior advisor Alan Levitt. "It's gi
ven a wink \par
}}\plain \fs20 and a nod in society. Kids see ballplayers getting caught smokin
g marijuana \par
}}\plain \fs20 and not suffering any real consequences. We need to depict that
four out of \par
}}\plain \fs20 five don't use it." \par
}}\plain \fs20 \par
}}\plain \fs20 Still, the basic consideration of how many kids start substance
abuse with \par
}}\plain \fs20 alcohol, especially beer, and tobacco, before they get near thei
r first \par
}}\plain \fs20 joint, raises a huge issue: Whether a zero_tolerance position i
s tenable, \par
}}\plain \fs20 when ad dollars might be spent on warnings against more addictiv
e, more \par
}}\plain \fs20 lethal drugs, and especially when the communication of a zero_t
olerance \par
}}\plain \fs20 message comes off as wantonly puritanical in the viewer's eyes,
poisoning \par
}}\plain \fs20 the well for the entire campaign (see accompanying story, page 2
9). A \par
}}\plain \fs20 report sponsored by the Ford Foundation debunks educational effo
rts \par
}}\plain \fs20 "emphasizing the horrors of addiction and lumping all drugs toge
ther as \par
}}\plain \fs20 leading to the same ultimate doom. Virtually all experts now agr
ee that \par
}}\plain \fs20 such tactics have not proved effective. Indeed, in many cases, t
hey have \par
}}\plain \fs20 been counterproductive, causing disrespect, skepticism and resis
tance to \par
}}\plain \fs20 all advice on drugs." \par
}}\plain \fs20 \par
}}\plain \fs20 The PDFA and ONDCP are on a mission to, as Professor Johnston ph
rases it, \par
}}\plain \fs20 get the country speaking in one voice in the fight against drugs
. The words \par
}}\plain \fs20 and images that copywriters and strategists use are crucial in t
he process. \par
}}\plain \fs20 Even ONDCP director McCaffrey has conceded, despite his Army bac
kground, \par
}}\plain \fs20 that we need to stop calling the fight "A War on Drugs," as if i
t could be \par
}}\plain \fs20 won like a methodical military campaign. In fact, in his recent
PBS \par
}}\plain \fs20 documentary, Addiction, Bill Moyers took McCaffrey's lead and co
mpared the \par
}}\plain \fs20 "war" on drugs to the quagmire of Vietnam. \par

}}{\plain \fs20 \par
}}{\plain \fs20 Though it undoubtedly took a lot of manhours to create the mammoth \par
}}{\plain \fs20 advertising program to come, it has not been hard to generate the necessary \par
}}{\plain \fs20 backing for the cause. Who, after all, could be against keeping more \par
}}{\plain \fs20 children from damaging themselves with drugs? It is in such a \par
ar
}}{\plain \fs20 consensus_filled rose garden, though, that short_cuts can be taken and \par
}}{\plain \fs20 dissenting opinions quashed. \par
}}{\plain \fs20 \par
}}{\plain \fs20 Why, for example, aren't beer, liquor and tobacco included in the PDFAs \par
}}{\plain \fs20 and ONDCP's mandate, when, historically, youth are curious about and start \par
}}{\plain \fs20 out on those substances before they try marijuana or are tempted by their \par
}}{\plain \fs20 first mushrooms. Add to that the hundreds of millions of dollars a year \par
}}{\plain \fs20 spent by advertisers of those products to reach kids, and it's hard to \par
}}{\plain \fs20 justify their exclusion. But then, this is where the moral high_road runs \par
}}{\plain \fs20 smack into the rocky cliff of political pragmatism. \par
}}{\plain \fs20 \par
}}{\plain \fs20 "To include them (tobacco and alcohol), the program wouldn't have gotten \par
}}{\plain \fs20 through Congress," said the ONDCP's Levitt. "Plus, with the amount of money \par
}}{\plain \fs20 we have to spend, it would have dissipated our message. It's not in our \par
}}{\plain \fs20 mandate." \par
}}{\plain \fs20 \par
}}{\plain \fs20 By not including them, for whatever reason, the effectiveness of the \par
}}{\plain \fs20 campaign may be weakened. But it only further blurs a picture already made \par
}}{\plain \fs20 fuzzy by a dearth of sound research and, thus, the most basic "account \par
}}{\plain \fs20 supervision." This anti_drug effort may well be the model for other public \par
}}{\plain \fs20 causes co_funded by the public and private sectors, and it could prove a \par
}}{\plain \fs20 poor precedent. \par
}}{\plain \fs20 \par
}}{\plain \fs20 But marketing, if even better conceived and implemented, is obviously no \par
}}{\plain \fs20 panacea. It starts with family and a kid's environment, and those issues \par
}}{\plain \fs20 are less of the Wonder World of commercial culture than of the fabric of \par
}}{\plain \fs20 society. "Prevention experts say we must acknowledge why people

are drawn \par
}}\plain \fs20 to mind_altering substances," said Harvard's DeJong. "It flies
in the face \par
}}\plain \fs20 of their experience to not talk about this." \par
}}\plain \fs20 \par
}}\plain \fs20 What works is parents," said drug counselor Mary Dailey, student
assistance \par
}}\plain \fs20 coordinator at New Trier High School in Wimmekta, Ill. "Fear of
parental \par
}}\plain \fs20 disapproval, parents talking repeatedly and imposing consequence
s. Parents \par
}}\plain \fs20 need to monitor their kids and wait up for them to come home. Th
ey need to \par
}}\plain \fs20 know who their friends are, and their friends' parents. And most
of all, \par
}}\plain \fs20 they need to be role models themselves." \par
}}\plain \fs20 \par
}}\plain \fs20 In the end, the question of whether or not ads work to deter dru
g use seems \par
}}\plain \fs20 an unwieldy one to answer despite the certainty expressed_if
not \par
}}\plain \fs20 proved_by the PDFA and ONDCP. Doubters like Berkeley's Wallac
k claim the \par
}}\plain \fs20 campaign thus far does little more than raise awareness of the i
ssue of \par
}}\plain \fs20 drug use. "They take a complex, multi_causal problem and reduce
it to a \par
}}\plain \fs20 matter of the wrong decisions, without going into causes," he sa
id. \par
}}\plain \fs20 Of course, one might argue that such rhetorical reduction is wha
t \par
}}\plain \fs20 advertising does. And some might argue back, that might be the f
irst \par
}}\plain \fs20 impetus for more scrutiny of this expensive crusade. \par
}}\plain \fs20 \par
}}\plain \fs20 Daniel Hill is a New York_based freelancer who writes on social
policy \par
}}\plain \fs20 issues. \par
}}\plain \fs20 \par
}}\plain \fs20 Copyright 1998 BPI Communications, Inc. \par
}}\plain \fs20 \par
}}\plain \fs20 \par
}}\plain \fs20 PRODUCT NAMES: Administration of public health programs (94300
0) \par
}}\plain \fs20 CONCEPT TERMS: Ad budget; All company; All market information;
Corporate \par
}}\plain \fs20 strategy; Marketing campaign \par
}}\plain \fs20 MARKETING TERMS: All general; All media; All research; Consumer
behavior; \par
}}\plain \fs20 *Public* *service* *advertising*; Ad volume \par
}}\plain \fs20 GEOGRAPHIC NAMES: North America (NOAX); United States (USA) \
par
}}\plain \fs20 \par
}}\plain \fs20 \par

{{\plain \fs20 15/9/7 (Item 7 from file: 9) \par
 {{\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
 {{\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par
 {{\plain \fs20 \par
 {{\plain \fs20 01821360 \par
 {{\plain \fs20 Best way to promote *health* is to market it \par
 {{\plain \fs20 (Samaritan *Health* Partners (Dayton, OH) uses relationship_based, social \par
 {{\plain \fs20 marketing to supplement traditional media advertising) \par
 {{\plain \fs20 Marketing News, v 10, n 31, p 12 \par
 {{\plain \fs20 May 12, 1997 \par
 {{\plain \fs20 DOCUMENT TYPE: Journal ISSN: 0025_3790 (United States) \par
 {{\plain \fs20 LANGUAGE: English RECORD TYPE: Abstract \par
 {{\plain \fs20 \par
 {{\plain \fs20 ABSTRACT: \par
 {{\plain \fs20 Samaritan *Health* Partners (Dayton, OH) is using relationship_based, \par
 {{\plain \fs20 social marketing to supplement traditional media advertising, because large \par
 {{\plain \fs20 "image" campaigns to promote hospitals have not proved to be cost_ \par
 {{\plain \fs20 *effective*. Due to the emergence of managed care environments, hospitals \par
 {{\plain \fs20 are being asked to account for their spending and to show how they \par
 {{\plain \fs20 expenditures benefit their communities. Samaritan *Health* Partners and its \par
 {{\plain \fs20 affiliated hospital, Good Samaritan Hospital, use traditional media \par
 {{\plain \fs20 advertising to maintain awareness and direct mail and newspaper advertising \par
 {{\plain \fs20 to provide marketing support through the promotion of *health*_related \par
 {{\plain \fs20 educational opportunities. The Samaritan *Health* Update campaign includes \par
 {{\plain \fs20 a quarterly direct mail calendar of community health programs, monthly \par
 {{\plain \fs20 half_page ads in the local and suburban newspapers and small, targeted \par
 {{\plain \fs20 mailings that concern specific *health* problems. Mailing lists for the \par
 {{\plain \fs20 direct mail program are prepared from the Ask_A_Nurse database. Callers \par
 {{\plain \fs20 with concerns about various *health* issues can contact a nurse for \par
 {{\plain \fs20 information. A record of these calls is kept in the database. The \par
 {{\plain \fs20 Ask_A_Nurse service gets about 18,000 calls/mo. Program_specific mailings \par
 {{\plain \fs20 are usually limited to 2,000_10,000 pieces and the hospital's *health* \par
 {{\plain \fs20 programs are often filled to capacity. Besides hospital_coordinated \par
 {{\plain \fs20 programs, Good Samaritan is also involved in many community even

ts. \par
 {{\plain \fs20 Community response to the marketing campaign has been excellent.
 Of inbound \par
 {{\plain \fs20 calls, 42% of callers request *health* information packets and 5
 8% register \par
 {{\plain \fs20 for a *health* program. Some 93% of all calls are responses to t
 he \par
 {{\plain \fs20 Samaritan *Health* Update direct mail campaign or newspaper ads.
 \par
 {{\plain \fs20 \par
 {{\plain \fs20 COMPANY NAMES: GOOD SAMARITAN HOSPITAL & HEALTH CENTER (DAYTON
 OH); \par
 {{\plain \fs20 SAMARITAN HEALTH PARTNERS \par
 {{\plain \fs20 INDUSTRY NAMES: *Health* care delivery \par
 {{\plain \fs20 PRODUCT NAMES: Hospitals (806000) \par
 {{\plain \fs20 CONCEPT TERMS: All company; All market information; Corporate s
 trategy; \par
 {{\plain \fs20 Marketing campaign; Trends; Users \par
 {{\plain \fs20 MARKETING TERMS: All general; All media; All research; Consumer
 behavior; \par
 {{\plain \fs20 Corporate advertising; Direct mail; Public opinion; Print adve
 rtising; \par
 {{\plain \fs20 *Public* *service* *advertising* \par
 {{\plain \fs20 GEOGRAPHIC NAMES: North America (NOAX); United States (USA) \par
 \par
 {{\plain \fs20 \par
 {{\plain \fs20 \par
 {{\plain \fs20 15/9/8 (Item 8 from file: 9) \par
 {{\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
 {{\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par
 {{\plain \fs20 \par
 {{\plain \fs20 01512505 (THIS IS THE FULLTEXT) \par
 {{\plain \fs20 GOLD WINNER, 1996 EFFIE AWARDS, BY CATEGORY: GOVERNMENT/INSTITUT
 IONAL: Mass \par
 {{\plain \fs20 Dept of Public *Health* \par
 {{\plain \fs20 (Antismoking campaign handled by Houston Effler Herstek Favat fo
 r Mass Dept \par
 {{\plain \fs20 of *Health* targeted teens; wins 1996 Gold Effie Award) \par
 {{\plain \fs20 Brandweek, v XXXVII, n 24, p s18 \par
 {{\plain \fs20 June 10, 1996 \par
 {{\plain \fs20 DOCUMENT TYPE: Journal ISSN: 1064\ _4318 (United States) \par
 {{\plain \fs20 LANGUAGE: English RECORD TYPE: Fulltext \par
 {{\plain \fs20 WORD COUNT: 177 \par
 {{\plain \fs20 \par
 {{\plain \fs20 TEXT: \par
 {{\plain \fs20 This anti_smoking campaign sough to "make teenagers aware of ho
 w the \par
 {{\plain \fs20 tobacco industry manipulates them and information about smoking,
 " explains \par
 {{\plain \fs20 Shepley Metcalf account supervisor at what's now called Houston
 Herstek \par
 {{\plain \fs20 Favat. Kids get angry when they realized they've been manipul
 ed, he \par
 {{\plain \fs20 says. A "truth squad" including a former Lucky Strike model wit

h throat \par

{{\plain \fs20 cancer, a former tobacco lobbyist and an R.J. Reynolds heir all spoke of \par

{{\plain \fs20 how they regretted their erstwhile pro_cigarette ways. With TV spots and a \par

{{\plain \fs20 tour of secondary schools financed by a 25_cent_a_pack tax, the campaign \par

{{\plain \fs20 reached unaided awareness levels comparable to tobacco advertising; overall \par

{{\plain \fs20 cigarette consumption rates have dropped 15 percent. \par

{{\plain \fs20 \par

{{\plain \fs20 Company \par

{{\plain \fs20 \par

{{\plain \fs20 Massachusetts Department of Public Health \par

{{\plain \fs20 \par

{{\plain \fs20 Brand \par

{{\plain \fs20 \par

{{\plain \fs20 Massachusetts Department of Public Health \par

{{\plain \fs20 \par

{{\plain \fs20 Brand Team \par

{{\plain \fs20 \par

{{\plain \fs20 Dr. Gregory Connolly director, Mass. Tobacco Control Program; Jo y Rosen, \par

{{\plain \fs20 assistant commissioner of finance; Richard Earle, consultant to the MDPH \par

{{\plain \fs20 \par

{{\plain \fs20 Agency \par

{{\plain \fs20 \par

{{\plain \fs20 Houston Effler Herstek Favat, Inc. \par

{{\plain \fs20 \par

{{\plain \fs20 Agency Team \par

{{\plain \fs20 \par

{{\plain \fs20 Lisa Unsworth, evp_director of marketing services; Anne Miller, vp_account \par

{{\plain \fs20 director; Peter Favat, evp_creative director; Rich Hersteck, evp_creative \par

{{\plain \fs20 director; Dave Gardiner, vp associate creative director; Stu Cooper, \par

{{\plain \fs20 vp associate creative director \par

{{\plain \fs20 \par

{{\plain \fs20 Copyright 1996 BPI Communications, Inc. \par

{{\plain \fs20 \par

{{\plain \fs20 \par

{{\plain \fs20 COMPANY NAMES: HOUSTON EFFLER HERSTEC FAVAT; MASSACHUSETTS DEPARTMENT OF \par

{{\plain \fs20 PUBLIC HEALTH \par

{{\plain \fs20 INDUSTRY NAMES: Business services; Tobacco \par

{{\plain \fs20 PRODUCT NAMES: Cigarettes (211000); Advertising agencies (731100); \par

{{\plain \fs20 Administration of public health programs (943000) \par

{{\plain \fs20 CONCEPT TERMS: All company; All market information; All product and \par

{{\plain \fs20 service information; Marketing campaign; Orders; Quality; Youth market \par

}{\plain \fs20 MARKETING TERMS: Account activity; All agency; All campaign; Al
 l general; \par
 }{\plain \fs20 All product marketing; Campaign awards; Campaign design; Campa
 ign \par
 }{\plain \fs20 *effectiveness*; Positioning_repositioning; *Public* *service
 * \par
 }{\plain \fs20 *advertising* \par
 }{\plain \fs20 GEOGRAPHIC NAMES: North America (NOAX); United States (USA) \par
 }{\plain \fs20 \par
 }{\plain \fs20 \par
 }{\plain \fs20 15/9/9 (Item 9 from file: 9) \par
 }{\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
 }{\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par
 }{\plain \fs20 \par
 }{\plain \fs20 01416340 \par
 }{\plain \fs20 CAUSE FOR CONCERN \par
 }{\plain \fs20 (India reportedly needs awareness campaigns on *AIDS* and popula
 tion) \par
 }{\plain \fs20 Business India, p 147 \par
 }{\plain \fs20 February 25, 1996 \par
 }{\plain \fs20 DOCUMENT TYPE: Journal ISSN: 0254_5268 (India) \par
 }{\plain \fs20 LANGUAGE: English RECORD TYPE: Abstract \par
 }{\plain \fs20 \par
 }{\plain \fs20 ABSTRACT: \par
 }{\plain \fs20 The need for social advertising is as strong as ever. Many socia
 l issues \par
 }{\plain \fs20 need expertise in communication. Awareness campaign on *AIDS*
 and \par
 }{\plain \fs20 population are in need. However there is lack of instinct
 for \par
 }{\plain \fs20 social advertising. Here there is no product, adverting sh
 ould sell \par
 }{\plain \fs20 an idea. So a good social advertising should have good commun
 icative \par
 }{\plain \fs20 idea, good feedback mechanism well researched and *effective*. S
 ince social \par
 }{\plain \fs20 advertising is not paying the advertising agency, a commercial
 client \par
 }{\plain \fs20 gets priority. Most of the publications and media do not give a
 ny discount \par
 }{\plain \fs20 for social advertising. Once the copy is ready, the selling is p
 ain is \par
 }{\plain \fs20 more than pleasure. In most of the cases even non govern
 mental \par
 }{\plain \fs20 organisations are not prepared or there is lack of clear focu
 s or they \par
 }{\plain \fs20 do not convey what they want from the advertising agency.
 As a \par
 }{\plain \fs20 result such advertisements will hit wrong target audiences. So
 cial \par
 }{\plain \fs20 advertising is a challenge to the communication expert. (nl) \pa
 r
 }{\plain \fs20 \par

{{\plain \fs20 INDUSTRY NAMES: Business services \par
 {{\plain \fs20 PRODUCT NAMES: Advertising (731000) \par
 {{\plain \fs20 CONCEPT TERMS: All company; All market information; Marketing campaign; \par
 {{\plain \fs20 Public relations \par
 {{\plain \fs20 MARKETING TERMS: All campaign; All general; National campaign; *Public* \par
 {{\plain \fs20 *service* *advertising* \par
 {{\plain \fs20 GEOGRAPHIC NAMES: India (IND); Southern & Eastern Asia (SSAX) \par
 {{\plain \fs20 \par
 {{\plain \fs20 \par
 {{\plain \fs20 15/9/10 (Item 10 from file: 9) \par
 {{\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
 {{\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par
 {{\plain \fs20 \par
 {{\plain \fs20 01338032 (THIS IS THE FULLTEXT) \par
 {{\plain \fs20 Study Finds Tours Turn Kids Toward 5 a Day \par
 {{\plain \fs20 (Tours promoting 5 a Day fruit and vegetable campaign successful with kids, \par
 {{\plain \fs20 study finds) \par
 {{\plain \fs20 Supermarket News, v 45, n 47, p 26 \par
 {{\plain \fs20 November 20, 1995 \par
 {{\plain \fs20 DOCUMENT TYPE: Journal ISSN: 0039\5803 (United States) \par
 {{\plain \fs20 LANGUAGE: English RECORD TYPE: Fulltext \par
 {{\plain \fs20 WORD COUNT: 690 \par
 {{\plain \fs20 \par
 {{\plain \fs20 ABSTRACT: \par
 {{\plain \fs20 A study released by the Utah Department of *Health* here offers evidence \par
 {{\plain \fs20 that retailers can help steer kids toward the produce department by using \par
 {{\plain \fs20 the 5 a Day campaign. The study tracked 3,570 third_graders across the \par
 {{\plain \fs20 state who participated in 5 a Day tours sponsored by their supermarkets. \par
 {{\plain \fs20 The tours, designed to encourage kids to eat at least five servings of \par
 {{\plain \fs20 fresh fruits and vegetables daily, had a positive *effect* on eating \par
 {{\plain \fs20 habits, the study reported. Retailers participating in the program also \par
 {{\plain \fs20 reported positive results.Following the tours, the number of kids eating \par
 {{\plain \fs20 fruits and vegetables every day increased by 28% to 56.2%, the study found. \par
 {{\plain \fs20 The study also found that, following the tours, the number of kids who knew \par
 {{\plain \fs20 about the campaign's central message "very significantly increased." \par
 {{\plain \fs20 \par
 {{\plain \fs20 Before the tours, 46.2% of third_graders knew how many servings of fruits \par
 {{\plain \fs20 and vegetables they needed each day. Afterwards, 87.6% said the

y were \par
}\plain \fs20 aware of the 5 a Day recommendation. By contrast, the level of awareness \par
}\plain \fs20 of the 5 a Day message among adults in Utah is about 10%, according to the \par
}\plain \fs20 state *health* department. \par
}\plain \fs20 \par
}\plain \fs20 TEXT: \par
}\plain \fs20 By AMY I. STICKEL \par
}\plain \fs20 \par
}\plain \fs20 SALT LAKE CITY _ _ As any parent knows, kids have a big effect on a family's \par
}\plain \fs20 grocery shopping habits. And a study released by the Utah Department of \par
}\plain \fs20 Health here offers evidence that retailers can help steer kids toward the \par
}\plain \fs20 produce department by using the 5 a Day campaign. \par
}\plain \fs20 \par
}\plain \fs20 The study tracked 3,570 third_graders across the state who participated in \par
}\plain \fs20 5 a Day tours sponsored by their supermarkets. \par
}\plain \fs20 \par
}\plain \fs20 The tours, designed to encourage kids to eat at least five servings of \par
}\plain \fs20 fresh fruits and vegetables daily, had a positive effect on eating habits, \par
}\plain \fs20 the study reported. \par
}\plain \fs20 \par
}\plain \fs20 Retailers participating in the program also reported positive results. \par
}\plain \fs20 \par
}\plain \fs20 "We're very pleased with the tours," said Tim Hallows, assistant produce \par
}\plain \fs20 manager for Associated Food Stores, based here. "We're going to continue \par
}\plain \fs20 the program." \par
}\plain \fs20 \par
}\plain \fs20 Hallows said that, as a cooperative, Associated is encouraging its members \par
}\plain \fs20 to take part in the program. In the stores that participated, the feedback \par
}\plain \fs20 from kids and their parents has been excellent, he said. \par
}\plain \fs20 \par
}\plain \fs20 The kids were polled both before and after they took the tour, to see what \par
}\plain \fs20 they learned or how their attitudes changed. \par
}\plain \fs20 \par
}\plain \fs20 Following the tours, the number of kids eating fruits and vegetables every \par
}\plain \fs20 day increased by 28% to 56.2%, the study found. \par
}\plain \fs20 \par
}\plain \fs20 The study also found that, following the tours, the number of kids who knew \par
}\plain \fs20 about the campaign's central message "very significantly increases

ed." \par

}}{\plain \fs20 \par

}}{\plain \fs20 Before the tours, 46.2% of third_graders knew how many servings of fruits \par

}}{\plain \fs20 and vegetables they needed each day. Afterwards, 87.6% said the y were \par

}}{\plain \fs20 aware of the 5 a Day recommendation. By contrast, the level of awareness \par

}}{\plain \fs20 of the 5 a Day message among adults in Utah is about 10%, accord ing to the \par

}}{\plain \fs20 state health department. \par

}}{\plain \fs20 \par

}}{\plain \fs20 The tours also encouraged more kids to track the number of fruit s and \par

}}{\plain \fs20 vegetables they eat every day. More than 59% of the third_grad ers said \par

}}{\plain \fs20 they were counting their daily servings of produce after the tou r, up 31% \par

}}{\plain \fs20 from before the tour. \par

}}{\plain \fs20 \par

}}{\plain \fs20 Kids also said their preferences for fruits and vegetables incre ased after \par

}}{\plain \fs20 the tour. \par

}}{\plain \fs20 \par

}}{\plain \fs20 Before the tours, 84.6% of third_graders liked fruit "a lot." After the \par

}}{\plain \fs20 tours, 90.2% said they liked fruit a lot. The number of kids wh o liked \par

}}{\plain \fs20 vegetables a lot increased by 17% following their tour, to 53.3% . \par

}}{\plain \fs20 \par

}}{\plain \fs20 "Perhaps eating raw vegetables in the store turned them on _ _ many kids \par

}}{\plain \fs20 just don't like the overcooked mushy vegetables they might get a t home. Or \par

}}{\plain \fs20 they learned vegetables were really good for them and decided to eat them. \par

}}{\plain \fs20 Or they learned to say what we want them to say," the study's au thors \par

}}{\plain \fs20 speculated. \par

}}{\plain \fs20 5 a Day tours also helped third_graders understand the importan ce of \par

}}{\plain \fs20 vitamin A and sources of vitamin C and fiber, according to the s tudy. \par

}}{\plain \fs20 About 62% of post_tour third_graders said they knew about the importance of \par

}}{\plain \fs20 vitamin A, up from 46%. \par

}}{\plain \fs20 \par

}}{\plain \fs20 Knowledge of fruits as a source of vitamin C also increased, fro m 50.7% to \par

}}{\plain \fs20 60.5%. \par

}}{\plain \fs20 \par

}}{\plain \fs20 Fiber was apparently a little trickier concept for the third_gr aders _ _ \par

following the tour, 34.8% knew plants are a source of fiber, up from 32.7%

"We think the message may not have been clear, or perhaps too much information was presented," the study's authors wrote. "The implication is that we need to make the information very simple and easy to understand, so we don't confuse the kids."

Teachers praised the educational value of tours. Of 121 teachers who participated, about 93% said the tours were either "beneficial" or "very beneficial."

"This is very much a local project," said Rachel Jones, community health specialist for the Utah Department of Health. She credited local health departments for working in conjunction with supermarkets to arrange the tours.

Dole Food Co., Los Angeles, helped create the national 5 a Day tour program, which is in its second year.

"During the 1994-95 school year, the tours reached a million kids with the 5 a Day message, and Dole is so committed to this program that we have set a goal to reach at least one and a half million students during the 1995-96 school year," said Lorelei DiSogra, director of nutrition and health for Dole Food.

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INDUSTRY NAMES: Agriculture; Business services

PRODUCT NAMES: Vegetables and melons (016000); Fruit and tree nuts (017000); Advertising (731000)

CONCEPT TERMS: All market information; Marketing campaign; Youth market

MARKETING TERMS: All campaign; All general; All product marketing;

Campaign *effectiveness*; Sales promotion; *Public* *service*

{{\plain \fs20 *advertising* \par
{{\plain \fs20 SLOGANS: 5 a Day \par
{{\plain \fs20 GEOGRAPHIC NAMES: North America (NOAX); United States (USA) \par
par
{{\plain \fs20 \par
{{\plain \fs20 \par
{{\plain \fs20 15/9/11 (Item 11 from file: 9) \par
{{\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
{{\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par
{{\plain \fs20 \par
{{\plain \fs20 01321766 \par
{{\plain \fs20 Selling Good Behavior \par
{{\plain \fs20 (Marketers are using social issues to promote good nutrition, regular \par
{{\plain \fs20 checkups and other positive behavior, led by *AIDS* prevention) \par
{{\plain \fs20 American Demographics, v 17, n 11, p 60+ \par
{{\plain \fs20 November 1995 \par
{{\plain \fs20 DOCUMENT TYPE: Journal ISSN: 0163\ 4089 (United States) \par
{{\plain \fs20 LANGUAGE: English RECORD TYPE: Abstract \par
{{\plain \fs20 \par
{{\plain \fs20 ABSTRACT: \par
{{\plain \fs20 Marketers are using social issues to promote good nutrition, regular \par
{{\plain \fs20 checkups and other positive behavior, led by *AIDS* prevention. Wegman's \par
{{\plain \fs20 (Rochester, NY), a supermarket chain, has promoted produce eating as a \par
{{\plain \fs20 civic duty in its "Strive for Five" campaign, which links good eating \par
{{\plain \fs20 practices and good *health*, for 5 yrs. A similar program, "Five A Day" \par
{{\plain \fs20 partnership between the National Cancer Institute and an industry group, \par
{{\plain \fs20 Produce for Better *health* Foundation \par
{{\plain \fs20 supermarkets in the US. Wegman's spokesperson Jane Andrews says the \par
{{\plain \fs20 campaign has increased produce sales. \par
{{\plain \fs20 \par
{{\plain \fs20 Social marketing campaigns \par
{{\plain \fs20 Andreasen, a marketing professor at the Georgetown University School of \par
{{\plain \fs20 Business \par
{{\plain \fs20 and they welcome partnerships with private enterprise, a departure from \par
{{\plain \fs20 conventional attitudes of public *health* officials. Modern campaigns have \par
{{\plain \fs20 been especially *effective* in international efforts to promote population \par
{{\plain \fs20 planning. Social marketing aims for 100% market share, while conventional \par

{{\plain \fs20 marketers are happy to shift market share 2\ 3%. Article discuss
 es the \par
 }}\plain \fs20 success of campaigns that avoid preaching, *AIDS* prevention, and
 d the \par
 }}\plain \fs20 success of social marketing. \par
 }}\plain \fs20 \par
 }}\plain \fs20 COMPANY NAMES: WEGMANS FOOD MARKETS INC \par
 }}\plain \fs20 INDUSTRY NAMES: Supermarkets \par
 }}\plain \fs20 PRODUCT NAMES: Supermarket _ retail (541035) \par
 }}\plain \fs20 CONCEPT TERMS: All market information; Marketing campaign \par

 }}\plain \fs20 MARKETING TERMS: All general; *Public* *service* *advertising*
 \par
 }}\plain \fs20 GEOGRAPHIC NAMES: North America (NOAX); United States (USA) \par
 par
 }}\plain \fs20 \par
 }}\plain \fs20 \par
 }}\plain \fs20 15/9/12 (Item 12 from file: 9) \par
 }}\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
 }}\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par
 }}\plain \fs20 \par
 }}\plain \fs20 01194820 \par
 }}\plain \fs20 Ad Council Sees Children as Theme For Its Campaigns \par
 }}\plain \fs20 (The Advertising Council to focus at least 80% of its campaigns
 on poverty, \par
 }}\plain \fs20 child abuse, drugs and other child_related issues) \par
 }}\plain \fs20 Wall Street Journal , v CCXXV, n 95, p B8 \par
 }}\plain \fs20 May 16, 1995 \par
 }}\plain \fs20 DOCUMENT TYPE: Business Newspaper ISSN: 0099_9660 (United Sta
 tes) \par
 }}\plain \fs20 LANGUAGE: English RECORD TYPE: Abstract \par
 }}\plain \fs20 \par
 }}\plain \fs20 ABSTRACT: \par
 }}\plain \fs20 The Advertising Council plans to focus at least 80% of its publi
 c_service \par
 }}\plain \fs20 campaigns on poverty, child abuse, drugs and other child_relate
 d issues for \par
 }}\plain \fs20 at least the next ten years. The idea for focusing on children r
 esulted \par
 }}\plain \fs20 from a number of sobering statistics: 200,000 children go to sch
 ool with \par
 }}\plain \fs20 weapons every day; every four hours a child commits suicide; eve
 ry 30 \par
 }}\plain \fs20 seconds a child is born into poverty. The first campaign, create
 d by Bates \par
 }}\plain \fs20 USA, will come from the Pediatric *AIDS* Foundation and will str
 ess \par
 }}\plain \fs20 prenatal care, teenage pregnancy and the nonprofit National Fath
 erhood \par
 }}\plain \fs20 Initiative. The ads will encourage *HIV* testing and will includ
 e a \par
 }}\plain \fs20 toll_free number that ties into the Centers for Disease Control
 's *AIDS* \par
 }}\plain \fs20 hotline. The Ad council will now accept only new campaigns that

have \par
 }{\plain \fs20 children's issues as the main focus, and some existing campaigns
 , such as \par
 }{\plain \fs20 drunken driving, are being modified to include children. The cou
 ncil will \par
 }{\plain \fs20 increase the number of campaigns it presents, from around 30 to
 45 per \par
 }{\plain \fs20 year, and it will, for the first time, track the cumulative *eff
 ect* of the \par
 }{\plain \fs20 campaigns. \par
 }{\plain \fs20 \par
 }{\plain \fs20 COMPANY NAMES: ADVERTISING COUNCIL; BATES USA (BATES WORLDWIDE
) \par
 }{\plain \fs20 INDUSTRY NAMES: Business services \par
 }{\plain \fs20 PRODUCT NAMES: Advertising (731000) \par
 }{\plain \fs20 CONCEPT TERMS: All company; All market information; Corporate s
 trategy; \par
 }{\plain \fs20 Marketing campaign; Orders \par
 }{\plain \fs20 MARKETING TERMS: All campaign; All general; All media; *Public*
 service \par
 }{\plain \fs20 *advertising*; Campaign theme \par
 }{\plain \fs20 GEOGRAPHIC NAMES: North America (NOAX); United States (USA) \par
 }{\plain \fs20 \par
 }{\plain \fs20 \par
 }{\plain \fs20 15/9/13 (Item 13 from file: 9) \par
 }{\plain \fs20 DIALOG(R)File 9:Business & Industry(R) Jul \par
 }{\plain \fs20 (c) 1999 Resp. DB Svcs. All rts. reserv. \par
 }{\plain \fs20 \par
 }{\plain \fs20 01088117 \par
 }{\plain \fs20 Study boosts O&M anti_drugs repitch \par
 }{\plain \fs20 (Ogilvy & Mather's UKPd1.4 mil TV ad campaign against solvent dr
 ug abuse \par
 }{\plain \fs20 helped reduce the number of deaths from such abuse) \par
 }{\plain \fs20 Campaign, p 6 \par
 }{\plain \fs20 December 16, 1994 \par
 }{\plain \fs20 DOCUMENT TYPE: Journal ISSN: 0008_2309 (United Kingdom) \par
 }{\plain \fs20 LANGUAGE: English RECORD TYPE: Abstract \par
 }{\plain \fs20 \par
 }{\plain \fs20 ABSTRACT: \par
 }{\plain \fs20 Ogilvy & Mather's hard_hitting UKPd1.4 mil TV ad campaign again
 st solvent \par
 }{\plain \fs20 drug abuse for the Department of *Health* has helped reduce the
 number of \par
 }{\plain \fs20 deaths from such abuse to 79 in 1992, when the campaign began, t
 he lowest \par
 }{\plain \fs20 in 10 yrs, according to a study by the St George's Hospital Medi
 cal School \par
 }{\plain \fs20 (London). There were 273 deaths due to solvent abuse in 1990_91
 . The \par
 }{\plain \fs20 findings improve the firm's chance of retaining the account, whi
 ch will be \par
 }{\plain \fs20 reviewed under a broad overhaul of the government's strategy on

drugs. \par
 {{\plain \fs20 \par
 {{\plain \fs20 COMPANY NAMES: DEPARTMENT OF HEALTH; OGILVY & MATHER \par
 {{\plain \fs20 INDUSTRY NAMES: Business services \par
 {{\plain \fs20 PRODUCT NAMES: Television advertising services (731348) \par
 {{\plain \fs20 CONCEPT TERMS: All market information; Marketing campaign \par
 {{\plain \fs20 MARKETING TERMS: All campaign; All general; All media; Campaign
 \par
 {{\plain \fs20 *effectiveness*; *Public* *service* *advertising*; Ad volume \par
 par
 {{\plain \fs20 GEOGRAPHIC NAMES: European Union (EUCX); United Kingdom (UNK)
 ; Western \par
 {{\plain \fs20 Europe (WEEX) \par
 {{\plain \fs20 \par
 {{\plain \fs20 \par
 {{\plain \fs20 15/9/14 (Item 1 from file: 47) \par
 {{\plain \fs20 DIALOG(R)File 47:Magazine Database(TM) \par
 {{\plain \fs20 (c) 1999 The Gale group. All rts. reserv. \par
 {{\plain \fs20 \par
 {{\plain \fs20 04028556 SUPPLIER NUMBER: 14902515 \par
 {{\plain \fs20 The power to change what's 'cool.' (changing social behavior thr
 ough media \par
 {{\plain \fs20 campaigns) (Column) \par
 {{\plain \fs20 Alter, Jonathan \par
 {{\plain \fs20 Newsweek, v123, n3, p23(1) \par
 {{\plain \fs20 Jan 17, 1994 \par
 {{\plain \fs20 DOCUMENT TYPE: Column ISSN: 0028_9604 LANGUAGE: ENGLI
 SH \par
 {{\plain \fs20 RECORD TYPE: ABSTRACT \par
 {{\plain \fs20 \par
 {{\plain \fs20 ABSTRACT: Television public service advertisements have been ve
 ry \par
 {{\plain \fs20 *effective* in changing the public's behavior and condom ads cou
 ld help \par
 {{\plain \fs20 reduce the incidence of *AIDS*. Since the 'designated driver' ca
 mpaign \par
 {{\plain \fs20 began in 1989, alcohol_related car accidents have declined by 2
 5%. \par
 {{\plain \fs20 \par
 {{\plain \fs20 SPECIAL FEATURES: illustration; photograph \par
 {{\plain \fs20 DESCRIPTORS: *Public* *service* *advertising*__ *Evaluation*;
 Health \par
 {{\plain \fs20 risk communication__ *Evaluation* \par
 {{\plain \fs20 FILE SEGMENT: MI File 47 \par
 {{\plain \fs20 \par
 {{\plain \fs20 \par
 {{\plain \fs20 15/9/15 (Item 2 from file: 47) \par
 {{\plain \fs20 DIALOG(R)File 47:Magazine Database(TM) \par
 {{\plain \fs20 (c) 1999 The Gale group. All rts. reserv. \par
 {{\plain \fs20 \par
 {{\plain \fs20 03453831 SUPPLIER NUMBER: 08993676 \par
 {{\plain \fs20 People, not kisses, kill. (*AIDS* activists vociferous in condem
 ning public \par

{{\plain \fs20 indifference; lukewarm when it comes to taking responsibility
 for their \par
 }}{\plain \fs20 own sexual behavior) \par
 }}{\plain \fs20 Neff, David \par
 }}{\plain \fs20 Christianity Today, v34, n14, p23(1) \par
 }}{\plain \fs20 Oct 8, 1990 \par
 }}{\plain \fs20 ISSN: 0009_5753 LANGUAGE: ENGLISH RECORD TYPE: CITATI
 ON \par
 }}{\plain \fs20 \par
 }}{\plain \fs20 DESCRIPTORS: *AIDS* Coalition to Unleash Power_ _ Social polic
 y; Sexual \par
 }}{\plain \fs20 ethics_ _ *Analysis*; *Public* *service* *advertising*_ _ *Eva
 luation*; \par
 }}{\plain \fs20 *AIDS* (Disease)_ _ Study and teaching \par
 }}{\plain \fs20 FILE SEGMENT: MI File 47 \par
 }}{\plain \fs20 \par
 }}{\plain \fs20 \par
 }}{\plain \fs20 15/9/16 (Item 3 from file: 47) \par
 }}{\plain \fs20 DIALOG(R)File 47:Magazine Database(TM) \par
 }}{\plain \fs20 (c) 1999 The Gale group. All rts. reserv. \par
 }}{\plain \fs20 \par
 }}{\plain \fs20 03004155 SUPPLIER NUMBER: 06328439 \par
 }}{\plain \fs20 *AIDS* and PSAs: broadcasters are seizing the initiative locally
 ; lack of \par
 }}{\plain \fs20 leadership from the Feds or the networks spurs action. (public
 service \par
 }}{\plain \fs20 announcement, federal government) \par
 }}{\plain \fs20 Hersch, Patricia \par
 }}{\plain \fs20 Channels The Business of Communications, v7, n10, p6(1) \par
 }}{\plain \fs20 Nov, 1987 \par
 }}{\plain \fs20 ISSN: 0895_643X LANGUAGE: ENGLISH RECORD TYPE: CITATI
 ON \par
 }}{\plain \fs20 \par
 }}{\plain \fs20 SPECIAL FEATURES: illustration; photograph \par
 }}{\plain \fs20 DESCRIPTORS: National Association of Broadcasters_ _ Reports;
 AIDS \par
 }}{\plain \fs20 (Disease) in mass media_ _ *Analysis*; *Public* *service* *adv
 ertising*_ _ \par
 }}{\plain \fs20 *Analysis* \par
 }}{\plain \fs20 FILE SEGMENT: MI File 47 \par
 }}{\plain \fs20 \par
 }}{\plain \fs20 \par
 }}{\plain \fs20 15/9/17 (Item 4 from file: 47) \par
 }}{\plain \fs20 DIALOG(R)File 47:Magazine Database(TM) \par
 }}{\plain \fs20 (c) 1999 The Gale group. All rts. reserv. \par
 }}{\plain \fs20 \par
 }}{\plain \fs20 03003978 SUPPLIER NUMBER: 06099347 \par
 }}{\plain \fs20 Media & the message. (*AIDS* warnings in the media) (editorial)
 \par
 }}{\plain \fs20 Commonweal, v114, n19, p612(2) \par
 }}{\plain \fs20 Nov 6, 1987 \par
 }}{\plain \fs20 DOCUMENT TYPE: editorial ISSN: 0010_3330 LANGUAGE: EN
 GLISH \par
 }}{\plain \fs20 RECORD TYPE: CITATION \par

{{\plain \fs20 \par
 {{\plain \fs20 DESCRIPTORS: *AIDS* (Disease) in mass media__Social aspects;
 Television \par
 {{\plain \fs20 advertising__Social aspects; *Public* *service* *advertising
 *__ \par
 {{\plain \fs20 *Evaluation* \par
 {{\plain \fs20 FILE SEGMENT: MI File 47 \par
 {{\plain \fs20 \par
 {{\plain \fs20 \par
 {{\plain \fs20 15/9/18 (Item 1 from file: 88) \par
 {{\plain \fs20 DIALOG(R)File 88:BUSINESS A.R.T.S. \par
 {{\plain \fs20 (c) 1999 The Gale Group. All rts. reserv. \par
 {{\plain \fs20 \par
 {{\plain \fs20 05135891 SUPPLIER NUMBER: 19296952 (THIS IS THE FULL TEXT
) \par
 {{\plain \fs20 Adolescent processing of social and physical threat communicatio
 ns. \par
 {{\plain \fs20 Schoenbachler, Denise D.; Whittler, Tommy E. \par
 {{\plain \fs20 Journal of Advertising, v25, n4, p37(18) \par
 {{\plain \fs20 Winter, 1996 \par
 {{\plain \fs20 ISSN: 0091_3367 LANGUAGE: English RECORD TYPE: Fullte
 xt; Abstract \par
 {{\plain \fs20 WORD COUNT: 8642 LINE COUNT: 00965 \par
 {{\plain \fs20 \par
 {{\plain \fs20 AUTHOR ABSTRACT: Using the predictions of the ordered protectio
 n \par
 {{\plain \fs20 motivation model (OPM), the authors examined 371 adolescents' re
 actions to \par
 {{\plain \fs20 physical and social threat appeals in drug prevention public ser
 vice \par
 {{\plain \fs20 announcements. Sensation seeking was also included in the experi
 ment and \par
 {{\plain \fs20 *analysis*. In support of the notion that the social implication
 s of a \par
 {{\plain \fs20 response to a threat message influence the message's *effectiven
 ess*, \par
 {{\plain \fs20 social threat communications were more persuasive than physical
 threat \par
 {{\plain \fs20 communications. Sensation seeking emerged as an important variab
 le \par
 {{\plain \fs20 moderating response to threat communications, supporting the arg
 ument that \par
 {{\plain \fs20 responses may be due to factors other than the communication its
 elf. In \par
 {{\plain \fs20 contrast to the argument that fear arousal is a prerequisite for
 \par
 {{\plain \fs20 *effective* response to threat messages, the authors found fear
 arousal \par
 {{\plain \fs20 unnecessary for persuasion to occur. The implications of the fin
 dings for \par
 {{\plain \fs20 the *effectiveness* of public service announcements are discusse
 d. \par
 {{\plain \fs20 \par
 {{\plain \fs20 TEXT: \par

Through the 1980s, drug use among teenagers declined steadily, but a recent upsurge in drug use is cause for alarm. Since 1992, marijuana use among eighth graders has quadrupled and the number of teenagers who have smoked marijuana at least once in the past year has nearly doubled. In 1995, one in three high school sophomores (a 63% increase since 1992) and nearly four in 10 seniors (a 44% increase since 1992) had used an illicit drug at least once in the past year (Levine 1996). Although public service announcements (PSAs) were implemented to discourage drug consumption, little is known about how young people respond to those messages. The prevailing antidrug appeal attempts to scare the target group into attitude and behavior changes through the use of physical threat messages (King and Reid 1990; Schoenbachler and Dsilva 1993). The almost exclusive reliance on threat appeals in antidrug messages and the alarming increase in drug usage suggest a need for both theoretical and pragmatic guidance on the use of such messages. Tanner, Hunt, and Eppright (1991) proposed a model of threat appeal effectiveness that may increase understanding of adolescents' reactions to threat messages. Using the topic of sexually transmitted disease (STD) among college students, those researchers found support for a model emphasizing the effects of emotion, social implications of responses, and prior knowledge on response to threat communications. Although the findings supported many of their contentions, Tanner and his coworkers noted the need to confirm their findings in various threat situations and with other populations. Hence, we decided to use their model to provide insights about the psychological processes adolescents experience when exposed to physical and social threat messages in an antidrug context. Antidrug communications use threat messages extensively and make coping response recommendations that are distinctly different from those in STD threat communica-

tions. In \par

{\plain \fs20 the STD case, the recommendation is to adopt a certain coping re
sponse (use \par

{\plain \fs20 a condom), but in antidrug threat communications the recommendat
ion is to \par

{\plain \fs20 not do something (don't use drugs). \par

{\plain \fs20 We also decided to extend the Tanner et al. model in two a
reas. \par

{\plain \fs20 First, those researchers found that the social context of a copi
ng response \par

{\plain \fs20 influences the effectiveness of a threat communication. In other
words, the \par

{\plain \fs20 possible responses to a threat communication may have social imp
lications \par

{\plain \fs20 for the adolescent that influence the response chosen. The adole
scent may \par

{\plain \fs20 select a response that results in the most socially acceptable o
utcome, \par

{\plain \fs20 rather than selecting a response that best minimizes the threat
presented. \par

{\plain \fs20 In the case of antidrug messages targeting adolescents, who are
extremely \par

{\plain \fs20 concerned about social acceptance, use of an alternative threat
appeal, the \par

{\plain \fs20 social threat appeal, may create the social context for the resp
onse. That \par

{\plain \fs20 is, the social threat message clearly indicates that the coping
response, \par

{\plain \fs20 not using drugs, will result in a socially acceptable outcome. A
lthough \par

{\plain \fs20 social threat appeals have been used in drug prevention PSAs (Ha
nneman and \par

{\plain \fs20 McEwen 1973; Schoenbachler and Dsilva 1993), only minimal empiri
cal \par

{\plain \fs20 evidence supports their effectiveness in a drug prevention conte
xt. \par

{\plain \fs20 Second, Tanner et al. found that an individual's coping re
sponse may \par

{\plain \fs20 be based on prior experience or knowledge rather than the commun
ication \par

{\plain \fs20 itself. Individuals may have a repertoire of coping responses th
at can be \par

{\plain \fs20 substituted for the coping response recommended in a threat comm
unication. \par

{\plain \fs20 We extended the work of Tanner et al. by examining the target au
dience's \par

{\plain \fs20 information processing capabilities and relevant personality var
iables as \par

{\plain \fs20 sources of coping response repertoires. This extension is suppor
ted by \par

{\plain \fs20 Rotfeld (1988), who suggested that responses to threat messages
are \par

{\plain \fs20 probably situation, topic, person, and criterion specific. \par

Another issue addressed in our research was the influence of level of threat in a communication and whether arousing fear is necessary. The Tanner et al. study, like very early threat appeal research (Janis and Feshbach 1953), showed fear arousal to be a prerequisite for attitude or behavior change in response to a threat communication. However, recent threat and persuasion research (Leventhal 1970; Rogers 1975) has de-emphasized the affective or fear component in inducing attitude and behavior change. Prior inconclusive findings on the importance of level of threat suggest that it may not be an important manipulation (Boster and Mongeau 1984; Rotfeld 1988), but Burnett and Oliver (1979) and Burnett and Wilkes (1980) suggest that the optimal level of threat is segment specific (i.e., a function of sensation seeking). For some individuals, a high level of threat is persuasive whereas others respond better to lower levels of threat. Table 1 summarizes previous research on threat messages and persuasion and Table 2 summarizes research supporting the proposed extensions to the Tanner et al. model.

Table 1
Summary of Previous Research on Threat and Persuasion

Study	Topic of Threat Message	Independent Variable
Janis & Feshbach (1953)	Dental hygiene	Level of threat
Janis & Feshbach (1954)	Dental hygiene	Level of threat, anxiety
Berkowitz & Cottingham (1960)	Seatbelt use	Level of threat, topic relevance

}}{\plain \fs20 reat \par }}{\plain \fs20 }}{\plain \fs20 }}{\plain \fs20 reat, \par }}{\plain \fs20 ance \par }}{\plain \fs20 }}{\plain \fs20 reat, \par }}{\plain \fs20 ance \par }}{\plain \fs20 }}{\plain \fs20 reat, \par }}{\plain \fs20 ibility. \par }}{\plain \fs20 }}{\plain \fs20 reat, \par }}{\plain \fs20 estion \par }}{\plain \fs20 }}{\plain \fs20 f loss \par }}{\plain \fs20 of los \par }}{\plain \fs20 f loss \par }}{\plain \fs20 }}{\plain \fs20 reat, \par }}{\plain \fs20 of \par }}{\plain \fs20 ion \par }}{\plain \fs20 }}{\plain \fs20 reat, \par }}{\plain \fs20 ions for \par }}{\plain \fs20 avior \par }}{\plain \fs20 unicat \par }}{\plain \fs20 ar }}{\plain \fs20 }}{\plain \fs20 oval \par }}{\plain \fs20 ibilit \par }}{\plain \fs20	Janis & Terwilliger (1962) \par \par DeWolfe & Governale (1964) \par Powell (1965) \par Hewgill & Miller (1965) \par Leventhal, Singer, Jones (1965) \par Chu (1966) \par Dabbs & Leventhal (1966) \par Leventhal, Watts, Pagano (1967) \par Powell & Miller (1967) \par	Smoking Tuberculosis Fallout shelters Fallout shelters Tetanus Roundworms Tetanus Smoking Blood donation	Level of th Level of th topic relev Level of th topic relev Level of th source cred Level of th coping sugg Magnitude o likelihood imminency o Level of th specificity recommendat Level of th recommendat coping, beh during comm exposure \p Social appr source cred
---	--	--	---

Rogers & Thistlewait	Lung cancer	Level of th
(1970)	degree of \	
	reassurance	
Evans et al. (1970)	Tooth brushing	Social appr
	physical th	
Smart & Fejer (1974)	Drug use	Level of th
	type of dru	
Rogers & Mewborn	Smoking, VD, driving	Magnitude o
(1976)	noxiousness	
	probability	
	occurrence,	
	efficacy of	
	coping resp	
Beck & Davis (1978)	Smoking	Level of th
	topic relev	
Feingold & Knapp	Drug use	Level of th
(1977)	type of con	
	monologue v	
	dialogue \p	
Burnett & Oliver	HMOs	Level of th
(1979)	personality	
Burnett & Wilkes	HMOs	Level of th
(1980)		
King & Reid (1990)	Drinking and driving	Level of th

reat, \par
 }{\plain \fs20 injury to s
 elf/ \par
 }{\plain \fs20 others \par

 }{\plain \fs20 \par
 }{\plain \fs20 Tanner, Hunt, Sexually Level of th
 reat, \par
 }{\plain \fs20 Eppright (1991) transmitted coping resp
 onse, \par
 }{\plain \fs20 diseases knowledge o
 f topi \par
 }{\plain \fs20 coping resp
 onse \par
 }{\plain \fs20 repertoire
 \par
 }{\plain \fs20 \par
 }{\plain \fs20 Study Dependent Variable Major Findi
 ngs \par
 }{\plain \fs20 \par
 }{\plain \fs20 Janis & Feshbach Interest, emotional High threat
 level \par
 }{\plain \fs20 (1953) tension, behavioral aroused mor
 e \par
 }{\plain \fs20 intent, behavior interest/em
 otion. \par
 }{\plain \fs20 Moderate th
 reat \par
 }{\plain \fs20 produced gr
 eatest \par
 }{\plain \fs20 change in i
 ntent \par
 }{\plain \fs20 and behavio
 r. \par
 }{\plain \fs20 \par
 }{\plain \fs20 Janis & Feshbach Interest, emotional High anxiet
 y \par
 }{\plain \fs20 (1954) tension, intent, individuals
 less \par
 }{\plain \fs20 behavior influenced
 by strong \par
 }{\plain \fs20 threat than
 indivi\ \par
 }{\plain \fs20 duals low i
 n anxiety \par
 }{\plain \fs20 \par
 }{\plain \fs20 Berkowitz & Cottingham Attitude, behavioral High levels
 of \par
 }{\plain \fs20 (1960) intent threat more
 \par
 }{\plain \fs20 effective i
 f topic \par
 }{\plain \fs20 relevance m
 inimal \par

Low levels

if topic re

high. \par

\par

Janis & Terwilliger Defensive reactions High threat

level \par

(1962) to fear message produced mo

re \par

defensive r

eaction \par

\par

DeWolfe & Governale Attitude Low threat

levels \par

(1964) more effect

ive when \par

topic relev

ance \par

high. \par

\par

Powell (1965) Attitude, behavioral Threat mess

ages \par

intention directed to

ward \par

family or i

ndivi_ \par

dual more e

ffective \par

than those

aimed \par

impersonal

referent. \par

\par

Hewgill & Miller Attitude, behavioral High levels

of \par

(1965) intent threat most

persua_ \par

sive. No in

teract \par

between sou

rce \par

credibility

and \par

level of th

reat. \par

\par

Leventhal, Singer, Attitude, behavioral Positive re

lation \par

Jones (1965) intent, behavior ship betwee

n level \par

of threat a

nd \par
 }{\plain \fs20 attitude. A
 ctual \par
 }{\plain \fs20 behavior a
 function \par
 }{\plain \fs20 of specific
 ity of \par
 }{\plain \fs20 coping sugg
 estion. \par
 }{\plain \fs20 \par
 }{\plain \fs20 Chu (1966) Fear arousal, Magnitude,
 likeli\ \par
 }{\plain \fs20 psychological hood, and i
 mminency \par
 }{\plain \fs20 resistance of loss inf
 luence \par
 }{\plain \fs20 fear arousa
 l and \par
 }{\plain \fs20 development
 of \par
 }{\plain \fs20 resistance
 to \par
 }{\plain \fs20 messages. \par
 par
 }{\plain \fs20 \par
 }{\plain \fs20 Dabbs & Leventhal Attitude, behavioral Behavior an
 d intent \par
 }{\plain \fs20 (1966) intent, behavior a function
 of level \par
 }{\plain \fs20 of threat.
 Attitude \par
 }{\plain \fs20 a function
 of \par
 }{\plain \fs20 specificity
 of \par
 }{\plain \fs20 recommendat
 ion. \par
 }{\plain \fs20 \par
 }{\plain \fs20 Leventhal, Watts, Attitude, behavior Level of th
 reat \par
 }{\plain \fs20 Pagano (1967) positively
 related \par
 }{\plain \fs20 to attitude
 . \par
 }{\plain \fs20 Recommendat
 ions \par
 }{\plain \fs20 influenced
 actual \par
 }{\plain \fs20 behavior. \par
 par
 }{\plain \fs20 \par
 }{\plain \fs20 Powell & Miller Attitude, behavioral Social appr
 oval a \par
 }{\plain \fs20 (1967) intent disapproval

_messages \par			
}}\plain \fs20		more effect	
ive than \par			
}}\plain \fs20		those with	
no \par			
}}\plain \fs20		consequence	
s. \par			
}}\plain \fs20	\par		
}}\plain \fs20	Rogers & Thistlewait	Beliefs, behavioral	High levels
of \par			
}}\plain \fs20	(1970)	intent	threat more
persua_ \par			
}}\plain \fs20		sive when h	
igh \par			
}}\plain \fs20		reassurance	
present. \par			
}}\plain \fs20		Low levels	
more \par			
}}\plain \fs20		effective w	
ith no \par			
}}\plain \fs20		reassurance	
. \par			
}}\plain \fs20	\par		
}}\plain \fs20	Evans et al. (1970)	Behavioral intent,	Physical th
reat \par			
}}\plain \fs20		self_reported	messages m
ore \par			
}}\plain \fs20		behavior actual	effective f
or intent \par			
}}\plain \fs20		behavior	and self_r
eported \par			
}}\plain \fs20		behavior. S	
ocial \par			
}}\plain \fs20		approval me	
ssage \par			
}}\plain \fs20		most effect	
ive when \par			
}}\plain \fs20		actual beha	
vor \par			
}}\plain \fs20		monitored.	
\par			
}}\plain \fs20	\par		
}}\plain \fs20	Smart & Fejer (1974)	Level of anxiety,	Positive re
lation \par			
}}\plain \fs20		attitude, behavioral	ship betwee
n level \par			
}}\plain \fs20		intent	of threat a
nd atti_ \par			
}}\plain \fs20		tude, inten	
t when \par			
}}\plain \fs20		nonexistent	
drug \par			
}}\plain \fs20		was subject	
. No \par			

significant			
effect			
when the ty			
pe of			
drug was re			
al			
(marijuana)			
.			
Rogers & Mewborn	Behavioral intent	Effect of f	
(1976)	behavioral		
intent	mediated by		
	severity of		
threat.			
Beck & Davis (1978)	Attitude	No relation	
ship	between top		
ic	relevance,		
level	threat and		
attitude	change. Pos		
itive	relationshi		
p	between lev		
el of	threat and		
attitude	change. \pa		
r			
Feingold & Knapp	Attitude	Explicit co	
(1977)	more effect		
ive.	Boomerang e		
ffect__	high levels		
of	threat prod		
uced	favorable a		
ttitude	toward drug		
use			
Burnett & Oliver	Attitude, behavioral	Level of th	
reat			

(1979) varied base on personal usage, and socioeconomic characteristics.	intent effectiveness	for cluster on personal usage, and socioeconomic characteristics
Burnett & Wilkes (1980)	Behavior	High levels threat more persuasive clusters pr high threat Moderate le more effect remaining s
King & Reid (1990)	Fear arousal,	High levels support/counter threat prod arguments, attitude, counter arg behavioral intent and fear ar
Tanner, Hunt, Eppright (1991)	Fear arousal, behavioral	Higher leve threat prod intent, social costs greater lev of adopting response fear arousa Coping resp influenced behavioral Knowledge o

f topic \par				and coping
responses \par				influenced
\par				perception
of social \par				costs of ad
opting \par				response. \
par				
Table 2 \par				
Summary of Previous Research on Sensation Seeking and Persu				
\par				
Study	Sample		Independent V	
\par				
Zuckerman & Bone	College students		Sensation see	
(1972) \par				
\par				
Zuckerman & Neeb	College students		Sensation see	
king \par				
(1980) \par				
\par				
Zaleski (1984)	College students		Sensation see	
king \par				
\par				
Schierman & Rowland	College students		Sensation see	
king \par				
(1985) \par				
\par				
Glasgow, Cartier,	Adults		Sensation see	
king \par				
Wilson (1985) \par				
\par				
Donohew (1988)	High school students,		Sensation see	
king \par				
junior high students \par				
\par				
Andrucci et al.	Adolescents		Sensation see	
king, \par				
(1989)		MMPI \par		
\par				
Study	Dependent Variable	Major Finding		
\par				
Zuckerman & Bone	Drug use, sexual	High sensatio		
(1972)	activity	more likely t		
o engage \par				
in sexual act				
ivity and \par				

use drugs tha
 n low \par
 sensation see
 kers. \par
 \par
 Zuckerman & Neeb Cigarette smoking, High sensatio
 ns \par
 (1980) fast driving seekers more
 likely to \par
 smoke and dri
 ve fast \par
 than low sens
 ation \par
 seekers. \par
 \par
 Zaleski (1984) Emotional content High sensatio
 n seekers \par
 of visual stimuli prefer pictur
 es with \par
 extreme emoti
 on \par
 (positive or
 \par
 negative). \p
 ar
 Low sensation
 seekers \par
 prefer less e
 motional \par
 pictures and
 prefer \par
 positive over
 negative \par
 pictures. \pa
 r
 Schierman & Rowland Entertainment High sensatio
 n seekers \par
 (1985) preferences prefer activi
 ties \par
 associated wi
 th or \par
 related to al
 cohol use \par
 and sexually
 explicit \par
 materials. \p
 ar
 Glasgow, Cartier, Music preference High sensatio
 n seekers \par
 Wilson (1985) prefer comple
 x, \par
 unfamiliar mu
 sic. Low \par

}}\plain \fs20 kers \par		sensation see	
}}\plain \fs20 , \par		prefer simple	
}}\plain \fs20 \par		conservative,	
}}\plain \fs20 c. \par		familiar musi	
}}\plain \fs20 n seekers \par	Donohew (1988)	Drug use, alcohol	High sensatio
}}\plain \fs20 s more \par		are four time	
}}\plain \fs20 \par		likely to use	
}}\plain \fs20 ven times \par		marijuana, se	
}}\plain \fs20 o use \par		more likely t	
}}\plain \fs20 two \par		cocaine, and	
}}\plain \fs20 kely to \par		times more li	
}}\plain \fs20 than low \par		drink alcohol	
}}\plain \fs20 kers. \par		sensation see	
}}\plain \fs20 king was \par	Andrucci et al.	Drug use	Sensation see
}}\plain \fs20 index for \par	(1989)	an effective	
}}\plain \fs20 he \par		identifying t	
}}\plain \fs20 user. \par		at_risk drug	
}}\plain \fs20 not a \par		The MMPI was	
}}\plain \fs20		factor. \par	

}}\plain \fs20 The purpose of our research was to provide both theoretica
l and \par

}}\plain \fs20 practical guidance for threat appeal advertising by testing and
extending \par

}}\plain \fs20 the ordered protection motivation model of threat appeal effecti
veness \par

}}\plain \fs20 (Tanner, Hunt, and Eppright 1991) in the context of an antidrug
public \par

}}\plain \fs20 service announcement. Our intent was to improve the generalizabi
lity of the \par

}}\plain \fs20 OPM model through external validation in a different context wit
h a \par

}}\plain \fs20 different population and to extend the Tanner et al. model in se
veral key \par

}}\plain \fs20 areas. \par

}}\plain \fs20 Ordered Protection Motivation Theory \par

Several paradigms have been used to describe threat appeal effectiveness, including the fear drive paradigm (Janis and Feshbach 1953), the parallel response theory described by Leventhal (1970), and Rogers' (1975) protection motivation theory of threat appeals and attitude change. Each has value, but none of them include both affect and cognition.

Some consider individual difference variables, or consider the role of prior knowledge and experience.

In response to those shortcomings, Tanner, Hunt, and Eppright (1991) developed an ordered protection motivation model of threat appeal effectiveness in light of evidence on the role of individual differences and emotions. Specifically, they developed the role of the social context of the coping response to a threat communication, introduced the notion that responses may be due to factors other than the communication itself, and emphasized, rather than minimized, the role of emotion. The major components of the OPM model are discussed next.

OPM and Social Context

Cognitive mediating processes or coping responses were first identified by Rogers (1975) and are assumed to follow emotion in the Tanner et al. modification. Those coping response or mediating processes are defined as either adaptive or maladaptive. Adaptive responses lead to behavior that minimizes both the threat presented and the danger. For example, an adaptive response to a seatbelt appeal would be to use a seatbelt regularly. Both the threat and the actual danger are minimized.

Maladaptive responses minimize the threat without minimizing the danger. For example, a maladaptive coping response to a seat belt threat communication may be, "I've been driving for 20 years and never had an accident. I don't need a seatbelt." That response reduces the threat, but the danger of serious injury or death in an accident is still present.

Tanner et al. extended Rogers' threat appeal research by including

ng the role \par
 of social context. They proposed that responses to a threat comm
 unication \par
 are evaluated in terms of their social implications. Even in sit
 uations \par
 where fear is aroused and an adaptive coping response is indicat
 ed, the \par
 social implications of that response may affect attitude and beh
 avior \par
 change. For example, in the case of STD messages, the adaptive c
 oping \par
 response, wearing a condom, may imply that one partner or the ot
 her has a \par
 sexually transmitted disease. Therefore, the adaptive response h
 as a social \par
 implication. \par
 The proposed role of social implications in determining co
 ping \par
 response selection and attitude and behavior change suggests tha
 t social \par
 context could be manipulated in threat communications. Although
 most threat \par
 research focuses on physical threat messages, social threat mess
 ages are \par
 used extensively in advertising (e.g., for deodorant, dandruff s
 hampoo, \par
 breath mints) and occasionally in an antidrug PSA context and ma
 y be useful \par
 in constructing a social context for coping response adoption. \par
 The use of social threat appeals has been discussed in sev
 eral \par
 conceptual articles (Spence and Moinpour 1972; Stuteville 1970)
 but \par
 examined empirically in only two studies. Powell and Miller (196
 7) compared \par
 the effectiveness of social approval, social disapproval, and ne
 utral \par
 messages in encouraging blood donation to the Red Cross. They fo
 und that \par
 both social approval and social disapproval messages were more e
 ffective in \par
 changing attitudes toward giving blood than messages that implie
 d no \par
 consequences. In addition, social disapproval messages were sign
 ificantly \par
 more effective in changing attitudes than social approval messag
 es. Evans \par
 et al. (1970) examined whether social approval messages are more
 persuasive \par
 than physical threat messages. They presented groups of high sch
 ool \par
 students with communications about tooth brushing that employed
 high \par

physical threat, low physical threat, or social approval. The physical threat messages were more effective when the dependent variables were intention to comply with the message and self-reported behavior, whereas the social approval messages were more effective when actual behavior change was measured over time. Perhaps physical threat messages are effective as a short-term persuasion device, but have diminishing influence over time.

OPM and Coping Response Sources

Rogers (1975) assumed that coping responses derive from the threat communication itself. Tanner and his coworkers (1991) amended this assumption, arguing that individuals may, through knowledge or prior experience, have a repertoire of coping responses. For example, an individual may respond to a message about using seatbelts with a coping response such as, "I've never had an accident before," "I'm a careful driver," or "If there's a fire, you can't get out." Those responses may be based on past experience or knowledge from some alternative source. Tanner et al. examined prior knowledge of STDs in their validation of the OPM model, and found that prior knowledge did influence coping response. The implication is that additional sources of a repertoire of coping responses to threat communications may affect response.

Sensation Seeking

The Tanner et al. model allows for the introduction of individual difference variables that influence the relationship between threat and persuasion (for a complete review, see Boster and Mongeau 1984). We introduce one personality trait variable that may influence response to fear communications: sensation seeking. Zuckerman et al. (1964) coined the term "sensation seeking" to describe individuals' varying need for arousal. Zuckerman (1978; 1983) contends that individuals have an optimal level of arousal and that they seek or avoid stimulation to remain at the optimal level.

The high sensation seeker is receptive to novel stimuli; the low tends to reject them, preferring the more familiar and less complex. The high sensation seeker's optimal level of stimulation may depend on the levels set by the characteristic level of arousal produced by novel stimuli. Anything producing lower arousal levels may be considered "boring." Apart from the voluntary avoidance of high intensities of stimulation, the low sensation seeker may have a type of nervous system that rejects such stimulation or inhibits cortical reactivity to high intensity stimuli (Zuckerman 1987, p. 181). Prior research has consistently found a strong, positive relationship between sensation seeking and drug use, cigarette use, and alcohol use (Andrussi et al. 1989; Donohew 1988; Schierman and Rowland 1985; Zuckerman and Neeb 1980). The relationship between sensation seeking and drug use suggests that high sensation seeking adolescents should be the target of prevention PSAs. The high sensation seekers are more likely than other adolescents to use drugs and can be considered an "at-risk" audience. In addition, past research has revealed that the high sensation seeker has different message preferences than the low sensation seeker, and the differences can be used to develop effective PSAs. For example, high sensation seekers prefer advertisements that leave the viewer "hanging," whereas low sensation seekers prefer advertisements with closure (Rogus, Palmgreen, and Everett 1990). Donohew et al. (1989) found that high sensation seekers were more persuaded in terms of attitude toward drugs and behavioral intention to use drugs by antidrug PSAs with high sensation value. Similarly, low sensation seekers preferred messages with low sensation value. PSAs having a motivational introduction were preferred by both groups. Adolescent Egocentrism. The target audience's unique cognitive processing capabilities also may influence response to threat

communications, especially in the case of young adolescents. Adolescence is a time of dramatic change in cognitive processing. Elkind (1967) suggests that adolescents fail to differentiate their own thoughts from thoughts of others, which leads to the development of two cognitive constructions: the imaginary audience and the personal fable. The imaginary audience is evident in actual or impending social situations, when the adolescent tries to anticipate the reactions of other people to himself/ herself. These anticipations, however, are based on the assumption that others are as admiring or as critical of the individual as he/she is of himself/herself (Elkind 1967). The adolescent believes he/she is the center of attention, operating on a stage on which he/she is the principal actor, and all the world is the audience (Loof 1971).

In addition, the adolescent fails to differentiate between ideas that are unique and ideas that are universal in a particular construction, creating a personal fable (Elkind 1978). The adolescent's failure to differentiate between ideas that are unique to the self and those that are universal to mankind leads to a belief that the adolescent is immortal. He/she is so special and so unique that although bad things happen to others, they will not happen to him/her (Elkind 1967). This aspect of the personal fable can have negative consequences, as it can motivate reckless behavior. For example, the young man who plays "chicken" in a car has no concern for the consequences. He is too special, too unique; he won't be injured or killed (Elkind 1978). These two cognitive constructions may direct the repertoire of cognitive coping responses available to the adolescent. The personal fable provides responses such as "It will never happen to me," and it represents a sense of immortality that may influence response to threat communications. The imaginary audience gives the adolescent an alternative repertoire of coping responses to threat

ats. \par

{\plain \fs20 Imaginary audience thoughts focus on what others, particularly p
eers, will \par

{\plain \fs20 think about the adolescent. Thoughts such as "What will my frien
ds think?" \par

{\plain \fs20 exemplify imaginary audience cognitions. Thus, the social implic
ations of a \par

{\plain \fs20 coping response become important. \par

{\plain \fs20 OPM and the Role of Emotion \par

{\plain \fs20 Tanner et al. argue that the protection motivation model r
equires \par

{\plain \fs20 reformulation in light of evidence on the role of individual dif
ferences \par

{\plain \fs20 and emotions. Specifically, they emphasize rather than minimize
the role of \par

{\plain \fs20 emotion. The emotion may or may not be fear as posited in past r
esearch. \par

{\plain \fs20 Boster and Mongeau (1984), for example, suggest that threat mani
pulations \par

{\plain \fs20 may bring about emotional responses other than fear that affect
persuasion. \par

{\plain \fs20 The Tanner et al. model suggests that the emotional respon
se to a \par

{\plain \fs20 threat message, usually fear, activates increased attention and
\par

{\plain \fs20 comprehension. The emotional processes are linked indirectly, th
rough \par

{\plain \fs20 cognitive mediating processes, to attitudes and behavior. Hence,
fear \par

{\plain \fs20 arousal in response to a threat message would be necessary for c
hanges in \par

{\plain \fs20 attitude and behavior. Earlier theory, including Rogers' (1975)
protection \par

{\plain \fs20 motivation theory, discounts the role of emotion and argues that
persuasion \par

{\plain \fs20 can occur without an emotional link. The Tanner et al. study wit
h STD \par

{\plain \fs20 messages supports the contention that emotional arousal is a nec
essary \par

{\plain \fs20 prerequisite for persuasion. \par

{\plain \fs20 Hypotheses \par

{\plain \fs20 Figure 1 illustrates the proposed relationships between ty
pe of \par

{\plain \fs20 threat, level of threat, sensation seeking and emotional respons
es, \par

{\plain \fs20 cognitive responses, and persuasion based on the Tanner et al. O
PM. Tanner \par

{\plain \fs20 et al. argue that the social implications of a coping response t
o a threat \par

{\plain \fs20 communication may influence response. For a target audience of t
eenagers, a \par

{\plain \fs20 group particularly sensitive to social acceptance, explicitly il
lustrating \par

{\plain \fs20 the social implications of a response may result in a more persu

asive \par

}{\plain \fs20 threat communication. The standard antidrug campaign uses physic
ally \par

}{\plain \fs20 threatening messages and leaves the social implications to the r
ecipient's \par

}{\plain \fs20 discretion. One alternative type of appeal is the socially threa
tening \par

}{\plain \fs20 message in which the social implications are clearly defined. He
nce, we \par

}{\plain \fs20 tested the following hypotheses. \par

}{\plain \fs20 (Figure 1 ILLUSTRATION OMITTED) \par

}{\plain \fs20 H1a: Social threat communications produce more support argu
ments and \par

}{\plain \fs20 fewer counter arguments than physical threat communications. \pa
r

}{\plain \fs20 H1b: Social threat communications are more persuasive than
physical \par

}{\plain \fs20 threat communications in terms of attitude toward the communicat
ion, \par

}{\plain \fs20 attitude toward drug use, and behavioral intention to use drugs.
\par

}{\plain \fs20 Tanner et al.'s provision that response to threat communic
ations may \par

}{\plain \fs20 come from a repertoire of responses rather than from the communi
cation \par

}{\plain \fs20 itself suggests responses may vary among target groups on some i
ndependent \par

}{\plain \fs20 variables. One such variable, sensation seeking, is relevant whe
n the \par

}{\plain \fs20 threat communication focuses on drug use. High sensation seekers
are \par

}{\plain \fs20 predisposed toward risky behaviors, tend to need intense stimula
tion in \par

}{\plain \fs20 communications, and are difficult to arouse. Their experience wi
th past \par

}{\plain \fs20 risky behaviors may contribute to their repertoire of coping res
ponses, \par

}{\plain \fs20 which in turn may affect the persuasiveness of a threat communic
ation. \par

}{\plain \fs20 Therefore: \par

}{\plain \fs20 H2a: Adolescents high in sensation seeking experience lower
levels of \par

}{\plain \fs20 emotion (i.e., fear, guilt, shame) than those low in sensation s
eeking in \par

}{\plain \fs20 response to threat communications. \par

}{\plain \fs20 H2b: Adolescents high in sensation seeking produce more cou
nter \par

}{\plain \fs20 arguments and fewer support arguments than those low in sensatio
n seeking \par

}{\plain \fs20 in response to threat communications. \par

}{\plain \fs20 H2c: Adolescents high in sensation seeking have a stronger
negative \par

}{\plain \fs20 attitude toward the communication, a more positive attitude towa
rd drug \par

use, and a stronger intention to use drugs than those low in sensation seeking.

The unique cognitive processing nature of the adolescent may contribute to the development of a repertoire of coping responses. The imaginary audience construction leads to coping responses that are socially based. That is, the responses are based on what others will think. The personal fable construction produces responses that reflect feelings of immortality, such as "It will never happen to me." Both types of coping response are present in the adolescent's repertoire and can be accessed when appropriate. The threat communication may direct the adolescent toward one or the other construction for an appropriate coping response. Socially threatening communications, for example, direct the adolescent toward peer-related thoughts dominated by the imaginary audience. Physically threatening messages require responses to reduce physical harm, such as the feelings of immortality typical of the personal fable. Hence:

H3a: Socially threatening communications produce more imaginary audience-based coping responses than physically threatening communications.

H3b: Physically threatening communications produce more personal fable-based coping responses than socially threatening communications.

Tanner et al. emphasize that emotion must be aroused for persuasion to occur. Early research explored the role of varying levels of threat in producing emotional response, with mixed results. The Tanner et al. model suggests that the relationship between threat intensity and emotion is linear, and that the corresponding response in terms of persuasion is linear as well. Therefore:

H4: Increasing the level of threat in a communication from low to moderate and from moderate to high produces correspondingly stronger emotional responses in adolescents.

Method

Subjects and Design

A three (level of threat: high, moderate, or low) by two (type of threat: physical or social) between-subjects factorial experimental design was used to test the hypotheses. Sensation seeking, a measured independent variable, was included in the analysis. We randomly assigned 371 seventh and eighth grade students in a metropolitan middle school to the six treatment conditions. Table 3 summarizes the design and cell sizes.

Table 3
Experimental Design and Cell Sizes

	Level of Threat	Type of Threat	
	Threat	Physical	Social
High Sensation Seekers(a)			
Low	38	3	
Moderate	32	2	
High	33	3	
Low Sensation Seekers(a)			
Low	24	3	
Moderate	28	3	
High	27	3	

(a) Based on median split.

Procedure

Subjects were given a booklet containing a print antidrug PSA, the sensation seeking scale, and the dependent measures. They were asked to look at the PSA for one minute. Next, they were asked to complete an emotional response task. They were then given two and one half minutes in which to list their thoughts about the PSA (cognitive response task). Upon completion of those tasks, subjects were asked to complete their booklet.

Stimulus Materials

The type of threat presented in an antidrug PSA (social or physical)

and the intensity of threat presented (high, medium, or low) were the manipulated independent variables. An advertising agency was employed to develop two print PSAs, one presenting a physical threat and one presenting a social threat. The physical threat PSA featured a young person on a gurney being rushed down a hospital hall. The social threat PSA showed several young people in a school hall. Two young people appeared to be talking about a third individual in the photograph. The copy on these two PSAs was varied to manipulate the intensity of threat. For the physical threat condition, the copy indicated different outcomes for the young person shown on the gurney. In the low threat condition, the young person was ill as a result of drug use. In the moderate and high threat conditions, the outcome was loss of an arm and death, respectively. For the social threat condition, the intensity of rejection was manipulated. In the low threat condition, the copy indicated change in one teen's behavior and the teen's friends expressed concern. As the level of threat intensified from low to moderate and moderate to high, the friends indicated increasing rejection of the teen using drugs. Thus, six PSAs were used in the study: high physical threat, medium physical threat, low physical threat, high social threat, medium social threat, and low social threat.

The PSAs were subjected to a series of pretests as recommended by Higbee (1969) and practiced by King and Reid (1990) to check the type of threat and level of threat manipulations. The layouts were revised and pretested until the manipulations were clearly identifiable. ANOVA revealed significant differences ($F(2,204) = 20.80$, p is less than .0001) between the means for the three level of threat manipulations (means 4.4, 5.4, and 6.0 for the low, moderate, and high threat conditions). Similarly, analysis of the means for the type of threat manipulations (4.2 and 2.1) revealed

significant differences.
 Measurement Instruments
 Sensation Seeking. We measured subjects' need for sensation by using
 Zuckerman's sensation seeking scale (SSS) Form V (Zuckerman, Eysenck, and
 Eysenck 1978). A median split procedure distinguished high and low
 sensation seekers. The scale contains 40 forced-choice items. Subjects
 chose one of two statements that best reflected their feelings.
 Of each
 item pair, one item indicated high sensation seeking and one item indicated
 low sensation seeking. Sensation seeking was scored by giving one point for
 each high sensation seeking response and zero points for low sensation
 seeking responses. Thus, scores ranged from 0 to 40 ($\alpha = .86$).
 Emotional Response. Consistent with King and Reid's (1990) work,
 subjects' emotional responses to the PSAs were measured by using an
 adaptation of Izard's (1979) differential emotions scale (DES II). This
 scale was developed to assess children's and adolescents' emotions at the
 time of scale administration.
 The DES III contains 30 phrases that describe an aspect of the
 experience of 10 fundamental emotions. Three phrases are used to measure
 each emotion and subjects respond to the phrases on a 5-point scale
 anchored by "not at all" and "very much." In research on antidrinking PSAs,
 the DES revealed that fear, sadness, anger, and disgust were evoked in
 response to physically threatening messages (King and Reid 1990). Those
 four emotions, as well as shame/shyness and guilt, were measured in our
 study. Shame/shyness and guilt are dimensions of emotion that may be
 elicited in response to social threats ($\alpha = .92$).
 Cognitive Responses. Subjects were given two and one half minutes to
 list any thoughts they had in response to the PSA. Responses were coded by
 two independent adolescent coders as support arguments, counter arguments,
 or neutral. Counter arguments were defined as negative thoughts directed

toward the message ("I know a lot of kids who do drugs and they don't look like that"), PSA execution ("the ad was stupid"), or models in the PSAs ("the kid in the ad was a jerk"). Conversely, support arguments were positive thoughts in response to the PSAs (e.g., "the picture is good," "the girl in the ad is hot," "using drugs is stupid"). Intercode agreement was .92.

Personal Fable. We assessed adolescents' personal fable or orientation by using an adaptation of Rogers and Mewborn's (1976) probability item which measures subjects' perception of the probability of occurrence of an event depicted in a threatening communication. Subjects responded to four statements related to the probability of negative consequences of drug use on a 5-point scale anchored by "strongly agree" and "strongly disagree." The scale was scored by averaging the responses to the statements ((Alpha) = .56).

Imaginary Audience. We assessed adolescents' imaginary audience orientation using an adaptation of Elkind and Bowen's (1979) imaginary audience scale (IAS). To complete the IAS, subjects read a brief scenario and then selected one of three responses that best indicated what they would do in the situation described. One of the three response choices, unwillingness to participate in a situation that would result in disapproval or humiliation by peers, was scored 2. It indicated a strong imaginary audience concern. The other response choices, indifference to participate and willingness to participate, were scored 1 and 0, respectively. The scores on each of the 11 items were summed to obtain a total imaginary audience score ((Alpha) = .62).

Attitude Toward the PSA. We measured attitude toward the PSA by using five 5-point semantic differential items: pleasant/unpleasant, good/bad, useful/useless, valuable/worthless, and beneficial/not beneficial. The attitude toward the PSA score was determined by averaging the re

sponses to \par
 }{\plain \fs20 the five items ((Alpha) = .86). \par
 }{\plain \fs20 Attitude Toward Drug Use. Subjects were asked to express t
 heir \par
 }{\plain \fs20 feelings in response to statements about using a seatbelt, burni
 ng the \par
 }{\plain \fs20 flag, and using drugs. They indicated their feelings on five 5_
 point \par
 }{\plain \fs20 adjective differential scales: extremely good/extremely bad, ext
 remely \par
 }{\plain \fs20 pleasant/extremely unpleasant, extremely favorable/extremely unf
 avorable, \par
 }{\plain \fs20 extremely valuable/ extremely worthless, and extremely acceptabl
 e/extremely \par
 }{\plain \fs20 unacceptable. An attitude toward drug use score was obtained by
 averaging \par
 }{\plain \fs20 the responses to the five items pertaining to drug use ((Alpha)
 = .96). \par
 }{\plain \fs20 Behavioral Intention to Use Drugs. For the same three issu
 es \par
 }{\plain \fs20 presented in the attitude measure, subjects were asked to indica
 te on a \par
 }{\plain \fs20 5_point scale anchored by "extremely likely" and "extremely unl
 ikely" how \par
 }{\plain \fs20 likely they would be to engage in the behaviors in the next week
 , the next \par
 }{\plain \fs20 month, or ever. \par
 }{\plain \fs20 Results \par
 }{\plain \fs20 Social Context of Response \par
 }{\plain \fs20 H1a and H1b predict main effects for type of threat on cogn
 itive \par
 }{\plain \fs20 response (support or counter arguments) and effectiveness variab
 les \par
 }{\plain \fs20 including attitudes toward the PSA and drug use and behavioral i
 ntention. \par
 }{\plain \fs20 Table 4 reports the results for these hypotheses. \par
 }{\plain \fs20 Table 4 Social Context and Type_of_Threat Main Effects \p
 ar
 }{\plain \fs20 \par
 }{\plain \fs20 Mean Mean \par
 }{\plain \fs20 Dependent Variable (Social) (Physical) \par
 }{\plain \fs20 \par
 }{\plain \fs20 Personal fable 2.43 2.51 \par
 }{\plain \fs20 Imaginary audience 9.92 9.87 \par
 }{\plain \fs20 Counter arguments .65 .67 \par
 }{\plain \fs20 Support arguments 2.34 2.03 \par
 }{\plain \fs20 Attitude/PSA 2.48 2.67 \par
 }{\plain \fs20 Attitude/drug use 4.57 3.98 \par
 }{\plain \fs20 Behavioral intention, week 1.59 1.48 \par
 }{\plain \fs20 Behavioral intention, month 1.60 1.77 \par
 }{\plain \fs20 Behavioral intention, ever 2.10 2.65 \par
 }{\plain \fs20 \par
 }{\plain \fs20 Dependent Variable F ((Omega).
 sup.2) \par

Personal fable	.18	
Imaginary audience	.01	
Counter arguments	.00	
Support arguments	2.03	
Attitude/PSA	3.89(*)	.01
Attitude/drug use	6.32(*)	.01
Behavioral intention, week	.38	
Behavioral intention, month	.99	
Behavioral intention, ever	6.69(*)	.02

(*) Significant at $p < .05$.

H1a is not supported. The social threat appeal did not produce more support arguments or fewer counter arguments ($(F_{sub.1,356}) = 2.03$, n.s.) and ($(F_{sub.1,356}) = .00$, n.s. respectively) than the physical threat communication. Subjects either did not have more favorable cognitive responses or such responses were not captured adequately in the cognitive response task.

H1b, however, is supported. A significant main effect is found for three, of the effectiveness variables; attitude toward the PSA ($(F_{sub.1,358}) = 3.89$, p (is less than) $.05$, $((\Omega)_{sup.2}) = .01$), attitude toward drug use ($(F_{sub.1,359}) = 6.32$, p (is less than) $.05$, $((\Omega)_{sup.2}) = .01$), and behavioral intention to use drugs ($(F_{sub.1,357}) = 6.69$, p (is less than) $.05$, $((\Omega)_{sup.2}) = .02$). As predicted in H1b, subjects indicated a more favorable attitude toward the social threat PSAs in which the social implications of the response were clearly laid out. Subjects' attitudes toward drug use were more negative after a social threat message than after a physical threat message, and subjects indicated they were less likely to ever use drugs after receiving the social threat message. Omega squared, a measure of effect ma

gnitude, is \par

{{plain \fs20 reported for significant results. The effect sizes found are in the small \par

{{plain \fs20 to moderate range (Cohen 1977). \par

{{plain \fs20 Coping Response Sources \par

{{plain \fs20 H2a, H2b and H2c predict main effects for sensation seeking on \par

{{plain \fs20 emotional response, cognitive responses, and the effectiveness measures. \par

{{plain \fs20 Table 5 summarizes the ANOVA results. \par

{{plain \fs20 Table 5 Source of Coping Response: Sensation Seeking Main Effects \par

Dependent Variable	Mean (High SS)	Mean (Low SS)
Emotional response	2.01	1.97
Counter arguments	.85	.44
Support arguments	1.90	2.51
Attitude/PSA	2.56	2.49
Attitude/drug use	4.02	4.72
Behavioral intention, week	1.15	1.72
Behavioral intention, month	2.21	1.48
Behavioral intention, ever	2.93	2.01

Dependent Variable	F	((Omega).sup.2)
Emotional response	.88	
Counter arguments	16.10(*)	.03
Support arguments	12.34(*)	.03
Attitude/PSA	2.86	
Attitude/drug use	29.14(*)	.07
Behavioral intention, week	16.24	.04
Behavioral intention, month	16.03(*)	.04
Behavioral intention, ever	15.10(*)	.04

(*) Significant at $p < .05$. \par

{{plain \fs20 Contrary to H2a, we found no significant effect for sensation seeking \par

{{plain \fs20 on emotional response ((F.sub.1,359) = .88, n.s.) or on the individual \par

{{plain \fs20 dimensions of emotion. Lack of support for this hypothesis was particularly \par

{{plain \fs20 surprising and led us to question whether the measure of sensation seeking \par

{{plain \fs20 was affected by having taken the measure immediately after exposure to the \par

{{plain \fs20 stimuli. To check for contamination, we ran a level by threat ty

pe ANOVA \par
 across sensation seeking. No significant main effects for level
 or type \par
 were found and the interaction was nonsignificant. Hence, the me-
 asures were \par
 not contaminated by the stimuli presentation. A more likely expl-
 anation is \par
 that a paper and pencil test of emotion (although widely used) m-
 ay not have \par
 adequately measured differential emotion. \par
 H2b predicts a main effect for sensation seeking on type o-
 f cognitive \par
 response. The type of thoughts in response to the PSAs (support
 or counter) \par
 differed significantly for high and low sensation seekers. High
 sensation \par
 seekers produced more counter arguments ($(F_{sub.1,359}) = 16.10$,
 p (is less \par
 than) $.05$, $((\Omega)_{sup.2}) = .03$) and low sensation seekers prod-
 uced more \par
 support arguments ($(F_{sub.1,359}) = 12.34$, p (is less than) $.05$,
 \par
 $((\Omega)_{sup.2}) = .03$). Thus, H2b is supported. \par
 The importance of sensation seeking as an individual diffe-
 rence \par
 variable affecting response is further supported by the signific-
 ant main \par
 effects on all persuasion variables. Consistent with H2c, high s-
 ensation \par
 seekers had more negative attitudes toward the PSA ($(F_{sub.1,358}) = 2.86$, p \par
 (is less than) $.10$, $((\Omega)_{sup.2}) = .01$), had more positive at-
 titudes \par
 toward drug use ($(F_{sub.1,359}) = 29.14$, p (is less than) $.05$, \par
 ar
 $((\Omega)_{sup.2}) = .07$), and indicated a stronger likelihood of u-
 sing drugs \par
 in the next week ($(F_{sub.1,358}) = 16.24$, p (is less than) $.05$, \par
 par
 $((\Omega)_{sup.2}) = .04$), in the next month ($(F_{sub.1,358}) = 16.03$
 , p (is \par
 less than) $.05$, $((\Omega)_{sup.2}) = .04$) and ever ($(F_{sub.1,357}) =$
 15.10 , p \par
 (is less than) $.05$, $((\Omega)_{sup.2}) = .04$) than low sensation se-
 ekers. \par
 H3a and H3b, predicting differences in coping responses in
 terms of \par
 imaginary audience and personal fable by threat type, are not su-
 pported. \par
 The social threat did not lead to more imaginary audience respon-
 ses \par
 ($(F_{sub.1,355}) = .01$, n.s.) and the physical threat did not incr-
 ease \par
 personal fable coping responses ($(F_{sub.1,355}) = .82$, n.s.). App

arently, \par
 }{\plain \fs20 the type of threat presented does not alter subjects' reliance o
 n these \par
 }{\plain \fs20 distinct orientations for sources of coping response. However, a
 dolescents' \par
 }{\plain \fs20 personal fable and imaginary audience orientations may not have
 been \par
 }{\plain \fs20 measured adequately. Both measures had questionable reliability
 and past \par
 }{\plain \fs20 efforts to measure the constructs have met with little success (
 Cohn et al. \par
 }{\plain \fs20 1988; Enright, Lapsley and Shukla 1979). \par
 }{\plain \fs20 Role of Emotion \par
 }{\plain \fs20 H4, predicting a positive relationship between level of th
 reat and \par
 }{\plain \fs20 emotional arousal, is not supported. We found no significant dif
 ferences in \par
 }{\plain \fs20 emotional arousal by level of threat ((F.sub.2.356) = 1.17, n.s.
). \par
 }{\plain \fs20 Researchers have questioned the importance of threat level in th
 e \par
 }{\plain \fs20 determination of threat message effectiveness (Boster and Mongea
 u 1984; \par
 }{\plain \fs20 Hewgill and Miller 1965; Rotfeld 1988). We included level of thr
 eat to test \par
 }{\plain \fs20 Tanner et al.'s argument that arousal is necessary and in part t
 o ensure \par
 }{\plain \fs20 that level effects would not mask the type of threat effects. In
 addition, \par
 }{\plain \fs20 similar work (King and Reid 1990) had included the level of thre
 at \par
 }{\plain \fs20 manipulation with significant results. We did not find evidence
 supporting \par
 }{\plain \fs20 the importance of level of threat in influencing PSA effectivene
 ss. \par
 }{\plain \fs20 Consistent with Boster and Mongeau's (1984) meta_analytic findi
 ngs, the \par
 }{\plain \fs20 level of threat in a communication had no significant effect on
 emotional \par
 }{\plain \fs20 response. Failure to find significant level of threat and emotio
 n effects \par
 }{\plain \fs20 may be partly a function of the minimal role of threat level whe
 n type of \par
 }{\plain \fs20 threat is manipulated as well. Prior research showing significan
 t level of \par
 }{\plain \fs20 threat effects manipulated only that factor in the stimulus mate
 rials \par
 }{\plain \fs20 (i.e., Dabbs and Leventhal 1966; Janis and Feshbach 1953). Studi
 es in which \par
 }{\plain \fs20 both threat level and some other message characteristic were var
 ied \par
 }{\plain \fs20 revealed less potent level of threat effects (i.e., Chu 1966; Ki
 ng and Reid \par
 }{\plain \fs20 1990). \par

Limitations

As the primary concern in our experiment was to control in ternal validity, certain limitations may affect the external validity of the findings and may account for the relatively small to moderate effect sizes.

Some of the limitations are the use of a single school as a source of subjects, the use of print rather than broadcast PSAs, and the use of one operationalization of each PSA. We took great care through pretesting and manipulation checks to ensure that the stimuli used were effective, but future research should include two or three operationalizations of each type of threat. It also should include measures of possibly related or confounding factors such as involvement or attitudinal differences.

Although actual reported drug use was used as a measure of implied involvement, a better-defined measure would allow for more careful examination of the possible role of involvement.

Discussion

We used Tanner, Hunt, and Eppright's (1991) ordered protection motivation model to examine adolescent responses to threat messages. Three hundred seventy-one adolescents viewed antidrug public service announcements in which the type of threat and the level of threat were varied. Sensation seeking, an individual difference variable, was also measured. In general, our Findings provide some support for the overall OPM. Of greater theoretical value, though, are the extensions and the evaluation of the critical role of emotion in threat communication and persuasion.

Theoretical Implications

The findings support Tanner et al.'s notion that the social implications of a response to a threat communication are important considerations. A social threat communication in which the social implications of a teenager's response were clearly laid out was more persuasive than a physical threat communication from which teenagers

gers had to \par
 }{\plain \fs20 draw their own conclusions about what others would think of them
 if they \par
 }{\plain \fs20 chose a particular response. That finding provides a potential t
 heoretical \par
 }{\plain \fs20 base for social threat effectiveness__a topic that warrants fu
 ture \par
 }{\plain \fs20 research. Social threat communications are used extensively in a
 dvertising \par
 }{\plain \fs20 practice (especially for personal hygiene products), yet there h
 as been \par
 }{\plain \fs20 little effort to identify theoretical bases for social threat \p
 ar
 }{\plain \fs20 effectiveness. The notion that social threat effectiveness may b
 e a \par
 }{\plain \fs20 function of the social implications aspect of OPM can be used to
 develop \par
 }{\plain \fs20 such a theory. \par
 }{\plain \fs20 Tanner et al. provided evidence that coping responses to t
 hreat \par
 }{\plain \fs20 communications may be due to factors other than the communicatio
 n itself__a \par
 }{\plain \fs20 distinct departure from other threat communication theory. Those
 \par
 }{\plain \fs20 researchers found prior knowledge to be one important variable i
 n the STD \par
 }{\plain \fs20 message context. Our research demonstrates that the key factors
 influencing \par
 }{\plain \fs20 coping responses may be segment and topic specific. In our study
 , where \par
 }{\plain \fs20 adolescents were the target and drug use was the topic, sensatio
 n seeking \par
 }{\plain \fs20 emerged as a key variable affecting response. Apparently, an ind
 ividual's \par
 }{\plain \fs20 need for sensation directs the development of a repertoire of co
 ping \par
 }{\plain \fs20 responses that are evoked by a threat communication. The strong
 effects \par
 }{\plain \fs20 found for sensation seeking suggest it may be an important perso
 nality \par
 }{\plain \fs20 variable to consider in other threat communication research. In
 the context \par
 }{\plain \fs20 of antidrug communication, sensation seeking is clearly an impor
 tant \par
 }{\plain \fs20 targeting variable and should be included in future research exp
 loring \par
 }{\plain \fs20 response to antidrug messages, adolescent drug use, and effectiv
 eness of \par
 }{\plain \fs20 drug prevention efforts. \par
 }{\plain \fs20 Our hypotheses suggesting that adolescents' unique cogniti
 ve \par
 }{\plain \fs20 processing capabilities would also be a source of coping respons
 es to \par
 }{\plain \fs20 threat communication are not supported. Those results are surpri

sing given \par

{{\plain \fs20 both the theoretical support of OPM and the common sense logic that \par

{{\plain \fs20 feelings of immortality (personal fable) should encourage coping responses \par

{{\plain \fs20 to physical threat messages, and feelings of self-consciousness and concern \par

{{\plain \fs20 about social acceptance (imaginary audience) should encourage coping \par

{{\plain \fs20 responses to social threat messages. The inconclusive findings may stem \par

{{\plain \fs20 from the measurement of the two constructs, which historically has been \par

{{\plain \fs20 elusive. It is also possible that the Tanner et al. OPM does not extend to \par

{{\plain \fs20 such cognitive processing constructions, but is limited to more succinct \par

{{\plain \fs20 constructions such as sensation seeking or prior knowledge. \par

{{\plain \fs20 The lack of importance of the threat level in persuasion supports \par

{{\plain \fs20 Tanner et al.'s contention that coping response repertoires may be more \par

{{\plain \fs20 important than the communication itself in terms of response. We found that \par

{{\plain \fs20 sensation seeking, an individual difference variable, was important in \par

{{\plain \fs20 responses to threat communication, but level of threat, a communication \par

{{\plain \fs20 factor, was not. Tanner et al.'s ordering, emotion followed by cognitive \par

{{\plain \fs20 responses, and their conviction that emotion must be aroused for attitude \par

{{\plain \fs20 and behavior change to occur were not supported in our research. Threat and \par

{{\plain \fs20 fear are distinct constructs__threat in a message may arouse not fear, but \par

{{\plain \fs20 a coping response that directs attitude and behavior change. This finding \par

{{\plain \fs20 is extremely important because it clearly differentiates threat and fear \par

{{\plain \fs20 and suggests that an emotional appeal may not need to arouse emotion to be \par

{{\plain \fs20 effective. \par

{{\plain \fs20 Managerial Implications \par

{{\plain \fs20 Our findings support the contention that adolescents respond best to \par

{{\plain \fs20 antidrug PSAs that depict negative social consequences of drug use. \par

{{\plain \fs20 Historically, antidrug campaigns have relied on physical threat messages \par

{{\plain \fs20 (Atkin and Freimuth 1989; Hanneman and McEwen 1973; Schoenbachler and \par

{{\plain \fs20 Dsilva 1993), but our findings demonstrate that the use of such

messages \par
 }{\plain \fs20 should be reconsidered. Attempts to persuade teenagers to avoid
 drugs will \par
 }{\plain \fs20 be more successful in creating and changing attitudes and behavi
 oral \par
 }{\plain \fs20 intention if social threat messages are used. Such messages are
 beginning \par
 }{\plain \fs20 to appear in practice. Recent Partnership for a Drug_Free Ameri
 ca PSAs \par
 }{\plain \fs20 targeting inner city children take a social threat approach. \pa
 r
 }{\plain \fs20 Our findings also confirm the importance of sensation seek
 ing as a \par
 }{\plain \fs20 targeting variable for antidrug PSAs. A high sensation seeker is
 not only \par
 }{\plain \fs20 more likely to use drugs, but responds differently to antidrug P
 SAs than a \par
 }{\plain \fs20 low sensation seeker. The high sensation seeker reacts negativel
 y to \par
 }{\plain \fs20 antidrug messages, feels he/she is immortal, and tends to view d
 rugs \par
 }{\plain \fs20 favorably. PSA producers must recognize that reaching these at_
 risk \par
 }{\plain \fs20 individuals is a necessary but difficult task. Our results provi
 de some \par
 }{\plain \fs20 guidance by showing social threat messages to be more persuasive
 than \par
 }{\plain \fs20 physical threat messages with such an audience. \par
 }{\plain \fs20 We explored a theoretically and practically important issu
 e the \par
 }{\plain \fs20 process by which high and low sensation seeking adolescents proc
 ess threat \par
 }{\plain \fs20 messages. The findings provide some theoretical support for the
 most recent \par
 }{\plain \fs20 threat and persuasion paradigm, the ordered protection motivatio
 n model. In \par
 }{\plain \fs20 addition, they have practical implications for social marketers
 designing \par
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_206. \par
}{\plain \fs20 Denise D. Schoenbachler (Ph.D., University of Kentucky) is
an \par
}{\plain \fs20 Assistant Professor of Marketing at Northern Illinois University
. Tommy E. \par
}{\plain \fs20 Whittler (Ph.D., Purdue University) is an Associate Professor of
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}{\plain \fs20 at the University of Kentucky. \par
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}{\plain \fs20 DESCRIPTORS: *Public* *service* *advertising*_ _ *Evaluation*;
Teenagers_ _ \par
}{\plain \fs20 Psychology and mental *health*; Threat (Psychology)_ _ Usage \par
}{\plain \fs20 SPECIAL FEATURES: illustration; table; chart \par
}{\plain \fs20 FILE SEGMENT: MC File 75 \par
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}{\plain \fs20 04692131 SUPPLIER NUMBER: 20439425 (THIS IS THE FULL TEXT
) \par
}{\plain \fs20 Shock value. (feasibility of *health* and safety campaigns) \par

}{\plain \fs20 Cosper, Darcy \par
}{\plain \fs20 Print, v51, n6, p38(3) \par
}{\plain \fs20 Nov_Dec, 1997 \par
}{\plain \fs20 ISSN: 0032_8510 LANGUAGE: English RECORD TYPE: Fulltext; Abstract \par
}{\plain \fs20 WORD COUNT: 1189 LINE COUNT: 00095 \par
}{\plain \fs20 \par
}{\plain \fs20 ABSTRACT: Public service announcements that utilize glossy ads
to appeal \par
}{\plain \fs20 to the young and modern will not get their message across since
glamor will \par
}{\plain \fs20 always override the seriousness of their campaign. *Health* and
safety ads \par
}{\plain \fs20 such as those espousing the dangers of smoking are practically u
seless \par
}{\plain \fs20 since all smokers know that smoking is dangerous to their *healt
h*. It is \par
}{\plain \fs20 imperative that these scare tactics be tied with the enforcement
element. \par
}{\plain \fs20 For instance drunk driving campaigns should be accompanied by ne
ws coverage \par
}{\plain \fs20 and the like to let the audience know the gravity of the issue.
\par
}{\plain \fs20 \par
}{\plain \fs20 TEXT: \par
}{\plain \fs20 In his performance "No Cure For Cancer," comedian Denis Lea
fy \par
}{\plain \fs20 addresses the uselessness of anti_smoking propaganda. It's not

as if \par
} {\plain \fs20 smokers don't know their habit is bad for them, even without war
nings on \par
} {\plain \fs20 cigarette packs, he mocks. You could manufacture a brand called
Cancer \par
} {\plain \fs20 Cigarettes in a black box, imprinted with a skull and crossbones
and a list \par
} {\plain \fs20 of diseases caused by smoking, and people would still line up to
buy \par
} {\plain \fs20 cartons and smoke several cigarettes at a time. \par
} {\plain \fs20 Leary's routine speaks volumes about the difficulties of cr
eating \par
} {\plain \fs20 public service announcements with prevention aims _ it's much e
asier to \par
} {\plain \fs20 tell people what to do than what not to do. Research studies suc
h as the \par
} {\plain \fs20 Harvard School of Public Health 1990 report argue that "fear app
eals" \par
} {\plain \fs20 rarely succeed, and run the risk of backfiring. Yet scare tactic
s remain a \par
} {\plain \fs20 favorite with organizations like Partnership for a Drug_Free Am
erica (PDFA) \par
} {\plain \fs20 _ and PDFA spokespeople point to research studies indicating th
at their \par
} {\plain \fs20 efforts are effective. \par
} {\plain \fs20 It's certainly up for debate; some of these campaigns are s
o misguided \par
} {\plain \fs20 that one wonders whether focus groups were playing practical jok
es on the \par
} {\plain \fs20 researchers. In a series of ads created for PDFA by the Hampel S
tefanides \par
} {\plain \fs20 agency, several hip and attractive twenty_somethings share thei
r tales of \par
} {\plain \fs20 heroin addiction and ruin. The tightly edited MTV_style spots,
shot in \par
} {\plain \fs20 gorgeously saturated color, feature real_life users recruited _
_one might \par
} {\plain \fs20 say exploited _ for the sake of authenticity. A young woman tel
ls how her \par
} {\plain \fs20 baby, whose father may be either the woman's drug dealer or her
addict \par
} {\plain \fs20 boyfriend, was taken away by the police during a drug raid. An A
ndy \par
} {\plain \fs20 Warholish boy gets misty_eyed while confessing that he works as
a \par
} {\plain \fs20 prostitute to support his habit. A cute brunette who looks like
he should \par
} {\plain \fs20 be playing lacrosse or starring on "Melrose Place" shoots up in
an alley. \par
} {\plain \fs20 There is no question that these spots are beautifully made,
\par
} {\plain \fs20 esthetically appealing, even emotionally stirring. But how can g
lamorous \par
} {\plain \fs20 ads achieve their aim of de_glamorizing heroin? The Hampel Stef

anides ads \par
}{\plain \fs20 may purport to condemn heroin use, but sex appeal overrides sad story. \par
}{\plain \fs20 Sure, these kids may be miserable, but, boy, do they look cool! \par
}{\plain \fs20 Another recent PDFA campaign tries a different approach. Several \par
}{\plain \fs20 10\second spots show youngsters executing acrobatic moves on skateboards, \par
}{\plain \fs20 capped with tag lines such as "Be Your Own Stimulant," or "Smoke This!" \par
}{\plain \fs20 Will these "healthy lifestyle" ads be more effective than the PDFA paragon \par
}{\plain \fs20 of scare tactics, an ad produced by Los Angeles agency Ground Zero that \par
}{\plain \fs20 shows a body convulsing in the throes of a heroin overdose? \par

}{\plain \fs20 To all appearances, however, scare tactics have proven amazingly \par
}{\plain \fs20 effective for the Transport Accident Commission (TAC), based in Victoria, \par
}{\plain \fs20 Australia, and its agency, Grey Melbourne. Since December 1989, when the \par
}{\plain \fs20 TAC and Grey devised strategy for a dramatic road safety campaign, the \par
}{\plain \fs20 annual number of road traumas in Victoria is down almost 50 per cent, from \par
}{\plain \fs20 776 _ a startlingly high figure for a state of only 3 1/2 million people _ \par
}{\plain \fs20 to less than 400. \par
}{\plain \fs20 TAC has consistently run ads with high shock value. The campaign's \par
}{\plain \fs20 inaugural spot depicts a hospital scene in which staff attempt to \par
}{\plain \fs20 resuscitate a bloodied woman while her parents attack the obviously \par
}{\plain \fs20 intoxicated boyfriend. The ad ends with a nurse addressing the camera: "If \par
}{\plain \fs20 you drink and drive," she says, "you're a bloody idiot." More recently, a \par
}{\plain \fs20 series of three equally dramatic ads took the coveted Best of Show prize at \par
}{\plain \fs20 the One Show Awards. Shot in grainy black_and_white, with the tilting jolt \par
}{\plain \fs20 of handheld cameras, the spots are unusually long by U.S. standards. Two \par
}{\plain \fs20 feature almost boring cinema verite narratives that end in unexpected, \par
}{\plain \fs20 unexpurgated car crashes. A third ad returns to the emergency room at \par
}{\plain \fs20 holiday time, with a collage of crash victims on gurneys, weeping \par
}{\plain \fs20 bystanders, frantic hospital staff, and a voice_over of a child's delicate, \par

}{\plain \fs20 wavering soprano singing John Lennon's "So This Is Christmas." \par
 }{\plain \fs20 Why has this campaign worked so well while American scare tactics have \par
 }{\plain \fs20 had such limited success? For a host of reasons, says communications \par
 }{\plain \fs20 manager Anton Staindl. "The TAC is a compulsory monopoly third party injury \par
 }{\plain \fs20 insurer, (which pays for) medical and rehabilitation services, plus \par
 }{\plain \fs20 compensation, for everybody who's injured in a transport accident in \par
 }{\plain \fs20 Victoria, regardless of who is at fault. It means that we have a vested \par
 }{\plain \fs20 interest in keeping road traumas down, and we approached it as a business \par
 }{\plain \fs20 decision." Rather than relying on the kindness of networks, as underfunded \par
 }{\plain \fs20 PSA producers in the U.S. must do, the TAC buys prime time placement for \par
 }{\plain \fs20 its ads, runs high profile sponsorships, and orchestrates large scale \par
 }{\plain \fs20 public relations efforts with the release of each new campaign. \par
 }{\plain \fs20 Most significantly, the TAC coordinates with state police agencies on \par
 }{\plain \fs20 major enforcement efforts. As a part of the 1989 campaign, the Commission \par
 }{\plain \fs20 purchased speed cameras and "booze buses" which enable police, on very \par
 }{\plain \fs20 short notice, to shut down sections of a freeway and give alcohol breath \par
 }{\plain \fs20 tests to large numbers of drivers. Innovations like these, publicized in \par
 }{\plain \fs20 ads and featured on the local news, evidently did much to demonstrate the \par
 }{\plain \fs20 seriousness of the TAC's agenda to Victoria citizens, and actually led to a \par
 }{\plain \fs20 change in driving behavior. "The effectiveness of the campaigns was \par
 }{\plain \fs20 absolutely tied to the enforcement element," says Staindl. "The research \par
 }{\plain \fs20 shows that people need that extra incentive, that the dog needed to have \par
 }{\plain \fs20 teeth." \par
 }{\plain \fs20 While it's clear that the TAC's "teeth" are a significant part of \par
 }{\plain \fs20 their success, the ads themselves achieve something many scare messages \par
 }{\plain \fs20 don't. The impact of heroin overdose or lung cancer is often lost on \par
 }{\plain \fs20 audiences; it is easy to believe disaster comes only to other people, and \par
 }{\plain \fs20 the high drama of such ads further reinforces a sense of "othern

ess" to the \par

{{\plain \fs20 situations depicted therein. The TAC spots, on the other hand, tell simple, \par

{{\plain \fs20 undramatic stories about average people doing average things, like having a \par

{{\plain \fs20 couple of beers before hopping in the car. driving a little too fast, \par

{{\plain \fs20 assuming familiarity with a particular road _ a narrative that encourages \par

{{\plain \fs20 viewers' empathy and identification with the potentially fatal consequences \par

{{\plain \fs20 of these actions. \par

{{\plain \fs20 If all public service organizations took a cue from the TAC's story, \par

{{\plain \fs20 creating prevention messages with which people identified and backing up \par

{{\plain \fs20 campaigns with enforcement measures or support systems, statistics on the \par

{{\plain \fs20 effectiveness of such campaigns might change radically. \par

{{\plain \fs20 At least one person has quit heroin as a result of the Hempel \par

{{\plain \fs20 Stefanides ads. According to creative director Dean Stefanides, the \par

{{\plain \fs20 director of the spots made friends with Mr. Melrose Place, and convinced \par

{{\plain \fs20 him to go to a rehab center. Scare tactics may or may not work. \par

{{\plain \fs20 Intervention does. \par

{{\plain \fs20 Darcy Cospser lives in Brooklyn and writes about advertising, visual \par

{{\plain \fs20 culture, and the arts. \par

{{\plain \fs20 COPYRIGHT 1997 RC Publications Inc. \par

{{\plain \fs20 \par

{{\plain \fs20 DESCRIPTORS: *Public* *service* *advertising*_ _ *Evaluation*; Antismoking \par

{{\plain \fs20 movement__Advertising; Advertising campaigns__Management \par

{{\plain \fs20 SPECIAL FEATURES: photograph; illustration \par

{{\plain \fs20 FILE SEGMENT: AI File 88 \par

{{\plain \fs20 \par

{{\plain \fs20 \par

{{\plain \fs20 15/9/20 (Item 3 from file: 88) \par

{{\plain \fs20 DIALOG(R)File 88:BUSINESS A.R.T.S. \par

{{\plain \fs20 (c) 1999 The Gale Group. All rts. reserv. \par

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{{\plain \fs20 04374917 SUPPLIER NUMBER: 19774033 (THIS IS THE FULL TEXT) \par

{{\plain \fs20 The picture of *health*? Message standardization and recall of televised \par

{{\plain \fs20 *AIDS* public service announcements. \par

{{\plain \fs20 Walters, T.N.; Walters, Lynne M.; Kern__Foxworth, Marilyn; Pries, Susanna \par

{{\plain \fs20 Hornig \par

{{\plain \fs20 Public Relations Review, v23, n2, p143(17) \par

{{\plain \fs20 Summer, 1997 \par
}}{\plain \fs20 ISSN: 0363_8111 LANGUAGE: English RECORD TYPE: Fulltext; Abstract \par
}}{\plain \fs20 WORD COUNT: 6523 LINE COUNT: 00551 \par
}}{\plain \fs20 \par
}}{\plain \fs20 ABSTRACT: The results of The Picture of *Health* demonstrate that \par
at \par
}}{\plain \fs20 differences exist between African Americans and Non Hispanic Whites in \par
}}{\plain \fs20 recall of verbal and visual themes of televised *AIDS* public service \par
rvice \par
}}{\plain \fs20 announcements. These differences are anchored in a complex relationship \par
ionship \par
}}{\plain \fs20 among emotions, attitudes, and opinions about the place of science and \par
ce and \par
}}{\plain \fs20 technology in society, and the "how we say it" elements used to create an \par
create an \par
}}{\plain \fs20 individual PSA. The data suggest that *effective* healthcare communication \par
munication \par
}}{\plain \fs20 campaigns require a focused thematic strategy, tactically organized to \par
zed to \par
}}{\plain \fs20 different combinations of "how we say it" elements to communicate \par
e \par
}}{\plain \fs20 *effectively* with a diverse, active audience. (Reprinted by permission of \par
mission of \par
}}{\plain \fs20 the publisher.) \par
}}{\plain \fs20 TEXT: \par
}}{\plain \fs20 INTRODUCTION \par
}}{\plain \fs20 In the United States, the televised public service announcement (PSA) \par
ment (PSA) \par
}}{\plain \fs20 has been a long_time component of public relations campaigns directed \par
irected \par
}}{\plain \fs20 toward disease awareness and prevention. Perceived by audiences as crucial, \par
as crucial, \par
}}{\plain \fs20 credible, and reliable sources of health and medical information, PSAs \par
, PSAs \par
}}{\plain \fs20 broadcast in conjunction with print campaigns conducted by the National \par
ational \par
}}{\plain \fs20 High Blood Pressure Education Program, the National Cholesterol Education \par
Education \par
}}{\plain \fs20 Program, and the American Cancer Society's Great American Smokeout have \par
ut have \par
}}{\plain \fs20 helped reduce illness over the long term. \par
}}{\plain \fs20 Treading where these others have walked, those concerned with reducing \par
th reducing \par
}}{\plain \fs20 the spread of AIDS have attempted informational campaigns of their own.(1) \par
ir own.(1) \par
}}{\plain \fs20 Despite models from previous efforts, AIDS campaigners have met with \par
with \par
}}{\plain \fs20 qualified success both in reaching audiences and achieving results.(2) Even \par
ts.(2) Even \par
}}{\plain \fs20 so, effective AIDS campaigns can be designed and implemented if they are \par
they are \par
}}{\plain \fs20 firmly rooted in an understanding of how the media operate, how

campaigns \par

{\plain \fs20 fit into the commercial environment, and how messages interact with an \par

{\plain \fs20 audience.(3) \par

{\plain \fs20 The Picture of Health is a step in understanding how selected messages \par

{\plain \fs20 interact with an audience. It examines extant, for_air television PSAs and, \par

{\plain \fs20 in looking at differences between African Americans and Non Hispanic \par

{\plain \fs20 Whites, engages in concept testing and formative research, while looking \par

{\plain \fs20 for better ways to develop high_quality messages that improve recall of \par

{\plain \fs20 critical visual and verbal information. After examining for_broadcast AIDS \par

{\plain \fs20 PSAs in relationship to ethnicity_related attitudes and opinions about \par

{\plain \fs20 science and technology, this study posits reasons for the current failure \par

{\plain \fs20 to communicate effectively. It suggests mitigating strategies based on \par

{\plain \fs20 recognizing differences in responses to attitudes and opinions about \par

{\plain \fs20 science and technology based upon a notion of culture. \par

{\plain \fs20 PREVIOUS STUDY \par

{\plain \fs20 When examining the potential role of television in promoting the \par

{\plain \fs20 adoption of prosocial attitudes, researchers have studied factors \par

{\plain \fs20 associated with both advertisement and message recipient.(4) Unfortunately, \par

{\plain \fs20 neither the characteristics of the message recipient, nor the interaction \par

{\plain \fs20 of advertisement components with the characteristics of the message \par

{\plain \fs20 recipient, are well understood. That is because researchers have had to \par

{\plain \fs20 infer meaning from externally guided frameworks of what is thought a person \par

{\plain \fs20 "brings to the message." In doing so, they have focused on "internals," \par

{\plain \fs20 such as thoughts, emotion, lifestyle and demographic characteristics and \par

{\plain \fs20 "externals," such as social class, face_to_face groups, relevant \par

{\plain \fs20 communication situations, and values inherent in culture and subculture. \par

{\plain \fs20 Many believe, as does Gudykunst (1994), that intercultural and \par

{\plain \fs20 cross_cultural communication play a pivotal role in exchanging information \par

{\plain \fs20 because life experiences influence how a person transmits messages not only \par

in terms of an individual's unique experiences but as shared ethnic and cultural experiences.(5) Hecht, Collier and Ribeau (1993) believe that the communication process can be hidden when ethnic and cultural factors enter into the process. They believe that misunderstandings are likely when any two people navigate the stream of differing symbols, norms, competencies, and styles and that the potential for such difficulties can be magnified when the persons are of ethnic backgrounds.(6) Philipsen (1987) adds that the trinity of conversation, code, and community can help in understanding how symbols, meanings, and norms occur in conversations and how they become codes of conduct that create shared identities.(7) While Hornig (1990, 1992) and Walters & Walters (1994) found that the notion of a "woman's culture" helped explain differences between sexes in responding to science and technology, sparse research has been conducted with respect to the reaction of African Americans to advertising.(8) Kern & Foxworth (1994) has noted that African Americans react more favorably toward advertisements featuring African Americans than they do toward advertisements that do not feature African Americans.(9) Pitts, Whalen, O'Keefe, and Murray (1989) have concluded that black respondents displayed a more positive attitude toward a commercial message that featured black actors.(10) Questions of sparsity aside, what studies of gender and ethnicity (when looked at cumulatively) seem to demonstrate is the utility of analyzing differences in response to news and information about science and technology as a function of membership in distinctive, though intersecting, cultures. From such a visualization, flows the conclusion that understanding how cultural determinants, such as ethnicity, influence responses to health care messages would help in constructing more effective messages. Properly armed with such knowledge, a communicator could design

an integrated campaign with material directed at a closely targeted audience.⁽¹¹⁾ In searching for such a magic message bullet, advertising practitioners and communication scholars have long sought to define elements of messages that work in harmony with the message recipient to improve recall. In doing so, these researchers have attempted to define executional ("how we say it") cues that can elicit, maintain, or terminate attention.⁽¹²⁾ Many have developed categories for these "how we say it" elements. Some using Thorndikean logic have constructed systems with two major divisions: rational and emotional. Others such as Stewart and Furse (1985) have separated "how we say it" cues into almost a dozen categories. But, no matter how the categorization has been done, emotion and nonabstract information are natural starting points for examining differences between ethnic groups. That is because the two variables have been well tested.⁽¹³⁾ Even so, merely operationalizing emotion is complicated. Mostly that's because determining what is meant by "emotion" is made complex due to the diverse objectives, methods, stimuli, and typologies used in various studies featuring emotion. Such complexity is true even with the "fear," which has long been used in persuasive communication. Yet, despite definition problems and inconsistency in results, fear remains a useful starting point in examining AIDS public service announcements because of the potential for comparison it offers with the many healthcare campaigns that have used it as a component.⁽¹⁴⁾ While a dizzying array of potential definitions of fear exist, Higbee's (1969) terse description of fear as the "threat of negative consequences" produced by a particular behavior is fitting in a healthcare context. That is because both Higbee's definition and his primary emotion wheel, consisting of Acceptance, Anger, Anticipation, Disgust, F

ear, Joy, \par

{{\plain \fs20 Surprise, and Sadness, are simple and well tested.(15) \par

{{\plain \fs20 Along with fear, nonabstract terms also have been an integr

al \par

{{\plain \fs20 ingredient of health_education programs.(16) \par

{{\plain \fs20 Many healthcare PSAs have used nonabstract terms, utilizing

words up \par

{{\plain \fs20 to, and including, "death" that emphasize undesirable results of

a \par

{{\plain \fs20 particular behavior. Besides those words dealing with mortality,

the common \par

{{\plain \fs20 lexicography of nonabstract healthcare terms has included anatom

ically \par

{{\plain \fs20 explicit sexual terms that some might consider obscene or profan

e.(17) Some \par

{{\plain \fs20 advocates believe that using obscenity and profanity is logical

because \par

{{\plain \fs20 obscenity and profanity are unacceptable to many in our culture.

Strategic \par

{{\plain \fs20 public use of anatomically specific language may provide the mos

t jolting, \par

{{\plain \fs20 evocative stimulus and either attract attention or establish int

erpersonal \par

{{\plain \fs20 identification in using sexually laden languages.(18) \par

{{\plain \fs20 RESEARCH QUESTIONS \par

{{\plain \fs20 RQ1: Is there a relationship between ethnicity and recall o

f verbal \par

{{\plain \fs20 and visual elements of AIDS_related public service announcement

s? \par

{{\plain \fs20 RQ2: Is there a difference between African Americans and No

n Hispanic \par

{{\plain \fs20 Whites in recall of AIDS_related PSAs based on the use of fear

and explicit \par

{{\plain \fs20 sexual words in these messages. \par

{{\plain \fs20 RQ3: Is there a difference between African Americans and No

n Hispanic \par

{{\plain \fs20 Whites in attitudes and opinions about science and technology? \

par

{{\plain \fs20 RQ4: Are differences in attitudes and opinions about scienc

e and \par

{{\plain \fs20 technology related to "how we say it" elements of televised PSAs

. \par

{{\plain \fs20 METHODOLOGY \par

{{\plain \fs20 Subjects were 31 Non Hispanic Whites (NHW) and 25 African A

mericans \par

{{\plain \fs20 (AA) undergraduate communication students at two Southwestern un

iversities. \par

{{\plain \fs20 The form was a factorial 2 x 2, within subjects. The independent

variables \par

{{\plain \fs20 were information content (high or low explicit sexual words) and

fear (high \par

{{\plain \fs20 or low). Separately, 57 other undergraduate students participate

d in a \par

{{\plain \fs20 preliminary survey to rate independently fear levels in stimulus

materials. \par

{\plain \fs20 Tested AIDS public service announcements were taken from materials \par

{\plain \fs20 produced and designed for on_air use. They came from several sources: 14 \par

{\plain \fs20 television stations, including those in Los Angeles, Miami, Chicago, and \par

{\plain \fs20 New York, as well as major metropolitan areas in Texas; the Centers for \par

{\plain \fs20 Disease Control, Atlanta; Planned Parenthood, Houston, Texas; and The \par

{\plain \fs20 American Red Cross. \par

{\plain \fs20 A preliminary review of more than 100 English_language AIDS public \par

{\plain \fs20 service announcements eliminated those using recognized celebrities or \par

{\plain \fs20 medical professionals as announcers and those that did not feature fear as \par

{\plain \fs20 the primary emotion. Because of potential confounding variables, the need \par

{\plain \fs20 for randomized materials choice, and the desire to provide for Analysis of \par

{\plain \fs20 Covariance, a panel of 57 students viewed the materials for use. They rated \par

{\plain \fs20 the surviving 20 AIDS PSAs for level of fear using Higbee's definition of \par

{\plain \fs20 fear as the "use of the threat of negative consequences of particular \par

{\plain \fs20 behavior." \par

{\plain \fs20 The dependent measures were unaided recall of visual and verbal \par

{\plain \fs20 themes. Verbal themes were main PSA ideas that could only be transmitted \par

{\plain \fs20 and received through hearing. Visual themes were main PSA ideas that only \par

{\plain \fs20 could be transmitted and received through sight. Two coders identified both \par

{\plain \fs20 the verbal and visual themes. Intercoder reliability as expressed by \par

{\plain \fs20 Pearson Product Correlations was .950 for verbal themes and .879 for visual \par

{\plain \fs20 themes. \par

{\plain \fs20 After making a matrix of fear and explicitness for 20 public service \par

{\plain \fs20 announcements, four PSAs representing levels of fear and explicit sexual \par

{\plain \fs20 words were chosen randomly for use. Those chosen for use were (1) Candle, \par

{\plain \fs20 High Fear, High Explicit Words; (2) Gun, High Fear, Low Explicit Words; (3) \par

{\plain \fs20 Koop, Low Fear, High Explicit Words; and (4) Family, Low Fear, Low Explicit \par

{\plain \fs20 Words. The four were embedded in an episode of Northern Exposure in normal \par

commercial pods. There were four commercial pods in the episode.
One AIDS
PSA was placed in each pod, along with the regularly broadcast commercials.
Order of presentation of the AIDS PSAs was controlled, as was order of
appearance within the pod.
PROCEDURE
By means of a script, experimenters followed the same procedure for
all subjects. Before beginning the experiment, subjects looked at a
practice tape and answered questions to practice the procedure.
Then, the
episode of Northern Exposure with the AIDS PSAs was shown.

After viewing the tape, the subjects then were given forms to fill out.
First, subjects were asked to recall as many of the AIDS public services announcements as they could. They were to begin with the first PSA that popped into their minds. They invented a title for the PSA and wrote down as many recollections about the dialogue, the characters, the advice given, or anything else they could remember about the PSA. They were also asked to rate how each PSA made them feel on a scale of 1 (felt not at all) to 10 (felt very much) for eight primary emotions. Next, subjects answered a recognition test that asked questions about program and the public service announcement content. Then 86 Likert-like statements were answered.
Finally, demographic information was collected.
Although each PSA used was chosen because fear, a well-tested dimension, was part of the execution, all public service announcements exhibited other "felt emotions." The literature suggests, and the experiment confirmed, that fear, the primary emotion, did not dominate any PSA to the exclusion of the other tested emotions. The other tested emotions were: Acceptance, Surprise, badness, Disgust, Anger, Anticipation, and Joy.
METHODOLOGICAL CONSIDERATIONS
Because of its economy, generalizability, and ability to test real-world situations, the repeated measures, factorial experiment

ent used \par

{\plain \fs20 here offers advantages to other types of experimental designs. I
n a \par

{\plain \fs20 factorial design, two randomized factors (or independent variabl
es) may be \par

{\plain \fs20 tested across levels. In this type of experiment, all combinatio
ns of \par

{\plain \fs20 multiple independent variables are considered, as well as the wa
ys in which \par

{\plain \fs20 they affect each other. The effect of a factor is the change in
response \par

{\plain \fs20 produced by a change in the level of a factor. The mixed design,
a \par

{\plain \fs20 variation of the factorial design, combines a repeated measures
variable \par

{\plain \fs20 with a between groups independent variable that could include se
x, age, or \par

{\plain \fs20 race, which are variables that can be selected, but not manipula
ted. The \par

{\plain \fs20 selected natural variable becomes the random_groups independent
variable. \par

{\plain \fs20 For example, if the ease of identifying obscene words is to
be \par

{\plain \fs20 compared with neutral words for males and females, the type of w
ord has two \par

{\plain \fs20 levels and is the repeated measure. Sex has two levels and is th
e \par

{\plain \fs20 randomized independent variable (between group) selected by the
\par

{\plain \fs20 experimenter because each subject is only one sex.(19) \par

{\plain \fs20 A factorial design has specific advantages with respect to
\par

{\plain \fs20 communications. Such a design is helpful at the reconstructive s
tage, where \par

{\plain \fs20 scientists study the real world. A factorial design offers econo
my in terms \par

{\plain \fs20 of using subjects and is more generalizable. This is because the
pattern of \par

{\plain \fs20 results is not necessarily unique to the specific values of othe
r relevant \par

{\plain \fs20 stimulus variables and because the most important uncontrolled s
ource of \par

{\plain \fs20 error is due to individual differences. A randomized repeated me
asures \par

{\plain \fs20 design accounts for these differences. \par

{\plain \fs20 One problem connected to nonfactorial experiments is a lack
of \par

{\plain \fs20 generality of the results. That is because the particular patter
n of \par

{\plain \fs20 results may be unique to the specific values of other relevant s
timulus \par

{\plain \fs20 variables maintained at a constant level through the course of t
he \par

{\plain \fs20 experiment.(20) The factorial experiment provides one solution t

o this \par

{\plain \fs20 limitation by allowing the effect of an independent variable to be averaged \par

{{\plain \fs20 over several different levels of another relevant variable.(21) \par

{\plain \fs20 Ideally all important variables, except the ones under systematic \par

{\plain \fs20 study, would be held physically constant. But, factors not controlled for \par

{{\plain \fs20 may be varied randomly across the treatment conditions. Randomization of \par

{\plain \fs20 these nuisance factors is a major way of obtaining internal validity. In \par

{{\plain \fs20 doing so, the influence of uncontrolled variables is spread over the \par

{\plain \fs20 treatment groups equally. These variables do not systematically affect the \par

{{\plain \fs20 treatment means, and, so, bias is removed. They do, however, influence the \par

{{\plain \fs20 sensitivity of the experiment, because any variability due to nuisance \par

{\plain \fs20 variables becomes deposited in the error term. With a larger error term, \par

{{\plain \fs20 the ability to detect the presence of real treatment effects is \par

{\plain \fs20 reduced.(22) \par

{{\plain \fs20 While a general weakness of the experimental method is a loss of \par

{{\plain \fs20 ecological validity (in this instance an atypical experience with AIDS \par

{{\plain \fs20 public service announcements), strong internal validity is obtained by \par

{{\plain \fs20 examining the variable in relationship to each other. Because of this, the \par

{{\plain \fs20 method eliminates problems with self-reports depending upon matching of \par

{{\plain \fs20 subject characteristics.(23) Although holding physically constant all \par

{{\plain \fs20 variables under systematic study would have been the ideal, real world \par

{{\plain \fs20 factors, such as expense of materials and need for a large number of \par

{{\plain \fs20 subjects, prevented this. To compensate, factors that were unable to be \par

{{\plain \fs20 controlled were varied randomly across the treatment conditions. \par

{{\plain \fs20 Randomization spread the influence of the uncontrolled factors over the \par

{{\plain \fs20 treatment. While this removed bias, the uncontrolled factors decreased the \par

{{\plain \fs20 sensitivity of the experiment. Lastly, the randomization of these nuisance \par

{{\plain \fs20 factors helped eliminate biases.(24) \par

{{\plain \fs20 RESULTS \par

Ethnic groups reported differences in felt emotions across all executions for the four PSAs. Anger for Gun (High Fear, Low Explicit Words) and Joy for Koop (High Explicit Words, Low Fear) and Surprise for Koop (High Explicit Words, Low Fear) had significant differences. Correlations of other emotions with fear varied across the executions and seemed related to ethnicity. Fear was correlated to other emotions at different levels across the executions for African Americans and Non Hispanic Whites. A Spearman's Rank Order of correlation of the emotions correlated with Fear for Candle (High Fear, High Explicit Words) was .643, for Gun (High Fear, Low Explicit Words) was .775, for Koop (High Explicit Words, Low Fear) was .667, and for Family (Low Fear, Low Explicit Words) was .252. Means of recall tests further suggested ethnic-based distinctions (see Table 1).

TABLE 1					
Mean Recall of AIDS PSA Themes					
		Verbal Themes		Visual Themes	
		African American	Non Hispanic White	African American	Non Hispanic White
Candle (*)		1.04	1.17	1.15	1.77
Gun (*)		.77	.83	1.15	1.73
Family		1.50	2.00(*)	.81	1.20
Koop		.69	.47	.39	.40
* p. (less than or equal to) .05					
TABLE 2					
Explicit Words and Fear 2 x 2 Analysis of Variance, F Value					
		Themes			
		Verbal			
		Visual			
Between Subjects					
Ethnicity.					
.92(*)					
Within Subjects					
Explicit Words					
88 (*)					

Explicit Words x Ethnicity 4.26(*) 0.

Fear 5.16(*) 8
0.12(*)

Fear x Ethnicity 0.05 5
.43(*)

Interaction
Explicit Words x Fear 99.78(*) 10.
94(*)

Explicit Words x Fear x Ethnicity 7.18(*)
1.17

* p. (less than or equal to) .05

Significant differences emerged for Candle (High Fear, High
Explicit

Words) for Visual Themes at p. = .00 and Total Themes at p. = .0
1; for Gun

(High Fear, Low Explicit Words) for Visual Themes at p. = .02; a
nd for

Family (Low Fear, Low Explicit Words) for Verbal Themes at p. =
.01 and

Total Themes at p. = .00.

The 2 x 2 repeated measures analysis of variance using Fear
and

Explicit Words demonstrated the effect of ethnicity in combinati
on with

fear and explicit language. The between subjects differences for
Visual

Themes was significant at p. = .01 while Verbal Themes was p. = .
26. the

within subjects effect of Explicit Words and Ethnicity was signi
ficant for

Verbal Themes at p. = .04, as was Fear and Race for Visual Theme
s at p. =

.02 (see Table 2).

A significant interaction of words, fear, and ethnicity exi
sted for

Verbal Themes at p. = .01, but not Visual Themes which was p. =
.29.

Although measures such as Verbal Themes and Visual Themes recall
ed

demonstrated ethnic-based differences, they did not reveal unde
rlying

attitudes and opinions related to those differences. When reduce
d, the

Likert-like questions answered by the subjects did.

To produce a manageable discussion of attitudes to correlat
e with

dependent measures Verbal and Visual themes, the 86 Likert-like
statements

were distilled. First, t-tests between ethnic groups were perfo
rmed; then,

those items that had p. (less than or equal to) .05 between them
were

factored; and finally, correlations between the factored attitud

es and the \par
 }{\plain \fs20 dependent measures of recall and recognition were computed. \par

{\plain \fs20 T\ tests of statements using ethnicity produced a list of 1
 4 items with \par
 }{\plain \fs20 p. (less than or equal to) .05. \par
 }{\plain \fs20 Science Skeptics \par
 }{\plain \fs20 Many bad results occur from the misuse of science and techn
 ology. \par
 }{\plain \fs20 Some people try to take unfair advantage of new scientific
 and \par
 }{\plain \fs20 technological developments. \par
 }{\plain \fs20 Sometimes scientific and technological developments might c
 ause a \par
 }{\plain \fs20 disease to be spread instead of being cured. \par
 }{\plain \fs20 New developments in science and technology often put people
 out of \par
 }{\plain \fs20 business. \par
 }{\plain \fs20 Without human supervision, catastrophic mistakes can be mad
 e as a \par
 }{\plain \fs20 result of new scientific and technological developments. \par
 }{\plain \fs20 People can be put out of work when new scientific and techn
 ological \par
 }{\plain \fs20 developments are put to use. \par
 }{\plain \fs20 Playing with things we have no control over can create bad
 situations \par
 }{\plain \fs20 we are unable to reverse. \par
 }{\plain \fs20 We are too dependent upon science and technology right now.
 \par
 }{\plain \fs20 We often look to science to cure problems that could be sto
 pped by \par
 }{\plain \fs20 changing behavior. \par
 }{\plain \fs20 Test Before Using \par
 }{\plain \fs20 We shouldn't be so quick to use new developments in science
 and \par
 }{\plain \fs20 technology before they are tested. \par
 }{\plain \fs20 Math and science are easy for me. \par
 }{\plain \fs20 Society as a whole must trust those who work with science a
 nd \par
 }{\plain \fs20 technology since most people are not very knowledgeable about th
 ese things. \par
 }{\plain \fs20 Science Improves Life \par
 }{\plain \fs20 More money should be put into studying the implications of
 science. \par
 }{\plain \fs20 Science and technology improve the quality. of life for all
 of us. \par
 }{\plain \fs20 When these were factored, three groups emerged; these were
 labeled \par
 }{\plain \fs20 Science Skeptics (28.2%) including; Bad, .781; Unfair, .770; Spr
 ead, .683; \par
 }{\plain \fs20 Business, .679; Human, .678; Work, .631; Play, .595; Now, .509;
 and Cure, \par
 }{\plain \fs20 427; Test Before Using (11.6%), including Quick, .721; Easy, .68
 9; and \par

Trust (11.649%); and Science Improves Life (11.7%), including Improve, .819 and .601. On the whole, African-Americans were more skeptical about using science to improve life and Non Hispanic Whites were more sanguine about the ability of science to improve life. The results showed that African-Americans were more negative about the impact of science on daily life. They thought that science and technology could put people out of work, create bad (and, sometimes, unpredictable) outcomes, and, in the hands of the wrong people, become catastrophic. Non Hispanic Whites believed that science and technology always had good effects and that new science should be adopted quickly. Ethnic-based differences between the groups of attitudes and Verbal and Visual Themes were evident in individual PSAs, and these differences could be related to their differing "how we say it" components of those PSAs. Candle, which visually demonstrated the odds of contracting AIDS and used High Fear and High Explicit Words, had ethnic-based differences highlighted by the relationship between recall of Verbal Themes and Science Skepticism (ILLUSTRATION FOR FIGURE 1 OMITTED). The relationship between the recall of verbal themes and more skeptical African-American audience was stronger and more positive. The relationship between the recall of verbal themes and the less skeptical Non Hispanic White audience was less powerful and more negative. Gun, which visually demonstrated the odds of contracting AIDS by showing a game of Russian Roulette and using High Fear and Low Explicit Words, also had ethnic-based differences seemingly related to differences in attitudes. Along with noticeable differences with respect to Science Skeptics and Verbal Themes, Gun also had noticeable differences with respect to Visual Themes and attitudes about science (ILLUSTRATION FOR FIGURE 2 OMITTED). Family, which featured a man cheating on his

wife and \par

{{\plain \fs20 used Low Fear and Low Explicit Words, had few visually evident differences \par

{{\plain \fs20 between ethnic groups with respect to Pearson Correlations between Verbal \par

{{\plain \fs20 and Visual Themes and factored attitude groups (ILLUSTRATION FOR FIGURE 3 \par

{{\plain \fs20 OMITTED). Finally, Koop, which used High Explicit Words and Low Fear, also \par

{{\plain \fs20 had differences particularly with respect to Visual Themes Recalled and \par

{{\plain \fs20 Science Skeptics (ILLUSTRATION FOR FIGURE 4 OMITTED). \par

{{\plain \fs20 When multiple regression equations were computed using Verbal and then \par

{{\plain \fs20 Visual Themes as the dependent variables and eight emotions and seven \par

{{\plain \fs20 selected attitudes (these with the greatest absolute differences between \par

{{\plain \fs20 the ethnic groups) as independent variables, differences between African \par

{{\plain \fs20 Americans and Non Hispanic Whites become clearer. (The formula specified \par

{{\plain \fs20 was Theme = Constant + Acceptance + Fear + Surprise + Sadness + Disgust + \par

{{\plain \fs20 Anger + Anticipation + Joy + Bad + Unfair + Spread + Business + Human + \par

{{\plain \fs20 Quick + Easy). \par

{{\plain \fs20 Candle and Gun, PSAs which utilized visual, noncomputational \par

{{\plain \fs20 techniques to express the likelihood of an event occurring, had large \par

{{\plain \fs20 differences between the ethnic groups both for (R.^{sup.2}) and for p. (with \par

{{\plain \fs20 respect to the equation) as well as differences in coefficients signs. Not \par

{{\plain \fs20 only was the effectiveness of "how we say it" cues clearly related to \par

{{\plain \fs20 Attitudes and Opinions that subjects brought to the message and to \par

{{\plain \fs20 PSA-generated emotions, but differences that existed between the ethnic \par

{{\plain \fs20 groups. This finding was also true for PSA Family as well, but not for Koop \par

{{\plain \fs20 which had insufficient data for computation. (Candle, Verbal Themes, for \par

{{\plain \fs20 African American was (R.^{sup.2}) .736, p. = .220, with p. = .024 for Quick \par

{{\plain \fs20 and p. = .050 for Easy, for Non Hispanic Whites, (R.^{sup.2}) .420, p. = .807; \par

{{\plain \fs20 Candle, Visual Themes, for African Americans was (R.^{sup.2}) .582, p. = .637, \par

{{\plain \fs20 p. = .043 for Easy, for Non Hispanic Whites, (R.^{sup.2}) .626, p. = .252, p = \par

{{\plain \fs20 .041 for Anger. Gun, Verbal Themes, for African Americans was (R

.sup.2) \par
 }{\plain \fs20 .811. p. = .369, p. = .505 for Fear and p. = .043 for Joy, for N
 on Hispanic \par
 }{\plain \fs20 Whites was (R.sup.2) .451, p. = 822; Gun, Visual Themes for Afric
 an \par
 }{\plain \fs20 Americans was (R.sup.2) .827, p. = .319 with p. = .048 for Busin
 ess and p. \par
 }{\plain \fs20 = .024 for Human and for Non Hispanic Whites (R.sup.2) .551, p.
 = .584. \par
 }{\plain \fs20 Family, Verbal Themes, for African Americans was (R.sup.2) .758,
 p. = .070 \par
 }{\plain \fs20 with p. = .037 for Joy, for Non Hispanic Whites, (R.sup.2) was .
 383, p. = \par
 }{\plain \fs20 .775 with p. = .037 for Human. Family, Visual Themes, for Africa
 n Americans \par
 }{\plain \fs20 was (R.sup.2) .622, p. = .362 with p. = .015 for Fear, for Non H
 ispanic \par
 }{\plain \fs20 Whites (R.sup.2) was .652, p. = .151.) \par
 }{\plain \fs20 Finally, though order was controlled for, ethnicity_based
 differences \par
 }{\plain \fs20 appeared in the order in which executions were remembered. Of th
 e 21 \par
 }{\plain \fs20 subjects who recalled Candle (High Fear, High Explicit Words) fi
 rst, 6 were \par
 }{\plain \fs20 African American. Of the 13 who recalled Gun (High Fear, Low Exp
 licit \par
 }{\plain \fs20 Words) first 6 were African American, of the 9 who recalled Koop
 (High \par
 }{\plain \fs20 Explicit words, Low Fear) first 7 were African American, and of
 the 13 who \par
 }{\plain \fs20 recalled Family (High Explicit Words, Low Fear) first 7 were Afr
 ican \par
 }{\plain \fs20 American. A chi_square for first remembered PSA and ethnicity w
 as .088. Of \par
 }{\plain \fs20 the 17 who remembered Candle second, 7 were African American, of
 the 10 who \par
 }{\plain \fs20 remembered Gun second, 5 were African American, of the 13 who re
 membered \par
 }{\plain \fs20 Koop second, 10 were African American, and of the 16 who remembe
 red Family \par
 }{\plain \fs20 second, 4 were African American. The chi_square for ethnicity a
 nd second \par
 }{\plain \fs20 remembered PSA was .045. \par
 }{\plain \fs20 CONCLUSION \par
 }{\plain \fs20 The results of The Picture of Health indicate that differen
 ces exist \par
 }{\plain \fs20 between African Americans and Non Hispanic Whites in recall of t
 evised \par
 }{\plain \fs20 AIDS PSAs. On a basic level, these differences are tied to the d
 iffering \par
 }{\plain \fs20 effectiveness of Fear and Explicit Sexual Words, but the results
 also show \par
 }{\plain \fs20 that other factors have a great influence on recall as well. The
 y show that \par

}{\plain \fs20 these differences appear to be related to a cultural_based fram
 e of \par
 }{\plain \fs20 reference, that is tied to emotions and rooted in differing atti
 tudes about \par
 }{\plain \fs20 science and technology and the place of science in modern life.
 And, they \par
 }{\plain \fs20 also indicate that "how we say it" cues can be "tuned" to distin
 ct \par
 }{\plain \fs20 audiences. \par
 }{\plain \fs20 Because of this, The Picture of Health has demonstrated the
 \par
 }{\plain \fs20 inappropriateness of message standardization with respect to AID
 S \par
 }{\plain \fs20 education. While results showed that use of fear and explicit te
 rms may be \par
 }{\plain \fs20 effective in the short term, potential roadblocks may limit the
 widespread \par
 }{\plain \fs20 use of sexually explicit language over the air waves. One of the
 se is \par
 }{\plain \fs20 strategic and is connected with a "ratcheting effect"; the secon
 d is legal. \par
 }{\plain \fs20 As long as novelty remains, sexually accurate words may serve as
 a "planned \par
 }{\plain \fs20 rhetorical strategy to create identification between agitators a
 nd \par
 }{\plain \fs20 potential allies."(25) Once that novelty disappears, this tactic
 may demand \par
 }{\plain \fs20 a ratcheting up of more and more graphic, or explicit, levels of
 \par
 }{\plain \fs20 description for a gradually desensitized audience.(26) \par
 }{\plain \fs20 Would these new levels be accepted? \par
 }{\plain \fs20 Law and custom suggest not. The FCC has long prohibited the
 airing of \par
 }{\plain \fs20 obscene material, and station managers have long exercised a \pa
 r
 }{\plain \fs20 quasi_statistical sense of community standards when refusing ai
 r time for \par
 }{\plain \fs20 material they consider objectionable. Taken together, law and cu
 stom could \par
 }{\plain \fs20 create a "chilling effect" on AIDS PSA makers. \par
 }{\plain \fs20 Researchers should look at different ways of analyzing rela
 tionships \par
 }{\plain \fs20 between audiences and messages to circumvent potential problems
 and make \par
 }{\plain \fs20 campaigns more potent. What emerges as a practicable strategy fo
 r \par
 }{\plain \fs20 healthcare and other behavior modification programs is a realism
 accounting \par
 }{\plain \fs20 for those differences. Healthcare educators, just like other inv
 olved in \par
 }{\plain \fs20 persuasive communication, should order their concerns and deal e
 quitably \par
 }{\plain \fs20 and responsibly with priority publics.(27) What this study makes
 clear is \par

that communications professionals must make a fundamental decision on message design based on appropriate targeting. In doing so, they should look at language, aesthetics, and values in the context of differences. "How we say it" variables should be related to age, sensuality, decency, and/or violence because these "how we say it" elements can provoke different responses, reactions to, and interpretations of, both advertising and educational efforts.(28) One potential strategy calls for acknowledging differences of all varieties and scrapping message standardization. In this context, the best bet for a successful campaign is to start with a single theme, such as the odds of contracting disease, and adapting "how we say it" variables to account for attitudes and opinions of disparate audience members. This might mean that, relative to AIDS risk communication, a PSA campaign would show the odds of contracting AIDS in several ways. For, if The Picture of Health has shown nothing else, it has demonstrated that strategic solutions to public education require formulating combinations of "how we say it" elements orchestrated for targeted audiences. Despite some progress in isolating elements that improve recall, many communicators remain confused about the best way to produce a successful healthcare-related prevention and information campaign. That is because a basic conflict still exists. The message standardization school assumes that, because of better and faster communication, the population is becoming more homogeneous. The opposing school says that advertisers must recognize differences and tailor communication approaches. Thus, healthcare message designers, and others who attempt to lessen social ills, such as drug use or prison recidivism, must recognize that what the audience brings to a message is crucial. They must acknowledge that a multifaceted, programmatic approach based on this principle

le will \par

{\plain \fs20 produce communication programs that help change attitudes and, perhaps \par

{\plain \fs20 ultimately, behavior. They must also recognize that it is not enough merely \par

{\plain \fs20 to design programs; these programs must make their way onto the airwaves. \par

{\plain \fs20 Thus, healthcare educators must ensure that their messages are shown, even \par

{\plain \fs20 if that means buying time and space as in done in other countries. For, \par

{\plain \fs20 with apologies to Noelle\ Newmann (1984), what does not get seen does not \par

{\plain \fs20 exist. And, what we don't know will hurt us.(29) \par

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 6 (1987), pp. 223-236; and S.J.F. Unwin, "How Culture, Age and Sex Affect Advertising Response," Journalism Quarterly 50 (Winter 1970), pp. 735-743.
 29. E. Noelle-Newmann, The Spiral of Silence (Chicago: The University of Chicago Press, 1984).
 T.N. Walters is Assistant Professor of Journalism, Northeast Louisiana University. Lynne M. Walters, Marilyn Kern-Foxworth, and Susanna Hornig are Associate Professors of Journalism, Texas A & M University.
 COPYRIGHT 1997 JAI Press Inc.
 DESCRIPTORS: *Public* *service* *advertising* Research; AIDS* (Disease) Study and teaching; Oral communication Research; Visual communication Research; African Americans Attitudes; Whites Attitudes; Television advertising Research
 SPECIAL FEATURES: table; graph; illustration
 FILE SEGMENT: MC File 75
 15/9/21 (Item 4 from file: 88)
 DIALOG(R)File 88:BUSINESS A.R.T.S.
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 04307894 SUPPLIER NUMBER: 19551573
 Audience recall of AIDS PSAs among U.S. and international college students. (public service announcements)(Audience Involvement: Perception, Recall, and Participation)
 Lee, Jung-Sook; Davie, William R.
 Journalism & Mass Communication Quarterly, v74, n1, p7(16)
 Spring, 1997
 ISSN: 1077-6990 LANGUAGE: English RECORD TYPE: Abstract
 AUTHOR ABSTRACT: Results from an experimental study show that the audience recall of AIDS PSAs is related to message appeal types, cultural identity, and gender. PSA messages with strong emotional appeals are better remembered by college students than the rational appeal messages. The U.S. viewers recall more of the AIDS prevention messages than the

par
 }{\plain \fs20 international participants. Results also show that college women
 recall \par
 }{\plain \fs20 more *AIDS* PSA messages than college men in general, and emotio
 nal *AIDS* \par
 }{\plain \fs20 message appeals in particular. The pattern indicates an exact re
 versal of \par
 }{\plain \fs20 differences between two message_appeal types for each gender. \

par
 }{\plain \fs20 COPYRIGHT 1997 Association for Education in Journalism
 and Mass \par
 }{\plain \fs20 Communication \par
 }{\plain \fs20 DESCRIPTORS: *AIDS* (Disease)_Advertising; *Public* *servic
 e* \par
 }{\plain \fs20 *advertising*_Evaluation*; College students_Surveys \pa
 r
 }{\plain \fs20 SPECIAL FEATURES: illustration; table; graph \par
 }{\plain \fs20 FILE SEGMENT: AI File 88 \par
 }{\plain \fs20 \par
 }{\plain \fs20 \par
 }{\plain \fs20 15/9/22 (Item 5 from file: 88) \par
 }{\plain \fs20 DIALOG(R)File 88:BUSINESS A.R.T.S. \par
 }{\plain \fs20 (c) 1999 The Gale Group. All rts. reserv. \par
 }{\plain \fs20 \par
 }{\plain \fs20 04000086 SUPPLIER NUMBER: 18591171 \par
 }{\plain \fs20 Can you say condom? It makes a difference in fear_arousing *AID
 S* \par
 }{\plain \fs20 prevention public service announcements. \par
 }{\plain \fs20 Struckman_Johnson, David; Struckman_Johnson, Cindy \par
 }{\plain \fs20 Journal of Applied Social Psychology, v26, n12, p1068(16) \par
 }{\plain \fs20 June 16, 1996 \par
 }{\plain \fs20 ISSN: 0021_9029 LANGUAGE: English RECORD TYPE: Abstra
 ct \par
 }{\plain \fs20 \par
 }{\plain \fs20 AUTHOR ABSTRACT: The study investigated the *effect* of adding
 a \par
 }{\plain \fs20 recommendation to use condoms to fear_arousing *AIDS* public se
 rvice \par
 }{\plain \fs20 announcements (PSAs) on subjects' intentions to use condoms and
 taking of \par
 }{\plain \fs20 free condoms. Sexual content of the *AIDS* PSA and subject gende
 r were also \par
 }{\plain \fs20 varied. A sample of 112 men and 107 women rated the *effectivene
 ss* of 1 of \par
 }{\plain \fs20 8 fear_arousing *AIDS* PSAs. Four PSAs ended with a message to
 "Use condoms \par
 }{\plain \fs20 to reduce the risk. For more information call _____.\" An identic
 al set of \par
 }{\plain \fs20 PSAs ended with only the telephone number for more information.
 Results \par
 }{\plain \fs20 showed that the recommendation had no *effect* on intentions to
 use \par
 }{\plain \fs20 condoms. However, men exposed to a fear_arousing PSA with the \

par

{{\plain \fs20 recommendation took significantly more condoms than men in the \par
{{\plain \fs20 no_recommendation condition. Men also took significantly more c
ondoms than \par
{{\plain \fs20 women in the recommendation condition. The results are interpret
ed in terms \par
{{\plain \fs20 of the *AIDS* risk reduction model (Catania, Kegeles, & Coates,
1990). \par
{{\plain \fs20 COPYRIGHT 1996 V.H. Winston & Son Inc. \par
{{\plain \fs20 \par
{{\plain \fs20 DESCRIPTORS: *Public* *service* *advertising*__Psychological
aspects; \par
{{\plain \fs20 *AIDS* (Disease)__Psychological aspects; *AIDS* phobia__Re
search \par
{{\plain \fs20 SPECIAL FEATURES: illustration; table; graph \par
{{\plain \fs20 FILE SEGMENT: AI File 88 \par
{{\plain \fs20 \par
{{\plain \fs20 \par
{{\plain \fs20 15/9/23 (Item 6 from file: 88) \par
{{\plain \fs20 DIALOG(R)File 88:BUSINESS A.R.T.S. \par
{{\plain \fs20 (c) 1999 The Gale Group. All rts. reserv. \par
{{\plain \fs20 \par
{{\plain \fs20 03854813 SUPPLIER NUMBER: 18120411 \par
{{\plain \fs20 The multiple affective outcomes of *AIDS* PSAs: fear appeals do
more than \par
{{\plain \fs20 scare people. (public service announcements) \par
{{\plain \fs20 Dillard, James Price; Plotnick, Courtney A.; Godbold, Linda C.;
Freimuth, \par
{{\plain \fs20 Vicki S.; Edgar, Timothy \par
{{\plain \fs20 Communication Research, v23, n1, p44(29) \par
{{\plain \fs20 Feb, 1996 \par
{{\plain \fs20 ISSN: 0093_6502 LANGUAGE: English RECORD TYPE: Abstra
ct \par
{{\plain \fs20 \par
{{\plain \fs20 AUTHOR ABSTRACT: The widespread use of fear appeals in *health*
\par
{{\plain \fs20 communication campaigns seems to reflect the existence of a folk
theory \par
{{\plain \fs20 that predicts message acceptance as a function of induced fright
. Whereas \par
{{\plain \fs20 there is empirical evidence consistent with that position, recen
t research \par
{{\plain \fs20 also shows that other affects may influence message acceptance a
s well. Two \par
{{\plain \fs20 studies were conducted to determine the extent to which a sample
of public \par
{{\plain \fs20 service announcements (PSAs) on the topic of *AIDS*/*HIV* evoked
affective \par
{{\plain \fs20 responses, the degree to which those affects predicted message a
cceptance, \par
{{\plain \fs20 and the mechanism by which feelings, including fear, operate on
message \par
{{\plain \fs20 acceptance. Results showed that a variety of affects were induce
d by the \par

}}{\plain \fs20 PSAs, most of which did predict message acceptance. However, considerable \par
}}{\plain \fs20 variation was observed in both sign and magnitude of the associations. As \par
}}{\plain \fs20 for mechanism, the data suggested that the *effects* of affect on message \par
}}{\plain \fs20 acceptance were mediated by heuristic rather than systematic message \par
sage \par
}}{\plain \fs20 processing. \par
}}{\plain \fs20 \par
}}{\plain \fs20 DESCRIPTORS: *Public* *service* *advertising*_Research; *Health* risk \par
}}{\plain \fs20 communication_Psychological aspects; *AIDS* (Disease)_Advertising; \par
}}{\plain \fs20 *AIDS* phobia_ *Analysis* \par
}}{\plain \fs20 SPECIAL FEATURES: illustration; table \par
}}{\plain \fs20 FILE SEGMENT: AI File 88 \par
}}{\plain \fs20 \par
}}{\plain \fs20 \par
}}{\plain \fs20 15/9/24 (Item 7 from file: 88) \par
}}{\plain \fs20 DIALOG(R)File 88:BUSINESS A.R.T.S. \par
}}{\plain \fs20 (c) 1999 The Gale Group. All rights reserved. \par
}}{\plain \fs20 \par
}}{\plain \fs20 03643110 SUPPLIER NUMBER: 17215528 (THIS IS THE FULL TEXT) \par
}}{\plain \fs20 MADD rates the states: a media advocacy event to advance the agenda against \par
}}{\plain \fs20 alcohol_impaired driving.(Mothers Against Drunk Driving) \par

}}{\plain \fs20 Russell, Anne; Voas, Robert B.; DeJong, William; Chaloupka, Marla \par
a \par
}}{\plain \fs20 Public Health Reports, v110, n3, p240(6) \par
}}{\plain \fs20 May_June, 1995 \par
}}{\plain \fs20 ISSN: 0033_3549 LANGUAGE: English RECORD TYPE: Fulltext; Abstract \par
}}{\plain \fs20 WORD COUNT: 3892 LINE COUNT: 00334 \par
}}{\plain \fs20 \par
}}{\plain \fs20 AUTHOR ABSTRACT: The "Rating the States" (RTS) Program of Mothers Against \par
}}{\plain \fs20 Drunk Driving (MADD) is designed to bring public attention to the status of \par
the status of \par
}}{\plain \fs20 State government efforts to combat alcohol_impaired driving. MADD's 1993 \par
}}{\plain \fs20 report, which *evaluated* each State with a grade from A to D, brought \par
}}{\plain \fs20 renewed visibility to MADD's fight for new prevention policies and helped \par
}}{\plain \fs20 to advance key State legislation. Because of MADD's national press \par
}}{\plain \fs20 conference and other media activities, more than 60 million Americans saw \par
}}{\plain \fs20 or heard a news story related to the program. \par
}}{\plain \fs20 This article outlines the program's objectives and methodology, \par

}}\plain \fs20 efforts to publicize the results, and what was achieved in terms of news \par
}}\plain \fs20 media coverage and in advancing public policy change. The RTS Program is a \par
}}\plain \fs20 proven media advocacy strategy for prompting State legislatures and \par
}}\plain \fs20 Governors to enact new policies. The article concludes with guidelines for \par
}}\plain \fs20 other public *health* advocacy groups that may want to emulate this \par
}}\plain \fs20 strategy. \par
}}\plain \fs20 \par
}}\plain \fs20 TEXT: \par
}}\plain \fs20 IN 1990, MOTHERS AGAINST DRUNK DRIVING (MADD), based in Irving, TX, \par
}}\plain \fs20 announced an ambitious plan for the nation's fight against drunk driving: \par
}}\plain \fs20 reducing the proportion of alcohol-related traffic fatalities by 20 percent \par
}}\plain \fs20 by the year 2000 ("20 By 2000"). Key to this plan was a comprehensive \par
}}\plain \fs20 statement of State legislative priorities, including administrative license \par
}}\plain \fs20 revocation (ALR) and lowering the per se limit to .08 BAC (blood alcohol \par
}}\plain \fs20 content) (1). \par
}}\plain \fs20 To advance its public policy agenda, MADD joined with Advocates for \par
}}\plain \fs20 Highway and Auto Safety (Advocates), based in Washington, DC, to develop \par
}}\plain \fs20 the "Rating the States" (RTS) Program, a so-called report card on the \par
}}\plain \fs20 nation's fight against alcohol-impaired driving. The 1993 report was an \par
}}\plain \fs20 update of the progress made by each of the 50 States since 1991, when the \par
}}\plain \fs20 first RTS report was issued (2). \par
}}\plain \fs20 The RTS Program is a proven example of media advocacy, a new paradigm \par
}}\plain \fs20 in public health in which health educators use the media to galvanize \par
}}\plain \fs20 political action and change. As Wallack and his colleagues (3) describe it, \par
}}\plain \fs20 media advocacy is an effort to move public discourse from a focus on \par
}}\plain \fs20 individual blame to a more proper focus on societal conditions and \par
}}\plain \fs20 institutional arrangements that are at the root of public health problems. \par
}}\plain \fs20 Ultimately, media advocacy is a source of power for citizen groups to make \par
}}\plain \fs20 their concerns known and to build support for changes in public policy. \par
}}\plain \fs20 Other groups periodically issue political report cards, bu

t none does \par
 }{\plain \fs20 so with the comprehensiveness of MADD or its specific focus on p
 romoting \par
 }{\plain \fs20 policy change. \par
 }{\plain \fs20 Governance of the RTS Program \par
 }{\plain \fs20 Since its founding in 1980, MADD frequently has been asked
 to \par
 }{\plain \fs20 identify the best and worst States on the basis of their efforts
 to combat \par
 }{\plain \fs20 alcohol\ _impaired driving. An evaluation of this sort, with the
 political \par
 }{\plain \fs20 ramifications it would cause, would be extremely difficult, if n
 ot \par
 }{\plain \fs20 impossible, for government agencies to carry out. In contrast, M
 ADD has a \par
 }{\plain \fs20 national vantage point from which to collect and analyze the inf
 ormation \par
 }{\plain \fs20 needed for such an evaluation, and it also has both the capabili
 ty and \par
 }{\plain \fs20 moral authority to use the results to promote further progress i
 n public \par
 }{\plain \fs20 policy. \par
 }{\plain \fs20 MADD's public policy committee voted in early 1990 to unde
 rtake the \par
 }{\plain \fs20 first "Rating the States" project. Advocates for Highway and Aut
 o Safety \par
 }{\plain \fs20 came forward as a co_sponsor. A 13_member task force was assem
 bled that \par
 }{\plain \fs20 included representatives of both organizations plus the Insuranc
 e Institute \par
 }{\plain \fs20 for Highway Safety, Mid_America Research Institute, National Co
 mmission \par
 }{\plain \fs20 Against Drunk Driving, National Highway Traffic Safety Administr
 ation \par
 }{\plain \fs20 (NHTSA), National Public Services Research Institute, and the Na
 tional \par
 }{\plain \fs20 Transportation Safety Board. Members of the task force were sele
 cted on the \par
 }{\plain \fs20 basis of their involvement in public policy advocacy, legislativ
 e research, \par
 }{\plain \fs20 or highway safety program evaluation. Results of the first surve
 y were \par
 }{\plain \fs20 released in 1991. \par
 }{\plain \fs20 To launch the revised RTS Program in 1993, MADD and Advoca
 tes created \par
 }{\plain \fs20 a 22_member task force. Twelve members came from MADD's board o
 f directors \par
 }{\plain \fs20 or worked in its national office. Additional members came from N
 HTSA, \par
 }{\plain \fs20 National Association of Governors' Highway Traffic Safety Repres
 entatives, \par
 }{\plain \fs20 Mid_America Research Institute, and Boston University. The task
 force first \par
 }{\plain \fs20 met in July 1992. Five subsequent meetings were held to supervis

e \par
development of the RTS questionnaire. \par
The "Rating the States" Questionnaire \par
The content of the RTS questionnaire was drawn from elements of \par
MADD's "20 By 2000" plan that had been released in 1990. Key elements in \par
this plan had been selected based on research findings about effective \par
countermeasures, recommendations from highway safety professionals, and \par
suggestions made by MADD's citizen activists. The questionnaire covered 11 \par
content areas, which are described in the box on page 242. \par

The questions themselves were designed to elicit specific information \par
on current laws, enforcement, and prevention programs. Some questions were \par
asked despite expectations that the answers might be difficult to obtain, \par
with the hope that States might be prompted to begin collecting such \par
information. \par
Task force members drafted the questions, with review and suggestions \par
by outside reviewers. Wording of questions was shaped by two \par
considerations__to make the responses as easily quantifiable as possible \par
and to avoid misunderstandings due to variations in terminology from State \par
to State. Prior to finalizing the questionnaire, the task force sought \par
input from both Federal and State officials and other highway safety \par
experts. \par
Once finalized, the questionnaire was mailed to the Governor's \par
Highway Safety Representative in each State and to a State MADD leader, who \par
was encouraged to follow up with State officials until they supplied the \par
requested information. Communication was maintained between the task force, \par
the MADD national office, and the MADD State leaders during the entire data \par
collection period to ensure a high level of response from the States. \par
Determining the Grades \par
The system used to grade each State was based on the task force's \par
assessment of the relative importance of each of the 11 content areas. Each \par

content area was assigned a weight, with the total weights equal to 100. \par

Because of its importance, the statistics and records area was divided into \par

two subcategories, which were weighted separately. \par

Questions within each content area were grouped by topic, and then \par

each grouping was weighted based on its importance to the content area. In \par

determining how much each question was worth, consideration was given to \par

the difficulty of obtaining the information and the reliability of the \par

data. If a question required estimates rather than exact figures, or if \par

most States would be unable to obtain the necessary information, the \par

question was given a lower weight. \par

A coding scheme was developed for each question to assign points for \par

different responses. When there were several response alternatives from \par

which respondents could choose, point values for each response were \par

determined ahead of time. Responses to open-ended questions were judged \par

according to predetermined guidelines. Point values for anticipated or \par

innovative answers were developed as needed. \par

Numerical data were converted to population-based rates (for example, \par

number of arrests per 1,000 licensed drivers) whenever possible. Points \par

were then awarded in a fashion similar to "grading on a curve," so that \par

States with the best rates received the maximum number of points for that \par

question, while those with the worst rates received zero points. Whenever \par

possible, data were provided or validated by NHTSA, the FBI, or other \par

sources that have nationwide data systems in place. \par

Whenever a State did not respond to a particular question, and MADD \par

was unable to obtain the information through other means, the State was \par

given a score slightly below the national average. A value slightly below \par

the mean score was used in place of missing or incomplete responses because \par

that information tended to be in areas of weakness for that State. \par

Based on this scoring system, the task force assigned letter grades \par

from A to D to each State's performance in each of the 11 areas, plus an aggregate grade. The task force assigned similar grades for the nation as a whole. Unfortunately, late arrival of some States' responses led to errors, but out of 560 grades issued, errors were reported in only five instances. MADD issued press releases to correct the record and made corrections in copies of the report.

Each State's report card also included detailed information on the number of alcohol-related traffic fatalities, the amount of change seen in those figures from earlier years, and the estimated direct costs of alcohol-related crashes. As in the first report, the 1993 report noted each State's strengths and weaknesses in their legislation and programs.

Grades for the nation's overall effort in each of the 11 content areas were based on the proportion of all questions in each area that were answered favorably by the States, plus information about Federal legislation and programs, national opinion polls, and other research.

National Report Card

The United States as a whole was assigned a grade of B for the nation's collective effort to combat impaired driving. The nation received its highest grades of B in four content areas: leadership, statistics and records, prevention and public awareness, and youth issues. For self-sufficiency programs, the nation earned its lowest grade, a D.

The highest grade received by any State, A, was earned by Illinois (see table). Four States earned a B+: Arizona, New Mexico, North Carolina, and Ohio. The lowest grade received by any State, D, was earned by Mississippi. Grades of D or D+ were also earned by Alabama, Idaho, Missouri, North Dakota, Vermont, and Wyoming.

MADD's 1993 State report card: aggregate grades of progress against alcohol-impaired driving, by State

State	Grade
Alabama	D+

Alaska	C
Arizona	B+
Arkansas	C+
California	B
Colorado	B
Connecticut	C
Delaware	C
D.C.	C
Florida	C+
Georgia	C
Hawaii	C+
Idaho	D+
Illinois	A
Indiana	C
Iowa	C+
Kansas	B
Kentucky	C+
Louisiana	C
Maine	C
Maryland	B
Massachusetts	C
Michigan	C
Minnesota	B
Mississippi	D
Missouri	D+
Montana	C
Nebraska	B
Nevada	B
New Hampshire	C
New Jersey	B
New Mexico	B+
New York	B
North Carolina	B+
North Dakota	D
Ohio	B+
Oklahoma	C
Oregon	B
Pennsylvania	B
Rhode Island	C
South Carolina	B
South Dakota	C+
Tennessee	C
Texas	C
Utah	B
Vermont	D+
Virginia	C
Washington	C
West Virginia	C
Wisconsin	C
Wyoming	D

Publicizing the Results
MADD and Advocates for Highway and Auto Safety released the results

from the 1993 survey at a Washington, DC, press conference on No

vember 23, \par
}\plain \fs20 1993, just before the Thanksgiving holiday. This date was chosen
for \par
}\plain \fs20 maximum impact in the news media. Thanksgiving ushers in the ann
ual holiday \par
}\plain \fs20 season, a period when the number of alcohol_related traffic cra
shes \par
}\plain \fs20 typically increases, and the news media are eager for stories on
the \par
}\plain \fs20 subject. \par
}\plain \fs20 MADD facilitated coverage by distributing both video and a
udio news \par
}\plain \fs20 releases of the Washington press event in addition to a traditio
nal press \par
}\plain \fs20 release. On the same day, local MADD officials across the countr
y held \par
}\plain \fs20 their own press conferences to announce the grades received by t
heir State. \par
}\plain \fs20 Many of these events included State officials as well as MADD an
d Advocates \par
}\plain \fs20 representatives. \par
}\plain \fs20 Media interest in the RTS report was considerable, with to
tal \par
}\plain \fs20 audience exposure to the story estimated at 62.5 million people,
counting \par
}\plain \fs20 both the broadcast media and newspapers. Highlights from the nat
ional \par
}\plain \fs20 coverage included news stories on NBC's "Nightly News" and CNN,
interviews \par
}\plain \fs20 with MADD leaders on ABC's "Nightline" and "CBS This Morning," a
nd articles \par
}\plain \fs20 by the Associated Press and USA Today. \par
}\plain \fs20 Material from MADD's video news release (VNR) was aired on
at least \par
}\plain \fs20 364 different newscasts nationwide, with a total confirmed audie
nce of \par
}\plain \fs20 nearly 27 million viewers. The VNR was used in two_thirds of th
e nation's \par
}\plain \fs20 209 television markets. \par
}\plain \fs20 In addition, several local stations produced their own mat
erial, \par
}\plain \fs20 either by sending a crew to the Washington press conference or b
y covering \par
}\plain \fs20 a local MADD event. These efforts were seen by an additional 22.
3 million \par
}\plain \fs20 viewers. \par
}\plain \fs20 The audio news release was sent to more than 2,000 radio s
tations, \par
}\plain \fs20 resulting in an additional estimated audience of 1.2 million. Se
veral State \par
}\plain \fs20 radio networks covered the story by interviewing State MADD \par
}\plain \fs20 representatives, reaching an additional 373,300 listeners. \par

}}{\plain \fs20 In States with relatively high grades, several MADD leaders expressed \par
}}{\plain \fs20 concern that the positive news coverage might reduce the impetus for \par
}}{\plain \fs20 further progress. In States with relatively low grades, some MADD leaders \par
}}{\plain \fs20 expressed fear that the ratings might jeopardize MADD's working \par
}}{\plain \fs20 relationships with State officials. In fact, in a few of these States, \par
}}{\plain \fs20 harsh reactions by State officials led local MADD leaders to disavow the \par
}}{\plain \fs20 survey. \par
}}{\plain \fs20 Although some State officials expressed dissatisfaction with their \par
}}{\plain \fs20 State evaluation, more often the report led to renewed concern about the \par
}}{\plain \fs20 problem and, in many cases, reinvigorated efforts to fight alcohol-impaired \par
}}{\plain \fs20 driving, such as the following actions: \par
}}{\plain \fs20 Alabama D+. On April 19, 1994, the Governor appointed a special task \par
}}{\plain \fs20 force on alcohol-impaired driving that includes MADD representatives. \par
}}{\plain \fs20 California B. The head of the State's alcohol and drug program, who \par
}}{\plain \fs20 expressed displeasure with the RTS report, met with MADD to explore how to \par
}}{\plain \fs20 work together in the future. \par
}}{\plain \fs20 Idaho D+. A constitutional amendment for victim rights was passed by \par
}}{\plain \fs20 the legislature and appeared on the November 1994 ballot. \par
}}{\plain \fs20 Massachusetts C+. A legislative package that had been in committee \par
}}{\plain \fs20 for 18 months finally moved forward after release of the RTS report. A new \par
}}{\plain \fs20 law enacted in May 1994 included a presumptive (not per se) limit of .08 \par
}}{\plain \fs20 BAC, a .02 BAC limit for youth, and administrative license revocation. \par
}}{\plain \fs20 Michigan C. MADD was invited to participate in a State-sponsored \par
}}{\plain \fs20 Alcohol Issues Forum. \par
}}{\plain \fs20 Missouri D+. The Governor, who had complained about the RTS report \par
}}{\plain \fs20 prior to its release, made plans to appoint a special task force with MADD \par
}}{\plain \fs20 representation. MADD has since collaborated with the Governor to promote \par
}}{\plain \fs20 his legislative package. \par
}}{\plain \fs20 Pennsylvania B. Legislative leaders promised MADD that a bill for \par
}}{\plain \fs20 administrative license revocation would be put on a "fast track." \par
"} \par

Virginia C. Passage of a new legislative package was expedited. The bill signed by the Governor includes the .08 BAC limit, a .02 BAC limit for youth, and vehicle impoundment. Guidelines for Future Programs The "Rating the States" Program has several features that helped ensure news media interest and bring attention to MADD's public policy agenda. Any public health group that wants to develop such a media event should examine its capacity to replicate these key program elements. First, MADD is a highly credible grassroots organization with widespread public recognition and support. MADD's membership is dominated by victims of alcohol-impaired driving, and the organization therefore speaks with moral authority. Second, people are interested in how their State compares with others. Public officials and ordinary citizens alike want to think that their State is in the forefront in solving important social problems such as drunk driving. Finding out that is not the case can motivate action. Similarly, within a single State, comparisons can be made across local jurisdictions. Third, complex data about each State was translated into ratings that are familiar to anyone who has attended school in the United States letter grades from A to D. Each State received a grade in 11 content areas, which maximized the chances that States would have areas of both relative strength and weakness. This approach also better satisfied the news media's needs for readily accessible information about each State. In contrast, the RTS report for 1991 only singled out the top 10 States in each content area, which news reporters said was too limiting for their purposes. Fourth, a few of the ratings focused specifically on the actions of State leaders, including the Governor, criminal justice officials, and the legislature. Poor grades received by some officials generated po

litical \par
 }{\plain \fs20 controversy, which frequently drew news media attention. \par
 }{\plain \fs20 Fifth, MADD contracted with Bill Bronrott Communications,
 a public \par
 }{\plain \fs20 relations firm based in the Washington area, to set up the natio
 nal press \par
 }{\plain \fs20 conference and contact news agencies and with Washington Indepen
 dent \par
 }{\plain \fs20 Productions to produce the video and audio news releases. Whether
 outside \par
 }{\plain \fs20 consultants or firms are paid or work pro bono, their expertise,
 coupled \par
 }{\plain \fs20 with their extensive media contacts, is usually necessary to mou
 nt a \par
 }{\plain \fs20 professional event. \par
 }{\plain \fs20 MADD's experience with "Rating the States" leads to severa
 l \par
 }{\plain \fs20 additional recommendations for conducting this type of program:
 \par
 }{\plain \fs20 * Time the release of the report so that it is germane to
 the vast \par
 }{\plain \fs20 majority of State administrations currently in office. In genera
 l, avoid \par
 }{\plain \fs20 the months just before and just after a major national election.
 \par
 }{\plain \fs20 * Identify a single State agency that will be responsible
 for \par
 }{\plain \fs20 gathering and reporting the requested information and can serve
 as a point \par
 }{\plain \fs20 of contact. \par
 }{\plain \fs20 * Notify the Governor's office in advance about the survey
 and the \par
 }{\plain \fs20 ratings program. \par
 }{\plain \fs20 * When distributing the surveys to the States, describe ho
 w the \par
 }{\plain \fs20 ratings will be calculated and explain the consequences of not \par
 }{\plain \fs20 participating or not providing complete and factual information.
 \par
 }{\plain \fs20 * Give State officials at least 3 months to complete the q
 uestions, \par
 }{\plain \fs20 since information may have to be gathered from several different
 agencies. \par
 }{\plain \fs20 * If Federal data on the States are available, have State
 officials \par
 }{\plain \fs20 confirm that data, rather than report their own. Doing so will e
 nsure \par
 }{\plain \fs20 greater consistency across the States. \par
 }{\plain \fs20 * Extensive followup may sometimes be needed to get comple
 te \par
 }{\plain \fs20 information. Even so, some data will be missing, and there needs
 to be a \par
 }{\plain \fs20 procedure for determining the score to be assigned in such cases
 . \par

{\plain \fs20 * To the extent possible, develop a procedure for double_checking the \par
{\plain \fs20 accuracy of reported information. Opponents will seize upon discrepancies \par
{\plain \fs20 or inaccuracies in the report in order to undermine it. \par
{\plain \fs20 * Questions should be prepared with the help of experienced \par
{\plain \fs20 researchers and content experts in the relevant disciplines, including both \par
{\plain \fs20 current and former State officials. \par
{\plain \fs20 * All questions should be pretested so that their interpretation by \par
{\plain \fs20 State officials does not vary from State to State. \par
{\plain \fs20 * Questions should be answerable from information that is readily \par
{\plain \fs20 available to State officials. Questions that might be difficult for States \par
{\plain \fs20 to answer should be included only if they have very high educational value. \par
{\plain \fs20 * Avoid open_ended questions to the extent possible, since these are \par
{\plain \fs20 more difficult to grade. \par
{\plain \fs20 * If surveys are done on a periodic basis, obtain information on what \par
{\plain \fs20 each State has accomplished (for example, new laws, changes in enforcement \par
{\plain \fs20 levels, new public awareness campaign) since the last report was issued. \par
{\plain \fs20 * Include objective indicators of each State's basic performance. For \par
{\plain \fs20 example, the RTS report included State_level data showing 10_year trends in \par
{\plain \fs20 the number and proportion of traffic fatalities that were alcohol-related. \par
{\plain \fs20 * For questions involving numeric responses, consider whether the \par
{\plain \fs20 States' responses should be translated into a rate against total population \par
{\plain \fs20 or some other appropriate baseline. \par
{\plain \fs20 * Establish objective criteria for assigning grades prior to \par
{\plain \fs20 distributing the questionnaires. The scoring system should give greater \par
{\plain \fs20 weight to high priority items. \par
{\plain \fs20 * Time should be built into the schedule to allow State officials to \par
{\plain \fs20 respond to a preliminary report so that any necessary corrections can be \par
{\plain \fs20 made prior to release. \par
{\plain \fs20 * Solicit recommendations from State officials and others on how to \par
{\plain \fs20 improve the data collection and rating process. For example, feedback from \par
{\plain \fs20 some reporters suggested that the 1993 RTS report gave too much

information \par

}}{\plain \fs20 and recommended that a simpler report card with fewer grades be used for \par

}}{\plain \fs20 ease of media presentation. \par

}}{\plain \fs20 Conclusion \par

}}{\plain \fs20 MADD and Advocates hoped that the 1993 "Rating the States" report \par

}}{\plain \fs20 would serve as both a call for continued action and a "road map" to guide \par

}}{\plain \fs20 State and local efforts to fight drunk driving in the years ahea

d. MADD \par

}}{\plain \fs20 officials from several States have reported that this objective is being \par

}}{\plain \fs20 met. \par

}}{\plain \fs20 The RTS Program demonstrates that national surveys of State \par

}}{\plain \fs20 government action can be used to develop useful information of interest to \par

}}{\plain \fs20 both the news media and State officials. Public health advocates can look \par

}}{\plain \fs20 to the RTS Program as a model for bringing to public attention those policy \par

}}{\plain \fs20 areas in which new legislation or stronger programs are required. \par

}}{\plain \fs20 References \par

}}{\plain \fs20 (1.)20 By 2000. Mothers Against Drunk Driving, Irving, TX, 1990. \par

}}{\plain \fs20 (2.)Rating the states: A report card on the nation's attention to the \par

}}{\plain \fs20 problem of alcohol\ and other drug\ impaired driving. Mothers Against Drunk \par

}}{\plain \fs20 Driving, Irving, TX, 1993. \par

}}{\plain \fs20 (3.)Wallack, L., Dorfman, L., Jernigan, D., and Themba, M: Media \par

}}{\plain \fs20 advocacy and public health: Power for prevention. Sage Publications, Inc., \par

}}{\plain \fs20 Newbury Park, CA, 1993. \par

}}{\plain \fs20 RELATED ARTICLE: Identified Needs in 11 Content Areas Used to Rate \par

}}{\plain \fs20 the States in MADD's 1993 Program \par

}}{\plain \fs20 1. Governor's leadership. A Governor can help shape the direction of \par

}}{\plain \fs20 a State's anti\ impaired driving effort in various ways, ranging from \par

}}{\plain \fs20 sponsorship of legislative measures to the appointment of a special task \par

}}{\plain \fs20 force. Criteria for grading this content area included the following: (a) \par

}}{\plain \fs20 establishing a special task force on alcohol\ impaired driving; (b) \par

}}{\plain \fs20 providing for the participation of citizen\ advocates in the task force; and \par

}}{\plain \fs20 (c) endorsing MADD's "20 By 2000" objectives. \par

}}{\plain \fs20 2. Statistics and records. Key elements include the assess

ment of \par
}\plain \fs20 alcohol or other drug involvement in traffic crashes, testing su
rviving \par
}\plain \fs20 drivers for blood alcohol content, and the availability of arres
t and \par
}\plain \fs20 conviction records for use in the adjudication of criminal charg
es. \par
}\plain \fs20 3. Enforcement. From the standpoint of general deterrence,
MADD \par
}\plain \fs20 regards the use of highly publicized sobriety checkpoints and ot
her \par
}\plain \fs20 intensive enforcement measures to be essential. Information was
also sought \par
}\plain \fs20 on the use of advanced enforcement technologies, such as passive
breath \par
}\plain \fs20 alcohol testers and in_vehicle video cameras, but a State's gra
de was not \par
}\plain \fs20 affected by the lack of such equipment. \par
}\plain \fs20 4. Administrative and criminal sanctions. MADD supports a
system of \par
}\plain \fs20 increasingly severe penalties, both criminal and administrative,
if \par
}\plain \fs20 offenders continue to drive impaired. Administrative license rev
ocation was \par
}\plain \fs20 weighted most heavily because of research that demonstrates its
value in \par
}\plain \fs20 reducing alcohol_related traffic crashes. Also assessed was the
average \par
}\plain \fs20 length of time from arrest to trial in each State and the use of
mandatory \par
}\plain \fs20 minimum sentences. \par
}\plain \fs20 5. Regulatory control and availability. Prevention of alco
hol sales \par
}\plain \fs20 to people younger than age 21 is a MADD priority, so related mea
sures, such \par
}\plain \fs20 as sting operations or vendor registration of kegs, were given g
reater \par
}\plain \fs20 weight. States requiring responsible hospitality training for se
rvers and \par
}\plain \fs20 management were rated higher, as were States limiting reduced_p
rice \par
}\plain \fs20 promotions such as "happy hours" and other irresponsible marketi
ng \par
}\plain \fs20 practices. Support for designated driver or safe ride programs a
lso earned \par
}\plain \fs20 points. \par
}\plain \fs20 6. Legislation. Driving under the influence of alcohol or
other drugs \par
}\plain \fs20 is considered a crime in virtually every State. The Rating the S
tates (RTS) \par
}\plain \fs20 evaluation gave higher marks to States that had passed priority
legislation \par
}\plain \fs20 such as administrative license revocation, .08 BAC illegal per s
e limit for \par

}{\plain \fs20 adults, and limits on charge reduction and diversion programs (w
 high reduce \par
 }{\plain \fs20 criminal sanctions in return for community service, alcoholism t
 reatment, \par
 }{\plain \fs20 or attendance at alcohol education programs). \par
 }{\plain \fs20 7. Prevention and public awareness. States have a key role
 to play in \par
 }{\plain \fs20 keeping the issue of alcohol__impaired driving on the public age
 nda. The RTS \par
 }{\plain \fs20 evaluation looked for evidence of creative State programs to rea
 ch youth \par
 }{\plain \fs20 and other high_risk populations as well as special campaigns to
 publicize \par
 }{\plain \fs20 antidrunk driving laws and their enforcement. \par
 }{\plain \fs20 8. Youth issues. The minimum drinking age law, now on the
 books in \par
 }{\plain \fs20 all 50 States, is an effective prevention tool for reducing alco
 hol_related \par
 }{\plain \fs20 traffic crashes among youth. A good way to promote compliance wi
 th the age \par
 }{\plain \fs20 21 law is to impose a BAC limit of .00 for minors__that is, a
 policy of \par
 }{\plain \fs20 "zero tolerance" for any measurable amount of alcohol in the bod
 y. Other \par
 }{\plain \fs20 valuable approaches include provisional licensing for drivers yo
 unger than \par
 }{\plain \fs20 18, distinctive and tamper_proof licenses for drivers younger t
 han 21, and \par
 }{\plain \fs20 passage of "use and lose" laws that impose driver's license pena
 lties on \par
 }{\plain \fs20 minors found in possession of alcohol. \par
 }{\plain \fs20 9. Self_sufficiency programs. To create reliable funding
 for \par
 }{\plain \fs20 anti_impaired driving programs, dedicated revenue from a combin
 ation of \par
 }{\plain \fs20 sources is needed. One source of revenue is fines and fees levie
 d against \par
 }{\plain \fs20 convicted impaired drivers. Another potential source is alcohol
 beverage \par
 }{\plain \fs20 taxes. \par
 }{\plain \fs20 10. Innovative programs. Development of new or innovative
 programs \par
 }{\plain \fs20 was seen in the RTS evaluation as a sign of a State's ongoing co
 mmitment to \par
 }{\plain \fs20 finding new solutions to the drunk driving problem. \par
 }{\plain \fs20 11. Victim issues. MADD's top legislative priority in this
 area is to \par
 }{\plain \fs20 establish a "victim bill of rights" to ensure that victims recei
 ve justice \par
 }{\plain \fs20 and equal protection under the law. States with victim impact pa
 nels and \par
 }{\plain \fs20 "victim ombudsman" programs were also given higher ratings. \par

vices \par
 {{\plain \fs20 \par
 {{\plain \fs20 DESCRIPTORS: Mothers Against Drunk Driving__Public relations
 ; Advocates \par
 {{\plain \fs20 for Highway and Auto Safety__Public relations; Drunk driving
 __Prevention; \par
 {{\plain \fs20 *Public* *service* *advertising*__Planning \par
 {{\plain \fs20 SPECIAL FEATURES: illustration; table \par
 {{\plain \fs20 FILE SEGMENT: HI File 149 \par
 {{\plain \fs20 \par
 {{\plain \fs20 \par
 {{\plain \fs20 15/9/25 (Item 8 from file: 88) \par
 {{\plain \fs20 DIALOG(R)File 88:BUSINESS A.R.T.S. \par
 {{\plain \fs20 (c) 1999 The Gale Group. All rts. reserv. \par
 {{\plain \fs20 \par
 {{\plain \fs20 03419755 SUPPLIER NUMBER: 15777438 \par
 {{\plain \fs20 Future cloudy for anti_smoking ads. \par
 {{\plain \fs20 Teinowitz, Ira \par
 {{\plain \fs20 Advertising Age, v65, n33, p43(1) \par
 {{\plain \fs20 August 8, 1994 \par
 {{\plain \fs20 ISSN: 0001_8899 LANGUAGE: English RECORD TYPE: Abstra
 ct \par
 {{\plain \fs20 \par
 {{\plain \fs20 ABSTRACT: Anti_smoking public service TV advertising is on the
 decline. \par
 {{\plain \fs20 Reasons include the ineffectiveness of recent ads, the fact that
 public \par
 {{\plain \fs20 service announcements (PSA) do not appear in useful time slots,
 and the \par
 {{\plain \fs20 public's changing priorities. The Centers for Disease Control (C
 DC) still \par
 {{\plain \fs20 runs ads about secondhand smoke and one targeted to African Amer
 icans, but \par
 {{\plain \fs20 is considering giving up on all such ads. The public is more con
 cerned with \par
 {{\plain \fs20 other issues, such as *AIDS* and crime, and the American Lung As
 sociation \par
 {{\plain \fs20 has not run TV ads since 1988. Some states have used ads with so
 me success, \par
 {{\plain \fs20 and the CDC may borrow California's ads. \par
 {{\plain \fs20 \par
 {{\plain \fs20 DESCRIPTORS: *Public* *service* *advertising*__ *Evaluation*;
 Antismoking \par
 {{\plain \fs20 movement__Advertising \par
 {{\plain \fs20 PRODUCT/INDUSTRY NAMES: 7313200 (TV Advertising); 7310400 (Pub
 lic Sector \par
 {{\plain \fs20 Advertising) \par
 {{\plain \fs20 SIC CODES: 7313 Radio, TV, publisher representatives; 7310 A
 dvertising \par
 {{\plain \fs20 SPECIAL FEATURES: illustration; photograph \par
 {{\plain \fs20 FILE SEGMENT: TI File 148 \par
 {{\plain \fs20 \par
 {{\plain \fs20 \par
 {{\plain \fs20 15/9/26 (Item 9 from file: 88) \par

{{\plain \fs20 DIALOG(R)File 88:BUSINESS A.R.T.S. \par
}}{\plain \fs20 (c) 1999 The Gale Group. All rts. reserv. \par
}}{\plain \fs20 \par
}}{\plain \fs20 03368630 SUPPLIER NUMBER: 15233192 \par
}}{\plain \fs20 Program context, sensation seeking, and attention to televised a
nti_drug \par
}}{\plain \fs20 public service announcements. \par
}}{\plain \fs20 Lorch, Elizabeth Puzles; Palmgreen, Philip; Donohew, Lewis; Hel
m, David; \par
}}{\plain \fs20 Baer, Stacey A.; Dsilva, Margaret U. \par
}}{\plain \fs20 Human Communication Research, v20, n3, p390(23) \par
}}{\plai

RECORD TYPE: PRESIDENTIAL (NOTES MAIL)

CREATOR: Alyssa Wilson (CN=Alyssa Wilson/OU=OPD/O=EOP [OPD])

CREATION DATE/TIME:29-JUL-1999 19:54:19.00

SUBJECT: FW: updated PACHA minutes

TO: Elizabeth Baylor (CN=Elizabeth Baylor/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TO: Johanna H. Kiehl (CN=Johanna H. Kiehl/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TO: Jason E. Franklin (CN=Jason E. Franklin/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TO: Marisa B. Van Saanen (CN=Marisa B. Van Saanen/OU=OPD/O=EOP@EOP [OPD])

READ:UNKNOWN

TEXT:

The minutes from the June PACHA meeting are attached to this email from Daniel. Please take a look at them and let me know if you spot any mistakes.

I didn't want to print it out because it's almost 30 pages and the formatting did not copy when I tried to paste it. I hope you all don't mind just reading this as an email attachment and getting back to me about errors.

Thank you.

Alyssa

----- Forwarded by Alyssa Wilson/OPD/EOP on 07/28/99
02:45 PM -----

Daniel C. Montoya
07/28/99 01:03:47 PM
Record Type: Record

To: Alyssa Wilson/OPD/EOP@EOP

cc:

Subject: FW: updated PACHA minutes

Can you review and see if there are any questions you have about the minutes? Please ask your colleagues, Johanna, Marissa, Elizabeth and Jason to review as well. I would like to finalize these by early next week. I would like to also send copies to various people, including the Council chairs, when finalized. Please remind me and we'll talk about who.

Thanks,

dcm

----- Forwarded by Daniel C. Montoya/OPD/EOP on 07/28/99
01:02 PM -----

"Hall, Andrea" <AHall@s-3.com>

07/28/99 11:08:03 AM

Record Type: Record

To: Daniel C. Montoya/OPD/EOP

cc:

Subject: FW: updated PACHA minutes

Daniel,

Attached are the June 1999 PACHA full council minutes with R. Aragon's comments/changes.

Please let me know if there are any more changes or if the minutes can be made final.

Thanks,
Andrea

> -----Original Message-----

> From: Ross, Julia

> Sent: Wednesday, July 28, 1999 10:56 AM

> To: Hall, Andrea

> Subject: updated PACHA minutes

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- winmail.dat

===== ATTACHMENT 1 =====
ATT CREATION TIME/DATE: 0 00:00:00.00

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FullCouncilMeeting June7

8,1999RadissonBarceloHotelWashington,DC MINUTES

Present:

8

(X(#(#(R.ScottHitt,M.D.,ChairStephenN.Abel,D.D.S.TerjeAndersonReginaAragonBarb

araArandaNaranjo,Ph.D.JudithBillings,J.D.CharlesBlackwell,J.D.JerryCade,M.D.Lyn

neM.CooperRabbiJosephA.EdelheitRobertFogelDebraFraserHowzeKathleenGerusPhyllisG

reenbergerNilsaGutierrez,M.D.,M.P.H. B.ThomasHendersonMichaelT.Isbell,J.D.Rona

ldJohnsonAlexandraMaryLevine,M.D.SteveLewMiguelMilanes,M.P.A.HelenH.Miramontes,

R.N.MichaelRankin,M.D.H.AlexanderRobinson,M.B.A.DebbieRunionsSeanSasserBenjamin

Schatz,J.D.DeniseStokesCharlesQuincyTroupeBruceWeniger,M.D.

(5(#(#Xd5 PresentfromONAP: ((X(#(#(SandraThurman,Director X * DanielMontoya,

ExecutiveDirector,PACHA D!+ ToddSummers,DeputyDirectorDanielMontoya,ExecutiveDi

rector,PACHADanielMontoya,ExecutiveDirector,PACHA

0"- 5(#(#X5 Absent: \$X- (X(#(#(NicholasBollmanRobertHattoy '#1 JeremyLandauRev

.AltagraciaPerez

'#3 5(#(#X[5)\$3 h+&5 Monday,June7,1999 MorningGeneralCouncilSession b

CDr.R.ScottHitt,Chair,openedtheThirteenthMeetingofthePresidentialAdvisoryCounci

lonHIV/AIDS(PACHA)at8:30a.m.HeimmediatelyintroducedSandraThurman,DirectoroftheO

fficeofNationalAIDSPolicy(ONAP),asshehadtoleavetheCouncilmeetingearlytoattendth

eWhiteHouseConferenceonMentalHealth. SandraThurman,Director,ONAP,andToddSumme

rs,DeputyDirector,ONAP UpdateonONAPActivities "r > VaccineResearchCenter(

VRC): Ms.Thurmanbeganbyannouncingthededicationofthe 6 DaleandBettyBumpersVaccin

eResearchCenterattheNationalInstitutesofHealth(NIH)onWednesday,June9.ShesaidPre

sidentClintonwasscheduledtoparticipateintheceremony,andnotedthatDr.HaroldVarmus

andDr.AnthonyFauciwouldgivepresentationsonthestateofvaccineresearch. JeffordsKe

nnedyBill: Ms.ThurmansaidtheJeffordsKennedybilllookedlike ago,andthat 8" avotew

aspending.Thebillendedupat\$300million.ShesaidONAPwaspleasedwiththeeffortsofSena

torsJeffordsandKennedy,andcalledthelegislationa noseunderthetentofMedicaidexpan

sion. Medicaid: Ms.ThurmansaidtherehadbeensomeprogressontheMedicaidfront:Maineh

as (#x, submittedandMassachusettsispreparingtosubmitawaiver,andtheFloridaandGeo

rgiawaiversarestilldeveloping.TheDepartmentofHealthandHumanServices(HHS)isprovi

dingtechnicalassistancetoanyStateinterestedinawaiver. CongressionalBlackCaucus(

CBC): ONAPhasbeenworkingwiththeCBCTobegina *h%6 dialogueonservingcommunitiesofc

olor.Aroundofmeetingsisscheduledtobeginthisweek. +&8 U.S.ConferenceofMayors: D

uringtheweekendofJune1213,ONAPwillmeetwiththeU.S. ConferenceofMayorstodiscussu

rbanissuesandHIV/AIDS.TwentyoneAIDSCoordinatorswillattendthemeeting,andRyanWhit

ereauthorizationwillbeamongthetopicsaddressed. CentersforDiseaseControlandPreve

ntion(CDC): Mr.Summersreportedthatseveral >

CouncilmembersparticipatedinaMaymeetinginAtlantaonthe KnowYourStatuscampaign,a

ndnotedthatDr.HeleneGayleoftheCDCwouldbegivingtheCouncilanupdateduringthecurren

t Council meeting. The CDC's prevention planning process is underway to assess the agency's priorities for HIV prevention funding. Mr. Summers said ONA P encouraged CDC, and CDC agreed, to include community group participation in that assessment. A working group of CDC's Community Advisory Board will look at priorities drafted by CDC, and will analyze what the agency is doing with the \$640 million allocation. There has been considerable discussion of this issue at CDC, the Office of Management and Budget (OMB), and on Capitol Hill. ONA P's hope is that the process will lead to development of an overarching plan for reducing HIV infections. Mr. Summers said he did not know the status of the Health Care Worker Guidelines. Regarding the Surveillance Guidelines, he said CDC had hired Larry Gostin of Georgetown University Law School to work on proposed privacy and confidentiality standards. HHS was not satisfied with those standards, so it is currently redrafting and strengthening them. ONA P expects to get a report from HHS on the status of the guidelines soon. ONA P wants to make sure that the confidentiality standards are as strong as the other sections of the draft guidelines. On the full-time equivalent (FTE) issue, Mr. Summers said CDC is in the process of redoing its budget process to clarify where the agency's money is going and how it is being used, particularly with respect to administrative areas.

African/African American Summit: Ms. Thurman reported that the expanded Presidential z+&8 Memo on the state of the epidemic in Africa is still being drafted. ONA P is still getting input from members of the delegation to Africa, but she expects the memo will be released shortly. ONA P staff recently attended the African/African American Summit in Ghana. Reverend Sullivan, a civil rights leader, founded the trade conference 10 years ago, and 5,000 people attended the event this year. This was the first time HIV/AIDS was on the conference agenda. ONA P was excited to participate in the event because ongoing leadership on HIV/AIDS is needed in the religious community and in the African American community. Several Heads of State from Africa participated. Alexander Robinson, who attended the event, said there was significant discussion of the impact of HIV on economic development in Africa. He said the conference had made an impact on African American leaders, including Jesse Jackson and the Editor of Essence magazine, who heard the message about AIDS in Africa and AIDS among African Americans in a new way. Ms. Thurman said Jesse Jackson gave a 5-minute speech on AIDS in Africa before the African American delegation departed from Andrews Air Force Base. She said this was significant because it was a high-profile corporate and political group. Secretary of Labor Alexis Herman also included HIV/AIDS in her speeches for the first time, reflecting a multisectoral approach to the issue within Government. Ms. Thurman said Reverend Sullivan would be arriving in Washington on Tuesday, June 8, to meet with President Clinton for a post-Summit debriefing. Ms. Thurman said she would attend that meeting as well.

State Department, USAID, and Other Agencies: Ms. Thurman said ONA P has been working B"2 with Frank Lloyd, Under Secretary for Global Affairs at the Department of State, to reenergize the State Department's response to the epidemic. ONA P hopes for some movement from within the Department now that Mr. Lloyd is in place. n+&8 Ms. Thurman said she is pleased that the Departments of Commerce and Labor are showing more leadership on HIV/AIDS; both are participating in the White House Working Group on the expanded Presidential Memo. She added that the issue of compulsory licensing continues to percolate, and she looks forward to a dialogue with the Council on this very complex issue. Mr. Summers said the State Department recently released a compendium of U.S. Government programs involved in international AIDS efforts. In conjunction with the release of that document, the Departments sent cables to Heads of Missions directing them to engage their counterparts on the issue of HIV/AIDS, with corresponding talking points. The Department is also reaching out to its efforts in Washington. Mr. Summers recently attended a meeting with 11 or 12 Ambassadors to the United States, Mr. Lloyd, and other representatives from the Department of State and the U.S. Agency for International Development (USAID) to elevate HIV/AIDS as a foreign policy issue. Ms. Thurman stressed that the Administration's HIV/AIDS work on the international front in no way detracts from its work on the domestic front, but that a global perspective is needed.

Sperm Donation: Mr. Summers said the Food and Drug Administration (FDA) had spoken too F& soon on sperm donation regulations. The White House and HHS still need to be briefed on the issue. ONA P is expecting a briefing from Kevin Thurman in the next 2 weeks. Whatever the FDA's policy is, it will be closely scrutinized.

302Bs: Mr. Summers said there is a battle underway on Capitol Hill regarding

ding 302Bs, which 610 are the allocations given by the Appropriations Committee to each of the subcommittees. The allotments that were handed out corresponded to budget caps established in the past and do not correspond to the income currently flowing into the Government. Mr. Summers said the budget cuts that would be required to maintain the established caps would be draconian. The Labor + & HHS cuts would be approximately \$101.2 billion. This could come out of programs like Ryan White, HIV prevention, and research. Needle Exchange: Ms. Thurman reported that bills have been introduced in both the House and Senate to ban indirect funding of any program supporting needle exchange. ONAP is organizing a meeting of private funders to facilitate the dissemination of information on needle exchange through private channels. The meeting is planned for fall. Mr. Summers added that HHS is currently drafting a street level guide on the science of needle exchange. Questions and Comments: (x Responding to a question from Regina Aragon, Ms. Thurman said she did not know whether the President would veto any freestanding legislation banning indirect or direct funding of needle exchange programs, but she committed to speaking to the President about it. Ms. Aragon said final HIV surveillance guidelines issued by CDC later this year should be free of bias. She stated that the Council hopes that ONAP will continue monitoring this issue to ensure that the final draft does not continue to be biased against non-name based reporting systems and that the presentation of the scientific evidence on the deterrent effect of names reporting be presented fairly. Robert Fogel asked about the status of the President's understanding of the need for greater funding on global health issues. Ms. Thurman said the President certainly understands the need for greater funding, and that Administration officials at the highest levels are paying attention to it. She said she should have an idea on appropriations for global health in the next week. Benjamin Schatz asked for an update on the Health Care Worker Guidelines. Dr. Eva Seiler of CDC reported that the guidelines are still at CDC. Dr. Jeffrey Koplan read the draft guidelines (#4) and felt more work needed to be done. He was concerned that there were not enough patient protections, so the guidelines are now being repackaged. Ms. Thurman volunteered to call both + & Kevin Thurman and Dr. Koplan to inquire about a timetable for release of the guidelines. Dr. R. Scott Hitt + PACHA Interim Activities & 11 Dr. Hitt reported on three major activities since the last PACHA meeting. Meeting with Kevin Thurman: The Executive Committee met with Mr. Thurman April 27, ^ during which Committee members focused on several recurring issues. Access to Care: Dr. Hitt emphasized to Mr. Thurman that the Council wants to see a big plan. A

one or two pager from HHS outlining a policy on access to care would indicate some leadership on the issue. Know Your Status Campaign: Dr. Hitt said the Committee made it clear that a big, bold initiative is needed, including CDC as well as the White House and ONAP. If CDC continues to lead on this, the campaign may get lost in the bureaucracy. Leadership from above is needed. Needle Exchange: Dr. Hitt emphasized that new, updated science needs to be disseminated to health experts and legislators across the country. He noted that the opposition has been active in getting its message out, whereas HHS has been silent. A more public role on the part of HHS would have an impact. Surveillance Guidance: The language has not been finalized yet. The Executive Committee is encouraging HHS to state that unique identifiers are as good as names reporting. From the Council's viewpoint, either one would be satisfactory. This is currently a hot issue in California, where a names reporting bill was recently scuttled, and a unique identifier bill is pending. Office of Minority Health (OMH): The Committee urged the Administration to do whatever it + & 8 can to ensure that the \$8 million in OMH funding that was left out of the FY 1999 appropriations bill be restored so that the planned programming can begin. Health Care Worker Guidelines: Mr. Thurman did not know the status of these. & HHS Regional Meetings: These ended in early June. The Council wants a report on any action taken as a result of these meetings. Mr. Thurman said HHS wants to revamp how they look at AIDS within the Department. Overall, Dr. Hitt said the meeting with Mr. Thurman was hard edged. The Executive Committee conveyed the feeling that there is a lack of leadership at HHS. Issues are not moving. The next PACHA Executive Committee meeting with Mr. Thurman is scheduled for July 13. HHS Secretary Donna Shalala has committed to attend the October Council meeting. Mr. Summer emphasized that the meeting with Mr. Thurman did have an impact. Following the meeting, Mr. Thurman

pressed some frustration to several HHS colleagues that the issues identified by the Council were not moving fast enough. Dr. Hitt also said he met with the National Organizations Responding to AIDS (NORA) Executive Committee to discuss coordinating timing and strategies on many of the same issues. NORA is focusing on Ryan White reauthorization. Dr. Hitt asked NORA to keep the Council informed on their activities regarding Ryan White. Letter on Omnibus Appropriations Bill: The Council sent a letter to the President discussing ~\$. the potential negative impact of the bill on publicly funded HIV/AIDS research. Letter on the Early Treatment of HIV Act of 1999: The Council also sent a letter asking the President to support the intent of this legislation. Questions and Comments: Mr. Summers noted that Dr. Paul Gais would be starting June 14 as the NIH agency representative at ONA Pand would be acting in this role for the next 6 months. Mr. Summers and Daniel Montoya noted that Dr. Gary Nabel of the NIH VRC was unable to attend the current Council meeting due to planning for the VRC dedication, but is interested in attending the October meeting. Dr. Hitt directed Mr. Montoya to set up conference calls to meet with Dr. Nabel. Dr. Hitt stressed that Council members need to be educated on the compulsory licensing issue, which the International Subcommittee is taking up in its meeting. He said it is important that members not let a few individuals on the Council sway their opinion on the issue, because it is so complex. He added that the Council needs to address it, though it has not been a priority issue to date. Dr. Hitt said the Council should also consider whether it wants to issue a progress report this fall. He would like input from subcommittee chair on what such a report should look like, whom it should address, and what message it should convey. Mr. Anderson asked Mr. Summers if Ms. Thurman could present a statement from the Council on global health appropriations during her meeting with the President and Reverend Sullivan on June 8. Mr. Summers responded that this would violate White House protocol, but that perhaps Ms. Thurman could mention the Council's position. Afternoon General Council Session %0!0

Access to Care Panel Presentation DE Dr. Hitt introduced the panel of three Government representatives. Ms. Aragon and Thomas *V%6 Henderson served as co-facilitators of the panel. Ms. Aragon, representing the Services h+&8 Subcommittee, began by providing some background on the issue of access to care. She noted that 2 years ago, HHS issued national Guidelines for the Treatment of HIV Disease. These guidelines were hailed by AIDS advocates as a much needed national standard of care. Access to care is one of the Council's six priorities, and Council members have discussed the issue with the President and with Mr. Thurmon many occasions. The Services Subcommittee has identified a number of key issues related to access to care. 1. The critical role of supportive services. Addressing medical care is not enough. Supportive ^ serv ices that facilitate access to care must also be considered. 2. Appropriations. Congressional spending caps threaten access to care. 3. Disparate outcomes across racial and ethnic groups. HIV related health outcomes continue to H vary by race and ethnicity. Eliminating these disparities must remain a priority for the Council and the Administration. 4. Medicaid. The Subcommittee has looked at eligibility criteria. The requirement that someone must be every sick and disabled before qualifying for Medicaid directly contradicts the treatment guidelines, which encourage early access to care. On Medicaid reform, the Jeffords Kennedy bill includes demonstration projects that could help address access to care, and the Pelosi Torricelli legislation would allow States to expand Medicaid. Ms. Aragon said the purpose of the panel discussion was to address an overarching plan to ensure access to the Public Health Service standard of care. What is the baseline for ensuring access to care? What is the plan to reach population that do not currently have access to care? Daniel Mendelson, Office of Management and Budget (#4 M Mr. Mendelson began his presentation by describing several concerns he has as the congressional h+&8 appropriations process moves forward. Regarding the 302B allocations, he noted that the level of funding in the current House Labor HHS bill is down about 18 percent from last year, while the funding level in the Senate appropriations bill is down about 13 percent from last year. The 18 percent decrease on the House side would translate into a cut in Ryan White funding of about \$254 million. HHS has calculated that this would result in a loss of services to 69,000 people. Mr. Mendelson called this a crisis situation, and encouraged the Council to get the message out to the American people. CDC's reduction is about \$118 mill

ion for HIV prevention. Mr. Mendelson said there is a problem within CDC, part of which is perception. The perception problem is that some of the money that should be going into HIV prevention accounts can't be found. What happens is that there are some line items within CDC where it is very clear that the money is going into HIV prevention, and there are other line items where an allocation methodology is applied. In the latter case, some fraction of the activities of local public health officials is attributable to HIV prevention. The CDC has initiated a process to assess this. Mr. Mendelson encouraged the Council to let CDC know that this is a priority. He said the Council needs to make sure that CDC programs have the same political cachet as Ryan White programs. Representatives Coburn, Bliley, and Arme have sent a letter to the General Accounting Office (GAO) requesting a full audit of Federal HIV/AIDS programs. This could appear as a appropriations rider and could compromise funding streams and public perceptions of how money is being spent. Mr. Mendelson mentioned a second potential appropriations rider issue regarding needle exchange. This year's rider would take the position that funds are fungible, prohibiting any recipient of Federal funding from running a needle exchange program. It would deny money to virtually all needle exchange programs currently operating. OMB will oppose this effort, using three arguments. The first is a States rights position, e.g., telling States how to spend their money is wrong. The Administration will try to get States to oppose the rider. Second, OMB will point out that the rider would result in a degradation of services. CDC will identify which services will be disrupted. Finally, OMB will emphasize that a broader ban is directly at odds with the scientific evidence. Regarding the Jeffords Kennedy bill, Mr. Mendelson said OMB is pleased that the demonstration projects will remain intact. It is critical that the bill be brought to the Senate floor. The demonstration projects will be flexible enough to accommodate waivers for States like Maine.

Eric Goosby, M.D., Health Resources and Services Administration

Dr. Goosby stated that bringing HIV positive populations without access to care into a continuum of care has been a leading priority for HHS over the last 2 years and will continue to be a priority over the next 3 years. The Health Resources and Services Administration (HRSA) and CDC are the lead agencies in this effort. HRSA has taken on a motto of "100 percent access and zero percent disparity." There is an ongoing effort to look at the linkages between existing lines of treatment "such as STD clinics, family planning clinics, community health centers, and migrant farm worker health clinics" as reservoirs for patients who need to be identified and brought into the AIDS care delivery system. HRSA is working with the Health Care Financing Administration (HCFA) to develop innovative relationships with State Medicaid programs to embrace people without sources of payment. The data coming out of the recent Chicago and Geneva meetings, and from Johns Hopkins University, indicate that this will be a cost-effective approach in the long run. Dr. Goosby added that HRSA is trying to delineate the factors that contribute to the disparities in longevity, entry into care, development of opportunistic infections, stage of care upon entry into the medical delivery system, and mortality data among minority populations in the United States.

Mike Hash, Health Care Financing Administration

Mr. Hash said HCFA's strategic plan for AIDS has focused on three areas: coordination of services, access to quality care services, and access to care itself. With respect to coordination of services, HCFA has established a working group with HRSA to address ways to maximize coordination between the provision of funds through the Ryan White Act and through Medicaid and Medicare. Last November, HCFA sent a letter to State Medicaid directors urging them to make coordination of service delivery programs a high priority. Accompanying the letter were two publications: one addressing coordination between Medicaid and Title I of the Ryan White Act, and one addressing coordination between State AIDS and Medicaid. In addition, a survey of State Medicaid Directors is being conducted by the AIDS Treatment Network with support from the Henry Kaiser Family Foundation. The survey addresses State Medicaid coverage and eligibility policies as they relate to persons with HIV, e.g., prescription drug coverage, viral load testing, and new models of service delivery. All but four States have completed the survey to date. HCFA is in the process of analyzing the results. On quality of care, HCFA is taking steps to maximize adherence to standards of care. A working group at HHS is looking at ways to operationalize the NIH Treatment Guidelines within Federal and State health care delivery programs. The group has taken steps to disseminate the guidelines: the adult guidelines

were published in the Annals of Medicine, and the pediatric guidelines were published in the Morbidity and Mortality Weekly Report. Both sets of guidelines were also sent to the State Medicaid Director letter. Last September, HCFA published a notice of proposed rulemaking implementing certain provisions of the Balanced Budget Act of 1997 with respect to Medicaid and managed care. In that regulation, HCFA solicited comments on the best strategy for ensuring the highest standards for private managed care plans that wish to contract with States to provide services to Medicaid eligible persons. HCFA is also participating in a maternal and child health program with State public health departments to develop an appropriate initiative to inform HIV positive pregnant women and new mothers of infants at risk for HIV of the significance of starting therapy early. Regarding access to care, HCFA, OMB, and HHS have been working with Maine to flesh out a proposal for an 1115 waiver. The Maine proposal was submitted last November, and Federal meetings with representatives from Maine are continuing. Outside of 1115 waivers, 16 States now have specially targeted home and community based service waivers. Questions and Comments: Mr. Henderson asked the panel to comment on Federal development of a broad plan to ensure 100 percent access to quality care across populations. How do the pieces fit together? What is the timeframe? Dr. Goosby acknowledged the difficulty in reaching populations that are becoming increasingly disenfranchised from the mainstream delivery system. But he said HRSA is looking at a 3 year timeframe in which the agency would start to see decreasing numbers of people out of care, decreasing numbers of seroconversions, etc. The idea is to create across three agencies "HRSA, CDC, and the Substance Abuse and Mental Health Services Administration (SAMHSA)" an expectation of service integration and program coordination, combining treatment and prevention services. He said HRSA needs to start asking grantees to view their role as net of care, so that cooperative relationships are part of the Federal expectation. This would be implemented in the form of guidance expectation and technical assistance delivered by the Federal Government. Dr. Goosby said there has been an acceptance of this vision at the leadership level in all three agencies, but there are some big holes in the reimbursement arena as well as a lack of infrastructure. Some rural and urban areas may prove problematic. This year, there will be three urban demonstration projects coordinated by CDC to integrate services across funding lines. These demonstration should serve as models. There is also an effort underway to integrate across HIV, STD, and TB programs at the local level. This initiative will begin in 20 cities in FY 1999. Mr. Henderson asked Dr. Goosby to quantify the universe of those without access to care. Dr. Goosby said HRSA believes there are about 300,000 HIV positive persons out of care and uninsured. These individuals live predominantly in urban settings, and more than 50 percent are members of minority groups. Pockets in the Native American community, and in San Juan and the Virgin Islands, also pose a challenge in terms of access to care. Mr. Mendelson noted that it is extremely difficult to redirect streams of Federal funding, and trying to do so may threaten one's base of support. He also said the Government's inability to address access to care for HIV positive persons has resulted from the fragmentation of the public health delivery system. The Administration did try to address this with a \$1 billion, 5 year initiative in this year's budget. Mr. Mendelson told the Council that OMB is very open to making changes in the appropriations process and in the President's budget request next year. Terje Anderson commented that he would like to see concrete numbers put forward as part of a broad plan on access to care. Dr. Goosby agreed that high risk populations in each city need to be concretely identified, along with their geographical locations and behavioral patterns. Once these numbers are derived, the ways in which prevention services interface with each population must be addressed. He said HRSA has attempted to move the dialogue in that direction, but it has been difficult. The Federal Government is used to thinking in terms of States and cities, not specific populations. Mr. Henderson stressed that the 300,000 figure needs to be broken down into segments for which strategies to improve access can be implemented. Dr. Stephen A. Belasko asked Dr. Goosby what methodologies are available through Ryan White to carry out quality assessments, and if such assessments could be mandated into HRSA's programs. Dr. Goosby responded that few methodologies are available. HRSA understands this need and in the last year has shifted its focus from technical assistance to quality assurance. The agency recently hired Dr. Michael Johnson to develop a quality assurance capability at HRSA that

it will encompass technical assistance and the AIDS educational training centers. The agency has reorganized its resources to make quality assurance a real priority. Dr. Goosby also noted that the tight administrative caps in Ryan White make it difficult to place a large expectation on grantees to develop a quality assurance capability. The HCSUS study pointed out these areas of deficiency. Mr. Mendelson said it is very difficult to keep outcomes measures current, particularly when treatment is evolving as rapidly as it is for HIV/AIDS. Therefore, he is concerned about tying specific outcomes measures to money. It could have unanticipated consequences. Mr. Hash added that HCFA is working to find ways to hold integrated health care plans accountable for meeting appropriate standards and to demonstrate performance improvement annually. Ms. Stokes questioned the Government's ability to go beyond outcomes measures to define equality of care, assessing factors such as a patient's ability to get appointments with their local Ryan White funded physician. Dr. Goosby said it would be difficult to get to that level of intimacy with a grantee and suggested that the appropriate Federal role in a situation where appropriate care is being provided with good outcomes measures should be discussed.

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Returning to the issue of Ryan White administrative caps, Ms. Aragon said it is important for HRSA to be able to keep and use the 1 percent technical assistance and evaluation that is available through the Ryan White Care Act, rather than have these funds distributed to other HHS programs. This would allow HRSA to provide more robust technical assistance and evaluation. Mr. Summers added that perhaps funds could be obtained through channels that are not designated as HIV or AIDS specific, such as the Minority Health Professions Act. Mr. Robinson emphasized the need for Federal agencies to specifically address the lack of infrastructure in racial and ethnic minority communities. Where the infrastructure exists, HIV/AIDS dollars either are not available or have not been distributed. Rabbi Joseph Edelheit asked the panel if the estimated 69,000 persons drop in the number of HIV positive individuals served as a result of the House budget cut is included in the 300,000 figure of HIV individuals currently out of care. The panel agreed that the 69,000 figure is probably not included in the 300,000 total. Rabbi Edelheit also asked Dr. Goosby to explain HRSA's and CDC's timidity on the Know Your Status campaign in light of HRSA's goal to identify all seropositive individuals. Dr. Goosby responded that the two efforts are linked and that both agencies hope they will complement each other. Mr. Robinson added that it is critical to normalize the idea of being tested. Dr. Hitt said he thinks the 300,000 out of care number is an underestimate, considering that there are about 900,000 HIV positive individuals in the United States, and it is estimated that a third don't know their status. Mr. Fogel asked the panel to explain why various HIV/AIDS initiatives are moving so slowly.

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through the Federal process. Referring specifically to 1115 waivers, Mr. Hash noted that HCFA takes care to consider what kinds of precedents it might be setting and what kinds of unintended consequences might occur as a result of the agency's decisions on waivers. The agency must contend with a variety of statutory restrictions, and budgetary and programmatic concerns, to preserve Medicaid as an entitlement program. Mr. Summers noted that, in the case of 1115 waivers, and specifically the Maine waiver, the process is a dialogue with the State involved, so delays are incurred on the part of both Federal and State negotiators. Lynne Cooper commented that the lack of supportive services is often the biggest obstacle to access to care. Mr. Anderson told the panel that a sense of urgency needs to be instilled in the Administration regarding making life-saving treatments available to HIV positive individuals. Barbara Aranda Naranjo stressed the need for the Administration to expand access to care for the 300,000 individuals living with HIV who are out of care. She noted that these individuals are not having the resources to come to Washington to advocate for themselves, so, it is important for the Council to advocate for and represent their interests. Bringing the discussion to conclusion, Ms. Aragon said one of the most important things mentioned by the panel was the figure of 300,000 out of care individuals. She said this figure should serve as a starting point to establish a plan to broaden access to care, and requested that panel members convey the Council's request for a comprehensive plan to Secretary Shalala. Mr. Mendelson noted that many people in the Administration had worked hard to push the Jeffords-Kennedy bill through, and that the legislation, if passed, would address some of the Council's fundamental concerns.

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Dr. Hitt summed up by saying that leadership and coordination are clearly lacking in each of the agencies represented on the panel.

anel. Here iterated the need for a one page memo from each agency outlining the obstacles to improving access to care and setting forth an overall plan and a proactive approach. Tuesday, June 8

Afternoon General Council Session L Public Comment Wayne Turner, ACTUP, Washington, DC "r Mr. Turner discussed AIDS accountability and the need to strengthen community oversight of Federal AIDS funding. He told the Council about a trial underway in Puerto Rico, where eight people have been charged with embezzling \$2.2 million in Federal AIDS funds. Six of the eight have pleaded guilty, and the Governor of Puerto Rico is implicated in receiving \$250,000 in AIDS funds for his 1992 political campaign. Activists are holding daily vigils outside the courthouse to bring attention to the fact that when AIDS money is stolen, people die. Mr. Turner said the minority leader of the Puerto Rico State Legislature wrote a letter to Secretary Shalala in 1993 outlining irregularities and conflict of interest violations concerning AIDS funds. He posed the question: If HRSA had carried out its oversight function in 1993, how many people might still be alive? He said the situation in Puerto Rico is not an isolated one. Council members need to examine ways to strengthen oversight so that this does not keep happening. ACTUP, the AIDS Accountability Project, and others have called for a GAO performance audit on AIDS funding. He noted that it was Republican Representatives Coburn, Bliley, and Armey who wrote a letter to GAO requesting an audit. h+&8 Mr. Turner offered two proposals: The GAO audit must be carried out, and conflict of interest rules must be enforced. In Washington, DC, for example, only 4 of 60 planning council members are not drawing salaries and are not board members of organizations receiving Federal AIDS money. The planning councils are built in structures for community oversight, and membership requirements need to be adjusted to ensure there is no conflict of interest. Comments: L Helen Miramontes commented that she said the Council should exercise caution in supporting the audit. Mr. Robinson said the Council had been engaged with local agencies to support them in their oversight activities, but the Council could play a greater role in this area. Mr. Anderson noted that the HRSA AIDS Advisory Committee met in May to draft a series of recommendations regarding the reauthorization of the Ryan White Act. One of the recommendations stated that at least 51 percent of the membership of any planning body should be free of any conflict of interest as defined in the law. Debra Fraser Howze urged the Council to be cautious about supporting the performance audit. She noted that, historically, every time a large amount of funding is directed to communities of color, a call for an audit follows. She said the AIDS community should wait to see how things play out in Puerto Rico before laying blame. Dr. Aranda Naranjo and Helen Miramontes also questioned the intent of those behind the audit request. Charles Troupe stressed that the issue of misappropriation of funds is indeed a partisan one, and that the AIDS community should not look to Republicans for sympathy and support. Subcommittee Reports %0!0. Research Subcommittee (#4 Dr. Levine first reminded Mr. Montoya to schedule a conference call with Chris Collins. She noted that Representative Pelosi has sponsored a bill, H.R. 1274, to give a 30 percent tax credit h+&8 to corporations or individuals doing vaccine research for any disease that kills more than one million people worldwide per year. The credit would not apply to those doing research under any Government grant or contract. The subcommittee will seek more information on the bill and will report back to the Council in October. The subcommittee expects to speak to Dr. Nabel via conference call regarding the vaccine research effort at NIH. She said Michael Isbell reported on recent activities of the International AIDS Vaccine Initiative (IAVI). IAVI is focused on moving quickly, trying innovative approaches, and working with underdeveloped nations. The organization is developing international partnerships. One partnership, linking Oxford University in England with the University of Nairobi in Kenya, is focusing on a DNA viral approach to a vaccine. This initiative is expected to move into clinical trials later this year. A second partnership is using Venezuelan equine encephalitis as a vector for testing a vaccine. This initiative joins Venezuela and South Africa and is expected to move into clinical trials in early 2000. IAVI also received a \$25 million donation from Bill Gates, which will be distributed in sums of \$5 million a year. The subcommittee anticipates a conference call with IAVI over the summer to offer the Council assistance. Dr. Judith Auerbach of the Office of AIDS Research at NIH also spoke to the subcommittee about behavioral interventions. The NIH budget for behavior

aland social science research increased by 21 percent this year; the only other increase that was comparable was for vaccines, which rose by 31 percent. The money being spent this year for behavioral interventions research is \$213 million, while the vaccine funding level is \$148 million "a figure that is still very low. NIH is looking at settings as they relate to minority populations, gender, and drug use, and is doing very applied, focused, intervention based research. The subcommittee asked Dr. Auerbach to provide a complete listing of research projects in this area. Dr. Levine noted that Dr. Neal Nathanson should be commended for moving quickly in this direction. NIH's funding priorities in this area are on primary prevention, secondary prevention, and methods. The subcommittee expressed a concern that there is a disconnect between NIH and CDC that impedes the translation of research into actual interventions. Dr. Helene Gayle of CDC agreed that this is a problem and that an administrative mechanism is needed. The subcommittee also stressed that all of the players need to be communicating all of the time. Dr. Gayle said she would take these concerns back to CDC. If nothing happens by the next Council meeting, the subcommittee will make a formal recommendation regarding these issues. The subcommittee scheduled three conference calls for July 21, August 18, and September 15 or 16, all at 10:00 a.m. One call will be with Dr. Nabel, one will be with IAVI, and one will be related to the Pelosi bill. Dr. Hitt asked if there had been any opposition to the Pelosi bill. None of the Council members had heard of any opposition. He also asked about coordination on the vaccine effort. Dr. Levine said the Council should wait to be briefed by Dr. Nabel at the next meeting. Ms. Miramontes noted that the AIDS Vaccine Advocacy Coalition (AVAC) had just released a report called Eight Years and Counting on the vaccine effort. She called AVAC and requested enough copies to reach Council members. Prevention Subcommittee Mr. Robinson reported that the subcommittee discussed CDC efforts related to prevention. First, a CDC Advisory Committee working group is carrying out an inventory of CDC's AIDS specific programs and examining their priorities. Dr. Gayle said this process should be completed by July or August, and a report will be issued. The subcommittee expressed some skepticism about the value of this process, but decided there are some benefits, such as broader access to information. Dr. Gayle said she would update the subcommittee once the process is completed. Since the process is an internal one, the subcommittee is concerned about the objectivity of any resulting recommendations. Mr. Robinson noted that the GAO audit will occur simultaneously, and this has sparked a commitment among some to implement significant changes in CDC's approach. Second, the subcommittee received an update on the Know Your Status campaign. Members were impressed that the CDC has worked to build a week of activities around National Testing Day. However, the cross agency leadership needed to bring a national focus to this campaign is not evident. Therefore, the subcommittee has committed to biweekly meetings with representatives from HHS, CDC, and ONAP to gauge their progress on the campaign, and to coordinate access to and use of resources and contacts. The subcommittee also suggested that a CDC coordinator for the campaign be placed at ONAP. After some discussion, it was decided that Dr. Hitt would send a memo to Mr. Thurman prior to the July 13 meeting recommending placement of an FTE coordinator by CDC at ONAP. Ms. Thurman said Dr. Gayle had been trying to recruit someone to take the position but had not been successful. Dr. Hitt said he would call Dr. Gayle to reinforce the message that the FTE is a priority for the Council. At Dr. Hitt's suggestion, it was decided that Mr. Anderson would send out a general broadcast fax or email to all Council members following each biweekly meeting on the Know Your Status campaign to update everyone on campaign activities. The subcommittee also discussed the Health Care Worker Guidelines. Dr. Gayle said that CDC's review of the guidelines should be complete within a week to 10 days, and the document would then be forwarded to HHS. Dr. Hitt suggested including a request for a timeline on the guidelines in the memo to Mr. Thurman. Mr. Montoya reminded all subcommittee chairs that they should submit in writing any items to be included in the memo to Mr. Thurman prior to the July 13 meeting. Finally, Mr. Robinson mentioned that the update on the 1996 youth report [is this from CDC?] is underway, and is expected to be released by World AIDS Day. The subcommittee also recommended that Dr. Koplan be invited to the October meeting when Secretary Shalala is present. Dr. Hitt suggested that the Council's Executive Committee try to schedule a preliminary meeting with the Secretary and Mr. Thurman before the October meeting. Racial and Ethnic Populations Subcommittee Dr. Nilsa Gutierrez said

the subcommittee decided to organize a presentation to the full Council on the character of the epidemic in Latin communities, to be given at the October meeting. An outline of the presentation was distributed to each Council member. The presentation will address six areas: a general overview of Latino subpopulations; the health status of Latino population; HIV infection trends and problems of underreporting; the particularities of the health care infrastructure in Latino populations; the impact of substance abuse and use in the spread of HIV infection; and the case of the Virgin Islands, where the Government is facing bankruptcy and a rapid degradation of services is occurring. The presentation will take 90 minutes. How the epidemic has affected the gay Latino community, women, and inmates will also be addressed. Dr. Hitt said the presentation was a good idea, but that the Executive Committee needed to rethink logistics and scheduling for the October meeting in order to fit everything in. Ms. Aragon suggested that Latino community leaders be invited to the October meeting for the presentation and a follow-up meeting. Dr. Gutierrez said the subcommittee had also decided to begin to include the Latino perspectives of nongovernmental organizations, immigration coalitions, and public interest attorneys in subcommittee meetings. Aspects of the epidemic in Mexico and Puerto Rico will also be discussed in future subcommittee meetings. Mr. Montoya said he needed to clear logistics for the Latino presentation with the subcommittee. Steve Lew added that the subcommittee would also like to schedule a discussion of Asian and Pacific Islander (API) populations at a future Council meeting. Charles Blackwell noted that the President just signed an executive order on API health care issues, and that the issue might be appropriate for the December Council meeting. He added that the Council may need to revisit a discussion on Native American populations, and that an interim meeting of the subcommittee might be needed. Mr. Montoya said the Council should push for the new Presidential Committee on API to schedule a presentation on HIV/AIDS to highlight not just health issues related to HIV, but education and labor issues as well. International Subcommittee !

* Mr. Anderson reported on several presentations before the subcommittee on the compulsory licensing issue, including those from the Pharmaceutical Research and Manufacturers of America (PhRMA), Medecins Sans Frontieres, the World Bank, the Joint United Nations Programme on HIV/AIDS (UNAIDS), the Health Gap Coalition, and consumer advocates. Mr. Anderson said the ways in which U.S. copyright, patent, and trade policies affect compulsory licensing are not easily understood, and the subcommittee is struggling to understand all of the issues and implications. The subcommittee would like to focus on two tasks: (1) a further examination of current and future U.S. policy on compulsory licensing, which would involve hearing from U.S. Government agencies, and (2) a fact-finding of perspectives from the developing world. A conference call or interim subcommittee meeting with several U.S. Government representatives is tentatively planned for this summer. Mr. Anderson also emphasized that the U.S. Government's response to HIV/AIDS on a global scale needs to be considered as part of the discussion on compulsory licensing. Mr. Anderson said he would distribute copies of the written statement submitted by those presenting before the subcommittee. Mr. Montoya indicated his staff member would be writing a summary of the subcommittee session on compulsory licensing. Mr. Anderson said the subcommittee should be able to make a presentation on compulsory licensing to the full Council by the December meeting. Mr. Montoya said his office would be sending out a lot of information on compulsory licensing, and stressed that each Council member has a responsibility to read the information because the issue is so complex. Mr. Anderson noted that the Council needs to determine what parallels exist with regard to compulsory licensing for other drugs and diseases. Dr. Hitt mentioned that The Village Voice had published an article about Vice President Gore !

* position on compulsory licensing in South Africa. Ms. Thurman said her office had drafted talking points in response to the article. She said the Vice President had not sided with the pharmaceutical industry perse, but had advocated strong patent protection and finding a balance between providing incentives for drug development and protecting profits. Mr. Anderson clarified that South Africa is not currently using compulsory licensing, but a law on the books that would allow it. There is concern in the U.S. trade community about the potential impact of this law. Ms. Thurman noted that there have been times when the United States and other

countries have used compulsory licensing, so the Administration is gathering information and determining what precedent has been set. Mr. Troupe questioned whether pharmaceutical companies are seeking excessive profits in the developing world. Ms. Greenberger commented that pricing, compliance, and patent issues make compulsory licensing a complicated issue "it's not just about profits. Dr. Bruce Weniger said he was surprised at the U.S. Government's aggressiveness in pursuing punitive action (e.g., withdrawing tariff preferences) against South Africa before any licensing had actually occurred. Dr. Hitt noted that generic AZT is available in Canada and costs about 40 percent less than what it costs in the United States. Mr. Andersson noted that this was a parallel trade issue, not a compulsory licensing issue. Dr. Hitt requested that someone on the International Subcommittee draft an executive summary on compulsory licensing as the discussion progresses. Mr. Anderson said most national organizations are really struggling to develop a position on compulsory licensing. UNAIDS is currently working on a position statement, and it would be instructive to look at that statement when it is released. Ms. Thurman said she recently met with Peter Piot of UNAIDS and representatives of the Vice President's office, the Department of Commerce, and the U.S. Trade Representative's office to discuss the Administration's policy on compulsory licensing. The group drafted an initial set of talking points, but a complete policy statement is still being debated.

h+&8 Appropriations Subcommittee Ms. Aragon reported that the subcommittee discussed the FY2000 appropriations process and the budget caps issue that Mr. Mendelson addressed in his presentation to the full Council. She noted that this is a serious situation for both the Labor-HHS bill and the VA-HUD bill. She said House Speaker Dennis Hastert has been talking about transferring some Department of Defense money to HHS. She urged Council members not to be deceived by this move, as the amount of the transfer would be insignificant in comparison to the cut taken to meet the budget caps. This move could end up undermining the AIDS community's advocacy efforts. It is important that advocates make AIDS a squeaky wheel and convey the message that the budget caps are not acceptable. The subcommittee would like an update from the Administration in October on how the \$156 million from the CBC is being spent. The CBC is leading an effort to add \$180 million in new funding for HIV/AIDS to the FY2000 appropriations bill. This funding request would probably include Latinos and other communities of color in addition to the African American community. Ms. Aragon asked that the Appropriations Subcommittee, the Racial and Ethnic Populations Subcommittee, and the International Subcommittee meetings not overlap during the October Council meeting. Mr. Troupe suggested that money lost through the budget caps might be replaced through funding from the National Conference of State Legislatures (NCSL) and the National Black Caucus of State Legislatures (NBCSL). He stressed that the AIDS community needs to start looking at the States for funding rather than depending on the Federal Government. Ms. Aragon agreed that the States are important partners, but emphasized that the magnitude of cuts that could occur if the FY2000 budget caps are sustained would far exceed the capacity of State or local entities, and that critical services could be lost.

h+&8 Services Subcommittee The subcommittee organized Monday's access to care panel presentation. Ms. Aragon said the subcommittee would follow up with the three presenters regarding development of a broad plan to address access to care. In addition, the subcommittee heard a presentation from Nan Roman and Randy Russell of the National AIDS Housing Coalition, which, along with NORA, is requesting a \$60 million increase for the Housing Opportunities for Persons with AIDS (HOPWA) program in FY2000. They discussed the critical role of housing in stabilizing those with HIV and in facilitating access to care. For this reason, the subcommittee will continue to monitor HIV housing issues. The subcommittee also discussed Ryan White reauthorization. Members would like to invite community advocates to provide an informational update on the reauthorization process during the October meeting. Finally, Ms. Aragon said the subcommittee had scheduled its next four or five conference calls.

Other Business F& Mr. Montoya reminded Council members that the next meeting will be held October 4 and 5, 1999. The Executive Committee will hold its first conference call on June 23 at 10:00 a.m. Eastern time. All subcommittee chairs must submit their conference call schedules to Mr. Montoya. Travel reimbursements must be sent in as soon as possible. For the June 23 conference call, it is important that all subcommittee chairs submit to Mr. Montoya their agenda items for the July 13 meeting with Mr. Thurman, requests for

rinterim Council activity before the October meeting, and requests for Council agenda time at the October meeting. Dr. Hitt reiterated that, in his memo to Mr. Thurm, he would mention the FTE for the Know Your Status campaign and a timetable for the Health Care Worker Guidelines. Regarding Council member terms, Dr. Hitt said the vetting process for new members would take a couple of months. Seventeen member terms will end in July, five additional member terms will expire by December, and only two members have expressed a desire to rotate off the Council. It is Dr. Hitt's understanding that vacancies will be filled by random selection. He expects a fair turnover between now and December. The meeting was adjourned at 4:15 p.m. on 10/15/15.

===== END ATTACHMENT 1 =====

===== ATTACHMENT 2 =====
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The following is a HEX DUMP:

===== END ATTACHMENT 2 =====

Clinton Presidential Records Automated Records Management System [EMAIL]

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

Hex Dump file is not in a recognizable format, has been incorrectly decoded or is damaged.

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