Why Educational Strategies are Ineffective

Research has shown that educational interventions such as school-based programs, counter-advertisements, and warning labels simply do not work.\(^1\), \(^2\), \(^3\) These methods do not reduce consumption or alcohol-related harm, nor do they change drinking behavior among youth. Moreover, many programs have not been studied for their effectiveness.

**School-based Education**

- Although school-based alcohol education can increase knowledge about alcohol and improve attitudes in the short run, there is no sustained effect on behavior and no reduction in consumption or alcohol-related harm among youth.\(^4\)

**Social Marketing**

- A systematic review of 15 social marketing programs noted 8 of 13 programs had some significant effects on alcohol use in the short term (up to 12 months), while 2 of 4 programs had some effect over 2 years.\(^5\) Long-term reviews, however, concluded that social marketing programs are ineffective overall.\(^4\)

**Public Information Campaigns**

- Little scientific evidence exists to show that public information campaigns are effective.\(^1\) Because high quality pro-drinking messages appear far more frequently as paid advertisements in the mass media, public service announcements are usually ineffective in reducing alcohol-related harm.\(^2\)

**Counter-advertising**

- Counter-ads against alcohol are infrequently broadcast, of poorer quality due to lack of funding, and placed at unappealing time slots or on unpopular programming, making them generally ineffective.\(^6\) Meanwhile, cable television is now home to 95% of all alcohol ads on national networks.\(^7\)

**Industry-funded Programs**

- Industry-funded programs such as the “drink responsibly” campaign are ineffective in reducing alcohol-related harm. Such messages tend to lead to positive views about alcohol and the alcohol industry among both drinkers and non-drinkers.\(^8\) These industry-funded messages actually serve to advance both industry sales and public relations for alcohol corporations.\(^9\)

**Health Warnings**

- Although warning labels can make an individual want to change his or her drinking patterns\(^10\) and promote conversation about drinking and pregnancy and drunk driving,\(^2\), \(^11\), \(^12\) exposure to warning labels overall does not produce a change in drinking behaviors.\(^1\)

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Parenting Programs

- Research about parenting programs has given them mixed reviews. Although a systematic review of 14 parenting programs noted some reductions in alcohol use in 6 of the programs, the same study noted that 3 of the programs reported increases of alcohol use among youth after the interventions. Overall, there is not sufficient evidence to show that parenting programs are effective in reducing consumption rates or alcohol-related harm, or changing drinking behavior among youth.

**Bottom Line:** The scientific evidence available (along with rising levels of alcohol problems) tells us that educational programs have been a dismal failure. Thus, we must re-evaluate the rationale of alcohol education programs. In contrast, research continues to demonstrate that the most effective evidence-based policies to reduce alcohol-related harm include increasing alcohol taxes and prices, decreasing alcohol availability, and restricting alcohol advertising.

References