

An international campaign to raise awareness of the risks of drinking in pregnancy

Commentary

Abstract

Prenatal exposure to alcohol is a major cause of birth defects and developmental disorders around the world. Prevention is a complex issue, with one factor being poor understanding of the risks of drinking during pregnancy. Awareness campaigns have emerged as an effective tool to increase knowledge of the risks in a manner which embraces the whole public and avoids creating stigma. Unfortunately many organizations lack the expertise or resources to develop, carry out, and evaluate such campaigns. The EUFASD Alliance, in collaboration with partners in health education from the Local Health Authority of Treviso, Italy, and a creative partner, Fabrica, propose to develop a campaign which can be adapted to countries and cultures around the world. A key goal is empowerment of individuals and local groups to make choices and change behaviors. A network of partners around the world is being developed to carry out the campaign. Most importantly, the effectiveness of the campaign will be evaluated in several key centers around the world.

Keywords: awareness, empowerment, alcohol, pregnancy, fetal alcohol spectrum disorder

Why Do We Need an International Campaign?

Alcohol consumption during pregnancy is a major cause of birth defects and developmental disorders internationally (Warren, Hewitt, & Thomas, 2011). The consequence of prenatal exposure to alcohol, called Fetal Alcohol Spectrum Disorder (FASD), affects at least 1% of the population globally (May & Gossage, 2001) and is found in the populations of countries in every region (Hutson, Magri, Gareri, & Koren, 2010; Kim & Park, 2011; O'Leary, Taylor, Zubrick, Kurinczuk, & Bower, 2013; Williams, Nkombo, Nkodia, Leonardson, & Burd, 2013). The World Health Organization has noted the use of alcohol during pregnancy as a key concern (WHO, 2010).

Prevention of FASD is complex (Poole, 2008). One major obstacle to effective prevention of FASD is the widespread lack of awareness of its existence. Raising awareness of the harmful effects of prenatal exposure to alcohol among women of child-bearing age and their communities is a necessary step toward prevention of FASD (Burgoyne,

2005; Masis & May, 1991). Since the first reports of the Fetal Alcohol Syndrome in the literature (Jones, Smith, Ulleland, & Streissguth, 1973; Lemoine, Harousseau, Borteyru, & Menuet, 1968), prevention has been addressed by various and multilevel approaches to raising awareness, especially in populations at risk (Little & Streissguth, 1981; Poole 2008).

As part of a broad and comprehensive strategy to prevent alcohol-related harm, awareness strategies can reinforce the health message among the target audience, increase knowledge, and support behavior change (Burgoyne, 2005). Awareness campaigns are "goal-oriented attempts to positively influence a specific audience, through an organized set of activities that take place in a specific time period. They may focus on use of the media, personal contacts, . . . events . . . or a combination of these three strategies" (Burgoyne, 2005, p. 8). Burgoyne (2005) further identified the goals of awareness campaigns:

to initiate FASD prevention activities; address low levels of knowledge; address myths or misconceptions; help people to make positive choices; help communities gain a universal understanding of FASD; link women to effective supports; address the stigma of alcohol use; encourage community support for pregnant women; create a readiness for and interest in developing local services; address specific learning needs, such as literacy levels, language and cultural context; address the lack of tolerance and insensitivity to people with FASD. (p. 17)

Awareness campaigns have been shown to be effective in increasing awareness about the consequences of prenatal alcohol exposure (Bazzo et al., 2012; Burgoyne, Willet, & Armstrong, 2006; Casiro, Stanwick, Pelech, & Taylor, 1994). However, it is not clear that increased awareness of the risks alone leads to a reduction in alcohol use during pregnancy, or to fewer alcohol-affected births. In fact, many public health campaigns are not evaluated, and the few existing evaluations may be methodologically weak (Abel, 1998; Deshpande et al., 2005; Elliott, Coleman, Suebwongpat, & Norris, 2008; Olsen, Frische, Poulsen, & Kirchheiner, 1989; Thurmeier, Deshpande, Lavack, Agrey, & Cismaru, 2011). Another problem is that smaller organizations often lack the resources and expertise to carry out and evaluate such a campaign. Efforts are often

fragmented, and best practices and resources such as books, flyers, and folders are not often shared among countries. It has been noted that sharing international experiences could help to improve approaches to prevent FASD (Riley et al., 2003).

In an effort to meet some of these needs, in Europe and in other interested areas, the European FASD Alliance—in collaboration with partners in health education from the Local Health Authority of Treviso, Italy, and a creative partner, Fabrica, the communication research center of the Benetton Group (Italy)—is developing an international integrated communication campaign on alcohol and pregnancy, to be launched in 2014. This campaign will apply principles of health marketing to raise awareness among the general population on the issue of alcohol consumption during pregnancy in a culturally sensitive manner and will provide partners with a standardized evaluation of outcomes.

The Aim: Raising awareness for empowerment

The aims of the project are the following:

- To raise awareness of the dangers of drinking during pregnancy among women of child-bearing age and in the general population;
- To spread accurate, research-based information on the risks of using alcohol during pregnancy; and
- To solicit the participation of institutions and private organizations concerned with FASD.

The end goal is to facilitate the process of empowerment in each country involved. According to the World Bank, empowerment “is the process of increasing the capacity of individuals or groups to make choices and to transform those into desired actions and outcomes” (World Bank, 2013). The project is not the objective, it is the beginning—the “springboard” that each partner and participating country can use to begin to empower their citizens to take action on FASD, using low-cost, bottom-up strategies.

This project should create global awareness that will connect entities involved in FASD prevention all around the world and facilitate each country to empower their own communities. The project will make use of synergy at a global level, while respecting the identity of each country and culture involved. By spreading information and creating networks, this project will give individuals and countries more control over their choices, creating solidarity among them and making them aware that none of them is alone. Thus, the central message of the campaign will be, “Drinking during pregnancy harms our children. Let’s raise our voices! Together we can make a difference.” This message will solicit positive action without creating stigma.

Theoretical Background

The project consists of a communication campaign that applies theoretical models of social marketing to health promotion. According to Kotler, Roberto, and Lee (2002), social marketing uses marketing principles and techniques

to affect behavior by reducing barriers and offering greater benefits than current behaviors. Deshpande et al. (2005) identify several necessary steps in social marketing: identifying the target group and the reasons for problem behaviors, understanding what works and what does not, separating the target group into subgroups with similar motivations, proposing solutions for each subgroup, carrying out the campaign, and finally, evaluating the campaign. These principles have seldom been applied in the prevention of FASD, though a recent report by France et al. (2014) shows how marketing techniques can be used to test efficacy of approaches.

What Does The Project Involve?

The target

The primary target group is women of child-bearing age (about 14 to 45 years) and their partners. Secondly, the project will address the general population, including institutions and policymakers. Burgoyne (2005) identifies several reasons to target the general public: the problem is not solely the responsibility of individual women, but affects the entire community; use of alcohol is affected by available services and support and by factors such as socio-economic level; the community needs to understand FASD and support affected families; and finally, awareness is a first step toward acceptance of further health messages.

The strategy

An action of integrated communication will be achieved through the network of partners and stakeholders. The action will be supported by a social marketing project. The strategy will be designed by the promoters, with the collaboration of the consultant, creative and scientific partners, and will be supported financially by one or more sponsors, who will be recruited through systematic fundraising. An action plan will be defined, through which the roles of the various stakeholders will be determined, based on the potential support they can offer to the project.

Awareness campaign

The project consists of a global communication campaign, using several modes of communication (multichannel tools). The project will be developed with the creative partner and will be adaptable to different countries or areas based on the available resources.

The action will

- be of high impact, to activate the buzz of network;
- involve stakeholders in all the countries participating;
- involve the target population actively;
- use social media marketing, exploiting the network effect to spread the message; and
- spread a coherent and univocal health message via all media involved.

Various instruments will be used, including traditional and unconventional communication tools (viral, ambient, guerrilla marketing, etc.), social media, and specific tools of social marketing. The success of a communication

campaign can be improved by utilizing diverse pathways, products, incentives and channels (Atkin & Rice, 2013).

The stakeholder network

To create a wide-ranging and high-impact action, the project makes use of a network of stakeholders, including promoters and the affiliate network, sponsors, and public and private organizations. Our project partnership is composed of individuals, NGOs, governmental and semi-governmental organizations, expert consultants in integrated communication on alcohol and pregnancy, a creative agency with international experience in health communication, sponsors, and a scientific partner for the evaluation.

Key expertise is provided by the team of the successful Mamma Beve Bimbo Beve project, carried out by the Local Health Authority of Treviso, Italy. This project was evaluated with respect to the reception of the message (Bazzo et al., 2012), and the effects of different channels of communication were also measured (Bazzo et al., 2014). A study which examined biomarkers of prenatal exposure in the meconium was carried out shortly after the campaign; results suggest that the project may have been successful in reducing alcohol-exposed births, as there was no measurable amount of exposure detected in newborns in the area around Treviso, in contrast to other areas in Italy, where exposure rates of 4% to 29% were found (Pichini et al., 2012).

Our creative partner in developing the concept of the campaign is Fabrica, the communication research center of Benetton Group (Italy), which has kindly agreed to develop the creative part of the communication on a no-cost basis. Fabrica has experience in international health marketing, having worked with both the World Health Organization and UNICEF.

Currently we have a network of over 50 partner organizations around the world. As the project develops, we will continue to expand the affiliate network, both to improve coverage in the participating countries and to include partners in other countries where we do not yet have a partner.

Fundraising will be carried out at a central level, involving the search for appropriate institutional or corporate sponsors. In addition, crowdfunding will be used as an integral part of the project, to raise both awareness and funds.

Involvement of healthcare professionals

Surveys of health care providers show that many do not feel knowledgeable enough to discuss the issue of alcohol use in pregnancy with clients (Nevin, Parshuram, Nulman, Koren, & Einarson, 2002; Vagnarelli et al., 2011). During this campaign, healthcare professionals will distribute educational materials to women; thus, they will receive the same information. Through the network, supporting materials will be available to professionals in other areas or other countries.

Expected Outcomes

We expect that this project will empower local health authorities and NGOs in their efforts to raise awareness; support nascent organizations and networks in areas where there is currently little or no action on FASD prevention; create a network to share materials and best practices; stimulate positive debate among professionals and the public; provide opportunities to compare and evaluate the effectiveness of techniques in various countries and cultures; create solidarity in communities; and, finally, contribute to effective reduction of alcohol-exposed births. We welcome interest from more organizations who are interested in sharing our goals.

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Stefania Bazzo

European FASD Alliance

Francesco Marini

Local Health Authority of Treviso, Treviso, Veneto Region, Italy

Diane Black

European FASD Alliance