



Designing Anti-Meth Ads: Insights from those who use Methamphetamine

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Abstract

Anti-methamphetamine advertisements typically adopt a shock, fear, and repulse approach with the hopes of scaring people away from using drugs. This approach is typified by *Faces of Meth* and the *Meth Project* campaigns. Unfortunately, such approaches tend to do little in the way of diverting people away from using methamphetamine (meth) and may instead contribute to further stigmatization of those who use. Gaining an understanding of how these ads are perceived by those who use meth can provide insight into more effective strategies to reduce meth use and its harms. We used photo-elicitation interviews with 47 people who used meth (30 former and 17 active). Specifically, we presented participants with images from the *Faces of Meth* and the *Montana Meth Project* campaigns to stimulate discussions about what makes good anti-drug ads. We found that participants think that the ads should reflect the reality of drug use, including harms relating to physical and mental health, legal status, and familial relationships. However, they also believe that the ads should offer hope and facilitate support and redemption. Insights from participants support reintegrative shaming approaches to designing anti-drug ads. Specifically, they suggest that the ads should tell authentic stories of hope to avoid further stigmatizing drug use.

Keyword Anti-drug campaigns · Methamphetamine · Photo-elicitation interviews · Drug use

Anti-meth campaigns such as the *Faces of Meth* (FOM) and *The Meth Project* (TMP) seek to provide horrific portrayals of those who use methamphetamine

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(meth) in an effort to deter people from using (Erceg-Hurn, 2008). Rather than focus on the pharmacological realities of drugs, these ads prioritize extreme physical, mental, and moral changes brought on by chronic meth use (Boyd, 2004; Musto, 1999). These anti-meth campaigns arose in the early 2000s in response to growing public concerns over fears of a growing a meth epidemic. Such campaigns promoted graphic images of those who use meth as succumbing to vice of all types, which helped shape how the public came to recognize “meth heads” (Linnemann et al., 2013). The tough-on-crime perspective that permeates these ads was well-received by police and politicians looking to combat meth use and therefore spread throughout the country.

Public service campaigns aimed at discouraging the use of drugs through scare tactics have been largely ineffective in terms of decreasing people’s use of and intention to use various substances (Werb et al., 2011). In general, solely emphasizing the harms and dangers of drug use is unlikely to be effective in reducing use (Leban & Griffin, 2020; Rosenbaum et al., 1994). In fact, some studies have shown that that exposure to anti-drug use ads may have the opposite effect and instead increase positive attitudes and curiosity toward using some substances like tobacco and marijuana (Czyzewska & Ginsburg, 2007; Orwin et al., 2006; Wagner & Sundar, 2008). Evaluations of the DARE program support this claim (Ennett et al., 1994; West & O’Neal, 2004).

Evaluations of ads specifically targeting meth use have been limited. *The Meth Project’s* own evaluations of their campaign have touted its effectiveness (The Meth Project, 2008). However, the research designs of these evaluation have been criticized and scholars have argued that their findings were blatantly misconstrued (Erceg-Hurn, 2008). Independent evaluations suggest that anti-meth ads do little in the way of curbing meth use (Anderson, 2010; Anderson & Elsea, 2015; Douglass et al., 2017). Anderson and Elsea’s (2015) meta-analysis of evaluations of the campaigns found that in the eight states that adopted anti-meth campaigns, meth use did not drop after they were implemented. Anderson (2010) similarly concluded that the *Montana Meth Project* was ineffective in decreasing use rates among high school students in Montana. Results from Douglass et al.’s (2017) survey on perceptions of an Australian anti-meth ad campaign based on a similar logic to *Faces of Meth* and *Montana Meth Project* showed that three quarters of those who had never used meth agreed that viewing these ads made them not want to use the drug. However, among those who had used meth, the ads were ineffective in promoting intentions to stop using and discouraged help-seeking.

In explaining why anti-meth campaigns may be ineffective, some have suggested that the emphasis on fear and disgust may have impeded their success (Halkjelsvik & Rise, 2015). These ads highlight the extreme physical and mental harm of meth use in ways that may read as inauthentic to people who used meth. When asked about their perceptions of anti-meth campaigns, those who used meth said that the ads were so exaggerated that they seemed unreliable (McKenna, 2013) and misrepresented their personal experiences (Douglass et al., 2017). Even young people who did not use meth believed the dramatic and unrealistic portrayals of meth use would be ineffective in deterring them from ever trying the drug. Similarly, Marsh et al. (2017) and Ferestad and Thompson (2017) argued that the emphasis on worst-case scenarios elicited harsh stigmatization, which prompted those who used meth to

distance themselves from the people in the ads. People who used meth did not see themselves as being similar to those portrayed in the ads, and consequently deemed the ads as inauthentic and irrelevant.

Despite the popularity of anti-drug campaigns that rely on scare tactics, there is little evidence that they are effective at curbing drug use (Anderson & Elsea, 2015). Indeed, these campaigns appear to be especially ineffective for those who are already using the drugs in question. Accordingly, our aim is to provide insights from those who use meth about what aspects of these campaigns may be effective at curtailing meth use. To do this we rely on photo-elicitation interviews with 47 people who used meth. Findings suggest that revising these ads to emphasize both the reality of drug use and the hope for recovery may be more effective at deterring those who are already using drugs than current scare only campaigns.

Methods

To explore participants' thoughts about what makes effective anti-meth ads, we rely on data collected from photo-elicitation interviews (PEIs) from three purposive samples of people who used meth (combined $N=47$). The first two samples included people who were living half-way houses in Alabama and who previously manufactured methamphetamine using the one-pot or "shake-and-bake" method (see Deitzer et al., 2019; National Drug Intelligence Center, 2010; Shukla et al., 2012). The first sample included 11 women who were in recovery and living at a faith-based transitional facility for women. We conducted these interviews in June and July 2015. The second sample included 19 men who were also living in a half-way house in Alabama. These interviews were conducted between October and November 2015. At both locations we asked staff members of the half-way houses to make announcements during classes and to post notices that we sought volunteers who were willing to discuss their meth-using experiences. We interviewed participants in private areas in the facilities and audio-recorded them with their permission. Participants were compensated \$20 for completing an interview.

The third sample consisted of 17 people who were actively using meth (12 women and 5 men) and who were living in rural or small towns in north Alabama at the time of the interviews. We conducted the interviews between June and December 2015. To locate these individuals, we relied on a recruiter from the area who had personal contacts with people who use meth. We provided participants with a \$30 Visa gift card for completing the interview. The interviews took place in parks, restaurants, or in the recruiter's or participants' homes. Interviews from all three samples were audio-recorded with participant permission. We obtained Institutional Review Board (IRB) approval from the lead authors' home university. In compliance with this approval, we obtained informed consent for all participants and informed them that the interviews were voluntary and would be kept confidential.

The median age of interviewees was 34 and ranged from 20 to 57. Participants self-identified their race and included 45 White, 1 Black, and 1 Native American. Our samples are comprised of active and former users at varying stages in their use and recovery, men and women of different ages, people who have lived in rural and

in urban areas, and people who used different types of meth (e.g., ice and shake and bake) via different routes of administration (e.g., smoking, snorting, and injecting).

Data were collected through researcher driven PEIs (Copes & Ragland, 2022; Harper, 1986). Specifically, we introduced images from anti-meth campaigns into the interviews to stimulate discussion about the ads and their experiences using meth. Photo elicitation is an interview technique that relies on selecting images to garner reactions, insights, and ideas that may not be accessible using strictly verbal methods (Collier, 1957). The photo kit, which is a collection of images to be used in the interviews, consisted of five images from the FOM and TMP campaigns. We showed participants these images and asked them to share their thoughts on them. We used one image from the FOM campaign (the primary poster from FOM website), which featured a series of before and after mugshots that demonstrated the potential rapid physical deterioration of those using meth. We used four images from TMP campaign. We chose four as to not over-burden participants with too many images and these specific ones because we believed they addressed the alleged emotional, physical, and behavioral changes associated with meth use. Using images in this manner allowed participants to have clear examples of the campaigns rather than having to rely solely on our description of the ads. During this portion of the interview, we asked participants if they had seen these campaigns and whether the images reflected their own experiences using meth or interacting with others who used meth. We asked their thoughts about the effectiveness of these ads for altering their behaviors and about how to improve anti-meth media campaigns.

We recorded all interviews and then transcribed them for analysis. All authors coded each transcript based on the larger questions (e.g., do the campaigns reflect their experiences, are they effective, how would they design an anti-meth ad). We began by coding the first 10 interviews independently and then coming together to discuss the coding to ensure inter-coder reliability. We discussed any differences in coding, came to agreement of how to proceed, and then recoded the initially coded interviews and the next five transcripts. We repeated this process until all transcripts had been coded. After this initial coding, we refined the concepts to create the axial codes that make up the results of the current analysis. Such a style of coding is consistent with standards of qualitative research techniques (Kvale & Brinkmann, 2009; Strauss & Corbin, 2008). We reached theoretical saturation, meaning no new concepts or ideas were being discovered in the interviews (Morse, 1995).

We recognize that the context of the interviews may have shaped how participants responded to questions. First, the interviews were predicated on participants' use of meth. That is, they were selected to participate based on their current or previous use of meth. This may have shaped how they responded to questions and interacted with interviewers. Second, 30 of the participants were in halfway houses at the time of the interviews and 17 were actively using. It is unclear how this may have affected the way people respond to questions. There is evidence that those in recovery programs adopt language of the program when discussing their drug use, which shapes how they talk and think about recovery and drug use (McIntosh & McKeganey, 2000; Webb et al., 2017). For example, the participants who had been in recovery programs were more likely to mention the value of personal testimonies than those who were not. Thus, caution should be taken if generalizing beyond the sample, as findings may be heavily

contingent on the context of the interview setting and the social position of the interviewers and the participants. Nevertheless, we do think that the diverse sample, in terms of use status and use patterns, helps to overcome some of these limitations.

Ineffectiveness of Anti-Meth Ads

Participants thought that the designs of the anti-meth ads were ineffective in reducing meth use, especially for those who were already using. They believed these ads were ineffective for two primary reasons: the ads' lack of realism and because the physiological effects of meth were too strong to overcome with an ad. Participants noted that the portrayal of people who use meth in these ads did not represent their own experiences or those of others they knew (see Marsh et al., 2017). Many noted that most of the people they knew who used meth, including themselves, did not engage in the extreme behaviors commonly depicted in anti-meth ads. Thus, the ads were seen as too far removed from their lives and easily ignored. As Brian said, "There's a lot more people using meth and holding down normal jobs and contributing to society that you would never think? Like, soccer moms and everything." Michael stated, "Honestly, I would say I was a controlled drug addict. I would look at you and say I don't look like that." Such lack of realism in the ads failed to accurately depict the reality of those who used meth. Because the ads portrayed meth users in such stereotypical and dramatic ways, our participants found it easy to discredit them. As Brian expressed, "You kind of laugh at them, you know. You kind of think they're fake too while you're using."

Not only were the exaggerated portrayals laughable, but participants also made the point that the ads' messages were particularly ineffective for someone in the throes of a meth habit. Zach spoke about the grasp that meth had on him. Gesturing to a print ad, he explained, "I know when I was on it, it just, it didn't really matter. I wanted to get high and it didn't matter if I was going to look like that or not really." Neal recalled that soon after he begun using meth his priorities largely centered on getting high, "I think once you get started, it grabs a hold of you so fast before you know it and you are sure you regret it, but you are not going to stop. I mean, it's the devil, it really is." Both Zach and Neal believed that the allure of meth was so strong that it left users unlikely to seriously consider the messages of overly dramatic anti-meth ads.

Designing Effective Ads: Realism and Hope

Participants overall thought that anti-meth campaigns were ineffective in their current forms, especially for those who were already chronically using meth. Although they expressed skepticism as to whether anti-meth ads could be effective for long time users, they did offer insights into what characteristics of campaigns that they thought may be effective. The participants suggested that for anti-drug campaigns to be effective at curbing drug use among chronic users the ads must (1) highlight the reality of harm caused by chronic drug use and (2) offer hope for recovery by

showing support and emphasizing the possibility of redemption. Participants suggested that expressing both ideas (but especially the hope for recovery) were important for deterring meth use. In discussing both, participants spoke to the importance of prioritizing stories of those who had used meth. They believed that hearing (or seeing, as would be the case with visual ads) people's stories about their drug using careers were important.

Highlight Realistic Harms

When discussing what anti-meth campaigns should address, it was common for participants to express the importance of showing the reality of the harms that prolonged meth use may cause. According to participants, portraying the harms of meth was essential for efforts aiming to curb meth use among those currently using. They believed that being exposed to credible and realistic stories of harm could help turn people toward recovery. As Jobs said, "Something is going to have to hit home with you." The problem with this, according to participants, was that it is hard to convey the reality of harm from meth in ads. This difficulty makes it easy for those who are using to ignore the ads (Marsh et al., 2017). Recognizing the exaggerated portrayals of meth use common in anti-meth campaigns, participants stressed the importance of *realistic* displays of the harms of meth use. The stories should read authentic. They believed that ads should highlight that people who used meth would eventually experience loss and harm because of their use and that these harms present themselves differently; namely, these harms could include damage to one's physical health, relationships, mental wellbeing, and life potential.

For many, stressing the physical harms that can result from using meth long-term was important for an effective ad. A few participants recommended emphasizing the lethal dangers of a life of meth use. Bodean explained, "I'd probably put pictures of how somebody could die from cooking meth like burnt up." Similarly, Zach said:

I'd put a picture of somebody laying on the floor, needle in their arm, dead. I think that's probably one of the biggest fears I had. When I was doing it, scared I was going to die, it was going to kill me.

Although some suggested emphasizing the potential for death, most agreed that portraying physical harms of meth use should go beyond the grotesque and dramatized imagery common in anti-meth ads and instead focus on common health consequences. Depicting physical harms of meth use meant accurately illustrating the physical sickness brought on by using meth. John described his approach to creating an ad he believed would be effective:

All those meth pictures you see on TV, those are all fake. That's all baloney. I'd show what really happens: sick and throwing up. I mean, yeah, you'll get sick. You want to come down so bad after being up for like seven or eight days at one time. I mean you wanna come down so bad. Your stomach be cramping so bad you take you a spoon full of mustard, eat you a spoon full of mustard to make your stomach stop cramping.

Harry and others believed that exposing the daily illnesses and ailments facing people who used meth would resonate with those beginning to use meth and may deter their continued use. Current ads prioritize excessive weight loss, dental decay, and skin sores (Linnemann & Wall, 2013). Participants acknowledged that this does happen to some people, but not all, which makes it easy for those who use meth to ignore such portrayals as not being relevant to themselves. Accordingly, they believed emphasizing the daily pains and discomfort that nearly all experience would be more effective than only focusing on extreme cases.

Of all the potential harms to highlight, our participants argued that harms to social relations (i.e., family and friends) were the most common and important to emphasize. Many painfully recalled the ways their meth use had deteriorated their relationships with those close to them and argued that their choices would have been different had they realized this outcome. When asked what would have been effective for him, Graham said, “Showing my broken family. ‘Cause that’s the main reason I don’t have my kids anymore. I’m gonna probably wake up on Christmas morning in this place [half-way house] instead of with my kids because of it.” In addition to losing custody of children, participants spoke about highlighting the potential of missing valuable moments in the lives of their children as an effective deterrent. Jobs suggested that effective ads should: “Tell them that they are about to miss out on the best parts of their life. You’re fixin’ to piss all that away and all the stuff. You’re gonna lose all you got.” Many participants, like Jobs, regretted missing important events in their child’s lives so they believed emphasizing this would be important. Acknowledging that meth use could leave their relationship with their children irreparable, even years after discontinuing meth use, was important when developing effective ads.

In addition to lost connections with children, participants also believed it would be effective to underscore that a meth habit meant hurting loved ones. As such, in discussing effective ads, Joey provided his personal story for why including such harms may be effective at reducing meth use:

You’re not just hurting you, there could be up to 100 people it could affect if you were to get on meth: family, friends. Make people remember that, the accountability of it. I’m not just doing this to myself, I’m doing it to everybody that cares about me. Because as much as you don’t think it hurts them, it kills them. And that can be a game changer. I’ve never seen my momma cry and man, it ain’t fun. And it’s nothing I won’t never see again. And she just didn’t know why, you know. Why she lost one son. Why she keeps losing me to this. I mean, what did she do? You know it makes them think that, what did I do? They didn’t do anything. They didn’t do anything. My parents, man they’re cool as a fan. But, it’ll sure make them think they did something. That’s the thing, man, if folks knew what doing this would do to their loved ones or people they do love or care about they wouldn’t do this. At least they’d think twice, they’d look up.

Our participants detailed the various harms that their meth use had on relations with their loved ones and believed that portraying these harms would be an effective approach for curbing meth use.

Although difficult to display in visual media, participants also discussed the importance of depicting the harms of meth on people's mental states. They described meth use as causing a host of undesirable mental characteristics, including erratic emotions, paranoia, insecurities, and one's overall transformation into a different person. Bodean recommended illuminating the long-term harm to people's mental states from chronic meth use as a means to prevent use. He explained:

If there was videos of me at certain times, it'd probably make people not want to do meth because when I didn't have it I was completely the bipolar-est person ever. I mean I'd flip out over stupid stuff, you know. I could drop my drink and all of the sudden I'm flipped off the handle mad, you know, and I wasn't even gonna drink it. I just had it in my hand!

Bodean and others described how their mental state was fragile from prolonged meth use, even when they were not using meth at that moment. It was common for them to detail how the unwanted mental effects of meth extended beyond being high on the drug. Cookie explained how after being clean, she still was not the same person she had been prior to using meth:

Before I done the meth I was the most sweetest, caring, playful person with any kid around—loved them. But then after I started, your spunk, your spunk to do things, your drive to do things diminishes. It's like you don't want to do as much of what you used to love to do like you do now. So, while I was on it, I didn't care to do nothing like I should have been doing. when I got off of it, I think the stuff in my brain has eat away to where I can't get that ever back. I'm not too bad with my kids, I mean I do get ill and holler sometimes, but I mean I think that's normal but not all the time it's not normal. I've even asked the doctor to put me on something so I wouldn't holler and scream at my kids. Now I felt like that a bunch of times.

They described the lasting mental impact of meth use as impossible to overcome. Angie said, "You can get over that little bit, that physical stuff, it's all that mental stuff that the meth does to you that destroys your life that you will still be trying to fix years later." Participants believed that portraying the toll that meth use took on a person's mental state was an important way to effectively discourage meth use. Again, they believed that portraying this realistically was key.

Finally, several of the participants thought it was important to address the long-term loss of one's potential from chronic meth use. Participants suggested that emphasizing how meth could contribute to unfulfilled lives, lost employment, and missed opportunities was important. The lack of fulfilled lives could come from formal as well as informal sanctions. For a few, the loss of potential came from time lost in jail or prison cells. When asked what would have been effective in convincing him to discontinue using meth, Jobs recommended showing

what happened to him: “The jail cell, losing everything that I had.” Others, like Michael, also believed it was necessary to underscore the potential loss of freedom involved in being arrested for meth use. He recommended that ads should stress “how long you’re going to be in jail if you get caught.” Former users like Jobs and Michael suggested that efforts seeking to curb meth use focus beyond merely reminding audiences of legal risks of meth use, but also on the realities of imprisonment and loss of freedom.

Others thought it important to emphasize missed opportunities because of simply not showing up due to meth use. Alice recounted missing the custody hearing for her daughter simply because she has too high to show up. Joey highlighted the importance of lost opportunities due to squandering his athletic career. In describing how he would make an ad, John Bob said it was important to show the down and depressing times; times where people feel alone because of all they have missed out on. He suggested this would best be conveyed in video rather than photographs. As he said:

If I made my own [ad], well what I would do is I would show them some of the places that I used to go and some of things that I used to do, but also at the same time I’d show them the bad times, because this is just a picture, I would actually go take video footage of what’s really going on. Seeing someone curled up in a corner.

Provide Hope

Participants were careful to note that simply highlighting harms, even realistically, was unlikely to be effective on its own. They believed that without a hopeful message of recovery, highlighting harms could contribute to furthering the stigma of use. For them, messages of harm could only be effective if presented alongside more hopeful messages of the potential for recovery. They suggested that ads must also convey a sense of hope and promote a clear path to recovery.

Participants thought that the best way to provide hope was to visually show change for the better once they stopped using. Although some meth ads do showcase change through before-and-after visuals of deterioration, participants believed that these ads presented the story of change in an ineffective way. Rather, they suggested that after presenting harms of meth use, it was necessary to depict positive change and redemption. Participants emphasized that getting through to people who use meth requires not merely stressing the terrible impact and harms of meth use, but also highlighting that it can be overcome. Nicky spoke to the importance of presenting a success story, proposing a structure for what she believe would be an effective ad, “Here’s what happened. I’m not dead, I’m better. But, here’s what I was. Here’s what I used to be and here’s what you don’t want to be.” Similarly, Bodean said:

Do a before, after, and after they’re clean because that would show people too. You show them this, then they see where they’re at, people are gonna see that person and that’s where I can be. I can be back to that person because when

you're at this point we give up. We're gonna deny that we're there, but we know we're there and we're looking at that person and we're insecure about ourselves as it is. I know I look like that, but now I look like this. Then they see this person clean. They see the after fact, you know. That's gonna give them actual motivation for them to actually get clean.

For Bodean and others, anti-meth ads would only have a chance at being effective at curbing meth use if they emphasized the potential of recovery. Instead of a “faces of meth” campaign, they promoted a “faces of recovery” campaign. This campaign would focus on the positive changes that can and do occur after recovery.

Further, for the hopeful message to get across, our participants believed that credibility of the story was key. Many believed strongly that the ads should showcase *actual* people who had gotten clean. Nicky said, “I’d put a voice and a human with it [and] get a testimony with that.” Charlie said, “Having people like me and him that look like your mom and dad ... that’s what would really help. Hearing people’s actual stories from them, in person, and seeing that they can look normal. They don’t look like this.” Participants believed that messages of hope would be useless without believable testimonies from those who had firsthand experience with recovery. John Bob noted, “this whole meth campaign stuff, I’m gonna go ahead and tell you, this ain’t gonna scare nobody. It’s like I said, it takes somebody like me, or anybody else that you interviewed and go talk to people about it.” Our participants believed that a hopeful message would only be effective if the potential for change was believable through personal stories. Neal said that personal stories needed to show change in a way the portrayed recovery as attainable, “You know, look at me before, look at me now, you can do it.” Stories told from those who had experienced them personally, rather than from actors, are necessary for credibility. As John Bob emphasized, “True life stories are what will save somebody’s life.”

In contrast to popular portrayals of meth users, participants strongly maintained that non-stigmatizing portrayals of users was essential. They believed that hopeful recovery stories would be fruitless otherwise, and that any promise of redemption would be lost unless users were portrayed in a sympathetic and compassionate light. Bodean suggested, “You know, everybody’s gonna make a mistake, state that.” Similarly, Ronald stressed,

They’re no different than you. They have a heart, they have lungs, they bleed just like you. Ten years ago I thought differently too. I think differently now, they just have a sickness, they have a disease. Just like me, I needed help.

Discussion and Conclusion

The rise in harm from methamphetamine and opioids warrants increased efforts to reduce the risks of illegal drug use. Ideally, this would entail providing accessible and affordable treatment options. Unfortunately, such programs have been slow to be implemented in the United States, especially in rural areas. Instead, government officials tend to promote anti-drug ads as a way to deter people from using drugs. Historically, anti-drug campaigns have focused on messages designed to shock,

scare, and disgust people to promote abstinence. The *Faces of Meth* and the *Meth Project* exemplify this style of messaging. Although they were designed to help people abstain from meth use, it appears that these campaigns have simply contributed to further stigmatization (Ferestad & Thompson, 2017). Reviews of scare campaigns suggest that they have little effect on drug use among the populations they seek to reach (Anderson, 2010; Anderson & Elsea, 2015). One reason for their lack of effectiveness may be that they are seen as out of touch and not representative of those who use the drugs. With such dramatic portrayal of those who use meth it is easy to distance oneself from those in the ad. This distancing allows those using meth to not see themselves in the ads and thus see no reason to seek out help or to quit (Marsh et al., 2017).

Considering the ineffectiveness of current anti-meth campaigns, we sought to understand what may make for more effective ads from the perspective of those who used meth. Accordingly, we used photo-elicitation interviews to get their thoughts on current ads and what they believed would be effective campaigns. Overall, we found that participants were skeptical about the effectiveness of any media campaigns, especially those that are detached from the lived experiences of those who use meth. Despite this skepticism, participants offered insights into how they would design anti-drug campaigns. They believed that effective ads must convey both the realities of chronic meth use—including the broad harms to people’s mental and physical health and loss of relationships—and provide hope for recovery. It was this last part that was key for participants. Simply discussing harms would be consistent with current ineffective ads. What must be done is show that recovery was available and possible.

Some of their suggestions were consistent with ideals promoted by reintegrative shaming theory, which suggests that stigmatization and shaming may be useful only when directed at a given behavior and not the individual themselves (Braithwaite, 1989). Indeed, our participants believed it was necessary to shame the use of meth (by pointing out its harms) but not those who use it. They promoted the idea of being empathetic to those in need of help, while simultaneously not romanticizing the behavior. Their thoughts on the topic suggest that one way to frame these ads was through telling the stories of people who recovered. Again, the emphasis on storytelling is consistent with recent theorizing in the social sciences, including sociology and criminology (Warren & Ryan, 2022). By emphasizing storytelling among those being studied we can better understand their values and expectations. Our participants were critical of snapshots of people’s worst days shown on billboards. Although these images may show people’s rock bottoms, they do not show the path to or away from these experiences. It is true that the *Faces of Meth* campaign does tell a story, but this story is one of increasing deterioration and destruction. It is a negative story that contributes to dehumanization and stigmatization of those who use drugs. Instead, the stories should emphasize not just the path to rock bottom, but also the path to recovery. The stories should emphasize hope. Instead of simply having the *Faces of Meth* be a series of mugshots that are successively worse, our findings suggest that faces of recovery may be more useful. Such transitions do not shy away from the destruction that meth use can cause. Rather than end with the worst

images, these campaigns can begin with the worst images and then end with more positive images—ones of hope and recovery.

Most of the current anti-meth ads are designed primarily to deter those who have not used meth before, rather than aid it assisting current users. It is possible to adjust the messages in these ads to not only persuade people away from starting but also stopping. We recognize the difficulty in designing anti-drug campaigns that are effective enough to prompt quitting among those in the thralls of meth use. The physiological effects of meth use are strong, often too strong for an ad alone to induce change. Nevertheless, if policymakers wish to continue such approaches to drug use in the United States, then we hope that our findings can aid in how such programs are designed. Providing hope, showing paths to recovery, and relaying authentic experiences can help minimize the stigma of drug use and make it easier for people in need to seek help. It is time to move away from dramatic ads designed to scare and repulse to ads that uplift and support.

Declarations

Competing Interests The authors have no competing interests to disclose.

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