

Recovery Month

FINDINGS AND RECOMMENDATIONS

Recovery Month, operated by the Department of Health and Human Services' Substance Abuse and Mental Health Services Administration, is one of four federally funded mental health public awareness campaigns that RAND is evaluating as part of a cross-agency evaluation (funded by the Department of Defense Psychological Health Center of Excellence) aimed at improving the mental health of service members and veterans. A cross-agency evaluation report describes the campaigns' overlapping and unique scope and content, as well as cross-campaign dissemination efforts. Based on the cross-agency evaluation report, this brief about Recovery Month awareness materials is one in a series examining the individual campaigns' messages, the consistency of messaging in their materials, and the tools they use to deliver content to their audiences. Because the results presented here are from an evaluation of the four campaigns' collective reach and impact, they are not intended to serve as a full and comprehensive evaluation of Recovery Month. It should also be noted that this evaluation focuses on the materials designed to raise awareness of Recovery Month and not on the functioning or operations of the campaign itself.

FINDINGS

The following are some key findings about Recovery Month from the RAND research team's content analysis of campaign materials, an analysis of campaign-collected communication metrics, and a panel of experts who assessed the extent to which Recovery Month's content and design align with best practices for mental health public awareness campaigns.

RECOVERY MONTH CAMPAIGN MATERIALS GENERALLY REFLECT THE TARGET AUDIENCE

Of the 209 pieces of Recovery Month content reviewed, 93 percent targeted the general population. A small proportion of materials (5 percent) targeted service members and veterans. Of the four campaigns, Recovery Month had the most material specific to substance use issues (93 percent), and 62 percent of materials were also related to mental health. Consistent with their intended

ABOUT RECOVERY MONTH

Recovery Month's goal is to communicate that people with mental health and substance use issues can recover and that treatment can play a vital role in helping people lead healthy and productive lives. Recovery Month (began in 1989 as Treatment Works! Month) targets the general public—some of whom are service members or veterans—and uses the achievements and successes of individuals in recovery from a mental health or substance use disorder as inspirational material. September is National Recovery Month, but related events occur throughout the year. Recovery Month's overarching message is that recovery emerges from hope, is person-driven and holistic, and unfolds along diverse pathways. Recovery Month distributes its content through media outreach, community events, toolkits and collateral materials (e.g., banners, flyers), public service announcements (PSAs), a talk show on television and radio, and social media.

audience, Recovery Month materials mostly depicted people with no obvious military association, but some materials contained images of service members or veterans.

RECOVERY MONTH STAYS ON MESSAGE

More than 90 percent of Recovery Month materials supported its campaign messages, and materials generally aligned with the messaging of the other three campaigns that were reviewed. Recovery Month emphasizes substance use issues to a greater extent than the other campaigns do.

RECOVERY MONTH CONTENT GENERALLY FOLLOWS BEST PRACTICES

Recovery Month materials generally adhered to several best practices for mental health public awareness campaign design and dissemination, as identified by a panel of experts and a review of the literature. Experts also indicated that Recovery Month used appropriate communication channels for its target audience. However, the experts noted that the target audience was extremely broad, the materials sometimes used technical language and jargon, and the mix of substance use and mental health resources could make it difficult to distinguish between the two.

SOME RECOVERY MONTH MATERIALS DO NOT IDENTIFY INFORMATION SOURCES

About 80 percent of Recovery Month materials failed to clearly cite the source of the information. It is possible that omitting citations is intended to make materials more accessible and appealing to veterans who may seek to avoid mental illness–related labels, but this design choice could make it difficult for users to judge credibility or seek out more information.

RECOVERY MONTH HAS LITTLE WEBSITE TRAFFIC

The Recovery Month website saw nearly 123,800 website sessions in 2015. However, the website is not Recovery Month’s primary means of dissemination; its reach depends largely on its partner organizations hosting their own Recovery Month events and activities.

RECOVERY MONTH DOES LITTLE CROSS-REFERENCING AND CROSS-LINKING

None of the other three campaigns that were evaluated referenced or linked to Recovery Month, though Recovery Month materials occasionally referenced two of the other campaigns. Our overall analysis found numerous missed opportunities for the four campaigns’ websites to link to each other as resources.

RECOVERY MONTH HAS A LIMITED SOCIAL MEDIA PRESENCE

In 2015, about 37,700 people followed Recovery Month on Facebook, 16,780 followed on Twitter, and 7,790 viewed YouTube videos—the lowest numbers of the three campaigns that are active on social media. Recovery Month and one other campaign are the only active users of Twitter.



Twitter

IS USED ONLY BY RECOVERY MONTH AND ONE OTHER CAMPAIGN

RECOVERY MONTH PUBLIC SERVICE ANNOUNCEMENTS REACH A RELATIVELY SMALL AUDIENCE

Recovery Month aired 91,414 radio and 59,835 television PSAs in 2015, for a combined 1.19 billion impressions (the number of audience members who might have been exposed to the PSA). That is a fraction of the 42.9 billion impressions for the campaigns combined in 2015.

RECOMMENDATIONS

The experts recommended several approaches to improve the Recovery Month campaign. See the full report (available at www.rand.org/t/RR1612) for a complete list of recommendations based on the cross-campaign analysis.

- **CONSIDER** tailoring more campaign materials to a more targeted audience.
- **REMOVE** technical language and jargon from campaign materials.
- **CLEARLY** differentiate resources about substance use issues from resources about mental health.
- **CONSIDER** whether campaign materials should provide more source information.
- **CONSIDER** further referencing other campaigns in materials and online.
- **CONSIDER** strengthening Recovery Month’s social media presence to further engage with target audiences.

This brief describes work done in the RAND Forces and Resources Policy Center and documented in *Cross-Agency Evaluation of DoD, VA, and HHS Mental Health Public Awareness Campaigns: Analysis of Campaign Scope, Content, and Reach*, by Joie D. Acosta, Jennifer L. Cerully, Eunice C. Wong, Elizabeth L. Petrun Sayers, Mikhail Zaydman, Lisa S. Meredith, Ilana Blum, Nupur Nanda, Terri Tanielian, Rachel Ross, and Asa Wilks, RR-1612-OSD, 2020 (available at www.rand.org/t/RR1612). To view this brief online, visit www.rand.org/t/RB10007z4. The RAND Corporation is a research organization that develops solutions to public policy challenges to help make communities throughout the world safer and more secure, healthier and more prosperous. RAND is nonprofit, nonpartisan, and committed to the public interest. RAND’s publications do not necessarily reflect the opinions of its research clients and sponsors. RAND® is a registered trademark.

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