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## Project Avatar: Utilizing the Power of Social-Media to Share Stories of Hope

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# **Project Avatar: Utilizing the Power of Social-Media to Share Stories of Hope**

An Undergraduate Honors Thesis

Submitted in Partial fulfillment of University Honors Program Requirements University of  
Nebraska-Lincoln

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## ABSTRACT

Addiction affects everyone and the stigma around addiction and its' recovery makes it exponentially harder for individuals to heal. Today, adolescents are exposed to drugs, alcohol, and related substances from younger ages than ever before and the age of first consumption of these substances is continually decreasing. Further, social media makes it easier than ever for these young people to see substance-related content. Most teens and young adults today check their social media daily—if not hourly. Due to the young age of first exposure to substances coupled with the near-constant exposure that social media provides, addiction is an ever-present problem in college communities.

Rather than only see the negative effects that social media has, we wanted to utilize its ability to spread information quickly to a large audience. With research highlighting that personalized avatars are an effective way to connect with viewers, we are working on a social media initiative to spread hopeful stories of recovery to encourage young people to seek necessary help in times of trouble.

## RESEARCH SYNTHESIS

Citizens of the world have been using drugs since what seems like the beginning of time. Archeologists discovered the presence of “psychotropic plants” and drug use in ancient worlds more than 200 million years old (Saah). It is unclear whether this statistic is comforting or shocking. Regardless of how one might cope with the constant existence and use of substances, it might provide some guidance and understanding of human brains and their addictive properties. These drugs being used in ancient civilizations were used for religious ceremonies, utilizing the healing and medicinal properties, or because it was a generally accepted behavior (Crocq). Regardless of the reason for use, irregular behavior surrounding substance abuse has been described just as long as the presence of the drugs themselves. Alexander the Great’s death was preceded by years of heavy drinking; Aristotle hypothesized the dangers of alcohol with pregnancies; Celsus believed that reliance on alcohol was a disease (Crocq).

While drug use has been around since the beginning of the human world, it has evolved alongside humans. The first medicinal use of drugs dates back hundreds of millions of years, however, the first modern pharmaceutical drug was created just over 200 years ago in 1804 by Friedrich Sertürner: morphine (ATSE). Sertrüner warned people of this highly addictive drug and eventually became addicted himself. By 1895, more than 1 in every 200 American’s was affected by addiction (Smithsonian). Morphine is made from opium, a plant which has always been utilized for drugs. Consequently, the addictive property of morphine has always haunted humankind.

Moving forward, the impact of drugs on people and the language surrounding them grew. Drug use and abuse was normalized throughout the hippie movement in the 1960’s and 1970’s. In the 1970’s the usage of the term *cocaine* skyrocketed (Weeks). Shortly after, the first wave of

the opioid epidemic began in the 1990's (CDC). These drugs were easy to prescribe and even easier to become addicted to. Overdose deaths due to opioids—which included from prescriptions—rose quickly. In 1999 there were about 3,400 deaths caused by overdose. By 2010 this number crossed the 20,000 threshold and continued to rise. In 2017, the amount of opioid-related fatal overdoses was nearly 14 times higher than in 1999 with just under 48,000 deaths (U.S. Department of Health and Human Services). While opioids are highly addictive and dangerous, they aren't the only drug that threaten humanity.

Today, there are more than 19,000 prescription pharmaceutical drugs approved by the Food and Drug Administration (FDA). This number excludes over-the-counter medications and drugs in an unregulated market. The global collection of drugs contains seven categories: Central Nervous System (CNS) Depressants, CNS Stimulants, Hallucinogens, Dissociative Anesthetics, Narcotic Analgesics, Inhalants, and Cannabis (International Association of Chiefs of Police). Even a quick glance at these categories highlights how many drugs are left out of the original 19,000 number. Examples of inhalants include rubber cement and gasoline. These are commonly used, day-to-day items found in almost every common household across America, and not included in the list of regulated and approved drugs released by the FDA.

Clearly drugs have always been and continue to be a problem for humans. In fact, they are only becoming more problematic with time. Over the past 35 years, the average age of first-time consumption of alcohol has decreased to only 12 (Hallfors). There is substantial data supporting a strong correlation between the age of first consumption of alcohol and substance dependence and long-term health risks (SAMHSA). Further, the transition from usual alcohol and marijuana use to other illicit drugs is typically less than three years. Since the average age of first consumption is steadily trending downwards, the likelihood is that more and more teens and

adolescents are developing substance abuse behaviors. Studies are proving that 1 in 4 adolescents that use addictive drugs before the age of 19 will develop an addiction. For those who use addictive substances after the age of 21, the likelihood they become addicted is only 1 in 25. This is over a 20% difference within these two years of development. Further, drug use for 8<sup>th</sup> graders—ages 13-14—increased 61% between 2016 and 2021 (NCDAS). With increased drug use comes increased drug abuse and fatalities due to overdose. By the time students reach the 12<sup>th</sup> grade, half misused a drug at least once and more than half abused alcohol. Further, more and more people aged 12-17 years old are behaving in ways which qualify for the Alcohol Use Disorder (AUD) criteria.

Region and surroundings seem to contribute to the likelihood that an adolescent will grow up at a higher risk to be introduced to substances and develop addiction or substance abuse behaviors. Youth living in western states (Montana, Oregon, Colorado), midwestern states (Wisconsin, Minnesota, Iowa), and northeastern states (Vermont, New Hampshire, Connecticut) typically consume the most alcohol in any given month. Individuals in Montana are the most likely to suffer from AUD while those in Vermont are at the highest risk for Illicit Drug Use Disorder (IDUD) (NCDAS). Knowing that certain teens are more susceptible to these disorders than others highlight the fact that they are preventable. If policies and efforts are made into action, there is potential to decrease future substance abuse rates.

Not only are substances being used more, but the awareness of their use (and misuse) is publicized more radically now than ever. Social media in addition with traditional news broadcasting makes it nearly impossible to escape hearing about the huge party next-door or the latest celebrity's overdose. Social media proves its power with new trends daily and the cult-following they gain. Some examples include the *Tide Pod Challenge*, the *Benadryl Challenge*,

and the *Blackout Challenge* where people—specifically young people—were encouraged to consume Tide Pods (laundry detergent), purposefully overdose on Benadryl to achieve a “high” or hold their breath until they faint respectively. All these trends are extremely dangerous, yet thousands participated because their peers were. Seeing others accomplish them with “success” gave them the permission they needed to attempt themselves.

In 2012, 84% of teens were on any social media platform. Nearly 100% of teenagers in America today use at least one social media platform. The top four platforms (and the percentage of teens which use each) include: YouTube (95%), TikTok (67%), Instagram (62%), and Snapchat (59%) (Atske). Each of these four platforms are used by at least half of teens consistently. The stark contrast between 2012 and more recent years is not how many people use the social networking sites, but in the frequency in which they check and the development of popular content. In 2018 42% were using social media hourly; in 2012 this figure represented the teens who used it at least twice a day (Richter). The difference between checking social media hourly (approximately 15 times per day) and checking it just two or three times could be the difference of seeing substances enough to have the desire to try them, to learn how to gain access to these substances, to be motivated to post about these substances themselves.

Social media has the potential to hasten the spread of negative drug and alcohol related content. This constant accessibility to trends and information is very new. In 2012, a Center of Alcohol and Substance Abuse (CASA) study demonstrated that 40% of teens surveyed saw pictures on a social networking site of their peers’ using drugs or getting drunk (The National Center on Addiction & Substance Abuse). More than just posting pictures of the substances and posting videos of the use of the substances, often young people post what they do while under the influence. Whether this be a “funny” video of a friend doing a dangerous stunt or flirting with

a stranger at the bar, people viewing the content could be motivated to use substances similarly. It not only brings alcohol and substances to the mind of the viewer, but it also makes it seem like everyone else is having more fun; it is a sort of “gateway” to thinking that using these substances is okay. In 2012 when less than 50% of teens were checking their social networks daily and 40% of them saw substance-related content; today nearly 100% of teens check their social media multiple times per day. The 40% figure has changed too. It is estimated that 90% of teens see substance-related content before the age of 15 (12 Keys). The growth of social media is expediting the path to addiction for teens.

The global pandemic was also a contributing factor in teens abusing substances and using social media at higher rates than ever before. In the past, teens were less likely to be exposed to substances because today teens are facing a wider array of stressors and obstacles to overcome. This includes higher levels of stress, poor parenting, lack of support systems, and even COVID-19. Coronavirus left many young people vulnerable and bored with substances when they were not able to attend classes, see friends, and talk with teachers and school counselors. There was also a lack of accountability because school was fully remote. Students could neglect their schoolwork and use substances at home; this use could cause stress and the feeling of “being behind” which is a motivating factor to use a substance. Drugs and alcohol are an easy solution for feeling overwhelmed and wanting to lose the feeling (Turning Point of Tampa). During this pandemic, social media use peaked. Since no one could go outside or socialize in person, people turned to social media for entertainment and to feel connected to loved ones. While it connects people with those they care about, social networks also show suggested posts from users who are strangers and sponsored posts. These intermittent, individually cultivated posts varied in content, but some of them are drug or alcohol related.



The young age of first exposure to drugs and alcohol coupled with the accessibility of social media is sparking more problems with addiction among young people, specifically incoming and current college students. The stereotypes of college campus life are everywhere: movies, TV shows, stories people tell, news articles... Most college campuses are wet campuses, meaning that alcohol is allowed on the campus. Regardless of the wetness of the campus, the environment makes it extremely difficult to abstain from alcohol and students engage in extreme drinking behaviors (Landmark Recovery). There are some factors that do contribute to the drunkenness of a college campus. Out of the ten universities with the highest drinking rates, eight of them are public institutions and all of them are in cities with populations over 100,000 people. In contrast, 6 of the ten campuses that have the lowest drinking rates are in cities with populations with less than 50,000 people. Six of these colleges are private, religious institutions (The Recovery Village Drug and Alcohol Rehab, Bureau, U. S. C., Alcohol.org). Large, public universities have higher rates of drunkenness than smaller, religious colleges. So, students at small, religious institutions are exposed to less substance use and abuse. This lower exposure does not eliminate drugs and alcohol use on such campuses.

Additional contributing factors to drug use and abuse include race and socioeconomic status. White and Hispanic men and women have the highest rates for both illicit drug use and illicit prescription drug use (Taylor & Francis). These groups are followed by Asian, then African American for women and African American, then Asian regarding the use of illicit drugs. Possible socioeconomic influences include smoking cigarettes and alcohol and marijuana use. Typically, adolescents that smoke cigarettes come from a lower socioeconomic background whereas teens who use alcohol and/or marijuana come from a higher socioeconomic background (Caldeira).

Substance use and abuse is particularly problematic on college campuses because of its' extremity and a unique group of stressors that college students face daily. Not only are the attitudes and behaviors towards substance use of university campuses extremely toxic, but the closeness of the students spread these beliefs and behaviors rapidly. Whether students live at home, in dorms, in their Greek house, or in an off campus living environment, hearing about the "crazy party last night" or upcoming weekend plans involving substances is inevitable. With over 50% of college students drinking and 25% using illicit drugs, it is likely that everyone is connected to someone who uses drugs or alcohol consistently (Northeast Addictions Treatment Center). Worse than hearing about substance use, negative peer pressure among students soars in college years. This peer pressure is the worst in the second year of college but remains relatively high all four years (IOSR Journal). The closeness of students on campuses expedites peer pressure; students meet new people constantly and feel the need to impress them or fit in. Other than peer pressure, college students face extreme levels of stress. The largest of which is academic stress and adjusting to a completely new world.

Undergraduates face navigating their environment more independently than ever before all while feeling the need to figure out the rest of their lives and beginning such life successfully. For most students, leaving home to attend a university is their first exposure to life without their parents. While relieving to have new freedom, there is an exurbanite amount of stress that comes with this freedom. Students question frequently if they are on the right track and worry about whether their path will lead them to success (Learning Center). There is also pressure on undergraduate students to have the rest of their life figured out. They need to choose a major, take classes and pass them accordingly, and graduate on time with a high grade-point average and a stellar resumé (Saha). On top of the stress they put on themselves, there are outside

demands from family members. Everyone around them wants them to succeed and they feel pressure to make them proud. Getting a degree is extremely expensive. In the last 20 years, the average cost of attendance increased 175%. The the average in-state, public school tuition is reported as \$11,541 for one year at a university (*See 20 years of tuition growth at National Universities*). Feeling pressure to live correctly, balancing expectations from loved ones, and worrying about having enough money to pay for their next semester or having the burden of thousands of dollars of future debt increases the likelihood of binge-drinking and substance abuse for these students.

Substance use in college is cyclical. There are seasons of heavier drinking and partying and times when using drugs seems to slow down. Students typically use substances the most during the first week of a new semester, in exam seasons, and on football weekends (Rimsza). The rates of binge-drinking and substance use are also proportionally higher for those involved in traditional the Greek life system. Typically, Greek houses, specifically fraternities, haze their pledges in the process of becoming official members. The most common form of hazing involves forcing participation in drinking games (*Stophazing*). Almost a quarter of all students in the United States will be involved in a Greek house at some point throughout their college career; many more attend fraternity or sorority related events including parties, philanthropy events, or formals (Unigo). Many students in college—especially those in a Greek house—have a negative relationship with substances and abused drugs or alcohol at some point in their life.

The drugs that are abused the most on college campuses include alcohol, marijuana, stimulants (including nicotine, cocaine, and Adderall), MDMA, and painkillers and opioids (American Addiction Centers). These drugs present extremely dangerous immediate and long-term effects to those who use them. Since the opioid epidemic began in the 1990's, there are

higher dosages of opioids readily available. Moreover, thousands of drugs are laced with synthetic opioids—like fentanyl—which cause thousands of deaths each year (CDC). Not only do individuals risk death or severe damage in the present, but regular (and infrequent) use of drugs also have many short- and long-term effects that could haunt someone for the rest of their life. Oftentimes it is assumed that nothing detrimental can happen from singular use of a substance. This is a false assumption. Though regular use of substances puts individuals at risk more often, first time use can be just as detrimental.

Academic performance and grades are threatened by drug use; friendships are sometimes compromised. Drugs also alter judgement and behaviors. When adolescents are intoxicated, it is possible that dangerous acts are committed including driving under the influence, getting in a fight, or damaging someone else's property. There are significant health risks as well. Often, people who use substances consistently or struggle with addiction also suffer from at least one of the following: lung or heart disease, stroke, cancer, or mental health problems (U.S. Department of Health and Human Services). Similarly to how deciding on a college major has the potential to shape the rest of a student's life, the harm brought on by consistent, occasional, or even scarce substance use could have lifelong impacts.

Though films, television series, and social media make it seem like all college students have the desire to binge drink and use drugs constantly, it is untrue. The statistic for those who choose to drink or use drugs is much more staggering ( $\approx 90\%$  of all college students in the United States) (Prendergast), however, some choose to remain abstinent from such substances. There are many reasons why a person might be sober. Less money is spent, better, more genuine friendships and connections are formed, academic performance improves, and risk for getting in trouble shrinks. Often being sober on a campus is a very difficult feat. One way that sober

students can connect with each other in a campus community is through a local recovery program. Whether students are actively seeking help, are in recovery, or never used substances, it is vital that their problems and concerns are voiced and heard.

Just as race and socioeconomic status affects the likelihood that an individual struggles with addiction, these factors also contribute to the likelihood that an individual will go through a recovery process for addiction or a different mental illness. For example, White and Black or African American individuals are more likely to go through an outpatient recovery program whereas Hispanic and Black/African individuals have a higher likelihood of going through an inpatient recovery program (SAMHSA). In order to speed the process of recovery, it needs to be available to everyone who may need it. With rates of being in recovery being proportionally different among races, this is not the case.

Further, the stigma around mental illness and addiction, though still high, is decreasing, making access to help more affordable and accessible than ever. The federal government is working to create policies and bills to support the growth of recovery programs. In July of 2022, the House of Representatives passed a bi-partisan law that will provide grants to educational institutions to develop and implement programs that reduce or prevent drug and alcohol use (*117th Congress*). Having these resources for individuals on college campuses is vital to see a reduction in substance abuse and an increase in sobriety.

Unfortunately, though they provide support for sobriety and are helpful on the road to recovery from addiction, college recovery programs are scarce and often have extremely limited resources for students in need. In 2014, there were as few as 250,000 students that had ever received treatment for alcohol or any other drug use (*Hazelden Betty Ford*). The total enrollment in American colleges or universities for that same year alone was over 20 million students

(Hanson). The original 250,000 number has increased since 2014, to nearly 850,000 in 2019. This is promising. However, with such growth among sober students reaching out for help on their college campuses, schools need to be well equipped to handle recovery appropriately and provide for those in need. Programs like the federal bi-partisan grant to develop recovery and substance decrease on campus as well as SAMHSA's block grants are aiding in the spread and accessibility of college recovery programs (SAMHSA).

Though many students acknowledge that they may be exhibiting problematic behavior related to their use of drugs and alcohol, many were hesitant to reach out for help. Most students looked to the internet for help, followed by reaching out to a mental health professional or a university staff member. Some sought out a 12-step program (such as Alcoholics Anonymous [AA] or Narcotics Anonymous [NA]), however, not one student mentioned a formal drug or alcohol treatment program (Caldeira). There are many reasons as to why individuals decided not to consider a formal treatment program; the largest barrier lack of access and affordability, and stigma.

Almost a third of individuals questioned shared that they refused to seek help because they knew that they could not financially afford it. Almost a quarter expressed that they did not know where they could go to get help. Many recovery programs are not accessible to people without an excess of money. Approximately 35% of programs do not accept Medicare or Medicaid. Further, even with private or government funded insurance, there are hefty premiums and out-of-pocket charges that need to be covered by the person in recovery (American Addiction Centers, Sunrise House).

Other than financial burden, shame is also a near-constant worry of people struggling with addiction. Many choose not to find assistance for their problem because they feel that

someone in their life would look at them differently and in a poor way. Whether they thought they might have a negative effect on their job, family members would distance from them, or they would be exiled from their community, it was shame and embarrassment that kept them from receiving the help they felt they needed. It is important for individuals who feel vulnerable to have access to healthcare without feeling judged. Making recovery programs available and affordable is vital for those struggling with addiction. Normalizing addiction and recovery and reducing the stigma is also extremely important, and much easier than making recovery programs accessible. Social media has bridged the gap between those seeking help and those providing it by making sober content available at one's fingertips.

Establishing formal recovery programs is a difficult feat, however, universities have plenty of resources to make it possible. Further, providing these aids to young people will have lasting effects in the future. Eradicating and limiting addiction today will likely lead to lower rates of it in the future. College recovery programs are gaining popularity, slowly. In 2017, there were approximately 100 collegiate recovery programs in the country (*Hazelden Betty Ford*); in 2021, 5% of universities had an established program (SAFE Project). With federal funding and more social awareness, formal recovery is growing. Further, popularity of college recovery programs varies by region. The northeast has a higher proportion of schools with formal recovery programs than any other region in the United States. Establishing these programs more clearly will expedite and grow the influence they have on individuals. Students seeking help often look to peers for advice or help. More than half of the students who ultimately seek on-campus help for their substance abuse do so because of the peer support and network. Consequently, the sober-centered peer network grows quickly through word of mouth and campus-wide awareness. Students are nudged towards recovery. Recovery programs also

facilitate conversations between students to share cautionary tales that can discourage binge drinking or substance abuse (*Hazelden Betty Ford*). The overall goal is to reduce the stigma around addiction and recovery; enabling students to confide in one another about their struggles is an essential way to accomplish this.

Not only do college recovery programs benefit those actively pursuing recovery, but they positively impact entire campus communities. Addiction is classified as a mental health issue and many who receive treatment for addiction also meet criteria for another mental illness (U.S. Department of Health and Human Services). Increasing the frequency and availability of college recovery programs will decrease the number of students who leave school due to addiction and other mental illness reasons; universities with recovery programs have a lower graduation rate than the programs do. It is important that universities serve all students to the best of their ability and having a judgement-free, approachable environment is an easy way to accomplish this.

Normalizing recovery is becoming more commonplace, especially due to the positive effects of social media. Especially in recent years, a new sobriety—or “sober curious”—trend is gaining momentum. Being sober curious means that an individual has chosen to explore sobriety without committing to it fully (Nick). 11% of Generation-Z (those born between 1999 and 2013) claim to be sober curious (Gilbert). This trend is becoming more widespread thanks to social networking sites where individuals can share their stories and inspire others to follow suit. Dozens of celebrities and social media influencers share about their sobriety including Blake Lively, Anna Sitar, and Miley Cyrus (Team, E. L. L. E).

These big names speaking about their troubles with addiction normalizes and humanizes struggles that people face daily (Sober Nation). Often, people feel alone with their problems and they feel as though they are the only ones who come across hurdles; seeing their idols overcome



the same obstacles and speak on their struggles provides the inspiration and hope that people need to become sober: “if someone like Demi Lovato went to rehab and made it out and is strong in [their] sobriety, then I can do it too” (Sober Nation). Social media expedites this process. What once would have been said in an interview and published in a magazine weeks later can now be said directly to followers in a live stream or TikTok that reaches millions within minutes. Technology has developed greatly in a way that allows people to freely share and spread sobriety trends, influencing, and providing thousands the courage they needed to get help or get clean.

There are multitudes of ways that content is shared on social media. Some influencers do “get ready with me” style videos where they get ready for their day and talk about what is on their mind while others sit down and have a heart-to-heart with their phone camera. One way that researchers are finding is an efficient way to share stories with an audience is through avatars. Though it may seem silly or weird, they are an informal yet personal way for an influencer to reach their followers. Many can express emotions, communicate, and be customized to even the most minute of details so that the user feels represented in an accurate way. Sometimes, avatars can express the way an individual is feeling in a more efficient and more precise way than the individual themselves (Anderson). For a person, the ability to choose how they want to be seen by the world is liberating. By creating an avatar to tell their story through, they can be their most authentic self and share more freely. Using avatars rather than real people often reduces distraction so the viewer can focus on the content being presented rather than the individual who is presenting. An increase in Avatar-related content across social media has shown positive results in gaining user attention and involvement (FiciliaryApi). More specifically, there has been a rise in avatar-based sober content across social media platforms. People are creating stickers and branding themselves as a sober influencer (Dribbble). Producing this content and

making these designs readily available for the public positively impacts the consumers. Similarly, the way that a celebrity's story can encourage someone to become sober—or at least analyze the potential benefits of sobriety in their own life—seeing other normal people being confident in their sobriety could be the content they needed to take the next steps in their journey (Cumberland Heights).

## METHODOLOGY AND OBJECTIVES

There is an opportunity to utilize avatars to tell stories about recovery from addiction. I was given the chance to join a team that is working on exactly this. The main objective is simple: decrease stigma around addiction and recovery, specifically on a college campus. The process, not quite as easy.

It was decided that we would gather individuals in recovery—ideally college students on campus—to share their story through an interview. The students talk about how they found drugs, why they fell into an addiction, what their lowest moments were, and how they were able to eventually crawl out of their addiction and find recovery. They were asked questions such as “What was it like for you when [event] happened?” and “can you tell me more about your experience with [topic]?”. We wanted the interview to be about them and to get a whole life story. Addiction isn't a momentary struggle. Typically, long-term trauma and a history of stressful situations leads to one's struggle. Also, these questions prompt long, detailed responses. Rather than ask pin-pointed questions that only capture what the interviewer is curious about, they encourage the interviewee to highlight what matters to them in their story. In highly stigmatized topics (such as addiction and recovery), anonymity often encourages honesty (Murdoch). We wanted the students who had the courage to share their story to feel comfortable sharing it in its' entirety and not be afraid of losing connections with those around them.

To preserve the real stories that these students shared and guarantee them the privacy they deserve, we used them as inspiration for avatars. These avatars are visual representations of the stories being told through the interviews. The avatars are designed with the individuals they are representing. Allowing the person whose story is being told to have an opinion in how they will be represented gives the viewer a more complete look at who the person behind the addiction is. Additionally, it gives the interviewee permission to express themselves as they want to be seen. As they talk through their life and what happened to them, the avatars are experiencing those things too. The avatar experiencing these things is not just a software design; the individual was brought in to act out the story as it was happening. What is being seen in the video is portrayed directly by the person who is telling their story. This also helps to connect the interviewee with their story, and the audience with the interviewee. It gives a “full picture” to the audience and shows the realness of each story. The interview audio coupled with the visual story telling caters to multiple types of learners. There are three main types of learners: auditory, visual, and kinesthetic (where 40%, 40%, and 20% of the population are each, respectively). Storytelling without the visual (video) component is a top way of learning for all three types of learners. It allows for auditory learners to focus on the words the storyteller is using while visual learners can picture the story as it is going on and kinesthetic learners feel the emotions being evoked (Boris). Adding in the visual aspect not only solidifies the understanding and ability to digest the story by all types of learners, but it cements it more firmly. Adding a video component makes the story more tangible and more relatable (Boswell). Video posts also garner more engagement and reach. One study showed that the reach for videos was 2.7 times higher than and had 1.9 times engagement compared to non-videos on Facebook (Peters). We included the visual

element in addition to the interviews to capitalize on social medias ability to spread our content and cater the most to the individuals viewing our content.

Once the interview was conducted and the avatar was designed and brought to life, it was necessary to research the reach of our posts. We began by editing the full video to find the most vital parts of the interviews and clipped these into individual snippets. The contents of these posts range from the process creating the avatar to the fully developed story. To reach a large audience, social media was the chosen platform to work with. Because of its expansive network, with luck of the algorithm and research on responses to our posts, they have the potential to have an impact on the entire campus community and outward. The “suggested” or “for you” features that many social media sites offer enable the videos to be viewed by thousands in a matter of hours. Regardless of the virality of the interviews or the success of the complete elimination of stigma around addiction and recovery, our clips are getting exposure. For users of these various social media sites to be viewing and digesting our content makes them think about their personal views on addiction. It also enables them to see a fuller picture than maybe they ever had before. For many people, their knowledge on addiction is limited. Often, they see the current state of the addict’s life and the aftermath of the addiction. Seeing that there was a reason the addiction started and the story behind the individual’s life might help the viewer see the person struggling as more of a human. It also might encourage the viewer to soften their perspective and reduce internal stigma they hold against addiction and recovery.

## RESULTS & FINDINGS

Due to the extensive technology used throughout this process, there are limited results regarding our reach and influence. 90% of all engagement with our social media activity is within the Lincoln, Nebraska community. Our posts average 1895 views on TikTok and 1230

views on Instagram. The likes-to-views ratio is about 2.5% where the average is 4% (BeProfit). While our ratio is smaller than TikTok and Instagram's average, it demonstrates engagement. Knowing that our videos are being shared, viewed, and liked assures us that our word is being spread.

By far, the post most interacted with is one that contains the full video feature; the avatar is acting out the depression he found himself in. The viewer can hear the sadness and trauma in the individual's voice while watching them portray what they were doing in the very moment they are speaking about. Knowing that these videos are the ones that perform the best helps us narrow down and specify our content on this path. Having variety in posts in the future will also be helpful to see how performance changes over time. It is possible that some clip styles we posted in the past that did not perform well might have a stronger reach in the future. It is important that while we cater to those videos that do succeed, we keep our content broad enough to reach a larger audience.

Our activity was much higher in the previous quarters compared to now. While we are processing the next interview, there has been an abrupt decline in engagement. Likes and views alike have decreased by over 100%. In contrast, our following has increased by almost 30%.

These results show promise for the future. They prove that we are reaching community members and have the capacity to grow. Users typically achieve the highest engagement when they post consistently. Ideally, in the future, we will have enough content to post often across all platforms. This ensures the most success for our project and the best chances of destigmatizing addiction.

## DISCUSSION

Addiction affects everyone. Whether an individual struggles themselves, sees a loved one struggle, or has a distant connection elsewhere, at one point in everyone's life they will feel the negative consequences addictions brings. Furthermore, the stigma around addiction makes individuals feel hopeless and fearful to ask for help. This project is especially helpful and applicable in the world because of the ease of social media. Addiction is so much more than "using drugs constantly". Addiction is a story of trauma and hardship; every individual experienced something(s) that spiraled into a disease that they can never really escape. Sharing the idea that every addict has their own story across multiple platforms in a college community can reach a large audience and help shape the minds of young people in the world to look at those struggling with grace and kindness.

Though addiction will never be fully eradicated, if people have open minds to the recovery process, it will aid in the feasibility of asking for help and getting better. Even with all our results and findings being incomplete currently, there is room for vast growth and improvement. Over time, the algorithm will aid us in analyzing how viewers respond to videos and which videos succeed and gain popularity. Further, one of the greatest aspects of social media in the scope of this project is the instant feedback and response system it provides. Viewers that feel inclined—either positively or negatively—can leave comments on the posts to say how they responded to the content that was just presented to them. Further, the change over time in our views-to-likes ratios will help us to see what percentage of people who viewed the content engaged with it. The likes and comments demonstrate meaningful engagement with the content being shared and posted and allow the researchers at hand to move forward accordingly. For example, if trends show that viewers respond the most to stories about why people found

their way into addiction to begin with, we can share more “beginnings of addiction” content and gain more viewership that way.

The ripple effect that sobriety is having on social media will hopefully continue to grow and impact others. The videos that we post will (hopefully) inspire others to create sobriety-related content. Further, rather than just reaching our Lincoln community, our social media accounts could grow to have followers across the country and even the world. Addiction and recovery affect people globally. Battling stigma online allows for larger awareness and hopefully greater long-term reduction. Addiction is inevitable in our society but reducing the stigma around it and giving individuals permission they “need” to find recovery is a highly effective way to decrease the negative effects that addiction has on the world.

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