

Evaluation of the Campaign The Power of No

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1. Preamble

In the Asia-Pacific region, one person is killed in a road crash every 90 seconds, the equivalent of approximately 900 lives lost per day.¹ The Global Burden of Disease study estimates that over 6% of all deaths in Southeast Asia are due to road traffic crashes involving alcohol.² Adolescents and young adults are disproportionately represented in these figures, significantly increasing the burden from the lives and productivity lost. The imperative for reducing the impact of harmful drinking, which includes drink driving and other high-risk behaviors, is reflected in current global health initiatives that include WHO's Global Alcohol Action Plan 2022-2030 and specific targets in the UN Sustainable Development Goals, which aim to create a more equitable, sustainable and healthy global future.

Addressing harmful drinking requires engagement by all sectors of society – governments, civil society, communities, and the private enterprise. Commitment to this shared responsibility is at the heart of the Asia Pacific International Wine and Spirits Alliance's support for the drink drive initiative the *Power of No*. Launched in June 2021, the campaign has been implemented under the leadership of the Automobile Association of Vietnam in collaboration with civil society partners in seven countries,³ each with a high toll from drink driving fatalities and injuries. The campaign harnesses the power and reach of social media to create awareness about drink-driving and to encourage behavior change, particularly among young adults. It builds on the many initiatives around drink-driving implemented across the region over the years, reinforcing their messages and efforts to effect social change.

In late 2023, an independent evaluation of the campaign and its impact was conducted by Social Terrain, experts in monitoring and evaluation, using technology and social media. It was conducted in the target countries through online surveys and focus groups. The findings, elaborated in a comprehensive report [*Hyperlink*], will help to inform the future direction of the *Power of No* and broader engagement around drink driving.

- Findings show a correlation between the campaign and increased awareness in the target population about the risks of drinking and driving, as well as improved ability and willingness to engage when the behavior of others is risky.
- The impact of the *Power of No* clearly builds on drink-driving campaigns and interventions that preceded it, underscoring that, on its own, no single intervention can deliver all desired results. Synergy and reinforcement are critical elements in changing harmful behaviors.
- The evaluation also provides solid evidence about the utility of social media campaigns in building knowledge and in changing attitudes and behavior. It offers a cost-effective intervention channel with broad reach and continuous opportunity for reinforcement.

The *Power of No* demonstrates that significant inroads can be made into reducing harmful drinking through joint action that involves a wide array of stakeholders. Success requires government engagement in setting policy, implementing regulations, and enforcing them. It also relies on the combined efforts of civil society and the private sector not only to support regulation and enforcement, but to also do their part to raise awareness among the general population about the risks of harmful drinking.

¹ WHO Global Status Report on Road Safety 2023. Available at: <https://iris.who.int/bitstream/handle/10665/375016/9789240086517-eng.pdf?>

² Institute for Health Metrics and Evaluation (IHME). Global Health Data Exchange. Available at: <https://ghdx.healthdata.org/>

³ Countries include Cambodia, Indonesia (since 2023), Lao PDR, Malaysia, Philippines, Thailand, and Vietnam.



2. Executive Summary

In the Asia-Pacific region, one person is killed in a road crash every 90 seconds, the equivalent of approximately 900 lives lost per day.⁴ Such dramatic facts have triggered a campaign by the members of APISWA⁵ to educate the public. This campaign is just ending its third year. Helping youth progress from knowledge about the consequences of drinking and driving, through to new attitudes, and on to changes in conduct, this initiative offers many opportunities to promote moderate consumption, as well as to measure progress.

The ‘Power of No’ campaign, is a pilot demonstration of how social media has been harnessed to reduce drunken driving. The present evaluation was commissioned to assess the performance of its first 3 years, highlight the benefits and the limitations of social media campaigns, and make recommendations for future public awareness campaigns. It is based on assessments of survey findings and four in-depth focus group discussions.

The surveys indicate that there has been a growing ability by the target population over 3 years to recognise the effects of drink driving, and a greater willingness to address the behaviour of drivers who seem to be drunk. At the same time significant differences in behaviour exist across countries, in particular because of the availability of alternatives to driving oneself home and also reflecting perceptions and different cultural contexts.

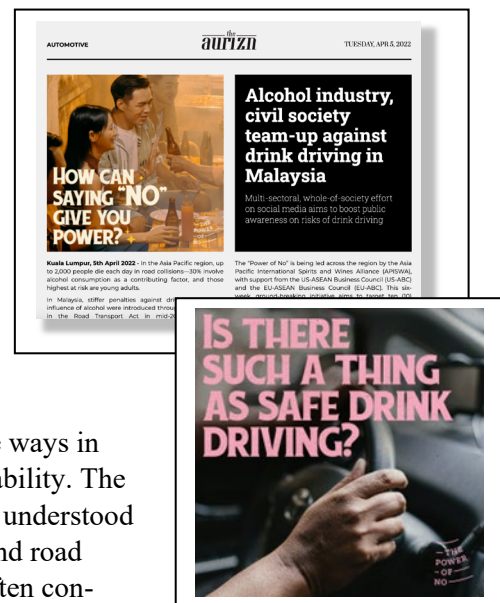
The four Focus Group Discussions indicate that the ways in which the message is presented is key to its acceptability. The Power of No has been able to put forward a clearly understood content in an increasing density of campaigns around road safety. At the same time the shift in behaviour is often constrained by peer pressure, as participants prefer not to stand out. The negative affirmation would deserve to be reviewed.

The evaluation concludes that changes in knowledge, attitudes and behaviour are possible and can continue to improve. An expansion of engagement by the campaign offers the best chance to counter adverse factors that impel ‘drink driving’, as it is known colloquially.

The evaluation formulates three recommendations, with detailed implications for the next phase:

1. Recommendation primarily aimed at APISWA for the continuation of the intervention:

Continue the messaging into new forms of social media and positive messages, and combine



⁴ WHO Global Status Report on Road Safety 2023. Available at: <https://iris.who.int/bitstream/handle/10665/375016/9789240086517-eng.pdf?>

⁵ The Asia Pacific International Spirits and Wines Alliance

informational content with videos, events, and games generated by participants to increase engagement and retain participants.

2. Recommendation primarily aimed at partners of the intervention: Use focus groups and influencers to irrigate communities of like-minded individuals, to follow some groups over time.

3. Recommendation primarily aimed at the follow-on Monitoring and Evaluation of the Intervention: Diversify the methods used in surveys to better understand the answers given by participants.



3. Background

3.1 Defining the Field of Drink Driving

Road safety has been described as a social justice issue because of the heavier toll it takes on certain age and income categories, and the fact that many of the victims are innocent bystanders. Drinking excessive amounts of alcohol and driving ('drink driving') is a specific risk in this area. APISWA⁶ has collected data which shows that driving while under the influence of excessive intake in South-East Asia is the first cause of death for youths aged 5 to 29 years old. It is estimated that between 5% and 35% of all road deaths are reported as alcohol related. The World Health Organisation publishes the fact that alcohol related harm is a causal factor in more than 200 diseases, injuries, and other health conditions.

The spirits and wine industries have over the years recognised the social role of their products. Companies have taken various initiatives to prevent the abuse of alcohol and promote responsible consumption. One of these has been *The Power of No* (PON) which was launched in Southeast Asia in 2022. This is an educational campaign in the broadest sense, intended to change behaviour around drinking and driving ('drink driving'), beginning with public knowledge, and attitudes.

3.2 Intervention Campaigns

There has been considerable debate about the ability of education to change health related behaviour. This section provides a brief overview of how harnessing the power of social media can be useful for health and traffic promotion interventions.

The PON builds on other drink-drive campaigns that have been conducted by the industry, including a number in Southeast Asia. This means that there is mutual reinforcement between campaigns. The impact of interventions on behaviour is not always immediate but involves intermediate steps in progressing from knowledge to changes in conduct. These steps include changes in knowledge, awareness, attitudes, and behaviour, all discrete and valid goals along a common pathway of change. Each one can be used to measure progress.

While not explicitly stated, educational campaigns contain elements that focus on each step of this form of social change. Many health promotion and other interventions use accumulated knowledge and raise awareness as important steps towards behaviour change. Increased awareness appears to be the critical element of their success⁷.

The evolution from knowledge to attitudes to behaviour is naturally affected by social pressure and cultural influence. For this reason, understanding the context of a campaign is key, and careful tailoring and individualization are required for campaigns designed to change behaviour.

⁶ The Asia Pacific International Spirits and Wines Alliance (APISWA) consists of 11 global spirits and wine producers operating across the Asia-Pacific region, including: Bacardi, Beam Suntory, Brown Forman, Campari, Diageo, Edrington, Moët Hennessy, Pernod Ricard, Proximo, Remy Cointreau and William Grant & Sons.

⁷ Baranowski, T., et al., Are Current Health Behavioral Change Models Helpful in Guiding Prevention of Weight Gain Efforts? *Obesity Resh*, 2003. 11(S10): p. 23S-43S.



3.3 The Power of No

The social and ethical challenge of the responsible consumption of alcohol has triggered a multi-year response on the part of a coalition of 22 organisations that have grouped together under the Asia Pacific International Spirits and Wines Alliance (APISWA).

The name and content of the PON initiative was chosen to underline the fact that it is about knowledge, and about attitudinal and behavioural change. APISWA's objectives are formulated as seeking to protect the interests and safety of consumers by ensuring that alcohol is enjoyed in moderation, in ways that are appropriate to the local context, and in line with international best practice.

The PON has been targeting young adults (18-30) across Southeast Asia using Facebook postings between June 2021 and December 2023, building on the value of longevity - following the rule that social media algorithms prioritise pages that already have a following, so that campaigns become more effective over time.

The PON has been implemented under the leadership of the Automobile Association Vietnam (AAV) in collaboration with partners in seven countries⁸. The initiative aims to save lives by reaching youth in rural and urban environments with messages about the risks and strategies of road safety. This is done by encouraging shifts in tacit knowledge and attitudes towards what has been called 'drink driving', in other words avoiding driving vehicles while under the influence of alcohol.

While social media campaigns aimed at changing health-related behaviour are relatively new compared with other mass media channels, there is growing evidence that the approach has several advantages over other more traditional approaches. Social media platforms have a wide reach and allow campaigns to be delivered to a large audience in a cost-effective manner⁹ even with limited resources¹⁰.

Social media platforms have been shown to have a significant social influence, to shape attitudes, and can fundamentally shift perceptions, and opinions¹¹. Another powerful aspect of social media is the ability to leverage the online community in delivering help to those seeking it. Social media can easily deliver what is needed at the right moment in time.

⁸ These countries are: Cambodia, Indonesia (which joined in 2023), Lao, Malaysia, Philippines, Thailand, and Vietnam. The partners, involved in different degrees and times, are: Pernod Ricard Cambodge, CamSafe, International Business Chamber Cambodia, AA Cambodia, RDK Group and Vientiane Rescue 1623, RDK Group, Laos Rugby Federation, EuroCham Malaysia, MIROS, MOT, AA Philippines, ABAPI, Thai Foundation for Responsible Drinking, TABBA (Thai Alcohol Beverage Business Association), UK Embassy in Vietnam, EuroCham WSSC.

⁹ Kietzmann, J.H., et al., Social media? Get serious! Understanding the functional building blocks of social media. *Bus Horiz*, 2011. 54: p. 241-251.

¹⁰ Noar, S.M., A 10-Year Retrospective of Research in Health Mass Media Campaigns: Where Do We Go From Here? *Journal of Health Communication*, 2006. 11(1): p. 21-42. Saha, K., et al., A computational study of mental health awareness campaigns on social media. *Transl Behav Med*, 2019. 9(6): p. 1197-1207.

¹¹ Kaplan, A.M. and M. Haenlein, Users of the world, unite! The challenges and opportunities of social media. *Bus Horiz*, 2010. 53: p. 59-68.

However, evidence also suggests that the use of social media campaigns may require challenging some traditional assumptions about how behaviour change occurs¹². Because of their communal and interactive nature, social media platforms require active engagement by audiences. These can take the form of “shares”, “likes”, and direct audience interaction. A new, circular model for social media-based campaigns has been proposed, in which different steps reinforce one another continually¹³. This is particularly true for social media, which addresses the pressure of the external environment. The underlying foundation remains the interaction between knowledge, awareness building, and behaviour change.

3.4 The Evaluation

The present evaluation was commissioned by APISWA for reasons of public accountability. It has been authored by two independent consultants with experience of public policy evaluation and social media: Mr Jon Wright and Mr Emery Brusset. Dr Marjana Martinic, a policy analyst, has contributed important text around the theory of using social media campaigns, and how to evaluate their effects.

The work was performed over a four-month period at the end of 2023 and included a brief visit to Vietnam. The team received advice from a Reference Group comprising Dr Marjana Martinic, Ms Olivia Widen, Ms Brenda Lee, Ms Linh Nguyen, Ms Lien Huong Bui.

The aim of the study is to assess the effectiveness of The PON campaign in two ways:

- The effectiveness of using social media
- The effectiveness in achieving change in knowledge, attitudes and behaviour.

The evaluation looks at implications for *The PON's* future efforts in seven countries. It also aims to make recommendations for future public awareness campaigns in general.

The approach chosen (see Annex 1 for a detailed description of the methodology) was to engage in a cross-sectional analysis of the public in the seven countries, based on their responses from exposure to the campaign over three successive years. This was done through a survey linked to the PON website.

The phase 3 survey was conducted simultaneously with the evaluation, in local languages in each of the seven countries included in Phase 3 between October and November 2023. It received a total of 1,393 responses, which enabled the evaluation to compare countries with a sufficient degree of confidence. The survey was complemented by the conduct of four Focus Group Discussions held in two separate countries (Philippines and Vietnam). This qualitative data allowed the team to probe some of the reasons behind the answers given to the surveys.

¹² Kite, J., et al., A Model of Social Media Effects in Public Health Communication Campaigns: Systematic Review. *J Med Internet Res*, 2023. 25: p. e46345.

¹³ Ibid

4. Key Findings

4.1 Survey Results

The trend over the three years of surveys shows a noticeable improvement in the number of respondents who correctly identified how alcohol affects driving ability. Fewer individuals also selected the answer in the survey which stated that alcohol does not impact driving ability at all, which suggests a change in opinion on the topic which is consistent with the aims of the campaign.

The survey findings confirm the overall reluctance of the target groups of the PON to both drink and drive and their will to not allow their family and friends to drink and drive.

Most respondents also correctly identified the signs of drunkenness and how drinking affected driving ability, suggesting individuals in the target countries are sufficiently educated on these topics.

The results also suggest that many individuals view drink driving as unacceptable but are not always prepared to make a stand when it involves a friend or a family member who is the drunk driver. People felt uncomfortable getting into a vehicle with a drunk driver, independently of age, and did not agree to do so (particularly the men), but on the other hand it was the older people who felt more able to ask the drivers to actually stop driving (especially pronounced in the case of the women).

Only a quarter of 20- to 30-year-olds said that they would act should the driver be showing signs of being drunk, whereas a much larger proportion of the older respondents (42% of over 30s) strongly supported taking action. Some 42% of the younger demographic said that they could possibly act, appearing to calculate their conduct more on the merits of the situation than on their values. Older people were more self-confident, and more than 50% said that they would opt to be the designated driver. The shift from attitudes to behaviour involves significant social pressures - about which the campaign is highly relevant as it seeks to create a positive model.

Responses also show marked differences in individuals' behaviour towards drink driving between the different countries, and even more so when considering their individual demographics. Older populations are, on average, less likely to drink and drive, and more likely to choose taxis and ridesharing apps, and to have a strategy to get home prior to drinking. Gender also plays a significant role, where a stronger attitude against drink driving can also be seen among women across the target countries.

All respondents in Vietnam scored highest in terms of recognising the signs of drunkenness and how alcohol affects driving ability, whilst Indonesia and Thailand scored lowest. It was also found that Indonesians (of which over 60% were from urban environments) reported that they had fewer alternative options available for getting home after drinking. A significantly lower number of respondents from Vietnam reported that they drove any vehicle (car, motorcycle, e-bike) in the last month while tipsy or drunk, while respondents in Philippines and Malaysia reported the highest rates.

There are many ways to correlate the observations found in the survey data with respect to people's behaviour and opinions on drink driving. The prevalence of the underlying factors responsible for some of the outcomes cannot be identified through the survey data, such as occupational and monetary factors.

There are also possibly some factors that could be responsible for influencing the answers to the survey that cannot be accounted for, such as the reason why many people who clicked on the link decided not to respond to the survey. An overwhelming majority of responses came from urban populations as well, which may be skewing the data in relation to that group.

4.2 Focus Group Discussion Results

The following is an analysis and synthesis of the most salient points made by participants in the four focus group discussions. The questions which were asked to the participants are shown in bold below.

Have you ever seen the ads mention The Power of No for drink driving?

The recognition of the PON campaign among the Focus Group participants was limited, and the message related more frequently to other road safety campaigns in the country, all named after catchy slogans – such as Stay Bright for visual markings for children, or Drive in the Moment about distracted driving while using mobiles in the Philippines.

All the same, the PON is fully aligned with the many messages around exercising one's personal responsibility. It is a consistent part of a broad normative community of messaging. This comes tinged with fear about the consequences of accidents for the participants, and with thoughts about the highest at-risk groups ('stubborn youths' for example) and reflections on how to reach them.

What words first comes to your mind when you see the ads mention The Power of No for drink driving?

The formulation of the name, in particular the use of 'no', was seen as strong and clear. Some of the participants did reflect that it referred to something rather dramatic, such as the use of forbidden substances (in the Philippines there have been campaigns against drug use) or a message related to accidents.

One of the groups in Vietnam emphasised the need to contextualise the information provided by the PON, by supplementing it with facts that are easy to grasp and understand even when in busy traffic (signs on helmets, red lights, T-shirts). Participants in Ho Chi Minh stated that the ads should be re-designed to emphasize the content as well as more words and ways to convey critical information about consequences of drink driving more widely.

One focus group felt quite strongly that the use of the word 'no' carried negative associations with a refusal to join group activities, the refusal to express gratitude by celebrating with others. Some, particularly in Vietnam, felt that if placed in a context where 'saying no' was necessary, they would find it impossible to do. This is due to the expectations around being part of a group, of friends or at work, and about the need to be respectful.

How did this ad influence your thinking/feelings?

The participants felt that their own personal attitudes were in complete harmony with the message contained in the PON. It also chimed with increasingly strict traffic regulations, and with a large number of messages about safe driving. This resonance was particularly strong for the women, whose social events involve lower consumption of alcohol in the two countries where the participants came from.

At the same time, it ran into deeper social dynamics of inclusion and participation in society. As one female participant stated “It makes me feel awkward, or I feel like it's very theoretical and dogmatic but in reality it's impossible, or it makes me feel how it affects other people's thinking. In my opinion, I think that I should have a plan.”

Do you feel now that it is better to take the immediate cost of saying no than risk facing bigger costs afterwards?

There was ambivalence about what to do after drinking, and the ability to recognise whether one had been drinking too much. Many of the female participants described alternatives to driving themselves home, while, as in the survey results, the men seemed to envisage these to a lesser extent and to prefer to drive themselves home. Economic considerations did feature in the reasoning, when discussing what to do about others.

What reasons to incur the immediate costs of saying no? Can the ad be redesigned in future to increase these reasons?

To trigger the conversation the moderators described the newly launched mascot (see Annex 4). An important conversation took place in the Hanoi Focus Group where some of the participants felt that the recourse to one person (here referring to ‘Riley’) who would not drink to take their friends home would not work. This is because of the financial costs which would be incurred by that person having to drive the others, and the impracticality of having one person who would not join into the mood.

Overall, however a simple cost-benefit analysis was used by participants to justify not driving home. The cost of police penalties, or of accidents, was seen to far outweigh the benefits of drink driving (‘like spending money to buy your own safety’). There were also statements of concern for other groups, in particular children (this was particularly marked for the Municipal employees in Philip-pines).

Importantly all participants emphasised the need for the campaign to continue to use negative information about the threat and consequences of drink driving and associate it with the PON (if not in graphic detail, at least in terms of suggesting what would happen). While in some audiences it is considered that young people are tired of messages with gruesome crashes and highly visible script, meant to instil fear and to judge people for drink driving, this still has resonance for others. For example, Vietnamese and Filipino respondents were receptive to negative messages even though they wanted to focus on well-being, mental health, self-care, and messages of positivity. This, they emphasised, should be brought in line with people’s own experiences, lives and situations and impact on family and friends. The findings suggest that culture may play a role in receptiveness.

5. Conclusions & Recommendations

5.1 Conclusions on the Three Phases of the Campaign

Drink driving is emerging from the evaluation as a highly recognised and problematic aspect of the life of youth in the seven countries covered by the campaign. The evidence shows that awareness has increased over the years. The audience is partial to the norms which the PON campaigns convey, in the sense that they agree with the importance of limiting consumption when one is about to drive.

The campaign is taking place in an environment with many other messages around road safety, and as such it is not particularly easy to distinguish from this general messaging, but there is, importantly, no inconsistency – the PON is in line with values of helping others. The use of social media allows it to live in the minds of the target population alongside falling foul of national traffic safety regulations.

At the same time this positive terrain is heavily constrained by unwritten rules around sociability, respect, and honouring others. Peer pressure and the fear of isolation play a significant role. Respondents showed that they often experience a significant difficulty in avoiding the obligations of drinking and driving. This is increased by the perceived unavailability of alternative modes of transport to one's own, which are possibly linked to lack of resources (an aspect the evaluation did not probe).

The shift from knowledge to attitudes is reflected as relatively straightforward. The PON clearly contributes through a well-designed and well targeted content and is endorsed by the audience. A change in behaviour however requires a new approach. To achieve this shift, the PON would need to seek to address more fully group behaviour.

This extends beyond small adjustments around the possible perceptions of negativity of the message, to relying on social media which communicate about the consequences of irresponsibility (health, human, but also financial) as well as the value of new forms of behaviour.

Over three years the PON campaign has succeeded in presenting a difficult message in an attractive way to an audience of millions, and to gain a high degree of engagement among youth across the seven countries. It leads its beneficiaries into practical considerations about how to deal with the challenge of drinking and driving. The awareness and attitudes are coming right up to 'acting on it', as the survey question asked.

Looking into the future however one can see that the campaign would justify going further in the use of practice-based evidence. Three challenges could be overcome:

1. The difficulty in defining the target population samples and in understanding the reasons for respondents to click through into the survey mean that detailed quantitative assessments remain difficult to do.
2. The existence of strong social models of conformity and the psychological importance of belonging make it hard to stand out against group habits of drinking at social events.
3. Population perceptions, peer pressure, have been slightly out of focus for the campaign (possibly in part because of the use of the negative in the name).

Since social media-based campaigns allow for circular reinforcement, it is possible to ensure that the earlier steps influence and reinforce those that come later. Virtual communities can in turn inform the real communities of everyday life. The use of moderation and the creation of visual content would enable messages to be spread by being shared voluntarily by the participants – possibly reinforced through physical messages in the real world. This would expand the ‘pull factor’ around which the second-year campaign was built, to make it a central element of the PON, building interaction and evidence at the same time.

5.2 Recommendations

The evaluation makes three groups of recommendations which could be considered on the basis of the findings described above, which reflect a ‘research by doing’ approach. They are ordered by the degree of change they imply for APISWA, and for external partners.

1. **Recommendation primarily aimed at APISWA for the continuation of the intervention:** Continue the messaging into new forms of social media and positive messages, and combine informational content with videos, events, and games generated by participants to increase engagement and retain participants.
 - A new stream of engagement should be launched which revolves around short videos of events and ideas among participants, which would further increase the attractiveness of the campaign. This would be collected from the public and shared across a wide range of social media, such as Tik Tok and Instagram. Different platforms have different content formats, from images to videos, as messages shared in a variety of different content types have a stronger chance of resonating with a greater proportion of the population. For example, if people look at photos, it would be useful to encourage the search for signs on the street of which people can take pictures. This can be re-imaged to show off the theme of lighting and so to spread the sign further.
 - Promote messages around responsible consumption and the signs of respect and social harmony that this can create. This could include changing the name from a negative to something forward looking, such as ‘Power of a Plan’. This would be designed to dispel the idea that refusing a drink is a discordant behaviour and is in fact better suited to conviviality.
 - Continue to promote the use of games and riddles, possibly avoiding more contentious models important from other regions of the globe, such as mascots. A priority should be given to Thailand and Indonesia, where the need is greatest.
 - Promote messages around raising confidence among younger people to address drink-driving. This could include empowering them to be more self-confident, less prone to social pressures, and more willing to break social norms related towards drink-driving.
 - Promote messages around designated driver initiatives to implement a cultural shift in the target countries, whereby designated drivers can become normative over time.
2. **Recommendation primarily aimed at partners of the intervention:** Use focus groups and influencers to irrigate communities of like-minded individuals, to follow some groups over time.

- Promote the use of focus groups around loosely existing communities, for example in universities, as a way of generating models of attitudes and behaviour that are applicable to the social environments of the target audience.
 - Identify the individuals that are able to influence the attitudes of the target group and ask them to sponsor the campaign.
 - Ask some online communities and focus groups to become an ongoing source of consultation through short surveys and online content, creating the possibility for longitudinal surveys that would reflect the evolution of key sentinel groups over time.
3. **Recommendation primarily aimed at the follow-on Monitoring and Evaluation of the Intervention:** Diversify the methods used in surveys to better understand the answers given by participants.
- Think of deploying related surveys presented in a different context (not under PON but for example as part of road safety), to avoid possible biases in favour of the PON campaign. There may be value in accessing insurance statistics in identifying locations and populations that are at higher risk and building samples on that basis.
 - Ask additional questions to better understand demographics and socioeconomic status of the respondents. to get more insight into barriers to compliance, for example, taking taxis after drinking. It may be useful to ask whether respondents have a car or motorbike or a driving license.
 - Place key questions at the start of the survey questionnaire. Ask how frequently people go out to drink per week, if at all, and the distance travelled to go for a drink. The analysts could choose to end the survey early if certain answers are selected – for example if the person doesn't drink or drive. Ensure that there are questions about whether people had seen the PON ads, or any other named anti drink-driving materials.
 - Longitudinal surveys allow for fewer questions asked in the early surveys and more questions asked in future surveys. Since the size of survey matters, for number scale questions, it is important to reduce the number of options to 1-5 instead of 1-10 (less choice means people need to be more deliberate).

Annex 1: Methodology

The approach used is a net-change analysis, tracking the evolution of knowledge, attitudes and behaviour over the period of the implementation of the campaign. The campaign has used evidence to monitor and adjust its interventions over a period of three years, with a first survey delivered to coincide with the first phase (June 2021-June 2022), a second survey finalised in January 2023, and the latest survey which was finalised in early December 2023.

A 1.1 Survey

The first baseline survey measured the reach, engagement and ‘bounce’ (sharing and responses) of the social media content. It found that the campaign had a total of 23 million individuals reached directly in 6 countries, and an engagement rate of 11%. The Philippines and Vietnam stood out as the populations with most engagement. The respondents described heightened awareness of the risks of drinking and driving after exposure to the ads. The assessment led to changes in the way the messages were communicated, seeking to foster the engagement of respondents, in particular through the use of contests.

The survey was presented online, either on Facebook or on the PON website, accessed via a link on the Facebook page or via a link on a Facebook ad.

There were only small incentives provided to respondents¹⁴ to encourage them to take the survey, so as not to skew the answers.

It was presented in the following manner:

We want to assure you that your responses in this survey will remain completely anonymous. We do not collect any personally identifiable information, and your honest feedback is invaluable to us.

Additionally, should you choose to provide any optional information, please be aware that such data will be kept confidential and used solely for the purpose of improving our survey's accuracy. Rest assured that this information will not be linked to your anonymous responses.

Thank you for your participation.

1. *Measure: Baseline Behaviour*

In the last 1 month, have you driven a vehicle (car, motorcycle, e-bike) while feeling tipsy/intoxicated?

Yes

No

¹⁴ People who entered were given the option of providing their contact details. The majority gave their email addresses, and were given a chance to join a lottery. Approximately 20 persons were awarded Grab vouchers of an amount sufficient to get them to the airport – roughly equivalent to US\$20.

2. Measure: Baseline Behaviour

In the last 1 month, have you driven a vehicle (car, motorcycle, e-bike) after having any number of drinks?

- Yes
 No

3. Measure: Baseline Behaviour

In the last 1 month, have you been a passenger for a vehicle (car, motorcycle, e-bike) while the driver is tipsy/intoxicated?

- Yes
 No

4. Measure: Baseline Behaviour

In the last 1 month, have you been a passenger for a vehicle (car, motorcycle, e-bike) after the driver has had any number of drinks?

- Yes
 No

5. Measure: Baseline Behaviour

If yes to questions 3 or 4, what did you do in that situation?

- I did nothing and continued riding in the vehicle
 I complained to the driver but continued riding in the vehicle
 I refused to get in the vehicle

6. Measure: Baseline Behaviour

If yes to questions 3 or 4, how did this situation make you feel?

- Made you uncomfortable in some way
 No influence for me at all
 It's similar to what others do
 Ask them to stop driving
 Feel this was more fun and exciting
 Made me more likely to not drive after drinking alcohol

7. Measure: Baseline Behaviour

How often do you do the following?

5 4 3 2 1

Always Usually Sometimes Rarely Never

- Before drinking, I have a plan to get home without driving
- I prefer to take a taxi or use a rideshare app rather than drive
- I take action if I see a drunk friend/family member/coworker about to drive
- I am willing to be a sober driver for my friends/family/coworkers

8. Measure: Baseline Attitude

How would you rate the following statements?

10 9 8 7 6 5 4 3 2 1

Strongly Agree Strongly Disagree

- Drinking alcohol is very common, so it's inevitable to sometimes drink drive
- It is still okay to drive after drinking alcohol if I can control myself

- I know my limits and can judge if I am safe to drive myself after drinking
- I know a few different options for how to get home after drinking
- I am not responsible for making sure everyone around me avoids drink driving
- Drink driving is a serious issue for my community
- A good friend will not let their drunk friend drive

9. Measure: % Message agreement

How would you rate this statement?

If I see a friend who has been drinking or is drunk, I feel confident to stop them from driving home.

10 9 8 7 6 5 4 3 2 1

Strongly Agree Strongly Disagree

10. Measure: % Message agreement

How would you rate this statement?

If I have been drinking and feel tipsy, I feel confident to say “no” to driving home myself and will choose a safer way home instead.

10 9 8 7 6 5 4 3 2 1

Strongly Agree Strongly Disagree

11. Measure: Baseline Knowledge

What are the most common signs that someone is drunk? (Check all that apply)

- Unfocused eyes
- Sore throat
- Vomiting
- Sleepy
- Can't speak well
- Very hungry and thirsty
- Hyper
- Unbalanced, dizzy, or falling

12. Measure: Baseline Knowledge

How does alcohol affect your driving?

- Improves your driving ability and confidence
- No effect on your driving ability
- Slows your reactions and judgement

Aiming for a sample of 400 respondents in each of the six countries (2,400 in total) the evaluation aimed to have a representative sample using for calculating sample size:

<http://www.raosoft.com/samplesize.html>.

Facebook users provide a semi-random sample with rough indication of the target group, while on the other hand the statistics in each country about the age group is not fully up to date. The degree of truthfulness of the respondents also could not be checked, as none of them had been respondents in earlier phases.

For each country the survey was aiming for:

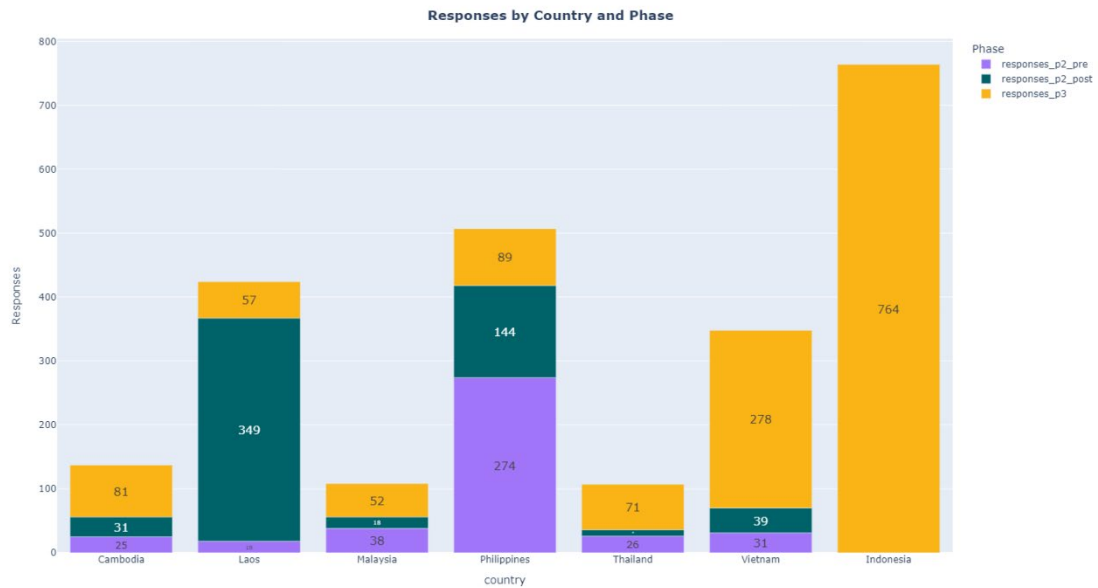
Sampling Parameters	
Measurement	Statistic
Margin of Error	5% Max
Confidence Level	95%-96%
Population Size	20,000

The recommended sample size per country was roughly 400 individuals. Some personal identifying demographic data was gathered from the respondents, focusing on their choice of contact method, age group, gender, location, and occupation. Some demographic comparisons are shown to provide greater clarity to the survey answers, focusing primarily on age group and gender. Due to the unbalanced responses for location and occupation, these are excluded from comparisons (almost 60% of responses were from urban locations, with 10% from rural environments, whilst the remainder declined to specify, and most responses declined to share their occupation). The age groups can be evenly split between respondents younger and older than 30, providing an indication of whether age poses a significant factor. Gender is also a roughly evenly split (47% male and 39% female). Responses that declined to share this information are included in overall statistics but not demographic comparisons.

Some duplicate data has been filtered out of the provided survey responses after it was discovered that several respondents allowed others to use their contact details to fill out the survey. Only 7 distinct contact details were found across all target countries that fit this category and of these, each email address was only used for an additional 1 or 2 responses. True duplicates that have been excluded include those where all the personal identifying information and more than 80% of the answers across the entire survey remained the same, which amounted to a total of 7 responses across all countries (6 from Indonesia and 1 from Vietnam). This filtering was only included for surveys from phase 3 however, no responses from surveys in phase 2 have been excluded.

Comparisons between the phase 3 surveys and those from phase 2 (Both pre-campaign survey and post-campaign survey) are offered here. As Indonesia was only included in the phase 3 survey, all survey data from this country has been excluded from any comparisons with the prior surveys. Demographic and age comparisons with past surveys are also excluded, as this data was not available.

The phase 3 surveys recorded the highest number of respondents across the 6 target countries (Cambodia, Laos, Malaysia, The Philippines, Thailand, and Vietnam) with 629, and had a higher number of responses per country for all except Laos and The Philippines. The Philippines had the highest turnout for the phase 2 pre-surveys and lowest for phase 3, whilst Laos had the highest turnout for the phase 2 post-campaign survey. Comparing provided email addresses between all 3 surveys showed that no individuals provided answers to more than 1 survey, so a longitudinal comparison was not possible.



A 1.2 Focus Group

The Focus Group Discussion protocol was prepared in the following manner:

Aiming to understand the nature of:

- Ad recall vs other ads
- Message agreement
- Impact of campaign in relation to other factors

Target Audience:

Global target audience is 18-30 years old.

1. Measure: Ad engagement or relevance

Have you ever seen the ads mention “The Power of NO” for drink driving?

Options or prompts:

- Yes, I have seen it
- Unsure. It seems that I have seen/heard that message but do not remember exactly what it is.
- No, I have not seen it yet. It’s new to me

2. Measure: Ad engagement or relevance

What words first comes to your mind when you see the ads mention “The Power of NO” for drink driving?

3. Measure: Ad effectiveness or extent

How did this ad influence your thinking/feelings? [please select statements that best describe your thoughts after seeing the ad]



Options or prompts:

- Made me uncomfortable in some way
- Made me feel more concerned about driving after drinking alcohol
- No influence for me at all
- It's similar to some other ads about drink driving I have seen before
- Taught me something new
- Made me stop and think
- Made me understand the consequences of drinking and driving
- Made me more likely to not drive after drinking alcohol

4. Measure: Ad impact or duration

Do you feel now that it is better to take the immediate cost of saying no than risk facing bigger costs afterwards?

Options or prompts:

- If I have been drinking and feel tipsy, I feel confident to say "no" to driving home myself and will choose a safer way home instead.

5. Measure: Ad impact or duration

What reasons to incur the immediate costs of saying no? Can the ad be redesigned in future to increase these reasons?

Options or prompts:

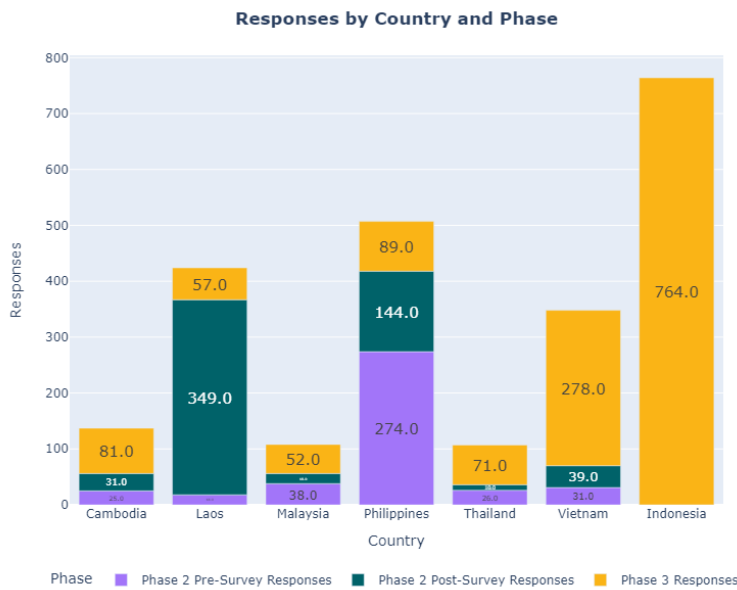
- Better focus on well-being, but how?
- Better focus on mental health, self-care?
- Urge to take control of our destiny?

Annex 2: Detailed Survey Results

A 2.1 Characteristics of the Respondents

The largest proportion of responses from the phase 3 survey came from Indonesia, which accounted for more than 50% of the responses. Vietnam ranked second with 20% of the responses. Comparing these turnouts to the target sample size, Indonesia far surpassed the target, whilst all other countries fell below the target.

The chart below shows the responses from all 7 countries across all 3 surveys. The response rate from Indonesia far surpasses the response rate of all other countries, despite only being targeted in the last phase of the campaign. This may be due to a combination of the method of pushing surveys to audiences and the novelty of the campaign in the country. While responses in most countries was highest in the final survey, Laos and The Philippines performed better in prior surveys.



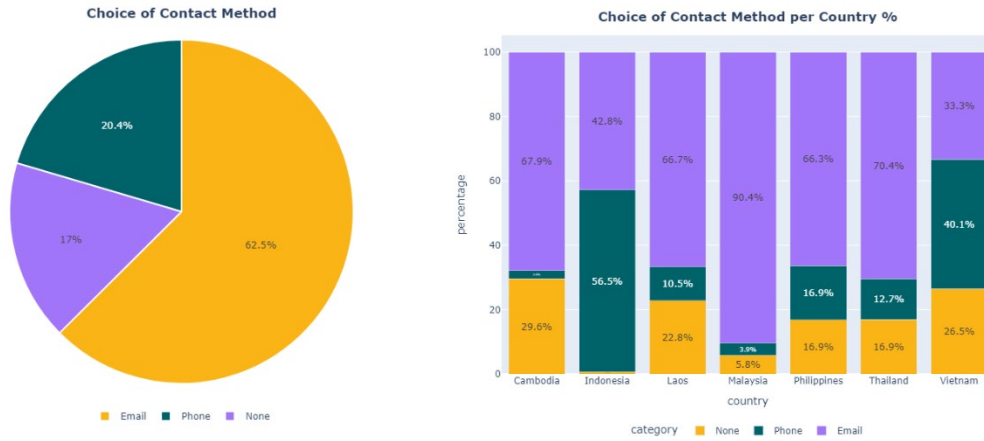
The projected confidence level (With a maintained 5% margin of error) based on the achieved responses for each country has been adjusted in the table below.

Country	Responses	Confidence Level
Cambodia	81	63.0%
Indonesia	764	99.6%
Laos	57	55.0%
Malaysia	52	52.6%
Philippines	89	65.5%
Thailand	71	60.0%
Vietnam	279	90.7%
Average	199	69.5%



A 2.1.1 Contact Method

Most respondents’ preferred contact method was email. The minority of respondents declined to provide a contact method. Indonesia was the most trusting country, with less than 1% declining to provide a method of contact, whilst Cambodia had the highest number of respondents refusing to provide a contact method.

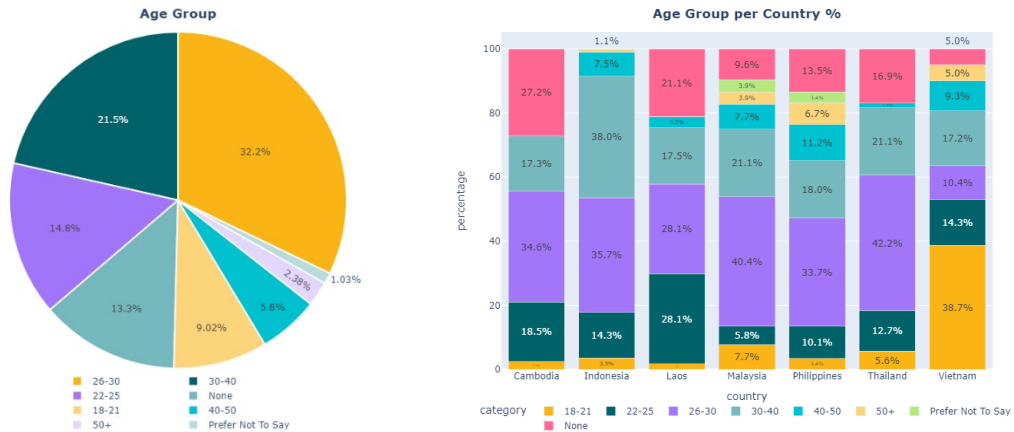


Contact Methods	None	Phone	Email
Cambodia	30%	2%	68%
Indonesia	1%	57%	43%
Laos	23%	11%	67%
Malaysia	6%	4%	90%
Philippines	17%	17%	66%
Thailand	17%	13%	70%
Vietnam	27%	40%	33%
Average	17%	20%	63%



A 2.1.2 Age Group

Twenty-six to 30-year-olds comprised the largest proportion of the respondents, whilst the 30- to 40-year-old group came in second. The 26- to 30-year-old group was largest in Thailand and smallest in Vietnam. Approximately 14% of respondents declined to share their age group.



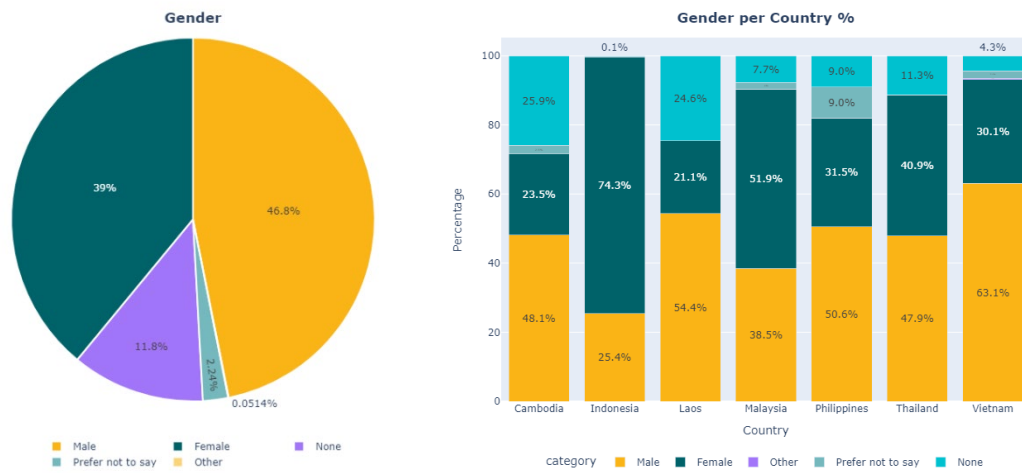
Country	18-21	22-25	26-30	30-40	40-50	50+	Prefer Not to Say	None
Cambodia	2%	19%	35%	17%	0%	0%	0%	27%
Indonesia	4%	14%	36%	38%	7%	1%	0%	0%
Laos	2%	28%	28%	18%	4%	0%	0%	21%
Malaysia	8%	6%	40%	21%	8%	4%	4%	10%
Philippines	3%	10%	34%	18%	11%	7%	3%	13%
Thailand	6%	13%	42%	21%	1%	0%	0%	17%
Vietnam	39%	14%	10%	17%	9%	5%	0%	5%
Average	9%	15%	32%	21%	6%	2%	1%	13%

Note, in the table above and in the subsequent sections, “None” indicates that the respondent did not answer the question, whilst “Prefer Not to Say” was used by respondents to indicate their preference.



A 2.1.3 Gender

Gender across the target countries was relatively evenly distributed. The distribution at country level is a little more skewed, however. In each country, men accounted for more than half of respondents in all cases except for Indonesia and Malaysia. Approximately 14% of respondents declined to share their gender.

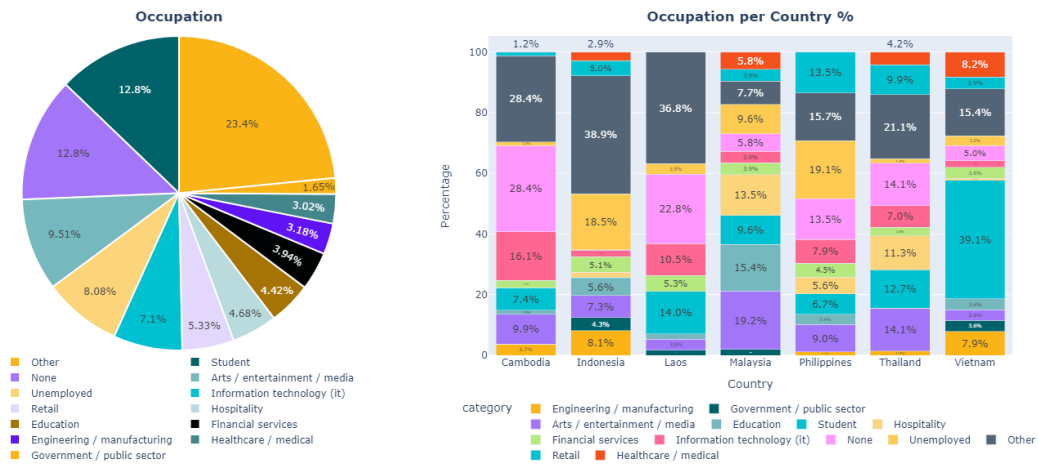


Country	Male	Female	Other	Prefer Not to Say	None
Cambodia	48%	23%	0%	2%	26%
Indonesia	25%	74%	0%	0%	0%
Laos	54%	21%	0%	0%	25%
Malaysia	38%	52%	0%	2%	8%
Philippines	51%	31%	0%	9%	9%
Thailand	48%	41%	0%	0%	11%
Vietnam	63%	30%	0%	2%	4%
Average	47%	39%	0%	2%	12%



A 2.1.4 Occupation

The occupation category with the most responses was ‘other’. Approximately half of respondents indicated one of several professions, ranging up to 10% for each, including unemployed. Students occupied the greatest proportion of definitive responses. Due to the high degree of spread in occupational data, and how large a proportion that ‘other’ and ‘none’ occupy, this demographic data has been excluded from comparisons.

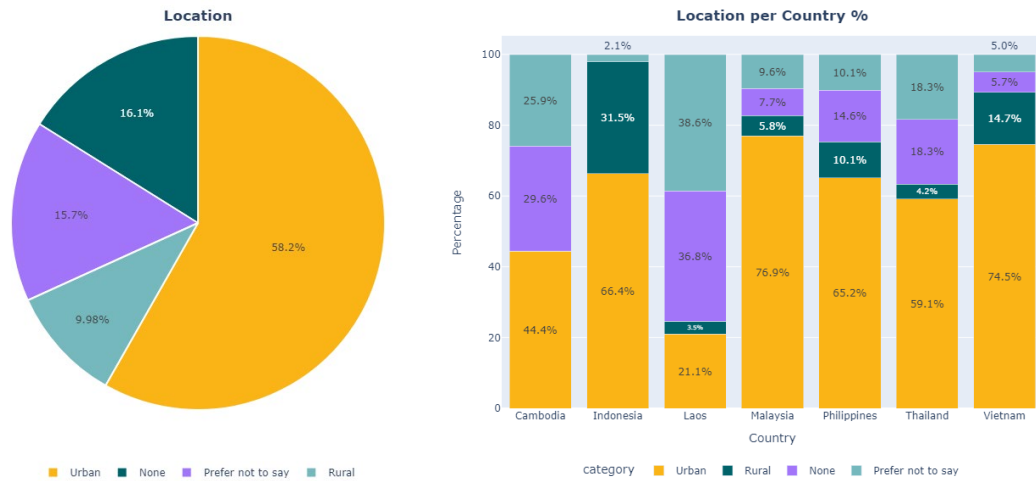


Country	Engineering / Manufacturing	Government / Public Sector	Arts / Entertainment / Media	Education	Student	Hospitality	Financial Services	Information Technology (IT)	None	Unemployed	Other	Retail	Healthcare / Medical
Cambodia	4%	0%	10%	1%	7%	0%	2%	16%	28%	1%	28%	1%	0%
Indonesia	8%	4%	7%	6%	0%	2%	5%	2%	0%	18%	39%	5%	3%
Laos	0%	2%	4%	2%	14%	0%	5%	11%	23%	4%	37%	0%	0%
Malaysia	0%	2%	19%	15%	10%	13%	4%	4%	6%	10%	8%	4%	6%
Philippines	1%	0%	9%	3%	7%	6%	4%	8%	13%	19%	16%	13%	0%
Thailand	1%	0%	14%	0%	13%	11%	3%	7%	14%	1%	21%	10%	4%
Vietnam	8%	4%	4%	4%	39%	1%	4%	2%	5%	3%	15%	4%	8%
Average	3%	2%	10%	4%	13%	5%	4%	7%	13%	8%	23%	5%	3%



A 2.1.5 Location

Location responses were highly skewed towards urban environments, with only 10% of responses coming from rural environments. Over a quarter of respondents declined to share their location. Due to the unbalance in this set of responses, this demographic data has been excluded from comparisons.



Country	Urban	Rural	None	Prefer not to say
Cambodia	44%	0%	30%	26%
Indonesia	66%	32%	0%	2%
Laos	21%	4%	37%	39%
Malaysia	77%	6%	8%	10%
Philippines	65%	10%	15%	10%
Thailand	59%	4%	18%	18%
Vietnam	75%	15%	6%	5%
Average	58%	10%	16%	16%



A 2.2 Responses to Survey Questions

A2.2.1 Q1 & Q2

Q1: In the last 1 month, have you driven a vehicle (car, motorcycle, e-bike) while feeling tipsy/intoxicated? / Q2: In the last 1 month, have you driven a vehicle (car, motorcycle, e-bike) after having any number of drinks?

Respondents from Vietnam reported the lowest rates of driving any vehicle (car, motorcycle, e-bike) in the last month while tipsy or drunk, while respondents in the Philippines and Malaysia reported the highest rates. However, when asked whether they had driven a vehicle in the last month whilst under the influence of any amount of alcohol, approximately 10% of Vietnamese respondents reported that had driven. For this question, Malaysia ranked highest amongst the 7 countries again, whilst Indonesia and Thailand reported the lowest figures.

Q1		
Country	Yes	No
Cambodia	22%	78%
Indonesia	14%	86%
Laos	18%	82%
Malaysia	31%	69%
Philippines	34%	66%
Thailand	11%	89%
Vietnam	6%	94%
Average	19%	81%

Q2		
Country	Yes	No
Cambodia	20%	80%
Indonesia	9%	91%
Laos	16%	84%
Malaysia	31%	69%
Philippines	28%	72%
Thailand	10%	90%
Vietnam	10%	90%
Average	18%	82%

Individuals within the 18-30 age group are slightly more likely to drink and drive compared to their older counterparts across all countries. The most significant difference can be seen in the Philippines where younger respondents are over twice as likely to drink and drive compared to respondents in the 30+ age group. Vietnam had the lowest rates of drink driving responses in both age groups. A similar pattern between age groups can be seen when individuals were asked if they had driven under the consumption of any quantity of alcohol.

Q1	Under 30		Over 30	
	Yes	No	Yes	No
Country				
Cambodia	31%	69%	14%	86%
Indonesia	16%	84%	13%	87%
Laos	18%	82%	25%	75%
Malaysia	29%	71%	35%	65%
Philippines	38%	62%	19%	81%
Thailand	14%	86%	13%	88%
Vietnam	8%	92%	2%	98%
Average	22%	78%	17%	83%

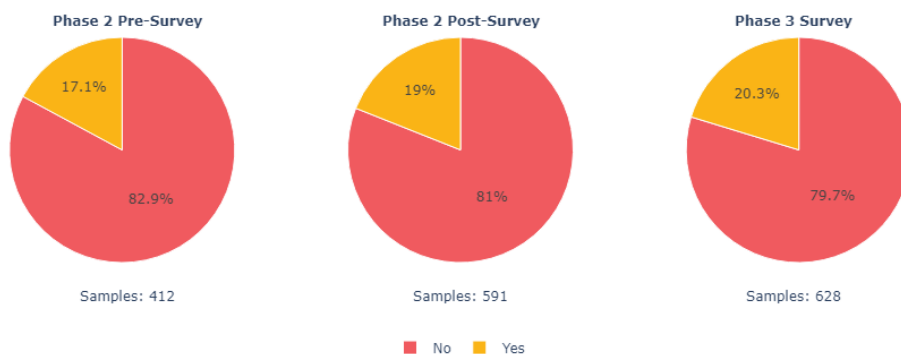
Q2	Under 30		Over 30	
	Yes	No	Yes	No
Country				
Cambodia	27%	73%	14%	86%
Indonesia	10%	90%	7%	93%
Laos	18%	82%	17%	83%
Malaysia	25%	75%	35%	65%
Philippines	31%	69%	16%	84%
Thailand	14%	86%	6%	94%
Vietnam	12%	88%	7%	93%
Average	20%	80%	15%	86%

When filtering between male and female, men were consistently shown to be more likely to drink and drive compared to women, except in Thailand, where more women reported that they had consumed any quantity of alcohol and driven. Due to the high discrepancy between reported locations, it is difficult to ascertain a causal factor as to whether an individual’s location (urban or rural) has a significant impact on their willingness to drink and drive. Of the countries where data is available for this, rural populations are shown to be more likely to drink and drive (Philippines and Thailand) compared to urban populations.

Q1		Male		Female		Q2		Male		Female	
Country	Yes	No	Yes	No	Country	Yes	No	Yes	No		
Cambodia	31%	69%	21%	79%	Cambodia	26%	74%	21%	79%		
Indonesia	21%	79%	12%	88%	Indonesia	19%	81%	5%	95%		
Laos	23%	77%	17%	83%	Laos	19%	81%	17%	83%		
Malaysia	30%	70%	26%	74%	Malaysia	45%	55%	19%	81%		
Philippines	33%	67%	18%	82%	Philippines	22%	78%	18%	82%		
Thailand	12%	88%	10%	90%	Thailand	6%	94%	14%	86%		
Vietnam	7%	93%	6%	94%	Vietnam	10%	90%	8%	92%		
Average	22%	78%	16%	84%	Average	21%	79%	15%	86%		

When comparing with 2021 and 2022 surveys, it appears that a greater proportion of respondents indicated that they have driven whilst drunk.

Q1: In the last 1 month, have you driven a vehicle (car, motorcycle, e-bike) while feeling tipsy/drunk?



A 2.2.2 Q3 & Q4

Q3: In the last 1 month, have you been a passenger for a vehicle (car, motorcycle, e-bike) while the driver is tipsy/intoxicated? /Q4: In the last 1 month, have you been a passenger for a vehicle (car, motorcycle, e-bike) after the driver has had any number of drinks?

When asked about whether respondents had ridden in a vehicle where they knew the driver to be tipsy or drunk, approximately 20% of the sampled population reported that they had. Vietnam and Thailand reported the lowest figures for this question. Malaysia ranked highest for the response where they knew the driver was under the influence within the month prior to taking the survey.

These numbers were similar when respondents were asked whether they had ridden in a vehicle with a driver they knew to have had any amount of alcohol. Thailand and Vietnam again reported the lowest figures, and Malaysia was ranked highest.

Q3			Q4		
Country	Yes	No	Country	Yes	No
Cambodia	15%	85%	Cambodia	16%	84%
Indonesia	26%	74%	Indonesia	28%	72%
Laos	18%	82%	Laos	18%	82%
Malaysia	38%	62%	Malaysia	42%	58%
Philippines	33%	67%	Philippines	33%	67%
Thailand	8%	92%	Thailand	8%	92%
Vietnam	4%	96%	Vietnam	9%	91%
Average	20%	80%	Average	22%	78%

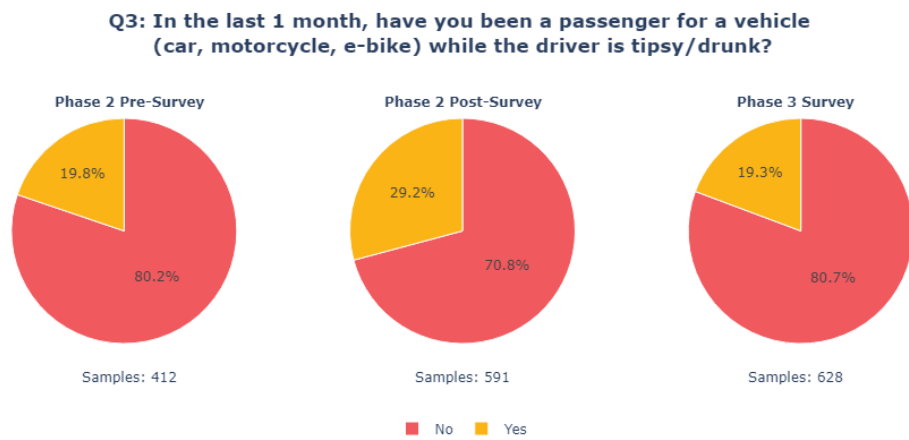
With this question, similar patterns can be observed between the younger and older age groups (below and above 30 years), with older groups less likely to get into a vehicle with a driver who had been drinking. Some differences in this pattern were observed when respondents were asked whether they had ridden in a vehicle with a driver who had consumed any quantity of alcohol, predominately in Laos, Malaysia, and Thailand.

Q3	Under 30		Over 30		Q4	Under 30		Over 30	
	Country	Yes	No	Yes		No	Country	Yes	No
Cambodia	20%	80%	7%	93%	Cambodia	22%	78%	7%	93%
Indonesia	30%	70%	22%	78%	Indonesia	31%	69%	24%	76%
Laos	18%	82%	25%	75%	Laos	15%	85%	33%	67%
Malaysia	43%	57%	29%	71%	Malaysia	39%	61%	41%	59%
Philippines	31%	69%	25%	75%	Philippines	36%	64%	25%	75%
Thailand	9%	91%	13%	88%	Thailand	9%	91%	13%	88%
Vietnam	5%	95%	2%	98%	Vietnam	10%	90%	6%	94%
Average	22%	78%	18%	82%	Average	23%	77%	21%	79%

When filtering for gender, men are more likely to take the risk of getting into a vehicle with a driver who is tipsy, except in The Philippines, where women were more likely to take this risk. Malaysian males saw an even 50/50 split for this question.

Q3		Male		Female		Q4		Male		Female	
Country	Yes	No	Yes	No	Country	Yes	No	Yes	No		
Cambodia	21%	79%	11%	89%	Cambodia	21%	79%	16%	84%		
Indonesia	37%	63%	23%	77%	Indonesia	40%	60%	24%	76%		
Laos	23%	77%	8%	92%	Laos	19%	81%	17%	83%		
Malaysia	55%	45%	22%	78%	Malaysia	50%	50%	37%	63%		
Philippines	27%	73%	32%	68%	Philippines	29%	71%	32%	68%		
Thailand	15%	85%	3%	97%	Thailand	15%	85%	3%	97%		
Vietnam	5%	95%	2%	98%	Vietnam	8%	92%	10%	90%		
Average	26%	74%	15%	85%	Average	26%	74%	20%	80%		

When comparing with prior surveys, respondents in phase 3 reported a lower number of instances where they had knowingly entered a vehicle with a drunk driver in the month prior to completing the survey. This is a lower statistic compared to both phase 2 surveys, and significantly lower than the phase 2 post-campaign survey, which reported the highest figure.



A 2.2.3 Q5 & Q6

Q5: If yes to questions 3 or 4, what did you do in that situation? / Q6: If yes to questions 3 or 4, how did this situation make you feel?

If respondents reported yes to either of the previous questions regarding riding in a vehicle with a driver under the influence, they were asked to share what they did in the moment and how it made them feel. Overall, the highest proportion of respondents reported that they complained but continued to ride in the vehicle. Vietnam reported the lowest percentage of respondents who selected this option however, whilst Laos and Cambodia were highest. Only 38% of respondents reported that they refused to get into the vehicle, with Vietnam ranking highest in this category. Of the 16% of respondents who reported that they did nothing, Indonesia reported the lowest numbers. Thailand and the Philippines ranked highest for this category.

Q5			
Country	Did Nothing	Complained but Continued Riding	Refused to Get in
Cambodia	19%	63%	19%
Indonesia	5%	18%	77%
Laos	16%	67%	18%
Malaysia	15%	58%	27%
Philippines	22%	44%	34%
Thailand	24%	66%	10%
Vietnam	8%	10%	82%
Average	16%	46%	38%

When asked how this event made them feel, 35% of respondents indicated that it made them not want to drink and drive, while 8% of respondents indicated that that it had no influence on them.

Q6						
Country	Ask to Stop	Similar to What Others do	Felt Uncomfortable	More Fun	No Influence	Not Drink and Drive
Cambodia	9%	7%	19%	12%	1%	52%
Indonesia	53%	1%	18%	0%	1%	27%
Laos	0%	21%	16%	11%	11%	42%
Malaysia	12%	17%	25%	6%	17%	23%
Philippines	17%	10%	25%	3%	9%	36%
Thailand	7%	18%	13%	6%	10%	46%
Vietnam	61%	2%	16%	1%	4%	15%
Average	23%	11%	19%	6%	8%	35%

Older respondents above 30 were most likely to stand their ground and refuse to get into a vehicle with a drunk driver, with older Vietnamese and Indonesian respondents being most likely. Younger respondents were more likely to complain but continue to ride in the vehicle compared to their older counterparts. Interestingly, Cambodian youths were more likely to refuse to get into a vehicle with a drunk driver compared to older respondents.

Q5	Did Nothing		Complained but Continued Riding		Refused to Get in	
Country	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30
Cambodia	16%	14%	60%	71%	24%	14%
Indonesia	7%	3%	19%	17%	75%	80%
Laos	27%	0%	58%	83%	15%	17%
Malaysia	14%	12%	79%	41%	7%	47%
Philippines	19%	13%	57%	28%	24%	59%
Thailand	30%	25%	63%	56%	7%	19%
Vietnam	11%	3%	11%	9%	78%	88%
Average	18%	10%	49%	44%	33%	46%

Q6	Ask to Stop		Similar to What Others do		Felt Uncomfortable		More Fun		No Influence		Not Drink and Drive	
Country	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30
Cambodia	13%	0%	4%	7%	24%	14%	7%	21%	0%	7%	51%	50%
Indonesia	51%	55%	1%	0%	18%	18%	0%	0%	2%	1%	28%	26%
Laos	0%	0%	18%	8%	15%	25%	15%	8%	15%	0%	36%	58%
Malaysia	7%	18%	18%	24%	21%	35%	4%	6%	18%	12%	32%	6%
Philippines	19%	19%	17%	0%	19%	34%	5%	0%	5%	0%	36%	47%
Thailand	5%	13%	21%	13%	14%	13%	2%	6%	14%	6%	44%	50%
Vietnam	60%	65%	2%	0%	15%	18%	2%	0%	6%	1%	15%	16%
Average	22%	24%	12%	7%	18%	23%	5%	6%	8%	4%	35%	36%

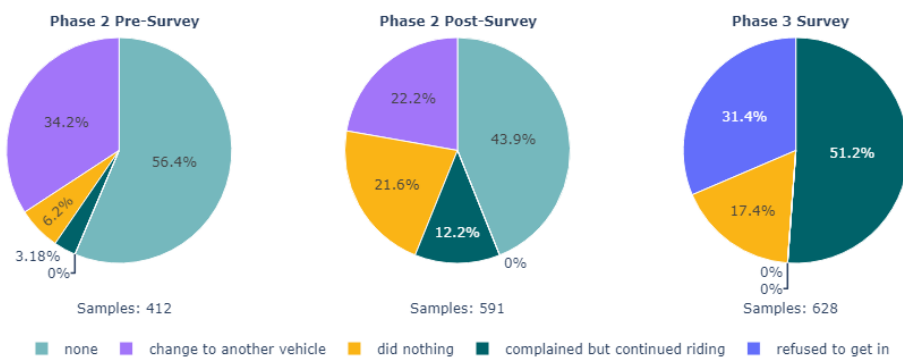
Comparing genders, women were more likely to stand their ground and refuse to get into a vehicle with a drunk driver compared to men (Female 46% vs Male 34%), but men were more likely to complain and still get into the vehicle (Male 52% vs Female 41%). Vietnamese men and women of both age groups ranked highest at refusing to get into a vehicle with drunk drivers, however (Male 82% and Female 81%).

Q5	Did Nothing		Complained but Continued Riding		Refused to Get in	
Country	Male	Female	Male	Female	Male	Female
Cambodia	21%	5%	64%	58%	15%	37%
Indonesia	7%	4%	22%	16%	71%	79%
Laos	19%	17%	68%	58%	13%	25%
Malaysia	5%	19%	75%	52%	20%	30%
Philippines	13%	18%	58%	29%	29%	54%
Thailand	29%	21%	65%	62%	6%	17%
Vietnam	9%	5%	9%	14%	82%	81%
Average	15%	13%	52%	41%	34%	46%

Q6	Ask to Stop		Similar to What Others do		Felt Uncomfortable		More Fun		No Influence		Not Drink and Drive	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Cambodia	8%	16%	8%	0%	23%	21%	10%	11%	0%	5%	51%	47%
Indonesia	46%	55%	1%	1%	21%	17%	2%	0%	3%	1%	28%	27%
Laos	0%	0%	13%	25%	10%	33%	13%	8%	13%	8%	52%	25%
Malaysia	5%	11%	20%	19%	30%	22%	5%	7%	15%	15%	25%	26%
Philippines	16%	21%	11%	7%	18%	36%	2%	4%	7%	4%	47%	29%
Thailand	6%	10%	21%	17%	15%	14%	3%	3%	12%	10%	44%	45%
Vietnam	65%	58%	1%	1%	13%	19%	1%	1%	4%	5%	15%	15%
Average	21%	25%	11%	10%	18%	23%	5%	5%	8%	7%	38%	31%

It is difficult to compare the phase 3 survey responses to question 5 with prior surveys, as most responses in both phase 2 surveys declined to provide an answer, and not all questions are comparable (Phase 3 only contained 3 choices: ‘refused to get in’, ‘complained but continued riding’, and ‘did nothing’ and did not include the option ‘change to another vehicle’). Compared with the phase 2 post-campaign survey, phase 3 saw fewer respondents say that they did nothing however, which is an improvement. Both surveys reported significantly higher responses for this category compared to the phase 2 pre-survey, however. More investigation is required to understand this contrast.

Q5: If yes to questions 3 or 4, what did you do in that situation?



A 2.2.4 Q7: How often do you do the following?

Q7A: “Before drinking, I have a plan to get home without driving”

Approximately three quarters of respondents indicated that they often have a plan to get home without driving before drinking, with a quarter reporting that they always do and only 10% reporting that they never have one. Vietnamese respondents score the highest on whether they always have a plan and Indonesia ranks highest on respondents who never have a plan.

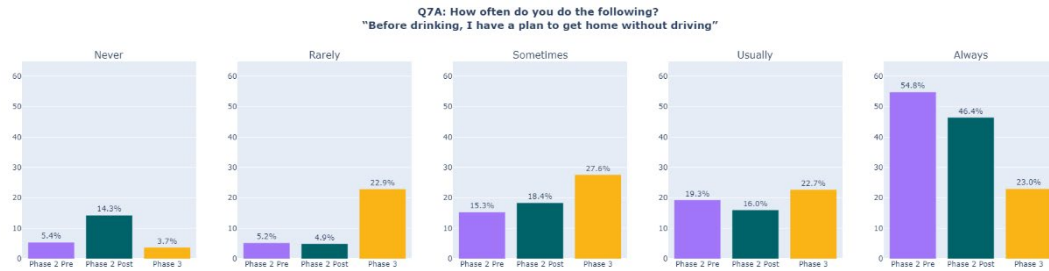
Q7a					
Country	Never	Rarely	Sometimes	Usually	Always
Cambodia	2%	33%	40%	21%	4%
Indonesia	52%	2%	5%	11%	30%
Laos	2%	30%	33%	23%	12%
Malaysia	4%	17%	23%	21%	35%
Philippines	2%	21%	20%	22%	34%
Thailand	3%	27%	34%	28%	8%
Vietnam	9%	6%	13%	20%	52%
Average	11%	20%	24%	21%	25%

Older populations are also more prepared than younger populations. Women are also shown to be more prepared than male respondents, and report that they always have a plan to get home without driving prior to drinking at a higher rate than men.

Q7a	Never		Rarely		Sometimes		Usually		Always	
	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30
Cambodia	4%	0%	40%	21%	33%	50%	18%	21%	4%	7%
Indonesia	53%	50%	2%	1%	6%	5%	10%	12%	28%	32%
Laos	3%	0%	30%	17%	33%	33%	24%	25%	9%	25%
Malaysia	0%	12%	21%	18%	32%	6%	14%	24%	32%	41%
Philippines	2%	3%	29%	9%	26%	6%	21%	19%	21%	63%
Thailand	2%	6%	37%	13%	33%	50%	21%	19%	7%	13%
Vietnam	10%	8%	7%	5%	16%	8%	19%	20%	49%	59%
Average	11%	11%	24%	12%	26%	23%	18%	20%	22%	34%

Q7a	Never		Rarely		Sometimes		Usually		Always	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Cambodia	0%	11%	38%	32%	33%	42%	26%	5%	3%	11%
Indonesia	41%	55%	5%	1%	9%	4%	13%	10%	31%	30%
Laos	3%	0%	32%	17%	35%	25%	23%	25%	6%	33%
Malaysia	0%	4%	25%	15%	20%	22%	15%	22%	40%	37%
Philippines	0%	7%	29%	11%	24%	7%	18%	18%	29%	57%
Thailand	6%	0%	26%	28%	38%	31%	24%	31%	6%	10%
Vietnam	10%	8%	7%	5%	13%	15%	19%	18%	51%	54%
Average	9%	12%	23%	15%	25%	21%	20%	19%	24%	33%

Compared to prior surveys however, phase 3 suggests people are less readily prepared to get home prior to drinking than they were in prior surveys. The pre-survey in phase 2 reported the highest rate of preparedness amongst respondents, with Malaysia, Philippines, and Thailand ranking the highest. Phase 3 did contain a higher proportion of responses for the ‘Rarely’, ‘Sometimes’, and ‘Usually’ categories however, which suggests this decision may be situational for respondents.



Q7B: “I prefer to take a taxi or use a rideshare app rather than drive”

Just under a quarter of respondents indicated that they always prefer to take a taxi or use a ride sharing app rather than drive, while most respondents will sometimes make this preference. Indonesians not only reported the highest rates of ‘Always’ but also the highest rates of ‘Never’. More information is needed to understand this pattern.

Q7b					
Country	Never	Rarely	Sometimes	Usually	Always
Cambodia	1%	1%	48%	38%	11%
Indonesia	14%	7%	14%	21%	44%
Laos	2%	4%	63%	18%	14%
Malaysia	0%	8%	38%	40%	13%
Philippines	0%	13%	26%	29%	31%
Thailand	0%	3%	48%	37%	13%
Vietnam	5%	8%	28%	28%	32%
Average	3%	6%	38%	30%	23%

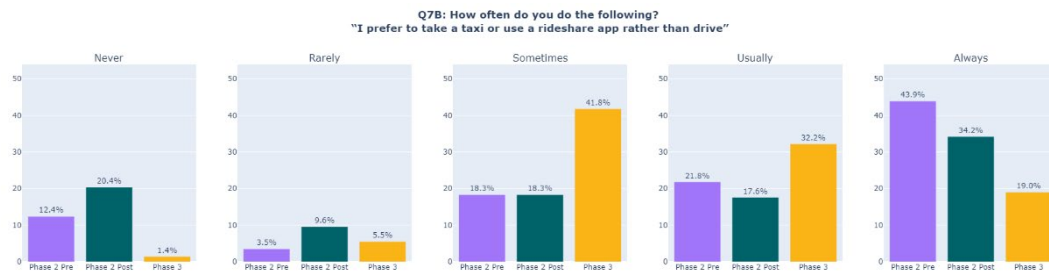
Older and female respondents are also more likely to prefer taxis or ride sharing apps.

Q7b	Never		Rarely		Sometimes		Usually		Always	
	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30
Cambodia	2%	0%	2%	0%	49%	36%	33%	50%	13%	14%
Indonesia	15%	12%	8%	7%	14%	14%	19%	23%	44%	44%
Laos	3%	0%	6%	0%	64%	42%	18%	25%	9%	33%
Malaysia	0%	0%	11%	6%	50%	35%	32%	41%	7%	18%
Philippines	0%	0%	19%	0%	33%	13%	29%	28%	19%	59%
Thailand	0%	0%	2%	6%	63%	38%	26%	31%	9%	25%
Vietnam	6%	2%	10%	2%	29%	26%	27%	31%	29%	39%
Average	4%	2%	8%	3%	43%	29%	26%	33%	19%	33%



Q7b	Never		Rarely		Sometimes		Usually		Always	
Country	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Cambodia	0%	5%	3%	0%	46%	47%	41%	26%	10%	21%
Indonesia	10%	15%	7%	8%	14%	14%	25%	19%	44%	44%
Laos	3%	0%	3%	8%	68%	25%	13%	42%	13%	25%
Malaysia	0%	0%	5%	11%	60%	26%	20%	48%	15%	15%
Philippines	0%	0%	20%	0%	29%	21%	22%	29%	29%	50%
Thailand	0%	0%	6%	0%	56%	48%	26%	38%	12%	14%
Vietnam	4%	6%	9%	4%	26%	33%	28%	24%	33%	33%
Average	3%	4%	8%	4%	43%	31%	25%	32%	22%	29%

Phase 3 reported 19% of respondents who always took a taxi or a rideshare app compared to 44% in the phase 2 pre-survey. The phase 3 ranked highest in the ‘Sometimes’ category however, which is more realistic given that the question was generalised and not specific to occasions when an individual was drinking.



Q7C: “I take action if I see a drunk friend/family member/coworker about to drive”

Approximately one third of respondents indicated that they would act on friends who were about the drink and drive, but most respondents reported that they would only sometimes act. Indonesians were most prone to taking action, whilst Malaysians reported the lowest figures.

Q7c					
Country	Never	Rarely	Sometimes	Usually	Always
Cambodia	0%	1%	47%	27%	25%
Indonesia	8%	4%	6%	19%	63%
Laos	0%	2%	61%	18%	19%
Malaysia	4%	4%	42%	33%	17%
Philippines	1%	10%	29%	26%	34%
Thailand	0%	0%	48%	32%	20%
Vietnam	4%	6%	16%	27%	47%
Average	2%	4%	36%	26%	32%



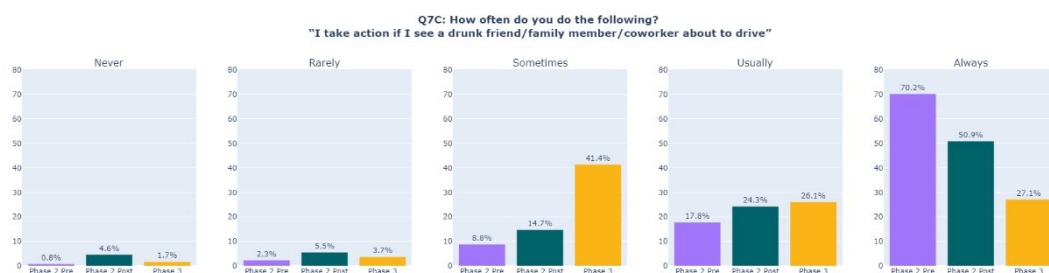
Older respondents were also more likely to report that they would always act on this.

Q7c	Never		Rarely		Sometimes		Usually		Always	
Country	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30
Cambodia	0%	0%	2%	0%	49%	29%	22%	43%	27%	29%
Indonesia	9%	6%	3%	5%	7%	5%	19%	19%	62%	64%
Laos	0%	0%	3%	0%	67%	33%	15%	25%	15%	42%
Malaysia	0%	12%	4%	6%	50%	29%	29%	41%	18%	12%
Philippines	2%	0%	12%	0%	36%	16%	33%	19%	17%	66%
Thailand	0%	0%	0%	0%	63%	38%	26%	31%	12%	31%
Vietnam	4%	5%	5%	7%	21%	7%	27%	30%	43%	52%
Average	2%	3%	4%	3%	42%	22%	24%	30%	28%	42%

Women were more likely to respond with ‘Always’ compared to men.

Q7c	Never		Rarely		Sometimes		Usually		Always	
Country	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Cambodia	0%	0%	3%	0%	41%	53%	31%	16%	26%	32%
Indonesia	3%	9%	2%	5%	8%	6%	19%	19%	69%	61%
Laos	0%	0%	3%	0%	71%	17%	10%	42%	16%	42%
Malaysia	5%	4%	10%	0%	50%	33%	35%	33%	0%	30%
Philippines	2%	0%	13%	0%	36%	21%	13%	36%	36%	43%
Thailand	0%	0%	0%	0%	56%	48%	24%	31%	21%	21%
Vietnam	4%	5%	7%	2%	16%	17%	29%	25%	44%	51%
Average	2%	3%	5%	1%	40%	28%	23%	29%	30%	40%

Phase 3 ranked lowest in the ‘Always’ choice amongst respondents compared to both phase 2 surveys but did rank highest in the ‘Sometimes’ category.



Q7D: “I am willing to be a sober driver for my friends/family/coworkers”

Most respondents indicated that they would ‘Always’ be prepared to be the designated driver for their friends, family, or coworkers, with Vietnamese respondents ranking highest.

Q7d					
Country	Never	Rarely	Sometimes	Usually	Always
Cambodia	1%	1%	44%	17%	36%
Indonesia	6%	2%	4%	14%	74%
Laos	0%	2%	47%	18%	33%
Malaysia	6%	19%	37%	23%	15%
Philippines	7%	11%	20%	33%	29%
Thailand	0%	0%	34%	38%	28%
Vietnam	3%	5%	9%	17%	65%
Average	3%	6%	28%	23%	40%

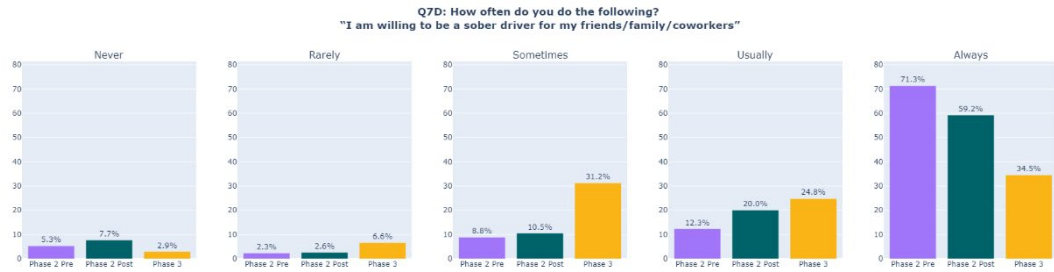
Older populations are also more likely to elect to be the designated driver compared to younger counterparts.

Q7d	Never		Rarely		Sometimes		Usually		Always	
	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30	Under 30	Over 30
Cambodia	2%	0%	2%	0%	44%	36%	16%	14%	36%	50%
Indonesia	6%	6%	2%	1%	4%	4%	14%	13%	73%	75%
Laos	0%	0%	3%	0%	52%	25%	18%	17%	27%	58%
Malaysia	0%	12%	18%	24%	50%	18%	18%	35%	14%	12%
Philippines	7%	9%	14%	3%	26%	6%	38%	25%	14%	56%
Thailand	0%	0%	0%	0%	44%	31%	42%	25%	14%	44%
Vietnam	4%	1%	5%	7%	14%	1%	17%	18%	61%	73%
Average	3%	4%	6%	5%	33%	17%	23%	21%	34%	53%

The spread between genders is approximately even for this question.

Q7d	Never		Rarely		Sometimes		Usually		Always	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Cambodia	0%	5%	3%	0%	44%	42%	13%	21%	41%	32%
Indonesia	3%	7%	1%	2%	4%	4%	14%	14%	78%	73%
Laos	0%	0%	3%	0%	52%	17%	19%	17%	26%	67%
Malaysia	0%	11%	20%	22%	35%	33%	30%	19%	15%	15%
Philippines	7%	11%	11%	7%	22%	14%	24%	36%	36%	32%
Thailand	0%	0%	0%	0%	41%	34%	35%	38%	24%	28%
Vietnam	3%	4%	7%	2%	8%	12%	19%	15%	64%	67%
Average	2%	5%	6%	5%	29%	22%	22%	23%	40%	45%

There is, again, a similar pattern here comparing between surveys, both where phase 3 ranked lowest for the ‘Always’ category and highest in the ‘Sometimes’ and ‘Usually’ category. More information is needed to better understand the factors behind this.



A 2.2.5 Q8: How would you rate the following statements?

Q8A: “Drinking alcohol is very common, so it’s inevitable to sometimes drink drive”

When asked whether drink driving was inevitable, as drinking alcohol is very common, most respondents indicated that they strongly disagreed with the statement. This opinion was strongest in Thailand, with all respondents selecting either 1, 2, or 4.

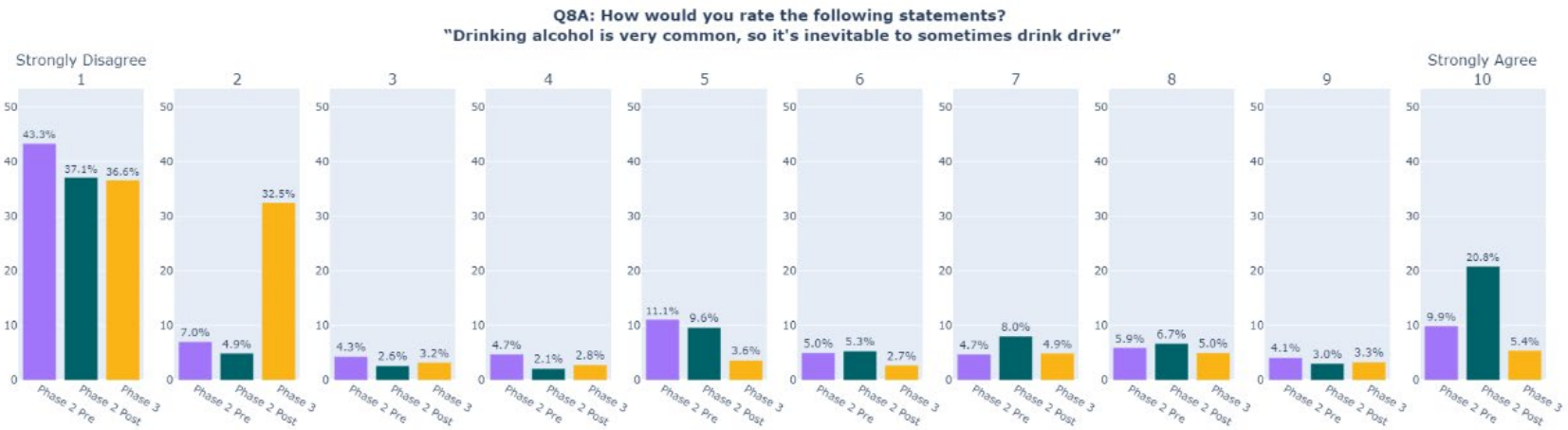
Q8a										
Country	1	2	3	4	5	6	7	8	9	10
Cambodia	38%	36%	5%	6%	11%	1%	1%	0%	0%	1%
Indonesia	74%	4%	2%	2%	2%	2%	4%	4%	2%	4%
Laos	46%	49%	2%	0%	0%	0%	2%	2%	0%	0%
Malaysia	17%	33%	2%	2%	4%	2%	10%	13%	10%	8%
Philippines	27%	20%	8%	3%	4%	3%	6%	9%	7%	12%
Thailand	51%	48%	0%	1%	0%	0%	0%	0%	0%	0%
Vietnam	38%	5%	3%	4%	5%	9%	14%	7%	5%	10%
Average	42%	28%	3%	3%	4%	2%	5%	5%	3%	5%

Older populations and women were more likely to share this opinion.

Q8a	1		2		3		4		5		6		7		8		9		10	
	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30
Cambodia	31%	43%	33%	43%	7%	7%	7%	0%	18%	0%	2%	0%	0%	7%	0%	0%	0%	0%	2%	0%
Indonesia	72%	77%	4%	4%	1%	2%	2%	2%	3%	2%	2%	1%	4%	3%	5%	4%	3%	2%	5%	3%
Laos	45%	58%	52%	25%	0%	8%	0%	0%	0%	0%	0%	0%	0%	8%	3%	0%	0%	0%	0%	0%
Malaysia	14%	18%	46%	24%	4%	0%	0%	6%	0%	12%	4%	0%	11%	6%	14%	12%	4%	6%	4%	18%
Philippines	29%	34%	33%	9%	12%	0%	5%	0%	7%	0%	5%	0%	2%	6%	2%	9%	2%	16%	2%	25%
Thailand	44%	63%	53%	38%	0%	0%	2%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Vietnam	34%	47%	6%	2%	4%	0%	5%	2%	3%	6%	9%	10%	14%	15%	9%	3%	6%	3%	9%	11%
Average	39%	49%	33%	21%	4%	3%	3%	1%	4%	3%	3%	2%	5%	7%	5%	4%	2%	4%	3%	8%

Q8a	1		2		3		4		5		6		7		8		9		10	
Country	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Cambodia	36%	32%	33%	37%	5%	11%	3%	11%	15%	11%	3%	0%	3%	0%	0%	0%	0%	0%	3%	0%
Indonesia	71%	75%	3%	4%	3%	1%	2%	2%	4%	2%	4%	1%	4%	4%	3%	5%	4%	2%	3%	4%
Laos	42%	58%	55%	25%	0%	8%	0%	0%	0%	0%	0%	0%	0%	8%	3%	0%	0%	0%	0%	0%
Malaysia	5%	30%	45%	26%	0%	4%	5%	0%	5%	0%	5%	0%	5%	15%	15%	15%	10%	0%	5%	11%
Philippines	27%	43%	27%	14%	4%	4%	7%	0%	7%	0%	4%	0%	2%	7%	7%	4%	7%	11%	9%	18%
Thailand	50%	45%	50%	52%	0%	0%	0%	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Vietnam	35%	48%	5%	6%	3%	2%	5%	2%	3%	5%	10%	8%	13%	14%	7%	6%	6%	4%	13%	5%
Average	38%	47%	31%	23%	2%	4%	3%	3%	5%	2%	4%	1%	4%	7%	5%	4%	4%	2%	5%	5%

Phase 3 ranked in second in the ‘Strongly Disagree’ category behind the phase 2 pre-survey but was marginally higher than the phase 2 post-campaign survey. A significantly greater number of respondents indicated a preference for category 2 in the phase 3 survey however, at 32%, compared to the 9% and 5% in both prior surveys.



Q8B: “It is still okay to drive after drinking alcohol if I can control myself”

When asked whether it was still okay to drive after drinking alcohol if the respondent could control themselves, the majority reported that they strongly disagreed with the statement. Indonesian respondents ranked highest with this opinion.

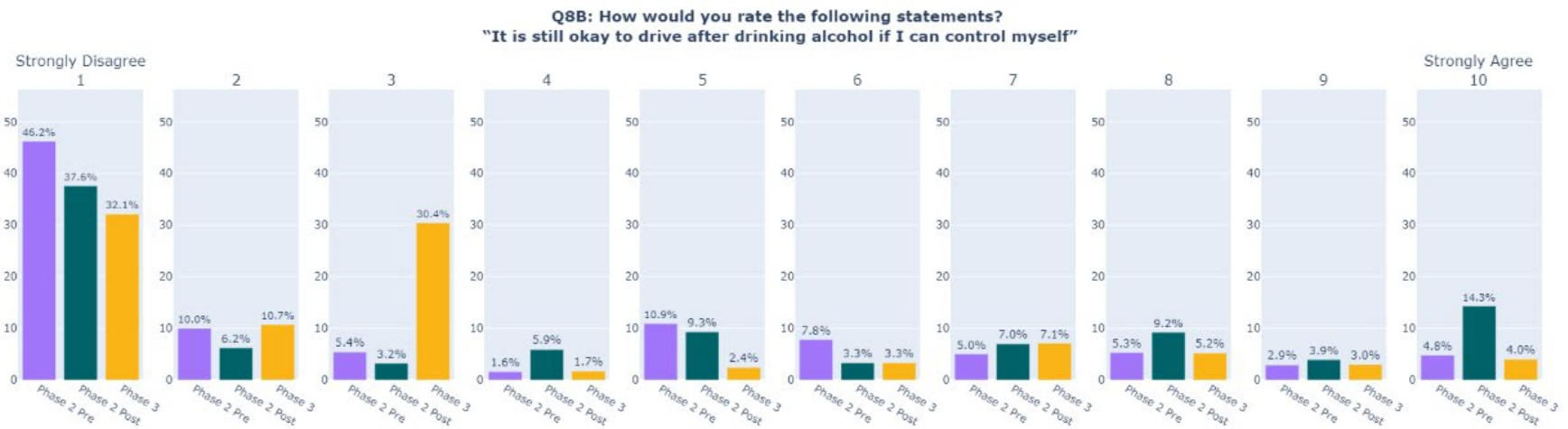
Q8b										
Country	1	2	3	4	5	6	7	8	9	10
Cambodia	21%	25%	31%	0%	6%	6%	10%	0%	0%	1%
Indonesia	71%	5%	3%	2%	3%	1%	4%	5%	2%	4%
Laos	44%	9%	44%	0%	0%	0%	2%	0%	0%	2%
Malaysia	17%	4%	33%	2%	2%	6%	8%	12%	10%	8%
Philippines	29%	7%	25%	3%	2%	3%	12%	8%	3%	7%
Thailand	45%	11%	41%	3%	0%	0%	0%	0%	0%	0%
Vietnam	34%	9%	5%	2%	4%	9%	12%	10%	6%	9%
Average	37%	10%	26%	2%	2%	4%	7%	5%	3%	4%

Older populations and women were more likely to share this opinion.

Q8b Country	1		2		3		4		5		6		7		8		9		10	
	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30
Cambodia	18%	21%	20%	36%	29%	36%	0%	0%	9%	0%	9%	0%	13%	7%	0%	0%	0%	0%	2%	0%
Indonesia	67%	76%	6%	5%	4%	1%	2%	2%	4%	1%	1%	2%	4%	3%	6%	5%	3%	1%	3%	5%
Laos	45%	50%	12%	8%	39%	33%	0%	0%	0%	0%	0%	0%	0%	8%	0%	0%	0%	0%	3%	0%
Malaysia	11%	24%	4%	0%	50%	18%	0%	6%	0%	6%	4%	12%	7%	6%	4%	18%	14%	0%	7%	12%
Philippines	26%	44%	10%	6%	36%	13%	5%	0%	5%	0%	5%	0%	12%	9%	0%	9%	2%	3%	0%	16%
Thailand	35%	63%	14%	13%	49%	19%	2%	6%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Vietnam	29%	43%	11%	6%	6%	2%	2%	2%	3%	3%	9%	9%	12%	13%	12%	7%	8%	2%	7%	13%
Average	33%	46%	11%	10%	31%	17%	2%	2%	3%	2%	4%	3%	7%	7%	3%	6%	4%	1%	3%	6%

Q8b	1		2		3		4		5		6		7		8		9		10	
Country	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Cambodia	15%	26%	31%	11%	26%	37%	0%	0%	3%	16%	10%	0%	13%	11%	0%	0%	0%	0%	3%	0%
Indonesia	65%	73%	5%	5%	3%	3%	2%	2%	4%	2%	4%	1%	4%	3%	4%	6%	4%	2%	6%	3%
Laos	42%	50%	10%	17%	45%	25%	0%	0%	0%	0%	0%	0%	0%	8%	0%	0%	0%	0%	3%	0%
Malaysia	5%	30%	0%	7%	45%	26%	5%	0%	0%	0%	10%	4%	10%	7%	10%	7%	15%	4%	0%	15%
Philippines	33%	39%	2%	14%	27%	21%	7%	0%	4%	0%	4%	0%	9%	11%	4%	4%	4%	0%	4%	11%
Thailand	44%	38%	18%	7%	35%	52%	3%	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Vietnam	32%	40%	9%	10%	5%	5%	2%	1%	3%	5%	9%	10%	11%	14%	11%	7%	9%	0%	10%	8%
Average	34%	42%	11%	10%	27%	24%	3%	1%	2%	3%	5%	2%	7%	8%	4%	3%	5%	1%	4%	5%

Phase 3 responses for the ‘Strongly Disagree’ category are lowest among all 3 surveys but ranks highest for selection 3.



Q8C: “I know my limits and can judge if I am safe to drive myself after drinking”

When asked whether respondents knew their limits and could judge whether they were safe to drive after drinking, the majority reported that they strongly disagreed with the statement. Indonesian respondents ranked highest with this opinion while Malaysians ranked lowest.

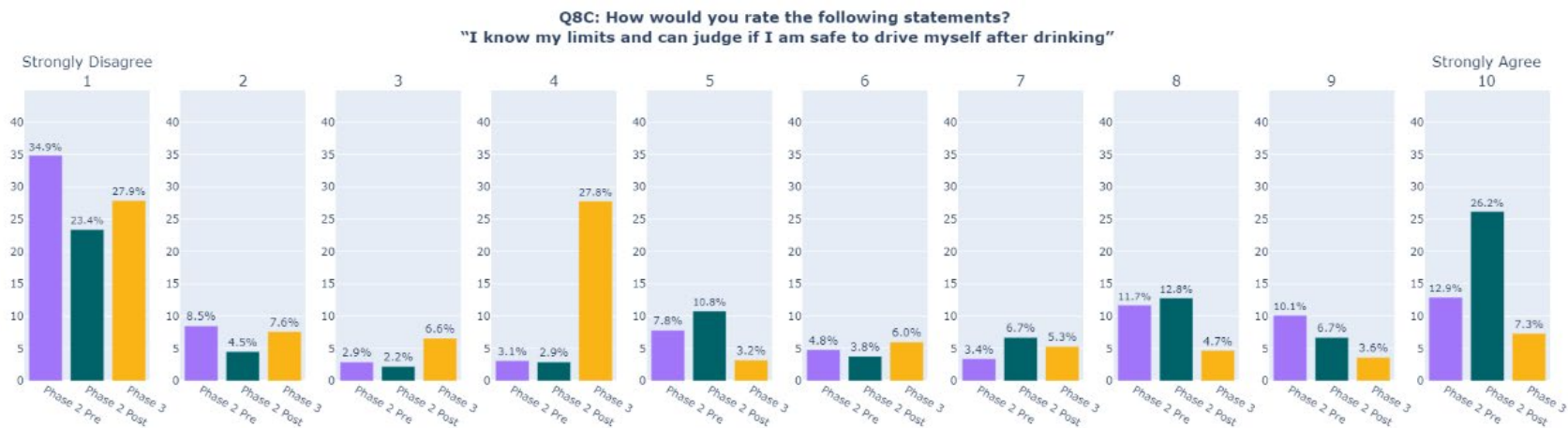
Q8c										
Country	1	2	3	4	5	6	7	8	9	10
Cambodia	21%	16%	17%	27%	4%	6%	7%	0%	0%	1%
Indonesia	52%	6%	3%	3%	3%	2%	4%	7%	6%	14%
Laos	40%	7%	0%	44%	2%	0%	0%	0%	2%	5%
Malaysia	12%	2%	6%	31%	6%	10%	4%	17%	8%	6%
Philippines	21%	7%	7%	18%	1%	12%	10%	7%	7%	10%
Thailand	41%	8%	6%	41%	1%	0%	0%	0%	0%	3%
Vietnam	29%	5%	4%	2%	6%	7%	11%	10%	5%	21%
Average	31%	7%	6%	24%	3%	5%	5%	6%	4%	9%

Older populations and women were more likely to share this opinion.

Q8c	1		2		3		4		5		6		7		8		9		10	
	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30
Cambodia	18%	21%	11%	29%	20%	21%	24%	21%	4%	7%	9%	0%	11%	0%	0%	0%	0%	0%	2%	0%
Indonesia	50%	54%	7%	5%	3%	3%	3%	3%	3%	3%	3%	1%	4%	3%	8%	7%	7%	5%	12%	15%
Laos	45%	42%	9%	8%	0%	0%	42%	25%	0%	8%	0%	0%	0%	0%	0%	0%	3%	0%	0%	17%
Malaysia	7%	12%	0%	6%	7%	0%	43%	24%	0%	18%	14%	6%	0%	12%	14%	6%	11%	6%	4%	12%
Philippines	21%	28%	7%	9%	10%	6%	29%	9%	2%	0%	17%	0%	7%	6%	2%	9%	2%	9%	2%	22%
Thailand	28%	63%	12%	6%	5%	6%	51%	19%	0%	6%	0%	0%	0%	0%	0%	0%	0%	0%	5%	0%
Vietnam	24%	40%	6%	5%	5%	1%	3%	0%	5%	5%	7%	8%	11%	14%	14%	2%	6%	2%	18%	24%
Average	28%	37%	8%	10%	7%	6%	28%	15%	2%	7%	7%	2%	5%	5%	6%	4%	4%	3%	6%	13%

Q8c	1		2		3		4		5		6		7		8		9		10	
Country	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Cambodia	15%	26%	18%	11%	23%	16%	21%	26%	5%	5%	8%	5%	8%	11%	0%	0%	0%	0%	3%	0%
Indonesia	41%	56%	5%	7%	2%	4%	3%	3%	5%	2%	2%	2%	6%	3%	7%	7%	10%	4%	18%	12%
Laos	39%	50%	6%	17%	0%	0%	48%	17%	0%	8%	0%	0%	0%	0%	0%	0%	3%	0%	3%	8%
Malaysia	0%	22%	0%	4%	5%	7%	40%	26%	10%	0%	20%	4%	5%	4%	10%	15%	5%	11%	5%	7%
Philippines	27%	25%	4%	11%	0%	18%	27%	11%	0%	0%	16%	4%	7%	7%	4%	7%	9%	0%	7%	18%
Thailand	41%	31%	12%	7%	9%	3%	32%	55%	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%	3%	3%
Vietnam	28%	32%	3%	11%	4%	5%	3%	1%	6%	2%	6%	8%	11%	14%	12%	6%	5%	2%	22%	18%
Average	27%	35%	7%	9%	6%	8%	25%	20%	4%	3%	7%	3%	5%	6%	5%	5%	5%	3%	9%	10%

Phase 3 ranked highest in the 4th category compared to prior surveys but ranked second for the ‘strongly disagree’ category. Compared to the phase 2 post-campaign survey, there is a distinct change in response rate in the ‘strongly agree’ category, suggesting a change in opinion on this topic.



Q8D: “I know a few different options for how to get home after drinking”

When asked whether respondents had different options to get home after drinking, the majority reported that they strongly agreed with the statement. Thailand was observed to have the highest percentage of respondents who shared this opinion. Interestingly, Indonesia was observed to have the highest count of respondents who reported that they strongly disagreed with this statement. This pattern appears to be independent of age and gender. The second highest statistic for this opinion was Vietnam, suggesting Indonesian’s may not have as many options available to them as compared to other countries.

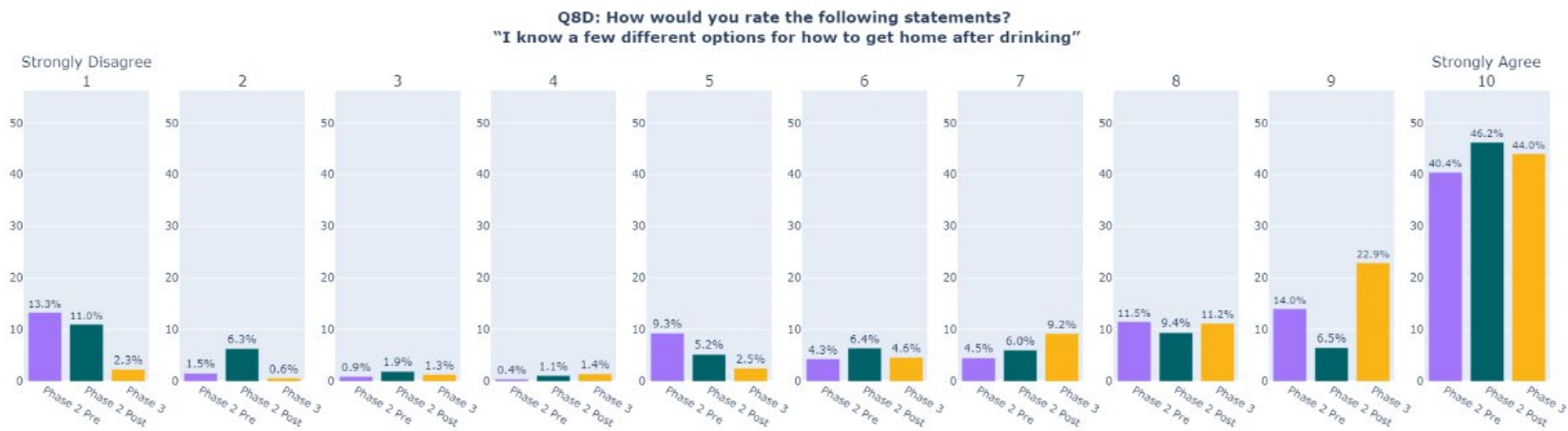
Q8d										
Country	1	2	3	4	5	6	7	8	9	10
Cambodia	0%	0%	1%	2%	2%	9%	11%	4%	26%	44%
Indonesia	29%	5%	3%	3%	4%	3%	3%	8%	11%	33%
Laos	2%	0%	0%	0%	0%	0%	5%	4%	39%	51%
Malaysia	2%	0%	2%	2%	6%	8%	6%	19%	23%	33%
Philippines	2%	1%	4%	2%	4%	12%	11%	15%	16%	31%
Thailand	1%	0%	0%	0%	0%	1%	14%	11%	18%	54%
Vietnam	7%	2%	1%	1%	3%	3%	6%	13%	18%	45%
Average	6%	1%	2%	2%	3%	5%	8%	11%	21%	42%

Older populations and men were more likely to report that they strongly agreed with the statement.

Q8d	1		2		3		4		5		6		7		8		9		10	
	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30
Cambodia	0%	0%	0%	0%	2%	0%	4%	0%	4%	0%	9%	0%	16%	0%	4%	7%	22%	29%	38%	64%
Indonesia	29%	28%	5%	4%	2%	4%	3%	3%	5%	3%	3%	3%	4%	1%	10%	6%	9%	13%	30%	36%
Laos	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	6%	8%	6%	0%	30%	33%	55%	58%
Malaysia	0%	0%	0%	0%	0%	6%	0%	6%	0%	12%	7%	12%	4%	6%	25%	6%	29%	18%	36%	35%
Philippines	2%	3%	0%	3%	5%	6%	5%	0%	5%	6%	19%	6%	5%	3%	14%	9%	12%	28%	33%	34%
Thailand	2%	0%	0%	0%	0%	0%	0%	0%	0%	0%	2%	0%	23%	0%	14%	13%	16%	25%	42%	63%
Vietnam	5%	10%	2%	2%	1%	1%	1%	2%	3%	1%	3%	2%	8%	5%	15%	10%	22%	10%	40%	56%
Average	6%	6%	1%	1%	1%	3%	2%	2%	3%	3%	6%	3%	9%	3%	13%	7%	20%	22%	39%	50%

Q8d	1		2		3		4		5		6		7		8		9		10	
Country	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Cambodia	0%	0%	0%	0%	3%	0%	3%	5%	3%	5%	5%	11%	10%	16%	3%	11%	28%	16%	46%	37%
Indonesia	23%	30%	4%	5%	2%	3%	3%	3%	3%	4%	5%	2%	4%	2%	10%	8%	13%	10%	35%	32%
Laos	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	6%	8%	6%	0%	35%	25%	48%	67%
Malaysia	0%	4%	0%	0%	5%	0%	0%	4%	5%	4%	10%	7%	0%	7%	25%	11%	10%	37%	45%	26%
Philippines	0%	7%	0%	4%	0%	11%	4%	0%	2%	7%	16%	7%	7%	4%	4%	25%	20%	18%	47%	18%
Thailand	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%	3%	9%	24%	21%	3%	21%	17%	47%	52%	
Vietnam	7%	6%	2%	4%	1%	1%	1%	4%	3%	1%	5%	0%	7%	5%	14%	12%	18%	18%	41%	50%
Average	5%	7%	1%	2%	2%	2%	2%	2%	2%	3%	6%	4%	6%	10%	12%	10%	21%	20%	44%	40%

Responses for all 3 surveys show a similar relationship in the ‘agree’ categories (6 to 10). Looking at the ‘Strongly Disagree’ category however, it can be seen that there is a clear decrease in how respondents perceive their available options on how to get home after drinking.



Q8E: “I am not responsible for making sure everyone around me avoids drink driving”

When asked whether respondents felt they were not responsible for making sure those around them did not drink and drive, most respondents reported they strongly disagreed with the statement. Thailand, Laos, and Indonesia were observed to have the strongest of this opinion. However, a strong difference of opinions can also be observed. The highest proportion of respondents who indicated they strongly agreed with the statement came from Indonesia and Vietnam.

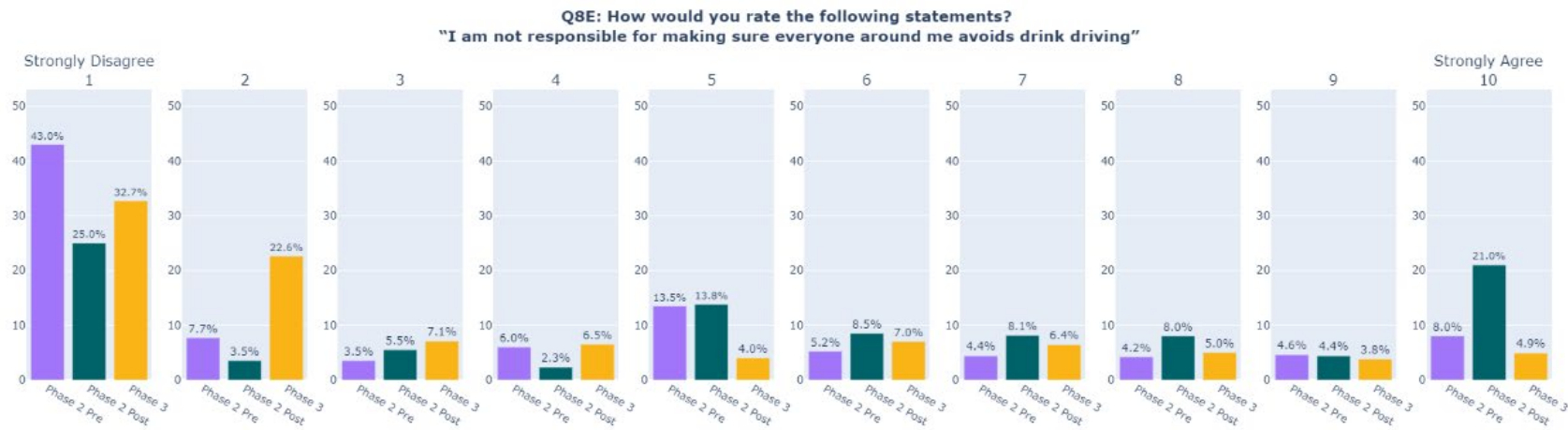
Q8e										
Country	1	2	3	4	5	6	7	8	9	10
Cambodia	25%	41%	4%	7%	4%	11%	2%	2%	1%	2%
Indonesia	44%	6%	4%	3%	4%	3%	4%	8%	8%	16%
Laos	46%	21%	19%	9%	0%	0%	0%	0%	0%	5%
Malaysia	21%	25%	2%	6%	12%	8%	12%	4%	12%	0%
Philippines	22%	18%	6%	1%	6%	13%	11%	10%	6%	7%
Thailand	46%	24%	10%	15%	1%	1%	0%	0%	0%	1%
Vietnam	33%	4%	1%	2%	5%	10%	12%	13%	6%	15%
Average	34%	20%	7%	6%	4%	7%	6%	5%	5%	7%

Older populations were both, more likely to strongly agree and disagree with the statement. The same pattern can be observed in women. More demographic information is needed to better understand the differing opinions within these groups.

Q8e	1		2		3		4		5		6		7		8		9		10	
Country	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30
Cambodia	20%	29%	36%	57%	2%	7%	9%	0%	4%	0%	16%	0%	4%	0%	4%	0%	2%	0%	2%	7%
Indonesia	42%	45%	6%	5%	4%	5%	3%	2%	4%	4%	3%	4%	5%	4%	9%	7%	9%	8%	16%	17%
Laos	42%	58%	27%	8%	12%	25%	12%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	6%	8%
Malaysia	21%	18%	36%	18%	4%	0%	4%	6%	11%	18%	7%	12%	7%	12%	0%	6%	11%	12%	0%	0%
Philippines	19%	34%	31%	9%	7%	6%	0%	0%	10%	3%	24%	0%	2%	6%	5%	16%	0%	16%	2%	9%
Thailand	40%	56%	19%	31%	14%	6%	23%	0%	2%	0%	2%	0%	0%	0%	0%	0%	0%	0%	0%	6%
Vietnam	32%	34%	4%	2%	2%	0%	2%	2%	4%	5%	11%	8%	11%	14%	16%	9%	8%	3%	9%	23%
Average	31%	39%	23%	19%	6%	7%	8%	2%	5%	4%	9%	3%	4%	5%	5%	5%	4%	6%	5%	10%

Q8e	1		2		3		4		5		6		7		8		9		10	
Country	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Cambodia	26%	16%	46%	26%	3%	5%	8%	5%	3%	5%	10%	16%	3%	5%	0%	11%	0%	5%	3%	5%
Indonesia	44%	43%	5%	6%	4%	4%	2%	3%	5%	3%	4%	3%	5%	4%	8%	8%	11%	7%	13%	18%
Laos	39%	58%	23%	25%	19%	8%	13%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	6%	8%
Malaysia	10%	33%	35%	19%	5%	0%	5%	7%	25%	0%	10%	7%	0%	15%	5%	0%	5%	19%	0%	0%
Philippines	27%	29%	20%	21%	4%	7%	2%	0%	7%	7%	20%	0%	4%	4%	11%	7%	4%	11%	0%	14%
Thailand	41%	48%	29%	17%	12%	10%	9%	24%	3%	0%	3%	0%	0%	0%	0%	0%	0%	0%	3%	0%
Vietnam	33%	33%	2%	7%	1%	2%	2%	2%	5%	2%	11%	10%	11%	12%	14%	13%	9%	1%	13%	17%
Average	31%	37%	23%	17%	7%	5%	6%	6%	7%	3%	8%	5%	3%	6%	5%	6%	4%	6%	5%	9%

Phase 2 reported the highest statistics for the ‘Strongly Agree’ category for this question, which dropped drastically in phase 2, suggesting a change in opinion on this topic amongst the target countries.



Q8F: “Drink driving is a serious issue for my community”

When asked whether the respondents thought that drink driving was a serious issue for the community, a majority reported that they strongly agreed with the statement. This was highest in Indonesia and Vietnam. Very few respondents indicated that this was not a problem for their communities.

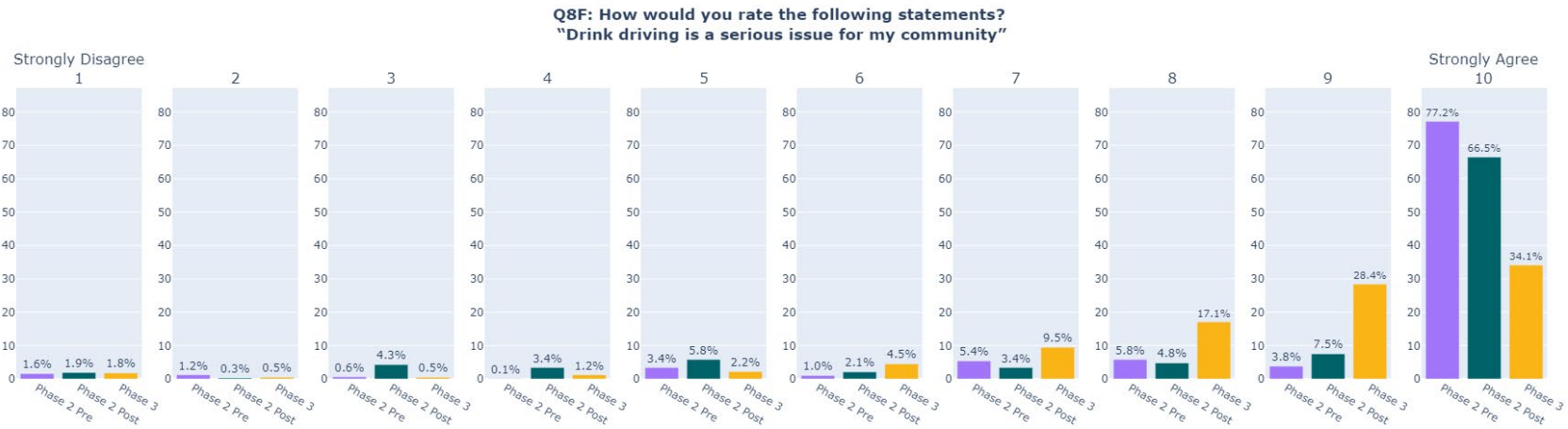
Q8f										
Country	1	2	3	4	5	6	7	8	9	10
Cambodia	0%	0%	0%	0%	4%	6%	7%	15%	43%	25%
Indonesia	10%	1%	1%	1%	1%	2%	2%	4%	9%	69%
Laos	2%	0%	0%	0%	0%	0%	12%	16%	32%	39%
Malaysia	2%	2%	0%	2%	8%	10%	13%	15%	33%	15%
Philippines	1%	0%	2%	3%	1%	10%	9%	15%	20%	38%
Thailand	0%	0%	0%	0%	0%	1%	8%	37%	27%	27%
Vietnam	6%	1%	1%	1%	3%	4%	7%	5%	12%	61%
Average	3%	1%	1%	1%	2%	5%	8%	15%	25%	39%

Older populations and women were more likely to report that this was an issue for the community; however, older individuals in Vietnam and the Philippines, and women in Vietnam, Malaysia, and the Philippines reported they strongly disagreed with the statement. More demographic information is needed to better understand the differing opinions within these groups.

Q8f	1		2		3		4		5		6		7		8		9		10	
	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30
Cambodia	0%	0%	0%	0%	0%	0%	0%	0%	4%	0%	9%	0%	13%	0%	16%	14%	36%	64%	22%	21%
Indonesia	11%	10%	2%	1%	0%	2%	1%	1%	1%	1%	2%	1%	2%	1%	4%	3%	8%	10%	70%	69%
Laos	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	12%	0%	24%	0%	24%	50%	36%	50%
Malaysia	0%	0%	0%	0%	0%	0%	0%	6%	7%	12%	7%	18%	21%	6%	7%	24%	39%	24%	18%	12%
Philippines	0%	3%	0%	0%	0%	6%	5%	3%	0%	0%	12%	3%	7%	0%	19%	6%	26%	19%	31%	59%
Thailand	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	2%	0%	12%	6%	42%	31%	26%	25%	19%	38%
Vietnam	5%	8%	1%	1%	1%	1%	1%	1%	3%	1%	5%	1%	8%	5%	7%	1%	16%	7%	54%	74%
Average	3%	3%	0%	0%	0%	1%	1%	2%	2%	2%	5%	3%	11%	3%	17%	11%	25%	28%	36%	46%

Q8f	1		2		3		4		5		6		7		8		9		10	
Country	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Cambodia	0%	0%	0%	0%	0%	0%	0%	0%	5%	0%	8%	5%	10%	11%	15%	16%	41%	42%	21%	26%
Indonesia	8%	11%	2%	1%	1%	1%	1%	1%	1%	1%	3%	1%	3%	1%	5%	4%	13%	7%	63%	71%
Laos	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	10%	0%	19%	17%	32%	33%	35%	50%
Malaysia	0%	4%	0%	4%	0%	0%	0%	4%	10%	4%	15%	7%	10%	19%	20%	11%	35%	26%	10%	22%
Philippines	0%	4%	0%	0%	0%	7%	7%	0%	0%	0%	13%	0%	7%	0%	11%	14%	27%	18%	36%	57%
Thailand	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	3%	0%	9%	10%	44%	31%	21%	31%	24%	28%
Vietnam	6%	7%	0%	2%	1%	1%	1%	1%	3%	2%	5%	0%	9%	2%	5%	4%	13%	13%	57%	67%
Average	2%	4%	0%	1%	0%	1%	1%	1%	3%	1%	7%	2%	8%	6%	17%	14%	26%	24%	35%	46%

The phase 2 pre-survey reported the highest preference for the ‘Strongly Agree’ category, with phase 3 being the lowest. Phase 3 respondents were more likely to select options between 6 to 9, however.



Q8G: “A good friend will not let their drunk friend drive”

When asked whether respondents would not let their drunk friends drink, a significant majority reported that they strongly agreed with the statement. This opinion was strongest in Indonesia and Vietnam.

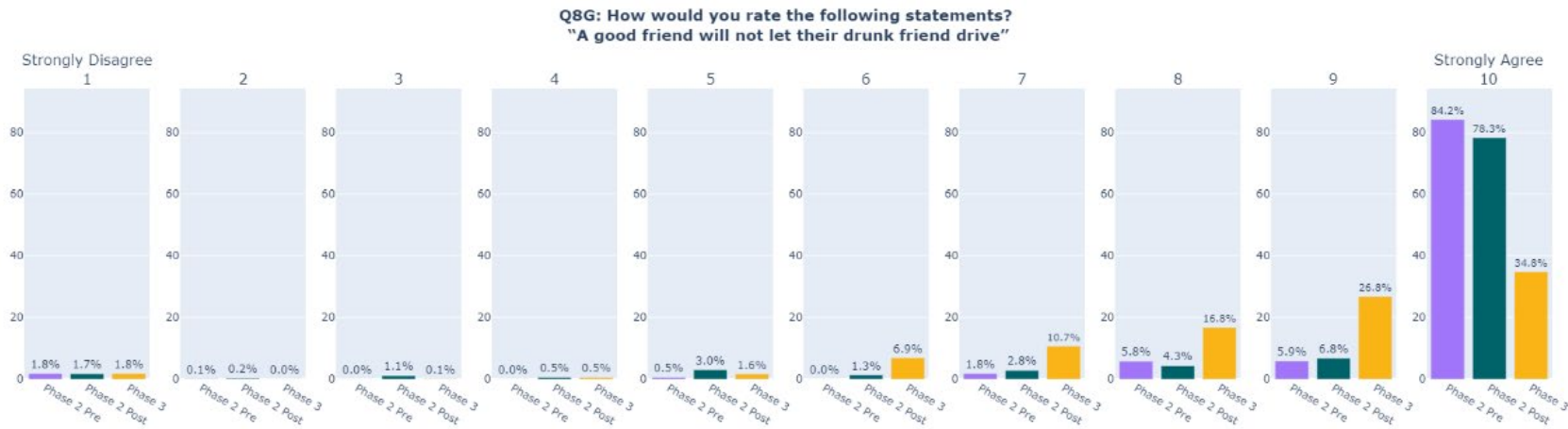
Q8g										
Country	1	2	3	4	5	6	7	8	9	10
Cambodia	0%	0%	0%	0%	0%	5%	17%	19%	40%	20%
Indonesia	6%	1%	1%	1%	1%	1%	2%	3%	8%	78%
Laos	2%	0%	0%	0%	2%	4%	16%	21%	26%	30%
Malaysia	2%	0%	0%	2%	6%	17%	8%	15%	33%	17%
Philippines	2%	0%	0%	0%	2%	11%	6%	12%	26%	40%
Thailand	0%	0%	0%	0%	0%	6%	15%	23%	24%	32%
Vietnam	4%	0%	0%	1%	2%	2%	3%	9%	10%	68%
Average	2%	0%	0%	1%	2%	6%	10%	15%	24%	41%

Older and female populations were also more likely to report this opinion.

Q8g	1		2		3		4		5		6		7		8		9		10	
	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30
Cambodia	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	9%	0%	18%	14%	18%	21%	36%	43%	20%	21%
Indonesia	6%	5%	1%	1%	1%	1%	1%	0%	0%	1%	1%	1%	2%	1%	3%	3%	8%	8%	77%	80%
Laos	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%	3%	8%	15%	25%	30%	8%	24%	17%	24%	42%
Malaysia	0%	0%	0%	0%	0%	0%	4%	0%	7%	6%	11%	29%	7%	12%	14%	12%	46%	18%	11%	24%
Philippines	0%	6%	0%	0%	0%	0%	0%	0%	0%	3%	17%	3%	5%	0%	17%	3%	31%	22%	31%	63%
Thailand	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	9%	0%	19%	13%	33%	13%	16%	31%	23%	44%
Vietnam	5%	3%	0%	0%	1%	0%	1%	2%	1%	1%	2%	1%	4%	1%	14%	1%	14%	2%	59%	88%
Average	2%	2%	0%	0%	0%	0%	1%	0%	1%	2%	7%	6%	10%	9%	18%	9%	25%	20%	35%	51%

Q8g	1		2		3		4		5		6		7		8		9		10	
Country	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Cambodia	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	8%	5%	18%	16%	15%	26%	41%	26%	18%	26%
Indonesia	7%	5%	1%	1%	1%	1%	1%	1%	1%	1%	2%	1%	4%	1%	3%	3%	8%	8%	74%	80%
Laos	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%	6%	0%	16%	25%	26%	17%	19%	25%	29%	33%
Malaysia	0%	4%	0%	0%	0%	0%	0%	4%	5%	4%	20%	19%	5%	11%	20%	7%	45%	22%	5%	30%
Philippines	0%	7%	0%	0%	0%	0%	0%	0%	0%	4%	18%	0%	4%	0%	9%	11%	31%	21%	38%	57%
Thailand	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	9%	3%	12%	21%	24%	28%	24%	21%	32%	28%
Vietnam	5%	5%	0%	0%	0%	1%	1%	2%	2%	1%	3%	0%	5%	0%	10%	6%	10%	11%	65%	74%
Average	2%	3%	0%	0%	0%	0%	0%	1%	1%	1%	9%	4%	9%	11%	15%	14%	26%	19%	37%	47%

The phase 2 pre-survey reported the highest preference for the ‘Strongly Agree’ category, with phase 3 being the lowest. Phase 3 respondents were more likely to select options between 6 to 9, however.



A 2.2.6 Q9: How would you rate this statement? If I see a friend who has been drinking or is drunk, I feel confident to stop them from driving home.

When asked if respondents would feel confident stopping friends who had been drinking from driving, an overwhelming majority indicated that they strongly agreed with the statement, with Indonesia and Vietnam reporting the strongest opinions.

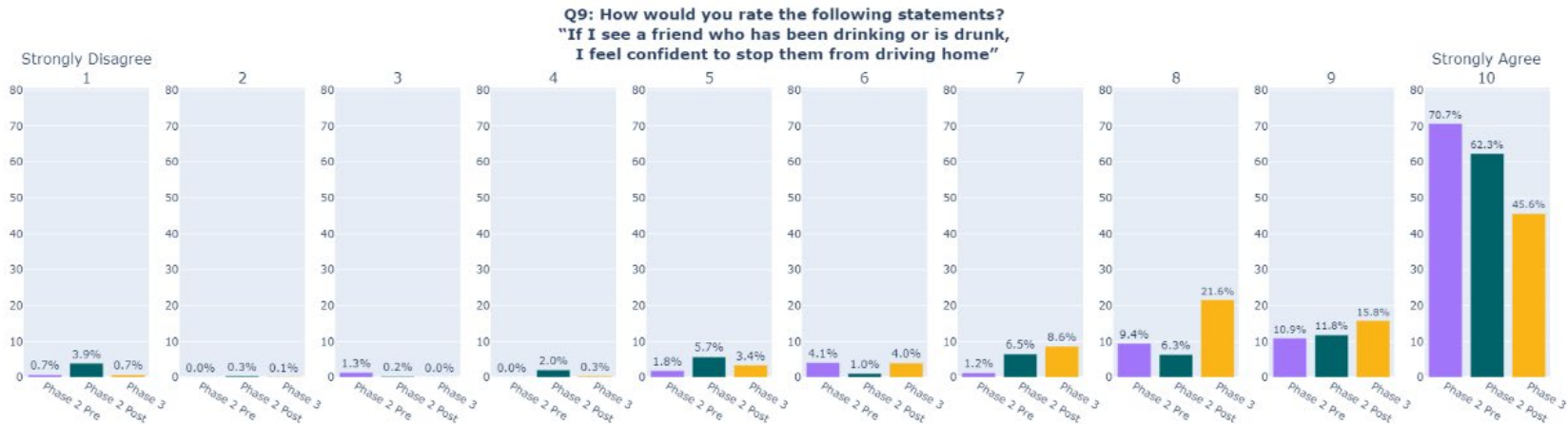
Q9										
Country	1	2	3	4	5	6	7	8	9	10
Cambodia	0%	0%	0%	0%	1%	7%	14%	17%	20%	41%
Indonesia	1%	0%	0%	0%	0%	0%	1%	2%	6%	90%
Laos	2%	0%	0%	0%	7%	2%	11%	30%	16%	33%
Malaysia	0%	0%	0%	0%	8%	2%	8%	35%	23%	25%
Philippines	0%	0%	0%	1%	2%	9%	7%	8%	13%	60%
Thailand	0%	0%	0%	0%	0%	4%	10%	30%	14%	42%
Vietnam	2%	0%	0%	1%	2%	1%	4%	8%	8%	72%
Average	1%	0%	0%	0%	3%	4%	8%	18%	14%	52%

The pattern between age group and gender is also apparent, with older and female populations reporting stronger opinions compared to younger and male groups. Only 5% of males in Malaysia responded with a strongly agree opinion and instead, selecting categories 8 and 9 with more preference. This may indicate a more realistic, situational-rooted opinion, but additional demographic data may be required to support this.

Q9	1		2		3		4		5		6		7		8		9		10	
	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30
Cambodia	0%	0%	0%	0%	0%	0%	0%	0%	0%	7%	11%	0%	18%	0%	18%	29%	16%	7%	38%	57%
Indonesia	1%	0%	0%	0%	0%	0%	0%	0%	0%	1%	0%	0%	1%	0%	2%	2%	6%	6%	89%	91%
Laos	3%	0%	0%	0%	0%	0%	0%	0%	9%	8%	0%	0%	12%	8%	33%	17%	18%	8%	24%	58%
Malaysia	0%	0%	0%	0%	0%	0%	0%	0%	7%	6%	4%	0%	11%	6%	39%	41%	25%	29%	14%	18%
Philippines	0%	0%	0%	0%	0%	0%	2%	0%	2%	0%	17%	0%	5%	0%	7%	6%	14%	6%	52%	88%
Thailand	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	5%	6%	14%	0%	40%	19%	12%	13%	30%	63%
Vietnam	2%	3%	0%	1%	0%	0%	1%	1%	3%	0%	2%	1%	4%	3%	11%	2%	10%	7%	68%	81%
Average	1%	1%	0%	0%	0%	0%	0%	0%	3%	3%	5%	1%	9%	3%	22%	17%	14%	11%	45%	65%

Q9	1		2		3		4		5		6		7		8		9		10	
Country	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Cambodia	0%	0%	0%	0%	0%	0%	0%	0%	3%	0%	13%	0%	10%	21%	15%	32%	21%	0%	38%	47%
Indonesia	0%	1%	0%	0%	1%	0%	0%	0%	1%	0%	0%	0%	1%	1%	2%	2%	10%	5%	86%	91%
Laos	3%	0%	0%	0%	0%	0%	0%	0%	6%	8%	0%	0%	16%	0%	32%	17%	13%	25%	29%	50%
Malaysia	0%	0%	0%	0%	0%	0%	0%	0%	10%	7%	0%	4%	0%	11%	55%	22%	30%	22%	5%	33%
Philippines	0%	0%	0%	0%	0%	0%	2%	0%	2%	0%	11%	0%	9%	0%	4%	11%	9%	11%	62%	79%
Thailand	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	6%	3%	6%	14%	29%	38%	18%	10%	41%	34%
Vietnam	2%	2%	0%	1%	0%	0%	0%	1%	2%	1%	1%	2%	6%	0%	8%	7%	11%	4%	70%	81%
Average	1%	1%	0%	0%	0%	0%	0%	0%	4%	2%	4%	1%	7%	7%	21%	18%	16%	11%	47%	59%

The phase 2 pre-survey reported the highest preference for the ‘Strongly Agree’ category, with phase 3 being the lowest. Phase 3 respondents were more likely to select options between 6 to 9, however.



A 2.2.7 Q10: How would you rate this statement? If I have been drinking and feel tipsy, I feel confident to say “no” to driving home myself and will choose a safer way home instead.

When asked if respondents would feel confident at saying no to driving if they had been drinking, an overwhelming majority indicated that they strongly agreed with the statement, with Indonesia and Vietnam reporting the strongest opinions.

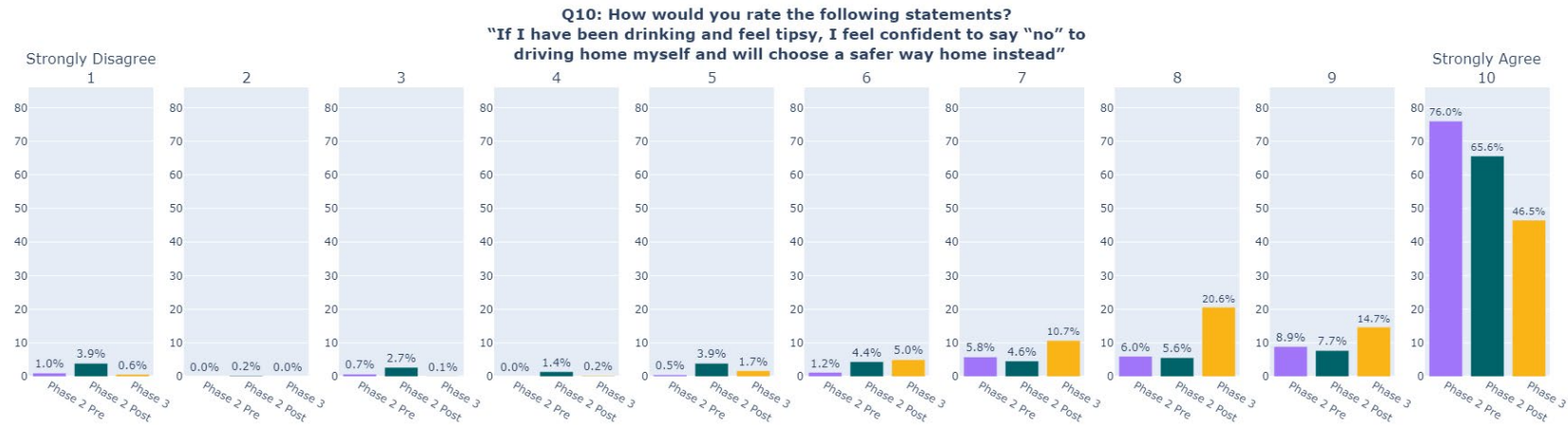
Q10										
Country	1	2	3	4	5	6	7	8	9	10
Cambodia	0%	0%	0%	0%	1%	6%	12%	21%	16%	43%
Indonesia	1%	0%	0%	0%	1%	1%	1%	3%	8%	85%
Laos	2%	0%	0%	0%	2%	0%	16%	30%	19%	32%
Malaysia	0%	0%	0%	0%	4%	12%	13%	27%	23%	21%
Philippines	0%	0%	0%	1%	2%	9%	9%	7%	12%	60%
Thailand	0%	0%	0%	0%	0%	3%	10%	32%	10%	45%
Vietnam	1%	0%	0%	0%	1%	1%	4%	5%	8%	79%
Average	1%	0%	0%	0%	2%	4%	9%	18%	14%	52%

The pattern between age group and gender is also apparent, with older and female populations reporting stronger opinions compared to younger and male groups. 0% of male Malaysians selected the strong agree category and instead, opting for categories 8 and 9 with more preference.

Q10	1		2		3		4		5		6		7		8		9		10	
Country	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30
Cambodia	0%	0%	0%	0%	0%	0%	0%	0%	0%	7%	7%	0%	20%	0%	22%	29%	9%	7%	42%	57%
Indonesia	2%	0%	0%	0%	0%	0%	1%	0%	0%	1%	0%	1%	1%	1%	4%	3%	9%	7%	82%	88%
Laos	3%	0%	0%	0%	0%	0%	0%	0%	3%	0%	0%	0%	15%	17%	33%	17%	21%	17%	24%	50%
Malaysia	0%	0%	0%	0%	0%	0%	0%	0%	0%	12%	11%	18%	11%	18%	36%	24%	29%	18%	14%	12%
Philippines	0%	0%	0%	0%	0%	0%	2%	0%	2%	0%	17%	0%	7%	0%	5%	3%	14%	9%	52%	88%
Thailand	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	2%	6%	14%	0%	44%	19%	7%	13%	33%	63%
Vietnam	2%	1%	0%	0%	0%	1%	0%	0%	1%	0%	2%	0%	5%	2%	7%	0%	11%	3%	72%	92%
Average	1%	0%	0%	0%	0%	0%	0%	0%	1%	3%	6%	4%	10%	5%	22%	13%	14%	11%	46%	64%

Q10	1		2		3		4		5		6		7		8		9		10	
Country	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Cambodia	0%	0%	0%	0%	0%	0%	0%	0%	3%	0%	8%	0%	13%	21%	21%	32%	13%	0%	44%	47%
Indonesia	1%	1%	0%	0%	1%	0%	0%	1%	2%	0%	2%	0%	1%	1%	5%	3%	13%	6%	75%	88%
Laos	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	13%	17%	35%	17%	19%	25%	29%	42%
Malaysia	0%	0%	0%	0%	0%	0%	0%	0%	10%	0%	10%	15%	15%	15%	35%	19%	30%	22%	0%	30%
Philippines	0%	0%	0%	0%	0%	0%	0%	0%	2%	0%	16%	0%	9%	0%	4%	4%	11%	11%	58%	86%
Thailand	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	6%	0%	6%	14%	32%	41%	12%	7%	44%	38%
Vietnam	2%	1%	0%	0%	0%	1%	0%	0%	1%	1%	2%	0%	6%	1%	6%	2%	10%	6%	75%	87%
Average	1%	0%	0%	0%	0%	0%	0%	0%	2%	0%	6%	2%	9%	10%	20%	17%	15%	11%	46%	60%

The phase 2 pre-survey reported the highest preference for the ‘Strongly Agree’ category, with phase 3 being the lowest. Phase 3 respondents were more likely to select options between 6 to 9, however.



A 2.2.8 Q11: What are the most common signs that someone is drunk? (Check all that apply)

Most respondents correctly selected the common signs that someone is drunk. Less than 1% scored 0/5. Only Indonesian and Vietnamese respondents scored 0 points. All respondents in Cambodia and Thailand scored at least 2 points, suggesting that these populations are better able to recognise the signs of being drunk. Laos had the highest success rate whilst Indonesia scored lowest with Thailand in second place, suggesting more education is required in these countries.

Q11 Correct Answers						
Country	0	1	2	3	4	5
Cambodia	0%	0%	4%	46%	14%	37%
Indonesia	0%	12%	9%	26%	32%	22%
Laos	0%	4%	5%	21%	25%	46%
Malaysia	0%	8%	19%	21%	12%	40%
Philippines	0%	12%	17%	13%	19%	38%
Thailand	0%	0%	4%	37%	32%	27%
Vietnam	1%	19%	6%	14%	17%	42%
Average	0%	8%	9%	25%	21%	36%

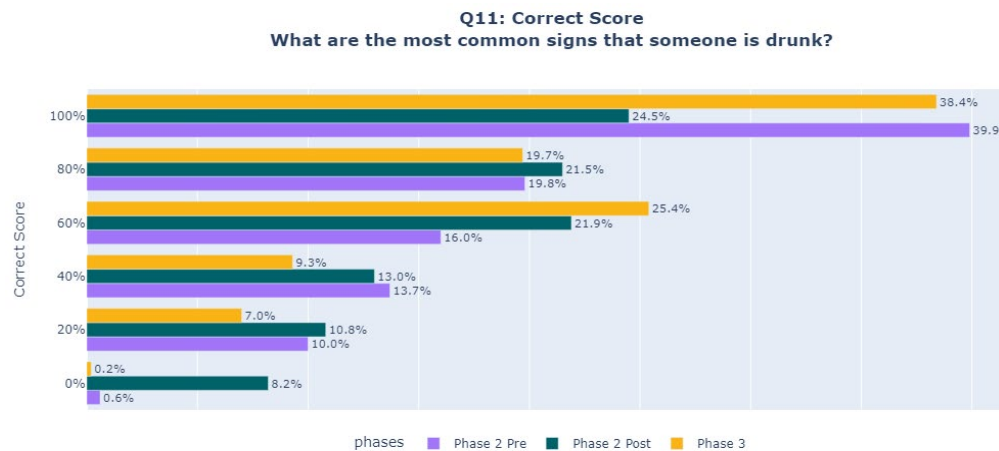
The younger age group was more educated on the signs of being drunk than older populations. Approximately 3% of older respondents in Vietnam scored 0 points, whilst no respondent in any country scored 0 from the younger age group. Younger Indonesians scored poorly compared to other younger respondents in other countries, with only 19% getting all correct answers, suggesting more education is required for this demographic.

Q11	0		1		2		3		4		5	
	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30	< 30	> 30
Cambodia	0%	0%	0%	0%	2%	0%	47%	36%	16%	29%	36%	36%
Indonesia	0%	1%	11%	12%	9%	8%	29%	23%	32%	32%	19%	25%
Laos	0%	0%	6%	0%	9%	0%	15%	42%	21%	25%	48%	33%
Malaysia	0%	0%	0%	12%	18%	24%	25%	12%	7%	18%	50%	35%
Philippines	0%	0%	10%	9%	17%	9%	17%	13%	14%	25%	43%	44%
Thailand	0%	0%	0%	0%	5%	0%	30%	31%	33%	38%	33%	31%
Vietnam	0%	3%	20%	18%	6%	8%	16%	11%	18%	14%	41%	45%
Average	0%	1%	7%	7%	9%	7%	26%	24%	20%	26%	39%	36%

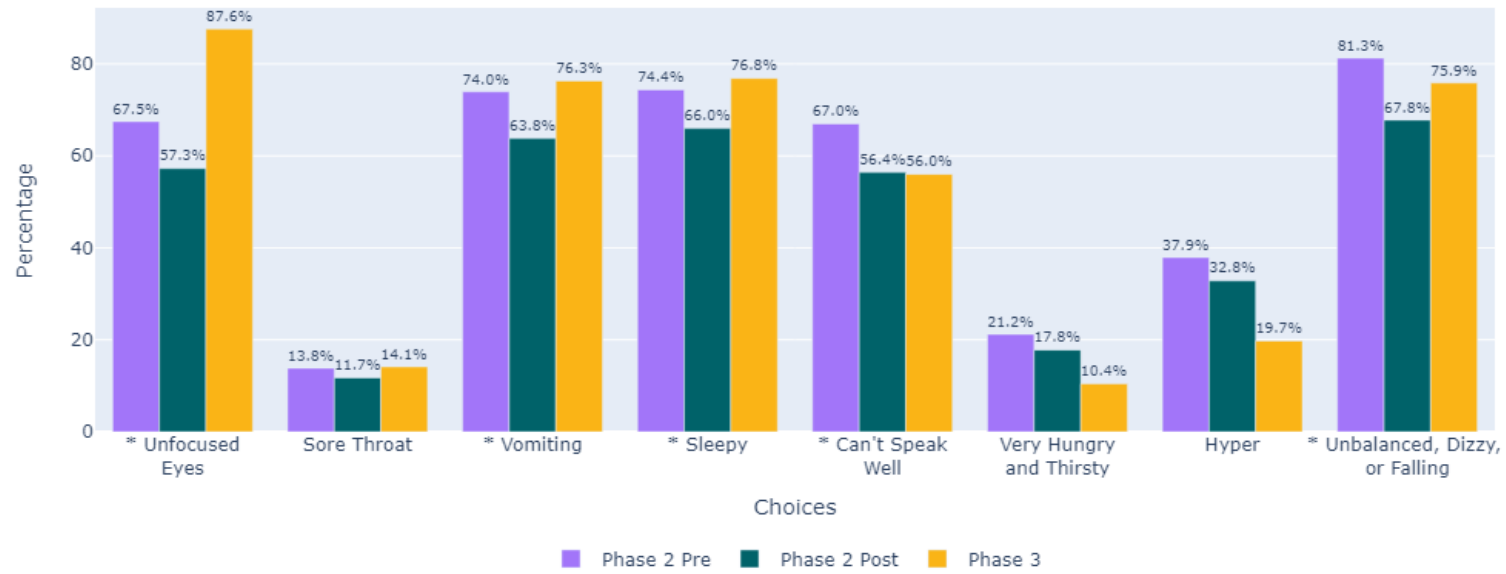
There appears to be little to no difference between genders on how well a respondent would score for this question.

Q11	0		1		2		3		4		5	
Country	M	F	M	F	M	F	M	F	M	F	M	F
Cambodia	0%	0%	0%	0%	3%	0%	49%	32%	23%	11%	26%	58%
Indonesia	1%	0%	10%	12%	7%	9%	22%	27%	41%	29%	19%	23%
Laos	0%	0%	6%	0%	6%	8%	19%	33%	23%	17%	45%	42%
Malaysia	0%	0%	5%	4%	20%	19%	15%	30%	15%	11%	45%	37%
Philippines	0%	0%	11%	7%	16%	7%	11%	18%	16%	25%	47%	43%
Thailand	0%	0%	0%	0%	6%	0%	32%	28%	32%	41%	29%	31%
Vietnam	1%	1%	21%	15%	7%	6%	13%	17%	18%	13%	40%	48%
Average	0%	0%	8%	6%	9%	7%	23%	26%	24%	21%	36%	40%

The phase 2 post-campaign survey reported the highest rate of respondents who did not select any correct responses, compared to the sub 1% for the phase 2 pre-survey and phase 3 survey. More phase 2 pre-survey respondents got all answers correct compared to phase 3, however. The spread in which choices were selected amongst the 3 surveys was approximately even. The largest difference was in the ‘unfocused eyes’ choice, which the majority of phase 3 respondents selected, compared to the 57% of respondents in the phase 2 post-campaign survey.



Q11: Which signs of drunkenness were identified most often?
 * Correct answers have an asterisk



A 2.2.9 Q12: How does alcohol affect your driving?

Additional filtering was carried out for this question to exclude responses from individuals who selected more than one answer. Only one answer should have been selected. The majority of included respondents correctly identified how alcohol affects a person's driving ability. Thailand had a 100% success rate. A large proportion of individuals in Malaysia incorrectly reported that alcohol had no effect on driving ability. This was under 9% in all other countries.

Q12			
Country	Improves Driving Ability & Confidence	No Effect on Driving Ability	Slows Reactions & Judgement
Cambodia	0%	4%	96%
Indonesia	8%	7%	85%
Laos	2%	2%	96%
Malaysia	10%	23%	67%
Philippines	0%	9%	91%
Thailand	0%	0%	100%
Vietnam	5%	5%	91%
Average	4%	7%	89%

Older Malaysian's were more likely to select the incorrect answers to this question compared to older respondents in other countries, who were also more likely to select the correct answer to this question compared to their younger counterparts, excluding Malaysia.

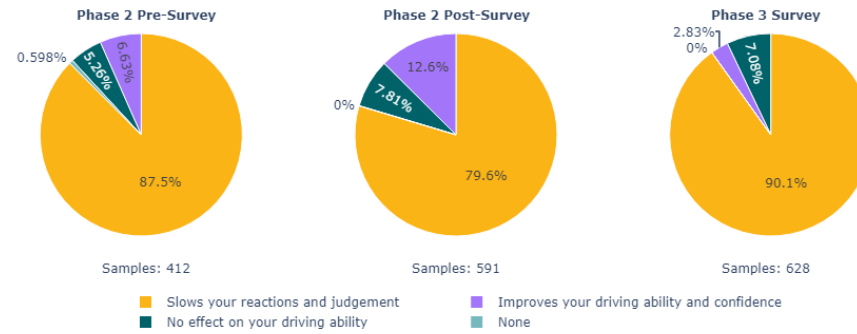
Q12	Improves Driving Ability & Confidence		No Effect on Driving Ability		Slows Reactions & Judgement		
	Country	< 30	> 30	< 30	> 30	< 30	> 30
Cambodia		0%	0%	7%	4%	93%	100%
Indonesia		11%	4%	10%	0%	78%	92%
Laos		3%	0%	0%	19%	97%	100%
Malaysia		8%	19%	16%	0%	76%	63%
Philippines		0%	0%	10%	0%	90%	100%
Thailand		0%	0%	0%	4%	100%	100%
Vietnam		4%	6%	4%	4%	92%	90%
Average		4%	4%	7%	0%	90%	92%

Women were more likely to select the correct answer compared to male respondents in Cambodia, Laos, Malaysia, and The Philippines. Male Malaysian's were more likely to select that alcohol had no effect on driving ability, whilst women in Indonesia, Malaysia, and Vietnam selected that alcohol improved driving ability.

Q12 Country	Improves Driving Ability & Confidence		No Effect on Driving Ability		Slows Reactions & Judgement	
	M	F	M	F	M	F
Cambodia	0%	0%	8%	6%	92%	100%
Indonesia	3%	9%	9%	0%	87%	84%
Laos	3%	0%	0%	16%	97%	100%
Malaysia	11%	12%	22%	0%	67%	72%
Philippines	0%	0%	4%	0%	96%	100%
Thailand	0%	0%	0%	1%	100%	100%
Vietnam	3%	8%	4%	3%	93%	91%
Average	3%	4%	7%	0%	90%	92%

Comparing against past surveys, phase 3 shows a noticeable improvement in the number of respondents who correctly identified how alcohol affects driving ability, compared to the phase 2 post-campaign survey rate. Fewer individuals also selected that alcohol doesn't impact driving ability at all, which suggests a change in opinion on the topic.

Q12: How does alcohol affect your driving?



Annex 3 The Power of No Brief

The PON is the result of a small team located in the Automobile Association of Vietnam, with the support of a team of the communication agency Ores, also based in Vietnam (Ho Chi Minh). The project began in June 2021, first in six target countries, while Indonesia was added in 2023. In 2021 the initiative reached 18.5 million persons, in 2022 5.6 million, in 2023 2.8 million, reflecting a gradually reduced ad spending budget.

The first year was dedicated to understanding the basic characteristics of the target population, and its responses to the ads in terms of average engagement rate, average click-through rate, and likes, comments, clicks, & shares. It enabled the initiative to begin to understand the importance of attract- ing engagement.

The annual report for year 2 stated ‘While the beginning of the PON, we pushed a lot of content to earn awareness about the campaign, in the second half year, we used a pull strategy with a mission to create engagement with our target audience’. This was based in particular around the photo contest called ‘Friends don’t let friends drive drunk’, describing creatively how participants would you ‘trick’ them not to, involving their friends in the photo shoot process, and thinking critically about their habits after drinking.

The phase 3 campaign launched “Riley” as the official mascot embodying the campaign’s core val- ues. Riley is the model of a young adult with a diverse group of friends who educates people about road safety. The person chooses to stay sober and look out for his/her friends, with a mission is to promote responsible behaviour. This complements the continued ad campaign using the Facebook digital platform, as was done in previous years.

The Theory of Change for the initiative was drawn up in year 1, in the following manner:

Baseline Situation: Road crashes are the #1 killer of young people, and the eighth leading cause of death worldwide. Alcohol is estimated to be a contributory factor for 1 in 3 fatal collisions. Young people are disproportionately more likely to be involved in an alcohol-attributable crash, and Southeast Asia has particularly high rates of drink-driving (especially Cambodia, Laos, Malaysia, Philippines, Thailand, and Vietnam).						
Vision: Young adults will see responsible behaviors around drink driving as ‘trendy’, understand their legal obligations, stop drink driving themselves, and contribute to changing community norms around drink driving.				Target Group: Young adults 18-30 in Cambodia, Laos, Malaysia, Philippines, Thailand, and Vietnam		
Our Plan			Our Expected Results			
	Inputs	Activities	Outputs	Outcomes		
				Change in Awareness	Change in Attitude	Change in Action
Phase 1: Reach & Awareness	<ul style="list-style-type: none"> Funds from APISWA Partnerships with Auto Associations, APISWA Market Teams, and local NGOs Connections to government, media, and community organizers Ores expertise in digital campaign design and TVC production AAV expertise in road safety and community engagement APISWA experience in DD campaigns High digital participation rates for young people 	<ul style="list-style-type: none"> Partner with Auto Associations and local organizations to establish stakeholder network Produce high-quality TVC, with adaptations for each market Create 6 Facebook pages, tailored to each country’s language and context, with regular posts Build simple webpage including FAQ and partner info Partners support campaign with re-posts, media & government connections Conduct post-survey assessing ad recall and message agreement Collect reach, engagement, and media metrics 	<ul style="list-style-type: none"> Young people exposed to nonjudgmental advice about avoiding drink driving dangers Young people receive new tips about planning for nights out, legal restrictions, saying no to peer pressure, and talking to friends/family about drink driving Young people and community comment on FB pages to share reactions Partners and local organizations gain reputation and connections with each other Government and media partners gain high-quality collateral and talking points related to drink driving 	<ul style="list-style-type: none"> Fresh curiosity to re-think how safe they feel after a night out Feel recognized and valued, without judgment about drinking Understand that some ways home are safer than others 	<ul style="list-style-type: none"> Believe that a safe journey home can be guaranteed Motivated to participate in this change Believe that their choices will be respected by peers 	<ul style="list-style-type: none"> Prefer to have their ride home sorted before going out Vocalize when they feel unsafe Discuss drink driving topics casually with peers
Phase 2: Knowledge & Behavior	<p><i>In addition to P1...</i></p> <ul style="list-style-type: none"> Established Facebook presence and website presence across all 6 markets Established community partners Post-survey lessons on ad recall and message agreement Phase 1 lessons on FB ad costs, paid media coverage, and content design 	<ul style="list-style-type: none"> Host Photo Contest on social media where citizens express why drink driving is an important issue for them Recruit international judging panel to select winners Partners support campaign with re-posts & connections Conduct pre- & post-survey assessing change in KAB; collect reach, engagement, and media metrics 	<ul style="list-style-type: none"> Young people incentivized to think critically about drink driving and use their voice Young people receive new information about legal restrictions, consequences, and strategies to get home safe Young people share hundreds of photos and stories with their personal perspective Community reacts and shares messages Partners gain valuable insight into audience plus collateral for future PACs 	<p><i>In addition to P1...</i></p> <ul style="list-style-type: none"> Feel personally moved by peers’ stories Feel surprised about legal restrictions and consequences of drink driving Consider drink driving messages memorable 	<p><i>In addition to P1...</i></p> <ul style="list-style-type: none"> Believe they play a role in spreading DD avoidance information to peers See themselves as having a role in changing culture 	<p><i>In addition to P1...</i></p> <ul style="list-style-type: none"> Actively check-in with themselves and peers about intoxication level after drinking Discuss DD laws and consequences with peers
Impact	<p><i>Inferred</i></p> <ul style="list-style-type: none"> Young people feel empowered to say ‘no’ to drinking if they have driven, or make a plan to get home safely if they have been drinking. Young people have a plan to get home safely every time they go out drinking. Young people intervene if a peer is about to drink and drive. 			<p><i>Observed</i></p> <ul style="list-style-type: none"> # reached, # views, # video play rate, avg. length of video viewed, # likes, # comments, # shares, # web users, # page views, % ad recall, % message agreement # articles published, # media outlets covered, # media impressions, # partners engaged % change in knowledge, attitude, and behavior Change in # drink-driving tickets/accidents/deaths (as available) 		



The tone and presentation of the initiative received considerable care. In Phase 1, the team found that posts which included a GIF or video clips tended to perform better with engagement metrics (likes, comments, clicks, shares). Furthermore, posts with shorter captions tended to outperform posts with longer captions for both reach and engagement. This lesson was incorporated in the following years with noticeably higher engagement rates over time across all countries (reaching 26.66% in Malaysia or 17.2% in Philippines in 2023).

After Phase 1, feedback from partners indicated that while effective for addressing alcohol, the PON could also address ‘irresponsible driving’ more generally. This concerned the emerging issue of driving while under the influence of drugs, as well as irresponsible behaviour such as peer pressure, hungover driving, and abandoning drunk friends. Over time posts shared tips on planning ahead before driving, regardless of whether the day includes alcohol or other substances. The tone remained youthful, upbeat, and nonjudgmental. This tone resonated with young people in all target markets as evidenced through page comments, shares or tagging friends, and post-campaign survey responses, often including jokes, smiling, or laughing emojis, and positive-coded language in reaction to the campaign.

Annex 4 Debates & Theory

Power of No is an educational campaign in the broadest sense, intended to change behavior around drinking and driving. While the overall utility of education cannot be disputed, there has been considerable debate about the ability of education-based interventions to change health-related behavior. This section provides a brief overview of different perspectives, a theoretical framework around changing behavior, and the emerging evidence around harnessing the power of social media for health promotion interventions.

The effectiveness challenge

The debate around the effectiveness of educational measures stems primarily from tension between two opposing views on how impact is measured and what constitutes evidence [1, 2]. Critics argue that education-based approaches fail to meet the standards laid out in the traditional hierarchy of evidence based on controlled experimental design used in the natural sciences and so-called “evidence-based practice” [3-5]. Concerns revolve around the small scale of individual studies and effect sizes and the variability in measured outcomes that make pooling results for meta-analyses and generalization of findings difficult [6]. Because of these challenges, educational interventions are excluded from the World Health Organization’s global initiatives aimed at reducing harmful drinking [7, 8].

The trajectory from knowledge to behavior change is never straightforward and rarely linear. Outcomes are often “soft” and not easily quantifiable. The success of such interventions depends on variables that are difficult to control and are specific to situations, contexts, and the specific needs of target populations. It has been argued that “weight of evidence” criteria that have been applied to clinical trials and controlled experiments are an inappropriate benchmark for measuring human behavior, and that such criticism is misplaced [9-11].

Practitioners would argue that educational interventions are an example of “practice-based evidence” that is informed as much by experience as it is by formal evaluation. They emphasize the importance of taking into account variables like culture and context, and the need for tailoring approaches to meet the needs of specific target audiences.

The intervention – behavior trajectory

Several explanatory frameworks attempt to capture the trajectory from education to behavior change. Each focuses on a somewhat different aspect of the relationship and all are equally valid. The Knowledge-Awareness-Behavior (KAB) model [12] offers a useful theoretical underpinning for the *Power of No* campaign as it recognizes that behavior change is a gradual progression. The delivery of information translates into improved knowledge. As knowledge grows, attitudes begin to change and as these accumulate, behavior also changes.

The delay between intervention and outcome is viewed by critics of educational approaches as a weakness. However, the discrete intermediate steps involved are actually a strength and can be used as a tool for improving delivery and for measuring progress. Knowledge, awareness, attitudes, and behavior are all discrete and valid goals in their own right as well as steps along a common pathway. Each offers an access point for improving intervention design and delivery and each can be independently assessed and used to measure progress.

Many health promotion and other interventions rely on the KAB model [13] with the recognition that accumulated knowledge and raised awareness are important steps towards behavior change.

Increased awareness, in particular, appears to be the critical element [12]. The KAB framework has been used as a basis for smoking cessation campaigns with emphasis on awareness raising about potential health risks [14]. A higher level of knowledge about tobacco and cancer has been found to be significantly associated with positive attitudes towards smoking cessation. KAB-based initiatives in the field of nutrition have been used to address issues like obesity, self-management of diabetes and hypertension [15-17], to improve health literacy and practices among the general population [18, 19], and to train professionals [20].

Reaching the audience

Behaviors like drinking, smoking, dietary practices, and physical activity are embedded in everyday life and shaped to a large degree by social and cultural norms. They are also modulated by individual variables that include socioeconomic factors, social stigma and prevailing belief systems, and the variable receptiveness of target audiences to different messages [21-24]. While some individuals are motivated to change their behavior by perceptions of future reward [25], others are more likely to be motivated by fear-based communication [12].

Therefore, careful tailoring and individualization are required for campaigns designed to change behavior. Ironically, it is the very lack of standardization that is identified by critics as a shortcoming because it makes the use of common metrics and aggregated outcomes across individual evaluations difficult if not impossible.

The goals and target audience of the *Power of No* campaign are narrowly defined and tailored to fit this purpose. Because it addresses young people between 18 and 30 years, delivery relies on social media platforms that are widely used across the ASEAN region by the target age group. This delivery method is also amendable to positive messages around improved wellbeing and taking control of one's own behavior and health outcomes.

While social media campaigns aimed at changing health-related behaviors are relatively new compared with other mass media channels, there is an emerging body of evidence indicating that the approach has several advantages over other more traditional approaches. Social media have a wide reach that can be segmented by target population. This allows campaigns to be delivered to a large audience in a cost-effective manner [26] and allows careful allocation of sparse resources [27, 28]. The social influence of these platforms is significant and social media have been shown to shape attitudes, and have the ability to fundamentally shift perceptions, and opinions [29]. Another powerful aspect of social media is the ability to leverage the online community in delivering help to those seeking it. Social media can easily deliver what's needed at the right moment in time. However, evidence also suggests that the use of social media campaigns may require some traditional assumptions about how behavior change occurs to be challenged [30]. Because of their communal and interactive nature, social media platforms require active engagement by audiences. These can take the form of "shares", "likes" and direct audience interaction that may require a new evaluation framework to assess impact. A new explanatory model for social media-based campaigns has been proposed that is circular rather than linear, with earlier steps influencing and reinforcing those that come later [30]. However, the underlying foundation remains the interaction between knowledge, awareness building, and behavior change.

Another important consideration that, ironically, is viewed by critics as a weakness in educational initiatives, is that they are not one-size-fits-all approaches but require tailoring to account for cultural context, setting, social norms around different behaviors, and the receptiveness of target audiences for particular messages. When appropriately framed and delivered, their chances of changing behavior are improved.

For example, socioeconomic factors or social stigma around certain health conditions and behaviors present obstacles to communicating about risk and the likelihood that attitudes and consequently behavior will change. The degree of receptiveness among target audiences to the messages delivered also affects the likelihood of success [31] and requires efforts to overcoming widely held health beliefs and views about normative behavior.

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