

**Marketing inputs to assist
the development of health warnings
for tobacco packaging.**

**For: Ministry of Health
By: Clemenger BBDO
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Purpose:

Ministry of Health is working through a process to produce effective health warnings required for the review of the Smoke-free Environments Regulations 1999.

To assist and inform the third [final] stage of a testing and review process, the Ministry is seeking marketing inputs into the development of a range of messages for tobacco packaging. This paper is produced to assist through the following:

1. Identifying influential contextual marketing influences and considerations
2. Identifying the potentially most useful sorts of themes and messages [both positive behaviour encouragement and reinforcement and negative consequences]
3. Best use of information space opportunities on packaging
4. 20 best messages for pre-testing
5. Likely effective life of these messages.

Sources consulted:

- Review of Smoke-free Environments Regulations 1999 - Consultation document, July 2004
- Smoking Health Warnings Studies: BRC Research - May & August 2004
- Developmental Research for New Australian health Warnings on Tobacco Products, Stages I & II: Elliott & Shanahan Research - September 2002 & August 2003 [and background paper]
- Tobacco Control Programme: Health Canada - August 2004
- Influence on smoking behaviour and perceptions of cigarette packaging in New Zealand: Ministry of Health - May 2004
- Impact of graphic warning labels on adult smoking behaviour: Tobacco Control [Canada] - 2003
- Evidence and Issues in Tobacco labeling Policy: International Tobacco Control - September 2004
- International social marketing cases studies - USA & UK
- SPARC behaviour change research summary - 2004
- Fear and Threat Appeals. A comparison of Warning Images: Massey University Department of Marketing - 2004
- New Zealand social behaviour research: Clemenger BBDO/State of Mind
- Clemenger BBDO behaviour change social marketing case studies
- International web search.

Background and key issues:

Smoking is a habit that few people do not have a view on. It remains the largest single cause of preventable illness in New Zealand and contributes largely to the country's top causes of death- coronary heart disease and cancer. Although smoking has gradually declined over the last 20 years, there are still population segments where prevalence is static or growing. The problem is not that people are unaware of the dangers of smoking, in fact, it's the opposite. Smokers know the consequences of continuing to smoke. The barrier to stop is one of attitude.

International studies conclude that while smokers acknowledge that smoking is a major health risk, they underestimate the range, magnitude and severity of health effects. Yet, over 40% of smokers in international studies state that they 'intend to quit smoking in the next 6 months'. The imperative therefore is to find the tipping point that will move people beyond contemplation to action.

In terms of being an important 'brand contact point', the tobacco package is an integral part of tobacco marketing. The package communicates brand imagery and product information, and is regarded as a primary communications channel in targeting specific audiences; part of a smoker's identity and self-statement. With restrictions on tobacco products' advertising, promotion and sponsorship activities, the packaging, by default, has increased its importance as a marketing communications channel. This is particularly true, given the use and exposure of packaging and messages at time of purchase and behaviour.

Smokers acknowledge awareness of warnings on tobacco products' packaging; in particular, those messages featuring vivid depictions and strong warnings. Awareness levels are highest amongst research participants who are most determined to quit smoking [particularly women], suggesting an increased receptiveness to messages that could help achieve a successful outcome.

The result of these factors is the genuine contest for message dominance on packaging; this most critical piece of marketing real estate.

The issues are clear:

1. Which messages work best?
2. What's the best method of communicating with them [visual, text, combinations]?
3. What's the optimum balance between comprehensive warnings and package design?

1. Influential contextual marketing influences and considerations:

- Social marketing communications programmes have increased considerably over recent years. In the eight years to 2004, measured public service advertising spend increased + 43% [alcohol + 24%; financial services + 32%; automotive + 43%; retail + 55%]. Not surprisingly therefore, research confirms that people are a bit cynical and becoming intolerant of advertising messages from 'government organisations' about how to behave, and what they oughtn't and shouldn't do. Engagement and interest only occur when the messages have personal relevance and there's a clear link to some greater good.
Clemenger BBDO qualitative research confirms that advertising and promotional messages alone can't make people do or not do anything....all they can ever do is persuade people to think about the issue, evaluate their options and take away barriers.

Implication: messages on tobacco packaging have no opportunity to connect with and recall more explicit and engaging themes from mainstream communications. This is in direct contrast with most marketing communications where each 'brand contact' point has the potential to provide a multiplier effect on a central core message.

- Clemenger BBDO experience has identified three key drivers affecting behaviour change through social marketing programmes:

New information:	Facts Figures Physics Physiology	<i>"I hadn't thought of it like that before"</i>
Personal relevance	Me My family My community	<i>"This affects me and mine."</i>
Consequences	Social Relationships Independence Livelihood Personal	<i>"To avoid this, I need to do something about my current behaviour."</i>

- The various theories and models of social change normally depict behaviour change as a linear process; moving from awareness of an issue to affirming and reinforcing behaviour change through a logical sequence of stages.

Clemenger BBDO research shows that behaviour change is not linear; people are at different places at different times. They move forwards, go backwards, or jump stages. They behave differently, think differently, get their information from different sources, and process that information in different ways.

Implication: a single message is not going to work for everyone.

- Segmentation is useful. Most successful marketing programmes target specific audiences identified by demographic or psychographic criteria.

In social marketing, there are four broad segments that reflect responses to communications:

<p style="text-align: center;">Rejecters</p> <ul style="list-style-type: none"> - Don't believe it - Won't happen to me - Not my issue - I'll do it my way thanks! 	<p style="text-align: center;">Excusers</p> <ul style="list-style-type: none"> - Not for me ... <i>now</i> - Not for me ... <i>because</i> - Not for me ... <i>unless</i>
<p style="text-align: center;">Deciders</p> <ul style="list-style-type: none"> - Might do something... <p><i>Self-interest</i> <i>External pressures</i> <i>Social responsibilities</i></p>	<p style="text-align: center;">Changers</p> <ul style="list-style-type: none"> - Persuade me... - Show me... - Make it OK...

Implication: for tobacco packaging messages to be potentially engaging and relevant to particular segments, messages require to be expressed in the most appropriate manner and communicated via the correct channels. Given the current production constraints this poses a problem; for example, 'smoking while pregnant' messages are clearly targeted to young women, but will appear on cigarette brands' packaging with inappropriate user profiles.

- Many social marketing messages rely heavily on emotion.

Clemenger BBDO research has indicated that only presenting emotional arguments can create opt-outs. Facts, figures and physiology can be powerful, particularly to create context or give the issue profile.

Implication: Facts can increase personal relevance ... 'this could happen to me!' Facts don't/can't lie, but they do require careful expression.

- The allure of tobacco is due to powerful biological and social factors. Nicotine is an addictive drug, a fact acknowledged by the tobacco industry and widely accepted in scientific communities. Its addictiveness has been compared to other hard drugs, a distinction which makes it unique among legal consumer products.

Implication: for these reasons, despite positive intentions to quit, it is very difficult to 'un-sell' tobacco use to current smokers.

- The majority of people who smoke experience few noticeable side effects. [At least nothing serious enough to motivate quitting en masse.] Most people not only lack the motivation to quit, they are also extraordinarily adept at creating loopholes to escape anti-smoking messages. An analysis of international case study research [AMV/BBDO London] indicates three main loopholes.
 1. Smoking is just one of the many risks in life. [Smokers make a distinction between immediate risks, 'personal' reasons for quitting smoking, and more remote 'official' reasons such as longer term health risks which to them, seem less relevant.]
 2. The risks are too far in the future to worry about now. [Most smokers - particularly younger smokers - have no meaningful sense of their own mortality and live very much in the here and now.]
 3. Anti-smoking messages are redundant - everybody knows smoking's bad for you.

Implication: to be effective, the anti-smoking message must have personal relevance and feel like 'new news'.

- Tobacco is deeply ingrained in the New Zealand culture. Smoking habits are established early. Although statistics are vague, there is sufficient information to be confident that the catalyst to use of tobacco occurs at a young age. This is reflected in the fact that 90% of smokers start smoking before their 18th birthday. Very few people begin smoking after that age, a point that makes young smokers in particular, a vital market for Smoke-free campaigners to pursue.

Despite, and possibly assisted by the withdrawal of tobacco brand marketing [except price promotion at point-of-purchase], cigarette smoking still has connotations of 'rebelliousness' and 'cool'.

Implication: these are elements that have some broad appeal, but hold particular allure for the adolescent market, where they reflect the right-of-passage behaviours that define what it means to be young.

- Habitual behaviour can become established within a few years of starting the smoking behaviour. If the majority of people start smoking before they're 18 years old, there is a relatively small window of opportunity to dissuade them from continuing the habit into their adult lives.

Implication: this requires a different set of messages from those targeted to an older group.

- Amongst younger smokers, 'control' or 'empowerment' messages generally fail because what this group lacks is meaningful, relevant motivation to quit and many of this young group do not believe that they're addicted.

Implication: while there's a role for messages communicating the serious health risks of smoking, a 'fear testimonial' message alone doesn't block off enough loopholes [very few young people die from smoking related illnesses].

- Amongst young women, there's been some work done internationally to identify the most potent anti-smoking propositions through isolating and leveraging some potent core fears. The work has relevance for New Zealand. Young women respond best to messages that offer - or seem to offer - an informed choice. This is part of their assertion of independence and their rejection of anything that comes from people who patronize them and couldn't possibly understand what it means to be them. Their appearance [and from this, positive self-esteem, boys, sex and peer group acceptance] is their key preoccupation. They're extremely concerned with their appearance. This includes makeup, skincare, clothes, hair, and physical fitness. They are 'information hungry' and are content to read, listen to, watch pictures, information and detail to discover what's new in the world of overall image creation. The popularity of the 'make-over' TV shows is testament to this desire for immediate desirability.

Implication: young women's positive associations with smoking [aside from peer group acceptance] are mainly to do with appearance. This insight provides some clear opportunities for appropriate and relevant messages.

- Attempts at reducing tobacco prevalence and consumption based on future health consequences are difficult, particularly with young people. Most of this demographic believe that they are, at least to some extent, invincible. Additionally, messages depicting social consequences can backfire. People often disprove the claims based on their own experience [that is, '...if smoking really is so off-putting to others, why are some of the most popular people I know, heavy smokers?'].

Implication: the attitude 'if you can't see it, you don't need to worry about it' has clear communications guidelines.

- The greatest resource volunteered as required to quit by smokers, is individual willpower. Smokers willing to quit generally suggest that they'll get around to it in their own way and in their own time. Focusing on negative aspects of damage done to one's health has been shown to create anxiety and therefore heightens the rejection of messages. The use of positive messages has been proven to relax the message recipient and increase the engagement with the message.

Implication: use of an unexpected approach [contrasting with predictable, hard-hitting health warnings] has positive benefits, provided it doesn't trivialise what is seen as a serious matter.

- Heavy smokers who are consciously attempting to quit, strongly reject any light-hearted concepts. They are more likely to seek empathy for what they concede is an addiction, and look for practical help. Yet confrontation and information seem to be insufficient to trigger appropriate quitting behaviour.

Implication: the heavier the smoking, the greater is the difficulty in changing behaviour.

- A solution to the issue of positive versus negative messages could be to combine approaches by focusing on both 'emotional engagement'

aspects [health warnings], and 'helping relationships' ['...someone or someplace who is there when I need to talk about my smoking'].

Note: This hypothesis seems to be substantiated by the Massey University 'Fear and Treats' study.

Implication: a twin-pronged strategy combining hard-hitting messages on the health risks of continuing to smoke, together with the offer of access to assistance to quit.

2. The potentially most useful themes and messages:

Information, research and experiences provide the following guidelines that influence selection of the most appropriate messages.

Note: Audiences below fulfill demographic rather than attitudinal criteria. Further segmentation using psychographic profiles would provide greater insight.

Target audience	Description & influences	Key themes & messages
Young women smokers: 15 - 23 years	<ul style="list-style-type: none"> - Peer group acceptance. - Personal appearance i.e. sophisticated, confident, a bit sexy, more adult-like, information-hungry; understand the 'language of cosmetics'; want to believe quasi-scientific evidence. - Personal responsibility i.e. less reliance and respect for authorities, independent, establishing their own value-system. - Live in the present i.e. short planning horizons; the future's too far away to influence or worry about. - Spends a reasonably high proportion of disposable income on health and beauty aids. 	<ul style="list-style-type: none"> - Immediate, social benefits - Personal relevance - Vanity - Responsibility - Facts & figures that provoke thought and discussion - Peers - Invite 'informed choice' - Victim [to big business]

Target audience	Description & influences	Key themes & messages
Young male smokers: 15 - 23 years	<ul style="list-style-type: none"> - Mates' acceptance. - Sex appeal i.e. as much for reputation as real action! - Sexual performance i.e. casual relationships. - Physical performance i.e. sports; can't let the team down. - Live in the present i.e. short planning horizons; the future's too far away to influence or worry about. - Spends and saves for higher-ticket items i.e. car, sound system, sports equipment. - Social life involves mates and alcohol. - Challenging authority i.e. testing self-determination and independence. - Ambitious i.e. aspiring to material possessions and status. 	<ul style="list-style-type: none"> - Sociability - Immediate benefits - Personal relevance - Financial implications - Physical fitness - Personal success - Peer esteem - Quit assistance

Target audience	Description & influences	Key themes & messages
Habitual, adult smokers - age 23+ years	<ul style="list-style-type: none"> - Responsibilities i.e. supporting family. - Role model; especially to children. - Health and well being i.e. living an active and enjoyable lifestyle. - Being in control i.e. influencing the important aspects of their lives. - Sexual performance i.e. both sexual impotency and fertility. - Personal appearance i.e. youthful, attractive and appealing. 	<ul style="list-style-type: none"> Addiction and dependence. Cost [proportion of disposable income]. Health benefits. Health warnings. Role modeling for children.

Summary:

Young women and men - Focus on reasons to reduce or quit smoking. Position smoking as behaviour that they are capable of exercising control over. Provide reasons to consider consequences and develop actions and coping strategies.

Habitual smokers - Focus on strong and compelling reminders of the reasons that they know they shouldn't smoke. Provide assistance to quit.

3. Best use of information space opportunities:

The marketing maxim of 'product as medium' has particular relevance and significance when considering the location, prominence and content of health warnings on tobacco packaging.

Many 'social' products have strong branding associations that are important to specific audiences. Along with alcohol, credit cards and clothing, cigarette brands have been a strong references or identifiers to character type, status and self-perception; a modern day calling card.

Prominent health warnings on cigarette packaging have the potential to dramatically reduce the perceived 'value' of the signals or cues traditionally associated with cigarette products' branding. With this potential defacement and consequent reduction in 'image potential' in mind, there is a strong case to dominate packaging with health warnings and quit information. The recommendation is to adopt the recent Australian move to occupy 90% of the back of the pack, and 30% of the front area.

The optimum message format and content also influences size requirements. All experience and evidence suggests that a combination of visual and text provides the best possible communication; the visual element to attract attention and telegraph a strong message, the text to expand and provide information.

4. The 20 best messages for pre-testing:

Experiences and research from other countries, local research, Clemenger BBDO's experience in affecting behaviour change, and an analysis of target audience descriptions and influences suggest the following messages for testing.

Note 1: While there is little opportunity for audience targeting with cigarette packaging under current legislation, it would be useful to analyze test results through several filters - gender and length of time smoking [more and less than 5 years]. This information could inform future social marketing communications strategies, both on packaging and in other mediums.

Note 2: All messages have a prominent, featured access to assistance message:

YOU CAN QUIT SMOKING. For advice and assistance call Quitline 0800 778 778, or visit www.quit.org.nz or talk to your doctor or pharmacist.

1. **Top skincare scientists prove that smoking is having an effect on your appearance.** *Every cigarette contains over 4000 toxins, many of which the blood stream carries straight to your skin, affecting its ability to regenerate.*
2. **Leading surgeons warn that every cigarette you smoke increases the chance of mouth and throat cancer.** *These cancers can result in extensive surgery, problems with eating and swallowing, speech problems and permanent disfigurement.*
3. **Oral hygienists note that smoking causes offensive breath.** *Many of the more than 40 harmful chemicals that affect smokers change the natural chemical balance inside your mouth and throat, causing foul and stale breath.*
4. **Smokers increase the risk of children contracting serious illnesses and dying.** *Children exposed to passive smoking experience more serious illnesses such as pneumonia, middle ear infections and asthma. And are at greater risk of Sudden Infant Death Syndrome.*
5. **Experienced midwives confirm smokers harm their unborn babies.** *Every cigarette you smoke during pregnancy reduces the flow of blood to the placenta, limiting oxygen and nutrients essential for developing babies. This increases the*

- risk of miscarriage, stillbirth, premature and complicated births, or the baby having a smaller body and brain.*
6. **Work hard. Play hard. Keep healthy.** *People who reduce or quit smoking immediately increase the quality of oxygen circulating to their hearts and brains. This improves energy and levels of mental alertness.*
 7. **Your team needs you to be your best.** *Smoking leaves you breathless and unable to perform to your best. It not only slow you down, it can lead to fatal lung diseases.*
 8. **Your smoking can make you impotent.** *Tobacco chemicals decrease the blood flow to your penis. This can prevent you from having an erection.*
 9. **A pack a day means you smoke \$3500 each year.** *A very decent holiday for the family. In five years a second car. In ten years, a new car. Is smoking worth it?*
 10. **Your children do what you do.** *Your children are twice as likely to smoke if you do. Half of all premature deaths among life-long smokers result from tobacco use. Is this what you want for your children?*
 11. **Keeping your children healthy.** *Second-hand smoke contains toxic chemicals that harm children and slow their physical and mental development.*
 12. **Emphysema is a living hell.** *Smoking causes a disease where the airsacs in the lungs are gradually destroyed, making it hard to breathe. Sufferes describe it as a living hell. Nearly all emphysema is caused by smoking.*
 13. **Quit before you can't.** *Scientific evidence proves the longer you smoke the more difficult it is to quit. If you've been telling yourself it's time to quit, do it now. It's never going to be as easy.*
 14. **No-one said quitting was easy. But there's help to make it as easy as possible.** *Assistance and advice from experts to point out the benefits and help you to quit.*
 15. **Pay lower insurance premiums.** *The insurance companies know smokers are a higher death risk so they charge higher premiums. Up to 25% higher. They reduce their risk; why don't you?*
 16. **Every cigarette is actively clogging your blood vessels.** *Causing arteries in your brain to block and result in a stroke. A stroke can either disable you or kill you.*
 17. **Smoking slows you down.** *Smoking damages the blood vessels preventing blood circulation, particularly to your legs or feet. This can result in blood clots, gangrene, even amputation.*

18. **Every cigarette you smoke increases your risk of lung cancer.** Most lung cancers are caused by smoking. Most people who get lung cancer die from it. *9 out of 10 lung cancers are caused by smoking.*
19. **Quitting smoking will improve your health.** *Quitting smoking at any age benefits your health. Quitting cuts the risk of lung and other cancers, heart attacks, stroke and other lung diseases. In a few years after quitting, the risk reduces to the same as someone who has never smoked.*
20. **Smoking is addictive.** *When you smoke you inhale the drug, nicotine. With regular smoking your body comes to expect the dose of nicotine. In a short time it becomes difficult to control how much you smoke or to quit. Many people don't realise they're dependant until they try to quit. But even lifelong smokers can and do quit. You can too.*

5. Likely effective life of messages:

The correct frequency of message refreshment is important for two key reasons:

1. Refreshment reduces familiarity, leading to complacency.
2. Young people have low boredom thresholds; they prefer to receive communications in info-bites. Maintaining freshness is critical to engagement and interest.

It is essential to strike the correct balance between 'wear-out' and 'wear-in' of messages. That is, messages have potential through their repetition to be noted and assimilated, without becoming too familiar and over looked. On the basis that habitual smokers monitor their smoking by 'packs per day' [a pack per day being common currency], 18 changes per year [change every three weeks] would seem optimal.