

Evidence into Practice: Motivating quitting through behaviour change communications

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Purpose

This evidence into practice briefing is a guide for local authorities and NHS organisations about how to use communications to motivate smokers to change their behaviour. It is designed to help localities to embed their communications activity in a broader approach to tobacco control designed to drive down smoking prevalence, with case studies to provide examples of good practice at local and regional level.

Introduction

The Government's ambition for England to be Smokefree by 2030 is shared by us all.¹ However, only 5% of smokers successfully quit each year, and unless we motivate more smokers to quit, we will not achieve this ambition.² Communications campaigns are a highly effective behaviour change intervention, which can motivate more smokers to try to stop smoking and to use the most effective quitting aids. Such campaigns are most effective where they include a combination of paid for advertising and stories placed with local media outlets, also known as 'earned media'.

ASH and Cancer Research UK's survey of tobacco control leads in England found that, while public communications on smoking were the norm over the last year, half (52%) of local authorities did not have a strategy in place to communicate with their whole population of smokers. ¹⁶ Well-designed and strategic local communications campaigns can:³

- · educate about the harms of smoking;
- · change smoking beliefs and attitudes;
- set the agenda for discussion among community members and policy-makers;
- increase quitting intentions, quit attempts and quit success;⁴
- reduce exposure to secondhand smoke; and
- reduce youth and adult smoking prevalence.

Why local and regional communications campaigns are essential

On average only 30% of smokers make a serious quit attempt each year.⁵ A majority of quit attempts result in relapse, with smokers making on average 30 attempts before they are able to stop smoking for good.⁶ Driving down smoking prevalence more rapidly can only be achieved by motivating more smokers to attempt to quit and to encouraging them to use the most effective methods when they do.

However, despite evidence that they are highly effective and cost-effective,^{7 8 9 10 11 12 13} since 2009 funding for national behaviour change campaigns has fallen to less than 10% of peak levels.^{14 15} Over this time, the number of smokers attempting to quit each year has also decreased. In 2010 36% of smokers attempted to quit compared to 29% in 2019.⁵

Local and regional communications activity has therefore taken on greater importance to replace this national activity, and ensure smokers continue to receive messages motivating them to quit.

During the COVID-19 pandemic, local authorities in England stepped up communications to encourage smokers to quit, with such activity becoming the norm. ¹⁶ Building on the heightened awareness among the

public of the need to stay healthy, local activity contributed to the highest quit success rate ever recorded (21.6%) and the highest proportion of smokers trying to quit since 2014, with 36.1% of smokers making a quit attempt in 2020. This needs to be sustained and built upon post-pandemic to achieve the smokefree 2030 ambition.

EFFECTIVE MESSAGES FOR MOTIVATING QUIT ATTEMPTS

In designing communications campaigns, evidence demonstrates the need to grab attention, educate about the harms caused by smoking, the benefits of quitting and elicit an emotional response. Attention can be grabbed by using previously unknown facts, reframing the risks, or bringing it home by using graphic or emotive content about the impact of smoking on the individual and wider family.

To summarise the evidence:

- Health harms messages are most effective at generating increased knowledge, positive beliefs, and quitting behaviour.¹⁷
- However, "Harm" messages about the risks of smoking, both to the smoker themselves and those around them, are complementary with "hope" messages about the benefits of quitting and signposting to practical support to optimise campaign impacts.¹⁸
- Emotive messages are more effective than factual messages in shaping behaviour, particularly among smokers in lower socio-economic groups.¹⁹
- Communicating the odds by harnessing emotion is also effective.²⁰
- Campaigns work for both adults and youth.21

EFFECTIVE MESSENGERS FOR SMOKING CESSATION

Essential to a successful campaign is having simple and clear campaign messages and using the most relevant spokespeople. Who delivers the message is crucial to its impact. Depending on what you are trying to achieve, effective messengers are usually a combination of credible authority figures, people able to provide friendly, relatable, peer-to-peer tone, especially when promoting local support, or those speaking from their own experience. Spokespeople should be identified in advance and be well briefed on key messages so they can handle any local media opportunities.

Health professionals:

Advice to quit from healthcare professionals has been found to be the fourth most important factor in triggering a quit attempt (after future health concerns, current health concerns, and cost).²²

Clinical or public health spokespeople are highly effective as part of any news or PR package to substantiate factual health messages around smoking where trust, belief and credibility matter the most, for example, to explain the links between smoking and illness.²³

A good example is the 'Don't Wait' campaign run in the North East during the COVID-19 pandemic. The campaign is fronted by a respiratory doctor, referred to throughout as Dr Ruth Sharrock, emphasising that she is a credible spokesperson on this issue and someone who speaks with authority.

In addition, council spokespeople with specific health expertise, such as Councillors with responsibility for public health and Directors of Public Health can be effective, especially when discussing the impact of smoking on local communities. Spokespeople from local stop smoking services can also be useful for sharing how to quit messages and emphasising the existence of services which are available to support your local population.

Case study: Credible and engaging spokespeople

Surrey County Council's stop smoking service, *One You Surrey*, <u>developed and publicised a series of blogs</u> with one of their councillors, Alison, who was herself using the service to quit. *One You Surrey* published a series of blogs and videos showing Alison's stop smoking service appointments, which were being delivered via video calls at the time. This not only showed the audience another smoker's quitting journey, but demonstrated that this a service their elected members were willing to engage in and, through the appointment recordings, demystified the process of being helped by a stop smoking service.

If the aim is to promote local support, then it is important that smokers see spokespeople who they can relate to, and who will make them feel they will be welcomed and that their smoking will be treated with empathy and understanding. Insight from the North East during the Fresh "People like Me" campaign, which featured real smokers, found that a major barrier to accessing local support was a lack of awareness about what quitting using a stop smoking service actually entailed, and a fear people may be "judged". The quality which smokers valued most in stop smoking support was friendliness, highlighting the need to convey this message if smokers are to be persuaded to use the services.

Former smokers:

Featuring real stories of former smokers can increase media and public interest in a campaign, and provides engaging video and image content for social media:

- Successful quitters: Former smokers who have quit successfully and are now seeing the benefits can
 be the best champions for quitting. Stories of ex-smokers who have quit and enjoy better health, better
 fitness, have made their family proud and are enjoying spending money on other things are good content
 for social media and PR output. These stories can be motivational for current smokers, showing quitting
 can be done and how. For examples of success stories with former smokers, see the <u>case studies section</u>
 below.
- Health harms: current or ex-smokers who have smoking-related diseases, such as cancer or COPD, are powerful messengers for health harms campaigns. A real story illustrating a campaign message increases media and the public engagement with the message.

EFFECTIVE CHANNELS OF COMMUNICATION

Behaviour change campaigns have the biggest impact, and are most cost-effective, when disseminated using the widest possible communications channels both "earned" and paid for, from social to broadcast media, online to out of home, reaching the largest possible audience in the most diverse ways.

However, local authorities will need to work according to their budgets and although broadcast media is a key awareness raising channel and highly cost-effective, it is only a feasible option when authorities combine as regions (see case study on regional communications activity below). However, smaller scale campaigns can still be effective using a combination of "earned" and paid for media channels, as discussed in the next section.

Local and regional communications activity: Lessons for practice

BE STRATEGIC

Local communications activity should be a key part of a comprehensive local tobacco control strategy and included in action plans with specific activity that can be reported against. Involving communications colleagues in local tobacco control alliances can be an effective means of ensuring the importance of tobacco control communications for health promotion is understood across your local authority and partner organisations. Local alliances also provide a route into engaging local partners in communications activity which can effectively amplify its reach and help with direct promotion to smokers.²⁴

Case study: Smoke free Newcastle Action Plan

Newcastle City Council's tobacco control alliance action plan provides a good example of this. Their Action Plan identifies communications as one of 8 key strands of comprehensive tobacco control activity they engage in at a local level, based on the regional tobacco control office Fresh's 8 stranded approach. Communications activity is linked effectively to the broader strategy and activity from other strands in the Action Plan. Key campaigns and dates throughout the year are identified to enable proactive engagement along with other local priorities for communications activity, such as improving communication on smoking for BAME communities. Against each activity, named Leads are identified along with metrics for monitoring progress.

KEY CONSIDERATIONS FOR LOCAL COMMUNICATIONS ACTIVITY

When designing local communications campaigns there are key areas which must be considered to ensure campaigns are effective in both communicating key messages and reaching the target audience.

Segmentation:

 How do we segment our key group i.e. smokers? For example by socioeconomic status, ethnicity, housing tenure, wider lifestyle factors which may interact with their smoking status?

Targeting:

- What is the best way to reach them?
- Are they large and homogenous enough a group for paid-for marketing to be cost effective?

Positioning

- What is our message and how can we make it resonate with our target audience? Are we trying to create awareness? Drive people towards stop smoking support or a particular website? Both?
- Who should deliver it (who is the appropriate messenger)?
- What is the right language and imagery?
- How can we make our offer appealing?

Case study: positioning

In answering these questions on positioning, it is important to engage with the smokers you're trying to reach. For example, in preparing for the *One-Way Street to Success* campaign conducted in 2009/10 six focus groups were conducted with the target audience of smokers in routine and manual groups. During these focus groups smokers were asked to assess two campaign ideas, 'One-Way Street to Success' and 'What will suit you best?'. While the first was seen as a new and distinctive approach which smokers felt would be motivational, the latter was not seen as engaging or distinctive and the smokers felt would not provide the necessary motivation. The researchers used these insights to decide which messaging and design would be used, before starting on paid-for promotion. These insights helped frame the campaign and ensured it was able to successfully engage smokers.

For more information on positioning and recent insights on effective messaging on smoking see this <u>presentation</u> delivered by Andy Lloyd, Head of Marketing and Communications at Fresh and Balance at the webinar for No Smoking Day 2021.

ADDRESSING INEQUALITIES

Bear in mind the impact of any local communications activity on inequalities in smoking rates and consider:

- · Who are your local priority populations?
 - o Some groups with high rates of smoking are universally represented such as those working in routine and manual occupations and those living in social housing, but are there additional groups specific to your local area?
- Are there any priority groups that could be excluded by the targeting and positioning of your communications?
 o Do messages need to be translated?
 - o Are there specific radio stations, local media or community organisations that would better reach some populations?
- How might positioning need to be modified to reach different priority populations?
 - o Have you tested messaging with your target population?
 - o Are your local spokespeople representative of the people they are trying to engage?

Case study: Adapting communications for better engagement

Health & Wellbeing Slough often <u>translate their messaging</u> on smoking into languages which are commonly used within the community, such as Punjabi, Urdu and Polish, both in writing and in spoken word. This way they can reach local smokers who otherwise might be excluded by messaging which, as a result of the language it's delivered in, fails to engage them.

IDENTIFYING COMMUNICATIONS HOOKS

Throughout the year there are key opportunities for local communications activity, from national campaigns such as New Year and Stoptober to awareness days and months such as World No Tobacco Day or Lung Cancer Awareness month.

Developing a local communications calendar helps keep track of these opportunities well in advance so you can work with local communications teams to generate content and maximise these opportunities.

A <u>useful calendar</u> of health awareness days and potential campaign hooks has been compiled by NHS Employers.

CREATING LOCAL BRANDING TO INCREASE AWARENESS

Commercial advertising companies work to increase brand awareness, and this can also be an important tool for local communications activity. Developing a local or regional brand means that members of the public and professionals can easily recognise what the information is about. Local colour schemes, logos, straplines can be shared with partner organisations to tie them into communications activity.

For example, Barnsley uses the <u>Making Smoking History</u> message and brand, while seven North East localities share the <u>Fresh Smokefree North East</u> branding. Sheffield City Council have developed a <u>Smokefree Sheffield</u> brand to accompany their Local Tobacco Alliance activity.

DELIVERING LOCAL COMMUNICATIONS CAMPAIGNS

Local authorities, stop smoking services, and wider local partners have a range of tools and outlets that can be used to disseminate local communications messages and amplify national campaigns.

Local spokespeople

As outlined <u>above</u> and in the case studies section <u>below</u>, having the right messenger is an important step to ensuring you achieve the outcome you want. Local spokespeople should feature throughout your communications activity. From quotations in press releases and video clips on social media to images and quotes in printed materials, it's important to make a local voice heard.

Local PR

PR activity is an important tool locally. Local PR can be used to deliver locally developed communications campaigns and stories or to amplify national campaigns to achieve deeper local engagement around key dates such as Stoptober, No Smoking Day, World No Tobacco Day and others. However, PR activity can also be used to fill in gaps between campaigns and highlighting ongoing problems such as the local cost of smoking to maintain awareness and motivation to quit among the local population.²⁶ Additionally, PR activity often requires relatively small budgets.

Social and Digital

Social and digital media is now a key part of any campaign and should always be factored into communications activity planning. Whilst the majority of campaign awareness is generated from broadcast media, direct responses and engagement comes predominantly from social and digital marketing. Whilst social media activity does require planning and resources, it also benefits from enabling you to be fast and responsive to unexpected events.

When planning social media activity, you should consider who you are trying to reach and which platform best serves that aim. If there is a specific age or audience you are trying to reach for example, Facebook may prove more helpful as it allows marketers to target users by age, gender and local area (see below for more detail on digital platform demographics).

Digital content such as graphics and videos are an increasingly cost-efficient way to achieve engagement. Free-to-use platforms like Kapwing and Canva are accessible for beginners and make producing these assets easy.

Case study: Oxfordshire local promotion of Today is the Day campaign

Oxfordshire County Council promoted the Today is the Day campaign video during August 2020 using targeted Facebook advertising. The video was targeted at 25 - 34 year olds in the 10 local wards with the highest smoking rates.

The total cost of this activity was £500. The advert had a reach of 22,416 and total impressions of 169,318. This generated c774 clicks through to the website. The cost per click through was 65 pence.

The frequency of the video on the target audience Facebook news feed was 7.5 times, meaning members of the target audience had 7.5 opportunities to watch the video. 5,496 people watched the first 15 seconds of the video, with a cost per play of 9 pence. 2,355 people watched the video in full with a cost per play of 21 pence.

FINDING YOUR AUDIENCE ONLINE

In designing digital content it's important to think about your target audience, firstly whether they are online and secondly, if so, which online platforms are most likely to reach them.

Digital exclusion

In the UK in 2020 96% of households have access to the internet with 89% of adults using the internet daily or almost every day.²⁷ Daily or almost daily internet use decreases with age. There is a notable drop-off in internet usage after age 65, 86% of people aged 55 – 65 use the internet daily or nearly daily dropping to 67% among people aged over 65 with a corresponding increase in the number not using internet in the last 3 months (18%). In contrast 100% of people aged under 34 report daily or almost daily internet use.²⁷

Digital exclusion is also higher among women, who have consistently made up over half of internet non-users. Additionally, internet non-users are more likely to be disabled, in 2017 56% of non-users were disabled, despite disabled people making up just 22% of the adult population.²⁸ Among working age adults, people who are economically inactive are also more likely to be non-users compared to those in employment, and the percentage of households with internet appears to increase in line with annual income.²⁸

Who is using which platforms:

The main social media platforms local areas should be taking note of and utilising in communicating a message or campaign are Facebook and Twitter. While other platforms such as Instagram are used, it is less clear what impact they have, whilst Facebook and Twitter have proven their worth as means for reaching smokers.

Facebook

Facebook is the best platform for reaching the public and in particular smokers. Facebook has a broader reach than Twitter and a deeper reach into older age groups and those working in routine and manual occupations.

While channels like Facebook can be used organically to freely post content as individuals, or on Pages and Groups, organic posts get a small fraction of the reach and engagement that even a post backed by £50 can achieve – having a small budget at disposal for this is therefore advised. Posts on Facebook can be very targeted, through location, age, gender and even interest groups. There are two forms of Facebook advertising:

 Boosting a post, where you select a budget to place behind a post or video, for example, £100 for 7 days • Running a post as advertising, which is subject to more limitations and copy length Tobacco control marketing colleagues have reported some difficulties with Facebook rejecting health content when advertising.

Facebook demographics at a glance: 29 30 31

- Those aged 25-34 make up the largest group of users on Facebook, representing 32.4% of all Facebook users in the UK
- Representation among 18-24 year olds on Facebook has declined over the years, whilst they were once the largest demographic, they are now the second largest, representing 23.5% of all users
- 35-44 year olds are the third largest group of users, representing 16.9% of all Facebook users in the UK
- Representation among older age groups has increased over the years, whilst representation among younger age groups has decreased (13-17 year olds represent just 5.8% of all users) overall suggesting an ageing user population in the UK
- According to a survey from 2018, household income has little to no impact on likelihood of being a Facebook user, with all household income groups relatively evenly represented

Twitter

Twitter is better for reaching key opinion leads such as local and national politicians and professional partners such as third sector organisations and healthcare professionals. This can be helpful for rallying support behind a local campaign or message and encouraging local organisations to help promote them.

Twitter demographics at a glance: 32 33

- According to survey data from 2018, 25-34 year olds make up the largest group of users on Twitter, representing 25.2% of all Twitter users in the UK
- The second largest group are 18-24 year olds, representing 21.6% of all Twitters users in the UK
- Behind this, 35-44 year olds account for 18.4% of all UK Twitter users, followed by 12-17 year olds and 45-54 year olds who represent 11.7% and 11% of all users, respectively
- According to another survey from 2018, Twitter users tend to be more affluent, with the highest proportion
 of users coming from households with an income of £48,000 or above, followed by those with a household
 income between £34-48,000
- However, those with a household income below £34,000 remain well represented on Twitter

ENGAGE LOCAL STAKEHOLDERS AND PARTNERS

Engaging with local partners to identify potential communications opportunities is crucial and Local Tobacco Alliances are a key forum for this engagement.²⁴

NHS organisations:

National campaigns such as Stoptober can provide the opportunity for local collaboration, for example with NHS, STP/ICS communications teams. If partners' communications teams are engaged in campaigns, they are more likely to publicise them and engage with subsequent tobacco control activity.

Engaging NHS colleagues in communications activity can be a very effective way of reaching smokers. Smokers see their GP a third more than non-smokers,³⁴ and there are approximately half a million smoking related hospital admissions each year.³⁵ As set out above, healthcare professionals are effective messengers for smoking cessation advice, and engaging local NHS organisations in disseminating smoking cessation messages can further their reach.

Additionally, local NHS organisations hold information on individuals' smoking status, and can therefore be valuable partners in disseminating campaign information directly to smokers. For example, using GP records as a means of directly contacting smokers to promote campaign messages and direct to quit support has seen positive results.

Case study: Hertfordshire engaging GPs in Quit for COVID activity

In March 2020, Hertfordshire County Council's public health team contacted their local CCGs requesting they send a letter to all GPs requesting contact all smokers on their records encouraging them to quit for COVID. The letter sent to GPs contained background information about the evidence around smoking and COVID-19 and a template text message for GPs to use:

Evidence has been published that indicates people who smoke are at significantly increased risk of contracting COVID-19. They are also more likely to have severe symptoms, and 2-3 times more likely to be admitted to intensive care, need mechanical ventilation or die compared to non-smokers.

(NB. Please note this evidence has evolved since March, see the latest evidence on smoking and coronavirus at: https://smokefreeaction.org.uk/wp-content/uploads/2020/04/QuitforCovidFAQs1.pdf)

This will have implications for Hertfordshire and the capacity of NHS services to cope as nearly 110,000 adults continue to smoke across the county.

Please do a clinical search for ALL SMOKERS. If you have capacity, please prioritise all those who are over 70 or have any of the following conditions: organ transplants, diabetes, treatment for cancer, the immunosuppressed, those who have respiratory or cardiac disease or are pregnant. The full list of conditions which increase vulnerability is below.

Please text this message to ALL SMOKERS:

If you smoke, you have an increased risk of severe illness with COVID-19. Your doctor would like you to stop smoking as soon as possible. Contact Hertfordshire Health Improvement Service on 0800 389 3 998 OR text quit4covid to 80818 for telephone support and medication to quit smoking.

There is also a referral form on Ardens (ENHCCG) or DXS (HVCCG) to directly refer smokers that you are in contact with or know to be at risk.

If you are struggling to maintain a stop smoking service at your practice or need help to do the above, please email: HealthImprovementService@hertfordshire.gov.uk

HOUSING, POVERTY AND INEQUALITIES ORGANISATIONS

Smoking rates are highest among disadvantaged communities. Among people working in routine and manual occupations smoking prevalence is 23.2% compared to 9.3% among people working in professional or managerial roles.³⁶ Prevalence rises up to 35% among adults living in social housing and approximately 80% among people experiencing homelessness.^{37 38}

Engaging with organisations such as local housing or homeless providers, debt advice services and

foodbanks can therefore be an effective way of reaching smokers and disseminating messages around quitting to population groups, such as people experiencing homelessness, who may not be reached through traditional communications channels.

Case study: Sheffield City Council #QuitForCovid leaflets and stickers

During the first national COVID-19 lockdown, Sheffield City Council's tobacco control alliance Smokefree Sheffield developed leaflets and stickers sharing the #QuitForCovid campaign and message, encouraging people to quit smoking and providing contact details for the local stop smoking service. Leaflets were distributed via foodbanks and community workers shopping for those who were shielding or clinically vulnerable. From #QuitforCovid stickers were also placed on all food parcels being delivered by the council to vulnerable groups, with around 30 parcels being delivered each day. This was delivered alongside a broader range of communications activity by Smokefree Sheffield around the #QuitforCovid campaign and lead to a spike in views to Smokefree Sheffield's Quit For Covid page with substantial levels of engagement.³⁹

ENFORCEMENT

Local enforcement activity, such as seizures of illicit tobacco, can generate communications opportunities especially in local news media. Illicit tobacco stories present an important opportunity to reinforce wider messages about reducing uptake of smoking among children and young people and supporting current smokers to quit.

Engaging with enforcement colleagues in advance of activity such as test purchasing or raids for suspected illicit sales can help ensure effective public communications about these activities. To have greatest impact it is important to agree key messages and key messengers, distributing local press releases, briefing spokespeople and helping to prevent misinformation about illicit tobacco.

Additionally, given the tobacco industry's history of disseminating misleading messages on illicit tobacco, involving partners in disseminating evidence-based messages which accurately informs the public about the harms associated with illicit can counter misleading information. Partners involved in illicit tobacco work, such as the police, often have large social media followings among local populations, working with these partners to disseminate clear messages about illicit tobacco can be an important way of amplifying communications.

Case study: Keep it Out campaign

The <u>Keep It Out campaign</u> demonstrates how effectively coordinating enforcement and communications activity across multiple partner organisations can generate intelligence on illicit tobacco sales, reduce illicit tobacco and generate tobacco control coverage supporting tobacco-related news recall. The campaign has used insight to develop messages which resonate the most with the public.

USING EXISTING COMMUNICATIONS CHANNELS

Council newsletters, posters, leaflets, social media channels and other forms of direct communication are a useful way for reaching local populations and a trusted source of information for their local followers.

Case study: Bath and North East Somerset leaflet distribution

In the early stages of the COVID-19 pandemic in Bath and North East Somerset council delivered leaflets to 80,000 homes across the area providing information on a newly established 'Wellbeing Hub' which employed a multi-agency approach to supporting local residents with their health and wellbeing. Anyone calling the Wellbeing Hub number or visiting the website address, both included on the leaflet, would be asked if they smoked. Hub staff were trained in Very Brief Advice on smoking cessation. The Hub has had over 5,000 calls since the leaflet drop and many referrals to the stop smoking service have been made from people who were originally calling to access different services.⁴⁰

DEVELOPING LOCAL CASE STUDIES

Stop smoking services are ideally placed to identify smokers and ex-smokers they have worked with who may be happy to share their stories with the aim of motivating others to quit.

Examples of local success stories and case studies with former smokers include:

- Today is the Day <u>Success stories</u>
- Greater Manchester Health Hub Get inspired to guit
- Smokefree Sheffield Success stories
- Southend Borough Council Smokefree Southend video featuring local ex-smokers

When finding local case studies, there are some key considerations you should take into account. First and foremost be sensitive in how you approach case studies and take great care to ensure that the information you collect is handled sensitively and in line with GDPR rules:

- Content of their story that may resonate with other smokers such as:
 - o Have they smoked for a long time?
 - o Have they tried to guit previously? How long have they been able to stay guit?
 - o Have they used quit aids, such as NRT, varenicline or e-cigarettes?
 - o What was different this time enabling them to quit? Key points about local services?
- Photos and video content of case studies is important for promoting their story and, if there is local press interest, media teams will often want photos for news articles
- Do your best to ensure case studies are diverse and representative of your local population

Case study: Building case studies

Yorkshire Smokefree ask clients during their quit journey if they are happy to provide a case study of their experience. Yorkshire Smokefree have developed two consent forms, one to produce a short quote for social media accompanied by the hashtag #SincelQuit and another more detailed proforma with a range of questions enabling the service's communications team to put together a detailed quitting story, including options to provide a photograph to bring the story to life. The consent forms set out the ways in which the client's story and quotes can be used (for example, which social media platforms they might appear on) and for how long, establishing clear consent and understanding from the start."

COLLABORATE ACROSS BOUNDARIES

Individual local authorities rarely have the budget to run local public education campaigns across a range of media outlets. Pooling budgets across a regional footprint or working with NHS colleagues can therefore create capacity to run these campaigns which can also be targeted at particularly disadvantaged communities.

Case study: Regional Quit 16 campaign

The regional tobacco control programme Fresh, in the north east, oversaw a media campaign on the 16 cancers caused by smoking in February 2016, reaching approximately 333,000 people via TV, radio, print and online. 90% of total campaign recall came from TV advertising, compared to 4% on Facebook and 1% online, despite relatively high online budgets. Of those who saw the campaign:⁴¹

- 16% (around 55,300 people) cut down on their smoking;
- 4% (around 28,000 people) made a quit attempt;
- 4% switched to electronic cigarettes.

The Quit 16 campaign was run again in June 2019, across the North of England. This was funded by the NHS North of England Cancer Alliances as a way to support cancer prevention.

The main campaign channel was regional ITV advertising encouraging smokers to visit the <u>Quit 16 website</u> for tips to quit, contact details for local stop smoking services and videos of real people's stories. Additional digital advertising was funded by PHE.

Partners were encouraged to support and uplift the campaign to maximise awareness. This was co-ordinated by NHS England. A communications tool kit developed by Fresh and NHS England was shared widely with NHS Trusts, CCGs, PHE, cancer alliances, local authorities and other relevant partners in the North of England. This was an effective collaboration at scale.

This illustrates the additional value that can come from pooling budgets and delivering media work on larger footprints.

ADDITIONAL RESOURCES

ASH, in collaboration with regional partners Fresh in the North-East, Breathe 2025 in Yorks and Humber and Greater Manchester, has developed toolkits for specific campaigns for New Year and No Smoking Day, 2021. These include key messages, template press releases, social media posts and digital ads which can be localised and continue to be relevant after the key date has passed.

See also https://www.todayistheday.co.uk/. All these can provide ideas and input for your campaigns.

References

References last checked 31 March 2021.

- 1. Cabinet Office and Department of Health and Social Care. Advancing our health: Prevention in the 2020s consultation document. July 2019.
- 2. Cancer Intelligence Team, Cancer Research UK. Smoking prevalence projections for England, Scotland, Wales and Northern Ireland, based on data to 2018/19. February 2020.
- 3. Royal College of Physicians. Fifty years since smoking and health. March 2012.
- 4. Kuipers MAG, Beard E, West R, et al. <u>Associations between tobacco control mass media campaign expenditure and smoking prevalence and quitting in England: a time series analysis.</u> Tobacco Control 2018;27:455-462.
- 5. University College London. Smoking Toolkit Study. Accessed March 2021.

- 6. Chaiton M, Diemert L, Cohen JE, et al. Estimating the number of quit attempts it takes to quit smoking successfully in a longitudinal cohort of smokers. BMJ Open 2016;6:e011045. doi: 10.1136/bmjopen-2016-011045
- 7. Langley T., McNeill A., Lewis S et al. The impact of media campaigns on smoking cessation activity: a structural vector autoregression analysis, Addiction. 2012 Nov;107(11):2043-50. doi: 10.1111/j.1360-0443.2012.03958.x. Epub 2012 Jul 26.
- Wakefield MA, Durkin S, Spittal MJ, et al. <u>Impact of tobacco control policies and mass media campaigns on monthly adult smoking prevalence</u>.
 Am J Public Health. 2008;98(8):1443-1450. doi:10.2105/AJPH.2007.128991
- 9. Brown J, Kotz D, Michie S, Stapleton J, Walmsley M, West R. How effective and cost-effective was the national mass media smoking cessation campaign 'Stoptober'? Drug Alcohol Depend. 2014 Feb 1;135(100):52-8. doi: 10.1016/j.drugalcdep.2013.11.003. Epub 2013 Nov 20. PMID: 24322004; PMCID: PMC3929003.
- Xin Xu, Robert L. Alexander, Sean A. Simpson, Scott Goates, James M. Nonnemaker, Kevin C. Davis, Tim McAfee. <u>A Cost-Effectiveness</u>.
 <u>Analysis of the First Federally Funded Antismoking Campaign</u>. American Journal of Preventive Medicine, Volume 48, Issue 3, 2015, Pages 318-325, ISSN 0749-3797, https://doi.org/10.1016/j.amepre.2014.10.011.
- 11. ASH and Breathe 2025. ASH and Breathe2025 response to Advancing our health: prevention in the 2020s. October 2019.
- 12. Mirte A G Kuipers, PhD, Robert West, PhD, Emma V Beard, PhD, Jamie Brown, PhD. Impact of the "Stoptober" Smoking Cessation Campaign in England From 2012 to 2017: A Quasiexperimental Repeat Cross-Sectional Study. Nicotine & Tobacco Research, Volume 22, Issue 9, September 2020, Pages 1453–1459, https://doi.org/10.1093/ntr/ntz108
- 13. Xin Xu, Robert L. Alexander, Sean A. Simpson, Scott Goates, James M. Nonnemaker, Kevin C. Davis, Tim McAfee. <u>A Cost-Effectiveness</u>. <u>Analysis of the First Federally Funded Antismoking Campaign</u>. American Journal of Preventive Medicine, Volume 48, Issue 3, 2015, Pages 318-325, ISSN 0749-3797, https://doi.org/10.1016/j.amepre.2014.10.011.
- 14. Hansard. Reply to Parliamentary Question tabled by Chris Ruane Col. 864W 24 April 2012
- 15. Hansard. Smoking: Public Health, question for Department of Health and Social Care, UIN 66027. tabled on 29 June 2020.
- 16. ASH and Cancer Research UK. Stepping up: The response of stop smoking services in England to the COVID-19 pandemic. January 2021.
- 17. Durkin S, Brennan E, Wakefield M. Mass media campaigns to promote smoking cessation among adults: an integrative review. Tob Control. 2012 Mar;21(2):127-38. doi: 10.1136/tobaccocontrol-2011-050345. PMID: 22345235.
- 18. Richardson S, Langley T, Szatkowski L, et al. <u>How does the emotive content of televised anti-smoking mass media campaigns influence monthly calls to the NHS Stop Smoking helpline in England?</u> Prev Med. 2014;69:43-48. doi:10.1016/j.ypmed.2014.08.030
- National Cancer Institute. <u>The Role of the Media in Promoting and Reducing Tobacco Use.</u> Tobacco Control Monograph No. 19. Bethesda, MD: U.S. Department of Health and Human Services, National Institutes of Health, National Cancer Institute. NIH Pub. No. 07-6242, June 2008
- Yang B, Liu J, Popova L. Feeling Hopeful Motivates Change: Emotional Responses to Messages Communicating Comparative Risk of Electronic Cigarettes and Combusted Cigarettes. Health Educ Behav. 2019;46(3):471-483. doi:10.1177/1090198118825236
- 21. Royal College of Physicians. Fifty years since smoking and health. March 2012.
- 22. Vangeli E, West R. Sociodemographic differences in triggers to quit smoking: findings from a national survey. Tobacco Control 2008;17:410-415
- 23. Lyu SY, Chen RY, Wang SF, Weng YL, Peng EY, Lee MB. <u>Perception of spokespersons' performance and characteristics in crisis communication: experience of the 2003 severe acute respiratory syndrome outbreak in Taiwan.</u> J Formos Med Assoc. 2013;112(10):600-607. doi:10.1016/j.jfma.2012.12.005
- 24. ASH and Fresh. Local Alliances Roadmap. Accessed March 2021.
- 25. Gutierrez K, Newcombe, R. <u>Lessons Learned Globally: Tobacco Control Digital Media Campaigns.</u> Saint Paul, Minnesota, United States: Global Dialogue for Effective Stop-Smoking Campaigns; 2012.
- 26. ASH. Local Toolkit. Accessed March 2021.
- 27. Office for National Statistics. Internet access households and individuals. August 2020.
- 28. Office for National Statistics. Exploring the UK's digital divide. March 2019.
- 29. Social Films. Facebook UK Statistics 2021. Accessed March 2021.
- 30. Statista. Distribution of Facebook users worldwide as of January 2021, by age and gender. January 2021. Accessed March 2021.
- 31. Statista. Share of Facebook users in the United Kingdom (UK) in January 2018, by household income. February 2018. Accessed March 2021.
- 32. Statista. Distribution of Twitter users in the United Kingdom (UK) from 2012 to 2018, by age group. February 2018. Accessed March 2021.
- 33. Statista. Share of Twitter users in the United Kingdom (UK) in August 2018, by household income. October 2018. Accessed March 2021.
- 34. Department of Health. Towards a smokefree generation: A tobacco control plan for England. 2017.
- 35. NHS Digital. Statistics on Smoking: England 2019. 2020.
- 36. Office for National Statistics. Adult smoking habits in the UK: 2019. July 2020.
- 37. ASH. Smoking in the home: New solutions for a smokefree generation. November 2018.
- 38. Groundswell. Room to Breathe: A Peer-led health audit on the respiratory health of people experiencing homelessness. October 2017.
- 39. ASH. Webinar: Smoking and Coronavirus Key messages and responses for local councils. May 2020. Accessed March 2021.
- 40. ASH. Webinar: #QuitforCovid communications webinar led by South West region. June 2020. Accessed March 2021.
- 41. Fresh. Quit 16 results. Accessed March 2021.

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