



Testing of Health Warning Messages and Health Information Messages for Tobacco Products

Executive Summary

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Executive Summary

Introduction and methodology

Decima is pleased to present the following report to Health Canada for *Testing of Health Warning Messages and Health Information Messages for Tobacco Products*.

The purpose of this qualitative and quantitative research study with adult smoker audiences was to test mock-ups of new Health Warning Messages (HWMs) and Health Information Messages (HIMs) intended to go on cigarette packages and other tobacco product packages. The overall objective is to assess the proposed HWMs and HIMs with respect to their potential for being noticeable, understood, informative, readable, credible, relevant and effective.

This report combines all phases of the research study conducted over the course of 2008 and early 2009:

- In-person qualitative research was the first phase of the research study and was conducted in February 2008 in Toronto, Calgary and Montreal. In this phase, a total of 60 focus groups were conducted to test 50 proposed HWMs, 24 HIMs, as well as a new contact information section intended for possible display on cigarette and other tobacco product packages. Each mock-up had a French version and an English version and was tested for both flip-top and slide-and-shell cigarette packages.
- A quantitative phase followed in the summer of 2008. The methodology for this phase was hybrid mail and online. In total, 2,241 surveys were completed. The survey tested 41 proposed Health Warning Messages (HWMs), 18 Health Information Messages (HIMs), as well as a new contact information section. Each mock-up had a French version and an English version.
- Lastly, in January 2009, Decima conducted a series of online focus groups to complement previously collected data. A total of four (4) 2-hour online focus groups sessions were conducted. The purpose of the groups was to test Call-to-action phrases for the new contact information section, as well as various layouts and colours for Health Warning Messages and the use of the word “warning”.

The proposed HWMs were developed to enhance public awareness based on the following six themes:

- Addiction;
- Health Impacts of Smoking;

- Tobacco-attributable Mortality;
- Health Impacts of Pre-and Post-natal Smoking;
- Health Hazards from Second-Hand Smoke; and
- Toxic Emissions.

The new HIMs focus on the following themes:

- Anatomy;
- Benefits of Quitting;
- Humour;
- Join the Club;
- Promotion of Tools;
- True or False;
- Stages;
- Testimonials; and
- Withdrawal Cravings.

The key findings of each research phase follows.

Key Findings

Qualitative phase

In all focus groups, participants demonstrated numerous underlying characteristics and reactions that are informative in understanding the results:

- **Many smokers, particularly those who have smoked for many years, tended to be quite defensive about their smoking**, and tended to instinctively take an unreceptive stance toward government efforts to warn against the dangers of smoking. This sentiment was particularly strong in the Montreal groups where some participants appeared to challenge the credibility of virtually all warning messages, even those that clearly have the desired impact.
- **Younger smokers generally saw smoking as a habit, whereas older smokers were more likely to see smoking as an addiction, and this difference had an impact on how certain messages will (or won't) strike a chord.** This difference may have important implications on communicating effectively with these two different age groups. Specifically, for younger smokers, the messages tended to be more effective when contextualizing the impact of smoking in the near to medium future. Furthermore, emphasizing the negative impacts of not quitting tended to be more effective than focusing on the positive impacts of quitting among younger smokers. Conversely, communicating the medium and longer term impacts of smoking, and the positive impacts of quitting tended to work more effectively with older smokers.

HWMs and HIMs and Themes - Overall Observations:

- As a whole, more HWMs than HIMs had an impact on participants
 - The HWMs were often more likely to possess a more powerful visual than the HIMs. This resulted, in many instances, in the difference between a moderate and a strong rating from participants.
 - In addition, the HWMs were consistently rated better because the text was short, direct, clear, whereas several HIMs were found to be unnecessarily long.
 - In some HWMs and many HIMs, the concept showed promise, but the execution (visual, layout, text) tended to not resonate with participants.
- **Certain themes were clearly more effective than others, among both the HWMs and the HIMs:**
 - Among the HWMs, the themes that most consistently resonated were:
 - Health Impacts of Smoking (specifically stroke, premature/young death, mouth cancer, emphysema, coughing);
 - Health Impacts of Pre-and Post-natal Smoking; and
 - Health Hazards from Second-Hand Smoke (specifically impacts on children).
 - Among the HIMs, the themes that most consistently resonated with the participants were:
 - Benefits of quitting,
 - Themes referring to the quitting process
- **The groups in Montreal (French) exhibited differences from those in Toronto/Calgary (English):**
 - Montreal participants tended to be more critical and less receptive toward more messages than participants in Toronto and Calgary
 - Montreal participants questioned the credibility of information presented across virtually all of the concepts.
- **Differences were found between men and women, and older and younger smokers, and in some cases based on other life**

stages/situations, such as being a parent, being afflicted with or knowing someone with a particular health problem:

- Generally, if a picture or situation represented a person that the respondent could relate to, it had a greater impact. For example, men tended to respond better to pictures of men, while women connected better with pictures of women. Similarly, participants tended to relate more to depictions of people in their own age group.
 - Target audiences such as older people and pregnant women were not well represented across the groups so the messages targeting those audiences tended to be rated as less effective.
- **The vast majority of participants found the idea of combining HWMs and HIMs on cigarette packs very effective, more effective than having just a HWM.**
 - Having HIMs to cigarette packs was seen as providing an appropriate balance, conveying empathy for the addiction of smoking, while maintaining a strong position against smoking and its impacts.
 - The combination of the HWM and HIM was viewed as analogous to a “good cop-bad cop” style of communication, where one element shows how bad smoking is, while the other shows more of a good news story by talking positively about quitting.
 - The toll-free number and website on the front of the package appeared to reinforce this sense of empathy, without seeming paternalistic or patronizing. Many asked for that information to also be included in the HIMs.
 - **Ultimately, effectiveness of the individual mock-ups was often driven by several elements, but primarily it was an emotional connection to a concept, picture or text.**
 - **This emotional connection to a particular concept, picture or text was directly related to how well a message was assessed:**
 - Typically, the picture was the most important part of this connection, specifically a photo depicting an impact on quality of life tended to have the highest impact. If, for example, the picture clearly showed that a disease or a health effect of smoking would

negatively impact someone's day to day life (i.e. ability to walk up stairs without running out of breath, ability to go to the bathroom unassisted), it tended to grab people. This phase of the research suggests that the depiction of a poor quality of life as a result of smoking often evoked a more significant emotional impact than the depiction of death.

- Sometimes the text served as the emotional driver. For example, the strength of the HIM withdrawal symptoms and the benefits of quitting concepts was their ability to make an emotional/empathetic connection with the difficulty of quitting.
 - Pictures of diseased organs typically did not yield a very strong emotional connection. They did not seem to resonate as well as other concepts such as those depicting people with very poor quality of life as a result of smoking.
 - Many participants said that they would be much more interested in reading warnings that helped them quit or pointed them in the right direction to get help as opposed to showing them all of the negative impacts of smoking (as the current warnings generally do). In fact, many said they have become immune to those types of negative messages and do not find them motivating.
- **Secondary drivers:**
 - **The “newness of the subject matter”**
 - The concepts that presented new information on impacts and were seen as credible tended to be more effective than those that conveyed information that participants had heard before. In the HWMs series, concepts which included information on stroke, emphysema, mouth and bladder cancer had a strong positive impact on participants because they were seen as new and credible. Similarly, in the HIM series, concepts that related to the near term benefits of quitting, how cravings will diminish over time, and using humour to talk about the difficulties of quitting were seen as new, credible and impactful.

- **Tight, direct language**

- The concepts that offered clear, direct, unequivocal language typically tested more effectively than those with longer text.
- Many of the HWMs' headlines contained only one or two key words to describe the impact – this was very effective in drawing attention and making people think about what they were seeing and reading. Many of the HIMs were seen as having much more text than was necessary to make the point. In particular, the testimonials were viewed as being too long.
- Quite a few participants in the French groups were fairly critical of the supporting text in the HWMs and the HIMs. They said the text was unnecessarily long and repetitive (more so than the English) and that some of the language did not flow well (poor translations from English).

- **Authenticity**

- In a number of cases, participants felt that the concepts were not authentic in the way they presented the information. Most often, this manifested itself through reactions to certain visuals (particularly in the HWMs), which people perceived as being “fake”. For example, the visual of the man having a heart attack in the office (i.e. H-17) was perceived as unauthentic, with some participants commenting that it looks like a bad acting job.
- In the HIMs, the “fake” accusations were more often made with respect to certain text. For example, some testimonials were seen as being fake because the quitting process was “too easy” and not reflective of the true difficulty of quitting. In others, it was suggested that the text was written by someone who did not understand the difficulties of quitting.
- The reference to Health Canada adds credibility.
 - It was almost universally felt that the reference to Health Canada was effective, appropriate,

and contributed to the credibility of the message.

- **Preferences in Terms of Readability/Layout/Format:**

- ***HWMs***

- Participants had virtually no difficulty reading the text in any of the concepts. Readability was not a problem identified in any of the HWMs.
- In terms of layout/format, the HWMs generally tested as being effective.
- The effectiveness of headlines and background colours were dictated by personal preferences to some extent.
 - Sometimes, the white text on black background was the strong preference.
 - In other cases, the red text on yellow background was the stronger preference.
- The appearance of the word “Warning”
 - Not very many participants commented on the word “Warning” in the HWMs. When prompted, the reactions were mixed and tended to depend on the overall concept. Some HWMs were not seen as a warning, but as a testimonial or a message promoting quitting or a smoke-free lifestyle; in those cases, some said it was not used in the right way and would be better off eliminated. In other cases, participants liked the use of the word warning to help drive home the message. By and large, however, participants were neutral about it and when prompted, most leaned toward seeing it as redundant, as they knew the HWM was a warning.

- ***HIMs***

- Reaction to the readability of the HIMs was mixed. While some participants had no difficulty reading the texts, others were consistently concerned that the font was quite small and therefore not easy to read.
- The layout/format of HIMs wasn’t well received, often because they were seen as being too busy and trying to convey too much information. It was felt that many of the HIMs could be improved by changing their formatting.

Contact Information section

- There was no clear consensus across groups on the preferred layout/format/colour of the contact information box. In terms of layout, most participants felt that the contact information fit best in the middle, below the warning.
- Similarly, there was no consensus on the colour of the contact information section, but the white writing on a black background and the black writing on a white background in the mock-ups appeared to be slightly preferred over the other colour schemes.
- In terms of the tagline inside the contact information box with the toll-free phone number and website, there were sometimes differences of opinion depending on which language it was tested in.
 - The word, “lifeline” tested well in English, but the translation, “une ligne de vie” poorly in French.

Quantitative phase

Overall, the Health Warning Messages (HWMs) and Health Information Messages (HIMs) were rated by Canadian smokers as being moderately effective. Some messages, and entire categories, were noticeably stronger than others. The following section will describe these differences.

Please note that 8 attributes were measured for the HIMs, compared to only 7 attributes that were measured for the HWMs. For a list of the attributes tested, please refer to the full questionnaires in Appendix C.

Message Categories

Both the Health Warning and Health Information Messages were divided by category, based on either the topic or design of the overall message. The HWMs that were tested fell into six categories, and the HIMs fell into nine.

When ranked highest to lowest, the categories were rated as follows:

Health Warning Message Categories:

- Health Impacts of Pre- and Post-natal Smoking (mean composite score = 68.23)
- Health Impacts of Smoking (mean composite score = 68.17)
- Health Hazards from Second-Hand Smoke (mean composite score = 65.55)

- Tobacco-attributable Mortality (mean composite score = 65.31)
- Addiction (mean composite score = 65.15)
- Toxic Emissions (mean composite score = 61.45)

As can be seen from these results, the Health Impacts of Pre- and Post-natal Smoking and the Health Impacts of Smoking series were the most effective categories of Health Warning Messages. These messages related to the direct health risks of smoking and had a noticeably higher impact on respondents than messages that had a less specific health message.

Overall, most HWMs were preferred by younger respondents when compared to older respondents. Generally, this was the case in all message series, and was especially true for the top ranked messages in each category. In some cases, message ratings differed on language lines, with Anglophone and Francophone respondents ranking messages sometimes differently. However, there is very little consistency between these differing ratings by category and nothing to suggest that a particular category fared more or less favourably in one language or another. When gender is considered, very few differences are noted, with the exception of the Health Impacts of Pre- and Post-natal Smoking category that was ranked higher by women. For the other series, some gender differences are apparent for particular messages but no pattern is found for the category as a whole.

Health Information Message Categories:

- Anatomy (mean composite score = 70.05)
- Benefits of Quitting (mean composite score = 67.63)
- Withdrawal Cravings (mean composite score = 67.33)
- True or False (mean composite score = 65.73)
- Stages (mean composite score = 64.76)
- Promotional of Tools (mean composite score = 62.85)
- Humour (mean composite score = 62.19)
- Join the Club (mean composite score = 61.18)
- Testimonials (mean composite score = 59.14)

The highest rated Health Information Messages were in the Anatomy category, followed by the Benefits of Quitting and Withdrawal Cravings category. Again, these categories contain messages that relate to specific health concerns associated with smoking (that many Canadians are familiar with) and our interpretation is that this element is why those categories received high scores. In addition, the highest rated categories seemed to be more informational and scientific in nature. Our qualitative research showed that the Withdrawal Cravings category tended to work quite well if participants had personal experiences with symptoms that they saw reflected in the message.

In the majority of cases, younger respondents rated the HIMs as more effective than did older respondents; again, this was especially true of the top ranked categories such as Anatomy and Benefits of Quitting. Francophones generally rated the messages higher, except in the case of the True or False category, and to some degree the Testimonials series. Gender did not play a notable role in the overall ranking of HIM categories; there were differences noted for specific messages but no consistent pattern across a category.

Most/Least Effective Messages

Warning Messages:

When specific messages are reviewed, it becomes evident that messages concerning specific personal health threats were the most efficient HWMs. The following is a list of the top ten HWMs, ranked by the message's overall composite score.

1. Lungs are for life (H-12)
2. Throat Cancer. It's tough to swallow (H-21)
3. Heart Disease (H-11)
4. Smoking is a major cause of heart disease (H-28)
5. Lung Cancer (H-24)
6. Harmful effects of second-hand smoke (P-33)
7. Eye Disease (H-30)
8. Stroke (H-19)
9. Second-hand smoke. First hand risk. (S-37)
10. Cigarettes are a major cause of strokes (H-25)

The least successful HWMs were those that were seen to be less relevant, lacking new information, and in many cases, these concepts received poor ratings for the impact of the picture. The following five messages were rated the lowest:

37. Don't poison me (T-44)
38. Enough is enough... (M-27)
39. "I planned to quit smoking before I turned 20. Now I'm 26." (A-1)
40. Air filters do not eliminate the smaller particles and gases found by tobacco smoke (S-41)
41. Living with chronic obstructive pulmonary disease (COPD) (H-20)

Health Information Messages:

The following is a list of the top five Health Information Messages, ranked by the message's overall composite score. Messages related to health impacts and the physical benefits of not smoking were perceived to be the most

appealing to respondents. These messages were information-heavy and focused on medical facts.

1. How is my body affected? (ANAT-02)
2. Do you cough in the morning? (B-08)
3. How is my body affected? (ANAT-02A)
4. Your heart will thank you... (B-09)
5. They peak during the first 48 hours... (WC-02)

The lowest rated HIMs are as follows and included many of the testimonial category. Respondents tended to find these personal accounts less relevant or helpful to them. The qualitative research showed that those messages that are seen as a realistic reflection of the quitting process as they themselves may have experienced, or as they believe it to be for others, may be more efficient than the messages reflected in these particular HIMs, which are not seen as very realistic or helpful.

14. I didn't have to do it alone... (T-16)
15. Need help quitting? (P-01B)
16. Join the smoke free revolution (JTC-01)
17. I crossed the finish line...(T-18)
18. My reason for quitting...(T-17)

Evaluation of Contact Information

In addition to testing Tobacco Health Warning Messages and Health Information Messages, this phase of the study also evaluated the effectiveness of the contact information on the cigarette package. This section was displayed on the front of a cigarette pack, separate from the picture and text of the HWM and included a toll-free quitline number and a web address for a cessation website. The Contact Information was preceded by a "call-to-action" phrase encouraging people to call the number or visit the website. Primary findings include:

- The majority of respondents felt the information was noticeable (64%) or somewhat noticeable (23%);
- The majority (67%) agreed that the space occupied by the contact information was an appropriate size and should not be changed. About one in five (22%) felt it should be bigger, while only 1 in 10 (10%) thought it should be smaller; and
- For the most part, Canadians feel the presence of this contact information is either important (63%) or somewhat important (20%).

Online Qualitative Phase

Some of the key highlights from the online focus groups, which focused particularly on the Contact information as described above as well as certain creative aspects of the HWMs are:

Contact Information Call-to-action phrases:

- Younger smokers tend to see this information in a different light than do older smokers, especially from those who have been smoking for a long time.
 - Younger smokers were more likely to have more positive reactions to the messages.
- As well, those who are thinking of quitting smoking tend to have more positive reactions to the phrases than those who are not.
- Phrases that are encouraging, empowering towards the individual and put the onus on the individual, work better than those that are telling people what to do, as though “someone else” is trying to impose their methods or values upon smokers.
- Shorter, snappier sentences are more likely to be impactful and memorable than longer phrases.
- The words “Contact us” are often seen as redundant, since they are followed by a phone number and a website.
- The findings were occasionally different for French phrases than for English phrases, as they were not always closely translated but did convey a similar message.

Contact Information Icon:

- Adding an icon to the Contact Information gathered some positive reactions because it attracted attention to the contact information.
 - But although it adds that element of colour and newness, some feel that it may make the cigarette pack too cluttered by adding another design element on an already limited space, and that it may be a bit childish or cheesy.

HWM colours and layout:

- In general, many participants felt that black text on a white background had the best balance of being noticeable and clearly readable.
 - Older adult smokers, in both the English and French groups, in particular tended to say that the white text on a black background was neither attractive nor easily readable, and would therefore be less likely to be read.
- Among those who did like the white text on black, the options without the black box around the whole message stood out more when

looking at the contact information section in isolation, although when asked to look at the whole of the HWM and the contact information combined, some said that the box around both elements helped tie them in a bit better and would draw their eyes more equally to both elements.

HWM background colours:

- Participants across all groups gravitated towards the option they found displayed the combination of readability and communication of danger best, which in this case was the option with a white background, and red and black text.

Use of “Warning”:

- There was agreement among all participants that communicating the sense of danger is best done by making the word “warning” stand out rather than to have it blend in.
 - Therefore, the options where the word was “boxed in”, either in red with white lettering or in black with white lettering tended to be chosen.

Disclaimer

For the purposes of this report, it is important to note that focus group research (both and in-person methodology as applied in the first phase, and online, as applied in the third phase of this research) is a form of scientific, social, policy and public opinion research. As structured group interviews that proceed according to a careful research design and attention to the principles of group dynamics, focus groups should be distinguished from “discussion groups”, “problem-solving groups”, “buzz groups”, or “brainstorming groups”. They are not designed to help a group reach a consensus or to make decisions, but rather to elicit the full range of ideas, attitudes, experiences and opinions of a selected sample of participants on a defined topic. Because of the small numbers involved, however, the participants cannot be expected to be thoroughly representative in a statistical sense of the larger population from which they are drawn and findings cannot reliably be generalized beyond their number.

In market research, the focus group approach seeks to develop insights and direction rather than quantitatively absolute measures. Because of the limited number of respondents and the restrictions of recruiting, this research must be considered only in a qualitative frame of reference. The qualitative elements of this study cannot be considered reliable or valid in a statistical sense. The findings presented here are intended to provide a first step in determining awareness, attitudes, reactions and opinions about issues discussed in these sessions.

Because qualitative research is exploratory in nature, MRIA (Market Research and Intelligence Association) guidelines preclude researchers from using any quantifiable terms to describe data (i.e. two out of ten, one in four). Rather, it is more appropriate to use terms such as “few”, “many”, “almost all”, or other generic terms. These are the terms that are presented in this report.

Please note that all research work undertaken by Decima Research is conducted in accordance with the Marketing Research and Intelligence Association (MRIA).

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