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# Market Testing of Potential Health Warnings and Information Messages for Tobacco Product Packaging: Phase 2 Front and Back of Pack Graphic Health Warnings

Qualitative Formative Research Report

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## 1 EXECUTIVE SUMMARY

### 1.1 Background, objectives and methodology

The National Partnership on Preventative Health has set the aim of reducing the proportion of Australians who smoke daily to 10% by 2018. Graphic health warnings on tobacco product packaging are an important tool in the battle to reduce the health burden associated with smoking. Market research is required to assist in the development of the new health warnings. To date, the project as a whole has involved gaining consumers' reactions to all the elements that make up the graphic warnings including:

- side of pack information messages; and
- health warning images, statements and detailed explanatory messages on the front and back of packs.

Phase 1 of the research was designed to test elements that would constitute the new side of pack information messages. This involved exploring reactions to 29 potential new text messages for the side of packs as well as the use of different colours, symbols, and layouts. The research involved a qualitative methodology, comprising 20 group discussions and four in-depth interviews, conducted during April 2010.

The focus of this report is on the findings from Phase 2 market testing of potential new front and back of pack graphic health warnings. This included exploring reactions to 48 new and refined health warning statements, images and detailed explanatory messages (copy) for the front and back of packs.

The research involved a qualitative methodology comprising 28 group discussions with mainstream audiences and four groups with Aboriginal and Torres Strait Islander peoples. The sample was designed to include smokers who were segmented by attitude using the Stages of Change model as well as quitters and non smokers. A pilot stage comprising six groups was conducted initially. This was used to explore the most effective means of splitting the stimulus set in terms of messages. Following the pilot, the two stimulus sets were re-organised in order to test the specific warnings within identified themes. The research was conducted in metropolitan and regional areas of New South Wales, Victoria, Queensland and Western Australia. Each group discussion was one and a half hours in length, and consisted of six to eight respondents. All research was conducted between 14 December 2010 and 18 January 2011.

### 1.2 Attitudes to current health warnings

The reported behaviour of smokers demonstrated that current health warnings on packs are still effective. Although few smokers claimed to take notice or think about the current health warnings, many admitted to particular behaviours which indicated that the warnings have some impact. For example, many explained they put the pack into something else, such as a cover or container, or they ask retailers for packs with images that are less personally relevant or graphic. Notably, with very few exceptions, all respondents could easily identify a specific health warning from the current suite that stood out to them which was often the one they avoided.

Smokers claimed that they viewed the health warnings as extreme and rare cases, and responded in a rational manner, claiming to dismiss the health consequences as unlikely to occur to them. However, even if they



perceive them as extreme examples they impact on smokers at an emotional level as they highlight areas of potential health concern of which they remain conscious. A prime example of this is the current health warning about mouth and throat cancer which portrays the image of the teeth.

In addition, the health warnings act as a prompt for family and friends to ask smokers to quit. Some smokers believed that other non smokers take more notice of the health warnings than they do, as their children, colleagues, friends and spouses have made comments about the health warnings.

### 1.3 Overall attitudes to new health warnings among mainstream audiences

#### Noticeability of new health warnings

The introduction of new warnings will be noticed by smokers. Although they claim to be desensitised to the existing messages, their familiarity with the current suite will mean they will notice the introduction of different messages. This will include refined messages as well as those which are new and previously unknown.

The strength lies in it being a multi-pronged information campaign by including a variety of different approaches within the warnings. It will be important to include a variety of topics demonstrating the impact of smoking on multiple areas of a person's life, such as their health, finances and their family. While smokers can doubt the relevance or credibility of the health impacts of smoking, no one can dismiss the emotional harm to others and financial cost of smoking.

A number of broad themes with potential to impact greatly on smokers' attitudes were identified. These were consistent across all ages, genders and Stages of Change and included:

- the idea of losing quality of life being more frightening than mortality;
- messages evoking emotions of guilt, shame, embarrassment and selfishness; and
- the strength of case histories.

#### Attitudes towards images

The image of the health warning is of paramount importance. For many it will be the main, if not the only, means of message communication on packs. Greater effort is required for the message to be communicated through the headline and the copy and as a result they can be more easily avoided. Literacy is also an issue, particularly with Aboriginal and Torres Strait Islander groups and lower SES groups. For this reason the image needs to communicate the message instantly. To maximise effectiveness, the image needs to be directly linked to smoking and contribute specifically to the message about smoking consequences.

In addition more 'complex' visual messages will be missed on packs. If an image requires time or effort to decipher it is unlikely to be as effective given the lack of willingness of smokers to engage in the topic.



## Attitudes towards images which use younger smokers

Images can also be used to address one of the key barriers to quitting which is the fact that smokers claim the health consequences only happen to older people. Images which portray health consequences that affect young people are likely to be powerful as they will create a greater sense of immediacy to younger smokers. At the same time older smokers begin to be concerned that the consequence could happen at any time. It was felt that some health warnings, such as the stroke warning could be strengthened further if a relatively young person is used.

## Use of graphic images

Graphic images still have a role to play within the suite of health warnings. However, the findings with the mainstream audiences demonstrated that images of real, damaged organs found on current packs are more effective than the clinical or scientific, 'textbook' images of organs that were tested. This is because the images which show damaged 'real' organs, such as the image of the brain showing a minor stroke on current packs, provokes more of an emotional reaction, such as one of shock or revulsion.

In contrast, reactions to the scientific, clinical images of organs such as those tested in the lung, heart and kidney cancer warnings were more rational. The smoker could more easily distance themselves from the image. The key issue is that smokers have no point of reference for what a healthy or unhealthy kidney or heart should look like as both look equally unfamiliar and unpalatable. They can make the comparisons more easily between the lungs, mainly due to previous advertising and the fact they can feel the damage to their lungs. The images could be improved if the healthy organ was made to look as being distinctly 'better' or 'healthier' than the unhealthy organ.

## Attitudes towards the copy

While smokers claimed they will not read the copy on the back of packs, some new topic area such as impotence, bladder cancer, and life histories involving Zita and Bryan will encourage them to read on. For the most part the copy is highly effective as it is direct, engaging, uncompromising and uncomplicated.

### 1.4 Overall attitudes to new health warnings among Aboriginal and Torres Strait Islander audiences

Responses from Aboriginal and Torres Strait Islander audiences were very similar to the mainstream population. There are two key areas which should be highlighted. Firstly, the theme of 'families' was particularly pertinent, especially as it extends to include the whole community and not just the nuclear family. Secondly, Aboriginal and Torres Strait Islander people responded to visual communication more than words and as a result the image needed to tell an immediate story. For this reason, the organ comparison images were highly effective.

## 1.5 Summary of reactions to topic areas

Table 1.5.1: Topic areas which resonated with all audiences

The table below shows that the most powerful topic areas across all demographics were 'babies', 'specific cancers', and 'family / significant others'. 'Impotence', 'financial' and 'PVD', also resonated with all audiences

	16-17 years		18-25 years		26-39 years		40-65 years	
	Male	Female	Male	Female	Male	Female	Male	Female
Babies	✓✓	✓✓	✓✓	✓✓	✓✓	✓✓	✓	✓
Specific Cancer	✓✓	✓✓	✓✓	✓✓	✓✓	✓✓	✓✓	✓✓
Family / Significant others	✓	✓✓	✓	✓✓	✓✓	✓✓	✓✓	✓✓
Impotence	✓✓	✓	✓	✓	✓	✓	✓✓	✓
Financial	✓	✓	✓	✓	✓	✓	✓	✓
PVD	✓	✓	✓	✓	✓	✓	✓	✓

Table 1.5.2: Topic areas which were more relevant to specific sub groups

As demonstrated in the table below, the themes of 'death', 'stroke', 'emphysema' and 'lungs' resonated more strongly with older smokers, aged 26-39 and 40-65 years. Whereas the themes of 'dental' and 'short term health effects' of smoking had greater impact on younger smokers aged 16-25. The theme of 'smoking affecting ageing' resonated much more strongly with females than males.

	16-17 years		18-25 years		26-39 years		40-65 years	
	Male	Female	Male	Female	Male	Female	Male	Female
Death					✓	✓	✓✓	✓✓
Ageing		✓		✓		✓		✓
Lungs							✓	✓
Dental	✓	✓	✓	✓				
Stroke					✓	✓	✓✓	✓✓
Emphysema					✓	✓	✓✓	✓✓
Short term health effects	✓		✓	✓				

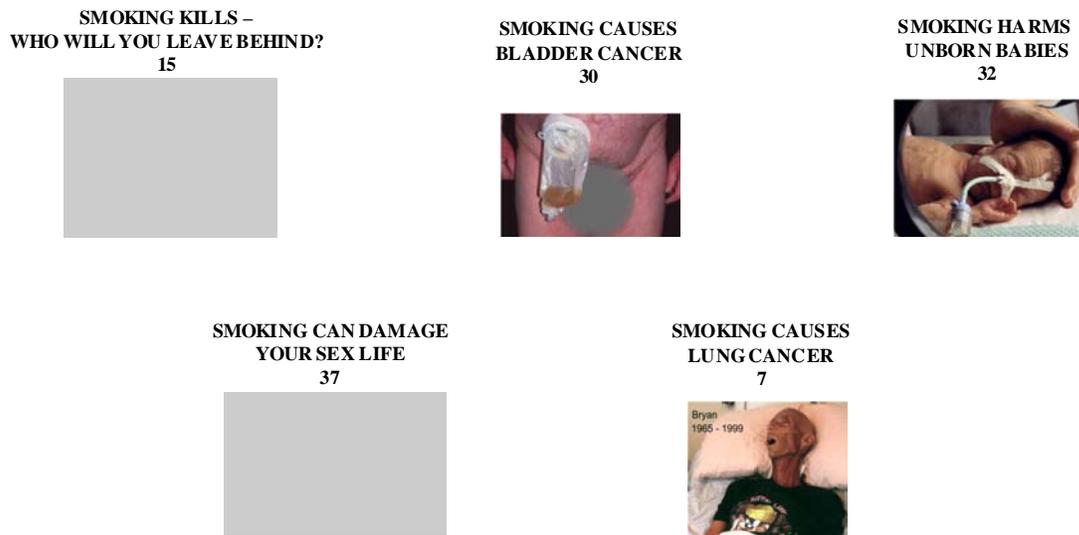
Two themes, 'heart disease' and 'infertility' were highly effective for a small proportion of the target audience, more specifically for those who could personally relate to the messages. 'Heart disease' resonated more with Aboriginal and Torres Strait Islander audiences. However, for the majority these warnings were easily dismissed.

There were three topic areas which did not gain a response from any target audience 'anti-social effects of smoking', 'quitting' and 'general cancer'. The relatively 'light' content of these health warnings was also exacerbated by poor executions.

### 1.6 Summary of reactions to specific health warnings<sup>1</sup>

Overall, the findings revealed that there is a set of health warnings which will have an impact across all audiences. Among these health warnings there is a mix of new and refined messages. Three of the health warnings are ready to be used as they are, with no executional changes. Two may require possible changes to the copy.

Figure 1.6.1: Health warnings resonating across the sample which require no or little changes<sup>2</sup>



<sup>1</sup> Some images may be the subject of copyright. Many have been kindly provided by overseas governments, non-government organisations, medical practitioners and individuals. Where required, acknowledgements for particular images may be found at Appendix C.

<sup>2</sup> Some images not shown due to privacy and/or copyright.

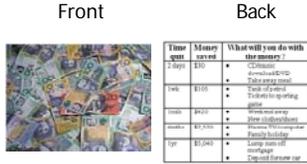
There are other health warnings which resonated across the whole sample where possible changes could be considered to the image, headline or copy. However, in the case of the kidney cancer image we would strongly recommend the visual is not used and is reconsidered.

Figure 1.6.2: Health warnings resonating across the sample which require some changes

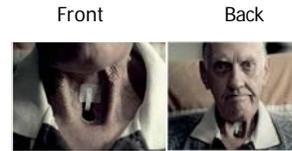
**SMOKING CAUSES KIDNEY CANCER**  
29



**HOW MUCH DOES SMOKING COST YOU?**  
24



**SMOKING CAUSES CANCERS OF THE HEAD AND NECK**  
5



**SMOKING DAMAGES YOUR BLOOD VESSEL**  
27



**SMOKING CAUSES MOUTH AND THROAT CANCER**  
4



There are some changes which should be considered and actioned for health warnings which target a specific demographic group. We would strongly recommend rethinking the visuals for these health warnings below. The headline of the dental image also requires some further thought.

Figure 1.6.3: Health warnings resonating with specific sub groups requiring some changes

**SMOKING DOUBLES YOUR RISK OF STROKE**  
10



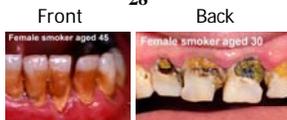
**SMOKING CAUSES EMPHYSEMA**  
9



**DO YOU WANT TO LOOK LIKE A SMOKER?**  
44



**SMOKING CAUSES DENTAL DISEASE**  
28



**SMOKING KILLS**  
17





If the topic areas of 'heart disease' and 'quitting' are to be included in this suite of health warnings, further considerable changes will need to be made. The recommended suggestions are described below.

The topic areas of 'short term health effects', 'general lung damage' and 'anti-smoking' have some appeal but they would need considerable revision if they are to be used. It may not be necessary to include them within this suite of health warnings.

### 1.7 Main recommendations

Based on the findings of this research, recommendations to the health warnings on the front and back of packs are as follows:

- 1 Consider moving forward with the following 15 warnings which require different actions.

Smoking kills – who will you leave behind? (15)	<b>No changes necessary</b>
Smoking harms unborn babies (32)	
Smoking causes bladder cancer (30)	
Smoking can damage your sex life (37)	<b>Consider changes to copy</b>
Smoking causes lung cancer (7)	
How much does smoking cost you? (24)	<b>Consider change of image</b>
Smoking causes cancers of the head and neck (5)	<b>Revise headings (if accuracy permits)</b>
Smoking causes mouth and throat cancer (4)	
Smoking damages your blood vessels (27)	
Smoking causes dental damage (28)	
Smoking causes kidney cancer (29)	<b>Revise images prior to moving forward</b>
Smoking doubles your risk of stroke (10)	
Smoking causes emphysema (9)	
Do you want to look like a smoker? (44)	
Smoking kills (17)	

- 2 The optimal mix of warnings should demonstrate the emotional and financial consequences of smoking as well as the health effects.
- 3 The suite of health warnings should include a range of different image styles to maximise engagement, from the graphic images of ideally 'real' damaged organs and body parts, to those that appeal on a more emotional level, such as the images of Zita and Bryan.
- 4 The suite of health warnings would benefit from inclusion of some familiar warnings that continue to have a great deal of impact on smokers, such as smoking kills, unborn babies, lung cancer and PVD. These should be mixed with new health warnings, such as impotence, bladder cancer and the financial implications of smoking. The credibility of the familiar warnings will assist in providing credibility to the new warnings being introduced.



- 5 To maximise reach, the suite of health warnings should contain some warnings that will impact across all demographics as well as some that are more specifically targeted for specific sub groups. For example, 'impotence' will be more targeted towards men and 'ageing' for women. Similarly, 'emphysema' will have more relevance for older smokers and 'dental disease' for younger smokers.
- 6 Consider rotating the 'question' taglines, such as 'Thinking of quitting?', 'Want help with quitting?', 'Want to talk about quitting?' and 'Want advice on quitting'. These could be used alongside the current tagline, 'You CAN quit smoking'.

#### **Recommendations on specific health warnings:**

- 7 No executional changes are necessary for the following warnings:
  - Smoking kills – who will you leave behind? (15)
  - Smoking harms unborn babies (32)
  - Smoking causes bladder cancer (30).
- 8 The following warnings would benefit from a change of copy to maximise impact:
  - Smoking can damage your sex life (37):
    - use the copy from warning 12 with the greater explanation of what causes impotence
    - remove the word 'temporary'
    - include the statistics from the copy on 37 if space permits.
  - Smoking causes lung cancer (7):
    - greater impact will be achieved if the copy was more about Bryan personally (a personal story) rather than being generally about lung cancer.
- 9 Consideration could be given to changing the image of the money on 'How much does smoking cost you (24):
  - The current image can be confusing to decipher and a clearer shot of a wad of money would communicate the message more immediately.

- 10 Consider revising the headlines, and copy where specified, of the following health warnings, if accuracy permits:
- Smoking causes cancers of the head and neck (5):
    - the headline could be more direct and refer to either 'throat' or 'neck cancer' only as people do not identify the visual as related to 'head cancer'
    - the copy would benefit from further personalised details about John, e.g. 'he had to learn to talk again to speak to his grandchildren.'
  - Smoking causes mouth and throat cancer (4):
    - the headline would benefit from being more direct and refer to 'mouth' cancer specifically.
  - Smoking damages your blood vessels (27):
    - consider changing the headline to 'Smoking causes gangrene' (if accurate). However, if not possible, consider maintaining use of 'Smoking causes peripheral vascular disease' with the new foot image as 'damages blood vessels' appears too understated. Also consider including the word 'gangrene' over the image if it cannot be used in the headline.
  - Smoking causes dental damage (28):
    - consider a headline more reflective of the extreme nature of the images, and which addresses the smoker directly, such as 'Do you want teeth like a smoker?' or 'Smoking harms your teeth.'
- 11 The images of the following warnings require significant revision prior to inclusion in the suite of health warnings. Consider using a creative agency to advise on and create images to depict the messages. The following information provides some guidance as effective images:
- Smoking doubles your risk of stroke (10):
    - consider using an image where the characteristics associated with stroke can be clearly seen, such as a paralysed face depicting a drooping mouth and eye
    - if possible use an image of a younger person to increase impact on younger smokers as well.
  - Smoking causes emphysema (9):
    - consider using an image which makes the lungs appear more real and less like a picture from a textbook, to demonstrate the contrast. Alternatively a more 'real' looking damaged lung would be more effective than the current images. However, if this cannot be done, use the image which was tested.

- Do you want to look like a smoker? (14):
    - consider use of a single image of what most people associate as a 'typical' smoker – a woman with deep etched lines around the eyes and mouth with dry skin
    - the image could be accompanied by stating the age of the woman as being in her late 30s or early 40s.
  - Smoking kills (17):
    - consider using an image of a younger person who is clearly close to death, such as an image similar to the Bryan image
    - if this cannot be achieved, the current image could be used of the toe tag, alongside an image of a younger dead body.
  - Smoking causes kidney cancer (29):
    - consider an image that demonstrates an outwardly, visible sign of having kidney cancer as images of the comparative organs have no impact on smokers
    - consider an image that demonstrates an outwardly, visible sign of having kidney cancer such as an image of the blood in the toilet if it is accurate
    - the copy could also be strengthened further by making reference to how kidney cancer would diminish a person's quality of life.
- 12 If 'heart disease' is used as a topic, recognise it is likely to resonate more strongly with Aboriginal and Torres Strait Islander audiences and those who are aware of a family history of heart disease:
- consider using the image of the heart organs as this would resonate with Aboriginal and Torres Strait Islander audiences.
  - consider using the statistic from health warning 1 alongside the copy from health warning 25 which explains how smoking causes heart disease.
- 13 If a health warning about 'Quitting' is to be included, significant changes will need to be made:
- the headline needs to be more empowering and positive. The current warning on packs 'Quitting will improve your health' is positive and could be used if an alternative cannot be thought of.;
  - the image will also need to be reconsidered. If a new image cannot be found, the image on current packs of a smoker calling the Quitline could work as readers can easily grasp the message
  - the copy on health warning 45 could be used, alongside the opening sentence 'long term smokers can and do quit'.
- 14 Consider the possibility of using the rotating executions of the warnings using the Bryan and Zita images for the topic areas of 'Families' and 'Lung Cancer'.



- 15 Other topic areas such as 'short term health effects', 'general lung damage', and 'anti social' will require significant work to produce headlines and visuals that work effectively as messages on packs:
  - this is likely to require more time than is available for development.
- 16 It is not recommended pursuing 'infertility' or 'general cancers' as a topic due to the lack of credibility.

## 2 BACKGROUND

### 2.1 Overview

The National Partnership on Preventative Health has set the aim of reducing the proportion of Australians who smoke daily to 10% by 2018. Graphic health warnings on tobacco product packaging are an important tool in the battle to reduce the health burden associated with smoking. At least 27 countries across the world have finalised requirements for graphic health warnings and a number of others have announced their intention or are undertaking the process to introduce them. Graphic health warnings have been required on almost all tobacco product packaging<sup>3</sup> in Australia since 2006.

The Australian Competition and Consumer Commission (ACCC) administers the regulation of on-pack tobacco health warnings, while the Department of Health and Ageing (the Department) provides policy input. The warnings, messages and images are intended to:

- increase consumer knowledge of the health effects of smoking;
- encourage smokers to give up; and
- discourage uptake or relapse.

In 2008 a comprehensive evaluation of the health warnings used in Australia was conducted.<sup>4</sup> The evaluation consisted of a literature review, as well as qualitative and quantitative consumer research. This indicated that the introduction of graphic health warnings has been highly successful. Consumer knowledge of the health effects of smoking has increased and the warnings have both encouraged smokers to quit and discouraged smoking uptake and relapse.

On-pack visuals were found to have been particularly helpful in enhancing the impact of health warnings. Images were found to increase the noticeability of the messages and make them more difficult to 'screen out'. Importantly many consumers feel the graphic health warnings have helped to deglamourise smoking. Moreover, almost a quarter of smokers admit to hiding or concealing their packs, which indicates that the graphic warnings make them feel uncomfortable about their habit. Images alongside messages that generate an emotional response, such as 'Don't let children breathe your smoke', have been found to be particularly effective. The explanatory text is also seen by some as credible and helps convey the potential health consequences of smoking.

However, areas for improvement were identified in the evaluation. In particular there was a decline in readership of the side of pack information that informs smokers about the chemicals in tobacco products and the chemicals released when they are smoked. There has also been a decline in readership of the front-of-pack warning, which currently only covers 30% of the front surface of packs. In addition, some consumers have problems with interpreting technical language in the health warning messages and some of the images

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<sup>3</sup> Warnings are currently not required on tobacco for export or cigars sold singly.

<sup>4</sup> Shanahan P and Elliott D, 2009, Evaluation of the Effectiveness of the Graphic Health Warnings on Tobacco Product Packaging 2008, Australian Government Department of Health and Ageing, Canberra.



were not felt to be clear, or their impact is declining. The need to ensure the Quitline number and statistics are up-to-date and accurate was also identified.

A great deal of research has been conducted internationally on graphic health warnings. In combination with the Australian research findings, the conclusions from international studies have helped to inform the re-design of potential new graphic health warnings in Australia.

## 2.2 The current need for research

Market research is required to assist in the development of potential new graphic health warnings. The project as a whole involves gaining consumers' reactions to all the elements that make up the graphic warnings:

- side of pack information message;
- warning images;
- warning statements; and
- detailed explanatory messages.

The Department of Health and Ageing is considering replacing the current single information message required on the side of tobacco packaging with a series of new statements on the constituents and emissions of tobacco products. As a result Phase 1 explored reactions to 29 potential new information messages for the side of packs as well as the use of different colours, symbols, and layouts. The research involved a qualitative methodology comprising 20 group discussions and four in-depth interviews conducted during April 2010 and has been reported on separately.

The Department is considering revising or updating the current graphic health warnings on the front and back of packs. Currently there are 2 sets of 7 warnings which are rotated annually. The focus of this report is on the findings from Phase 2 market testing of potential new front and back of pack messaging. This includes exploring consumers' reactions to new or revised warning statements, images and detailed explanatory messages on the front and back of packs to determine the most effective options.



### 3 RESEARCH OBJECTIVES

The overall objectives of Phase 2 of the research were to:

- Identify the new/refined graphics, warning statements, explanatory messages and Quit tagline options that generate the greatest degree of:
  - salience, noticeability and cut-through;
  - emotional engagement;
  - believability/credibility;
  - personal relevance;
  - readability, clarity and understanding;
  - memorability and recall; and
  - ability to educate or increase knowledge.
- Identify the potential impact of messages on smoking attitudes and behaviours, specifically:
  - increasing and reinforcing awareness of negative health effects of smoking;
  - increasing intention and motivation to quit;
  - encouraging cessation; and
  - preventing uptake and relapse.
- Identify the optimal mix and rotation of warnings and components in order to avoid wear-out.
- Identify which warnings and graphics resonate with certain target audiences.
- Make recommendations and/or suggestions for improving the proposed new messages to maximise their effectiveness.

## 4 RESEARCH METHODOLOGY

### 4.1 Overview

The research involved a qualitative methodology comprising 28 group discussions with mainstream audiences and 4 groups with Aboriginal and Torres Strait Islander people. The latter groups were conducted by CIRCA who regularly partner with GfK Blue Moon. The sample was designed to include smokers who were segmented by attitude using the Stages of Change model as well as quitters and non smokers (see section 4.3 for the rationale of the sample). A pilot stage comprising six groups was conducted initially which was used to explore the most effective means of splitting the stimulus set in terms of messages and / or use of themes (shaded in grey in table 4.2.1 below).

The research was conducted in metropolitan and regional areas of New South Wales, Victoria, Queensland and Western Australia. Each group discussion was 1 and a half hours in length, and consisted of 6-8 respondents.

All research was conducted between 14 December 2010 and 18 January 2011.

### 4.2 The sample

The following sample was achieved in this round of research.

Table 4.2.1: The Mainstream Sample

Grp	Stimulus set	Stage of change	Age	Gender	State	Location
1	A	Pre-contemplation	16-17	Male	WA	Bunbury
5	A	Pre-contemplation	16-17	Female	QLD	Brisbane
2	A	Pre-contemplation	18-25	Mix	VIC	Melbourne
3	A	Pre-contemplation	26-39	Mix	NSW	Parramatta
4	A	Pre-contemplation	40-65	Mix	VIC	Melbourne
9	A	Contemplation / preparation / relapse	16-17	Male	NSW	St Leonards
10	A	Contemplation / preparation / relapse	18-25	Mix	NSW	Orange
6	A	Contemplation / preparation / relapse	18-25	Mix	WA	Perth
7	A	Contemplation / preparation / relapse	26-39	Mix	VIC	Ballarat
8	A	Contemplation / preparation / relapse	40-65	Mix	NSW	Parramatta
21	A	Action / maintenance quitters	26-39	Mix	NSW	Parramatta
23	A	Non smokers (in danger of starting)	16-17	Female	NSW	Tamworth
25	A	Non smokers (in danger of starting)	18-25	Mix	WA	Perth
28	A	Non-smokers (never smoked or quit more than 2 yrs ago)	40-65	Mix	NSW	St Leonards

13	B	Pre-contemplation	16-17	Female	VIC	Melbourne
14	B	Pre-contemplation	18-25	Mix	NSW	Tamworth
11	B	Pre-contemplation	26-39	Mix	WA	Perth
15	B	Pre-contemplation	26-39	Mix	QLD	Brisbane
12	B	Pre-contemplation	40-65	Mix	VIC	Melbourne
17	B	Contemplation / preparation / relapse	16-17	Male	VIC	Melbourne
18	B	Contemplation / preparation / relapse	18-25	Mix	NSW	Parramatta
19	B	Contemplation / preparation / relapse	26-39	Mix	NSW	Parramatta
20	B	Contemplation / preparation / relapse	40-65	Mix	NSW	Orange
16	B	Contemplation / preparation / relapse	40-65	Mix	WA	Perth
22	B	Action / maintenance quitters	40-65	Mix	VIC	Ballarat
24	B	Non smokers (in danger of starting)	16-17	Male	NSW	Paramatta
26	B	Non smokers (in danger of starting)	18-25	Mix	VIC	Melbourne
27	B	Non-smokers (never smoked or quit more than 2 yrs ago)	26-39	Mix	WA	Bunbury

Table 4.2.2 : The Aboriginal and Torres Strait Islander groups

Group	Stage of change	Age / lifestage	Gender	State
1	Pre-contemplation / contemplation	18-29	Mix	NSW
2	Contemplation / preparation / action / relapse	18-29	Mix	QLD
3	Pre-contemplation	30-65	Mix	VIC
4	Contemplation / preparation / action / relapse	30-65	Mix	NSW

### 4.3 Rationale for mainstream sample

#### Smoking behaviour

The sample was designed to include people who had smoked cigarettes, cigars or pipe tobacco in the last three months and was segmented by attitude using the Stages of Change model. Respondents were asked about their smoking behaviour in the last three months rather than the number of cigarettes they smoke on average, as occasional smokers sometimes have difficulty calculating their average consumption patterns. The sample included a mix of daily and occasional smokers as well as people with different attitudes to quitting. In this phase the sample also included quitters who had stopped smoking within two years, non smokers including those who had never smoked, as well as those who had quit more than two years ago.



## Stages of change

The groups were segmented using the Stages of Change model<sup>3</sup>. In the mainstream sample respondents at the pre-contemplation stage were separated from those at the contemplation / preparation / action / relapse stages to ensure homogeneity within the groups. All four stages were adequately represented across the sample to allow further analysis by each stage.

## Age (lifestage)

The sample was split into the following age brackets: 16-17, 18-25, 26-39 and 40-65.

The sample included a mix of respondents at the pre-family, young family, older family, empty nester lifestages. Within these, quotas were also used to ensure the inclusion of parents with children of a range of different ages.

## Gender

Mixed gender groups were used for adults aged 18 to 65. Groups with 16-17 year olds were single gender.

## SES / income / work status

The groups were conducted in relatively blue collar areas to ensure that the sample was skewed towards people from lower socio-economic groups. This reflects the demographics of smokers in Australia, and is based on the focus of the new National Tobacco Strategy towards lower socio-economic groups.

## CALD and disability representation

Quotas were also set to ensure the sample included adequate representation of people with disabilities and people with English as their second language.

### 4.4 Rationale for Aboriginal and Torres Strait Islander sample

Given the relatively small sample comprising four groups, broader age bands (18-29 and 30-65) were chosen to ensure age representation. Groups were carried out in three states including New South Wales, Victoria and Queensland.

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<sup>3</sup> Prochaska JO, Velicer WF, Rossi JS, Goldstein MG, Marcus BH, et al. Stages of change and decisional balance for 12 problem behaviors. *Health Psychology* 1994 Jan;13(1):39-46.

#### 4.5 Recruitment of respondents

Recruitment for the discussion groups was completed through Interviewer Quality Control Australia (IQCA) accredited recruitment specialists. A recruitment screener including all relevant demographic variables was provided to use for recruitment. A copy of the recruitment screener is included in Appendix A.

#### 4.6 Use of stimulus materials

A pilot stage comprising six groups was conducted to test the stimulus material. The groups were used to confirm how many warnings could be tested effectively during a group discussion. During these groups the 48 different health warnings had not been separated into different themes and were split across the two stimulus sets (A and B). This was done to prevent respondent fatigue and to ensure responses could be obtained in a significant level of detail.

Following the pilot round, with approval from the Department, it was decided that it would be easier to compare the different images, warnings and explanatory messages if all messages about a particular theme were included within the one stimulus set. For the main research phase the two stimulus sets were re-organised in order to test all the specific warnings within identified themes. For example, all messages about ‘quitting’ were placed into the same stimulus set.

The methodology was designed to ensure that each set of messages (Set A and Set B) was reviewed by 14 groups in the mainstream sample and 2 among ASTI audiences, across a range of age groups.

The final composition of stimulus sets used in the main round of testing is shown below.

Figure 4.6.1: Stimulus material

Set A		Set B	
Stroke, emphysema	10, 34, 9, 33	Babies	8, 32, 38
Heart, PVD	1, 25, 3, 27	Quitting	20, 21, 45
Significant others, ETS	14, 15, 16, 39	Impotence	12, 13, 37
Fertility	11, 35, 36	Death	17, 40, 41
Cancer	5, 6, 30	Cancer	4, 7, 29, 31
General Cancer	18, 42	Ageing	19, 43, 44
Short term health effects	22, 46	Financial	24, 48
Anti-social	23, 47	Lungs	2, 26
		Dental	28

These materials are discussed within relevant sections of this report. All final materials can be found in Appendix B.

A range of stimulus materials were used within the main stage of group discussions. These included:

- existing cigarette packs to understand existing reactions to health warnings;
- an A3 booklet comprising 24 different warnings and images (4 to a page) used to explore reactions to the headlines and images (stimulus Set A or B); and
- an A4 booklet comprising the warning, image and explanatory message used to explore reactions to the explanatory message (stimulus Set A or B).

#### 4.7 Discussion guide

A semi-structured discussion guide was developed and approved by the Department prior to use. The general flow of the discussions is described below. The full guide is appended in Appendix C.

Initially, respondents were asked to pick out one cigarette pack and note down their responses to specific statements about that pack. This exercise was conducted as a warm up exercise and provided a clear indication of reactions to the current health warnings on packs before we introduced the new ones.

In order to test reactions to the various new warning statements and images respondents were given an A3 booklet comprising the 24 health warnings, with four set out on each page. For each page they were asked to record the health warning that makes them stop and think as well as the warning that makes them the most concerned about their smoking behaviour. Quitters and non smokers were asked which warning they believed would make smokers most concerned about their behaviour. Respondents were told the same warning may apply to both categories. Following this, each headline warning and image were then discussed in detail.

Secondly, respondents were handed an A4 booklet which comprised the explanatory message alongside the image and the headline. Respondents were asked to read the detailed message and rate it in terms of how much it makes them stop and think on a scale of 1-5, where 1 meant they would not think at all and 5 meant they would definitely stop and think. Respondents were then asked to discuss the explanatory messages in detail to explore which was their preference, if two or more were supplied, and which fitted with the strongest images and headlines. Following on from this, as a group exercise respondents were asked to sort the warnings into categories according to whether they had a high, medium or low impact on them. Lastly, respondents were asked to comment on six different options for the Quit tagline.



GfK bluemoon

## DETAILED FINDINGS



## 5 BROAD FINDINGS ABOUT EXISTING AND NEW FRONT AND BACK HEALTH WARNINGS

### 5.1 Smokers' attitudes to existing health warnings

The reported behaviour of smokers demonstrated that current health warnings on packs are still effective. Although few smokers claimed to take notice or think about the current health warnings, many admitted to particular behaviours which indicated that the warnings have some impact. Many claimed to:

- put the pack into something else (a cover or container);
- empty cigarettes into another container to carry; and/or
- ask retailers for packs with images less personally relevant or graphic.

Notably, with very few exceptions, all respondents could easily identify a specific health warning from the current suite that stood out to them. This was often the one they avoided buying if they could.

Smokers claimed that they viewed the health warnings as extreme and rare cases and responded in a rational manner, claiming to dismiss the health consequences as unlikely to occur to them. However, even if they perceive them as extreme examples they impact on smokers at an emotional level as they highlight areas of potential health concern of which they remain conscious. A prime example of this is the current health warning about mouth and throat cancer which portrays the image of the teeth. It was often ridiculed as the most extreme and unrealistic of the current set of images. This demonstrated that the warning has some impact on smokers as many claimed to be highly conscious of their teeth and of the cost of the dentist.

In addition, the health warnings act as a prompt for family and friends to ask smokers to quit. Some smokers believed that other non smokers take more notice of the health warnings, as their children, colleagues, friends and spouses have made comments about the health warnings in the past.

*"My kids are always saying, 'See Mum. See how bad it is for you'."*

*"Gives my wife more ammunition to pick on me with."*

*"You are conscious of having your pack out on the table around some friends."*

### 5.2 Smokers' attitudes to new health warnings

The introduction of new warnings will be noticed by smokers. Although they claim to be desensitised to the existing messages, their familiarity with the current suite will mean they will notice the introduction of different warnings. This will include refined warnings as well as those which are new and previously unknown.

The strength lies in it being a multi-pronged information campaign by including a variety of different approaches within the warnings. It will be important to include a variety of topics demonstrating the impact of smoking on multiple areas of a person's life, such as their health, finances and their family. While smokers can

doubt the relevance or credibility of the health impacts of smoking, no one can dismiss the emotional harm to others and financial cost of smoking.

A number of broad themes with potential to impact greatly on smokers' attitudes were identified. These were consistent across all ages, genders and Stages of Change. These included:

- the idea of losing quality of life and living with health consequences being more frightening than mortality;
- the idea of messages evoking emotions of guilt, shame, embarrassment and selfishness; and
- the idea of using case histories.

### Health consequences

Including health warnings about living with the health consequences due to smoking is likely to be powerful. The thought of having to live with a health consequence was more distressing to most smokers than the threat of death. The most feared consequences were those health effects that were seen to diminish a person's quality of life, including a reduced physical, mental or financial capacity, loss of independence or reliance on family or friends to care for them.

*"Losing quality of life is more than dying."*

*"It's my worst nightmare (stroke). You can't move, you lose all independence."*

*"Least when you're dead, you don't have to live with the physical pain every day knowing what you've done to yourself and everyone around you."*

### Health warnings prompting emotions

A number of health warnings were effective in evoking emotions of guilt, shame, embarrassment or selfishness. These emotions prompted smokers to realise that because the consequences are a result of actions they have chosen they are not just random occurrences or accidents, and may well happen to them. For example, the new warnings for throat and mouth cancer, depicting images of the teeth portrays a visible deformity that is noticeable to others, which leads to smokers feeling embarrassed and shameful.

*"I chose to do this to myself."*

In addition, some other warnings, such as the baby and images of Bryan and Zita, are powerful images which remind smokers of the direct impact their behaviour can have on others, both physically and emotionally. It makes them feel guilty and can act as a powerful reinforcement for intentions to quit.

*"I chose to do this to others."*

### Life histories

Including health warnings with real life histories will help to add balance to the suite of health warnings which are primarily associated with 'clinical' health consequences. When reading 'real' personal stories, people feel the 'tragedy' of the situation and become emotionally involved. They tend to relate to the situation as they themselves share the person's smoking behaviour which has caused the health consequences.

The presence of family allows all people with children to 'project' the situation onto their own family. Using names increases memorability of warnings and facts about a person can increase personal relevance of the story. For example, including Zita's age can act as a yardstick for smokers to compare.

*"She was only 38, not that long away for me."*

That said, care must be taken to ensure that real life histories are not 'overused' on packs as they are currently a common and familiar delivery for other health warning communications.

### 5.3 Summary of reactions to topic areas

Table 5.3.1: Topic areas which resonated with all audiences

The table below shows that the most powerful topic areas across all demographics were 'babies', 'specific cancers', and 'family / significant others'. 'Impotence', 'financial' and 'PVD', also resonated with all audiences.

	16-17 years		18-25 years		26-39 years		40-65 years	
	Male	Female	Male	Female	Male	Female	Male	Female
Babies	✓✓	✓✓	✓✓	✓✓	✓✓	✓✓	✓	✓
Specific Cancer	✓✓	✓✓	✓✓	✓✓	✓✓	✓✓	✓✓	✓✓
Family / Significant others	✓	✓✓	✓	✓✓	✓✓	✓✓	✓✓	✓✓
Impotence	✓✓	✓	✓	✓	✓	✓	✓✓	✓
Financial	✓	✓	✓	✓	✓	✓	✓	✓
PVD	✓	✓	✓	✓	✓	✓	✓	✓

Table 5.3.2 – Topic areas which were more relevant to specific sub groups

The table below shows that the themes of ‘death’, ‘stroke’, ‘emphysema’ and ‘lungs’ resonated more strongly with older smokers, aged 26-39 and 40-65 years. Whereas the themes of ‘dental’ and ‘short term health effects’ of smoking had greater impact on younger smokers aged 16-25. The theme of ‘smoking affecting ageing’ resonated much more strongly with females than males.

	16-17 years		18-25 years		26-39 years		40-65 years	
	Male	Female	Male	Female	Male	Female	Male	Female
Death					✓	✓	✓✓	✓✓
Ageing		✓		✓		✓		✓
Lungs							✓	✓
Dental	✓	✓	✓	✓				
Stroke					✓	✓	✓✓	✓✓
Emphysema					✓	✓	✓✓	✓✓
Short term health effects	✓		✓	✓				

Two themes, ‘heart disease’ and ‘infertility’ were highly effective for a small proportion of the target audience, more specifically for those who could personally relate to the warnings. However, for the majority these warnings were easily dismissed.

There were three topic areas which did not gain a response from any target audience which included ‘anti-social effects of smoking’, ‘quitting’ and ‘general cancer’. The relatively ‘light’ content of these health warnings was also exacerbated by poor executions.

#### 5.4 Overall findings regarding the new images<sup>6</sup>

The image of the health warning is of paramount importance. For many it will be the main, if not the only, means of message communication on packs. Greater effort is required for the message to be communicated through the headline and the copy and as a result they can be more easily avoided. Literacy is also an issue, particularly with Aboriginal and Torres Strait Islander groups and other lower SES groups. For this reason the image needs to communicate the message instantly.

<sup>6</sup> Some images may be the subject of copyright. Many have been kindly provided by overseas governments, non-government organisations, medical practitioners and individuals. Where required, acknowledgements for particular images may be found at Appendix C.

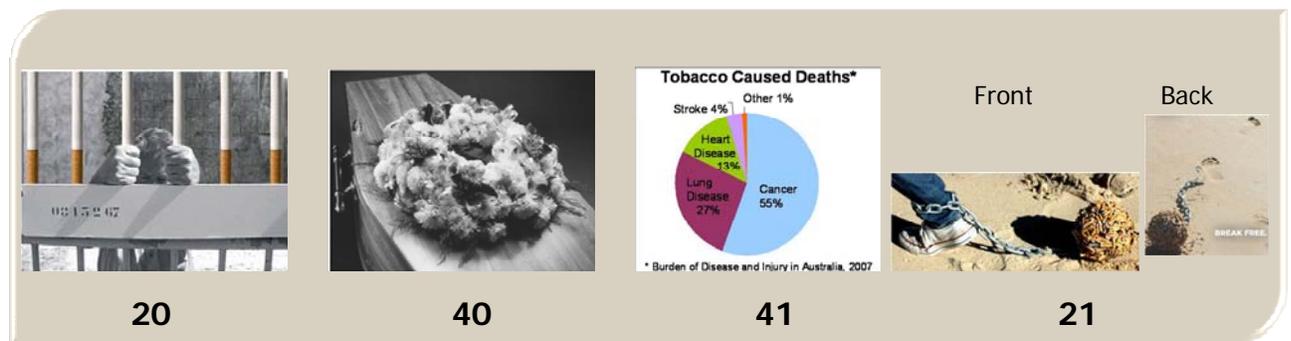
To maximise effectiveness, the image needs to be directly linked to smoking and contribute specifically to the message about smoking consequences. The first association that comes to mind should be a link to smoking as too many other possibilities for the image will result in criticisms and impact on credibility. Four of the images that were criticised for this reason are shown in the figure below.

Figure 5.4.1: Ambiguous images



In addition more 'complex' visual messages will also be missed on packs. If an image requires time or effort to decipher it is unlikely to be as effective, given the lack of willingness of smokers to engage in the topic. In essence the message delivery from the image has to be instantaneous. It is worth bearing in mind that the size of the pack also results in subtle details of complex messages being easily missed. Some of the more complex visuals are shown in the figure below.

Figure 5.4.2: Complex images



Images can also be used to address one of the key barriers to quitting which is the fact that smokers claim the health consequences only happen to older people. Images which portray health consequences that affect young people are likely to be powerful as it creates a greater sense of immediacy to younger smokers. At the same time older smokers begin to be concerned that the consequence could happen at any time. The images depicting Zita, Bryan and the image of the 30 year old's teeth in the dental disease warning help to address

this barrier. It was felt that some health warnings could be strengthened further if a relatively young person is used, such as with the stroke warning.

Graphic images still have a role to play within the suite of health warnings. However, the findings with the mainstream audiences demonstrated that images of real, damaged organs shown on current packs are more effective than the clinical or scientific, 'textbook' images which were tested. This is because images which show damaged 'real' organs, such as image of the brain showing a minor stroke on current packs, provokes an emotional reaction, albeit in many cases one of shock or revulsion.

In contrast, reactions to the scientific, clinical images of organs such as those tested in the lung, heart and kidney cancer warnings were more rational. The smoker could more easily distance themselves from the image. The key issue is that smokers have no point of reference for what a healthy or unhealthy kidney or heart should look like as both look equally unfamiliar and unpalatable. As a result, they reacted in the same way to the healthy and unhealthy organ:

*"They just both look like slabs of meat." (Kidneys)*

*"Yabby bait. Both of em." (Kidneys)*

Although the clinical image of the lungs still results in a rational reaction, there was less of an issue with this image as smokers can more easily make the comparison. This is the result of two factors:

- smokers are familiar with what 'unhealthy' lungs may look like through previous warnings ; and
- they can feel the impact of smoking on their lungs and can more easily imagine what the damage may look like.

These images could be improved if the healthy organ was made to look distinctly 'better' or 'healthier' than the unhealthy organ.

## 5.5 Overall findings regarding the new copy

While smokers claimed they will not read the copy, some new topic areas such as impotence, bladder cancer, and life histories involving Zita and Bryan, will encourage them to read on. Overall, the copy for most of the warnings was found to be highly effective and engaging. For the most part, the copy is direct, uncompromising and uncomplicated. Its effectiveness lies in the fact that:

- the facts are presented in a way that makes them seem irrefutable and unequivocal;
- the messages are short, sharp and to the point;
- there are no unnecessary words or phrases;
- makes the statements irrefutable; and
- in most cases, avoids trying to be 'clever' or smart and, therefore, avoids being perceived as 'ad speak' or 'marketing.'



## 5.6 Overall findings from Aboriginal and Torres Strait Islander audiences

Responses from Aboriginal and Torres Strait Islander audiences were very similar to the mainstream population. As a result, findings have only been reported separately where differences occurred. There were two key findings from the Aboriginal and Torres Strait Islander groups. Firstly, Aboriginal and Torres Strait Islander peoples are much more likely to respond to visual communications than words. For this audience, it is imperative that the image tells a story instantaneously. They are even less likely to engage with the headline and copy than mainstream audiences due to literacy levels and being visual story tellers. For this reason, the images which compare organs (lung, heart, kidney) were much more effective with Aboriginal and Torres Strait Islander audiences as they immediately 'tell' a story of the healthy option versus the unhealthy option.

Secondly, the theme of 'family' came across as particularly powerful with Aboriginal and Torres Strait Islander audiences, which was not surprising given the poignancy of this theme in broader Aboriginal and Torres Strait Islander communications. For them, this theme of avoiding hurting or leaving behind the 'family' extends to include the broader community.

## 6 HEALTH WARNINGS RESONATING ACROSS ALL THE SAMPLE

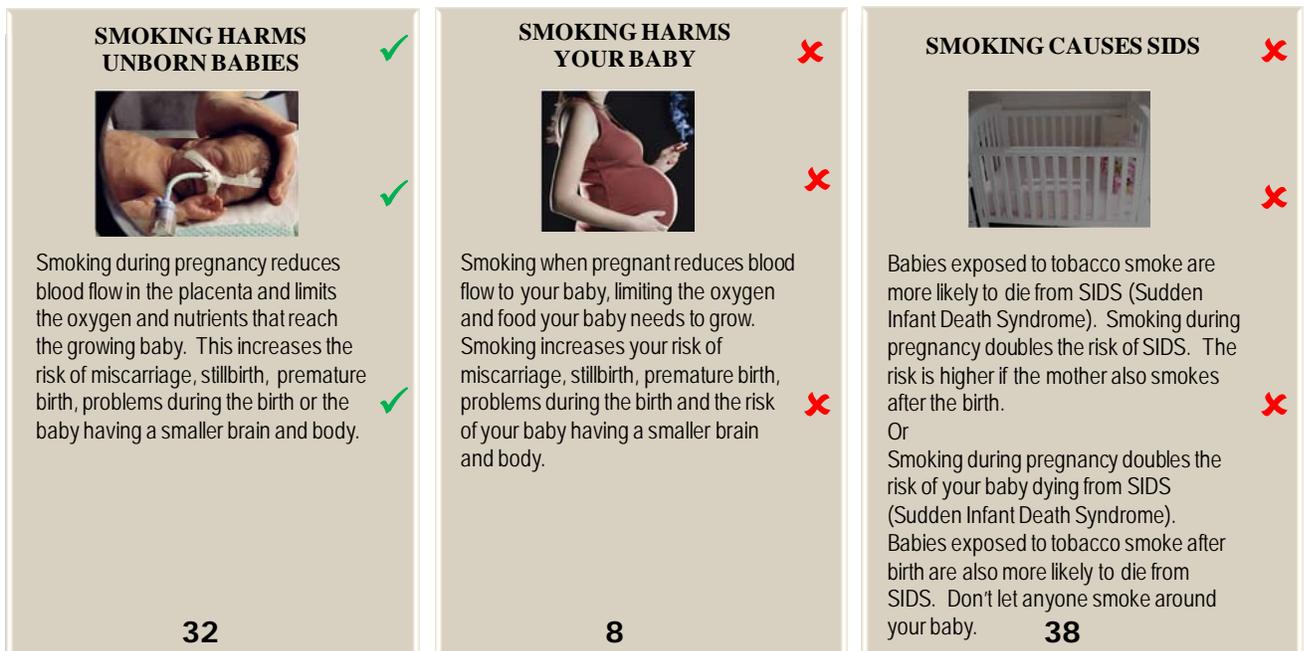
In this section each of the health warnings which resonated across all the sample are discussed. These topic areas are recommended for inclusion in the suite of health warnings:

- babies;
- specific cancers;
- families;
- impotence/sex life;
- financial; and
- Peripheral Vascular Disease (PVD).

### 6.1 Overall reactions to the theme: 'Babies'

Cigarette smoke harming babies is a powerful theme and had a considerable impact across all ages, genders and smokers in the various Stages of Change. Despite it being a well known warning on current packs, the impact it has on all smokers suggests that it should continue to be used. Its strength lies in the fact that it manages to prompt emotions of guilt and shame, as it demonstrates the effects of tobacco smoke on babies. While for many smokers the baby is the extreme case, the guilt and shame from this warning provokes them to think about the possible harm they may be causing others, including their own children or other people on the street.

Figure 6.1.1: Summary of reactions to the theme 'Babies'



As shown in figure 6.1.1, 'Smoking harms unborn babies' is the strongest message of the three for a broad target audience.

#### Smoking harms unborn babies (32)

This health warning is the most powerful as it capitalises on the guilt which all smokers feel. Whilst it reminded smokers of the harmful implications of smoking during pregnancy, it also prompted thoughts about the harmful effects of second-hand smoke on 'others'. A sense of shame overrides when they consider this a possibility. This image makes them think about the possibilities of harming 'vulnerable' groups more broadly. The image of the hand cradling the innocent baby contributes to this sense of guilt as it shows that damage has already been done and there is little the parent can do. The copy on health warning 32 is effective in explaining how and why smoking during pregnancy is harmful. The terminology used is clearly understood by all.

#### Smoking harms your baby (8)

While this health warning is potentially effective for pregnant women, other smokers were able to dismiss this warning. For a small minority who were trying to conceive or who were pregnant, the image and use of the words 'your baby' are powerful reminders of the harms of smoking. However, the issue with this warning was that other smokers were able to divorce themselves from it. They found it easy to place blame on the Mother only, rather than accept some of the responsibility themselves as they did when they saw the 'unborn babies' warning (32). Moreover, they rejected any relevance of the message for themselves as most claimed they would never smoke around a pregnant woman. As a result, this health warning would not be broad enough in its impact to be included as a new warning. That said, it has potential to work effectively in future messaging that may be targeting pregnant women specifically.

#### Smoking causes SIDS (38)

The SIDS health warning caused some controversy, due to the fact that many doubted the credibility of the headline and the copy, believing that it has not been proven that smoking causes SIDS.

*"I don't think that's correct – they don't have any proof."*

The real danger of including this health warning in the suite is the fact that the credibility of the other warnings would be undermined, and it could lead smokers to dismiss other new warnings. Given the sensitivity of the subject area, there is also the additional risk of unintended consequences of potential emotional harm of people whose children have died of SIDS. The image of the empty cot does not provoke any emotional reaction among most people, with the exception of a small minority who have either lost children or are experiencing difficulties getting pregnant.

## 6.2 Overall reactions to the theme: 'Specific cancers'

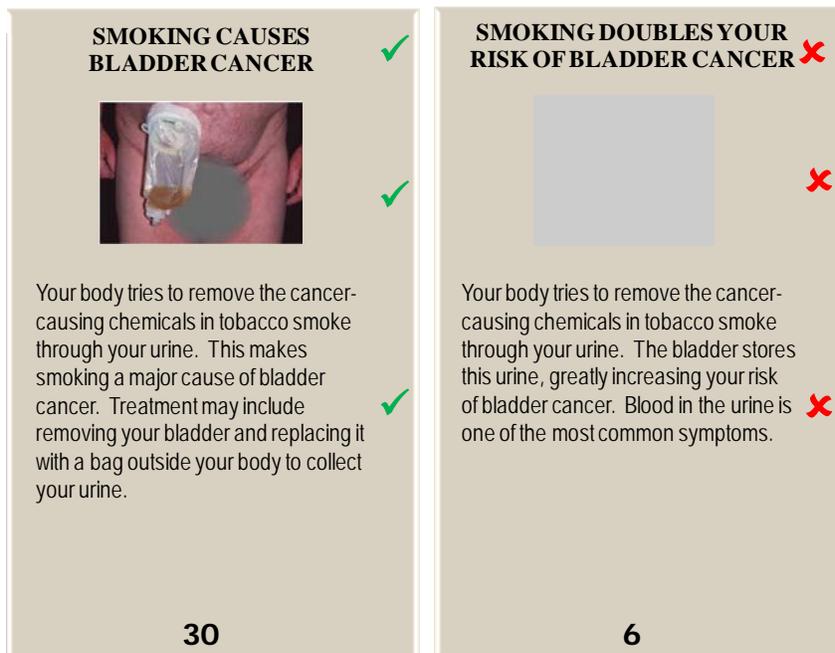
Health warnings about specific cancers had a greater impact on respondents than those that discuss cancer more broadly. Naming the disease makes the topic more definitive and it poses more of a threat as it directs smokers' thoughts to that particular body part. Many rejected the general threat of 'cancer' as an overused threat.

*"Everything causes cancer these days."*

Inherent within many of the specific cancer warnings was that the person may continue to live, albeit with some impact on them physically that others may see. This topic area successfully raised respondents' fear about a reduced quality of life and provoked possible emotions of guilt and shame of having caused harm to themselves.

### Bladder cancer

Figure 6.2.1: Summary of reactions to the theme 'Bladder cancer'<sup>7</sup>



Bladder cancer is a potentially very strong new topic area. For many respondents it was 'new news' and is not currently linked to smoking. Among the sample, there was a surprising amount of familiarity with colostomy and catheter bags for it to be seen as a relatable condition, and not too extreme in its depiction. It was the

<sup>7</sup> Image not shown due to privacy and/or copyright.

lower quality of life and embarrassment, linked with having to use a colostomy, catheter or (urostomy) bag, that was the fearful prospect for both young and old smokers:

*"Oh ... could you imagine being attached to a bag for the rest of your life?"*

*"It's just gross, it's disgusting. Kill me now."*

Smokers were able to make an easy link with smoking given that all were uncertain as to what causes bladder cancer. No one had any previous experience or knowledge to contradict the claims. Figure 6.2.2. demonstrates that one of the ideas was more direct in all areas.

### Smoking causes bladder cancer (30)

Firstly, the image of the urostomy bag is powerful as it directly communicates the potential for a reduced quality of life. It is somewhat of a shock without being graphic. Rather it tended to provoke a sense of embarrassment and disgust as people tend to avoid conversation about body waste.

*"That grosses me out, can you imagine having something like that."*

The headline in health warning 30 provides the definitive link of smoking to bladder cancer and it was easily accepted as credible. The powerful visual and new information are likely to prompt people to read the copy. The explanatory message provides an immediate, straightforward explanation of why smoking causes bladder cancer and its definitive tone leaves no room for doubt.

### Smoking doubles your risk of bladder cancer (6)

This image was more provocative for men than women as the possibility of seeing blood in the toilet indicated that something 'is wrong' to men. Women on the other hand are more accustomed to the scenario due to menstruation, with this not usually an indication of something being 'wrong'.

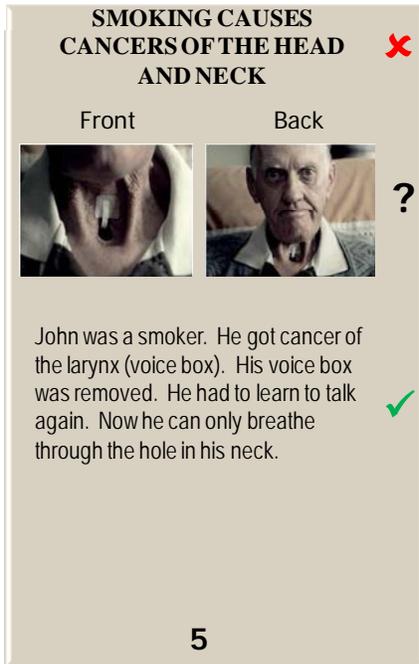
*"It's just blood in the toilet, it doesn't bother me."*

Women also rejected this image as depicting the toilet seat being up indicated this as a 'male' situation. While frightening and shocking for some, it did not have as strong an impact as the other image.

Nor was the headline regarded to be effective, as 'doubling the risk' mean little when smokers were not sure of the existing risk. While informative, the copy is not as strong as the alternative as it does not mention 'the bag', and, therefore, it does not touch on the fear of a reduced quality of life.

Head and neck cancer

Figure 6.2.2 Summary of reactions to the theme 'Head and neck cancer'



The image of John depicting a 'hole' in his neck was strongly associated with smoking. A surprising number of respondents claimed to have known, or seen someone with this impairment, and, therefore, it was perceived as a possible condition. Smokers were also unaware of other causes that lead to this type of surgery.

Smokers could readily accept the possibility of throat, mouth and neck cancer being caused by smoking as these parts of the body are exposed to all the chemicals in the smoke as they inhale. Smokers were also able to link this 'extreme' case to less extreme physical conditions they already have, such as a raspy voice or sore throat.

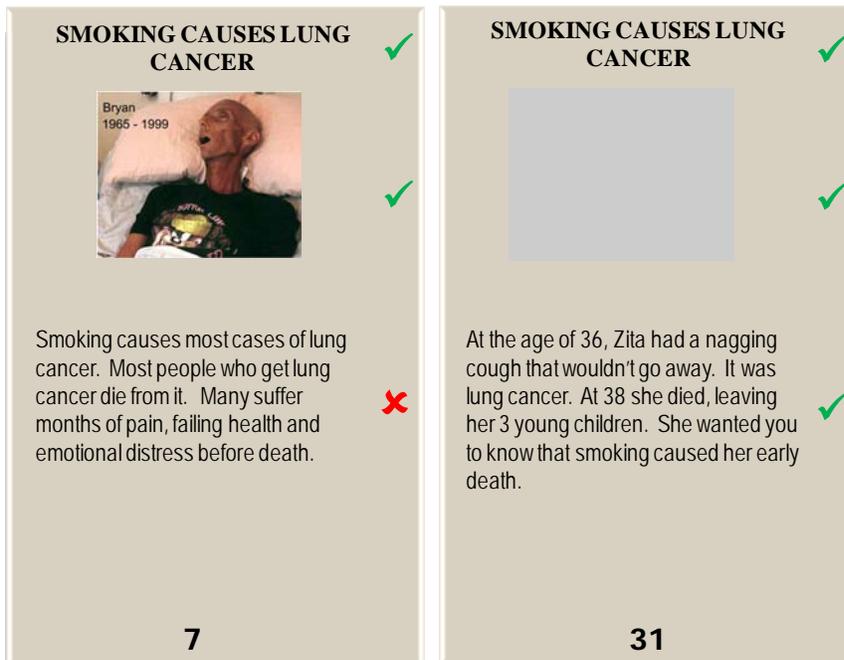
An image of a younger smoker may increase the effectiveness of the health warning further. While the image of John is highly credible, it increases the perception of this being a consequence of long-term heavy smoking. As a result some younger smokers rejected this message, claiming that they will give up before this could happen to them. However, if an image of a younger person cannot be found, this one should still be included in the suite of health warnings as it is an effective example of an outward physical manifestation of the consequences of smoking, feared by most smokers.

The headline, 'Smoking causes cancer of the head and neck' is cumbersome. If accurate, referring to 'throat cancer' or 'neck cancer' would be more direct and have greater cut through. The reference to 'cancer of the head' appeared out of place and was deemed less specific.

Overall, the highly descriptive and factual language within the copy is appreciated. The personal approach of explaining John's story was welcomed, however, some additional detail would strengthen the warning. For example, 'he had to learn to talk again to speak to his grandchildren', is likely to further tap into this emotional approach.

Lung cancer

Figure 6.2.3: Summary of reactions to the theme 'Lung cancer'<sup>8</sup>



Despite being old news, 'smoking causes lung cancer' is still a powerful message. The headline is direct and effective as it is a fact that no smoker can dismiss. Using life histories is likely to be a powerful approach to tackle the familiar warning. Despite being a familiar approach in TV ads, it was welcomed as a new approach for packs. Respondents were interested in reading the person's story during the groups.

Given the strength of the approach, both images and life histories could be potentially powerful for this topic area. At this stage it is suggested that the warning of Bryan is used for lung cancer, as the warning about Zita more strongly depicts the message about smoking affecting families. These two warnings could be swapped at a later date.

<sup>8</sup> Image not shown due to privacy and/or copyright.



### Smoking causes lung cancer (7)

The skeletal image of Bryan is so powerful that it could be used with a number of topic areas, such as 'Lung Cancer' and 'Smoking Kills'. The shock of the image speaks for itself and it is highly credible that lung cancer has caused this slow, painful death from lung cancer.

*"A living death."*

*"He looks like all the oxygen has been sucked out of him."*

Inclusion of his name and dates helps to personalise the image which is important as he is not familiar from a TV ad. Consideration could be given to including the age at which he died, as opposed to his dates, if there is concern about him having died over ten years ago. Stating his young age helps to demonstrate that lung cancer can happen to anyone.

*"To think he went through that at 34."*

However, the copy on this health warning could be improved. Inclusion of specific details about Bryan's life history would be more powerful to people than referring to generic lung cancer facts.

### Smoking causes lung cancer (31)

While Zita's image is not as shocking as Bryan's, familiarity with her life story from TV advertising helped to strengthen its impact. Smokers were reminded of Zita's story and felt the same emotions as they do when viewing the TV ad.

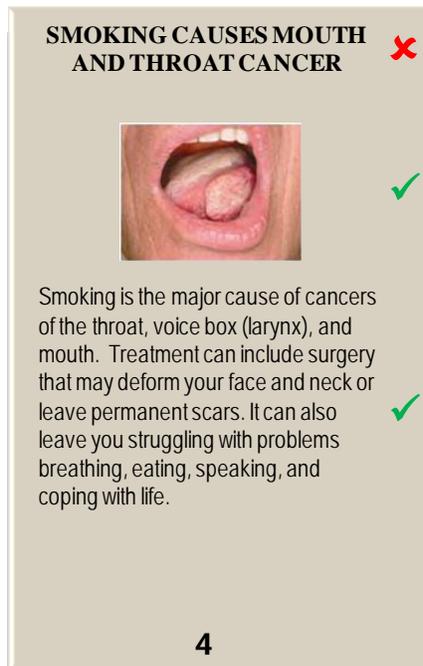
*"That TV ad still brings tears to me."*

Among the few smokers who were not familiar with the TV ad, this image of her was less shocking than the image of Bryan.

The copy on health warning 31 is succinctly written and including details of her life story is highly moving and compelling. Inclusion of her 'nagging cough' reminded smokers of their own 'smoker's cough'. Directly linking this cough to lung cancer could be extremely impactful for smokers.

## Mouth and throat cancer

Figure 6.2.4 Summary of reactions to the theme 'Mouth and throat cancer'



The graphic image of mouth and throat cancer clearly portrays an outward visible sign of cancer. The fact that it is on the face means it could not be covered up easily and it is highly visible to other people. As a result this prompted emotions of embarrassment and potential shame among smokers.

*"That looks gross, no one wants to look like that."*

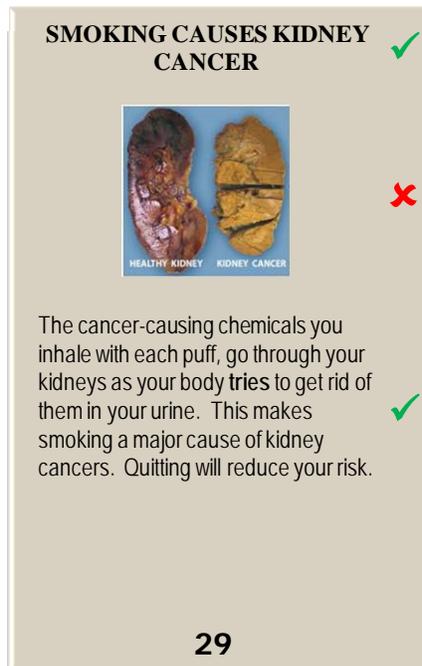
This image was regarded to be grotesque, but not too exaggerated, with many smokers explaining they felt the image was more credible as it was not depicting the extreme. The copy is successful as it increases smokers' concerns of being left with a visible, physical deformity. The use of matter of fact language with phrases like 'deform your face and neck' and 'leave permanent scars', as well as the reference to struggling with many fundamental everyday actions such as breathing, effectively heightened smokers' fear.

*"I'm phobic about not breathing."*

However, the headline could have greater impact. Referring to both 'mouth and throat' cancer in the headline detracts from what is otherwise a powerful message. If it is accurate, consider simply referring to 'mouth cancer' in the headline as the image depicts this more directly. Make use of the copy as it is to refer to the other linked types of cancer such as throat, and voice box (larynx).

## Kidney cancer

Figure 6.2.5 Summary of reactions to the theme 'Kidney cancer'



A health warning about smoking causing kidney cancer will be 'new news' to smokers as many respondents have not seen smoking directly linked to kidney cancer previously. For this reason they are more likely to pay attention to the health warning as they will want to learn more.

The copy helps to strengthen the credibility of this new health warning by detailing how kidney cancer is caused, using language which is straightforward and easy to understand. The reference to 'go through your kidneys as your body tries to get rid of them [cancer-causing chemicals]' helps to personalise the message and plays on smokers' guilt by demonstrating how they are betraying their own bodies. Referring to how kidney cancer would diminish a person's quality of life, would strengthen this message further.

A more powerful image could help to enhance the warning as it is currently the weakest element. As discussed in Section 5.4, smokers have no point of reference for what a healthy or unhealthy kidney should look like. As such both looked unpalatable to many and the healthy organ is not seen to be better than the other to aspire to. Consideration should be given as to whether an image portraying an outwardly, visible sign of having kidney cancer could be used. For example, the image such as the blood in the toilet image could be effective, if it were found to be medically accurate.



### 6.3 Overall reactions to the theme: 'Families'

'Families' was the most emotionally powerful topic area across all audiences. It had a direct impact on smokers with children as they can imagine themselves in a similar situation. At the same time, it also resonated with those without children. Younger smokers, both male and female, began to think about the concept of leaving behind future families, partners and even parents.

*"I don't have kids, but I want to and I want to be around for them when I do." (16-17 male)*

*"I don't know whether I'll ever have kids, but this is about your partner and your parents too." (18-25 female)*

Older smokers without children tended to think about their partners and the broader experiences they would miss out on:

*"I'm thinking about my husband and my dogs." (40-65 female)*

*"Even though I don't have kids, it reminds you of all you've still got to do with your life ... I've got a lot of plans yet." (40-65 female)*

The theme is so powerful as it directly exploits feelings of guilt that smokers experience. Whereas smokers can disregard the health consequences by stating it is 'their choice to do what they want with their bodies, as they are not hurting anyone else' they cannot do this with this topic area. The messages demonstrate quite clearly that smoking harms the broader family, forcing smokers to recognise that their behaviour is not just about themselves.

The strength of this health warning is intensified in Aboriginal and Torres Strait Islander communities, because to them the family bond is even stronger and it extends across the community. The message becomes about loss and hurt in communities, not just the nuclear family.

Figure 6.3.1: Summary of reactions to the theme 'Families'<sup>9</sup>



The images of Zita and Bryan are significantly stronger than the other image of the grave stone. Overall, the warning of Zita is the stronger warning for this category, however Bryan's image could also be used if the headline and copy are strengthened.

### Smoking kills - who will you leave behind?(15)

The image of Zita capitalises on the emotion generated by the TV ad. There was a strong recall of the TVC among respondents in all states. Smokers projected the strong emotions generated by the TVC where Zita talks to the audience. The loss and tragedy of Zita's story resonated with most:

- loss for the family, with the children losing a mother; and
- loss for Zita, in regards to what she is going to miss out on in the future.

This all encompassing loss is demonstrated well by the visuals chosen for the health warning. The front image clearly shows Zita's age which ensures relevance for most, whilst the image on the back of packs provides a back story by showing the whole family happily together. This ensures that message is likely to still be powerful among those who had not seen the TVC. However, if the back of the pack cannot be used, Zita's image will still be powerful as many people have seen the TV ad and know the back story.

<sup>9</sup> Images or parts of images not shown due to privacy and/or copyright.



The headline and copy both contribute to the strength of the health warning. The rhetorical question used in the headline personalises the message immediately. It demands an answer from the smoker that is hard to ignore, whilst at the same time provokes feelings of guilt in regards to family. The copy is highly emotive as it is Zita speaking to the smoker. The line 'without a mother' is particularly impactful for smokers as it prompts thoughts among all of not being around for family members and resonated with all.

*"It makes it easy to think about yourself being in that situation."*

*"It makes you realise that what you do could end up with other people suffering, people you love and care about."*

The 'personal story' of the copy was engaging for smokers. There is a strong likelihood this copy will be read as the image of a 'real person' provides a promise of a 'real story' which is a highly engaging tool.

### Smoking destroys families (39)

Although still strong, the current image of Bryan did not provoke the strong sense of guilt that makes this topic area so powerful, as was the case with the Zita image. The image of the distressed mother and son conveys the loss associated with the immediate pain of Bryan. But without a 'back story' smokers were not prompted to feel the loss and guilt about what Bryan and his family will miss out in the future as much as they were with the visuals of Zita.

Thus, any health warnings about family should make smokers think about future loss and not just the immediate loss. The image of Bryan would be more powerful in this topic area if it had a comparison picture, such as Bryan playing with his son 'two months' earlier, as depicted in the extremely powerful 'back story' on YouTube.

The headline, 'Smoking destroys families' is comparatively weak. There are other causes to family breakdown and it is not necessarily going to be prevented by quitting smoking.

*"Lots of things destroy families ... financial problems, affairs, working too hard."*

The copy resonated strongly for some respondents when combined with the visual. It assists in provoking the sense of guilt by asking the rhetorical question of how the smoker would tell family members about a disease which could have been prevented. However, the copy could be strengthened if a personal story about Bryan could be used.

### Smoking destroys families (16)

Both the headline and the visual are too general to have a great deal of impact on smokers. As stated above, with this headline, even if a smoker quits, their family could be destroyed by any number of reasons, such as alcohol, gambling, accident, illness, infidelity or stress. Smokers responded in a similar way to the visual. While prompting some empathy for the child, the image was seen to be related to any number of situations in which

that person may have died. As such smokers remarked that the death may not have been prevented by quitting smoking.

The copy was very effective for some smokers with children. However, the impact of the death statistic was polarising. Some found '15,000 deaths a year' to be a high figure, with others believing that it was a small number in comparison to the population of Australia.

Figure 6.3.2 Summary of reactions to the theme 'Environmental Tobacco Smoke'

**DON'T LET ANYONE BREATHE YOUR SMOKE** ✘



Tobacco smoke causes death and disease in children and adults who **do not** smoke. There is no safe amount of second hand smoke. Breathing even a little can be dangerous. ✘

OR ✔

Tobacco smoke causes death and disease in children and adults who **do not** smoke. It causes SIDS (Sudden Infant Death Syndrome). It reduces lung function. It causes illnesses like pneumonia, middle ear infections and asthma attacks in children to be worse. It also causes heart disease and lung cancer in adults. **14**

Smokers claimed to already be conscious of Environmental Tobacco Smoke (ETS), explaining that they never smoke around children, pregnant women and babies, as ethically it is wrong. Nowadays, many feel they must 'hide' away to smoke anyway as there are so few places to smoke. In a sense many smokers feel it is up to the 'adult' non-smoker to avoid places where there may be smokers. These claimed behaviours resulted in the execution of this health warning not being as effective as it could have been.

Mainstream audiences rejected the image as even being applicable to themselves, as the picture of smoking near a baby is rejected as something that the vast majority of smokers would not do. A more useful image for this topic could be one where adults are not as conscious of children being around, yet they are still smoking. For example, an image at a BBQ where children are playing around adults smoking would have greater relevance and may provoke some thought about ETS among adults. Another possible image could be of a child suffering due to second hand smoke, as is depicted on existing packs. For Aboriginal and Torres Strait Islander audiences the image which was tested would suit their needs well as they were able to discern the whole message from the image.



The headline, 'Don't let anyone breathe your smoke' was rejected by smokers as they claimed that they always make a conscious effort to not let this happen. However, this negative reaction was also based on the reactions to the visual and it could possibly be effective with a more relevant image.

Both versions of the copy have some strengths. The first version was welcomed because it is very direct and to the point. In particular the statement, 'there is no safe amount of second hand smoke', is direct and uncompromising. The second version of the copy offers greater explanation as it provides 'evidence' of what can happen. Naming the possible health effects on children is particularly powerful. However, care should be exercised in linking smoking with Sudden Infant Death Syndrome (SIDS) as it can lack credibility and could prompt people to 'blame' parents whose children have died of SIDS, rather than empathise with them (see section 6.1).

#### 6.4 Overall reactions to the theme: 'Impotence/sex life'

The new theme of smoking affecting sex lives will be memorable and highly relevant. Given the subject matter it attracted attention and most respondents were curious to read on. It is also likely to prompt discussion among non-smoking partners, family and friends. It has potential to be more powerful for teenage boys and older males (40-65) as these age groups showed more concern:

*"At my age (65) that is a bit of a worry."*

*"I've got enough problems trying to work out what I'm doing anyway, without that happening." (16-17 years)*

It is a message that many smokers would be embarrassed to see on display which shows it has immediate cut through:

*"If I was out anywhere I really wouldn't want to be seen with this pack."*

*"It would take a real man to sit in the pub with that on his pack."*

Figure 6.4.1: Summary of reactions to the theme 'Impotence/sex life'<sup>10</sup>



Figure 6.4.1 shows that 'Smoking can damage your sex life' with the image of the 'thumbs down' was the strongest message of the three for a broad target audience.

### Smoking can damage your sex life (37)

The headline, 'Smoking can damage your sex life' is the stronger statement as it increases the relevance of the subject matter to a broader audience. Reference to 'your sex life' as opposed to 'impotence' broadens the impact to more than just the issue of getting an erection:

*"It's about a lot more than just getting it up." (16-17 year old)*

As a result the health warning had a greater impact upon men and women, as well as older men and younger boys and men. Including a woman in the image also broadens this message. By simply including a body this allows the talent to remain 'ageless', allowing all to relate to it.

This topic area could be used as ammunition by non-smokers to encourage their partners to quit as it provides them with evidence that can affect them too and potentially their relationship.

The image of the thumbs down is humorous yet the message still remains credible and it manages to not overstep the boundary. The image is thought to be clever and memorable, with several respondents

<sup>10</sup> Image not shown due to privacy and/or copyright.

commenting that the 'thumbs down' has potential to catch on, as per the 'pinky' speeding ad. The explanatory message contains 'new news' which respondents found interesting and alarming. The copy in health warning 37 could be strengthened by removing the word 'temporary', which would result in greater emphasis on the possibility of the issue being permanent. The first sentence in health warning 12 of the clinical explanation of how smoking causes impotence should also be included as it provides an explanation and strengthens the credibility of the message. If there is room, the statistic from health warning 37 could be used, however many respondents only found this powerful when they misinterpreted the numbers.

### Smoking makes men soft (12)

This health warning portraying the 'droopy cigarette' takes the element of humour too far. Given that 'impotence' is a new theme for packs, the reader needs to be reassured that the message is credible. The humour in the headline and image undermine this and more people found this warning difficult to accept.

In addition, the headline is directed more at males, resulting in fewer females being affected by this message than the broader message about affecting sex lives:

*"That's their problem."*

The copy from health warning 12 is strong as it explains how smoking causes impotence.

### Smoking can damage your sex life (13)

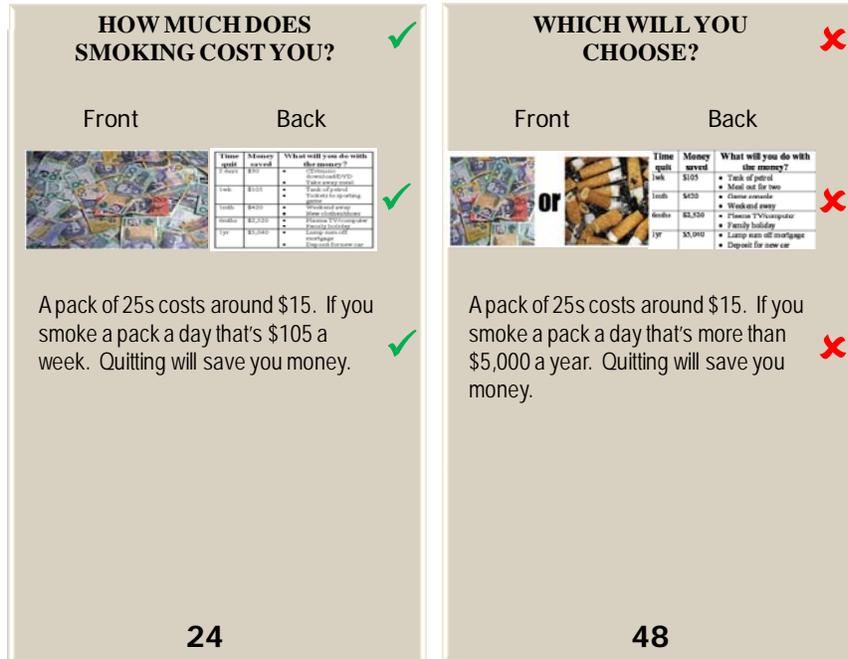
Compared to the other images, this one of the young man is relatively insipid. It is not as easily associated with smoking as it was thought he could be upset or emotional for a range of reasons. Including a young person's face made it harder for those older smokers to see that the message was personally relevant, and as such it was easier for them to dismiss it. The explanatory message is not as interesting as the other copy as it does not explain why smoking causes impotence.

## 6.5 Overall reactions to the theme: 'Financial implications of smoking'

The financial theme highlighting the cost of smoking is strong as none of the respondents could dismiss this message. It was thought to be relevant and motivating for the majority of smokers, given the increasing price of packs. The exception to this was those 16-17 year olds without jobs who do not earn the money they use to pay for cigarettes, but instead use their parents' money.

Despite being a well known fact that smoking is costly, it is regarded to be a new and encouraging theme for packs as it complements the health effects messages. It successfully capitalises on the guilt of smokers as it reminds them of the money they could have spent on other items for themselves or their family. It is likely to prompt discussion from non smokers and provide them with ammunition to complain about the money wasted on cigarettes.

Figure 6.5.1: Summary of reactions to the theme 'Financial implications of smoking'



Overall, there are several strengths of the message which directly poses the question of cost (health warning 24).

How much does smoking cost you? (24)

This headline accentuated the guilt smokers felt and increased impact. A simple, direct question attracted attention and forced smokers to think about the financial implications. The 'cost' not only relates to the cost of cigarettes but is also measured in what they, or their family, may be missing out on. The table of examples showing what smokers could buy currently includes a broad range of relevant examples which provide a motivating, positive reason for quitting. Either table would be effective as long as the information about costs is believable at the time.

However, the image of the money is somewhat unrealistic and could be improved. Consider using an image of a 'wad' of notes. The copy from health warning 24 is stronger and should be used as it refers to how much is spent on cigarettes weekly. This is more tangible to smokers than a yearly amount mentioned in health warning 48.

Which will you choose? (48)

This headline is less motivating than the other because asking smokers, 'Which would you choose?' could potentially backfire as in an ideal world they would choose both money and cigarettes. Although the picture of

the cigarette butts is a powerful image alongside the money, it would not make sense with the stronger headline from health warning 24.

6.6 Overall reactions to the theme: ‘Peripheral Vascular Disease (PVD)’

The health warning about gangrene (PVD) resonated across some smokers within all age groups. Although the image makes it appear to be an extreme possibility, it successfully made people conscious of the lesser symptoms:

*“When I feel a bit of numbness in my toes, like when I’ve got my legs crossed or something, I think of that.”*

Portraying an image of an outward, tangible disfigurement prompted immediate feelings of discomfort. In addition, it may also help to prompt feelings of shame and embarrassment at the thought of the disfigurement being caused by the smoker themselves.

The current PVD warning which also depicts a person’s foot was often recalled as the warning people avoid above all others. Whilst not containing new information, it still continues to be a message that emotionally engages many and a new picture will be noticed. That said, there will be some smokers who will simply dismiss the image as being excessive.

Figure 6.6.1: Summary of reactions to the theme ‘PVD’



Figure 6.6.1 shows that one image communicated the message more successfully. This was because it communicated it instantly whereas the other was too complex.

### Smoking damages your blood vessels (27)

The strength of the health warning is in the visual as it is regarded to be highly credible, real and not in any way 'photoshopped'. Familiarity with the topic area allowed smokers to immediately understand the message being communicated from the image but all named the disease as 'gangrene', not PVD.

The headline 'Smoking damages your blood vessels' was thought to be recessive and compared to the graphic image it seemed like an understatement. The copy on health warning 27 was generally endorsed as being highly informative. It assists smokers to understand how smoking can result in gangrene in a factual, straightforward manner:

*"It's pretty intense ... they don't pull punches."*

### Smoking causes peripheral vascular disease (3)

The image of the amputee can be easily dismissed for being too general. Amputation can be caused by a number of factors such as accidents. This allows room for smokers to 'deflect' the message of smoking causing PVD. Using this image could also be seen to be creating unnecessary, unintentional consequences as linking amputation so clearly with smoking could suggest all amputees are smokers who have caused themselves harm. Another weakness is that the image is seen to be of a child, wearing school shoes and a uniform, and smokers believed that this person was too young to have caused such damage by smoking. On the positive side, the image demonstrates the implications of smoking causing a lower quality of life effectively.

Interestingly, the headline 'Smoking causes Peripheral Vascular Disease' was largely unfamiliar to smokers, despite the fact that it is on the current health warning showing the foot. This demonstrates the power of the current graphic image. Alongside the image of the amputee this headline loses more of its impact as it is not understood.

Consider using an alternative headline stating that 'Smoking causes gangrene'. However, if this is not accurate and cannot be used, the headline could continue to be used with the new image of the foot. Inclusion of the word 'gangrene' over the image, as it is currently used on packs will also help to strengthen the message.

The copy on health warning 3 was dismissed by many as lacking in credibility as the statement that 'Every day one Australian loses a leg or foot ...' is perceived to be exaggerated:

*"If that was true, you'd see people without legs or feet all over the place."*

However, descriptions of the symptoms and their effect (open sores, leg pain) are effective.



## 7 HEALTH WARNINGS RESONATING ACROSS SPECIFIC SUB GROUPS

Reactions to those health warnings which resonated with specific sub groups, such as particular age groups or genders, are discussed in detail below. Some of these topic areas are recommended for inclusion in the forthcoming suite of health warnings and included:

- death;
- ageing;
- dental disease;
- stroke;
- emphysema; and
- heart disease.

### 7.1 Overall reactions to the theme: 'Death'

Despite being one of the most recognised warnings, the strength of the message 'Smoking Kills' should not be underestimated. It is a powerful theme on packs that should continue. No one can argue with the reality of the powerful headline 'Smoking Kills', as death is a concept that is frightening to all.

This theme has greater emotional engagement with older smokers, in particular those who are 40+ years, who are starting to think more about death generally. At this age, death becomes more common among peer groups and family. In addition, respondents of this age explained they were beginning to feel health effects of smoking or had suffered, or know friends or family who have suffered or died from smoking diseases. In contrast, this theme had less of an impact on 16-25 yr olds who feel they are invincible, with many of them claiming they will quit before death gets them.

Figure 7.1.1: Summary of reactions to the theme 'Death'

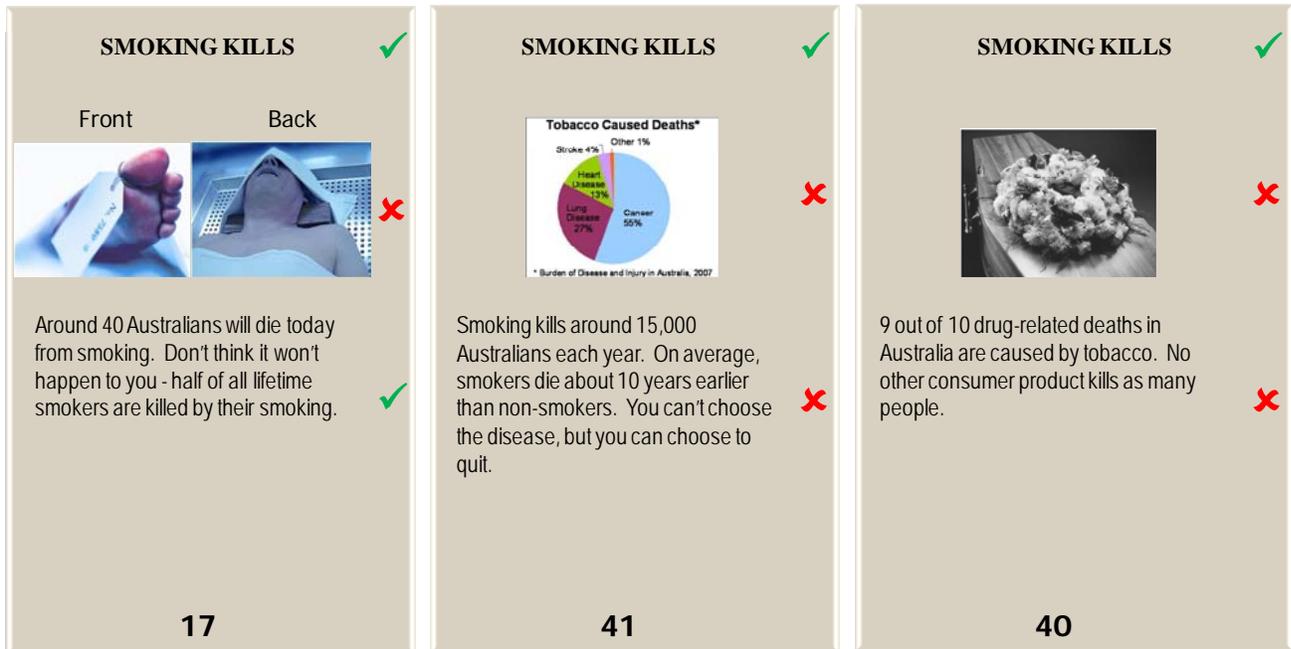


Figure 7.1.1 shows that the strength of this theme currently lies in the headline and copy. The image used could be more powerful.

### Smoking kills (17)

The images of the dead body and the toe tag are the best of a poor selection. For some the image of the foot was particularly powerful as the toe tag was recognised as a symbol of finality:

*"That says it all doesn't it? There's nothing coming after that toe tag."*

However, for others the images appeared unrealistic and staged:

*"This looks like a scene out of CSI."*

*"Is he in a solarium?"*

The copy on health warning 17 creates an urgency to quit by referring to '40 Australians dying today', rather than stating that '15,000 Australians die each year from smoking' (as in health warning 41):

*"To think that's happened today, that's a shocking statistic."*

The line, 'Don't think it won't happen to you', is confronting and difficult for people to ignore:



*"I think that's intimidating, that's what you need."*

*"That's what you do think."*

#### Smoking kills (41)

The majority dismissed the graph and it failed to have any impact on smokers. The content was regarded to be old news and is something they associated with a text book. There was no emotional engagement with this visual which only involves numbers. Those who tried to engage with the graph found it difficult to understand and was out of date:

*"That reads 100% of deaths are caused by smoking."*

*"That's old information, surely there's something more up to date?"*

With regard to the copy on health warning 41, inclusion of a yearly figure of deaths caused by tobacco was polarising. However, for the majority it was harder to make sense of as it appears more abstract than a daily death toll:

*"That's higher than the road death toll, it's enormous."*

*"I'm surprised it's only 15,000 when we are a population of over 20 million."*

#### Smoking kills (40)

The image of the coffin was unclear with many respondents finding this image hard to decipher:

*"Is it mould?"*

*"Is it an ashtray?"*

Consequently, the immediacy of any impact was diminished. For some smokers a coffin is not the most shocking image of death, as they often associate it with people being free from any pain or suffering. The explanatory message about 'drug-related deaths' is not as straightforward or directly related to smokers as the others.

Including a more powerful image would strengthen the theme of 'death' considerably. If a younger dead person in a morgue could be used, together with the image of the foot, this is likely to be more powerful. Showing the whole face is also likely to increase emotional engagement. Alternatively, consider using a picture of a young person on their deathbed, such as the image of Bryan or a similar alternative. Whilst not recommended, if a graph is required to be used for this theme, the current bar graph on packs comparing death statistics appears more effective than the one tested.

## 7.2 Overall reactions to the theme: 'Ageing'

The idea that 'Smoking ages you' resonated more with females, particularly the very young respondents (16-17 years) and the older respondents (40-65 years). This theme was relevant and motivating for these two age groups as they are particularly conscious of their appearance. The older smokers recognised and disliked their wrinkles which differentiate them from non-smokers, and they honestly believed that quitting will improve their appearance.

As a theme it is a new idea for packs which helps to demonstrate the less severe impact of smoking on the body. It will complement the more severe health warnings in the suite of warnings. That said, as a complimentary message many men and women, may still find it easy to dismiss:

*"It's a very different message to usual, but they (wrinkles) can't kill you!"*

Figure 7.2.1: Summary of reactions to the theme 'Ageing'



Figure 7.2.1 shows that the headline and copy are likely to be impactful. However, all three images failed to communicate the message effectively because they all lacked credibility in their attempt to show that a smoker ages more than a non smoker. If this theme is to be included, an alternative image should be sourced.

### Do you want to look like a smoker? (44)

The strength of this headline lies in the fact that the question prompts people to think about what a 'typical smoker' looks like, which in most people's minds is someone with very wrinkled, dry skin. Subsequently, this

message forces women, and men, to think about their physical appearance and the effects as a result of actions they have chosen:

*"You immediately know exactly what it means. Everyone knows that look of the really wrinkled older woman, you just know what a smoker looks like."*

For many women, this is a look they worry about and want to avoid. However, the current image fails to portray an image of this typical smoker who shows all the signs of ageing. This image failed to execute the concept of comparing the physical appearance of a smoker alongside a non smoker of a similar age. Instead most respondents believed it looked like a grandmother alongside a granddaughter. The theme would benefit from an alternative image of a typical smoker in her 30s or 40s who has all the visible signs of a smoker, such as the deep, etched lines around her eyes and mouth and dry skin.

The copy on health warning 44 is the strongest as it provides a clear description of the broader consequences, such as the 'wrinkles around their eyes and mouth' and 'a yellow-grey skin colour'. This copy would complement a new image of a 'typical smoker' effectively.

#### Smoking causes wrinkles (19)

The headline, 'Smoking causes wrinkles' failed to engage smokers as it focuses specifically on 'wrinkles' as opposed to the broader consequence of ageing and all its connotations. It also trivialised the topic area more as smokers argued that other aspects also cause wrinkles, such as the sun and old age. It is also easier to dismiss for those with no signs of wrinkles.

*"Wrinkles are what old people get – I'm only 25 I don't need to worry yet."*

This image is also not credible as the comparison between the reflection and the lady are too extreme to appear believable.

#### Smoking ages you (43)

This health warning also contains a weaker headline and copy. Smokers were more easily able to dismiss the headline as they argued that other aspects also age them such as old age, the sun and stress. The image was also rejected on the grounds that most smokers believed it looked like two women of different races.

*"This reminded me of Dorian Grey".*

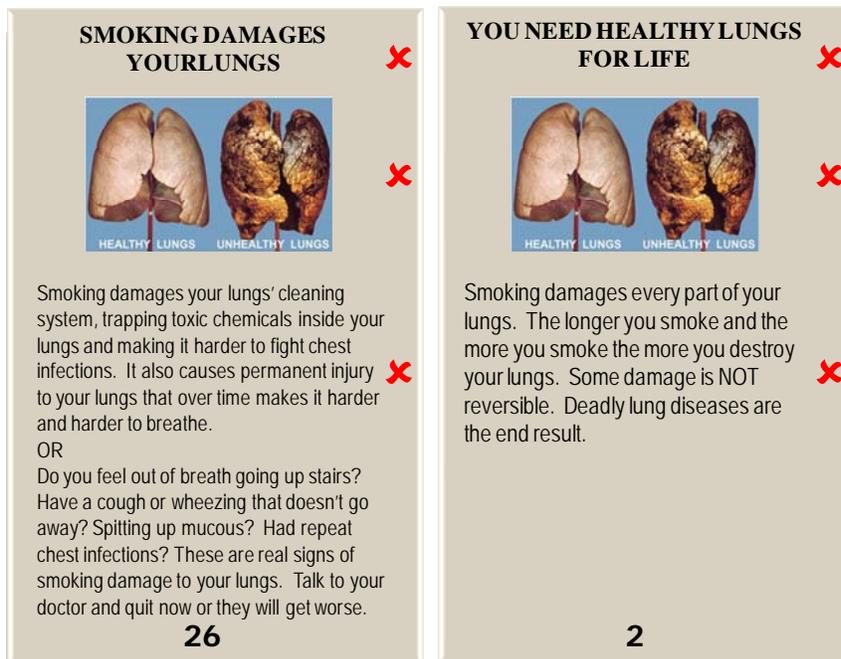
The tone of this copy is more negative when mentioning 'You can not undo the harm already done ...'. These words are demotivating for many.

*"There's no hope, so that's like saying if you've got wrinkles then go for it."*

### 7.3 Overall reactions to the theme: 'Lungs'

The broader theme of 'smoking damaging lungs' provided no new information to smokers. As a sentiment it was regarded to be credible, particularly with older smokers aged 40-65+ as many can feel the effects of having unhealthy lungs. However, by not referring to an associated disease such as lung cancer or emphysema this softens the impact of the message. It is not a necessity to include the lung health warning within the suite of warnings, particularly given that it may be difficult to demonstrate visually.

Figure 7.3.1: Summary of reactions to the theme 'Lungs'



Most aspects of the warnings failed to engage smokers on an emotional level and as a result the impact was softened. Instead, the lung comparison image and headlines provoked a strong, rational response. Smokers found it easier to distance themselves from the 'textbook' image of an organ, as opposed to more graphic visuals which show consequences. Previous advertising such as the 'Sponge' TV ad where tar is squeezed from the lungs provides an understanding of how and why the lungs are damaged and, therefore, it is able to provoke more of an emotional response. Similarly, the current lung cancer image depicting a tumour on packs is more graphic and hard hitting for smokers. If this theme is to be included, an image of a real, damaged lung would have a greater impact.

Both headlines failed to offer any new information, nor were they seen to provide a strong motivation to quit:

*"If you damage something, that can mean it's easily fixable so there's no need to stop yet."*

The second copy on health warning 26 is the strongest element of the theme. The use of rhetorical questions helped to personalise the message and engaged the reader, as smokers found themselves answering these questions:

*"I answer 'yes' to most of these which is a bit scary."*

That said, it still fails to deliver any new information to smokers. The first copy on health warning 26 overcomplicated the topic area which caused the reader to switch off. The copy on health warning 2, whilst credible and was not refuted, failed to engage the reader.

#### 7.4 Overall reactions to the theme: 'Dental Disease'

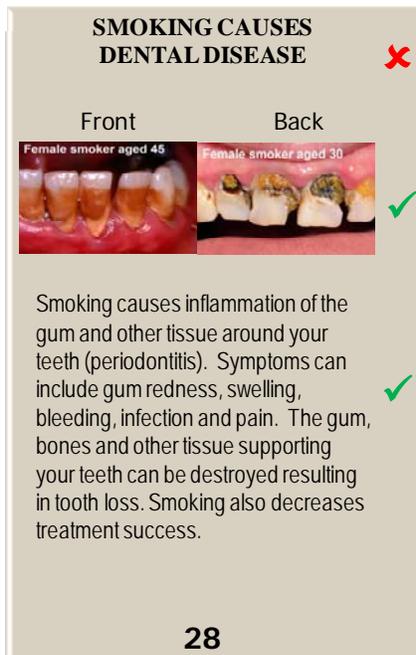
Including a new dental disease health warning is likely to be powerful. Smokers could easily make the link between smoking and dental damage, given that smoke enters the mouth. As with the current warning depicting an image of teeth, some smokers dismissed the message on a rational basis, claiming that this is showing the extremes:

*"I would never let my teeth get this bad."*

*"This is showing someone with very poor dental hygiene."*

However, on an emotional level these images of dental disease scared and embarrassed many smokers. People are highly conscious of their teeth and for some visiting the dentist is regarded to be frightening. This image had a greater impact on younger people who were less likely to dismiss the message on a rational basis. There was a tendency for some older smokers to claim that their teeth did not look that bad, despite being lifetime smokers.

Figure 7.4.1: Summary of reactions to the 'Dental Disease' theme



The images and copy are the most effective elements of this theme. The graphic images effectively reminded smokers of the grotesque, physical implications of smoking. Even if smokers dismiss the messages as extreme, they will accept that smoking has consequences for dental hygiene. It makes them think about the lesser effects on their own teeth, such as the 'yellowing' of teeth. Additionally, the health warning often prompted discussion about visiting the dentists and the associated costs.

Many smokers criticised the images, particularly the image of the 30 year old's teeth as not being credible, as they claim there are likely to be other factors causing the damage such as drugs or dental hygiene. Nevertheless, they are likely to prompt a reaction as they are uncomfortable to look at.

Including the age and gender of the smoker helps to demonstrate that damage can be caused to young smokers' teeth. That said, it can also limit credibility, as smokers could not see that happening to their teeth, in the next few years or they were already past the age of 30. Consider testing a number of different images, including a male's teeth, in the next round of testing. Include some with the information about age and gender included and some without.

The headline weakens the overall theme as it contributes to allowing smokers to rationally dismiss this warning, claiming that other factors cause dental disease such as diet, drugs or family history:

*"That looks like Meths-mouth."*

*"They must be leading an unhealthy lifestyle for that to happen."*

In addition, the phrase 'dental disease' does not conjure up the extreme consequences depicted in the images, as the term is more closely associated with minor symptoms. A more powerful headline would assist in personalising the health warning and make smokers think about what they are doing to their teeth. Some alternative headlines for consideration are, 'Do you want teeth like a smoker?' or 'Look what smoking can do to your teeth.'

Given the powerful effect of the images, some smokers were intrigued to understand how the teeth got to this terrible condition. The strength of the dental copy lies in its descriptions of the symptoms such as 'swelling, bleeding, infection and pain':

*"I hate the idea of getting it – it terrifies me."*

## 7.5 Overall reactions to the theme: 'Stroke'

Stroke as a topic area continues to be impactful with smokers. It was strongly associated by all audiences as reducing the quality of life rather than being fatal. With this came the fear of the loss of independence and permanent, physical impairment:

*"Stroke scares me. I couldn't bear someone having to look after me for the rest of my life."*

The health warning was seen to be more relevant to older audiences initially, with the perception among younger audiences that a stroke is only going to happen to older people. While the copy successfully addresses this myth, use of a younger talent in the image would ensure greater impact with this audience.

Figure 7.5.1: Summary of reactions to the theme 'Stroke'

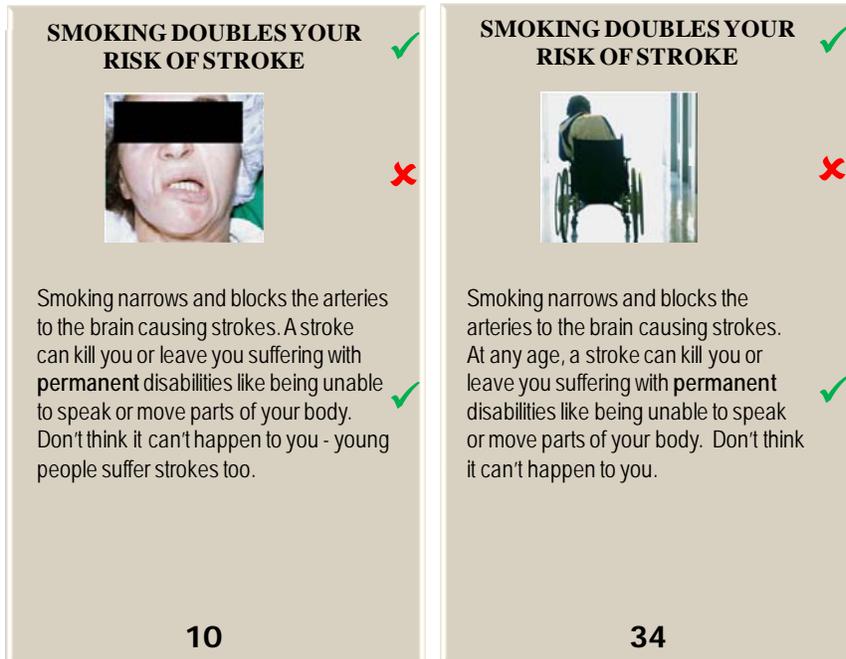


Figure 7.5.1 illustrates that the headline and copy are the strengths of both executions, but the image could be more powerful. Given that most people believed that 'stroke' is a relatively common health issue, highlighting that smoking 'doubles the risk' of this 'common' health issue appeared to be particularly fearful and effective as a headline. The copy on both health warnings also successfully capitalises on fear of the morbidity of the condition particularly the sentence:

*'Leave you suffering' with permanent disabilities ...'*

The explanatory message also directly challenges the perception of stroke happening to others, as the words made older and younger respondents think about the possibility of it happening to them:

*'Don't think it can't happen to you.'*

The copy on health warning '10' stating that 'Young people suffer strokes too,' is more effective as it directly addresses younger smokers. In contrast, the copy on health warning 34, stating 'at any age, a stroke...' is less specific and could be more easily overlooked.

### Smoking doubles your risk of stroke (10)

While this image of an older stroke sufferer was thought to convey the physical disability caused by a stroke, it could be much more powerful. People do strongly associate a 'drooping' mouth and eye with people who have suffered a stroke. For this reason it provoked an emotional reaction making people think about leading a lesser quality of life. However, the reaction was minimised on this image by the woman's eyes being covered up. It was less personal and does not show the damage most associate stroke causes to the whole face.

The woman's age also reinforced the perception among young people that stroke is only a concern to an older person. Ideally, an image of a younger person who had obviously suffered a stroke, showing either 'drooping' mouth and eye could be used for this topic.

### Smoking doubles your risk of stroke (34)

The image of the person in a wheelchair was not immediately associated with smoking or the consequences of having a stroke. Although the image conveyed a sense of disability and loneliness associated with a lower quality of life, it was regarded to be too generalised. Respondents dismissed this image as they believed there could be a number of reasons as to the cause of the disability. In addition, the inability to see the talent's face reduced the personal connection to the health warning.

## 7.6 Overall reactions to the theme: 'Emphysema'

Emphysema is strongly related to, and accepted as, a consequence of smoking. Above all other topic areas, emphysema is the condition that even older pre-contemplators were able to accept and fear. This is because they are not aware of emphysema being caused or related to other factors, and, therefore, accept smoking as the cause. They also understand that emphysema is related to lung capacity, something which they cannot doubt as many identify with the impact of smoking on their lungs, through feeling out of breath and coughing:

*"You can feel it in your own lungs."*

*"Every time you hear about someone with emphysema, they have been a smoker."*

Smokers fear a reduced quality of life when living with emphysema, knowing that some people are reliant on oxygen tanks. Overall, this health warning impacted more on older smokers as emphysema is seen as a condition that only affects long-term, older smokers.

Figure 7.6.1: Summary of reactions to the theme 'Emphysema'

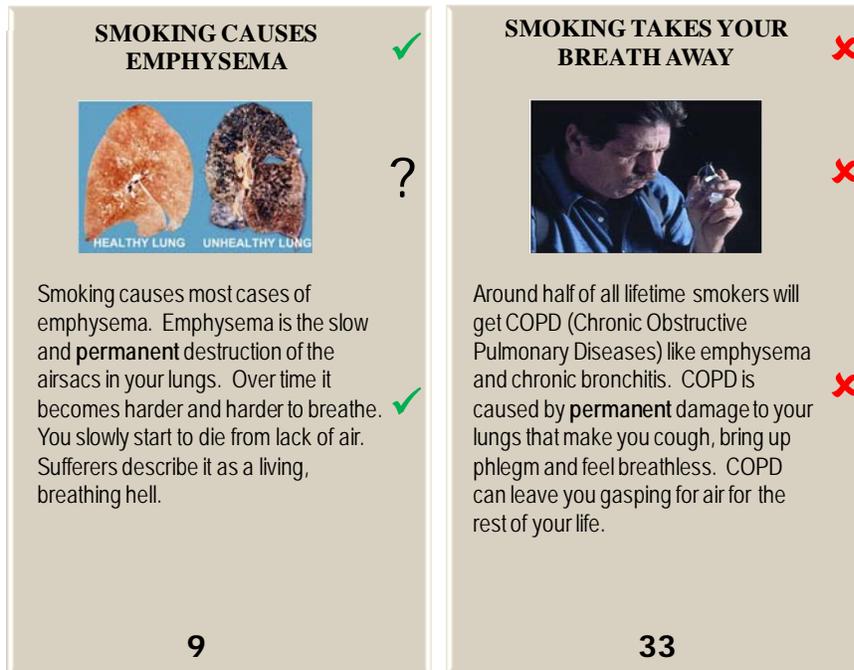


Figure 7.6.1 shows that the headline and copy are effective, yet the images are the weaker element of the health warnings.

### Smoking causes emphysema (9)

The headline and copy of this warning are direct, straight to the point and irrefutable as no-one denies that 'Smoking causes emphysema.'

The overall message was also regarded to be highly credible, particularly among older smokers who explained they can feel the impact of smoking on their lungs. The copy succinctly describes the lower quality of life that smokers fear. It is also seen as believable as smokers can relate to the words 'slow and permanent etc', through their current experiences of lacking breath:

*"Slow and permanent destruction."*

*"Start to die from lack of air."*

*"Living, breathing hell."*

However, the comparison image of the lungs is the weakest part of the warning. Although this image was seen as credible, more so than the images of the kidney or the heart, the image was described as being too scientific and clinical, which detracted from its personal relevance. Further consideration should be given to the image. If possible images of lungs which look more realistic in order to demonstrate the contrast of a healthy and unhealthy lung should be used. Alternatively, using a single picture of a damaged lung would also be more powerful than the current execution.

### Smoking takes your breath away (33)

Whilst credible, this warning lacks 'directness'. The headline 'Smoking takes your breath away' was accepted as true as most smokers across all ages have experienced feeling short of breath at some point. However, it did not have immediate negative associations with emphysema. It appears too abstract and there were a few respondents who immediately thought of the song 'Take my breath away', as opposed to the disease.

Emphysema was not always the immediate association with the image, as several respondents thought the oxygen mask could relate to asthma. Reactions to the copy were mixed. On the one hand descriptions of the effects such as 'coughing', 'bringing up phlegm' and 'gasping for air' were thought to be effective as smokers tended to have experienced these. Yet the reference to Chronic Obstructive Pulmonary Disease (COPD) was believed to make the message unnecessarily complex and difficult.

#### 7.7 Overall reactions to the theme: 'Short term health effects'

The topic area of 'short-term health effects' was more effective with younger smokers, in particular, those more conscious of their fitness and still active in sport. They tended to also be highly conscious of their physical appearance, stating this as another reason for their participation in sport. Additionally, some older smokers identified with the idea of having difficulty keeping up, claiming that they recognised signs that they are relatively unfit:

*"I come out of our gigs puffing and panting more than the others who don't smoke."*

*"It's hard trying to chase the kids around the park sometimes."*

*"You do notice how you're left red faced and breathing hard compared to others."*

However, both older and younger smokers felt there were more important reasons to consider quitting smoking. Indeed this concept of 'decreased fitness' is information that is well known, and for many it is a fact they accept as a smoker. In its current format, this theme is not recommended for inclusion in the suite of health warnings.

Figure 7.7.1: Summary of reactions to the theme 'Short term health effects'



Figure 7.7.1 shows that both ideas suffer from a lack of substance. Smokers did not believe the headlines offered any new information and the images were thought to be inappropriate.

### Smoking makes it hard to keep up (46)

The issue with this health warning is that the image and headline are seen to contradict each other. Smokers believed the image shows a man having caught the son, illustrating that he is able to keep up. The image is also demographically exclusive to families.

Overall, the image is too general and it could be a message about any number of things. Whilst the headline was regarded to be true, it does not offer any new information or emotional engagement. Smokers accepted this message on a rational basis. The copy on health warning 46 resonated with some who experience the various symptoms listed such as 'coughing, wheezing and shortness of breath'. However, overall smokers claimed it is information they already know and was not particularly compelling.

## Smoking decreases your fitness (22)

The image was seen to be more extreme than the headline as many respondents believed it showed someone about to have a heart attack, as opposed to someone who is simply unfit and out of breath. If this topic area is to be considered at a later stage, a better image would be of a red faced person, puffing and out of breath. The image could possibly be contrasted with one of a fitter, healthier non-smoker.

The headline 'Smoking decreases your fitness' also does not offer any new information and was rationally accepted as being true. For most people the copy was not particularly persuasive as a reason for quitting. However, for those younger smokers who related to this idea, the explanation of why smoking decreases fitness was welcomed and could be used:

*"Everyone links unfitness with smoking, but this explains why."*

### 7.8 Overall reactions to the theme: 'Heart disease'

Heart disease was not a key concern of most smokers and was more strongly associated with other lifestyle issues such as:

- obesity and being overweight;
- a poor diet with high amounts of saturated fat;
- high blood pressure; and
- high cholesterol.

This results in the threat of heart disease associated with smoking being minimised:

*"Lots of different things cause heart disease. Stop smoking and eat more, you'll still get heart disease."*

*"Smoking causes lots of things, why not heart disease as well."*

That said, this health warning was extremely effective for those who were aware of a family history of heart disease or who had experienced a death of a family member caused by the disease. Despite its prevalence in society, relatively few respondents mentioned having a family history of heart disease.

Figure 7.8.1: Summary of reactions to the theme 'Heart disease'

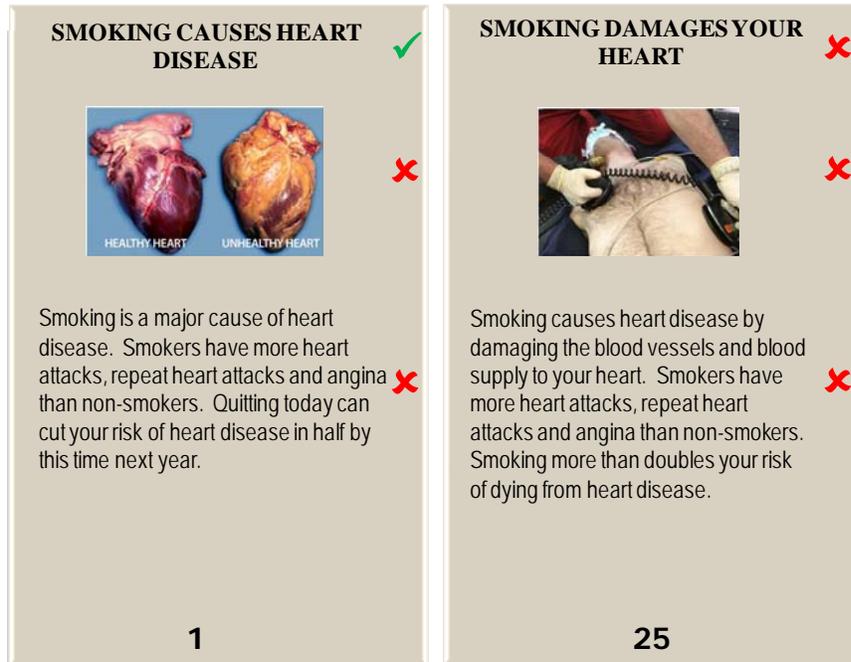


Figure 7.8.1. shows that neither images are that successful in communicating the intended message to mainstream audiences.

### Smoking causes heart disease (1)

The comparative image of the healthy and unhealthy hearts did not mean much to most smokers, given their level of unfamiliarity about what a healthy heart should look like. The image failed to differentiate the 'healthy' heart from the 'unhealthy' one sufficiently to promote an emotional reaction. As such the healthy organ was not perceived as desirable or aspirational and similarly the unhealthy organ was not perceived negatively.

However, Aboriginal and Torres Strait Islander respondents reacted more favourably to this topic area as a whole. For them, the comparative image communicated a clear message about there being a healthy and an unhealthy choice. As such, this image could be used if the warning is to be included, noting that it is likely to resonate more strongly with Aboriginal and Torres Strait Islander audiences.

The headline 'Smoking causes heart disease' is effective in communicating the message as it is straight to the point and definitive. However, it is easy for most smokers to ignore, claiming there are many causes of heart disease. As explained above, the headline and copy are, however, effective for those with a family history of heart disease. The fact about being able to 'Cut your risk of heart disease in half by this time next year' is



motivating and is new information for this audience. Consider using this statistic alongside some of the copy from health warning 25.

### Smoking damages your heart (25)

The headline and visual are both relatively ineffective in conveying a message about smoking causing heart disease. The headline 'Smoking damages your heart' is too ambiguous as smokers questioned what type of damage is caused and whether this is significant or minimal. As such the ambiguity of the word 'damages' lessens the impact:

*"Surely if it was that bad, they'd say so?"*

The image was associated more closely with accidents, trauma and hospitals than smoking, which contributed to the whole belief that a health warning about heart disease is too 'general'.

The copy on health warning 25 describing how smoking causes heart disease is effective and should be used. The fact about smokers having more heart attacks also adds credibility. However, the inclusion of 'more than doubling your risk' was polarising and was not as powerful as the statistic in health warning 1.

## 8 REACTIONS TO LESS EFFECTIVE TOPIC AREAS

Overall, there were four topic areas (quitting, anti-social, infertility and general cancer) which were less successful in encouraging smokers to question their behaviour and consider quitting. However, if significant changes are made to the topic area of 'quitting' this could be included in the suite of health warnings.

Significant work would have to be done to produce headlines and visuals that would work effectively for the topic area of 'anti-social'. This is unlikely to be possible within the timeframes for development. The two topic areas of 'infertility' and 'general cancers' were less effective and are not recommended to be pursued.

### 8.1 Overall reactions to the theme: 'Quitting'

As a concept the theme of 'quitting' could have potential, however it may be difficult to communicate an empowering message about quitting to smokers through a headline and an image on a pack. It is not the ideal medium as an empowering health warning may need to rely on the copy. As such this theme lacked impact and was seen as a softer message which was far less powerful than those warnings with graphic images or emotional stories.

Significant work would be needed to improve a health warning about 'quitting' before it could be included. The headline needs to be more empowering and positive. The current warning on packs 'Quitting will improve your health' is positive and could be used if an alternative cannot be thought of. The image will also need to be reconsidered. If a new image cannot be found, the image on current packs of a smoker calling the Quitline could work as readers can easily grasp the message.

Figure 8.1.1: Summary of reactions to the theme 'Quitting'

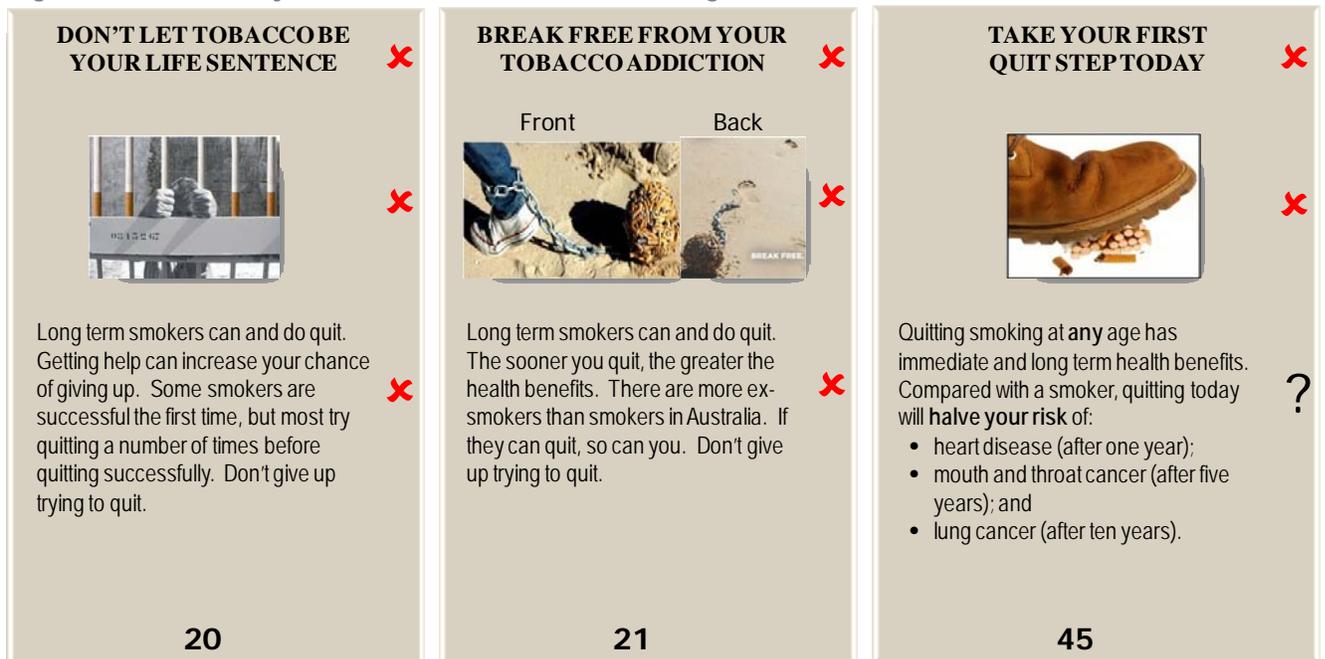


Figure 8.1.1 shows that none of the health warnings are currently working. All three struggle to communicate an empowering message about quitting. In particular, the images failed to communicate an empowering message and were considered to be esoteric. They were far too complex in composition which caused readers to lose interest. As such, the headline and image needs to be more empowering and positive

#### Don't let tobacco be your life sentence (20)

Some people related to this concept of smoking controlling their lives which is suggested in the headline. Older women aged 40-65 years felt it was personally relevant to them as it acknowledges it affects their daily routine. For them the copy is empowering as it is realistic and honest about smokers trying to quit a number of times.

*"I hate the fact I'm always watching the clock waiting for my next break."*

However, the image is far too complex and there was no immediate takeout from respondents. Many did not realise the bars were cigarette sticks.

#### Break free from your tobacco addiction (21)

This health warning failed to engage smokers on a number of levels. Firstly, the headline did not encapsulate a sense of empowerment. It was regarded to be patronising as opposed to encouraging and was thought to be written by a non-smoker, with little consideration of how hard quitting actually is.

Once again the image was thought to be far too complex, abstract and easy to overlook. When noticed, it made little sense with the images of a shoe and a footprint. The explanatory message was also felt to be patronising, platitudinous and non-encouraging. That said, the fact about there being more ex-smokers than smokers was of slight interest to some.

#### Take your first quit step today (45)

Similarly, this health warning also fails to encourage quitting. Smokers believed the image was unnecessarily complex. It was regarded to be unrealistic, with many claiming they would smoke their last pack and not crush it under foot. The headline 'Take your first quit step today' appeared clumsy as it is not something that is naturally said. In addition it was thought to only apply to first time quitters, allowing many to immediately divorce themselves from it.

Providing statistics in the copy about quitting halving their risk of various diseases acts as a powerful reinforcer, but without an empowering headline and image this is likely to be overlooked. However, if a health warning about quitting has to be included in the suite, using this copy would highlight how quitting will reduce their risk of certain diseases. This provides hope and a motivating reason to quit. Consider also using the first line from warnings 20 and 21 'Long term smokers can and do quit' as this is also positive and motivating.

## 8.2 Overall reactions to the theme: 'Anti-social effects of smoking'

There is potential for this idea to capitalise on the pervading sense of social isolation smokers currently feel. Smokers are increasingly feeling isolated and alienated and there is a creeping sense of 'social ostracism':

*"You are made to feel like an addict."*

*"People quite openly criticise you now, they didn't used to do that."*

Listing the factors, such as the smell on the smoker's clothing and bad breath, which 'brand' them as a smoker, did resonate strongly with those who are conscious of it. However, the ideas tested did not capture the potential strength of the concept. In addition, teenagers are less likely to feel the sense of social isolation the idea aims to prompt as they are more likely to be in a peer group where the majority smoke. For them smoking is in fact 'part of the look'.

Figure 8.2.1: Summary of reactions to the theme 'Anti-social effects of smoking'



Figure 8.2.1 indicates that no element of either idea succeeded on capturing the strengths of this concept. If this theme were to be included in the suite of health warnings, significant work would have to be undertaken for it to work effectively.

The message of the image used is unclear. There was confusion about whether the talent was smoking, as well as queries about what she is pulling a face about, and what she was doing with her hand:



*"It could be a bad joke, her coffee, anything ..."*

The fact the girl is attractive also does not achieve its purpose. Rather than not wanting to offend her, smokers reacted defensively to the disapproval expressed:

*"She should just go sit inside."*

*"What's she doing in the smokers' area anyway?"*

### Smoking is not a good look (23)

The headline, 'Smoking is not a good look' tends to trivialise the topic. For those who are considering giving up, how smoking looks is generally the least of the motivating reasons to quit:

*"It's true, I can't stand the smell, but that's not enough of a reason to give up."*

### Smoking is not attractive (47)

This headline also trivialised the subject. Most smokers agreed with the broad statements expressed in the copy of both ideas as they do hate the fact smoking 'stinks' and makes their clothes smell. However, they were critical of the tone and actual wording which sounds patronising:

*"It sounds like my mother."*

*"It causes fires .... how old do they think we are?"*

## 8.3 Overall reactions to the theme: 'Infertility'

Infertility is a topic area that most smokers will easily dismiss in relation to smoking as it contradicts life experience. Using it as a warning could undermine the credibility of other warnings. Additionally, justifying the claim would require providing smokers with more information and detail than can be provided on a pack.

The personal experience of most smokers contradicts the claims made as many smokers had large families themselves, or knew other smokers that did. This reaction was exacerbated in Aboriginal and Torres Strait Islander communities where the incidence of smoking is so high, yet most people have large numbers of children. The health warning was also perceived as being irrelevant for some due to their age and lifestage, with some being too young to even think about kids yet, and others who were past the age of conceiving children.

That said, the health warning resonated strongly with a small few who had experienced problems getting pregnant, or were thinking about it in the near future.

Figure 8.3.1: Summary of reactions to the theme 'Infertility'



None of the current headlines or images have potential to increase credibility of this topic among smokers, and as such it is not recommended to be used in the suite of health warnings.

Smoking lowers your fertility (35)

The headline 'Smoking lowers your fertility' was surprising for smokers as it is new information for many. This surprise lead to some looking for support for the claim from the copy, but the response was ultimately one of disagreement:

*"I don't believe the claim."*

*"I know people who smoke all the time who've got a tribe of kids and others who are going through IVF who have never touched a ciggy in their lives."*

The image of the empty pram offers little support to the claims made and was heavily criticised due to disbelief of someone already owning a pram:

*"Why would you have a pram yet?"*



### Smoking causes problems getting and staying pregnant (11)

Again, the headline and visual were relatively ineffective due to credibility. In turn, this made it difficult for the detailed, explanatory information to be accepted by most smokers. As with the image of the pram, smokers understood the significance of the empty cot but felt the image was clumsy:

*"It just looks like they've taken the baby out, taken the picture, and then will put it back in."*

That said, this headline was highly emotive for smokers who had experienced miscarriages and problems getting pregnant as it prompted a strong sense of guilt. However, care should be exercised if ever using a health warning such as this to avoid unintended 'blame' for people who have suffered a miscarriage.

### Smoking causes fertility problems for men and women (36)

The more direct inclusion of both genders within this health warning was appreciated by both males and females. It shares the burden of guilt associated with infertility as it is seen to be less direct at 'blaming' females. The use of the image of sperm was regarded to be more relevant to the topic than the other images and it complemented the inclusion of men in the headline and copy. However, the image was not immediately obvious to smokers.

Again, smokers looked to the copy to support the surprising claims made in the headline. It was effective because it included information for both genders. However, it was also seen to lack a credible explanation of how or why smoking causes fertility problems. There would be a need to include empirical evidence to support claims about infertility if this health warning was ever used at a later stage. As such, this topic area is not recommended to be used in this new suite of health warnings.

#### 8.4 Overall reactions to the theme: 'General cancers'

As a topic 'General cancers' is less effective than the one about 'Specific cancers'. As such, it will be more beneficial to include warnings that relate smoking to specific cancers.

Figure 8.4.1: Summary of reactions to the theme 'General cancer'

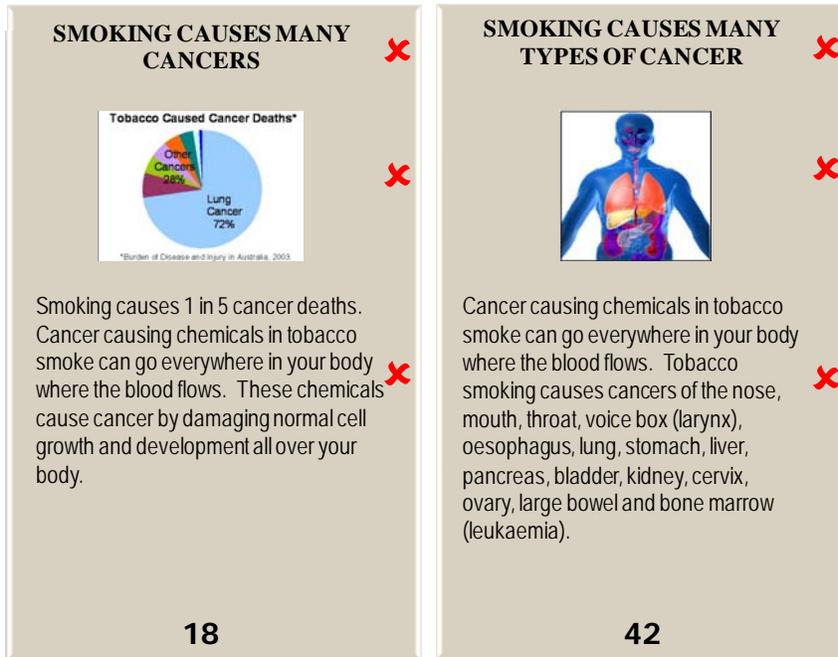


Figure 8.4.1 shows that the images and headlines of both 'General cancer' health warnings do not work. They fail to communicate a consistent message.

### Smoking causes many cancers (18)

Overall, there is a disconnect between the headline and the visual as the headline says 'Smoking causes *many* cancers', yet the visual clearly demonstrates a prominence of lung cancer, given that it is specifically named and makes up 72 per cent of 'tobacco caused cancer deaths'. Graphs only tend to be effective with a small few, including scientists and those who feel that numbers automatically equate to empirical proof. However, often this latter group includes people who do not fully understand the statistics.

It was only when the graph was misunderstood, did it appear to have an impact. In this instance it was only thought to be effective when it was interpreted as '72% of people who die of cancer, die of lung cancer' or '72% of smokers die of lung cancer'. In contrast, those who interpreted the graph correctly could dismiss the numbers explaining that there is no base number to relate the percentage to, and it could be referring to a small number of deaths.

The copy failed to explain the confusing visual. Presenting another statistic, 'Smoking causes 1 in 5 cancer deaths', which is broader than the graph confused readers further. The message was also not that surprising to people as the statistic was regarded to be lower than people expected.



### Smoking causes many types of cancer (42)

The image does not appear to be relevant, with smokers claiming it looked like a healthy body, with the highlighted organs appearing to have no apparent abnormality. The image exacerbated the rational acceptance of the message as it was regarded to be a scientific and clinical image from a textbook.

The headline was not thought to offer any new information and including 'many types' is unnecessarily cumbersome. The copy tended to polarise opinions. For some it was effective because of the sheer number of cancers linked to smoking. Yet, for others the lengthy list was overdone and impacted on credibility:

*"They name a lot more cancers than I know existed, there's a lot of stuff you can't see."*

*"They try and make it sound like everything, it's overload."*



## 9 REACTIONS TO QUIT TAGLINES

Six different Quit tagline options were tested with respondents to identify the most appropriate tagline(s) for packs. The six different options included:

- You CAN quit smoking (current tagline);
- Thinking of quitting?;
- Want to talk about quitting?;
- Want help with quitting?;
- Want advice on quitting?; and
- Reduce your risk by quitting.

Each of the quit taglines were followed by the words: 'Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au).

Most smokers claimed to have not noticed the current information about quitting on packs, and few could recall the current tagline – 'You CAN quit smoking'. That said, when prompted people believed a Quit tagline should be included on packs and made available for those who wish to make use of it.

The current tagline is polarising. Whilst appearing empowering for some who had not yet quit given that emphasis is placed on the possibility that quitting is achievable, for those who had already tried to quit, it was thought to be demotivating:

*"This makes it feel like I failed the first time, as it implies you'll quit the first time."*

*"Makes me feel like a failure for not being able to. I tried. I failed. It's hard."*

The taglines which pose questions are likely to be more encouraging for some smokers. They make quitting sound as though it involves a number of smaller, achievable, steps. Moreover, none of them imply that smokers have had to already make the commitment to 'never have another cigarette' in order to call the Quitline. All smokers fear failing at being able to quit, and, therefore, many fear openly telling others that they are quitting. 'Thinking of quitting'... offers the simplest and most direct question. Consider rotating the 'question' taglines, alongside the existing tagline as this is still empowering for those first time quitters. 'Reduce your risk by quitting' is too broad and non-specific as a tagline to have any impact.



## 10 RECOMMENDATIONS

Based on the findings of this research, recommendations to the health warnings on the front and back of packs are as follows:

### Main recommendations

- 1 Consider moving forward with the following 15 warnings which require different actions.

Smoking kills – who will you leave behind? (15)	<b>No changes necessary</b>
Smoking harms unborn babies (32)	
Smoking causes bladder cancer (30)	
Smoking can damage your sex life (37)	<b>Consider changes to copy</b>
Smoking causes lung cancer (7)	
How much does smoking cost you? (24)	<b>Consider change of image</b>
Smoking causes cancers of the head and neck (5)	<b>Revise headings (if accuracy permits)</b>
Smoking causes mouth and throat cancer (4)	
Smoking damages your blood vessels (27)	
Smoking causes dental damage (28)	
Smoking causes kidney cancer (29)	<b>Revise images prior to moving forward</b>
Smoking doubles your risk of stroke (10)	
Smoking causes emphysema (9)	
Do you want to look like a smoker? (44)	
Smoking kills (17)	

- 2 The optimal mix of warnings should demonstrate the emotional and financial consequences of smoking as well as the health effects.
- 3 The suite of health warnings should include a range of different image styles to maximise engagement, from the graphic images of ideally 'real' damaged organs and body parts, to those that appeal on a more emotional level, such as the images of Zita and Bryan.
- 4 The suite of health warnings would benefit from inclusion of some familiar warnings that continue to have a great deal of impact on smokers, such as smoking kills, unborn babies, lung cancer and PVD. These should be mixed with new health warnings, such as impotence, bladder cancer and the financial implications of smoking. The credibility of the familiar warnings will assist in providing credibility to the new warnings being introduced.

- 5 To maximise reach, the suite of health warnings should contain some warnings that will impact across all demographics as well as some that are more specifically targeted for specific sub groups. For example, 'impotence' will be more targeted towards men and 'ageing' for women. Similarly, 'emphysema' will have more relevance for older smokers and 'dental disease' for younger smokers.
- 6 Consider rotating the 'question' taglines, such as 'Thinking of quitting?', 'Want help with quitting?', 'Want to talk about quitting?' and 'Want advice on quitting'. These could be used alongside the current tagline, 'You CAN quit smoking'.

#### Recommendations on specific health warnings:

- 7 No executional changes are necessary for the following warnings:
  - Smoking kills – who will you leave behind? (15)
  - Smoking harms unborn babies (32)
  - Smoking causes bladder cancer (30).
- 8 The following warnings would benefit from a change of copy to maximise impact:
  - Smoking can damage your sex life (37):
    - use the copy from warning 12 with the greater explanation of what causes impotence
    - remove the word 'temporary'
    - include the statistics from the copy on 37 if space permits.
  - Smoking causes lung cancer (7):
    - greater impact will be achieved if the copy was more about Bryan personally (a personal story) rather than being generally about lung cancer.
- 9 Consideration could be given to changing the image of the money on 'How much does smoking cost you (24):
  - The current image can be confusing to decipher and a clearer shot of a wad of money would communicate the message more immediately.
- 10 Consider revising the headlines, and copy where specified, of the following health warnings, if accuracy permits:
  - Smoking causes cancers of the head and neck (5):
    - the headline could be more direct and refer to either 'throat' or 'neck cancer' only as people do not identify the visual as related to 'head cancer'

- the copy would benefit from further personalised details about John, e.g. ‘he had to learn to talk again to speak to his grandchildren.’
  - Smoking causes mouth and throat cancer (4):
    - the headline would benefit from being more direct and refer to ‘mouth’ cancer specifically.
  - Smoking damages your blood vessels (27):
    - consider changing the headline to ‘Smoking causes gangrene’ (if accurate). However, if not possible, consider maintaining use of ‘Smoking causes peripheral vascular disease’ with the new foot image as ‘damages blood vessels’ appears too understated. Also consider including the word ‘gangrene’ over the image if it cannot be used in the headline.
  - Smoking causes dental damage (28):
    - consider a headline more reflective of the extreme nature of the images, and which addresses the smoker directly, such as ‘Do you want teeth like a smoker?’ or ‘Smoking harms your teeth.’
- 11 The images of the following warnings require significant revision prior to inclusion in the suite of health warnings. Consider using a creative agency to advise on and create images to depict the messages. The following information provides some guidance as effective images:
- Smoking doubles your risk of stroke (10):
    - consider using an image where the characteristics associated with stroke can be clearly seen, such as a paralysed face depicting a drooping mouth and eye
    - if possible use an image of a younger person to increase impact on younger smokers as well.
  - Smoking causes emphysema (9):
    - consider using an image which makes the lungs appear more real and less like a picture from a textbook, to demonstrate the contrast. Alternatively a more ‘real’ looking damaged lung would be more effective than the current images. However, if this cannot be done, use the image which was tested.
  - Do you want to look like a smoker? (14):
    - consider use of a single image of what most people associate as a ‘typical’ smoker – a woman with deep etched lines around the eyes and mouth with dry skin
    - the image could be accompanied by stating the age of the woman as being in her late 30s or early 40s.
  - Smoking kills (17):
    - consider using an image of a younger person who is clearly close to death, such as an image similar to the Bryan image

- if this cannot be achieved, the current image could be used of the toe tag, alongside an image of a younger dead body.
  - Smoking causes kidney cancer (29):
    - consider an image that demonstrates an outwardly, visible sign of having kidney cancer as images of the comparative organs have no impact on smokers
    - consider an image that demonstrates an outwardly, visible sign of having kidney cancer such as an image of the blood in the toilet if it is accurate
    - the copy could also be strengthened further by making reference to how kidney cancer would diminish a person's quality of life.
- 12 If 'heart disease' is used as a topic, recognise it is likely to resonate more strongly with Aboriginal and Torres Strait Islander audiences and those who are aware of a family history of heart disease:
- consider using the image of the heart organs as this would resonate with Aboriginal and Torres Strait Islander audiences.
  - consider using the statistic from health warning 1 alongside the copy from health warning 25 which explains how smoking causes heart disease.
- 13 If a health warning about 'Quitting' is to be included, significant changes will need to be made:
- the headline needs to be more empowering and positive. The current warning on packs 'Quitting will improve your health' is positive and could be used if an alternative cannot be thought of.;
  - the image will also need to be reconsidered. If a new image cannot be found, the image on current packs of a smoker calling the Quitline could work as readers can easily grasp the message
  - the copy on health warning 45 could be used, alongside the opening sentence 'long term smokers can and do quit'.
- 14 Consider the possibility of using the rotating executions of the warnings using the Bryan and Zita images for the topic areas of 'Families' and 'Lung Cancer'.
- 15 Other topic areas such as 'short term health effects', 'general lung damage', and 'anti social' will require significant work to produce headlines and visuals that work effectively as messages on packs:
- this is likely to require more time than is available for development.
- 16 It is not recommended pursuing 'infertility' or 'general cancers' as a topic due to the lack of credibility.



GfK bluemoon

## APPENDICES



APPENDIX A – RECRUITMENT SCREENER

TOBACCO HEALTH WARNINGS 2 RECRUITMENT QUESTIONNAIRE

1a. Do you or any of your close relations, work in any of the following industries?

Market research	1	TERMINATE
Advertising, marketing, public relations	2	
Media and journalism	3	
Water industry	4	CONTINUE
Energy industry	5	
Automotive manufacture or retail	6	
Teaching	7	TERMINATE
Medicine or healthcare	8	
Department of Health & Ageing	9	
Tobacco manufacturing, for a tobacco company, at a tobacconist	10	
An organisation dealing with health issues	11	

1b. When was the last time you took part in a group discussion or depth interview? (Write in)

**TERMINATE IF LESS THAN 6 MONTHS AGO**

2a. Which of the following applies to you?

Under 16 years old	1	CLOSE
16-17 years	2	See Quotas
Between 18-25 years old	3	
Between 26-39 years old	4	
Between 40-65 years old	5	CLOSE
Over 65 years old	6	



2b. Which of the following applies to you?

No children	1	PRE - FAMILY	See Quotas
At least one child under 10 living at home	2	YOUNG FAMILY	
At least one child between 10 and 17 living at home	3	OLDER FAMILY	
No kids aged under 18 living at home (may have adult children living at home)	4	POST FAMILY	
Never had children	5	NO FAMILY	

3a. **READ OUT:** This research is on what people think about the warnings on tobacco packaging. We are looking for smokers and non-smokers who are willing to speak honestly about how they feel about this. Importantly, no one will judge you for being a smoker or tell you to quit.

Do you, or have you ever, smoked cigarettes, pipe tobacco or cigars?

Yes, cigarettes	1	CONTINUE
Yes, pipe tobacco or cigars	2	
No (have never smoked any of the above)	3	

3b. Which of the following statements describes your behaviour in relation to smoking cigarettes, cigars or pipe tobacco:

I smoke daily	1	DAILY SMOKER
I smoke at least once every two weeks	2	OCCASIONAL
I have smoked in the last month	3	
I have smoked in the last 3 months	4	
I have not smoked in the last three months	5	CONTINUE (Consider for action/maintenance & non smoker categories)



3c. Which of the following statements describes your general attitude and behaviour in smoking:

I think it would be too hard to quit or I don't want to quit (Pre-contemplation)	1	
I would like to quit, and hope to do so, but am worried it will be too hard (Contemplation)	2	
I'm planning to quit in the near future (Preparation)	4	
I have quit smoking in the last 6 months but have started again (Relapse)	6	
I quit smoking in the last 2 years (Action/Maintenance quitter)	7	16-25yr continue to Q4
I quit smoking more than 2 years ago (Non-smoker – quit more than 2 yrs ago)	8	
I have never smoked (Non-smoker- never smoked)	9	25-65yr continue to Q5

4. For the 16-25 yr olds, non-smokers in danger of starting, which of the following statements are you most likely to agree with:

I am very against cigarettes and dislike people smoking	1	TERMINATE
I have not smoked cigarettes previously, but might do in the future ( <b>Non-smoker –in danger of starting</b> )	2	CONTINUE
I'm not anti-smoking and have smoked cigarettes previously ( <b>Non-smoker –in danger of starting</b> )	3	CONTINUE

5. Record gender.

Male	1
Female	2

SEE QUOTAS

6. **ASK THOSE WITH CHILDREN ONLY:** How old are each of your children under 18 who live at home with you? **WRITE IN AGES**

Child no 1	
Child no 2	
Child no 3	
Child no 4	



7. What is your employment status?

Working full or part time	1
Unemployed	2
Full time student	3
Retired	4

SEE QUOTAS

8. What is the occupation of the chief wage earner in your household? (Record job and SES)

White collar	1
Blue collar	2

SEE QUOTAS

9. We need to ensure we include a representative sample of the population in our study. How would you describe your family's ethnic background? **READ LIST AND CODE ANY THAT APPLY**

Aboriginal or Torres Straight Islander	1
African	2
Asian	3
Australian	
Eastern European	4
Latin American	5
Middle Eastern	6
North American	7
Northern European	8
Southern European	9
Other (please specify)	10

SEE QUOTAS



10. Do you ever speak a language other than English at home?

Yes	1
No	2

**SEE QUOTAS**

11. We also need to ensure we include a representative sample of the population, with regard to disabilities. Do any of the following apply to you?

You have sight problems not fully corrected by glasses or contact lenses	1	SEE QUOTAS
You have a mobility related disability e.g. arthritis, walking with a stick	2	SEE QUOTAS
You have hearing problems	3	THANK & CLOSE
You have speech problems	4	THANK & CLOSE
You have difficulty learning or understanding things (e.g. learning disability)	5	THANK & CLOSE
You have another type of disability – please specify	6	CHECK WITH GfK BLUE MOON

**QUOTAS**

Each group should include 7-8 respondents and will last for one and a half hours. Please tell respondents they will not be admitted to the group if they arrive late and will not be given their incentive.

**Attitudes and Behaviour**

NB: The most important variable for this project are the behavioural and attitudinal groups. It is vital that respondents select the appropriate answer for their group.

**Behaviour**

We can expect that some groups will have higher number of daily smokers to occasional ones (and vice versa), but we would like to ensure that we have coverage of occasional smokers across all groups. Please aim to recruit 2 occasional smokers per group (this will likely be higher in younger groups).



Please aim to recruit 1-2 people across your state sample that smoke cigars or pipe tobacco rather than just cigarettes. We can expect that cigar smokers might smoke both cigarettes and cigars.

### Attitudes and definitions

#### **Smokers – attitudes as per the screener**

For the Contemplation/ preparation/relapse groups, please aim to recruit 2-3 from each stage, for each group.

#### **Maintenance/action quitters**

Respondents who have quit smoking in the last 2 years  
Ensure a mix of lengths of time people have quit from 0-2 years.

#### **Non-smokers (in danger of starting) – all aged 16-25**

Must agree with either statement 2 or 3 at Q4:  
I have not smoked cigarettes previously, but might do in the future  
I'm not anti-smoking and have smoked cigarettes previously

They must NOT have very strong anti-smoking views (Q4 – statement 1)

#### **Non-smokers (never smoked or quit more than 2 years ago)**

Respondents who have never smoked OR who have quit more than 2 years ago  
Please ensure a mix of those who have never smoked and those who have quit more than 2 yrs ago

### Demographics

Within each mixed gender group include:

- 4 men and 4 women
- a mix of socio-economic status where possible
- a spread of ages within the defined age bands
- a representative proportion of employed, unemployed people and non-working parents / retired people for that lifestage

### Lifestage:

- For each age group – please recruit a mix of the possible lifestages
- 16- 17 year olds – we can expect that these will mainly be no children
- 18-25 year olds – expect no children and some young family
- 26-39 year olds - expect mainly young and older family. Please ensure some inclusion of pre / no family in these as well. Please ensure a mix of ages of children.
- 40-65 – expect mainly older / post family with some s no family. Use young family if falls naturally in recruitment. y



### Ethnicity

Across the sample include:

- A representative mix of ethnic backgrounds and those who speak a language other than English at home for the area that each group is being conducted. No quotas- but we expect a natural fall out – we are OK with a couple 1-2 respondents across all groups in your state who have good enough English to participate in groups but still might not be totally proficient in English. They will be able to help us identify any specific issues with language that may arise. For example, their conversational English may be fine, but they may have greater difficulty with more technical terms or words. These usually fall out naturally, but please monitor.

### Disability question

Please include people that respond positively to the disability question as they fall out naturally.



APPENDIX B- STIMULUS BOOKLETS A and B

Stroke

SET A-10

## SMOKING DOUBLES YOUR RISK OF STROKE



Smoking narrows and blocks the arteries to the brain causing strokes. A stroke can kill you or leave you suffering with **permanent** disabilities like being unable to speak or move parts of your body. Don't think it can't happen to you - young people suffer strokes too.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET A-34

## SMOKING DOUBLES YOUR RISK OF STROKE



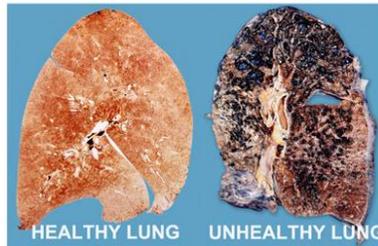
Smoking narrows and blocks the arteries to the brain causing strokes. At any age, a stroke can kill you or leave you suffering with **permanent** disabilities like being unable to speak or move parts of your body. Don't think it can't happen to you.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

Emphysema

SET A-9

## SMOKING CAUSES EMPHYSEMA



Smoking causes most cases of emphysema. Emphysema is the slow and **permanent** destruction of the airsacs in your lungs. Over time it becomes harder and harder to breathe. You slowly start to die from lack of air. Sufferers describe it as a living, breathing hell.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET A-33

## SMOKING TAKES YOUR BREATH AWAY



Around half of all lifetime smokers will get COPD (Chronic Obstructive Pulmonary Diseases) like emphysema and chronic bronchitis. COPD is caused by **permanent** damage to your lungs that make you cough, bring up phlegm and feel breathless. COPD can leave you gasping for air for the rest of your life.

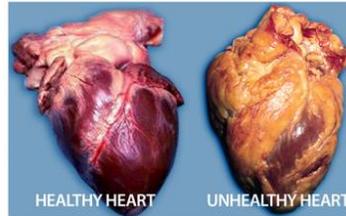
Heart

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



SET A-1

## SMOKING CAUSES HEART DISEASE



Smoking is a major cause of heart disease. Smokers have more heart attacks, repeat heart attacks and angina than non-smokers. Quitting today can cut your risk of heart disease in half by this time next year.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET A-25

## SMOKING DAMAGES YOUR HEART



Smoking causes heart disease by damaging the blood vessels and blood supply to your heart. Smokers have more heart attacks, repeat heart attacks and angina than non-smokers. Smoking more than doubles your risk of dying from heart disease.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



PVD

SET A-3

## SMOKING CAUSES PERIPHERAL VASCULAR DISEASE



Every day around one Australian loses a leg or foot because they smoked. Smoking narrows and clogs your arteries, restricting blood flow to your legs and feet. Over time this can result in leg pain, open sores that don't heal and gangrene. Gangrene leads to amputation.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET A-27

## SMOKING DAMAGES YOUR BLOOD VESSELS



Smoking narrows and blocks your blood vessels, reducing blood and oxygen supply to your extremities (feet, legs, hands, arms). Over time this can result in pain, open sores that don't heal and gangrene. Gangrene leads to amputation.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



GfK bluemoon

Significant others, ETS

SET A-14

## **DON'T LET ANYONE BREATHE YOUR SMOKE**



Tobacco smoke causes death and disease in children and adults who **do not** smoke. There is no safe amount of second hand smoke. Breathing even a little can be dangerous.

OR

Tobacco smoke causes death and disease in children and adults who **do not** smoke. It causes SIDS (Sudden Infant Death Syndrome). It reduces lung function. It causes illnesses like pneumonia, middle ear infections and asthma attacks in children to be worse. It also causes heart disease and lung cancer in adults.

**(Quit tagline to follow both messages)**

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



SET A-15<sup>11</sup>

## SMOKING KILLS – WHO WILL YOU LEAVE BEHIND?

**FRONT:**



**BACK:**



‘It affects not just me, the smoker, but the whole family. My kids are going to be without a mother’ – Zita, died aged 38 from lung cancer. She wanted to tell her story, to prevent other families from suffering the emotional pain and distress of smoking caused disease and death.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

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<sup>11</sup> Images not shown due to privacy and/or copyright.



SET A-16

## SMOKING DESTROYS FAMILIES



Smoking causes the death of around 15,000 Australians every year. Every death means a family is grieving and many result in children losing a parent. If smoking kills you, imagine the distress, pain and suffering of those you love most.

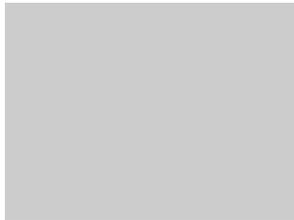
You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



SET A-39<sup>12</sup>

## SMOKING DESTROYS FAMILIES

**FRONT**



**BACK**



Smoking causes **preventable** death and disease in thousands of Australians every year. How will you tell your loved ones if you get a disease caused by smoking? Imagine their distress, pain and suffering if smoking kills you.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

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<sup>12</sup> Images not shown due to privacy and/or copyright.



Infertility

SET A-11

## **SMOKING CAUSES PROBLEMS GETTING AND STAYING PREGNANT**



Smoking causes fertility problems for men and women. It lowers sperm count and damages sperm quality. It makes it harder for women to get pregnant. It causes pregnancy problems including miscarriage and stillbirth. Quitting increases your chance of having a baby.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET A-35

## **SMOKING LOWERS YOUR FERTILITY**



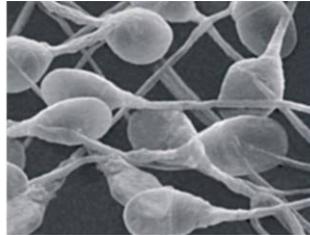
Female smokers are twice as likely to be infertile compared to non-smokers. For males, smoking can lower sperm count and damage sperm quality. Treatment for fertility problems is also less successful if one or both partners smoke.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



SET A-36

## SMOKING CAUSES FERTILITY PROBLEMS FOR MEN AND WOMEN



**Female?** Smoking can cause you problems with getting pregnant, staying pregnant and/or having a healthy baby.

**Male?** Smoking can change your sex hormone levels, reduce your sperm count and damage your sperm quality.

Quitting increases your chance of having a baby.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

Specific cancers

SET A-5

## **SMOKING CAUSES CANCERS OF THE HEAD AND NECK**

**FRONT**



**BACK**



John was a smoker. He got cancer of the larynx (voice box). His voice box was removed. He had to learn to talk again. Now he can only breathe through the hole in his neck.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



SET A-6<sup>13</sup>

## **SMOKING DOUBLES YOUR RISK OF BLADDER CANCER**



Your body tries to remove the cancer-causing chemicals in tobacco smoke through your urine. The bladder stores this urine, greatly increasing your risk of bladder cancer. Blood in the urine is one of the most common symptoms.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

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<sup>13</sup> Image not shown due to privacy and/or copyright.



SET A-30

## **SMOKING CAUSES BLADDER CANCER**



Your body tries to remove the cancer-causing chemicals in tobacco smoke through your urine. This makes smoking a major cause of bladder cancer. Treatment may include removing your bladder and replacing it with a bag outside your body to collect your urine.

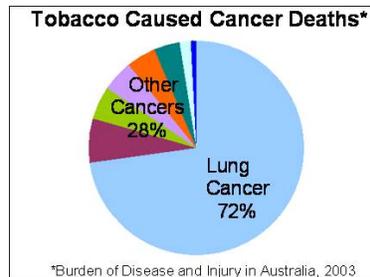
You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



General Cancer

SET A-18

## SMOKING CAUSES MANY CANCERS

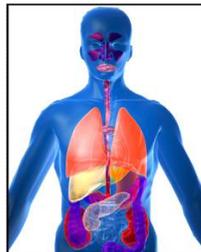


Smoking causes 1 in 5 cancer deaths. Cancer causing chemicals in tobacco smoke can go everywhere in your body where the blood flows. These chemicals cause cancer by damaging normal cell growth and development all over your body.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET A-42

## SMOKING CAUSES MANY TYPES OF CANCER



Cancer causing chemicals in tobacco smoke can go everywhere in your body where the blood flows. Tobacco smoking causes cancers of the nose, mouth, throat, voice box (larynx), oesophagus, lung, stomach, liver, pancreas, bladder, kidney, cervix, ovary, large bowel and bone marrow (leukaemia).

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



Short term health effects

SET A-22

## **SMOKING DECREASES YOUR FITNESS**



Smoking decreases lung function reducing the amount of oxygen you can breathe in. Toxins in tobacco smoke also reduce the amount of oxygen your blood can carry. This means your body doesn't get enough oxygen to work properly, especially when you exercise.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET A-46

## **SMOKING MAKES IT HARD TO KEEP UP**



Smokers are less healthy than non-smokers. Smoking decreases lung function, causes coughing, wheezing and shortness of breath. Smokers also get more infections, take longer to recover from infections/colds, have more days off work and seek medical care more often.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



Anti-social

SET A-23

## **SMOKING IS NOT A GOOD LOOK**



Most people do not like smoking. It stinks. It causes bad breath. It makes clothing and rooms smell of toxic smoke. It causes fires. It causes death and disease in those who do not smoke.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET A-47

## **SMOKING IS NOT ATTRACTIVE**



Most people do not like smoking. It stinks. It gives you bad breath. It makes clothing and rooms smell of its toxic smoke. Every year it also kills thousands of Australians, including children and adults who do not smoke.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



Babies

SET B-8

## **SMOKING HARMS YOUR BABY**



Smoking when pregnant reduces blood flow to your baby, limiting the oxygen and food your baby needs to grow. Smoking increases your risk of miscarriage, stillbirth, premature birth, problems during the birth and the risk of your baby having a smaller brain and body.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET B-32

## **SMOKING HARMS UNBORN BABIES**



Smoking during pregnancy reduces blood flow in the placenta and limits the oxygen and nutrients that reach the growing baby. This increases the risk of miscarriage, stillbirth, premature birth, problems during the birth or the baby having a smaller brain and body.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



SET B-38

## SMOKING CAUSES SIDS



Babies exposed to tobacco smoke are more likely to die from SIDS (Sudden Infant Death Syndrome). Smoking during pregnancy doubles the risk of SIDS. The risk is higher if the mother also smokes after the birth.

Or

Smoking during pregnancy doubles the risk of your baby dying from SIDS (Sudden Infant Death Syndrome). Babies exposed to tobacco smoke after birth are also more likely to die from SIDS. Don't let anyone smoke around your baby.

**(Quit tag line to follow both messages)**

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



Quitting

SET B-20

## DON'T LET TOBACCO BE YOUR LIFE SENTENCE



Long term smokers can and do quit. Getting help can increase your chance of giving up. Some smokers are successful the first time, but most try quitting a number of times before quitting successfully. Don't give up trying to quit.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET B-21

## BREAK FREE FROM YOUR TOBACCO ADDICTION

FRONT

BACK



Long term smokers can and do quit. The sooner you quit, the greater the health benefits. There are more ex-smokers than smokers in Australia. If they can quit, so can you. Don't give up trying to quit.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



SET B-45

## TAKE YOUR FIRST QUIT STEP TODAY



Quitting smoking at **any** age has immediate and long term health benefits. Compared with a smoker, quitting today will **halve your risk** of:

- heart disease (after one year);
- mouth and throat cancer (after five years); and
- lung cancer (after ten years).

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



Impotence

SET B-12

## SMOKING MAKES MEN SOFT



Smoking can cause a decrease in blood flow to the penis. This can prevent you from getting and/or keeping an erection when it is wanted. This can be a temporary or permanent problem. Quit before smoking damages your sex life.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET B-13

## SMOKING CAN DAMAGE YOUR SEX LIFE



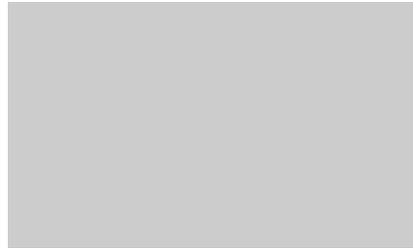
Men who smoke have difficulty getting and/or keeping an erection more often than non-smokers. This can be a temporary or permanent problem. The risk increases the longer you smoke and the more you smoke.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



SET B-37<sup>14</sup>

## **SMOKING CAN DAMAGE YOUR SEX LIFE**



Men who smoke are 25% to 40% more likely to have difficulty getting and / or keeping an erection compared to non-smokers. This can be a temporary or permanent problem. The risk increases the longer you smoke and the more you smoke.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

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<sup>14</sup> Image not shown due to privacy and /or copyright.



Death

SET B-17

## SMOKING KILLS

FRONT



BACK



Around 40 Australians will die today from smoking. Don't think it won't happen to you - half of all lifetime smokers are killed by their smoking.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET B-40

## SMOKING KILLS



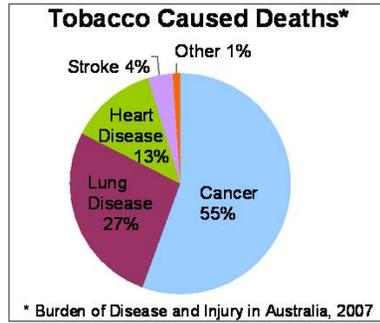
9 out of 10 drug-related deaths in Australia are caused by tobacco. No other consumer product kills as many people.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



SET B-41

## SMOKING KILLS



Smoking kills around 15,000 Australians each year. On average, smokers die about 10 years earlier than non-smokers. You can't choose the disease, but you can choose to quit.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



Specific Cancers

SET B-4

## **SMOKING CAUSES MOUTH AND THROAT CANCER**



Smoking is the major cause of cancers of the throat, voice box (larynx), and mouth. Treatment can include surgery that may deform your face and neck or leave permanent scars. It can also leave you struggling with problems breathing, eating, speaking, and coping with life.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET B-7

## **SMOKING CAUSES LUNG CANCER**



Smoking causes most cases of lung cancer. Most people who get lung cancer die from it. Many suffer months of pain, failing health and emotional distress before death.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET B-29

## SMOKING CAUSES KIDNEY CANCER



The cancer-causing chemicals you inhale with each puff, go through your kidneys as your body **tries** to get rid of them in your urine. This makes smoking a major cause of kidney cancers. Quitting will reduce your risk.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET B-31<sup>15</sup>

## SMOKING CAUSES LUNG CANCER



At the age of 36, Zita had a nagging cough that wouldn't go away. It was lung cancer. At 38 she died, leaving her 3 young children. She wanted you to know that smoking caused her early death.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

<sup>15</sup> Image not shown due to privacy and/or copyright.



Ageing

SET B-19

## SMOKING CAUSES WRINKLES



Smoking causes early facial wrinkles, making you look around 10 years older than a non-smoker. While you might not see the skin damage until middle age, you can not undo the damage. If you don't want to **look** like a smoker, Quit now.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET B-43

## SMOKING AGES YOU



Smoking can make your face look around 10 years older than your age. The more you smoke and the longer you smoke the more wrinkles you get. You can not undo the harm already done but quitting will help prevent more wrinkles.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



GfK bluemoon

SET B-44

## **DO YOU WANT TO LOOK LIKE A SMOKER?**



Smoking causes early, permanent and deeper wrinkles. Keep smoking and by middle age you could look around 10 years older than a non-smoker. Smokers get more wrinkles, especially around their eyes and mouth, and often a yellow-grey skin colour.

You **CAN** quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



Financial

SET B-24

## HOW MUCH DOES SMOKING COST YOU?

**FRONT:**



**BACK:**

Time quit	Money saved	What will you do with the money?
2 days	\$30	<ul style="list-style-type: none"> <li>CD/music download/DVD</li> <li>Take away meal</li> </ul>
1wk	\$105	<ul style="list-style-type: none"> <li>Tank of petrol</li> <li>Tickets to sporting game</li> </ul>
1mth	\$420	<ul style="list-style-type: none"> <li>Weekend away</li> <li>New clothes/shoes</li> </ul>
6mths	\$2,520	<ul style="list-style-type: none"> <li>Plasma TV/computer</li> <li>Family holiday</li> </ul>
1yr	\$5,040	<ul style="list-style-type: none"> <li>Lump sum off mortgage</li> <li>Deposit for new car</li> </ul>

A pack of 25s costs around \$15. If you smoke a pack a day that's \$105 a week. Quitting will save you money.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET B-48

## WHICH WILL YOU CHOOSE?

**FRONT**



**BACK**

Time quit	Money saved	What will you do with the money?
1wk	\$105	<ul style="list-style-type: none"> <li>Tank of petrol</li> <li>Meal out for two</li> </ul>
1mth	\$420	<ul style="list-style-type: none"> <li>Game console</li> <li>Weekend away</li> </ul>
6mths	\$2,520	<ul style="list-style-type: none"> <li>Plasma TV/computer</li> <li>Family holiday</li> </ul>
1yr	\$5,040	<ul style="list-style-type: none"> <li>Lump sum off mortgage</li> <li>Deposit for new car</li> </ul>

A pack of 25s costs around \$15. If you smoke a pack a day that's more than \$5,000 a year. Quitting will save you money.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)



Lungs

SET B-2

## YOU NEED HEALTHY LUNGS FOR LIFE



Smoking damages every part of your lungs. The longer you smoke and the more you smoke the more you destroy your lungs. Some damage is NOT reversible. Deadly lung diseases are the end result.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

SET B-26

## SMOKING DAMAGES YOUR LUNGS



Smoking damages your lungs' cleaning system, trapping toxic chemicals inside your lungs and making it harder to fight chest infections. It also causes permanent injury to your lungs that over time makes it harder and harder to breathe.

OR

Do you feel out of breath going up stairs? Have a cough or wheezing that doesn't go away? Spitting up mucous? Had repeat chest infections? These are real signs of smoking damage to your lungs. Talk to your doctor and quit now or they will get worse.

**(Quit tagline to follow both messages)**

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

Dental disease

SET B-28

## SMOKING CAUSES DENTAL DISEASE

FRONT



BACK



Smoking causes inflammation of the gum and other tissue around your teeth (periodontitis). Symptoms can include gum redness, swelling, bleeding, infection and pain. The gum, bones and other tissue supporting your teeth can be destroyed resulting in tooth loss. Smoking also decreases treatment success.

You CAN quit smoking. Call Quitline 13 7848, talk to your doctor or pharmacist or visit [www.quitnow.com.au](http://www.quitnow.com.au)

## APPENDIX C – IMAGE ACKNOWLEDGEMENTS

- 1a. Heart disease (healthy heart) – sourced from Wikimedia Commons
- 1b. Heart disease (unhealthy heart) – © Winnipeg Regional Health Authority, Canada
2. Lungs (healthy and unhealthy) – © European Community, 2005
3. Peripheral vascular disease (amputee) – supplied by Photolibary Pty Ltd
4. Mouth and throat cancer – © St Vincent's Hospital, Darlinghurst, New South Wales, Australia
5. Cancers of the head and neck (John image) – © Cancer Council Western Australia; permission kindly granted by John
7. Lung cancer (Bryan image) – © V. Jane Windsor / St. Petersburg Times (Fla.), United States
8. Babies (pregnant woman) – supplied by Photolibary Pty Ltd
- 9a. Emphysema (healthy lung slice) – supplied by Photolibary Pty Ltd
- 9b. Emphysema (unhealthy lung slice) – © Mater Misericordiae Health Services Brisbane Limited, Queensland, Australia
10. Stroke (woman's face) – © Winnipeg Regional Health Authority, Canada
11. Infertility (Bassinette) – Department of Health and Ageing
12. Impotence/sex life (droopy cigarette) – © Government of Brunei
13. Impotence (man) – supplied by Photolibary Pty Ltd
14. Environmental tobacco smoke – supplied by Photolibary Pty Ltd
15. Families (Zita images) – permission kindly granted by Zita's family, Cancer Council Western Australia and the West Australian Newspaper
16. Families (grave site) – supplied by Photolibary Pty Ltd
17. Death (toe tag and mortuary) – both images © European Community, 2005



19. Ageing (wrinkles) – supplied by Photolibary Pty Ltd
20. Quitting (prison bars) – © European Community, 2005
21. Quitting (ball and chain) – © William Kelly, Michael Lloyd, Todd He and Melanie Desole (Australia)
22. Short term health effects (young man and bicycle) – supplied by Photolibary Pty Ltd
23. Anti-social effects (young woman) – supplied by Photolibary Pty Ltd
24. Financial implications (money) – supplied by Photolibary Pty Ltd
25. Heart disease (resuscitation) – supplied by Photolibary Pty Ltd
26. Lungs (healthy and unhealthy) – © European Community, 2005
27. Peripheral vascular disease (gangrene foot) – © Commonwealth of Australia; originally supplied by Fremantle Hospital & Health Service, Western Australia
28. Dental Disease – © Professor Laurence J Walsh, The University of Queensland, Australia
29. Kidney cancer (healthy kidney and kidney cancer) – Department of Health and Ageing
30. Bladder cancer (urostomy bag) – © Commonwealth of Australia; originally supplied by Photolibary Pty Ltd
31. Lung cancer (Zita) – permission kindly granted by Zita's family and Cancer Council Western Australia
32. Babies (premature baby) – © Commonwealth of Australia; image originally supplied by Photolibary Pty Ltd
33. Emphysema (coughing man) – © Health Canada
34. Stroke (wheelchair) – supplied by Photolibary Pty Ltd
35. Infertility (empty stroller) – © European Community, 2005
36. Infertility (sperm) – © European Community, 2005
38. Babies (cot) – Department of Health and Ageing
39. Families (Bryan) – © V. Jane Windsor / St. Petersburg Times (Fla.), United States



- 40. Death (coffin) – supplied by Cancer Council Western Australia
- 42. General cancer (body) – supplied by Photolibary Pty Ltd
- 43. Ageing (woman looking into mirror) – © Government of Hong Kong
- 44. Ageing (two faces) – supplied by Photolibary Pty Ltd
- 45. Quitting (boot) – © Government of Venezuela
- 46. Short term health effects (man and child playing) – supplied by Photolibary Pty Ltd
- 47. Anti-social effects (young woman) – supplied by Photolibary Pty Ltd
- 48. Financial implications (money and cigarette butts) – both images supplied by Photolibary Pty Ltd



## APPENDIX D – DISCUSSION GUIDE

### 3042\_Tobacco packaging \_Discussion Guide

#### 1 Introduction (5 mins)

*Purpose of section is to introduce topic of discussion, explain the group process to the participants and obtain some brief demographics about respondents.*

- Introduce self
- Explain confidentiality/viewing facility/recording
- Explain project background:
  - Research is on cigarette and tobacco products packs. (Moderator to keep this deliberately broad as to what parts of the packaging that we will be looking at specifically. We want to gain some spontaneous reactions first).
  - Reiterate that not here to discuss or judge their smoking behaviour, just to get their views on some ideas about the packaging.
- Participant introduction:
  - Name
  - Home set up
  - Smoking/quitting habits (where applicable)

#### 2 Reactions to current cigarette packs (5 mins)

*Moderator note – Warm up exercise to explore reactions to current cigarette packs. Moderator to distribute packs on table and get them to pick one pack out. Do not identify what we will be looking at specifically.*

*Ask them to complete **Self-complete 1**, before discussing as a group:*

- Which pack do you notice the most?
- Why do you think that is?
- What stands out the most?
- What do you think about the health warnings on the pack?
- Which ones would you be more likely to read?
- Which ones stand out the least?
- Why do you think that it?



### 3 Headline warnings and graphics (30 mins)

*Hand out A3 booklet containing headlines and pictures and **self-complete 2**.*

*For each sheet in your booklet, which one:*

- *makes you stop and think (i.e. provokes some kind of reaction)*
- *makes you most concerned about your smoking behaviour*

*Please mark down the relevant number.*

*Please ensure correct stimulus set (A or B) is used for each group.*

- When self-complete is finished, ask them which ones have the most impact on them (i.e. they provoke a sense of reaction, whether it be positive or negative)?
- Explore in more detail which ones they think are the most: impactful (i.e. provoke a reaction), grab their attention and make them more concerned about their smoking behaviour?

*Ensure moderator needs to be clear whether they are referring to the headline or the image, or both in each case.*

- Why do they think this?
- Do particular themes stand out? Explore in detail if certain themes are working and others are not and for which target audience.
- Which make them curious & want to read more?
- What reaction did it prompt in you?
- What emotion did it make you feel?
- Who is the headline/picture aimed at? What type of person? (eg. young/ old., those with family, those with no family).

*Moderator to gauge specific reactions to headlines, if not covered above:*

- Which headlines stand out the most?
- Do they contain any new information?
- Do you believe the headline?
- Does anyone NOT believe any of the headlines?
- How would you describe the tone of the headline?
- Which headlines stand out the least?

*Moderator to gauge specific reactions to pictures, if not covered above:*

- Which pictures stand out the most? Why?
- What does the picture say to you?/What does it communicate?
- Does it make sense?
- Which ones portray new information?
- Are they credible?
- Is there anyone that does NOT think the picture looks real/convincing (where relevant)?
- Do they fit with the headline?
- Do particular themes stand out? Explore in detail if certain themes are working and others are not and for which target audience.
- Which pictures stand out the least? Why?

Exploration of themes

- Moderator to put up the theme boards for stimulus set. Go through each one, exploring attitudes to the headlines and the images.
- What do you think of the overall theme? Is it powerful to use in regards to quitting? Why?
- What headlines work the best? Why? Can they work with different images?
- What do you think of the images used? What other images could best used to illustrate / demonstrate the topic?

*Within the exploration of themes, explore the summary point below.*

- Would any of these headlines and/or pictures impact on your attitude to smoking? If so, how?
- Does it make you think about quitting?
- If not, why not? (Moderator to probe out if respondents had commented on the messages having impact – how come they would not influence their attitudes towards quitting? Why?)
- Would any of the images fit better with other headlines? If so, which ones?

#### 4 Explanatory message (copy) (30 mins)

*Moderator to hand out an A4 booklet containing each of the different headlines/images and explanatory message (copy). Ask them to now focus on the explanatory message (copy).*

*Please ensure correct stimulus set (A or B) is used for each group.*

*Respondents to complete **self-complete 3** - Please rate each explanatory message in terms of how much it makes you stop and think. 5 is the most and 1 is the least.*



Overall grouping of explanatory messages:

- Which messages have you rated as making you stop and think the most (4-5)?
- How would you describe these messages (4-5)?
- Are they a type of message? On a particular theme? Explore in detail if certain themes are working and other are not.
- How would you describe their tone? Style of the messages?
- Do they help explain the headline and/or picture?
- Do they make the health warning more believable?
- Would these types of messages impact on your attitude to smoking? If so, how?
- Would they make you think about quitting/staying a quitter? If yes, how?
- If not, why not? (Moderator to probe out if respondents had commented on the messages having an impact – why would they not influence their attitudes or behaviour? Why do respondents think they would not?)

Then for individual messages in the group

- What score did you give this message?
- What reaction did it prompt in you?
- What emotion did it make you feel?
- What was it saying to you? (Message comprehension)
- Does it have any new information in it?
- Is it believable?
- What about the language? Is there anything you did not understand?
- 
- For those with 'Medium'/ 'low' scores (1-3) for making them stop and think, why a low score?
- How would you describe the messages in these groups?
- Is there anyone that does NOT believe the message?
- Why not?
- What about the language? Was it clear? Is there anything you did not understand?
- Who is the message aimed? What type of person? (eg. young/ old., those with family, those with no family).



- Would this message impact on your attitude to smoking? If so, how?
- Would it affect how you think about quitting/remaining a quitter? If yes, how

Repeat for the messages in the 'medium' and 'low' categories

*Overall*

- Do the messages with the highest scores fit with the headline and/or picture?
- Which headlines and/or pictures would the message fit better with?
  - Moderator to start with a different message in each group – ie, aim is to rotate the order of the discussion.

## 5 Overall reactions (10 mins)

*Now get respondents to think about all the elements of each of the health warnings: headline, image and copy.*

*Using cards displaying the headline, picture and copy get them to sort each cards into 3 groups: high, medium and low impact (in terms of provoking a reaction)*

- Get them to explain the groupings they have come up with.

## 6 Quit taglines (5 mins)

*Moderator to hold up 6 different Quit tagline options on a board and explain either of them could fit with the information about the Quitline number/website (shown on separate board).*

- Which of these 6 options do you think is the most appropriate? Why?

## 7 Summing up: (2 mins)

- Out of everything you have seen today, what one thing has had most impact on you?



## APPENDIX E – USING THIS RESEARCH

It is important that clients should be aware of the limitations of survey research.

### Qualitative Research

Qualitative research deals with relatively small numbers of respondents and attempts to explore in-depth motivations, attitudes and feelings. This places a considerable interpretative burden on the researcher. For example, often what respondents do not say is as important as what they do. Similarly, body language and tone of voice can be important contributors to understanding respondents' deeper feelings.

Client should therefore recognise:

- that despite the efforts made in recruitment, respondents may not always be totally representative of the target audience concerned
- that findings are interpretative in nature, based on the experience and expertise of the researchers concerned

### Quantitative Research

Even though quantitative research typically deals with larger numbers of respondents, users of survey results should be conscious of the limitations of all sample survey techniques.

Sampling techniques, the level of refusals, and problems with non-contacts all impact on the statistical reliability that can be attached to results.

Similarly quantitative research is often limited in the number of variables it covers, with important variables beyond the scope of the survey.

Hence the results of sample surveys are usually best treated as a means of looking at the relative merits of different approaches as opposed to absolute measures of expected outcomes.



### The Role of Researcher and Client

Blue Moon believes that the researchers' task is not only to present the findings of the research but also to utilise our experience and expertise to interpret these findings for clients and to make our recommendations (based on that interpretation and our knowledge of the market) as to what we believe to be the optimum actions to be taken in the circumstances: indeed this is what we believe clients seek when they hire our services. Such interpretations and recommendations are presented in good faith, but we make no claim to be infallible.

Clients should, therefore, review the findings and recommendations in the light of their own experience and knowledge of the market and base their actions accordingly.

### Quality Control and Data Retention

GfK Blue Moon is a member of the Australian Market and Social Research Organisations (AMSRO) and complies in full with the Market Research Privacy Principles. In addition all researchers at GfK Blue Moon are AMSRS members and are bound by the market research Code of Professional Behaviour.

GfK Blue Moon is an ISO 20252 accredited company and undertakes all research activities in compliance with the ISO 20252 quality assurance standard

Raw data relating to this project shall be kept as per the requirements outlined in the market research Code of Professional Behaviour.