Influencing Health Behaviours for Good Using Mass Media

Professor Melanie Wakefield
Centre for Behavioural Research in Cancer
Cancer Council Victoria
Australia
Introduction

- Present findings of a recently published review on mass media campaigns to change health behaviours
- Understand the potential pathways through which media can exert effects on health behaviours
- Illustrate lessons with examples from selected studies
- Discuss the role of news media in shaping health behaviours at the population level
- Implications for practice
Mass media review

• “Review of reviews” within specific health topic areas, plus more recently published high quality studies
• Published literature includes > 400 studies

Empirical evidence

• Tobacco, alcohol and illicit drug use
• Heart disease prevention
• Diet and physical activity
• Birth rate reduction and HIV prevention
• Cancer screening and prevention
• Child survival: vaccination, breast-feeding, SIDS
• Other health topic areas:
  road safety; blood/organ donation; mental health;
  interpersonal violence and child maltreatment; pre-
  hospital response to heart attack symptoms
What are mass media campaigns?

Create & place messages on media that reach large audiences: exposure is passive, reflecting routine use of media

New technology, if it requires an active choice to obtain exposure, is excluded

Short or long lived; stand alone or linked to:

- New clinical services (e.g. cancer screening)
- New products (e.g. condom availability)
- New policies (e.g. tax increase on tobacco)
Campaign discussion changes public opinion & leads to policy change

Media campaign attention

Campaign discussion changes social norms

Perceptions and intentions

Prevalence of risky behaviours

Social network member

Adapted from: Yanovitsky & Stryker Communication Research 2001
Evidence for effects: a complex story

• Strong positive evidence in some areas: e.g. tobacco, road safety, condom use for HIV prevention, vaccination.
• Ineffective campaigns for some important interventions: drug use, alcohol abuse.
• Mixed evidence in most areas: some programs successful, others less promising.
Success more likely when campaigns...

Promote one-off/episodic behaviour (vaccination; screening) than ongoing behavior (physical activity; dietary change)
Campaign effects usually time limited

PapScreen campaign and weekly pap tests
Success more likely when campaigns...

Do not face tough competition from product marketers (unhealthy food promotion; alcohol or tobacco marketing; sunbeds; labour-saving devices and services)
Advertising works like a spring to combat persistent unhealthy influences.
Success more likely when campaigns…

Complement concurrent changes in

– available services (vaccination; cancer screening)
– policy (tobacco tax increase; seatbelt enforcement)
Success more likely when campaigns...

Obtain high population exposure
  – Maintain exposure over time
  – Through multiple channels
Development of message content and format

Campaign messages should be based on sound research of the target group and should be tested during campaign development

- ensure message is understood and persuades
- exclude unintended messages
Policy recommendations for governments, practitioners & professional bodies

1. Include media campaigns as key component of a comprehensive approach to improving population health behaviour

2. Ensure sufficient funding to enable frequent, widespread exposure to campaign messages over time, especially for ongoing behaviours

3. Ensure adequate access to promoted services and products

4. Employ complementary policy decisions that support opportunities to change, provide disincentives for not changing, and restrict competing marketing

5. Base campaign messages on sound research of the target group and test messages during campaign development

6. Conduct rigorous independent assessment of outcomes and seek peer-reviewed publication

Wakefield et al Lancet 2010
Three common questions…

1. How much campaign exposure is sufficient to change behaviour?
2. Which types of messages are most effective?
3. How much tailoring of messages is needed for population sub-groups?
How much exposure is enough to influence behaviour?

Smoking prevalence

Minimum: 400-700 TARPs/month
Maximum:

TARPs
Choice of campaign messages

Different messages
  serious health effects, social norms, advice and tips for quitting, tobacco industry deception

Different types and level of emotion evoked
  fear, worry, disgust, anger, sadness, hope, enjoyment, pride

Different format or style
  personal story, scientific evidence, graphic imagery, simulation
Choice of campaign messages

11 studies compare effects of different kinds of anti-tobacco ads (population survey or controlled exposure studies)

In 9 out of 11 studies, high negative emotion messages perform better than funny or emotionally neutral ads, as measured by indicators of message processing

- ad recall; thinking about the ad; discussing the ad

Usually about serious health effects of tobacco use, secondhand smoke, or tobacco industry deception

National Cancer Institute, 2008
Mass cohort study of adult smokers

Smokers surveyed in 2001/02 and followed up 2 years later (n=1,491)
Cumulative TARPs in MA media markets for 2 years prior to baseline interview matched to individual respondents
Most ads from MA tobacco control program, plus some Legacy ads and NY state ads
Extent of ad exposure varied between smokers due to different media markets and timing of baseline interview

Durkin et al Am J Public Health 2010
Mass cohort study of adult smokers

• Likelihood of being quit by follow up increased by 11% with each additional 10 ad exposures (p<.05)
• Effect of TARPs on quitting did not vary by SES
• When separated into ads that elicited high negative emotion, likelihood of being quit at follow up increased by 14% with each additional 10 ad exposures to HE ads (p<.05). No effect on quitting of exposure to other ads.
• This effect more likely among low and mid SES smokers
• Emotional engagement especially important for lower SES groups

Durkin et al Am J Public Health 2010
A bigger role for emotion activation in messages for quitting

- Smokers “know” smoking causes serious disease
- BUT…they don’t feel the risk
- Media campaigns can make this more concrete, increase the urgency for quitting, and remind and reinforce the need to quit
- Narrative messages (tell a story, can be more personal) and graphic messages (grab attention, engaging visual or auditory information) can be understood by many
A good ad works with many

• Studies have shown that ads that perform well tend to do so among many population subgroups

• This means there is no need to make specific ads tailored to smaller population subgroups
  – However, still need to ensure reach of ad to population groups

• Efficiency - greater role for recycling/adapting existing high performance ads for use in other countries
  – Maximise funding directed to broadcasting of ads, instead of making them from scratch
Beware of industry-sponsored campaigns

Ads perform poorly in ad-rating studies
In population-based studies of national samples of teens, greater youth exposure to tobacco industry youth smoking prevention campaigns INCRESAE youth intentions to smoke and past month smoking = boomerang effects
Broadcast for public public relations purposes

Wakefield et al Am J Public Health 2006
News coverage can influence health behaviour

Celebrity diagnosis of illness influences health behaviour

People say the news media is a major source of health information

Mechanisms of influence

Helps to change population norms

Sets agenda for policy change which itself can influence health behaviour

Some stories may act as ‘a straw that breaks the camel’s back’ in prompting behaviour change
News coverage influences weekly tobacco sales

Weekly total of cigarettes sold in panel of 60 New Zealand supermarkets over 42-week period

Number of articles/week on tobacco issues in daily newspapers

10% increase in news articles/week = 0.4% decline in tobacco sales

Laugesen & Meads *Brit J Addiction* 1991
News coverage reduces grocery store sales of products with trans fat

FDA, from January 2006: food products required to list amount of trans fat per serving

Monitored newspaper articles/week before & after ruling implemented & related to weekly sales of trans fat products from grocery stores using time series analysis

Higher news coverage reduced sales of 6 of 7 trans fat products in post-labeling period. Effects dissipated rapidly.

Niederdeppe & Frosch Am J Prev Med 2009
News coverage influences public health policy

Effect of factors influencing likelihood of smoke-free bylaw adoption in Canada:

- Number of pages of parliamentary debate
- Number of scientific journal articles on secondhand smoke
- Release of US Surgeon-General’s report
- Number of newspaper articles on secondhand smoke

Each news article produced a 5% increase in rate of smoke-free bylaw adoption

Asbridge Soc Sci Med 2004
Articles that mention tobacco control advocacy groups get higher news prominence

Wakefield et al Am J Health Prom 2011
Summary points

Mass media campaigns can play an important role in achieving population-wide health behaviour change.

They are not a magic bullet and are best supported with other strategies – policies, services, products.

Gaining sufficient population exposure is important for realising both direct and indirect pathways of influence, and to compete with health-harmful messages.

Media campaigns have relatively short-term effects on behaviour and so require ongoing investment.

Messages require careful development and pre-testing with target audiences.
Summary points

Sharing and recycling is desirable, but pre-test locally to be sure

Emotion-evoking messages may help achieve cut through, discussion & agenda-setting, in the context of many competing health-harmful messages

Great ads can perform well with many population subgroups

Beware of industry-funded mass media campaigns which are unlikely to drive consumers away from the products of concern

News media advocacy can play a key role in shaping policies and contributing to behaviour changes