



BURNS & COMPANY
STRATEGIC RESEARCH CONSULTANCY

DEPARTMENT OF HEALTH
RESPIRATORY AND HAND HEALTH
- ADVERTISING TO MOTHERS
CREATIVE DEVELOPMENT RESEARCH
QUALITATIVE RESEARCH REPORT

Prepared for: Department of Health
COI

Prepared by: Alastair Burns, Burns & Company

COI Job Number:

November 2008
JN 468

Contents

	Page
1. Background	3
2. Research Objectives	4
3. Method and Sample	5
4. Overall reactions to the creative ideas	6
5. Reactions to the radio scripts	9
5.1 'Ring o Roses'	10
5.2 'Baby SFX'	13
5.3 'SFX'	16
5.4 'Everywhere'	18
6. Reactions to the print advertising ideas	20
7. Conclusions and Recommendations	27
8. Appendices	
Appendix 1: The Discussion Guide	29
Appendix 2: Recruitment Questionnaire	32

1 Background

This document is the final report on a qualitative research study to guide development of advertising aimed at mothers to encourage better hand and respiratory hygiene practice for them and their children.

Experts say an influenza pandemic is likely but cannot predict when it will happen. A pandemic flu strain could infect billions of people worldwide, so Governments are making preparations to limit the impact.

Because the flu strain that creates a pandemic will be new, an effective vaccine will not be available straight away. Good hygiene practice therefore has a major role to play in slowing the spread of pandemic influenza, and will be the single most effective thing that people can do to protect themselves and others from infection, at least in the early stages of a pandemic.

The Department of Health (DH) is therefore developing a communications strategy with the aim of embedding good hygiene practice before a pandemic, while there is time to educate people and get them to think about changing their habits. At this stage, communications aimed at the general public are not mentioning pandemic flu, to avoid causing panic. Instead, the campaign focuses on stopping the spread of germs (as opposed to flu or colds, which tend to be seen as seasonal). A second level of communications is being developed to be used when the pandemic strikes, which will be more direct about the nature of the risk.

As part of this strategy, an advertising campaign was scheduled to start in November 2008, using radio, print, online and ambient media. Qualitative research was required to guide the development of this campaign.

The objectives for the advertising were:

- To build awareness of the importance of good RHH;
- To build awareness of the specific good practice guidance;
- To embed positive attitudes towards good RHH practice;
- To encourage behaviour change.

The primary target audiences for the advertising were new parents and mothers, who are the gatekeepers of hygiene in households and are believed to be highly receptive to messages about RHH.

The key messages to be communicated by the advertising were:

- Always carry tissues;
- Always use a disposable tissue to cover your nose and mouth whenever you cough or sneeze;
- Use tissues once and throw them into a bin as soon as you can;
- Wash your hands regularly, especially after sneezing or coughing.

2 The Research Objectives

The overall purpose of the research was to examine reactions of the target audience to the creative ideas against the campaign objectives and ascertain their potential to prompt the desired response.

The specific objectives were:

- To examine reactions to the creative ideas and determine which route is most likely to meet the requirements of the advertising brief.
- To explore the strengths and weaknesses of each route in terms of:
 - impact (insofar as one can assess this in qualitative research)
 - relevance to the audience
 - relevance of the idea
 - credibility
 - accessibility of the language
 - tone of voice (specifically, is the advertising perceived to be too 'nanny state'?)
- To provide guidance on how the creative ideas can be developed

3 Method and Sample

Given the exploratory nature of the task and the need to cover several advertising concepts and media, two-hour qualitative group discussions were recommended as the main methodology. Each group had 8 participants.

The disadvantage of group discussions for advertising development work is that there can be some contamination of ideas between respondents: the more vocal and extrovert can influence the ideas of the others; or those with more knowledge can inform those with less. This was addressed by obtaining individual feedback before the subject was discussed as a group. This was done by asking each participant to fill in a short questionnaire about the communication of the idea prior to opening up the discussion. This gave each participant time to consider their understanding and viewpoint before having to express it to the group.

The creative ideas were presented in rotated order across the groups, to diminish the order effect. The ideas were also presented in their media context, so that people could understand how they will encounter the concept. Therefore, when showing the print ideas, we showed a mock up of the idea in a relevant print title.

The sample consisted of:

- 6 x 2 hour group discussions with mothers
- Split by the age of children and class

The groups were conducted by Alastair Burns from 16th – 18th September 2008 in Liverpool, Birmingham and Elstree.

The detailed sample design was as follows:

2 hour group discussions 8 mothers per group	ABC1	C2DE
Mothers with children under 2 years	Group 1 (New parents, only child) London / South	Group 2 (Any child <2) Midlands
Mothers with children aged 2 – 5 years	Group 3 Midlands	Group 4 North
Mothers with children aged 6 – 10 years	Group 5 North	Group 6 London / South

4 Overall reactions to the creative ideas

Overall, most of the advertising ideas worked well in terms of engaging the audience's attention, targeting them as mothers and communicating the main messages: 'use tissues, dispose of them and wash hands' (although there were differences of emphasis).

Before explaining the detailed reactions to the advertising, it is worth making some overall points about mothers' attitudes to colds and their response to the advertising...

i) Targeting

Firstly, and most obviously, mothers tended to respond better to advertising that included or represented children in some way: this signalled relevance to them as mothers specifically. In general, mothers were interested in messages, particularly from the NHS, that might be important for their children. Therefore, ideas which featured babies, children's voices, or pictures of children helped to engage their interest and attention. Examples of this were 'Baby SFX' radio and the 'little boy sneezing' print ad.

Ideas which seemed to be aimed at a more general adult audience did not have this 'automatic' relevance and therefore did not seem to be specifically targeted at them as mothers. Examples of this were 'SFX' radio, 'Germ here' radio and the 'Old man' print ad.

ii) Attitudes to 'coughs and colds'

As we know from previous research, 'coughs and colds' are not viewed as being that serious a problem. Mums saw them as 'a fact of life' and took the view that children will always come into contact with other people with colds, whatever mothers do. Moreover, some believed that getting coughs and colds helps children to build up their immune systems, which protects them against more serious illnesses in future. Mothers took the view that the best protection is ensure that children are well fed, exercised and clothed, to build strong healthy bodies.

iii) Reactions to the claim that 'school children can get 7 – 10 colds a year'

Being told by the advertising that 'school children can get 7-10 colds a year' was neither surprising nor particularly worrying. It was an interesting fact, but it reinforced their impression that children will pick up colds out of the home very easily. It also reinforced the feeling that there is little mums can do about it: it makes no difference if their child practices good hygiene because nobody else will.

Therefore, good hygiene practices will not actually have any effect on the likelihood of getting colds.

The other issue is that mothers are primarily motivated by protecting their own child: protecting others is desirable, but less motivating. The '7-10 colds' point does not tell them how much this incidence will reduce if their child practices good hygiene.

iv) Reactions to the claim that 'Germs can live for hours on surfaces'

GERMS, however, are a different matter to colds. They are associated with nastier illnesses than just coughs and colds, so they are more worrying. Mums felt they can and should do something to protect their children (and themselves) from germs.

Of all the messages in the advertising, the information that 'germs can live for hours on surfaces' was the most surprising, new and compelling. This was something that, on the whole, mums did not know. It challenged their perceptions of what happens after a cough or sneeze, it provided a motivating reason for reappraising their hygiene practice and it was a justification for going beyond the 'norm' (covering up with a hand) to use tissues, bin them and wash hands. In addition, it gave the mothers more 'ammo' to influence their children and other adults. Therefore, this is a message that the campaign should focus on more single mindedly.

v) Mothers' influence over children

Mums have decreasing influence over their children as the children get older. Once children go to nursery or school, mums felt that there is little they can do to control their hygiene behaviour out of the home because children will ignore them, or forget what they are told. Therefore, in their view, the behaviour has to be reinforced by schools to have any effect.

In reality, mothers realised that teachers and schools do not have the time or inclination to take on this role. Mums were therefore very sceptical about the likelihood of children using tissues and washing hands during the day, when they are not at home.

Mums of older children (4/5 upwards) were also fed up with having to nag their offspring continuously, which has the effect of undermining their influence. Therefore, advertising which seems to be asking them to add to their list of issues to nag children about will not be well received: they have enough on their plates. In any case, coughs, colds and using tissues came very low down on their list of priorities for nagging time.

Mums of younger children also reacted against advertising that seems to be placing the responsibility and blame on them as mums, for example by exhorting them to be more careful about hygiene in the home, or telling them to avoid infecting their babies.

The most effective approach was to target messages at both the mothers and their children. Mothers felt that, if the advertising is 'child friendly', the child will pick up on the idea themselves. This makes it easier for the mother to raise the subject and reinforce the message.

"See - it's official. It's not just me saying it" (C2DE, child 6 – 10 years, Liverpool)

"I think it's good to use something that will engage both adults and children, not just the adults, because then you'd be relaying the message" (BC1, child 2-5, Birmingham)

'Partnering' and supporting mothers in influencing their children, rather than placing all the responsibility on them, worked well (as in the 'Ring o Roses' radio ad and the 'little boy sneezing' print ad). This enables mothers to 'use' the advertising to pass the information on and reinforce the messages.

vi) Tone of voice

None of the ads were criticised for being too 'nanny state' in tone

There were some who questioned whether the subject was worthy of an advertising campaign, as they believed that they knew this stuff already, and it did not seem important. There were others who objected to being told anything by Government, and felt condescended to because of the content rather than the tone. However, there was no strong negative reaction.

In general, there was a strong belief that the NHS would have people's interests at heart. The NHS branding reassured people that the information must be of importance to the NHS and would also be 'truthful'.

vii) 'Catch it, bin it, kill it'

The 'Catch it, bin it, kill it' line was very effective. Mums found it memorable and impactful. They also envisaged that it would be adopted by their children as a slogan. In their view, this would be helpful, because it provides an easy to remember mnemonic to reinforce the message to children. The only issue was that the line was used in a rather low key way in the print advertising: mums felt that it could be given more prominence.

5 Reactions to the radio scripts

Four 30 second radio scripts were assessed in the research:

- 'Ring o Roses'
- 'Baby SFX'
- 'SFX'
- 'Everywhere'

Each was presented as a rough studio recording with professional voice overs.

5.1 'Ring o Roses'



TV Script

Client	NHS	Length	30"
Product	FLU	Creative Team	Ben & Emer
Title	Ring 0 roses	Producer	
Version		Date	4th Sept 2008

GIRL'S VO: (*Very cute.*) Ring a ring of roses.

A pocket full of posies.

A-tishoo. A-tishoo.

A-tishoo. A-tishoo.

A-tishoo. A-tishoo.

A-tishoo. A-tishoo.

A-tishoo...

ANNCR:

School age children can suffer 7-10 colds a year.

And whenever they cough or sneeze, germs get everywhere.

Even if they cover their mouth with their hand.

But giving them tissues can help.

Teach them to catch their cough or sneeze in a tissue.

Then bin it as soon as possible and wash their hands to kill the germs.

Catch it. Bin it. Kill it. NHS

'Ring o Roses' Radio idea

This idea worked very well in terms of grabbing attention, engaging interest and communicating the main message about 'always use tissues' to stop the spread of germs.'

The opening nursery rhyme signalled particular relevance to mums / parents and children. Mums could identify with this very easily and they particularly liked this approach because they imagined that the nursery rhyme would engage the interest of their children as well (particularly young children, under 5). They expected this to prompt questions and discussion, enabling them to 'share' this ad with their child.

"Because it's a child you're going to listen to it more" (BC1, child 2 – 5, Elstree)

The '*Ring o Roses*' nursery rhyme engaged interest, because – although familiar – it was at first unclear what the ad would be about. When this became clear, the song was of course highly relevant to the issue – spreading germs by sneezing. There were some criticisms that this particular nursery rhyme was over-used, but its relevance to this particular subject over-rode this objection.

Mums particularly liked this route because it seemed to be supporting their role as mothers rather than telling them what to do personally. Significantly, it asks them to 'teach' their children, rather than suggesting that mothers themselves do not know or practice good hygiene. The tone was thought to be straight forward, informative, factual and helpful.

The main points taken from the voice over were:

- Stop the spread of germs by covering up with a tissue;
- Children get 7 – 10 colds a year

Neither of these messages was particularly compelling. Mums felt that they already knew that they should use tissues and so should their children. This offered them no strong reason for changing their behaviour. The message about children getting 7 – 10 colds was, as discussed before, interesting but not motivating.

The perceived emphasis of this ad was on using tissues. Most imagined that it was an ad for tissues until they heard the NHS at the end. The other messages about 'bin it' and 'wash hands' did come through, but at a lower level. The idea did not particularly dramatise or emphasise these aspects of the procedure.

Therefore, in summary:

- The structure, tone and approach worked well in terms of engaging mothers;
- It seemed supportive and helpful in terms of helping them to influence their children;
- The opening helped to grab attention and signal relevance to mums

But:

- The 'fact' was not that compelling: germs living for hours was much more effective;
- The emphasis was on using tissues, rather than the bin it / kill it idea;
- The 'germs live for hours' message would place more emphasis on the 'bin it, kill it' element of the communication.

5.2 'Baby SFX'



Radio Script

Client	NHS	Length	30"
Product	Flu	Creative Team	B+E
Title	Baby SFX	Producer	
Version		Date	11 th Sept 08

This spot is voiced by the famous actress and mother, Jane Horrocks.

JANE: *(She has a cold.)* **If you sneeze into your hands when you have a cold (ATCHOO!) you then spread your germs onto everything you touch. And germs can live on surfaces for several hours.**

If I hold my baby's hand, I leave germs there.

SFX: Baby gurgle.

If I wind up his mobile I leave germs here.

SFX: Sound of mechanism being wound and nursery rhyme.

And if I pick up his toys I leave germs here too.

SFX: Duck quack, tractor noise, ridiculous moo noise.

So always catch your sneeze or cough in a tissue, then bin it and wash your hands immediately to kill the germs.

Catch it. Bin it. Kill it. NHS

‘Baby SFX’

This idea polarised opinions, depending upon whether mothers felt that they were being specifically targeted. Mothers, particularly with very young children, found it easy to relate to this idea because of the ‘baby’ references, but even those with older children were engaged by it.

The main messages were more specific and more comprehensive than for ‘Ring o roses’. These were:

- that germs can be spread by touching things after coughing / sneezing;
- therefore use tissues, dispose of them and wash your hands.

The emphasis of this route was on the idea that germs can be passed on by touch. The fact that germs live on surfaces for hours was a very compelling piece of new information, which prompted people to think about their own behaviour and placed more emphasis on the ‘bin it, kill it’ aspects of the procedure.

“Because I’ve got a new baby it makes it more relevant to me and makes me think about washing my hands more” (C2D, Child under 2, Birmingham)

The main issue with this route was that, in targeting mothers with babies so directly, it was felt to be pointing the finger of blame. Effectively, it seemed to be saying that mothers of babies (or anyone who comes close to babies) should be more careful.

Some felt that this was valid, and gave the ad extra impact. It was taken to be a warning to mums and others to be more careful around babies. Mums of older children took a general message from this, without feeling ‘targeted’.

However, those with very young children felt that this was trying to make mothers feel guilty. This made them feel uncomfortable (particularly the anxious new mums).

“It’s basically pointing the finger at you and saying you can help” (BC1, New parent, Elstree)

“It’s trying to frighten you by using the baby” (C2DE, child 2-5, Liverpool)

“This is different because the other one (Ring o Roses) was aimed at parents in relation to how your children should behave and this is aimed at how you should behave towards your children” (BC1, child 2 – 5, Birmingham)

The other point was that there was little to grab attention and interest at the beginning of this ad. The baby element comes in later, which means they may miss the opening information, initially.

Tonally, this idea was thought to be a bit more condescending and 'lecturing'. This was largely because it was telling mums what to do about their own behaviour. The injunction to 'wash your hands immediately' also created this impression. The 'as soon as possible' line in 'Ring o Roses' was more realistic and acceptable, because, in practice, people are unlikely to be able to wash their hands immediately.

There was a view that this ad would be more compelling if it described how germs can be passed on by touch. (For example, if she touches something, her son picks it up and touches something else, then her baby picks it up and puts it in her mouth.) This approach would make the message more general to mothers / parents, not just those with babies.

- *"If she said I touch this coffee cup and my son touches it and then picks up his dummy and puts it into his mouth, I'd think oh god yes, that could happen. Because it's relating it to my life more" (C2DE, Child 2 – 5, Liverpool)*

Some did recognise Jane Horrocks, and liked her as an actress/performer. Her accent and tone helped to give the ad a more friendly, informal feel. However, Jane Horrocks did not have any particular relevance or authority as a mother.

5.3 'SFX' radio idea



TV Script

Client NHS
Product FLU
Title SFX
Version

Length 30"
Creative Team Ben & Emer
Producer
Date 4th Sept 2008

This spot is voiced by the famous actress and mother, Jane Horrocks.

JANE: *(She has a cold.)* If you sneeze into your hands when you have a cold (ATCHOO!) you then spread your germs onto everything you touch. And germs can live on hard surfaces for several hours.

If I touch this microphone I leave germs there.

SFX: Banging microphone.

If I touch this graphic equalizer I leave germs here.

SFX: Voice goes really squeaky.

If I touch this sound effects button I leave germs here too.

SFX: Huge explosion followed by a duck quack.

So always catch your sneeze or cough in a tissue, then bin it and wash your hands immediately to kill the germs.

Catch it. Bin it. Kill it. NHS

‘SFX’ radio idea

This route was not as successful as the other radio ideas in engaging the audience of mothers, largely because they did not understand or relate to the recording studio scenario. Most were nonplussed about the references to ‘graphic equalisers’ and missed the point, and the humour, of the idea.

Mothers presumed that this route was aimed at ‘professionals who work in offices’.

Nevertheless, when they listened to it again, they got the main idea:

- That germs remain on surfaces for hours;
- That germs can be passed on by touch.

This idea could be made clearer and more compelling if the objects touched related to the everyday lives of the audience. It would also be more compelling if the point was about how the germs are passed on to others

“They should pick something more common that gets germs when people use it, like a phone” (BC1, child 2 – 5, Birmingham)

As with ‘Baby SFX’, the emphasis of the communication was on washing hands, rather than using tissues. The opening also lacked something to grab attention and signal its relevance to mothers: the single sneeze was not dramatic enough to be noticed on the recording used in the research.

5.4 'Everywhere' radio ad

DDB TV Script

Client	NHS	Length	30"
Product	FLU	Creative Team	Ben & Emer
Title	Everywhere	Producer	
Version		Date	4th Sept 2008

In this spot we hear a range of different, and rather strange-sounding voices, all representing different germs.

SFX: Large sneeze.

VO: (In left speaker.) **Germ here.**

VO: (In right speaker.) **Germ here**

VO: (High pitched.) **Germ up here**

VO: (Bassy and low.) **Germ down here**

VO: (Big echo.) **Germ in here**

VO: (Far away.) **Germ way over here.**

ANNCR: **When you cough or sneeze, cold germs go everywhere, even if you cover your mouth or nose with your hand.**

The most effective way to prevent this is to use a tissue. Catch the germs in the tissue, then bin it and wash your hands immediately to stop them spreading.

Catch it. Bin it. Kill it. NHS

‘Everywhere’ radio ad

This route received mixed opinions. Some liked it because it had something different to catch their attention at the beginning (the repeated use of ‘Germ here’ in different accents). They felt that it was quite light hearted in tone, not lecturing.

The perceived target was ‘everyone’. This ad did not seem especially relevant to mothers, so they would not pay it any extra attention.

The main communication was ‘germs are everywhere’. In itself, this was not particularly motivating for mothers because this was stating an unsurprising fact in a dramatic way.

“We’re surrounded by germs and we’re all going to die. What can you do about it? Why bother?” (BC1, child 2 - 5, Birmingham)

This was a well known fact, which did not surprise or challenge them. This approach also reminded them of surface cleaner ads, such as Dettol or Domestos. Therefore, the perceived message was more about keeping surfaces clean of germs (rather than Catch it, bin it, kill it).

“It tells you what you already know”(C2DE, Child under 2, Birmingham)

This route did not offer a compelling reason for mothers – or anyone – to change their behaviour in terms of hand/respiratory hygiene. It was more likely to encourage them to use antiseptic cleaners on surfaces.

The link to using tissues was not very clear. Mothers did not believe that using tissues would prevent germs from being everywhere. There was also a strong view that the repeated ‘germ here’ introduction would become irritating on repeat listening on the radio.

6 Reactions to the print advertising ideas



In the context of women's magazines, the print campaign was thought very arresting, different and 'disgusting'.

6.1 The sneeze

The idea of capturing a sneeze in full flight was thought revolting, but intriguing. Mums were curious to discover what the picture was depicting, as it was not immediately obvious. They felt that this would draw them in to look at the ad and read some of the copy to work out what it was about.

The 'sideways' sneeze idea was more obvious and self explanatory. Most found this approach easier to understand because they could see the direction and distance covered by the sneeze in profile. However, this would not necessarily help in terms of impact and engagement because, if people realise too soon that they are looking at a sneeze, this will not encourage them to read further.

*"Who would want to read about a sneeze? So what, it's a sneeze"
(C2DE, child under 2, Birmingham)*



The 'full frontal' sneeze, on the other hand, looks more intriguing and unusual. The impression that the sneeze is being directed at the viewer gave added impact (and sense of disgust).

"Sideways is better because you can see it's a sneeze, but front ways you've got to question yourself what's happened to him? So making it not obvious is making you want to read to find out about it, rather than giving it all away in the picture" (BC1, child 2 – 5, Birmingham)

The difficulty was that the rough visuals used for the research stimulus were not entirely clear. If they had not seen other elements of the campaign, it was not

obvious that these depicted sneezes. Some interpreted the photographs as showing pain or discomfort. There was also some misunderstanding caused by the fact that it was not clear whether the 'spray' was going towards the viewer or towards the subject.

If the visual can be made more 'realistic' and directional (e.g. by providing some perspective with different sizes of droplets?) then the 'full frontal' approach is recommended.

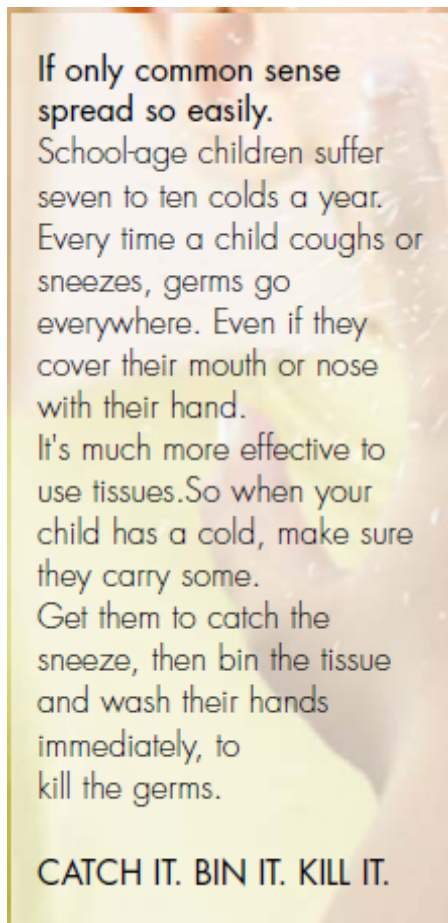
Overall, the 'sneeze lite' visuals (with more restrained depictions of the sneeze droplets) were preferred to the 'snowstorm' visuals (with more extreme representations of the sneeze droplets). The more extreme, dramatic spray was not thought to look like a sneeze at all. Instead, people presumed that the subjects were being sprayed with water (rather than that the spray was coming from them). Therefore, the dramatic spray versions did not aid communication.

On the other hand, the 'lite' version was a little too light in the case of the image of the boy: slightly more obvious spray would be helpful.

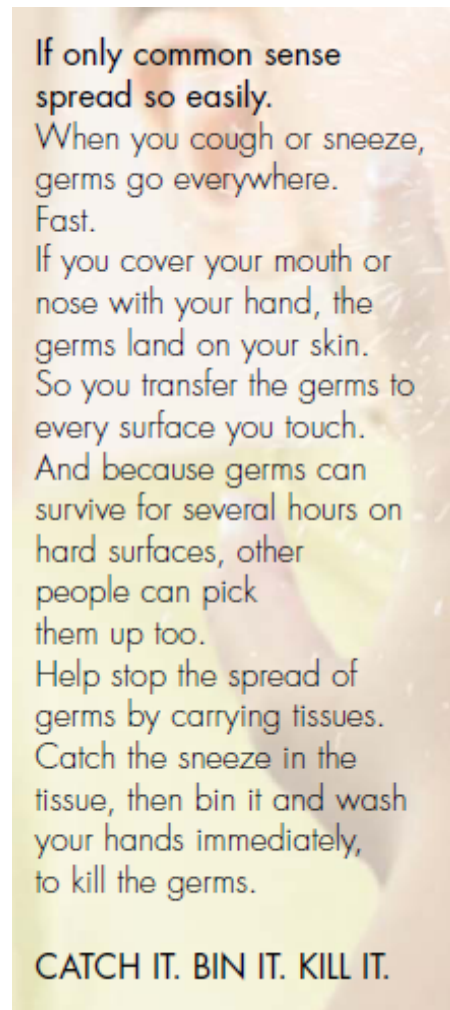


Sneeze 'lite'

6.2 The body copy



Short Copy



Long copy

The opening line of the body copy ('If only common sense spread so easily') did not engage interest or attention. Most people ignored it because it did not help to explain the visual or the subject.

When they read it, this line was felt to be rather patronising. It implies that that what is being recommended is simply common sense and therefore that the reader does not have common sense.

"It sounds like an insult. To me it seems oh you're stupid rather than here's some information for you" (BC1, child under 2, Elstree)

"It's like your mum telling you – use your common sense!" (C2DE, child under 2, Birmingham)

It is worth re-considering this 'headline' to find one that helps to explain the visual and links it more strongly to the messages in the copy.

When they read it, the body copy worked well in terms of communicating the main messages: use tissues, bin them, wash hands.

However, the general reaction was that the 'long copy' was too long. Although people might be arrested by the image, they found the copy too long winded to hold their interest. This is particularly the case for advertising in women's magazines, where the tendency is to flick through pages, looking at the visuals. The shorter copy version was preferred. Mothers thought it was punchier, simpler, and easier to assimilate.

The 'germs survive for several hours' fact was much more compelling than the 'School children catch 7 – 10 colds' fact. This should be the focus of the copy across the media.

'Wash your hands immediately' seemed unrealistic. 'As soon as possible' is more likely to encourage co-operation.

The reference to 'hard surfaces' was a little confusing. Some mothers wondered whether this meant that germs do not live for hours on soft surfaces / skin / clothing. To avoid this confusion, it might be better to just say 'surfaces'.

Some took the implication of the 'long' copy to mean that it is not advisable to cover your mouth with your hand because it is that which causes the spread of germs by touch.

"It's telling me not to use my hand because I'm spreading germs" (BC1, child 6 – 10, Liverpool)

6.3 The end line

The 'Catch it, Bin it, Kill it' line was thought to be useful and effective. As with the radio ads, mothers thought that it would be useful as a slogan to remind children of the message. However, in order to emphasise the connection with the rest of the campaign, it was felt that this strap line should be given more weight, possibly, with some visual device to link it to the desired procedure.

"It should be emphasised more to link it to the radio. It's a slogan to get the kids to remember" (C2DE, child 2 – 5, Liverpool)

6.4 The visuals

Mothers were drawn to the photo of the young boy much more than to the older man. Unsurprisingly, they could relate to the boy more easily because his age signalled relevance and interest to them as mothers. The combination of the picture of a child and the NHS logo also suggested that this might be something important for mothers to know. This image was also thought more appropriate to the women's magazine context than an old man.

It was also clearer what was wrong with the boy – a sneeze, not dying of some awful disease. Whilst intriguing and arresting, the visual of the boy was not so revolting as to put the viewer off looking at the ad. To mums, the boy was quite cute, and he was simply behaving in the way boys do.

The visual of the old man aroused strong reactions of disgust. Although it was intriguing and impactful, the reaction was often to turn the page over and avoid it, rather than want to read the copy.

"I wouldn't even want to know what they are going on about" (BC1, child 2 – 5, Birmingham)

Rather than having a sneeze, women imagined that he was suffering from an awful illness, or being attacked by bugs!

"He's about to drop dead with a heart attack" (BC1, child 6 – 10, Liverpool)

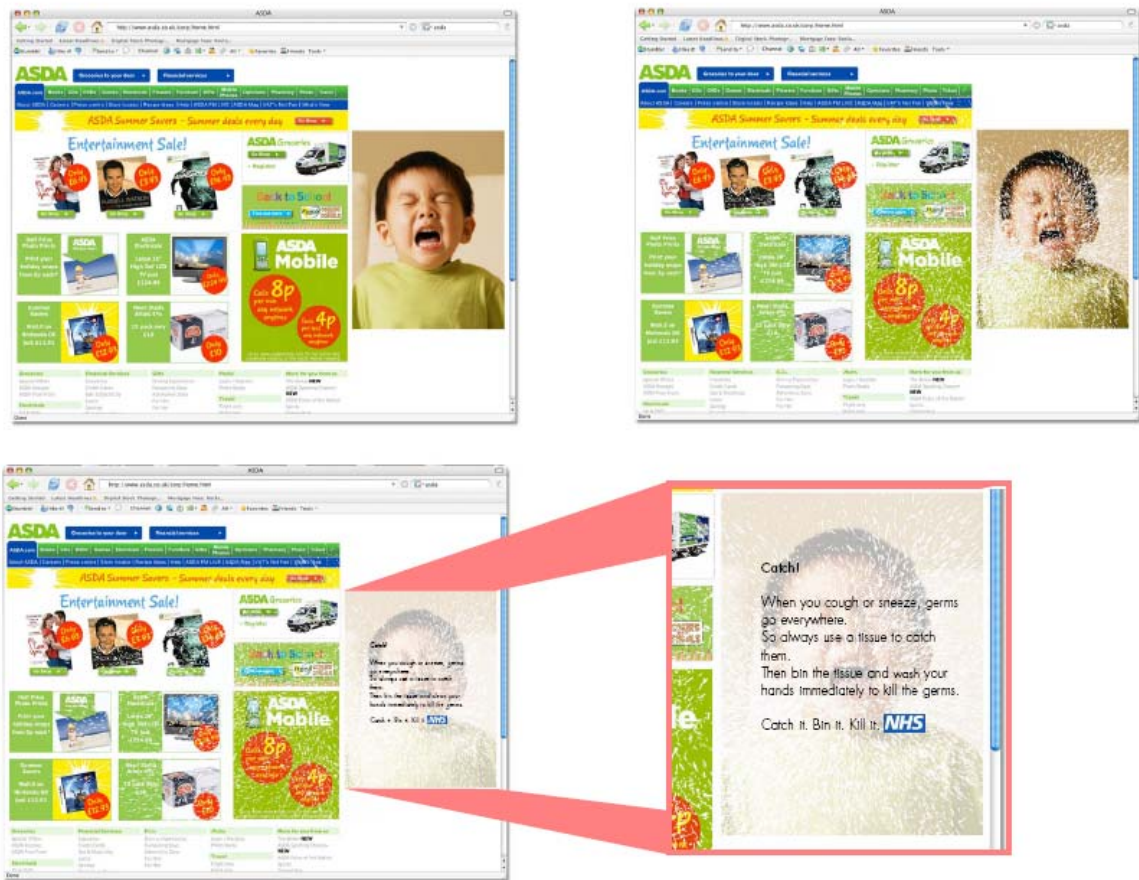
It was much harder for mums to relate to this image as having anything to do with them or their children. They saw it as aiming at adults in general, not a message particularly aimed at them.

"You'd just think he's nothing to do with you, just some old bloke" (C2DE, child 2 – 5, Liverpool)

"He's just a dirty old man, who cares?" (BC1, child 2 – 5, Birmingham)

"An older person might look, not me" (BC1, new mother, Elstree)

6.5 The on line idea



The concept of an animated sneeze was expected to work very well as an on line ad. With animation, mothers thought the idea will be much clearer, because of the sound and the use of movement. They could readily imagine that this would engage attention on the page.

Again, the copy needs to be sparing, as people will have low attention spans for reading the information. It also needs to focus on what people do not know: that germs live on surfaces for hours.

7 Conclusions and Recommendations

Mothers were rather complacent about teaching their children good respiratory and hand hygiene. There are a number of reasons for this...

- They don't believe colds are that serious;
- They believe that children need to build up their immune systems;
- They feel they have little control over what their children do at school;
- They feel that sneezes are spontaneous actions, so children are unlikely to use tissues in time.

Mums felt that the best they could hope for is that children will 'cover up' with their hands, and this was what they tried to educate their children to do. Although some did give their children tissues, they tended not to get used. Even if they did urge children to wash hands before meals, and after using the toilet, they did not think of this after coughing / sneezing.

The 'fact' that helped to jolt them out of this complacency was the message that **'germs survive on surfaces for hours'**. This information was important because it was new news. It challenged the belief that germs were airborne and short lived; it explained why covering up and using a tissue helped to stop the spread of germs; and it explained the need to bin the tissue and wash hands. If the advertising focuses on this fact, it is more likely to encourage mums to influence their children. There is also more chance of it affecting the mothers' behaviour as well.

"If germs are there for hours, I wouldn't have thought that. You think they're gone straight away when you sneeze" (C2DE, child under 2, Birmingham)

""I'd tell the kids germs live up to 2 hours, so you've got to use a tissue and wash your hands" (C2DE, child 2 – 5, Liverpool)

The **'Baby SFX'** radio idea does focus on the idea that germs survive on surfaces, and therefore has potential to change behaviour. However, there were a number of issues to address with this route...

- i) It targets mothers with babies rather too tightly, which seems to point the finger of blame. It may be better to broaden the relevance to children at large.
- ii) Potentially, it could do more to suggest that germs live for hours and are passed on from person to person.

iii) It could do with a more arresting opening, to get attention.

The '**Ring o Roses**' idea also works well because it, potentially, engages the mothers and the children in a dialogue. It also grabs attention at the beginning, by signalling relevance to mothers and children.

The issues with this route were:

i) It did not convey the whole RHH routine as strongly as 'SFX', as the emphasis is on using tissues to cover up (rather than binning them / washing hands).

ii) It lacked the 'reason why' provided by 'germs live for hours' but, if this element was added, it could work well for this audience.

The **print route** was found visually arresting and different. The '**boy**' **visual** worked well in terms of getting attention and signalling relevance to mothers, who were then inclined to look at the copy. The '**old man**' **visual** created strong disgust, which resulted in avoidance rather than involvement.

The 'sneeze lite' approach to the visual is recommended, although the research version of the 'boy' was a little too light. The more dramatic 'snowstorm' approach seems to impair rather than help communication.

The 'full frontal' visual had greater potential to grab attention and intrigue the viewer than the 'sideways sneeze' option. Though clearer, the sideways visual is less intriguing and involving.

The shorter copy is recommended, as attention wanders with the longer version.

As for the radio advertising, the press route will be strengthened by emphasising the 'germs live for hours' message.

The opening phrase of the copy ('If only common sense spread so easily') needs to be re-worked, to explain the visual and connect it more strongly to the rest of the copy.

8 Appendix 1 – Discussion Guide



BURNS & COMPANY
STRATEGIC RESEARCH CONSULTANCY

DEPARTMENT OF HEALTH

RHH ADVERTISING DEVELOPMENT RESEARCH

DISCUSSION GUIDE

11.09.08

1. Introduction:

- Explain the purpose of the research
- Reassure about confidentiality, anonymity, independence of the moderator etc.
- Obtain details of the participants' names, jobs, families

2. (Brief) warm up on their media diet:

- Where do they tend to hear or see advertising?
- Probe the amount of TV, radio, press and internet they use

3. Introduce the first RHH advertising idea (the subjects and media will be rotated across the groups).

Explain the rough nature of the stimulus material and the intended media.

Show, play, read out the first idea.

Ask respondents to write down their initial reactions on a brief questionnaire prior to discussing in the group

4. Then explore their initial reactions

- What did they think the advertising was about?
- Which elements were most memorable?
- What did they learn from it?
- What messages did they get?
- Who did they think it was aimed at?
- How interesting and engaging did they find it?

5. Show the idea again and probe reactions in more detail, covering:

- Comprehension and clarity

- Their impression of the key messages. What do they learn from it?
- What is it asking them to do, think or feel?
- (Check whether they have picked up all the main messages: always carry tissues, use them to cover mouth/nose, bin them, clean hands.)
- Who do they think it is aimed at?
- How relevant is it to them and their families?
- Explore their reactions to the support facts contained in the advertising. How relevant, credible and motivating do they find these?
- Explore their perceptions of the tone of voice. How is the advertising talking to them? Check for any sense of seeming too 'nanny state'. Is there a role for humour?
- Probe reactions to the visuals, where relevant. How well do they engage interest? What do they imply about the target audience or the message? How realistic or credible do they find the images of sneezing?
- Probe reactions to the words, including the end line
- Is there anything interesting, surprising or different about the advertising? Will it stand out? How memorable is it?
- How well does the advertising communicate the transfer of germs from surface to surface?

4. Show the other ideas in rotation and explore reactions as above (but without the written exercise)

5. Explore their reaction to the RHH good practice messages

- how does this fit with their own attitudes and behaviour?
 - how does this fit with the attitudes and behaviour of their families?
 - how do they feel about what it asks? Would they take any notice?
- What would they take notice of?
- Did they know about these points before? Anything surprising or new?
 - How credible is it? Does it have any authority?
 - how important is this topic to them?
 - What effect would this have on their own attitude and behaviour when coughing and sneezing?
 - How would this affect what they say and do with children?
 - Do they feel they have much influence over other adults? Does the advertising help?
 - What effect would the advertising have on what they say and do with other adults coming into the home?

6. Show all of the ideas together and discuss their relative strengths and weaknesses

- Compare and contrast the creative routes: what are their strengths and weaknesses?
- Explore the overall clarity, comprehension and communication of the campaign
- Which elements do they find most powerful, credible and relevant to them?
- Which elements are most likely to prompt them to think about their behaviour when coughing and sneezing?
- Which ideas, approaches or elements are most likely to prompt them to change their behaviour?
- Which elements are most likely to encourage them to influence their children towards good RHH behaviour?

- Would any of these ideas affect how they deal with other adults in the home?
- What areas for improvement are there in the various approaches?
What could make the routes more persuasive or credible?

7. Summarise, thank and close

(Questionnaire on next page)

RHH Advertising Questionnaire
JN 468

Name:.....Date.....Time:.....

Q.1 What was the main idea that the advertising was getting across?

Q.2 What other messages or points did you get from the ad?

Q.3. What did you think it was asking us to do?

Q.4 What, if anything, did you learn that was new, surprising or different?

Q.5 What, if anything, did you like about the idea?

Q.6 What, if anything, did you dislike about it?

Q.7 Who did you think it was aimed at?

9 Appendix 2 – Recruitment Questionnaire

THE FIELD DEPARTMENT 6 ALEXANDRA VILLAS BRIGHTON BN1 3RE
TEL 01273 725 181; FAX 01273 701 938

JOB NUMBER: 2008 18 TFD PROJECT: Cold War III (Alastair Burns)

THIS RESP. IS RECRUITED FOR GROUP NO: ON (DAY) AT (TIME)

RESP. NAME & HOME ADDRESS

TELEPHONE NO (HOME) (WORK) MOBILE

MALE 1 CLOSE FEMALE 2 CHECK QUOTA COUPLE 3 CLOSE

AGE OF RESP. WI..... (do not recruit extremes of age within groups)

MARITAL STATUS

SINGLE/DIVORCED/WIDOWED/SEPARATED 1
MARRIED/COHABITING 2

CHILDREN IN THE HOUSEHOLD:

Aged under 2 ys 1 Ask if this is the only child & please circle Yes/No
Aged 2-5 ys 2
Aged 6-10 ys 3

GROUP 1 are mums with an **only child** aged under 2

GROUP 2 are mums with a child under 2 and who have other children as well

GROUPS 3 and 4 are mums where at least one and/or pref most of their children are aged 2-5,
ie may have older or younger children

GROUPS 5 and 6 are mums where at least one and/or most of their children are aged 6-10,
ie may have older or younger children

OCCUPATION OF RESPONDENT

OCCUPATION OF HOH

SOCIO-ECONOMIC STATUS (Circle) A B C1 C2 D E

ETHNICITY (Tick) WHITEBLACK ASIAN MIXED RACE OTHER

PLEASE RECRUIT A GOOD SPREAD OF ETHNIC BACKGROUNDS ACROSS THE GROUPS

NOTES

I have carried out this interview according to instructions from TFD and within the guidelines of the MRS Code of Conduct. SIGN BELOW

QUESTIONNAIRE STARTS HERE

Good morning/afternoon/evening; my name is and I am conducting a market survey on behalf of TFD, an independent market research company:

Q.1)SHOW CARD/Read out. Give resp. time to think.

- a) I am looking for people in certain jobs: have you EVER worked in any of these jobs or industries? Please look very carefully.
b) Do any of your family or close friends work in any of them?

<u>SHOW CARD A</u>	<u>(a)</u>	Route	<u>(b)</u>	Route
Advertising	1		1	
Market Research	2		2	
Journalism/Public Relations	3		3	
TV/Radio/Films	4	CLOSE	4	CLOSE
Marketing/Tele-Sales etc.	5		5	
Government Department	6		6	
Health Service (Public or Private)	7		7	
Pharmacist/Drug Company	8		8	
British Gas	9		9	
Network Rail	10	ASK b)	10	ASK Q.2)
None of these	11		11	

Q.3) Have you ever taken part in a market research interview or group discussion before?

Yes	1	ASK Q.4)
No	2	ELIG.

Q.4)How many times have you taken part in an interview or group discussion?

Once	1	ASK Q.5)
Twice	2	ASK Q.5)
3+ Times	3	CLOSE

Q.5) When did you last take part in a market research interview or group discussion?

In the last 6 mths	1	CLOSE
Longer ago	2	ASK Q.6)

Q.6) What subject(s) did you cover? WI

IF RESP HAS TALKED ABOUT ANYTHING CONNECTED WITH ANY RELEVANT ASPECT OF THIS PARTICULAR SURVEY, CLOSE

We are asking mums about general health in and out of the home. The reason I am asking these questions is that I would like you to come and tell us what you think about these sorts of things at.....on.....(give details of group)

(Check all classification and quota details and invite resp. to discussion, giving full details of date, time, venue, duration and incentive. Hand over/post/email the invitation.)