



**Smoking Cessation
Rotherham**

Pre-Test

Qualitative Research - Top Line Analysis

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September 2008

Research Objective:

To pre-test communication materials for a reducing smoking/quit smoking direct marketing intervention aimed at Rotherham's smokers in terms of impact, relevance, and appeal.

Respondent Profile:

- ❑ All Males/Females aged 40+ years
- ❑ All currently smoking in excess of 10 cigarettes per day
- ❑ All living in the 20% most deprived areas in Rotherham
- ❑ All registered with one of nine GP's surgeries in these areas
- ❑ All having a BMI of 25+
- ❑ All being at risk of, or having had a chronic disease;
- ❑ Mix of smokers who have not engaged with the Smoking Cessation Service and smokers who have engaged with the Smoking Cessation Service but have dropped out

Methodology:

- ❑ 2 focus groups in Rotherham.
- ❑ 10 respondents recruited on-street for each group:
- ❑ 7 respondents took part in the female group.
- ❑ 9 respondents took part in the male group.

Synopsis:

- ❑ If a smoker is determined not to quit, it is highly unlikely that he/she will engage with the intervention. It is therefore recommended that the focus of the intervention be on smokers who do want to quit and/or have made unsuccessful attempts to do so in the past.
- ❑ In terms of communication materials, the NHS logo immediately dispels the perception of 'junk mail', by adding a serious tone to the envelope, indicating that health related information is within.
- ❑ A covering letter from the GP should further enhance the seriousness of the message.
- ❑ The bright pink/blue have impact and 'stand-out' value.
- ❑ The 'QuitFit for You' statement on male communications is heralded as best because it focuses on 'me' personally.
- ❑ Yet the females reject a 'me' focused statement.
- ❑ Further fitness, pampering and nutritional advice options should be added to enhance participants' level of choice.
- ❑ An age range should be referenced, to alleviate fears that the focus is on "young people".
- ❑ The options of 1-1 and group support should be communicated.

Key Insights:

Spontaneous Association – Smoking

The key associations with smoking focus on the following issues:

1. Enjoyment

The enjoyment of smoking is related to the “chilled out”, “relaxed” feeling associated with it.

In fact, so enjoyable do some participants find smoking that they have never considered giving it up, and indeed are adamant that they will never give up smoking.

“I’ll never give up. I find smoking more enjoyable than having a meal!”

It is observed that these participants, having a low involvement with the prospect of quitting smoking, are not surprisingly the least likely to engage in or contribute to the discussion, thus ultimately the intervention. It is therefore recommended that initially the intervention is targeted towards those who have either tried to quit smoking in the past, or are considering doing so now/in future as they are more receptive to persuasion and encouragement thus form the basis for the findings of this research.

2. Cost

The cost of cigarettes is a key negative issue, causing some heavy smokers (smoking 40-60 cigarettes per day) to buy roll-ups rather than pre-boxed branded cigarettes.

3. Smell

Males in particular note the smell of cigarettes as “disgusting”.

“It’s a filthy habit!”

“It stinks!”

4. Antisocial Behaviour

Smoking is increasingly recognised as being an antisocial behaviour. Primarily this is due to the ‘smoking ban’ in public places. Some smokers are ‘for the ban’ because they feel that it will help them to give up smoking, whereas others are ‘against the ban’ due to their perception that it relegates them to “leper” status.

Most acknowledge that family members, particularly children and grandchildren “nag” at them to stop smoking - “They’re always on my case”.

5. Health

All are aware that smoking is a “killer”, with the most common fear being contracting cancer.

A few display a fatalistic attitude, summed up in the statement, "It's too late for me to change now. The damage is already done". Those with this attitude are hardest to reach with inspirational campaigns, as they are most likely to reject the prospect of changing behaviour.

However most maintain hope, as evidenced in the statement, "I don't know if any lasting damage is done yet, so it's worth giving up to live longer"

Most are experiencing the day-to-day ill-health effects of smoking, e.g. breathlessness and asthma.

As identified in previous research, a key fear related to giving up smoking is weight gain, as illustrated in the comment, "If you stop you'll put 3 stone on in 3 months!"

6. Willpower

There is a clear conviction that one can successfully quit smoking only if one really wants to do it. Smokers maintain that one has to be in the 'right frame of mind' to quit. Those that have unsuccessfully tried to quit in the past but are still hoping to quit in future, acknowledge the benefits of smoking cessation support and are open to new ideas in relation to giving up smoking.

Creative Concept Evaluation

Envelope

Envelope - Positives:

- The bright colour (pink/blue) has impact, being perceived as attractive and "standing out from the usual white and brown envelopes that land on the mat"
- There is an immediate signal gained from the colour of the envelope and style of the font etc. that it is aimed at either the female or male of the house, thus there no doubt from participants that it will reach its intended target: "Very feminine!"; "It's manly"; "It would be for me!"
- The design of the envelope causes intrigue, thus all state that they would open it up: "It's a fancy envelope. I'd want to see what's inside"; "I'd certainly open it up to see what it's all about"

Envelope - Negatives:

- Being a bright and bold design, the envelope risks being perceived as a mail-shot for something other than a health intervention, as follows:
- Females: "Women's underwear; Anne Summers; Tampax?"
- Males: "A health club offer; A gym; Car insurance?"
- It is revealed that this confusion will be allayed by including the NHS logo on the envelope. This logo is immediately recognised by all as sending a health related message, which elevates the envelopes contents to being worthy of serious consideration: "It's not junk mail anymore!"; "It's telling me it's about women's health" (female); "I'm more likely to open it up. It's more important, official" (male)

Envelope - Positioning Statements:

Males: QuitFit for You/QuitFit for Rotherham

- ❑ Males prefer 'QuitFit for You' rather than 'QuitFit for Rotherham', as they argue that 'you' is far "more personal", whilst 'Rotherham' causes them to question that if they live outside of Rotherham centre are they still eligible to take part.

Females: Just for me

- ❑ Females reject the focus on 'me', as it indicates a 1-1 service rather than a group environment.
- ❑ They reveal that a key positive of the service is the opportunity for social interaction, therefore they would prefer to have the statement include the promise of mixing with others and they suggest, "Just for the ladies"; "Just for us"; "Just for women".

Envelope - Recommendations:

- ❑ Include the NHS logo on the envelope.
- ❑ Use the 'QuitFit for You' statement on the male envelope.
- ❑ Change the female statement to one that is less focused on "me".

Invitation

Invitation - Positives:

Males:

- ❑ The prospect of support in getting fit is well received, as most fear weight gain and boredom if they were to quit smoking.
- ❑ The line 'Feel good, smell good, look good' resonates with the males, as an inspirational goal.
- ❑ Gym membership is welcomed, providing it is for a gym that is within close proximity to their home, to avoid travelling costs.
- ❑ The notion of a personal trainer is very positively received, with most recognising the benefits of an individual fitness programme.

Females:

- ❑ The females fully recognise the benefit of combating weight gain after quitting smoking, and being a key concern of theirs, they appreciate the offer of gentle exercise, dancing and aqua aerobics.
- ❑ The line 'Spend a little time on yourself' is also positively received as they regard the prospect of doing so at present as "a miracle" and would welcome the opportunity to relax with friends more.

Invitation - Negatives:

Males:

- The males feel that 9 weeks is not long enough to have free gym membership as they argue that economic constraints would mean they were likely to discontinue after this period if they had to start paying themselves: "9 weeks then I'd be cut off!". They request a 6 months membership so that they are well into the habit by the time they have to pay for themselves.
- They note that there is an emphasis on 'gym training' which they associate heavily with "younger men" therefore they request some alternatives to be included such as "swimming, cycling, walking, sauna, sun-bed, massage" and they also request nutritional advice including "how to cook on a budget".

Females:

- The females in this research were not highly motivated by pampering sessions as pampering is not something they have grown up with, nor do at present, thus they perceive the offering to be aimed at "the younger generation".
- They prefer "a meal out; the cinema; line dancing; pools; walking; tea/coffee mornings" – "Have a movie night, some fun!"
- In line with the males, they would also like nutritional advice.

Invitation - Recommendations:

- Add further fitness, pampering and nutritional advice options to each, and stress that choices are available, with each individual having the opportunity to take part only in those activities that interest them.
- Provide an age range to put their minds at ease that it is not a 'young persons' intervention.
- Communicate that one will have the opportunity to meet other people, males and females, and that one can join with a friend or one's partner to give added support.
- Include a GP Letter: When asked if a letter from the GP should be included, all participants give a resounding "yes!", as they argue this will add "seriousness". As one male comments, "You don't mess with doctors!"

Access To Appointment & Attendance

- All welcome an appointment at either the Stop Smoking Shop, or at their GP's surgery.
- With regard to leisure facilities, ones in their locality are preferred, but there is also evidence that they will consider attending those in the city centre.
- In terms of attendance days, Sundays are the least likely to appeal, but all other days are welcomed.
- For mothers, appointments within the school day are best, i.e. between 9m and 3pm.
- For workers, evenings (6pm +) are best, as are weekends.

- No matter what one's gender, there is no preference for a male or female support worker, but they should "know what they are talking about", this is best displayed by being "firm but fair and friendly".
- They would like to make appointments on an 'as you go' basis, rather than in a block booking as they do not wish to be tied to a set time each week.

Continued Support

- They would like to be able to drop into the Stop Smoking Shop whenever they feel the need.
- They would also like access to a Free phone hotline, "24/7".
- They recognise that quitting smoking is a difficult journey to take alone, and they believe the main area of support needed on a continuous basis is "how to break, and keep breaking the habit".