From Ron Borland PhD

I am an Australian public health researcher who has been involved in tobacco control research since 1987. I have published extensively on the impact of health warnings on tobacco packages and have been involved in advising the Australian government on the last 2 waves of health warnings it has enacted.

This submission is based primarily on research I have done, most collaborating with others. It is also grounded in my general knowledge of the field. I have not attempted any systematic review of the other evidence, however, I do not believe that the weight of evidence would materially change the conclusions I have drawn.

While virtually all smokers in developed countries know that smoking is harmful, most smokers do not realize how harmful smoking is, tending to equate its harmfulness with other harms that are objectively far less. This is at least in part because smoking is not immediately experienced as harmful by smokers. This means there is a need to help bring the harms to life so that smokers have a reasonably accurate assessment of the risks they are taking. This involves both increasing the scope of their knowledge and making it real.

Governments, including the US government have banned a lot of products that are arguably far less harmful than cigarettes. Because most people use a range of indirect ads well as direct strategies to generate attitudes and opinions (eg, see Petty and Cacioppo, 1986) the largely unconstrained availability of tobacco, is a barrier to convincing people that smoking is as harmful as it is (e.g., common endorsement of the statement “if smoking was as dangerous as you claim, the government would have banned it”). In my view, this places an additional obligation on government to ensure that the symbolism of not banning smoking is not misinterpreted by ensuring that comprehensive warning material is presented to smokers and potential smokers.

Effectively warning on packages or at point of sale is a central part of any comprehensive communication strategy. Cigarette (or indeed other tobacco product packaging) is not large enough to fit all the information on the health harms of smoking that consumers might reasonably expect to be informed about. Thus the strategy has been adopted of having sets of rotating warnings so as to allow a reasonable range of the harms, including the main ones, to be warned about in ways that are readily comprehensible to the smoker.

Having broad coverage of the main health effects, including beneficial effects of cessation should be a prerequisite. Within this context, it is important to pick the specific messages that convey the harms most effectively.

Our research has shown that warnings that stimulate smokers to think about the harms of smoking and/or the desirability of quitting or which stimulate smokers to forgo the occasional cigarette are the ones most likely to facilitate quitting. Borland et al.
(2009a), in a large population-based study, found that smokers who reported more of these reactions were more likely to make quit smoking attempts in the subsequent year, and Borland et al. (2009b) found that larger and more novel health warnings increased the rates of these reactions over smaller and less novel warnings. This research included smokers from the USA and as we found no by-country interactions of import, can be strongly generalised not only to US smokers but smokers from other countries (see Fathelrahman et al, in press, for confirmation of generalisation to Malaysia and Thailand).

Given that cigarettes when used as intended kill around half of all long term users, one important aim of health warnings should be to encourage cessation of use. Because cigarettes are addictive, many smokers have impaired volitional control and thus may not be able to act on the advice. However, to the extent possible warnings should engage them in considering seeking assistance to quit if they are unable to do so unassisted. Also warnings should maximise the likelihood of potential new smokers deciding not to try cigarettes, or if they have tried, to avoid becoming long term users. Thus having some warning about the risks of dependence is probably important as a prevention measure.

There is now a growing body of experimental studies showing that on the whole pictures are better at generating desired reactions as compared with text only. However, this does not mean that all pictorial warnings will be better than all text-only ones. What is important is to choose the medium and message that will most effectively convey the desired message and to ensure that message is most likely to engage the receiver in the desired manner. We need to consider all of the legitimate (from a regulatory viewpoint) goals of warnings in creating a system of warnings. In my view key functions are: ensuring the public are well informed about the main health harms, that the risks of smoking are far greater than for virtually all other risky behaviours that are commonly indulged in, that smoking is highly addictive, that they understand that quitting is by far the best way to avoid the risks, and that quitting smoking at any time leads to health improvement and/or reduction in risks of premature death and disease. Achieving all of this means that the warning system will need to be multifaceted.

If one of the aims of the warning system is to warn about newly discovered harms or harms for which a consensus on their contribution has emerged, then it is important for the system to allow the introduction of new warnings in as short a time line as is practical.

In this submission I would like to specifically comment on two strategies pioneered in Australia to increase the potential effectiveness of warnings: use of the warnings in other communications (including at point of sale), and use of Quitline numbers and/or addresses of cessation help websites on the packs as part of the warnings. These are areas where the evidence base is not necessarily strong, but the conceptual grounds for the actions are compelling.

Use of other media.

This can take one of two forms, taking images from previous campaigns to use as warning images or using warnings that commence on the packs and using them in other contexts. Our experience in Australia is that having the warning images used in video/film based communications has considerable value. It builds a story around the
still image and thus uses it as a memory prompt for the more complete story. It also means that images that may be ambiguous in isolation can come to have strong unambiguous meaning among those who have seen the elaborated version.

Victoria pioneered the use of TV advertisements to accentuate the impact of its new (in 1987) text-only warnings using images of the packs to bring the text-only message to life. No definitive evaluation was conducted, but the advertisements were well received and in the case of one warning it may have resulted in a small increase in the relative salience of that warning (Borland et al 1990).

The other approach is to use images from advertisements that have also been shown as health warning images. This strategy was adopted for several of the warnings eventually chosen to be part of Australia’s current warning system. That stills from ads that had previously been used as part of a national tobacco control campaign were chosen as images for the health warnings based on consumer research on impact as in one case at least it was not immediately obvious what he still referred to without having seen it in context. This suggests that the previous showing of the picture in context has enhanced the communicational worth of those images. Consumer reactions back this up as the link was sometimes brought up and commented on positively when images were being discussed.

It is difficult to provide definitive evidence of benefits of these strategies, as no well designed evaluations have been produced (that I am aware of), but the impressionistic evidence is that they are advantageous and help create a sense of a coherent set of messages.

Links to cessation help

It is impractical to provide much cessation help on packs, although Canada, which typically has slide packs has pioneered use of the slide for such help or use of inserts. In Australia the 1995 warning system introduced a toll-free number to call. This number led to a recorded message which was rated by most who heard it as boring and longwinded (informal feedback and personal experience of trying it). I believe from informal comments from government officials that calls to this number rapidly dropped. In the year or so before the introduction of Australia’s current graphic warnings, Health Department officials agreed to switch through callers to this number to the Quitline in the state from which the call emanated. Following this there was a steady increase in calls, albeit from a low base (Personal communication from Quit Victoria).

The current health warnings include both the Quitline number and the internet address of the Commonwealth’s cessation support site www.quitnow.info.au. The Quitline number rings through to the state-based Quitline from which the call was made. Call to the Quitline from this source have increased (personal communication from Quit Victoria).

Use of the website is as far as I know unevaluated, however, the website links to the QuitCoach (a personalised automated self help resource) and links through from the site to the QuitCoach have increased markedly, although the data has not been systematically analysed to quantify the increase with any precision.
Communication theory also suggests that it is important to have a course of action to mitigate harms available to people when explicitly focussing on the harms they are currently doing to themselves.

Overall recommendations

Within the framework of ensuring that the warnings chosen cover the range of needed purposes, I recommend that the warnings take up as much of the pack as possible, and that the content be chosen to most vividly convey the desired messages. That if satisfactory arrangements can be made with quitlines, the number to access a quitline be included as part of the warning requirements and/or access to a website providing information about cessation and access to evidence-based internet deliverable supports.

Further choice of images for graphic warnings could usefully include images from advertisements that have already been shown and/or the showing of advertisements that bring to life the warnings used should be encouraged.

Finally, no specific information should be allowed on packs that relate to FTC yield figures. These figures are misinterpreted by smokers as estimates of intake and we know they are almost unrelated to intake.

References


