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# Show Me Health: Clearing the Air About Tobacco Evaluation Findings

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# **Show Me Health: Clearing the Air About Tobacco** *Evaluation Findings*

August 2007

Executive Summary

#### Background • • • • •

In 2004, the Missouri Foundation for Health (MFH) committed \$40 million to a nine year Tobacco Prevention and Cessation Initiative. The first regional grant for the Initiative was awarded to the American Lung Association of Missouri (ALA) in January 2005. In addition to implementing school and worksite-based programs, ALA received funding for an education campaign to inform the public about the relevance of tobacco use and its impact on Missouri residents. The primary goal of Show Me Health: Clearing the Air About Tobacco (SMH) was to increase knowledge of, improve attitudes towards, and build support to increase Missouri's tobacco tax. SMH held its first outreach activity in September 2005. Two months later, a petition drive to put a tobacco tax increase on the ballot was announced. On November 6, 2006, Missouri voters rejected the tax amendment: 51.4% against, 48.6% in support. After the election, SMH's education efforts came to an end.

As the initiative evaluator, the Center for Tobacco Policy Research (CTPR) at Saint Louis University School of Public Health assessed the effectiveness of SMH. CTPR conducted a comprehensive evaluation involving information collected from interviews and focus groups with stakeholders, phone surveys of Missouri adults, and newspaper coverage of tobacco-related issues. This report presents the findings from the SMH evaluation and recommendations for future education campaign efforts.

# Findings • • • • •

### Adequacy of Resources

The amount of funding ALA received to implement SMH was sufficient. Having full-time staff whose primary role was SMH and a base of existing tobacco control partners was also beneficial for SMH. However, challenges such as a short timeframe and inadequate planning negatively affected the entire SMH campaign.

# Structure and Program Components

The regional structure, with local points of contact for community members, was a strength of SMH. To help

facilitate the efforts of SMH staff and volunteers, four major changes were made to the campaign (*e.g.*, name change, ended specific outreach strategies). Overall, the results of these changes were positive and considered necessary to help staff and volunteers reach out to the public.

#### Collaboration

SMH's network of partners was limited in its expansion beyond traditional tobacco control organizations (*e.g.*, coalitions, health departments). This resulted in a missed opportunity to utilize in-kind resources that a more diverse network could offer.

#### Stakeholder Communication

Day-to-day communication between stakeholders worked well. However, expectations for SMH and its relationship to the tobacco tax political campaign were not clearly defined between MFH, ALA, and SMH. This led to a number of challenges for stakeholders, including confusion about the two campaigns.

### Development and Implementation

Limited planning prior to ALA's grant proposal led to the majority of the first year being spent on hiring and planning, leaving approximately 14 months for implementation of the education campaign. No formative work was conducted to determine the most effective messages and methods of communication. The reading levels of the messages (i.e., 10-12 grade) were too high for the general public. They also contained a large number of statistics and often had to be simplified for particular audiences. Very little consideration was given to existing research when messages and communication methods were developed. Consequently, SMH's implementation experienced a lot of trial and error. While in the end stakeholders had figured out what worked well, little time was left for building momentum and reaching the grassroots level.

### **Environmental Influences**

Several events occurring in the state during the implementation of SMH (*e.g.*, the tobacco tax political campaign) negatively affected involvement of SMH's partners and overall morale. SMH was slow to react and

did not have contingency plans in place. This resulted in delays in SMH's implementation.

#### Message Delivery

SMH staff and volunteers delivered messages through presentations, distribution of materials, and earned media coverage (e.g., radio interviews). Presentations were considered the most effective way to reach smaller audiences. Although SMH earned a number of media hits, more mass media coverage was needed.

#### Assessment of Primary Messages

None of SMH's seven primary messages clearly stood out as effective. There was no distinct evidence that any of the messages resonated with the public, with one exception. SMH's message stating that Missouri spends \$0 of MSA monies for tobacco control was successfully used by the opposition to the tobacco tax. Testing messages prior to use and focusing on only one or two concise messages would have been more effective for SMH.

#### Reach to Missouri Adults

SMH staff organized a number of volunteers across the state with the purpose of communicating their messages to Missouri adults. They achieved many contacts with community members and earned coverage in the media. However, the level of reach to the public did not continue to steadily increase over time but rather showed an inconsistent level of activity. In newspaper coverage across the state, there was relatively more emphasis on economic information than health information regarding tobacco control. Stakeholders were disappointed that more health oriented information was not disseminated and felt this should have been a stronger focus for SMH.

# Awareness and Effect on Public Attitudes

To achieve the primary goal of SMH, staff and volunteers needed to ensure that the messages reached the public and then improved attitudes toward policy change. Recall by survey participants and newspaper coverage indicated moderate awareness of SMH's seven primary messages (11-22% of Missouri adults recalled messages and 30% of articles contained at least one SMH message). Survey results indicated the messages increased voting likelihood for a tobacco tax increase for a slight majority of Missouri adults (52-58%). However, the messages that increased voting likelihood the most were not the messages SMH reported using frequently.

# Conclusions **• • • • • • • • • • • •**

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SMH organized a number of partners and volunteers \_\_\_\_\_ together in a collaborative effort to educate the

public about the effects of tobacco use in Missouri. However, evidence indicates that SMH was not able to saturate communities across the state at the levels needed to persuade voters to support increasing a tobacco tax.

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Based on these evaluation findings, recommendations for future public education programs were identified:

#### Planning

- Identify clear, realistic, and measurable outcomes and objectives
- Develop realistic timelines for planning and implementation
- 3) Develop regional-specific plans based on regional needs and populations
- 4) Require detailed implementation plans from grantees

#### Development and Implementation

- 5) Include staff or consultants with specific training in health communication
- 6) Use existing evidence to guide campaign development
- 7) Identify one or two primary messages based on pre-testing and existing evidence
- 8) Include an extensive mass media component
- 9) Coordinate efforts with similar activities in the state to maximize the effect
- 10) Plan for potential external influences which may affect an educational campaign

#### **Partners**

- 11) Ensure there is a diverse set of committed partners
- **12)** Clearly define and communicate roles and responsibilities for all stakeholders

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