

**QUIT TOBACCO—MAKE EVERYONE PROUD
DEPARTMENT OF DEFENSE TOBACCO
CESSATION & EDUCATION CAMPAIGN**

PILOT IMPLEMENTATION EVALUATION

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INTRODUCTION

In response to an increase in tobacco usage rates in the military, the Department of Defense (DoD) contracted with Macro International to develop and implement a media campaign designed to reduce tobacco use among young members of the military (between the age of 18 and 24 and with a rank of E1to E4) who are seriously planning to stop using tobacco in the next six months (the "target audience").¹

In spring 2006, Macro conducted a series of focus groups across the four branches of the military service to test a number of potential message platforms for the campaign. The findings from those focus groups were used to develop draft print, radio, and Web site designs. A second phase of focus groups was then conducted in the summer of 2006 to test these draft campaign materials. In addition, Macro conducted individual interviews with the immediate supervisors (E5-E6) of the target audience to determine their level of support for such a campaign and to hear their perceptions about barriers and facilitators to quitting tobacco use among E1s-E4s. The findings from the second phase were used to develop the Quit Tobacco—Make Everyone Proud campaign consisting of print and radio advertising, a campaign-related Web site, and a variety of print collateral materials. See Appendix A for campaign materials examples.

This report provides findings on the pilot campaign. The broader context of the baseline components of an overall campaign evaluation is also presented to the extent that data is available.

METHODOLOGY

Overview

Quit Tobacco—Make Everyone Proud is a tobacco cessation marketing and education campaign targeted to 18-24 year old active duty soldiers, sailors, airmen, and Marines. The campaign uses media channels to reach the target audience and drive them to a Web-based cessation tool, www.ucanquit2.org. The campaign's aim is to motivate and encourage tobacco users who are thinking about or preparing to quit to take the next step, get support, and make progress toward the goal of quitting for good.

Prior to launching Quit Tobacco—Make Everyone Proud nationally, a pilot campaign (using radio, newspapers, posters, table tents, postcards, tip cards, and a new campaign Web site) was conducted for a 4- week period beginning February 20, 2007, at four military installations representing each service (Ft. Lewis, McChord Air Force Base, Marine Corps Base Camp Pendleton, Naval Station San Diego). A more detailed description of the campaign is presented below. A five-pronged approach to the evaluation of the pilot was undertaken that would rely on process data, data from intercept surveys conducted at each installation prior to the launch and after completion of the launch period, a survey of individuals accessing the Web site, an analysis of Web site traffic, and interviews with staff in the Health Promotions Department who also served as our points of contact for installation-level support of the pilot campaign.

The campaign targets individuals who are seriously planning on quitting tobacco use within the next 6 months. This group was identified based on work by Prochaska and DiClemente defining distinct stages of

¹ We will use the term segment audience to refer to E1-E4s who are ages 18-24.

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cessation indicating these were the most likely individuals to respond to the campaign². The stages of change are defined below:

- Precontemplation – stage in which people are not intending to take action in the foreseeable future (defined as next six months).
- Contemplation – stage in which people are intending to change in the next six months.
- Preparation – stage in which people are intending to take action in the immediate future (in the next month). These individuals have a plan of action, such as joining a health education class, consulting a counselor, talking to their physician, buying a self help book, etc.
- Action – stage in which people have made specific overt modifications to their lifestyle within the past six months.
- Maintenance – state in which people are working to prevent relapse but they do not apply change processes as frequently as do people in action. Maintenance can last from 6 months to 5 years. It is not until 5 years of continuous abstinence that the risk for a smoking relapse dropped to 7%.

Based upon this framework, individuals in the precontemplation phase are not part of the target audience. Long-term success for the campaign is defined as either 1) moving individuals currently in the contemplation, preparation, or action stage to a higher stage; or 2) keeping individuals from slipping backward from their current stage, and 3) keeping individuals in the maintenance stage.

The long-term goal of the campaign is to have the E1-E4s quit using tobacco (moving people from contemplation of and preparation for tobacco cessation to higher levels of actions). The short-term goal of this evaluation is to measure the awareness of the campaign. The evaluation is designed to measure both of these outcomes.

Pilot Campaign

As mentioned earlier, four installations were used for the pilot campaign and at each of these Macro conducted intercept interviews. Two of the installations are located in the Seattle, Washington, area (Ft. Lewis and McChord Air Force Base) and the other two are located in the San Diego, California, area (Marine Corps Base Camp Pendleton and Naval Station San Diego). These installations were identified to have a large number of our target audience. By identifying installations sharing the same media market Macro was able to optimize the reach of paid radio spots. Macro used a media buyer who arranged for radio spots to be played on stations identified as having high listenership among the target audience. In addition, full-color ads were run in the weekly military installation newspapers (see Appendix A). Moreover, the health promotions point of contact at each installation ordered materials (posters, table tents, postcards, and tip cards). The points of contact were asked to determine the volume of material that would be appropriate for their setting. These points of contact were asked to disseminate the print materials (see Appendix A) during the pilot campaign.

² Prochaska JO and Velicer WF. "The Transtheoretical Model of Health Behavior Change." American Journal of Health Promotion 12(1), Sept/Oct 1997, Pages 38-48. Earlier models included relapse, but we are using their latest model.

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Table 1: Pilot Campaign by Installation, TRICARE Tobacco Cessation Pilot Study

Media Channel	San Diego	Camp Pendleton	McChord	Fort Lewis	Total Spots
Radio (Format & Total Number of Spots)	Rock Urban Modern Rock CHR Country Modern Rock	100 132 129 92 76 15	Urban Rock Modern Rock CHR	120 116 104 84	1,028
Installation Newspapers*	1 ad (5-column) run for 4 weeks Navy Compass	1 ad (6-column)run for 4 weeks Scout	1 ad (7-column) run for 4 weeks Northwest Airlifter	1 ad (6-column)run for 4 weeks Northwest Guardian	
Table Tent	100	3,000	50	300	3,450
Poster (Army "Looks Up")				50	50
Poster (Army "Girlfriend")				50	50
Poster (Air Force "Looks Up")			25		25
Poster (Air Force "Reasons")			25		25
Poster (Marine Corps "Looks Up")		15			15
Poster (Marine Corps "Dad")		15			15
Poster (Navy "Looks Up")	50				50
Poster (Navy "Girlfriend")	50				50
Postcard (Army)				2,055	2,055
Postcard (Air Force)			1,100		1,100
Postcard (Marine Corps)		200			200
Postcard (Navy)	5,000				5,000
Tip Card (E1-E4)	5,000	200	1,100	2,500	8,800
Tip Card (Supervisor)	5,000	200	200		5,400

*Four-color ads were run on 2/23/07, 3/2/2007, 3/9/2007 and 3/16/2007.

Research Questions

For the national campaign and the pilot study the research questions are:

1. Is there an increase in the volume of the individuals who are contemplating stopping tobacco use or preparing to stop using tobacco moving at least one step to not using tobacco?
2. Are people aware of tobacco cessation messages being presented:
 - a. Have they seen a newspaper ad?
 - b. Have they seen a poster?
 - c. Have they heard a radio ad?

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- d. Have they seen any of the other printed material?
- 3. Are people accessing the Web site?
 - a. How did they learn of the Web site?
 - b. What actions are they taking based upon visiting the site?

The evaluation of the pilot campaign had one additional research question: "Are there lessons to be learned from the pilot to inform the roll-out of the national campaign".

Data Collection Methods

In the national campaign the research questions will be addressed by using an annual Defense Manpower Data Center (DMDC) Survey and ongoing Web-metrics. The pilot relies upon five sources of data for the evaluation: the DoD Survey of Health Related Behaviors among Active Duty Military Personnel (HRB), process data, an intercept survey, interviews, and Web metrics coupled with a Web-based survey. Each of these is briefly described below as well as the purpose of collecting data using that method.

Military Surveys

The military has two ongoing health/behavior surveys. The DoD Survey of Health Related Behaviors among Active Duty Military Personnel, is conducted every three years and was last conducted in 2005. This includes all military personnel regardless of where they are stationed. The long intervals between fieldings of this survey make it impractical to use for the campaign evaluation. However, the survey is important to mark long-term changes in the attitudes and behaviors of military personnel to tobacco use.

The DMDC Status of Forces Survey, is conducted three times per year and only includes military personnel stationed in the United States. DoD uses the DMDC Survey to gather diverse information from the troops. We obtained permission to have a limited number of questions included on the December 2006 survey (Appendix B). We also have obtained agreement to have these questions repeated in August of each year. The data from December 2006 will become the baseline data for ongoing evaluation of the national campaign.

The data for the December 2006 DMDC Survey is not yet available. Once received we will make further comparisons now and for the future. The data for the 2005 HRB Survey is currently available to us and was used to determine how representative personnel at the four installations are of all troops worldwide. Results are presented below.

Process Data

Process data for the pilot campaign includes what types of ads were purchased, when they appeared, the frequency of appearance, and the estimated exposure of the segment audience, etc.

For the evaluation of the national campaign process we will continue to track data on media buys as well as gross distribution of promotional items.

Pre-Campaign and Post Campaign Intercept Surveys

To measure change in attitudes, pre-campaign and post-campaign intercept surveys were conducted at the installations participating in the pilot campaign. Because these are intercept surveys, the same personnel were not necessarily interviewed in the pre- and post surveys.

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Each of the installations chosen for the pilot represents one of the branches of the service (Ft. Lewis – Army, McChord – Air Force, San Diego – Navy, and Camp Pendleton – Marines). Based upon preliminary estimates of the size of the target audience at each installation we established a goal of completing 200 interviews per service to generate estimates with +/- 7% accuracy at the 95% confidence level. Changing the level of accuracy to +/- 5% would result in nearly doubling the number of interviews, which was not feasible given resources available and the time constraints of access to the installations.

Macro contracted with independent market research firms to conduct these on-installation intercept surveys. Our points of contact helped secure installation-level approvals, escorted our interviewers on the installation, and in some cases identified the locations available to the interviewers to conduct their intercept interviews. Survey instruments were provided to the recruiters; examples of the instruments are contained in Appendix C.

Baseline data on tobacco use, level of addiction, and which stage of change the person is in was gathered from personnel at these installations before the pilot campaign. A follow-up survey was conducted at these installations immediately after the campaign to reevaluate these factors and determine if the respondents saw/heard the campaign and what actions they took because of the campaign. When the data was collected for both pre- and post-campaign is shown in Table 2.

Table 2: Data Collection Periods, Pre- and Post-Pilot Campaign by Installation

Installation	Baseline Data Collected	Post-Pilot Data Collected
Ft. Lewis	October 2006	March 2007
McChord Air Force Base	December 2006	April 2007
Naval Station San Diego	September 2006	March 2007
Marine Corps Base Camp Pendleton	January 2007	March 2007

Point-of-Contact Interviews

To supplement our evaluation of the pilot campaign Macro conducted interviews with our contacts in the Health Promotions Department at each installation. These individuals were responsible for ordering and placing posters and other campaign materials around the installation. The purpose of these short interviews was to ascertain whether this was easy to accomplish, what barriers they encountered, how they overcame them, and what barriers they could not overcome. More specifically, these interviews helped us to understand how the campaign materials (process data) worked. These interviews were completed via telephone and occurred shortly after the pilot campaign was completed. The guide used is found in the Appendix D.

Web-based Data

One of the short-term goals is to drive traffic to the campaign Web site. The success of this effort was measured in two ways: monitoring of Web metrics and results from a pop-up Web-survey. The latter was offered to every other visitor of the Web site who remained on the Web site for 2 minutes or more. A copy of the survey instrument is also presented in Appendix E.

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RESULTS

Results by data collection method are presented below. These results are for the evaluation of the pilot campaign only, though some may be used as baseline data for the evaluation of the national campaign.

2005 HRB Survey

The HRB Survey data was used to determine representativeness of the installations to the military in general. That survey targets all ages, pay grades, and all installations worldwide. The broad comparison between the HRB Survey and the Pre-Campaign Intercept Survey is presented in Table 3. Despite the populations not being matched (the HRB survey reported data on respondents ages 17 and older and in paygrades E1-E9, W1-W5, and O1-O10, while the pre-campaign intercept survey reported data on respondents ages 18-24 and in paygrades E1-E4), there are some general comparable trends. For example the percentage of individuals who had smoked in the past 30 days does show that the Air Force is much lower in both the HRB Survey and our baseline survey. There are differences in the surveys with whether or not an individual has begun smoking since enlisting. The HRB data show very little difference between the branches, but the pre-campaign data shows the Army as having the lowest percentage and then the remaining branches having about the same percentage. Both data sets show the Air Force having the highest percentage indicating they quit within the past year. The HRB data however show very little difference among the branches while there is a large difference in pre-campaign data.

Process Data

The campaign launch occurred concurrently at all four installations during the period February 20, 2007 to March 20, 2007. The actual media buys in each area were designed to reach roughly the same percentage of the segment audience as measured by gross rating points—a unit of measurement for audience size used to measure the exposure of commercials (685 in Seattle-Tacoma and 652 in San Diego). There are, however, differences by installation in what other campaign materials were ordered. Camp Pendleton ordered 10 times or more the amount of table tents that other installations ordered. Both Ft. Lewis and San Diego ordered at least twice as many posters than the other installations. San Diego also ordered three times or more the amount of postcards and tip cards than the other installations. McChord ordered the least amount of additional supplies and San Diego ordered the most. These data relate to implementing the pilot media campaign and are presented in Table 4.

Of the respondents to the intercept interviews, some form of the posters was seen by more people than any other campaign material. The most reported type of campaign material seen at San Diego (22%) and Ft. Lewis (50%) was some form of poster. More people reported seeing the newspaper ad at Camp Pendleton (52%), while at McChord 24% reported seeing the "Make Everyone Proud" table tent. Table 5 presents this information.

Pre-Campaign and Post Campaign Intercept Surveys

As noted earlier the pre-campaign survey was done in fall and winter of 2006 and the post-campaign survey was done in March 2007. Table 6 displays the number of respondents per installation for each survey. Though a goal of 200 completed interviews per installation was set, this was not always achieved. Failure to achieve that number of interviews is related to events on the installation and locations assigned for the interviews. These installations were chosen because of the relatively high numbers of our target audience

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(E1 to E4) but this population is also very transient and deployments occurred during this period causing a few of these installations to have greatly reduced populations of the target audience. Also due to security constraints at a few installations our points of contact were required to escort and remain with our interviewers reducing the amount of time and locations available for the interviewers to conduct this effort. This results in the margin of error being as high as +/- 10%.

**Table 3: Comparison of Results from 2005 HRB Survey with
Baseline Data from the Pre-Pilot Campaign Intercept Interviews**

Question	Category	HRB Survey	Baseline from the Intercept Interviews
Any Smoking in Past 30 Days	Air Force	23.3%	57.5%
	Army	38.2%	70.7%
	Marine Corps	36.3%	74.8%
	Navy	32.4%	89.0%
Smoking Initiation	Air Force	40.2%	78.8%
	Army	37.9%	56.2%
	Marine Corps	41.7%	83.1%
	Navy	36.6%	84.0%
Smokeless Tobacco Initiation	Air Force	11.1%	23.9%
	Army	22.9%	39.3%
	Marine Corps	22.0%	20.7%
	Navy	12.5%	13.0%
Smokeless Tobacco Use in Past 12 Months	Air Force	14.5%	23.9%
	Army	27.7%	43.3%
	Marine Corps	33.0%	36.3%
	Navy	16.7%	18.5%
Quit within Past Year	Air Force	17.4%	24.8%
	Army	12.2%	5.2%
	Marine Corps	16.6 %	14.4%
	Navy	12.4%	8.5%
Intending to Quit in Next 6 Months	Air Force	24.0%	24.3%
	Army	35.2%	18.8%
	Marine Corps	23.5%	29.5%
	Navy	22.8%	32.8%

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Table 4: Campaign Materials by Installation

Media Channel	San Diego	Camp Pendleton	McChord	Fort Lewis	TOTAL:
Active Duty Population	90,000	36,042	5,300	25,000	156,342
Radio Spots	604		424		1,028
Installation Newspapers	1 Ad for 4 Weeks				
Table Tent	100	3,000	50	300	3,450
Posters	100	30	50	100	280
Postcards	5,000	200	1,100	2,055	8,355
Tip Cards	10,000	400	1,300	2,500	14,200

Table 5: Pilot Ads/Materials, Materials Seen and Reported by Installation

Question	INSTALLATION			
	San Diego Naval (n=158*)	Camp Pendleton MCB (n=201*)	Ft. Lewis Army (n=101*)	McChord AFB (n=100*)
Poster	22%** (n=4)	19%** (n=4)	50%** (n=6)	5%** (n=1)
Newspaper Ad	11%** (n=2)	52%** (n=11)	25%** (n=3)	0
Radio Ad	17%** (n=3)	14%** (n=3)	0	5%** (n=1)
Tip Card	11%** (n=2)	0	8%** (n=1)	19%** (n=4)
Table Tent	0	0	0	24%** (n=5)
Multiple Sources	6%** (n=1)	5%** (n=1)	8%** (n=1)	29%** (n=6)

* "n" refers to the number of participants at each installation.

** The percentage of individuals who saw the Make Everyone Proud Campaign *and* who saw that particular type of ad.

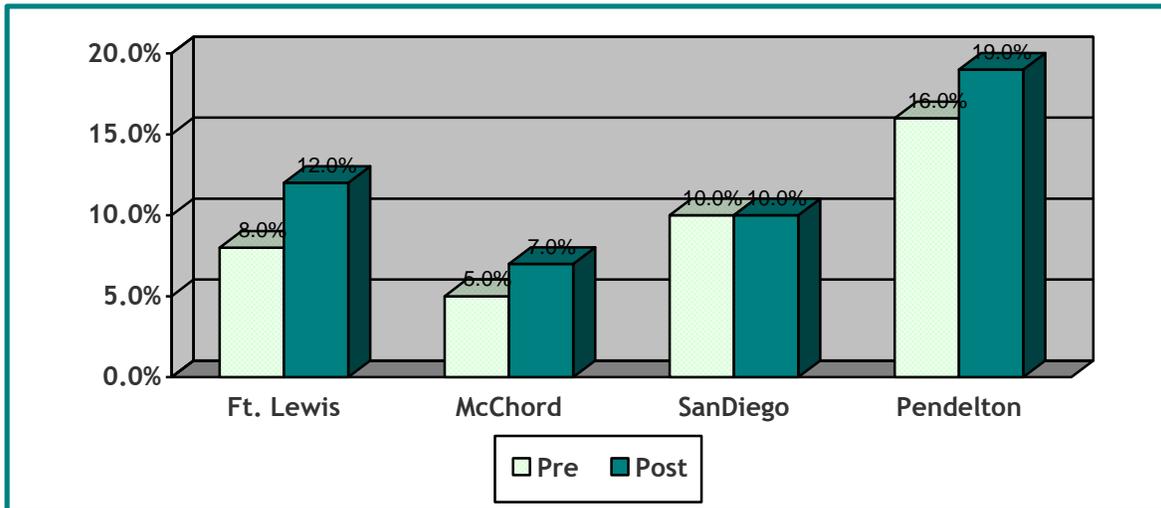
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**Table 6: Number of Intercept Interview Respondents
per Installation, Pre- and Post-Pilot Campaign**

Installation	Number of Pre-Campaign Respondents	Number of Post-Campaign Respondents
Ft. Lewis	208	101
McChord AFB	181	100
Naval Station San Diego	200	158
MCB Camp Pendleton	202	201

The surveys were designed to address those research questions stated previously. Data related to addressing these questions are presented below (Figures 1-3 and Table 7). The actual number of respondents seeing/hearing the campaign is relatively small at each installation. As a result we were not able to conduct a content analysis or examine the actions taken by demographic and other factors.

**Figure 1: Percent of Respondents Contemplating Quitting Tobacco
Use by Installation and Time Period, Pilot Campaign Intercept Surveys**



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Figure 2: Percent of Respondents Who are in the Preparation or Action Stage of Quitting Tobacco Use, by Installation and Time Period, Pilot Campaign Intercept Surveys

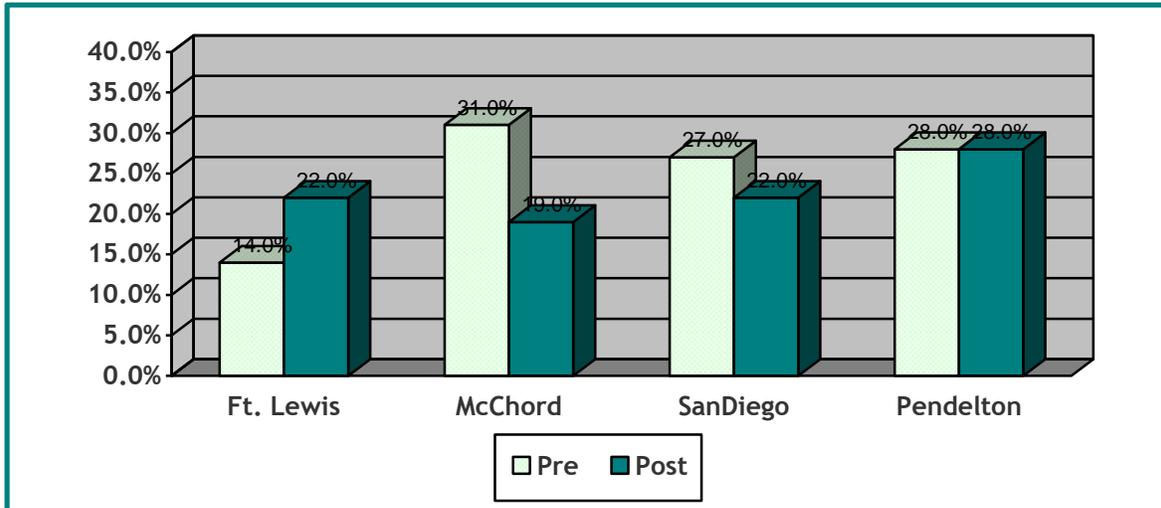


Figure 3: Percentage of Respondents Who Heard/Saw the Quit Tobacco Use Ads/Materials by Installation, Pilot Campaign Intercept Surveys

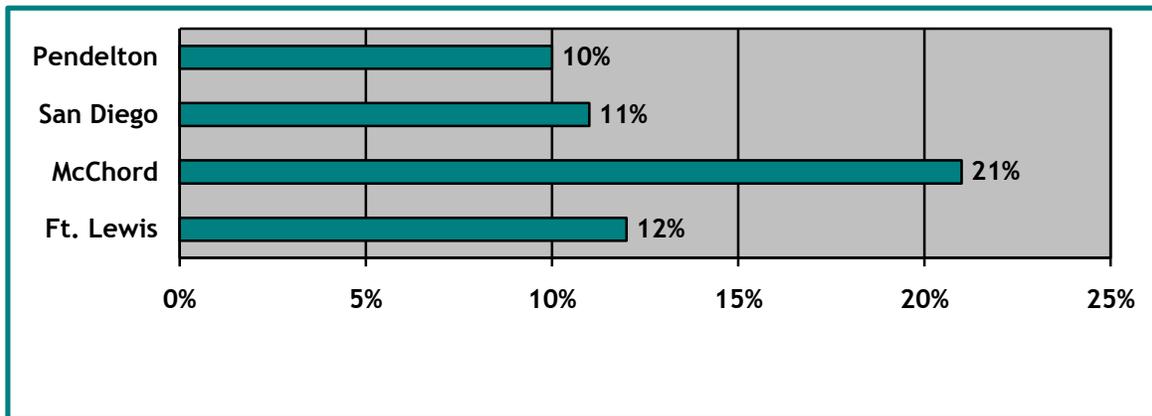


Table 7: Actions Resulting from Seeing/Hearing Pilot Campaign Ad/Materials, Intercept Survey

Action	Fort Lewis	McChord	San Diego	Pendleton
Began/resumed thinking of quitting.	25%	5%	22%	47%
Decided to or actually quit using tobacco.	8%	14%	11%	29%

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The relatively low numbers of individuals reporting that they saw the Make Everyone Proud Campaign materials demonstrates the difficulty of breaking through to this audience, especially with a campaign that relies on a relatively low profile launch (no launch event to drive awareness and attention to the radio spots and print materials that appeared on the installation). As will be further discussed below, the ability of the print materials to be placed at prime locations on the installation during the launch period was hindered by the need to rely on the health promotion point of contact to order sufficient supplies and personally place the materials around the installation (at locations that may need third party permissions). The above tables show that the campaign materials did have an impact on those who saw them. The materials tended to cause them to think about quitting more than causing them to decide to quit. This follows the campaign strategy related to the Stages of Change.

Interviews

As mentioned earlier, this data was collected by one-on-one phone interviews with our contacts in the Health Promotions departments. We were able to complete three interviews from the four installations (Ft. Lewis, Camp Pendleton, and McChord). All of the contacts stated that while the ordering process was easy, it was difficult to know how much materials they should order for their installation. They all tended to use the number of buildings on the installation (size of installation), where they might be allowed to post materials (installation-specific policies) and their general thinking of the number of target audience on their installation (size of audience) to help order materials. For a variety of reasons including the ordering timeline and shipping issues, the materials arrived at the installation during the first week the campaign. The contacts stated that this had an impact on the locations available, since it often takes time to obtain the proper approvals and clearances to post materials in many locations. Throughout the interviews we heard that there are several gatekeepers to getting posters or other materials in certain areas. Permissions may relate to installation "anti-clutter" policies, third party contractors of mess halls, individuals responsible for the barracks, etc. The process of going through all the right channels to receive clearance can often take time, so some of the materials may not have been visible for the entire month of the pilot campaign. In addition to this, some posters may have been taken down as result of Anti-Clutter policies, which prevent postings from being up on walls for too long or even being posted in some areas at all. However, some felt that the obvious sponsorship of this campaign by the DoD made it easier for them to receive the permissions and that the posters may stay in place longer. In addition, at some installations, the materials are required to be in frames or acrylic holders of some sort, so the points of contact were limited by the number of empty frames available and their own resources of acrylic holders.

Most of the contacts also reported running out of some materials (especially posters and tent cards). They ordered what they thought would be enough, but once they started dissemination activities, some found they did not have enough.

These contacts all felt that the table tents would have a good impact, especially placing them in the mess halls where there is limited information for our target audience to see, therefore the table tents are likely to gain their attention.

The Web site was also seen as valuable by our contacts. One reason for this is that while the health promotions departments do have information or links to local or state tobacco cessation programs, this campaign is national and the Web site helps this campaign go global. The target audience is often deployed or transferred from installation to installation and the Web site gives a common ground no matter where in

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the world they may be stationed. They also liked the idea of a military focused Web site that was designed to support the unique needs and understand the stresses of this military audience.

There were differing views related to the radio spots. Only one of three had heard the spots played on the radio. Some were concerned that as the target audiences listen to their iPods they may reduce their time spent listening to the radio and thus not be exposed to the radio.

All the contacts felt that they would continue to use the materials and promote the campaign, even though the pilot campaign is over. They liked having professional materials available that supported their anti-tobacco efforts. One contact noted more people were signing up for the tobacco cessation classes.

Web-based Data

These data consist of two types: trends and survey data. The first is automatically generated when a person accesses the Web site. Using that data one can determine:

- The number of visits.
- Number of repeat visitors.
- Average time the person was on the Web site.
- How the site was accessed (e.g., direct traffic, following a link).
- The day the site is visited most frequently.
- Average number of page views per visit.

The analysis is based on data for February and March 2007 and is presented in Table 8. In that table data are disaggregated into the first two weeks of the campaign (February 20 – March 5), the second two weeks of the campaign (March 6 – 19), the entire period of the campaign and the period immediately after the campaign (March 20 – 31).

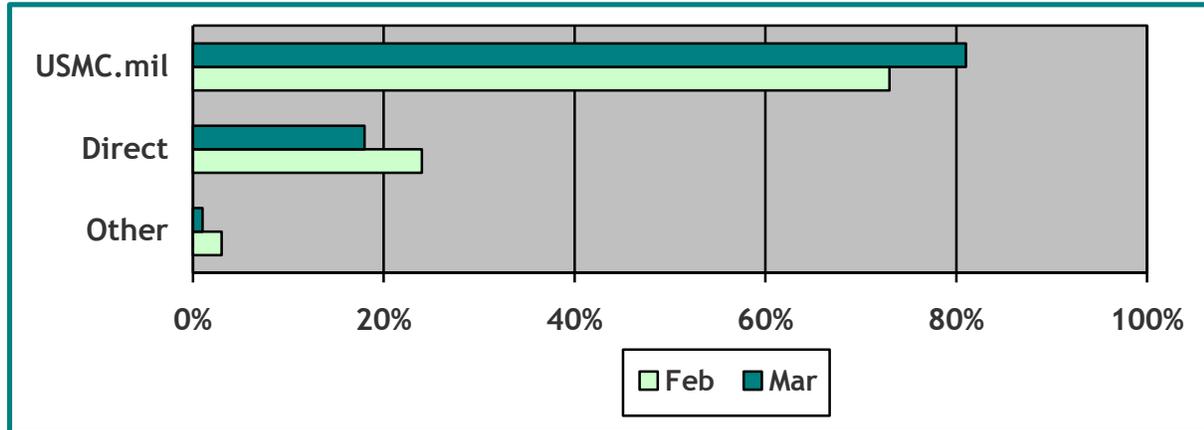
Table 8: Data on Web Activity for February and March 2007, TRICARE Tobacco Cessation Pilot Campaign

Factor	Feb 20 - March 5	March 6 - 19	Entire Pilot Campaign Period	March 20 - 31
Number of Visits	13,202	22,652	37,563	19,914
Number of Repeat Visitors	1,124	1,625	3,271	1,525
Average Time (in Minutes)	9.12	9.11	9.02	8.28
Most Frequent Day	Monday (3/5/07)	Monday (3/19/07)	Monday (3/19/07)	Thursday (3/22/07)
Average Visits Per Visitor	1.23	1.16	1.23	1.17

Given the relatively low target populations at each site, the number of visits, repeat visitors, and average time on the site are all encouraging relative to the interest in the Web site. The most popular page visited was the home page. The data in Figure 4 show that the USMC.mil was most frequently the referring domain.

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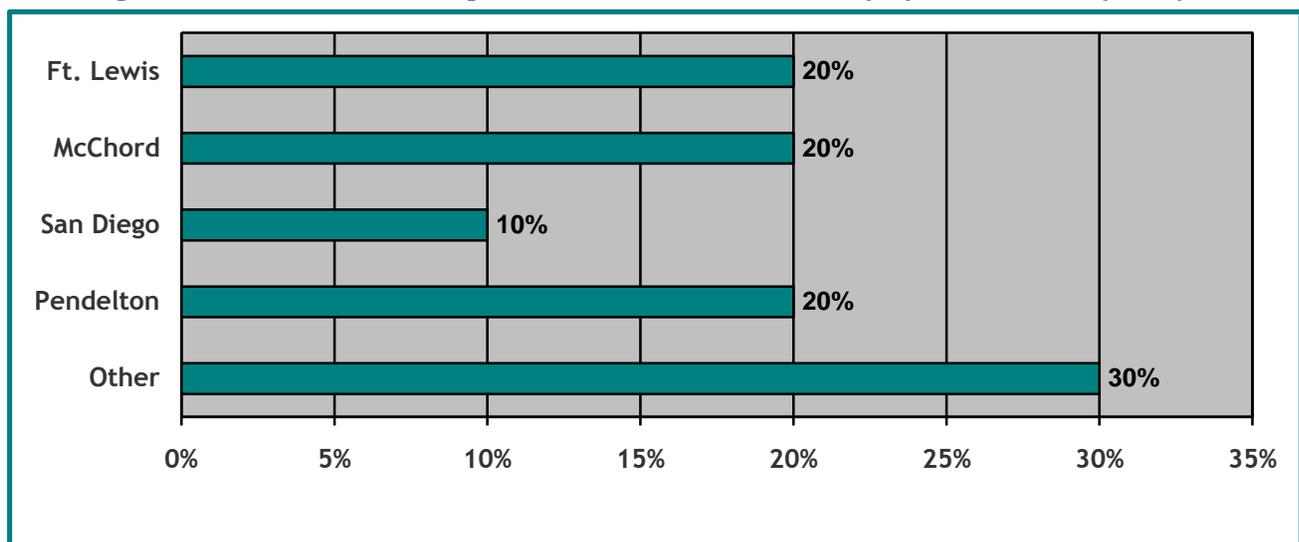
Figure 4: Referring Domain



The pop-up survey was offered to every other individual who remained on the site for at least two minutes. Completion of the survey is voluntary and, at this juncture, very few individuals have elected to complete the survey (n=10). Figure 5 shows that 70% of the visits are from the target installations, 30% are from the target age group (18-24), and 40% are of the correct grade. Of those responding (n=6) to the question on how they learned of the Web site, half heard about it through the newspaper ad or the poster. The others were referred to the site by colleagues or a superior/officer. One individual indicated they were going to stop smoking as a result of visiting the Web site. Other actions include:

- Joining a class to assist them quit using tobacco.
- Looking for additional resources.
- Seeing a doctor.

Figure 5: Distribution of Respondents to Web-based Survey by Installation, (n=10)



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FINDINGS

Pre-Campaign and Post Campaign Intercept Surveys

The pre- and post intercept surveys showed that across installations 13% had seen/heard an ad with the tagline "Make Everyone Proud." Of those seeing/hearing an ad, 13% saw/heard the ad from multiple sources. Data from these surveys did not indicate that the ads were driving people to the Web site, but a fair amount of traffic was on the site during the pilot campaign period. The ads were having an impact on their long-term goal – moving people to quit using tobacco.

Process Data

As stated previously, materials were ordered by the installation points of contact. The installation health promotion contacts did like the table tents and postcards. These contacts liked having the different materials available. The table tents were seen as effective since they could be easily placed in the mess halls and that they would be seen by a large number of people on a regular basis. The postcards were also useful because those could be given out in the health promotions department as something for people to take home.

Interviews

Overall, the health promotion contacts provided a lot of support for the campaign while the pilot was running and continue to do so. However, there were a few things that could have made the process easier. The materials need to be ordered and delivered sooner to take into account potential delivery issues and the time and clearances that often have to be met to disseminate the information. **The contacts would also like more guidance in what to consider when ordering the amount of materials needed.** The contacts reported using the Web site as a resource for people of all pay grades. This was seen as the glue that holds the campaign together and what would make the campaign beneficial on a national and even global level to their highly transient population. They see this campaign as successful so far and can only imagine the success growing in the future due to the fact that it is a national campaign.

Web-based Data

The number of visits increased by 72% from the first two week period of the campaign to the last two week period; the number of repeat visitors also increased by 45% during this time period. These data were also tracked for the 11 days immediately after the campaign. On a daily basis they showed continued increases of 12% and 21% respectively, implying an impact above and beyond the campaign.

Though 60% of the respondents to the Web-based survey held a higher grade than the target audience, this can have a positive benefit to the program. If these individuals like the site they may drive traffic to the site by informing their lower grade colleagues who are tobacco users.

Campaign Launch Consideration

Overall, the pilot launch was successful in many aspects, the health promotion points of contact were able to successfully order materials they felt were appropriate to the size and population of the installation and were very supportive of the campaign, tailored Web site and service-specific materials. They continue to use the materials to support their anti-tobacco health promotion efforts. The ability to assess the impact of the materials and radio spots on the target population through on-installation intercept surveys was inhibited by the transient nature of the populations (deployments) and security requirements which

"Quit Tobacco—Make Everyone Proud" Campaign Report

necessitated escort of interviewers by the health promotion staff. Despite that, the survey data indicated that the materials were having the desired response of causing individuals to think about quitting and/or deciding to quit. The Web trend data indicate that individuals did visit the web site during the launch period spending significant time on the site.

NEXT STEPS

We will continue to monitor activity at the Web site to determine whether there is any spread by word-of-mouth, continued use of materials on the pilot installations and Web marketing activities. The national campaign is scheduled for launch in the Fall of 2007. We will use the recurring annual DMDC Survey to capture information on whether individuals have heard/seen the campaign. This will be augmented with information on activity at the Web site as well as the pop-up survey. Reports will be issued quarterly. Each report, in addition to presenting the most recent data, will present a review of what was gathered previously.

Tobacco Cessation "Make Everyone Proud" Campaign Report

Appendix A: Campaign Materials

Tobacco Cessation "Make Everyone Proud" Campaign Report

WEB SITE



:30 Radio "My Big Brother"

GIRL, ABOUT NINE YEARS OLD: My big brother is my favorite brother. He's fighting for our country. I think it's because he's so big. When he lets me ride in his car, I yell at the other drivers. Just like him! I can even do this,

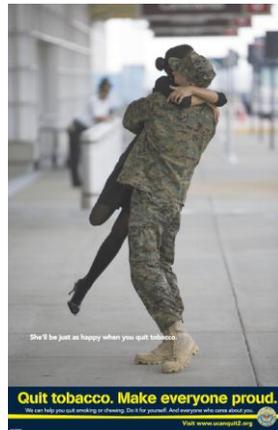
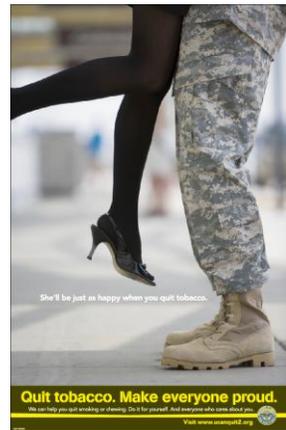
(SFX: WE HEAR THE LITTLE GIRL TRY TO COUGH, REALLY LOUD AND DISGUSTING. WE THEN HEAR HER SPIT)

GIRL: I'm going to be just like my big brother when I grow up.
(SFX: SHE GIGGLES.)

FEMALE ANNCR: People are watching you. Quit tobacco. And make yourself and everyone around you proud. You can start at ucanquit2.org. A message for the U.S. military from the U.S. Department of Defense.

Tobacco Cessation "Make Everyone Proud" Campaign Report

POSTERS



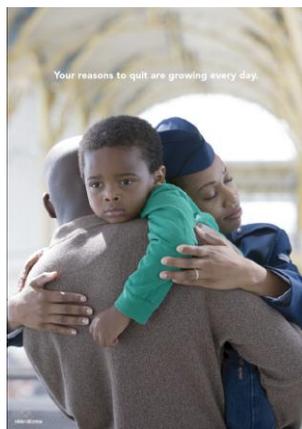
Tobacco Cessation "Make Everyone Proud" Campaign Report

POSTCARDS

Quit tobacco. Make everyone proud.

We can help you quit smoking or chewing. Do it for yourself. And everyone who cares about you.

Visit www.scanquit2.org



Quit tobacco. Make everyone proud.

We can help you quit smoking or chewing. Do it for yourself. And everyone who cares about you.

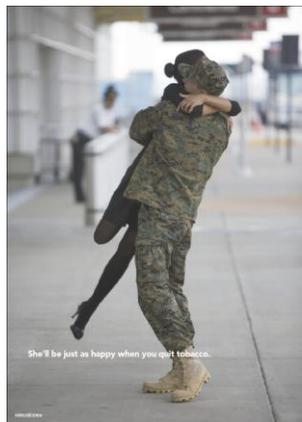
Visit www.scanquit2.org



Quit tobacco. Make everyone proud.

We can help you quit smoking or chewing. Do it for yourself. And everyone who cares about you.

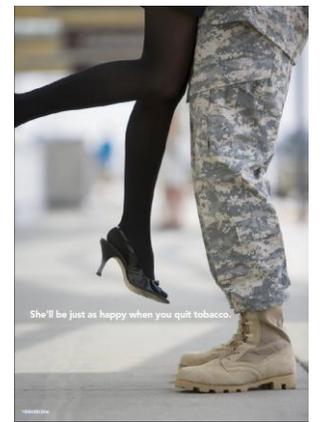
Visit www.scanquit2.org



Quit tobacco. Make everyone proud.

We can help you quit smoking or chewing. Do it for yourself. And everyone who cares about you.

Visit www.scanquit2.org



Tobacco Cessation "Make Everyone Proud" Campaign Report

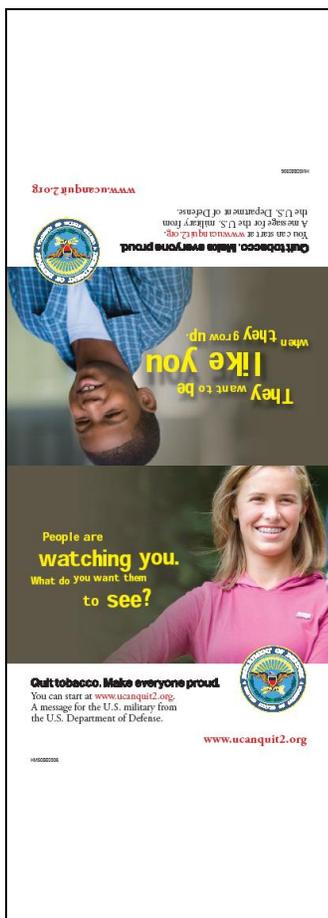
PRINT ADS



Tobacco Cessation "Make Everyone Proud" Campaign Report

OTHER MATERIALS

Table Tent



Wallet Cards



Tobacco Cessation "Make Everyone Proud" Campaign Report

Appendix B: Questions for Quarterly DMDC Survey

Tobacco Cessation "Make Everyone Proud" Campaign Report

Q1. Demographic Labels Needed:

- Age (Need to Identify 18-14 Year Olds)
- Pay grade (E1 to E4)
- Branch of Military Service
- Gender
- Race/Ethnicity

1) Have you used any tobacco products (cigarettes, pipe, cigars, smokeless tobacco) within the last six months?

Yes, and currently use.

Yes, and stopped within the past six months. (Action Stage)

Direct them to Question 4.

Yes, and stopped more than six months ago. (Maintenance Stage)

Direct them to Question 4.

No

Instruct them to Skip the Tobacco Questions.

2) Did you take any steps in the past six months to quit using tobacco products? (Action Stage)

Yes

No

3) Do you plan on making a serious attempt to quit using tobacco products?

Yes, within the next six months. (Contemplation Stage)

Yes, not within the next six months (Precontemplation Stage).

Yes, but not sure when (Precontemplation Stage).

No (Precontemplation Stage).

4) Do you plan on taking any action to quit using tobacco in the next month? (Preparer)

Yes

No

5) Have you heard, read, or seen messages or advertising on base in the last month that would encourage you to quit using tobacco?

Yes

No (Skip Questions 6-9)

Not Sure

6) Did any of the messages have the tagline "Make Everyone Proud"?

Yes

No (Skip Questions 7-8)

7) Where did you hear or see this "Make Everyone Proud" ad? (Check all that apply)

Radio

Base Newspaper

Poster

Other (Specify _____)

Tobacco Cessation "Make Everyone Proud" Campaign Report

8) What do you remember about the "Make Everyone Proud" ad?

9) What action did you take as a result of hearing that ad?

- Decided to quit using tobacco.
- Began/Resumed thinking about quitting use of tobacco products.
- Visited the Web site noted in the ad.
- Initiated another action toward quitting use of tobacco (e.g., spoke to health professional, bought patches, threw out tobacco products, etc.).
- Quit Using Tobacco
- Other Action
- No Action

Tobacco Cessation Pilot Campaign Report

Appendix C: Intercept Surveys, Pre- and Post-Questionnaires

Tobacco Cessation Pilot Campaign Report

We would like about two minutes of your time to answer a few questions on tobacco use. This survey is being sponsored by the Department of Defense, TRICARE. I would like to begin with some questions to determine your eligibility to participate.

- S1. Are you an Active Duty <Service>?
 Yes
 No (Terminate - Thank You)
- S2. How old are you? _____
 (If not 18-24, Terminate - Thank You)
- S3. What is your pay grade? _____
 (If not E1-E4, Terminate - Thank You)
- S4. Have you used any tobacco products (cigarettes, pipe, cigars, and/or smokeless tobacco/chew/snuff) within the last 12 months?
 Yes, and currently use.
 Yes, and quit within the past six months (Skip to Question 8)
 Yes, and quit more than six months ago (Skip to Question 8)
 No (Terminate - Thank You)
- Q1. Which of the following tobacco products do you use? (Check all that apply).
 Cigarettes
 Pipe
 Cigars
 Chewing tobacco/snuff/other smokeless tobacco
- Q2. Have you started or restarted (after having quit) using any type of tobacco since you've entered the <service>?
 Yes (What Type _____)
 No
- Q3. During the last 12 months how often, on average, have you used tobacco products?
 Everyday.
 3-6 days a week.
 1-2 days a week.
 Less frequently than 1-2 days a week.
- Q4. Have you ever made a serious attempt to quit using tobacco products?
 Yes (Indicate how many times ___ and when was the last time? ___ months ago)
 No
- Q5. Are you seriously considering quitting use of tobacco products?
 Yes, within the next six months.
 Yes, not within the next six months (Skip to Question 7).
 Yes, but not sure when.
 No (Skip to Question 9).

Tobacco Cessation Pilot Campaign Report

- Q6. Have you identified an action plan to quit using tobacco in the next month?
- Yes
 No
- Q7. Did you take any steps in the past six months to quit using tobacco products?
- Yes
 No
- Q8. In the past six months, have you done any of the following: (Check all that apply)
- Saw a health care provider about stopping use of tobacco.
 Purchased gum, patches, or other medication for stopping use of tobacco.
 Threw out tobacco products so I could quit.
 Participated in a smokeout.
 Set a quit date.
 Attended a group cessation class.
 Other Action (Specify _____)
- Q9. On a scale of 1 to 5, with 1 being strongly disagree and 5 being strongly agree, to what extent do you agree that supervisors allow more breaks for tobacco users than for non-tobacco users?
- 1 Strongly Disagree
 2 Disagree
 3 Neither Agree or Disagree
 4 Agree
 5 Strongly Agree
- D1. Record Gender
- Male
 Female
- D2. What is your race? (Respondent may indicate more than one).
- White
 Black or African American
 American Indian or Alaska Native
 Asian
 Native Hawaiian or Pacific Islander
 Other, (Specify _____)
 Refused
- D3. Are you Spanish or Hispanic or Latino?
- Yes
 No

Thank you for your time and helping TRICARE learn more about tobacco use in the military.

Tobacco Cessation Pilot Campaign Report

We would like about two minutes of your time to answer a few questions on tobacco use. This survey is being sponsored by the Department of Defense, TRICARE. I would like to begin with some questions to determine your eligibility to participate.

- S1. Are you an Active Duty <service>?
 Yes
 No (Terminate - Thank You)
- S2. How old are you? _____
(If not 18-24, Terminate - Thank You)
- S3. What is your pay grade? _____
(If not E1-E4, Terminate - Thank You)
- S4. Have you used any tobacco products (cigarettes, pipe, cigars, and/or smokeless tobacco /chew/snuff) within the last 12 months?
 Yes, and currently use.
 Yes, and quit within the past six months. (Skip to Question 8)
 Yes, and quit more than six months ago. (Skip to Question 8)
 No. (Terminate - Thank You)
- Q1. Which of the following tobacco products do you use? (check all that apply)
 Cigarettes
 Pipe
 Cigars
 Chewing tobacco/snuff/other smokeless tobacco
- Q2. Have you ever made a serious attempt to quit using tobacco products?
 Yes (Indicate how many times____ and when was the last time? ____ months ago)
 No
- Q3. Are you seriously considering quitting use of tobacco products?
 Yes, within the next six months.
 Yes, not within the next six months (Skip to Question 7).
 Yes, but not sure when.
 No (Skip to Question 7)
- Q4. Have you identified an action plan to quit using tobacco in the next month?
 Yes
 No
- Q5. Did you take any steps in the past six months to quit using tobacco products?
 Yes
 No
- Q6. In the past six months, have you done any of the following: (Check all that apply)
 Saw a health care provider about stopping use of tobacco.
 Purchased gum, patches, or other medication for stopping use of tobacco.
 Threw out tobacco products so I could quit.
 Participated in a smokeout.
 Set a quit date.

Tobacco Cessation Pilot Campaign Report

- Attended a group cessation class.
- Other Action (Specify _____)

Q7. Have you heard, read, or seen messages or advertising on base in the past month that would encourage you to quit using tobacco?

- Yes
- No

Q8. Did any of the messages have the tagline "Make Everyone Proud"?

- Yes
- No

Q9. Where did you hear or see the "Make Everyone Proud" advertisement?

- Poster
- Base Newspaper
- Radio (Specify _____)
- Postcard
- Tip Card
- Table Tent
- Other (Specify _____)

Q10. Please specify what you recall about the "Make Everyone Proud" advertisement.

Q11. Did you take any of the following actions as a result of hearing the "Make Everyone Proud" advertisement? (Check All That Apply)

- Made the decision to quit using tobacco.
- Began/resumed thinking about quitting use of tobacco products.
- Visited the Web site www.ucanquit2.org noted in the advertisement
- Initiated other action toward quitting use of tobacco (e.g., spoke to health professional, bought patches, threw out tobacco products)
- Actually quit using tobacco
- Other action (Specify _____)

D4. Record Gender

- Male
- Female

D5. What is your race? (Respondent may indicate more than one)

- White
- Black or African American
- American Indian or Alaska Native
- Asian
- Native Hawaiian or Pacific Islander
- Other (Specify _____)
- Refused

Tobacco Cessation Pilot Campaign Report

D6. Are you Spanish or Hispanic or Latino?

Yes

No

Thank you for your time and helping TRICARE learn more about tobacco use in the military.

Appendix D: Point of Contact Interview Guide

Tobacco Cessation Pilot Campaign Report

In Depth Interview Guide
April 2007, DOD TRICARE

Interview Purpose/Introduction of Topic

Hello, my name is_____. I work for Macro International, a research and consulting firm. We are working with the DOD TRICARE on the Smoking Cessation Campaign - Make Everyone Proud. As you know we recently finished a pilot campaign at your base _____.

From the pilot we have gathered good data on campaign awareness and perceptions toward campaign materials. Our next step is to refine the materials and a rollout of the campaign to other military installations. We need your valuable input as we develop materials and rollout strategy to make sure that it is as easy as possible to implement and be effective at the base level. You already provided us with some important ideas relative to the materials; these questions will also talk about the process. We welcome your suggestions and want to hear what will make your job easier.

The interview will take approximately 30 to 40 minutes. In this interview, there are no right or wrong answers. If you dislike or disagree with something that is said it is important that I hear it.

Do you have any questions before we begin?

1. First I would like to get some brief information about your role at the installation. How many responsibilities do you have? How many people like you work at the base and do these kinds of activities?
2. Next, describe for me in your words what kinds of things were asked of you to support the pilot campaign. Pre-campaign activities (ordering items, getting permissions, etc). How about campaign activities themselves (putting up posters, linking to Web site, etc.)
3. What kinds of materials were made available to you for the campaign? Print and radio ads were run at all bases. A Web site was in place - did you receive the Web link? Also, posters, postcards, table tents, and tip cards were available.
 - a. Which of these were relatively easy for you to implement?
 - Probe a lot on process and process improvement?
 - b. Which of these that you did implement - turned out to be harder than you thought?
 - c. Did you choose not to implement any of these? Why?
 - d. Were there any items you wished you had but was not available?
4. Did you do anything that was not specifically suggested (hold an event, link to Web sites, etc).
5. Did you receive any feedback on the campaign from the target audience (E1 to E4s 18 to 24) How about others?

Tobacco Cessation Pilot Campaign Report

6. Now that the campaign was implemented at your base - do you see yourself maintaining or promoting the campaign?
7. The Pilot Research we did was intercept interviews on the base. The first set was conducted ___ and the second at the end of March 2007. We are interested in the lower numbers we were achieved in the second round - is there anything happening at the base that might explain that (deployment, trainings, etc?)

That is the extent of my questions. I would like to reiterate that we greatly appreciate your willingness to spend your time assisting us with this research project. Before we end this interview, do you have any additional information that you feel would be helpful to provide?

Tobacco Cessation Pilot Campaign Report

Appendix E: Web Pop-Up Survey

Tobacco Cessation Pilot Campaign Report

- Q1. What base are you on?
- Q2. What is your current pay grade?
- Q3. What is your age? (As of your last birthday)
- Q4. How did you learn about this Web site?
- Q5. After having visited this Web site, what actions do you anticipate taking to reduce or quit your use of tobacco?