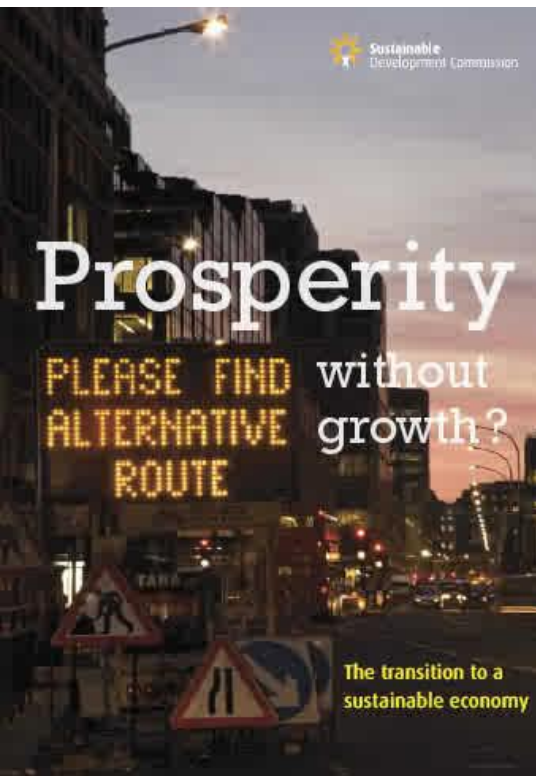


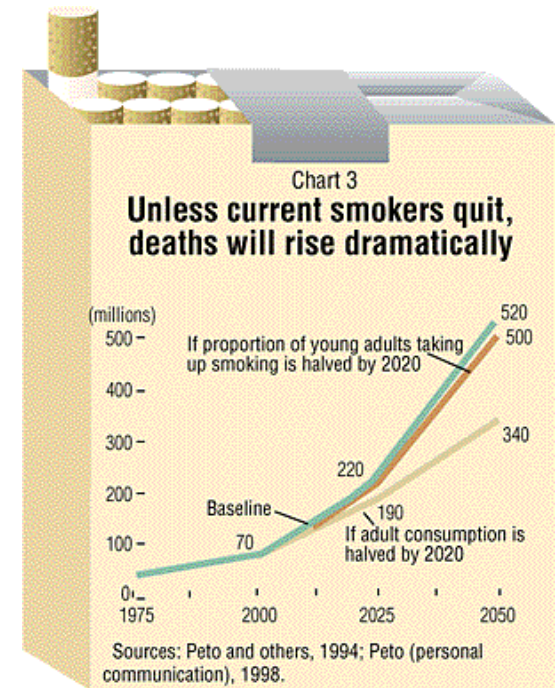
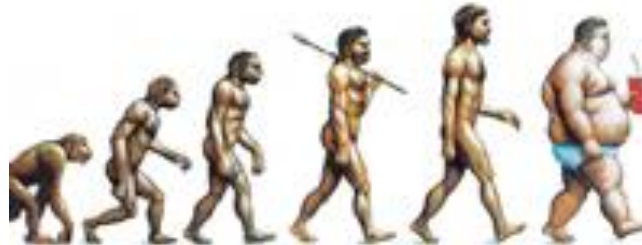
Behaviour change and tobacco control: fast thinking and approaches old and new

Dr Fiona Adshead

What is our ultimate goal?



The shape of things to come



THE EUROPEAN HAPPY PLANET INDEX
An index of carbon efficiency and well-being in the EU

Medicines
FOR *Health*

**PREVENTION
IS BETTER
THAN CURE**



Cost to the US economy of diabetes

\$174billion p.a.

- United Health, 2007

Cost to the UK economy of 700,000 people living with Dementia

£18.3 billion p.a.

- Policy Exchange - ONS, 2008

Total cost of obesity to Australian economy

\$3.7billion p.a.

- Diabetes Australia, 2005

Total costs attributable to smoking in Spain in 2008

€14.7billion

- Arch Bronconeumol 2010

Shifting to prevention: a longer view

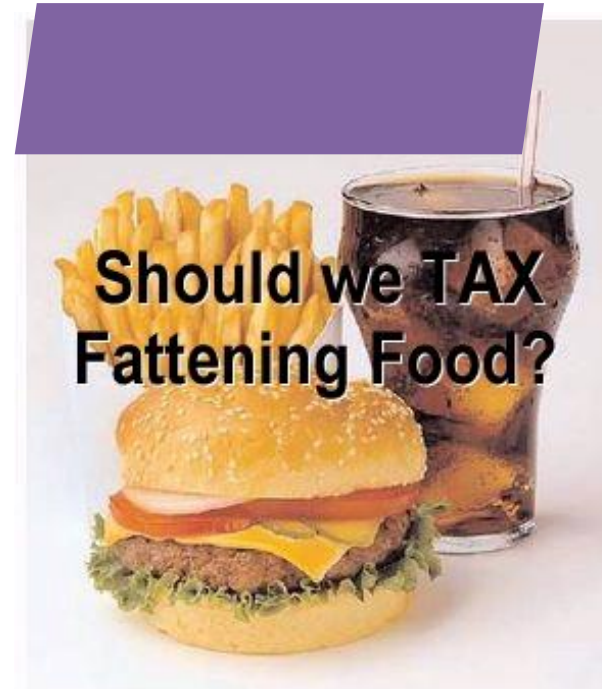
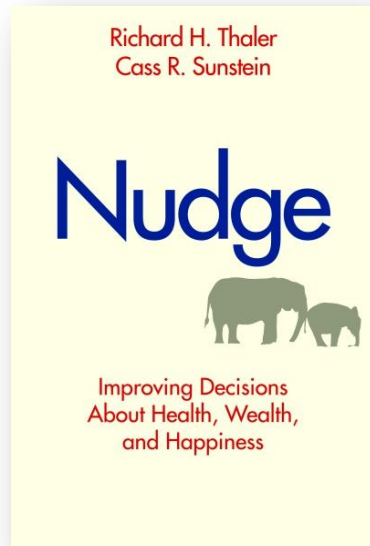
Focus on adoption of healthier behaviours but how?



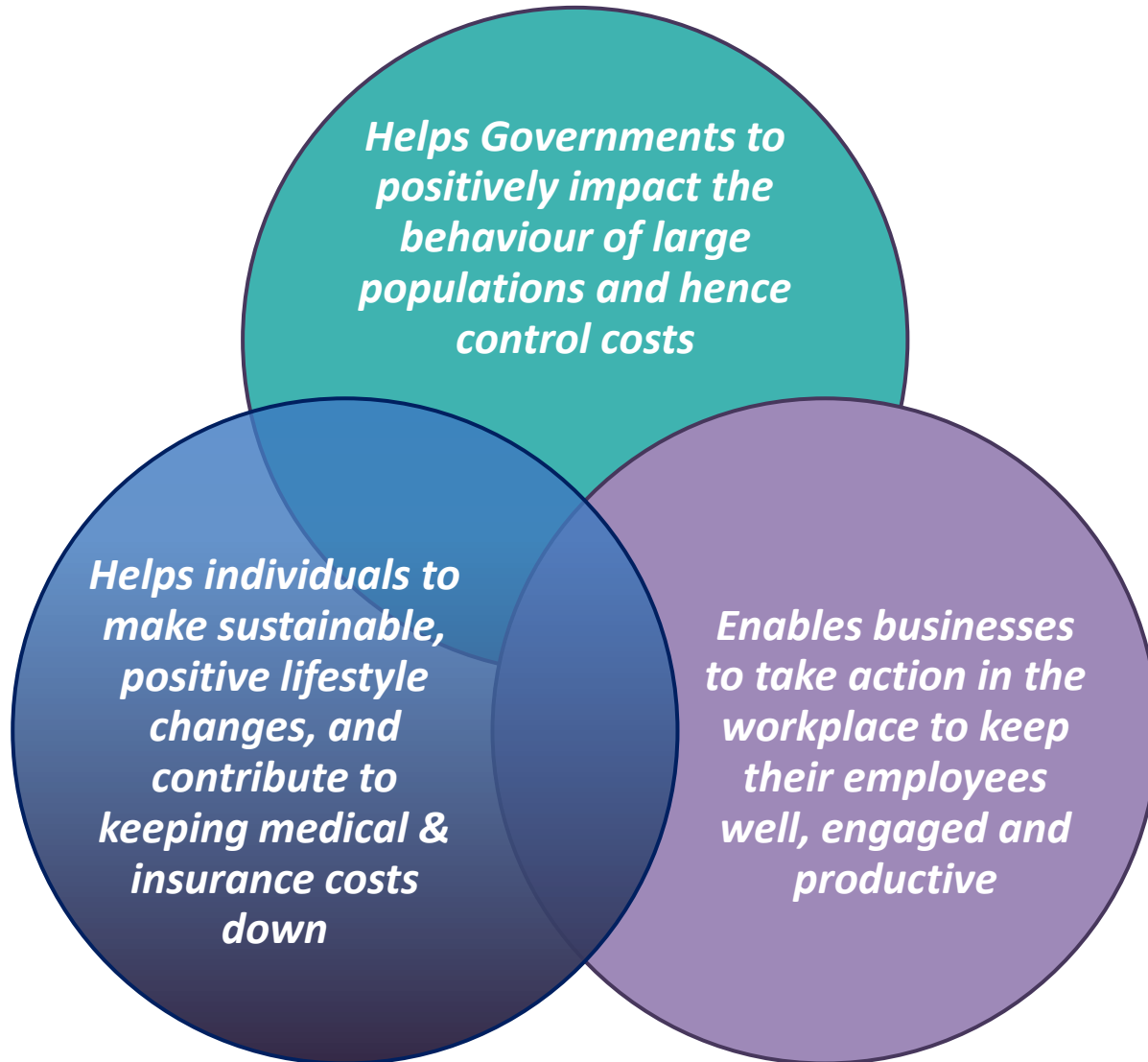
ARE YOU POURING ON THE **POUNDS**?

DON'T DRINK YOURSELF FAT.
Cut back on soda and other sugary beverages.
Go with water, seltzer or low-fat milk instead.

NYC
Department of Health & Mental Hygiene
101 W. 30th St., 10th Floor
New York, NY 10001
(212) 512-3121



Shared opportunity : how different players are responding



Behaviour change: evidence, policy & practice

NHS
National Institute for
Health and Clinical Excellence

Behaviour change evidence

Issue Date: October 2007

Behaviour change at
population, community
and individual levels



STEER

MASTERING OUR BEHAVIOUR THROUGH
INSTINCT, ENVIRONMENT AND REASON

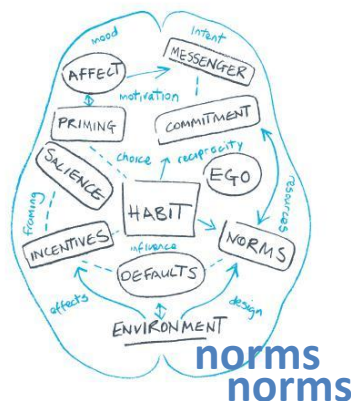
MATT GRIST

CabinetOffice

INSTITUTE
FOR
GOVERNMENT

MINDSPACE

Influencing behaviour through public policy



House of Commons



HM Government

Policy and practice

Twelfth Report of Session 2010-12

Volume I

Volume I: Report, together
with minutes

Volume II: Oral and written
evidence

Additional written evidence
Volume III, available on the
Internet at www.parliament.uk/handling

Healthy Lives, Healthy People:

HOUSE OF LORDS

Science and Technology Select Committee

2nd Report of Session 2010-12

Behaviour Change

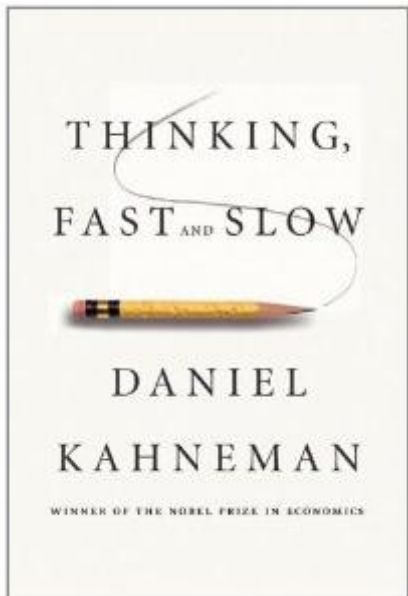
Report

Ordered to be printed 11 July 2011 and published 19 July 2011

Published by the Authority of the House of Lords
London: The Stationery Office Limited
£price

HL Paper 179

Thinking Fast and Slow



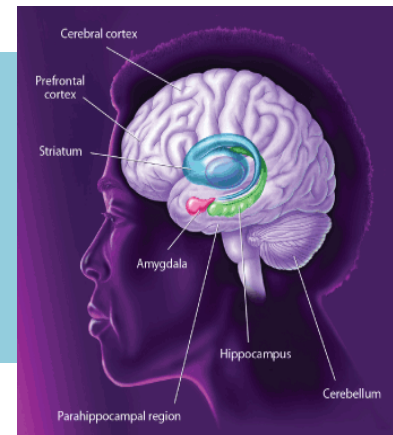
Thinking fast

- Easy: Needs little /no cognitive capacity
- Impulsive: Driven by immediate perceptual input, emotional desires & habits resulting from associative learning
- Intuitive: Future not represented,



Thinking slow

- Hard: Needs high cognitive capacity
- Conscious: Driven by decision and beliefs about what is good and bad
- Planned: Future is represented



What Works?

Making it fun is key

Strategic use of incentives,
defaults and creating a
healthy norm

Johnson & Johnson



BChydro 

Effective approaches are kept fresh
and relevant over the long term



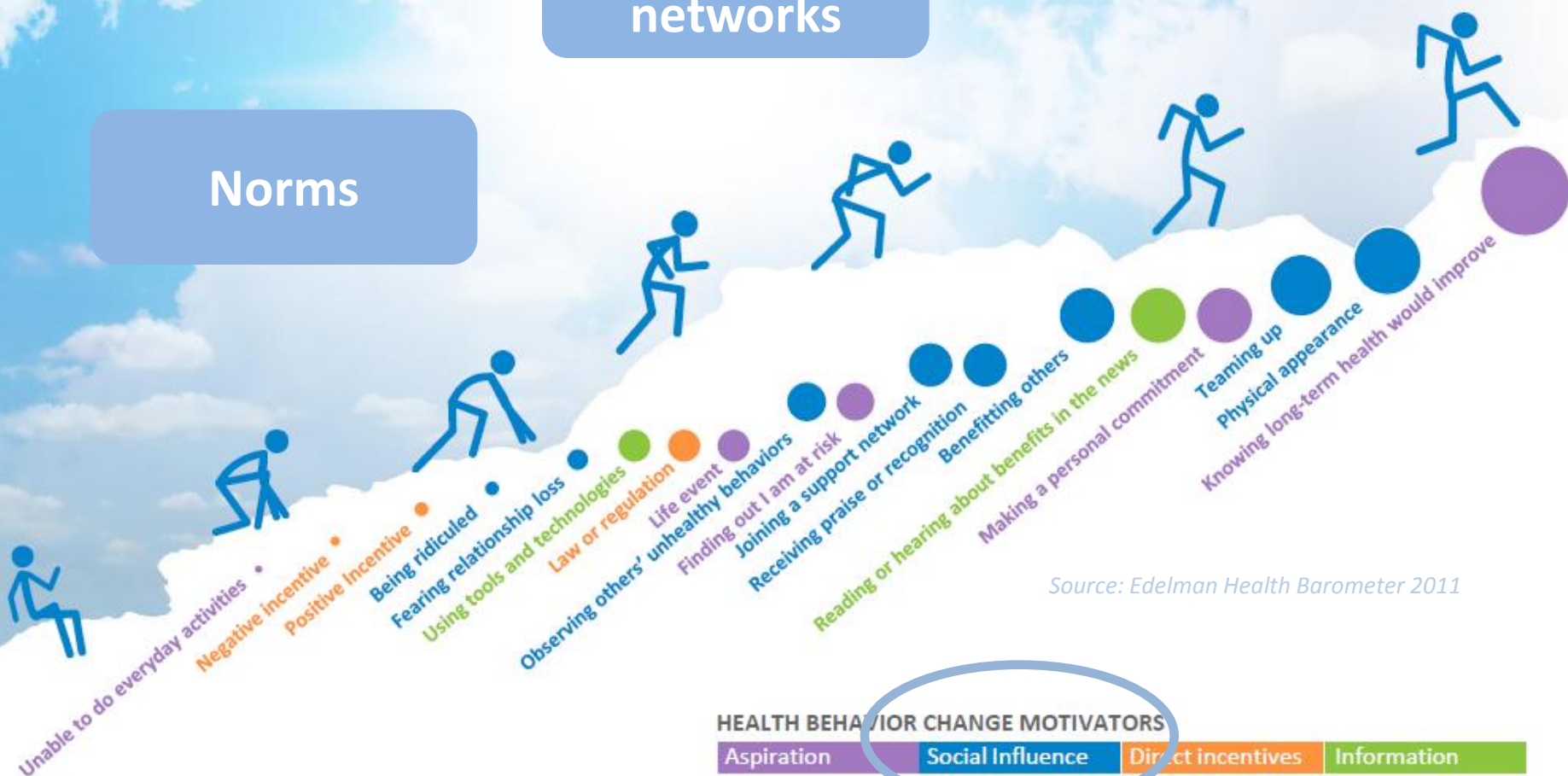
What Works?

Making us feel good



Co-creation

Social influence among the top motivators of health behavior change



Source: Edelman Health Barometer 2011

Q 36. Do you engage in any behavior that you think negatively impacts your health? (Global Regression Analysis); Q38. - 55. (Base = 'Yes' to Q36) Now please indicate how much each of the following factors would motivate you to change a behavior that negatively impacts your health. Use a nine-point scale where one means that the factor is "not at all motivating," and nine means it is "extremely motivating." (Global Regression Analysis); Q56. (Base = 'Yes' to Q36) After considering the factors in the previous question, now how motivated are you to change the behavior that negatively impacts your health? (Global Regression Analysis) Q58. Have you ever tried to change a behavior (s) that negatively impacts your health? (Global)

Framing: quality of life goals

In a randomised study, people with health/ healthy ageing goals exercised less than those with daily quality of life goals.

“Because immediate payoffs motivate behaviour better than distant goals, a more effective “hook” for promoting sustainable participation might be to rebrand exercise as a primary way individuals can enhance the quality of their daily lives.”

Source: Rebranding exercise: closing the gap between values and behavior, International Journal of Behavioral Nutrition and Physical Activity (2011)

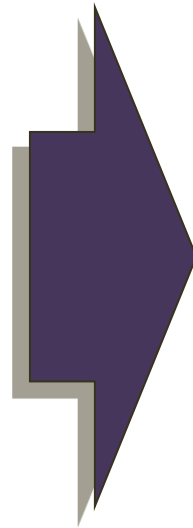
Quality of life goals:

- ❖ *Look and feel good*
- ❖ *Be confident and happy*
- ❖ *Have great relationships*
- ❖ *Have the energy for what I want to do*

New approaches to behaviour change

Old

- Negative
- Fear
- Stop
- Knowledge
- Transitory
- Professional led



New

- Positive
- Life and health
- Start by small steps
- Skills for action
- Sustained
- User led

Behaviour change insights: MINDSPACE+

MINDSPACE+	
Messenger	We are heavily influenced by <u>who</u> communicated information
Incentives	Our response to incentives are shaped by predictable mental shortcuts such as strongly avoiding losses
Norms	We are strongly influenced by what others do
Defaults	We 'go with the flow' of pre-set options
Salience	Our attention is drawn to what is novel and seems relevant to us
Priming	Our acts are often influenced by sub-conscious cues
Affect	Our emotional associations can powerfully shape our actions
Commitment	We seek to be consistent with our public promises, and reciprocate acts
Ego	We act in ways that make us feel better about ourselves
Self efficacy	Our belief that we have the skills and motivation to carry out a behaviour change successfully
Agents and networks	Our behaviours and choices can be influenced by individuals (agents) or groups (networks) that we listen to or, often sub-consciously, imitate.

Reasons to start....

"The main reason I want to give up smoking is to stop me teeth getting stained "

Reasons to continue....

... feeling fitter and happier, getting compliments on my appearance and feeling good about myself

Incentives used to tackle smoking



Green Bank
Caraga, Philippines



30-65% more likely to pass a non-smoking test after 6 and 12 months

Incentives

Gain money for you, your family

Commitment

Users enter into contract
and commit to regular
weekly deposits

Self-efficacy

Personalised coaching,
focussed on motivation

Reaching people in their daily lives with the right messenger, often “someone like you”, is important



“txt2stop”



2 x as many successful quitter

co-creation

smokers co -designed

salience

relevant to me

ego

motivating and supportive

Engaging fast and slow thinking to tackle smoking

Individual Reflective system	Situation Automatic system
Provide information & encourage reflection E.g. Inform people of the health risks of smoking and how to get help	Change the environment 'Choice architecture' E.g. Remove tobacco products from point of sale, remove vending machine
Strengthen self-efficacy skills E.g. Encourage quitters to set a quit date	Change the social environment, social norms E.g. Ban smoking in public places
Develop self-efficacy skills & encourage use of networks E.g. Encourage quitters to befriend non-smokers	Change the incentives in the economic environment E.g. Raise costs of tobacco products – disincentivise smoking
Communicate the social norms E.g. Let people know that most people don't smoke and want to give up	Make it easy: remove visual cues for smoking E.g. Advertising, ash trays, lighters

How does this work in practice?



Packs designed for women more appealing

Doxey, J & Hammond, D (2011)



Living close to a tobacconist makes it harder to quit

Reitzel, L et al. (2011)



Picture warnings on packs more effective than text

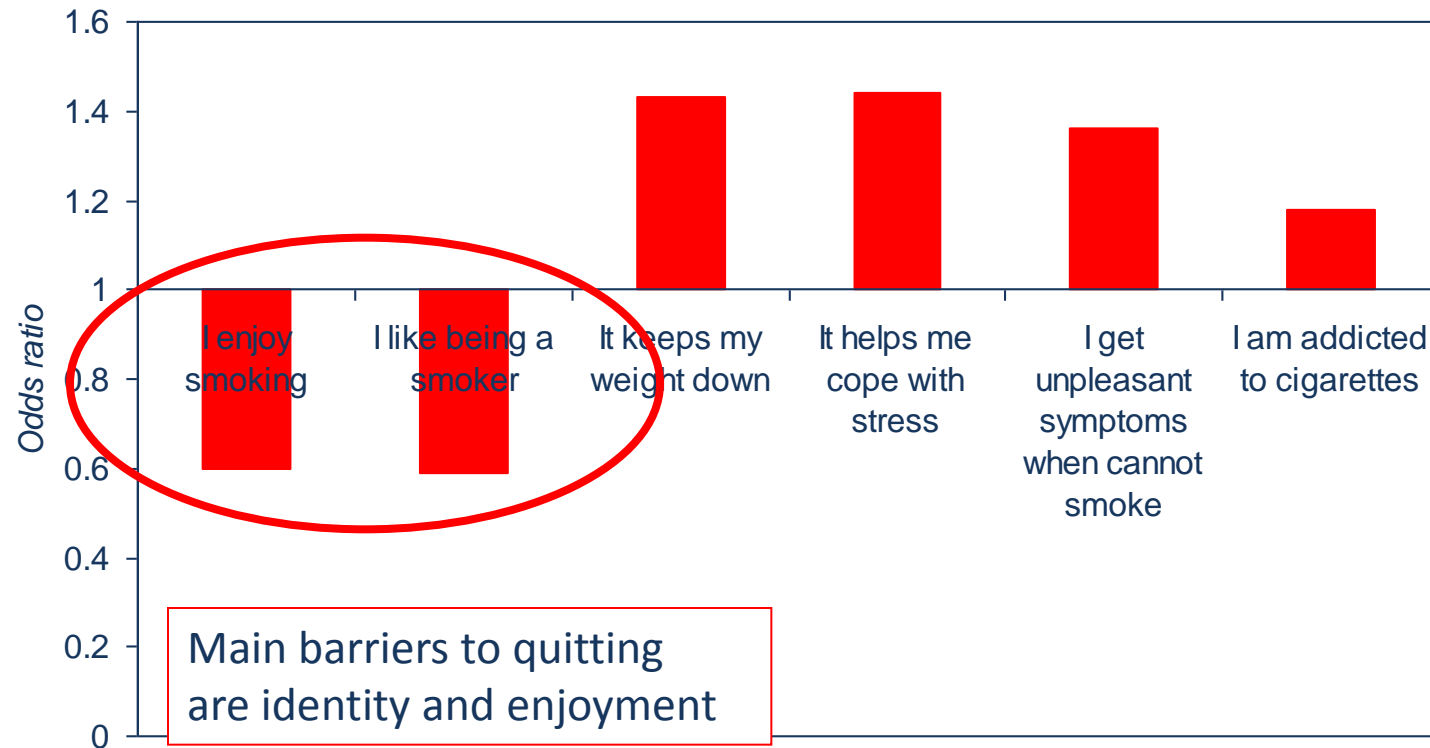
Hammond, D (2011)



People forget what displays look like after they are removed – denormalising smoking

McNeill, A (2011)

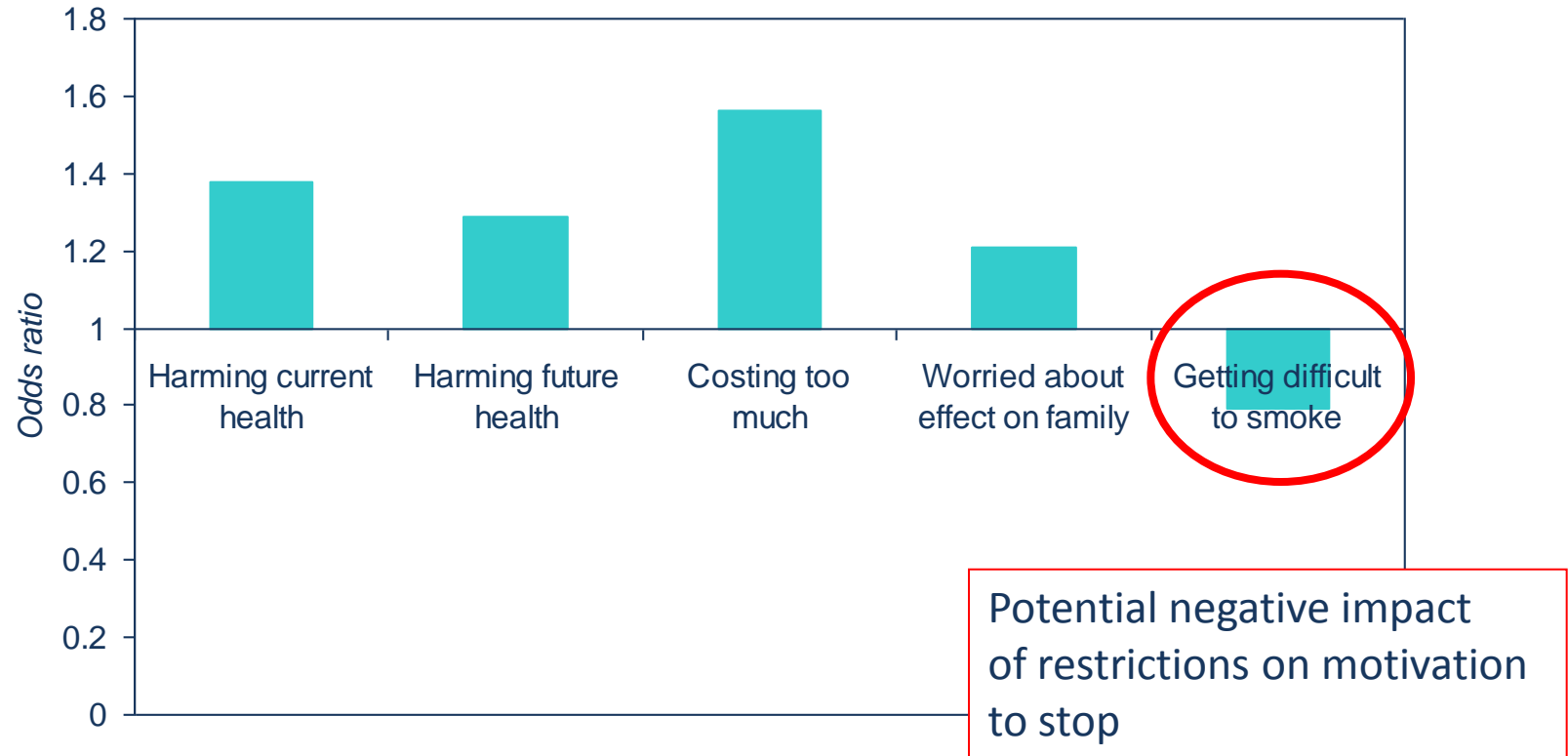
Association between smoking motives and attempts to quit in the past year



Final model from forward stepwise logistic regression of attempt to stop in past 12 months on to beliefs about smoking. Odds ratios less than 1 represent negative associations. N=3033

Smoking Toolkit Study:
www.smokinginengland.info

Association between motives to stop smoking and attempts to quit in the past year



Final model from forward stepwise logistic regression of attempt to stop in past 12 months on to beliefs about smoking. Odds ratios less than 1 represent negative associations. N=5647

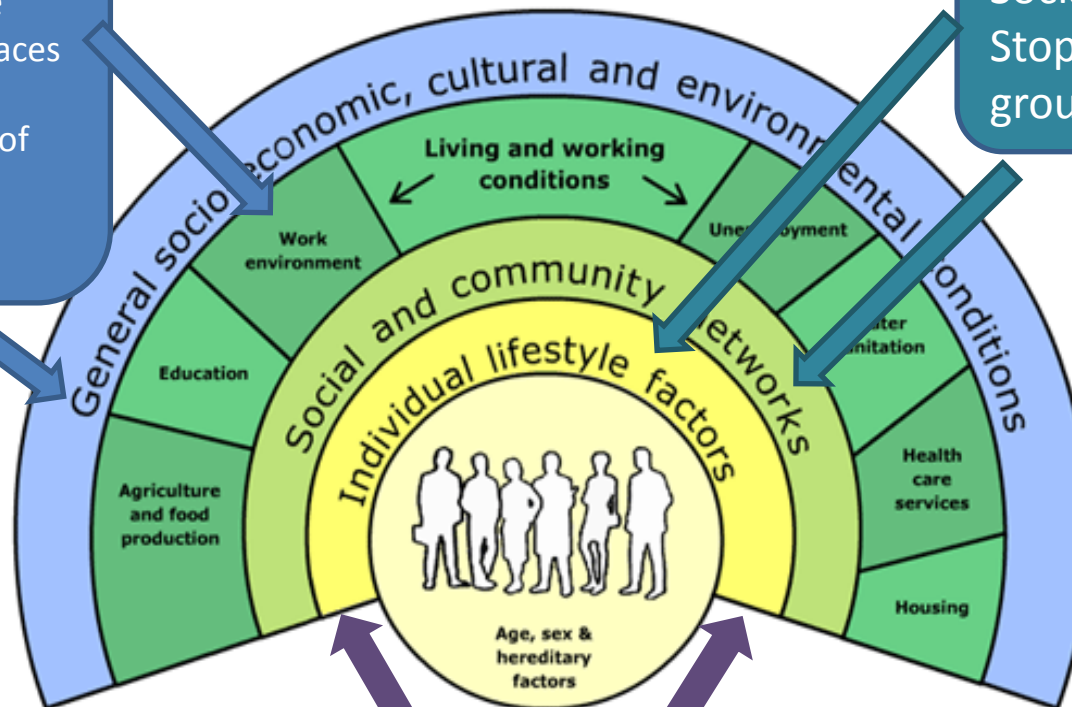
Changing behaviour comprehensively across the system

Population Level

Choice architecture
smoke free public places
removing tobacco products from point of sale
tax on tobacco

Networks

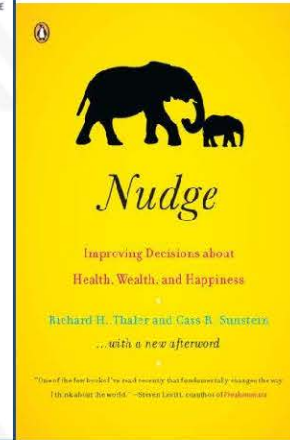
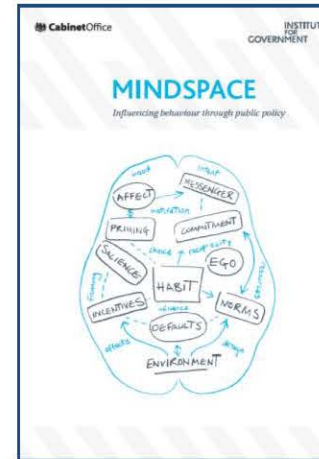
Social norms
Stop smoking support groups



Individual

Change routine
Find other ways to keep mouth and hands busy

Designing for human nature



Thank you!