



VTERB Media & Evaluation Committees 2015 Review

Agenda



- 2015 Program Goals
- 2015 Communication Objectives
- Summary of Measurements of Success
- Communications Plan and Results
- Program Behavioral Outcomes

Tobacco Cessation Program Goals



**YOU CAN QUIT.
WE CAN HELP.**

Vermont Department of Health

Program Goals



Modification of behavior

- Reduce smoking by Vermont adults and youths
- Increase the number of Vermonters who attempt to quit smoking
- Reduce exposure to secondhand smoke

The Target



Adult Vermonters (25-34 years old) most likely to smoke:

- low SES: income (HHI <\$30k) and uninsured
- high school degree or less
- slightly more likely to be male

Communications Objectives



Changes in knowledge and attitude

- Increase brand awareness
- Increase benefits recall
- Increase perceived brand relevance
- Increase intent to quit
- Increase website effectiveness

3E's of Communications Measurement

Effect

Impact on
specific marketing
goals

Lift on
Key Performance
Indicators

← OUTCOMES LED

3E's of Communications Measurement

Effect

Impact on specific marketing goals

Lift on Key Performance Indicators

Length of time on site, pages visited, demonstrated intent to quit/take action

← OUTCOMES LED

3E's of Communications Measurement

Engagement

Level of consumer involvement
(emotional/physical)

Interaction Rates
Actions Taken

Effect

Impact on specific marketing goals

Lift on Key Performance Indicators

Length of time on site, pages visited, demonstrated intent to quit/take action

← OUTCOMES LED

3E's of Communications Measurement

Engagement

Level of consumer involvement (emotional/physical)

Interaction Rates
Actions Taken

Awareness, visits to 802Quits.org, video views, website usability

Effect

Impact on specific marketing goals

Lift on Key Performance Indicators

Length of time on site, pages visited, demonstrated intent to quit/take action

OUTCOMES LED

3E's of Communications Measurement

Exposure

Opportunity for the brand message to be seen/heard

GRPS
Impressions
Reach & Frequency

Engagement

Level of consumer involvement (emotional/physical)

Interaction Rates
Actions Taken

Awareness, visits to 802Quits.org, video views, website usability

Effect

Impact on specific marketing goals

Lift on Key Performance Indicators

Length of time on site, pages visited, demonstrated intent to quit/take action

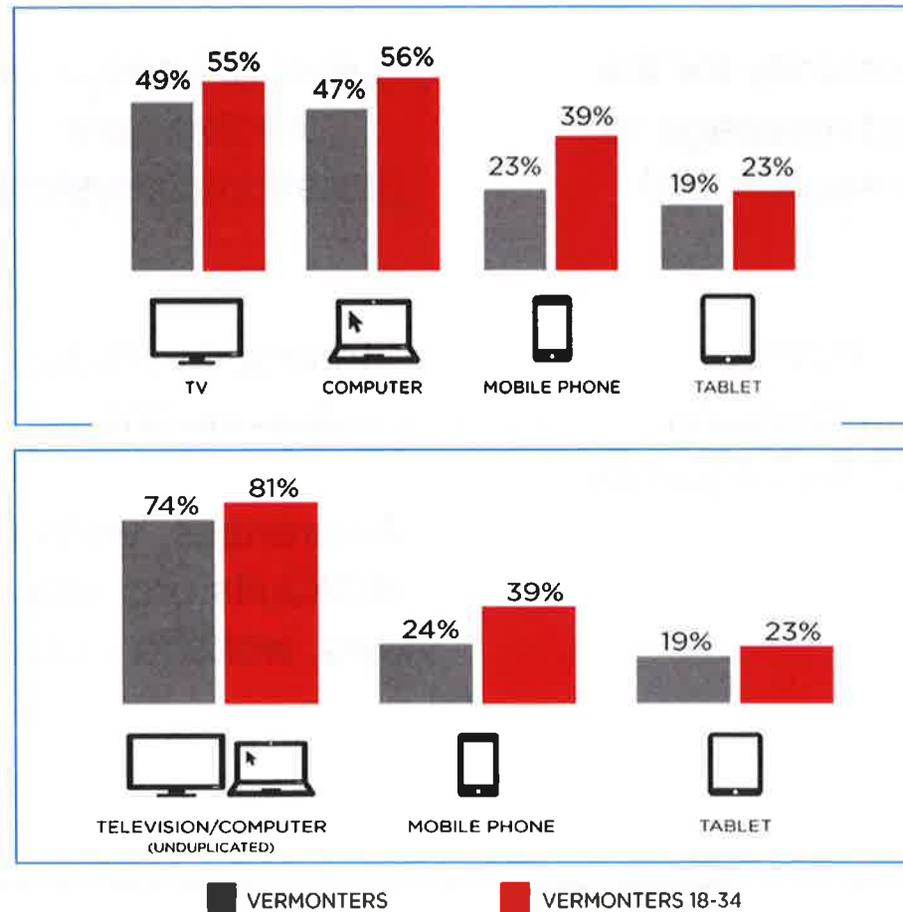


Exposure

How did we get in front of the right people at the right time?

Devices
Vermonters
use to watch
video in a
typical week.

Vermont Video Consumption
Study, Written by HMC and
conducted using Google Consumer
Surveys, Sept 2015 (n=2013)



Vermont Department of Health

Exposure

How did we get in front of the right people at the right time?

KPIs



Average 95% reach
19 frequency
165 GRPs per week
(150 GRPs per week CDC goal)



Average 81.5% reach
7.9 frequency

NOTE: GRPs measure the total of all **Rating Points** during an advertising campaign. A **Rating Point** is one percent of the potential target audience.

Exposure

How did we get in front of the right people at the right time?

#1 vehicle for reaching the target audience

TELEVISION

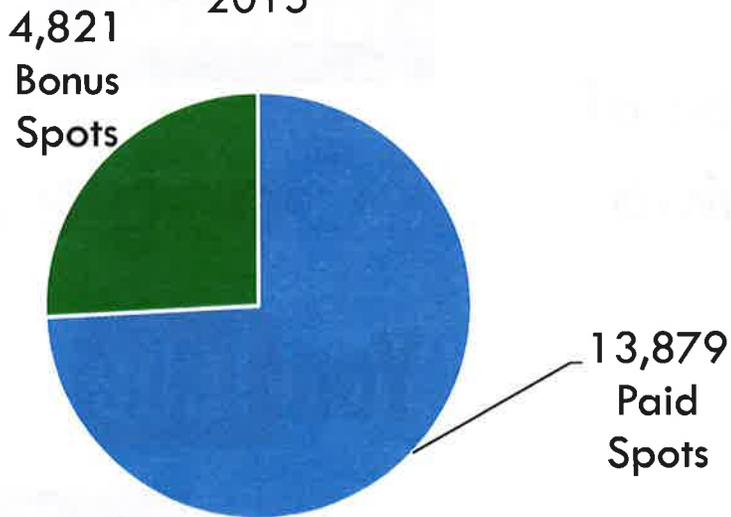


Exposure

How did we get in front of the right people at the right time?

TELEVISION

TCP Quit Tips & Quit Partners Added Value
2015



\$32,200 worth of added value

Exposure

How did we get in front of the right people at the right time?

DIGITAL

Power in combination of screens; micro targeted

facebook

hulu

Google AdWords

You Tube xfinity

PANDORA

Exposure

How did we get in front of the right people at the right time?

- Age, geo, income, interest, and topics targeting
- Hyper-local geo-targeting Quit Partners
- Extended PPC
- Cross-linked with relevant programs



Exposure

How did we get in front of the right people at the right time?

KPIs

DIGITAL



Average Reach 95.1%
13 frequency



Average Reach 78.2%
5.8 frequency



NRT
Real Stories
Providers
Pregnancy Protocol
Secondhand Smoke

Average Est. Reach 64%
6 frequency

Exposure

How did we get in front of the right people at the right time?

OUTREACH

Highly targeted distribution and message



NEW MATERIALS AND RESOURCES FOR YOU AND YOUR PATIENTS



Community Partner Coalitions



Exposure

How did we get in front of the right people at the right time?

OUTREACH

- ❑ Leveraged the critical role of provider referrals
- ❑ Broadened reach through statewide coalitions and partners
- ❑ Reached most vulnerable audience (Medicaid) where they live

Exposure

How did we get in front of the right people at the right time?

KPIs

OUTREACH



Providers

380 practices
19,000 nurses

Coalitions

15+ partners



*Medicaid
beneficiaries*

98,000 Vermonters

Engagement

How did we compel the audience to become involved with the message?

TELEVISION

- Aired best-performing ads based on digital engagement
- Aired new CDC Tips ads
 - On-going CDC evaluation of Tips campaign success

Engagement

How did we compel the audience to become involved with the message?

- Field trial supplemented national Tips media buy with additional local media buys (3x greater exposure). In the higher dose markets, there was:
 - Greater campaign recall among smokers and nonsmokers (87.2% vs. 75% smokers, 83.9% vs. 73.9% non-smokers).
 - An overall higher quit attempt rate among smokers (11%).
 - An increased likelihood of non-smokers to talk with family or friends about smoking danger and greater knowledge of smoking-related diseases.

Engagement

How did we compel the audience to become involved with the message?

TELEVISION

- 2013 National Youth Tobacco Survey measured Tips ad exposure by ad recall among adolescents. Study found:
 - Substantial adolescent awareness of Tips campaign (63% exposed to at least one Tips ad).
 - Current smokers, noncurrent smokers, and high-risk never-smokers reported greater exposure than low-risk never-smokers.
 - Supports evaluation of public health impact of Tips to include adolescent smokers (currently focused almost entirely on adult smokers).

Engagement

How did we compel the audience to become involved with the message?

- ❑ Ads referenced relevant location
- ❑ NRT and stories calls-to-action
- ❑ Added new content to stories, including Ana and Mike videos, to connect with new audiences (mental health and LGBTQ)
- ❑ Added CPT code information for providers
- ❑ Conducted primary research to inform optimization of 802Quits.org

Engagement

How did we compel the audience to become involved with the message?

KPIs

DIGITAL



.72% click-through rate



.52% click-through rate



<i>NRT</i>	.56% CTR
<i>Real Stories</i>	.48% CTR
<i>Providers</i>	.36% CTR
<i>Pregnancy Protocol</i>	.69% CTR
<i>Secondhand Smoke</i>	.27% CTR

Engagement

How did we compel the audience to become involved with the message?

KPIs

DIGITAL VIDEO

Top Quit Tip Videos	View Rate
Amanda's Tip	23%
Bill's Tip	20%
Another Tip from Terrie	19%
Rose's Tip	17%
Michael's Tip	17%

Top Quit Partner Videos	View Rate
Nelson	29%
Melissa	27%
Tips from the QPs	25%
Kim	18%

Engagement

How did we compel the audience to become involved with the message?

KPIs

WEBSITE

Very or somewhat satisfied 77.9%

Neither satisfied nor dissatisfied 18.2%

Somewhat or very dissatisfied 3.9%



802Quits.org Website Survey, Written by HMC and conducted using Google Consumer Surveys, May 2015 to Nov 2015.

Vermont Department of Health

Engagement

How did we compel the audience to become involved with the message?

- Using a letter from Dr. Chen, directly requested providers counsel and refer patients
- Developed materials for coalitions to directly engage the audience
- Used familiar, identifiable, champion Quit Partners to connect with Medicaid beneficiaries

Engagement

How did we compel the audience to become involved with the message?

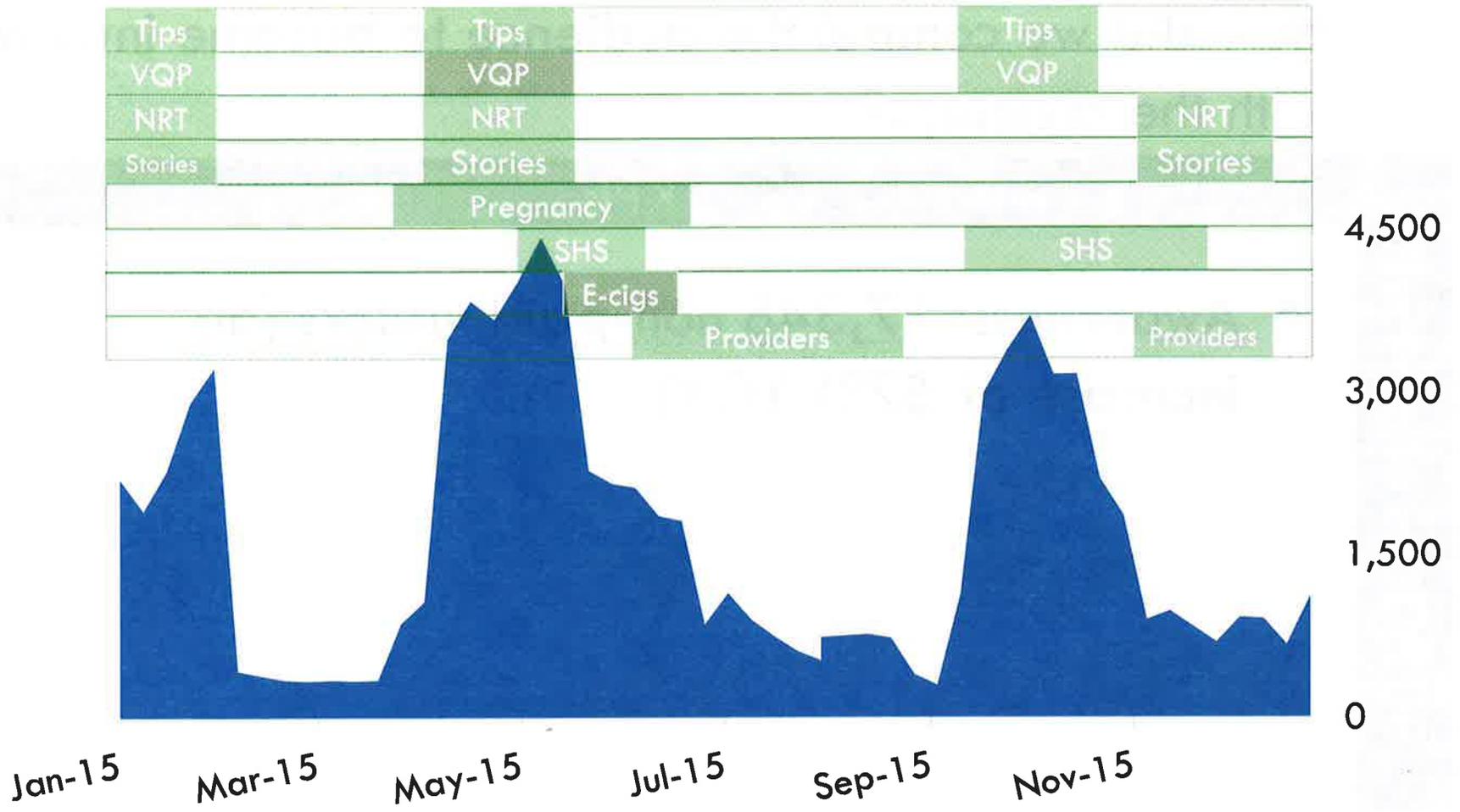
KPIs

- ❑ 3,445 individual visitors visited the Providers section over 4,726 sessions
- ❑ 50% Vermont Nurse Practitioner e-blast open rate
- ❑ 13% Click-through-rate from e-blast

E-Blast Open Rate Healthcare Benchmark 22.50%
E-Blast click-through rate Healthcare Benchmark 2.85%

Engagement

802Quits.org SITE VISITS



Engagement

How did we compel the audience to become involved with the message?

KPIs

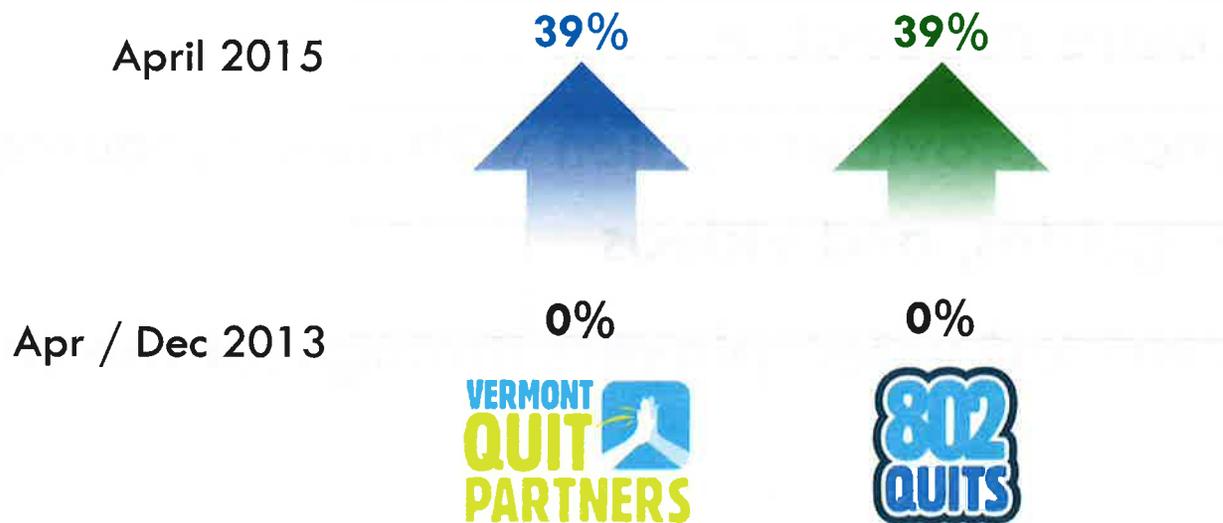
- Awareness: 17,348 non-paid visitors (an increase of 57% YOY)

Engagement

How did we compel the audience to become involved with the message?

KPIs

Vermont tobacco users who have heard of:



Effect

How did we transition people from the message to an action?

WEBSITE

- ❑ Drove visitors directly into relevant pages
- ❑ Revised selected copy to make content simpler and more actionable
- ❑ Enhanced provider section with new resources, tools, guides, and videos
- ❑ Streamlined video players throughout the site

Effect

How did we transition people from the message to an action?

KPIs

WEBSITE

- Pages with greatest time of engagement
 - Find a Vermont Quit Partner Map (3:14)
 - Resources – Smoke Free Zone (2:53)
 - Provider Resources (2:32)
 - Online Quit Help (2:26)
- Top pages visited (all traffic)
 - Find a Vermont Quit Partner Map (Quit Partners)
 - Free Gum & Patches (NRT)
 - Resources (Quit Tips)
 - Quit Help By Phone – Baby (Pregnancy Protocol)
- 44% of site visitors go to one of the four Ways to Quit sections

Effect

How did we transition people from the message to an action?

OUTREACH

- Provided quit tools order form and Quit Partner contact information directly to Medicaid beneficiaries
- Created interest using the 2014 Surgeon General report of impact of tobacco on whole body
- Gave providers robust information for themselves and for patients

Effect

How did we transition people from the message to an action?

KPIs

OUTREACH

- 117% increase in coaching calls among Medicaid clients*
- 112% increase in Medicaid registrants to 802Quits cessation programs*
- 1,270 digital Provider resource downloads^

*Jan-Aug 2013 vs Jan-Aug 2015

^Jun-Dec 2015

Program Outcomes

The impact of all Program components

