



Strategic communication toolkit for tobacco control policy change



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Contents

i.	Acknowledgements	iii
1.	About this Toolkit	2
2.	Introduction	3
3.	A strategic communication framework for policy change	4
4.	Action planning: Applying the P Process	8
5.	Strategic communication in action	10
5.1.	Step 1: Inquire – Why do we need to communicate?	10
5.2.	Step 2: Strategic design – How will we communicate?	14
5.3.	Step 3: Create and test – What are we communicating with?	20
5.4.	Step 4: Mobilize and monitor – Are we communicating effectively?	22
5.5.	Step 5: Evaluation and evolve – Where do we go from here?	22
6.	Conclusions	26
7.	References	27



1. About this Toolkit

The purpose of this Strategic Communication Toolkit for Tobacco Control Policy Change is to provide step-by-step guidance to help tobacco control focal points design and implement strategic communication interventions in support of tobacco control policy change. The guidance contained in the Toolkit is consistent with guidelines for implementation of the WHO Framework Convention on Tobacco Control (WHO FCTC).

The Toolkit provides a basic introduction to the concept of strategic communication and outlines simple steps and tools to guide users in applying various strategic communication interventions that would contribute to tobacco control policy change in their countries.

The topics outlined in this Toolkit stem from a capacity-building workshop that was organized by the Secretariat of the WHO FCTC in March–April 2022 intended:

- **to raise awareness and understanding of the role and application of strategic communication in tobacco control policy change; and**
- **to strengthen the capacity of tobacco control programme managers, health education and promotion specialists, and related government officials to design, implement, monitor and evaluate strategic communication interventions for tobacco control policy change.**

The tools presented in this Toolkit are drawn from successful strategic communication interventions that have been applied around the world to address the tobacco epidemic.

2. Introduction



In its broadest sense, strategic communication is the deliberate use of communication interventions to fulfil an organization's objective (Hallahan et al., 2007). In the field of tobacco control, the term can be understood as the deliberate process of applying evidence-based communication interventions to influence decision-makers and other relevant policy stakeholders to enact policies that are consistent with the WHO FCTC and its guidelines for implementation.

In public health practice, a closely related concept is health communication, which involves the study and use of communication strategies to inform and influence individual and community decisions that enhance health (Schiavo, 2013). For this Toolkit, we will use strategic communication as an overarching term that encompasses health communication and its applications as well. Strategic communication can play an essential role in supporting the implementation of the WHO FCTC, for example by generating public demand for policy action, fostering a supportive political environment for policy change and strengthening partnerships among tobacco control stakeholders.

At the onset, it is important to underscore that effective communication interventions must be grounded in strategy. This Toolkit briefly describes a strategic communication framework that was developed specifically for policy change. Afterward, a series of key questions are offered to guide application of the framework and action planning. These questions are based on the P Process, a widely used tool for planning, designing, implementing and evaluating strategic communication interventions.

The key questions for action planning include:

- **Inquire:** Why do we need to communicate?
- **Strategic design:** How will we communicate?
- **Create and test:** What are we communicating?
- **Mobilize and monitor:** Are we communicating effectively?
- **Evaluate and evolve:** Where do we go from here?

Each question will be briefly explained, and examples will be provided to help guide their application.

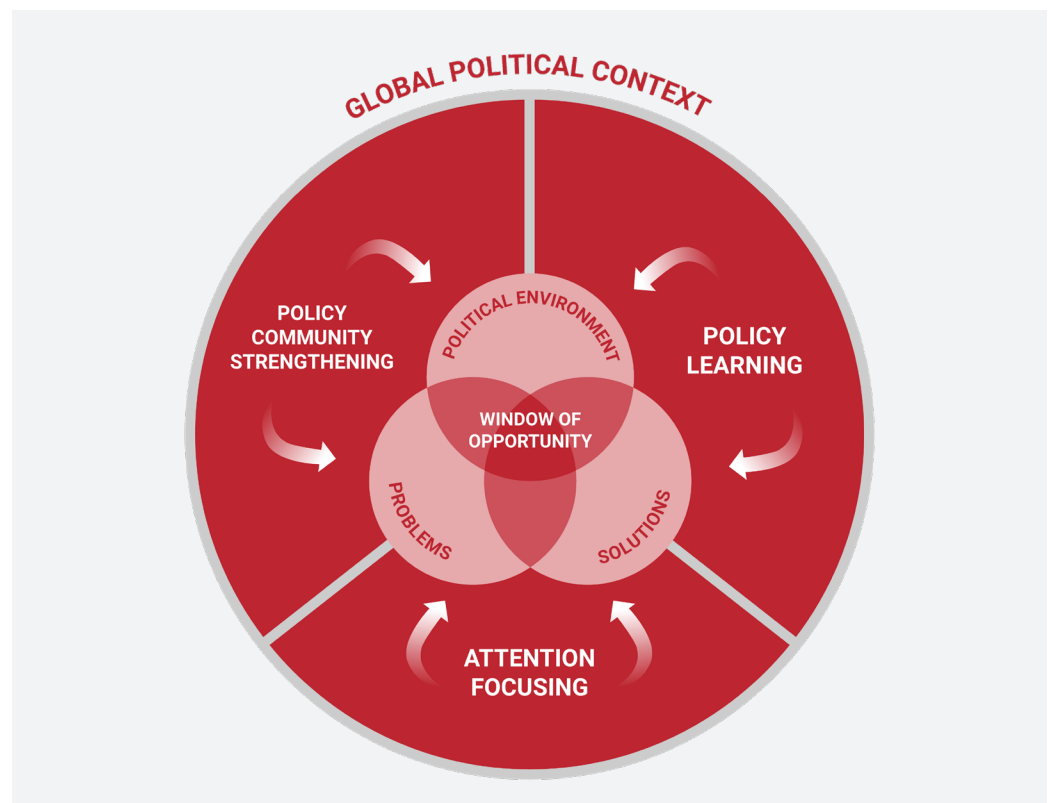
3. A strategic communication framework for policy change



This strategic communication framework (Fig. 1) was developed to guide the design of strategic communication interventions aimed at policy change. It identifies three broad domains of communication action that are linked to the multiple-stream approach for analysing policy-making. These include policy learning, policy community strengthening and attention focusing. Understanding each of these domains is essential for effective communication to support policy change.

- **Policy learning** deals with interventions aimed at increasing awareness, interest and understanding among policy-makers and decision-makers for a particular policy issue and solution.
- **Policy community strengthening** promotes consensus among key stakeholders around a recommended policy solution. It involves framing the problem and recommended solution in a way that will resonate with all key stakeholders in the policy-making process.
- **Attention focusing** refers to interventions that position the policy issue (for example, tobacco control) as a priority issue among intended audiences, such as decision-makers and their constituents.

Fig. 1. A strategic communication framework for policy change and development (Policy Advocacy Communication Enhanced, 2016)



Experience has shown that when these different domains of communication action converge, a window of opportunity for policy change is created, for example, political leaders are fully aware and convinced of the value of tobacco control policy interventions, the community of tobacco control stakeholders is united behind a specific policy action, and the public is supportive of that specific policy solution and demands accountability from their leaders.

To further understand how these domains of action can contribute to policy change, it is helpful to relate this framework to the multiple-stream approach for analysing policy-making. According to this approach, policy change occurs when three streams – for example, problem, policy and politics – interrelate to create a window of opportunity (Cairney and Jones, 2016).

- **The Problem:** For a policy change process to be successful, it is imperative to convince or inform policy-makers about the existence of a problem that needs urgent attention. A combination of communication interventions, for example, technical meetings and workshops, policy briefs, knowledge products, policy hearings, etc., under policy learning aims to generate precisely this level of interest and understanding.
- **The Policy:** Fostering consensus among partners around priorities for policy action, framing and ways of working is another essential ingredient to successful policy change. Interventions and activities under policy community strengthening are aimed at gathering solutions and promoting the policy change objective to stakeholders. Developing evidence-based arguments and disseminating these messages efficiently through the proper communication channels will be key.
- **The Politics:** This concerns the overall sentiment of government and the general public towards the policy issue. It can be influenced by changes in leadership, such as what occurs after an election, and through advocacy led by development and civil society organizations.
In simple terms, strategic communication can motivate or pressure policy-makers to support policy change by fostering a political climate that is favourable to tobacco control.

Table 1 summarizes the different domains of communication action and presents examples of strategic communication interventions under each domain.

Table 1. Domains of communication action (Policy Advocacy Communication Enhanced, 2018)

Domain of action	Goal	Intended audience	Sample interventions
Policy learning	Increasing awareness, interest and understanding among decision-makers and policy-makers of a particular policy issue and solution	Government decision-makers and policy-makers	<ul style="list-style-type: none"> • Technical workshops and meetings • Knowledge resources (for example, handbooks, websites, guidelines) • Media and edutainment (for example, radio and television programmes, podcasts, videos) • Policy hearings • Policy briefs and presentations
Policy community strengthening	Fostering consensus among stakeholders and partners around priorities for policy action, framing or ways of working	Civil society leaders, health community leaders, local government leaders, health workers	<ul style="list-style-type: none"> • Networking events and meetings • Newsletters • Research summaries and presentations • Training and capacity-building
Attention focusing	Position tobacco control as a top-of-mind issue among decision-makers and the general public	General public, community members, underserved and vulnerable populations	<ul style="list-style-type: none"> • Mass media and digital media communication campaigns • News and investigative journalism • Photo and video documentaries • Editorials and opinion pieces



4. Action planning: Applying the P Process

The P Process is a widely used and tested model in public health for planning evidence-based communication interventions (Fig.2). First developed in the early 1980s, the model is comprised of five different steps, each one building on the outcomes of the preceding step. To help apply the P Process, a series of key questions are offered at each step in this Toolkit. Fundamental to the P Process is the selection of an appropriate theoretical model for behaviour change, meaningful stakeholder participation and continuous capacity strengthening (Health Communication Capacity Collaborative, 2013). These steps can guide programme design, foster ownership among implementing partners, and ensure the sustainability of programmes and interventions.

Table 2 outlines key activities under each of the five steps of the P Process.

Fig. 2. The P Process (Health Communication Capacity Collaborative, 2013)

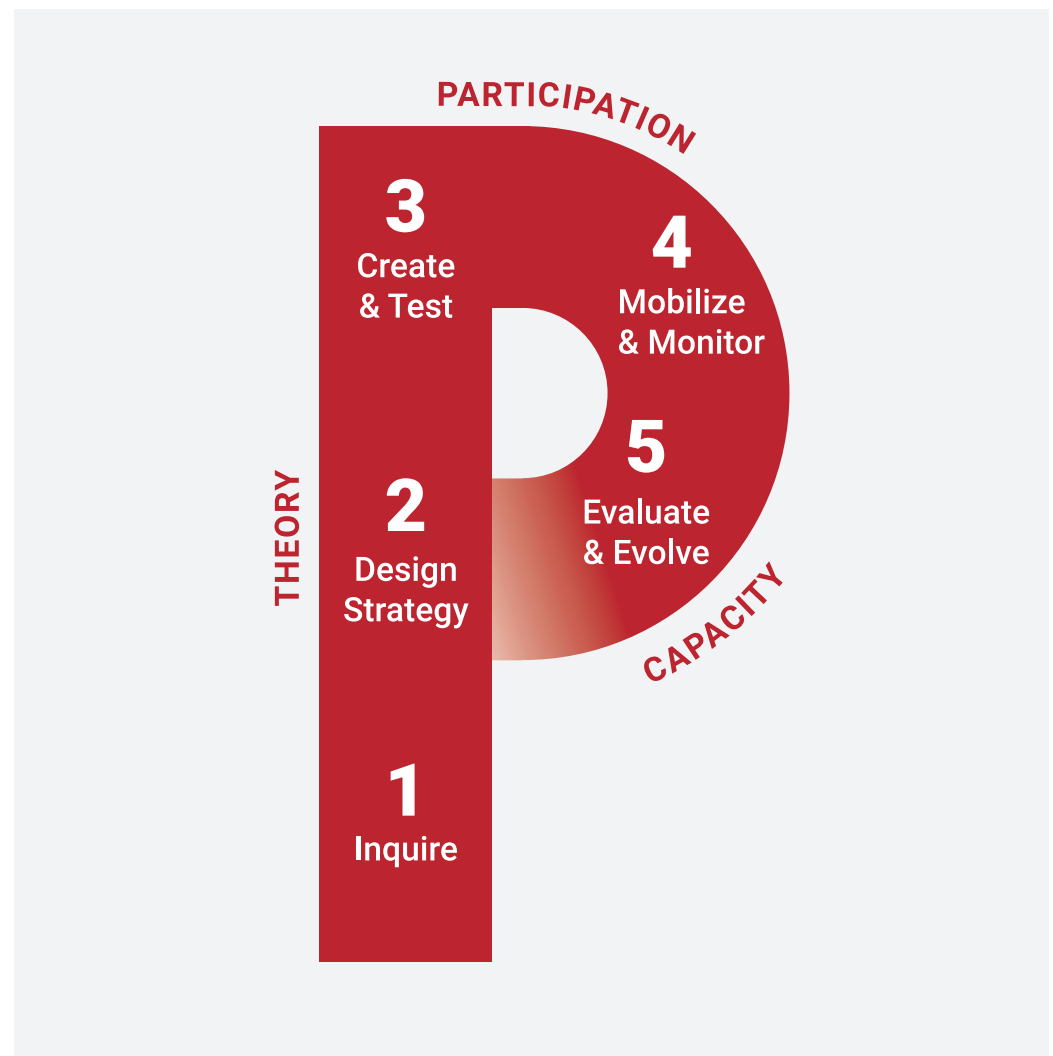


Table 2. Key activities of the P Process (Health Communication Capacity Collaborative, 2013)

Step	Key Activities
Step 1: Inquire – Why do we need to communicate?	Situation analysis Audience and communication analysis Formative research
Step 2: Strategic design – How will we communicate?	Establishing communication objectives Develop programme approaches and positioning Determine channels Draw up an implementation plan Develop a monitoring and evaluation (M&E) plan
Step 3: Create and test – What are we communicating?	Refine communication strategies and materials Develop and pretest campaign materials (if able) Revise and pretest materials again (if able)
Step 4: Mobilize and monitor – Are we communicating effectively?	Produce and disseminate Train trainers and field workers Mobilize key participants Manage and monitor the programme Adjust the programme based on monitoring
Step 5: Evaluation and evolve – Where do we go from here?	Measure outcomes and assess impact Disseminate results Determine future needs Revise/redesign the programme building on lessons learned for future campaign implementation

5. Strategic communication in action

This section considers each step of the P Process in greater detail and discusses how it can be applied to support policy change for tobacco control. It uses the same example throughout the various steps.

Let's begin!

5.1. Step 1: Inquire – Why do we need to communicate?

The first step to designing an effective strategic communication intervention is to conduct a thorough situational analysis. This analysis will reveal an understanding of the current policy context and issue, identify intended audiences, and describe barriers or enablers to successful policy change. The outcome of this step is a clear articulation of the single overarching communication outcome, or SOCO. A SOCO is the change one wants to see as a result of the communication intervention (World Health Organization, 2015). Note that the SOCO is not the key message nor is it a creative idea. Rather, it is a clear and concise statement describing the desired end of the policy change process.

Remember to keep it SMART – Specific, Measurable, Action-oriented, Realistic and Time bound. A well-articulated SOCO is the foundation for effective and strategic communication (Table 3).

Table 3. Steps in developing a SOCO (World Health Organization, 2015)

	Steps	Example
Step 1	What is your issue?	Tobacco products, for example cigarettes, are relatively affordable contributing to widespread consumption among young people in particular.
Step 2	Why do you want to focus on this issue and why do you want to focus on it now?	Raising tobacco prices through taxation reform is a cost-effective strategy to reduce tobacco consumption and its burden to public health. It will also raise much needed revenue that can be used to fund other public health measures such as universal health coverage.
Step 3	Who needs to change their behaviour?	Government leaders and policy makers.
Step 4	What is the change you want to see? (This is your SOCO)	Support from the highest levels of government to raise taxes on tobacco products is signalled, for example, the Prime Minister or President identifies tobacco tax reform as a priority piece of legislation in the forthcoming congress.

The issue identified in this step relates to the problem that will be addressed through policy change. It is closely related to the problem identification and analysis stage of the policy process. A clear understanding of the problem will determine the appropriate communication intervention or combination of interventions to support the desired change – that is a new policy is adopted, the current policy is changed or an existing policy is implemented.

WORKSHEET 1. Developing a SOCO

Consider the implementation of the WHO FCTC in your country and try to develop your own SOCO by answering the questions in this worksheet. You may want to use the examples from WHO's Effective Communications Participant Handbook (see page 13 of the Handbook).

What is your issue?

--

Why do you want to focus on this issue and why do you want to focus on it now?

--

Who needs to change their behaviour?

--

What is the change you want to see? (This is your SOCO)

--

After developing a SOCO, it is now time to consider possible intended audiences.

Audience analysis and segmentation are essential for the effective dissemination of information and evidence that will ignite the audience to action. It involves describing intended audience segments in terms of their role in the policy change process and their prevailing beliefs and motivations about the policy issue and proposed solution. A communication intervention is generally more effective when tailored to a specific audience segment.

In policy communication, there are generally two broad audience segments:

- **Primary audience segments** include people with authority to create or change a policy, for example, national and local chief executives, heads of agencies, legislators or parliamentarians, and other influential government officials.
- **Secondary audience segments** refer to individuals, groups or organizations that can actively influence policy-makers or policy-making. Community leaders, experts, media, development organizations, families and civil society organizations are part of this list.

For policy change, it is also advisable to segment audiences according to their level of governance and geographic scope (Table 4). Identifying audience segments in this way provides insight into their spheres of influence and potential pressure points that communication interventions can leverage.

Table 4. Sample audience segment matrix

Primary audience segments	
National	Heads of state, heads of government, department secretaries or heads of ministries, national programme managers, parliamentarians, technical or programme officers of relevant ministries, nongovernmental organizations and civil society groups
Local	Local chief executives (for example, governor, mayor, community leaders), local parliamentarians, health education and promotion officers, and community organizations
Secondary audience segments	
National	National media, health professional associations, key opinion leaders or tobacco control champions, scientific and academic communities, development organizations and partners
Local	Local media, families, and communities

Once these segments have been identified, a common approach to deepen understanding of the audience is to describe the audience according to shared characteristics across the following variables:

- **Geographic:** Audiences are grouped based on their location and/or the level of government where audiences operate, for example, national, local or community.
- **Demographic:** Audiences are grouped based on age, gender, family size, life stage, income, occupation, education, religion race or nationality.
- **Psychographic:** Audiences are grouped according to personality traits, values, beliefs and lifestyles.
- **Behavioural:** Behavioural patterns and habits are utilized to describe audience segments.

Not only does this help in refining intended audience segments for the intervention, it also informs the subsequent selection of channels and materials that can best deliver the message.

Finally, to further describe audience segments, it is important to conduct what marketing experts refer to as audience profiling to provide insight into appropriate messages for policy-makers across the political spectrum. For example, legislators may be grouped according to the following segments based on their policy orientation towards tobacco control: 1) budget-oriented sceptics; 2) action-oriented supporters; and 3) passive supporters.

For tobacco control messages to resonate with these different types of policy-makers, messages need to be calibrated and customized accordingly (Purtle et al., 2018). Table 5 is an example of how to tailor a communication strategy to the political orientation of policy-makers.

Table 5. Sample audience profiles and corresponding communication strategies

Audience segment	Communication strategy
Budget-oriented sceptics	Conservatism; emphasize cost of unaddressed health problems; destigmatize the health issue Example: Messaging should revolve around the enormous financial burden that tobacco use puts on a country's public health budget; highlighting the cost of treating tobacco-related diseases, as well as the potential revenue that could be generated by raising taxes on tobacco products.
Action-oriented supporters	Provide concrete information about the evidence behind the policy options; reinforce their support by mobilizing stakeholder groups Example: Provide a range of evidence-based arguments in support of tobacco tax reform. These arguments should go beyond the public health benefits and highlight the social and economic benefits of tobacco tax reform as well.
Passive supporters	Mobilize through evidence and platforms for engagement Example: Because the goal is to convert them into action-oriented supporters, a personalized approach that highlights the potential benefits of tobacco tax reform to their priority issues or constituencies may be effective. For example, highlighting the potential dividends of tobacco tax reform for youth development and education through additional revenue that can be used to fund other government programmes.

Referring back to the SOCO, use the worksheet below to describe intended audience segments according to the following parameters.

WORKSHEET 2. Profiling your audience			
Intended audience segment: Who is the primary target of the communication intervention?			
Geographic <i>At what level of government does the audience operate?</i>	Demographic <i>What is their gender, average age and level of education?</i>	Psychographic <i>What are their beliefs, preferences and values related to the policy issue?</i>	Behavioural <i>Have they historically supported tobacco control? What positions have they taken in the past?</i>

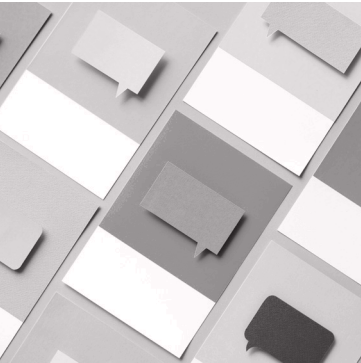
5.2. Step 2: Strategic design – How will we communicate?

At this stage, the strategy is brought to life through messages that resonate with the intended audience, delivered through appropriate channels and communication products, and supported by an implementation plan.

Policy messages are statements or pieces of information that provide the foundation for the development of other forms of content. A strategic approach to messaging aims to influence the audience's behaviour and decision-making. Our goal is to communicate effective policy messages that are evidence-based, contextualized and action-oriented.

Evidence-based messages are typically taken from research findings. These messages highlight the benefits of taking a specific course of policy action. Some important points to remember when developing evidence-based messages are:

- gather results from research that you have conducted yourself or research that you have cited that was conducted by peers and other tobacco control organizations;
- avoid information overload, highlight the most important pieces of information from these sources, that is, present results only and do not focus too much on methodology and funding sources, etc.;
- focus on findings that are relevant to the specific policy that you are trying to advance, for example, findings on the reach and influence of tobacco marketing among young people to support a ban on tobacco advertising;
- directly relate findings to recommendations, especially the benefits of taking a specific course of policy action; and
- translate findings into simple language by avoiding technical jargon.



Contextualized messages are research findings that are framed in such a way that motivates action, that is, evidence that expresses a direction, reveals new information, exposes consequences and implies a need to act in a certain direction. Some important considerations when framing these messages include:

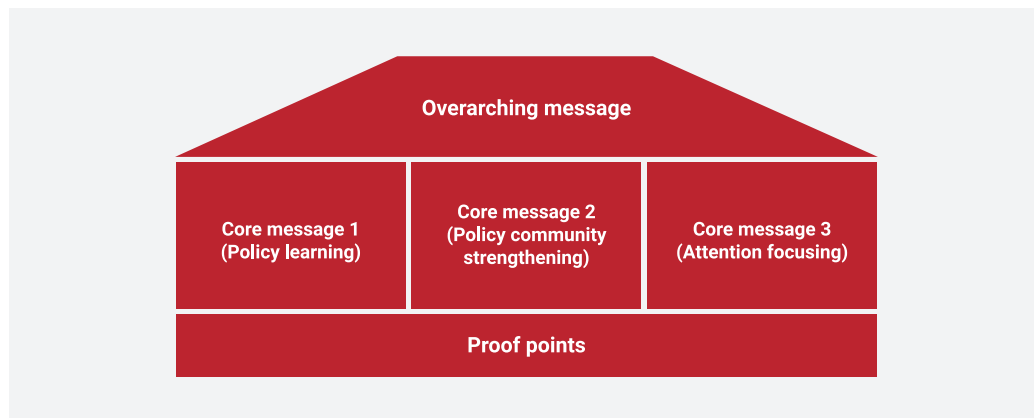
- Magnitude or scale – How large is the impact of this issue if it is not addressed, for example, how many millions of people will be affected if we do not act on tobacco control now?
- Time trend – What are the implications of inaction in the short, medium and long term?
- Social or health outcomes – How does tobacco control affect a country's overall development?
- Existing goals or commitments – How does tobacco control policy contribute to national, regional, and global health and development targets and goals?
- Values and principles – How does tobacco control policy align with social norms and enshrined legal principles in a country's constitution?
- Costs or savings – What are the financial implications of tobacco control inaction towards the national budget?

Action-oriented messages are those that provide specific recommendations or actions needed. They should describe who is responsible for a specific intervention (for example, legislators sponsoring specific tobacco control legislation) and start with action words to make the statements more impactful (for example, support tobacco control legislation, enforce existing tobacco control laws, penalize tobacco industry violations, etc.).

To help develop these key messages, we will use a “message house”. The message house is a tool used to support your SOCO with evidence-based key messages that inform the framing of talking points, campaign branding and slogans, creative messages and other communication initiatives. A message house is composed of:

- **Overarching message:** This provides the overall theme and sets the tone for the interventions.
- **Core messages:** These are messages that support the overarching message. Furthermore, these messages can be organized according to the three domains of communication action for policy change, namely: policy learning; policy community strengthening; and attention focusing.
- **Proof points:** These represent factual evidence and arguments that support the core messages.

Fig. 3. Message house (Thomas, 2016)



Keeping your SOCO and intended audiences in mind, answer the guide questions and fill in the different components of the message house. Examples have been provided below.

WORKSHEET 3. Building your message house		
<p>Single overarching communication outcome (your SOCO) <i>Support from the highest levels of government to raise taxes on tobacco products is signalled, for example the Prime Minister or President, identifies tobacco tax reform as a priority piece of legislation in the forthcoming congress.</i></p>		
<p>What are the messages that support your SOCO?</p>		
<p>Core Message no. 1 on policy learning (intended audience segment: policy-makers)</p> <p><i>Article 6 of the WHO FCTC highlights tax as an effective means of reducing the demand for tobacco and increasing government revenue to fund other public health and social development programmes.</i></p>	<p>Core Message no. 2 on policy community strengthening (intended audience segment: health sector and tobacco control stakeholders)</p> <p><i>Raising taxes on tobacco is a cost-effective strategy that will advance tobacco control and contribute to wider public health reforms, such as universal health coverage (UHC). As such, it is an agenda that can mobilize a wide range of partners and stakeholders for a truly whole-of-society approach to health promotion.</i></p>	<p>Core Message no. 3 on attention focusing (intended audience segments: media, civil society organizations and concerned public groups)</p> <p><i>Tobacco use is a global public health threat that harms millions, burdens health systems, weakens economies and impedes sustainable development. Raising tobacco taxes is a win-win solution that can address the government's health and fiscal challenges.</i></p>
<p>Article Proof points (What are the evidence and facts that support the overarching message?)</p> <ul style="list-style-type: none"> • If all countries increased the amount of excise tax charged on cigarette packs by 50%, there would be 49 million fewer smokers and at least 11 million tobacco-related deaths averted. • Price increases through taxation usually bring the biggest health benefit to people with the least money to spend, including young people. The effects of price increases on young people are significant, reducing tobacco consumption at a rate two to three times higher than among adults. • If taxes were increased by 50% per pack, governments would earn an extra US \$101 billion. Such funds could go towards combating cancers, cardiovascular diseases and other noncommunicable diseases. 		
<p><small>Source: World Health Organization. "Promoting taxation on tobacco products." Accessed January 25, 2023. https://www.who.int/europe/activities/promoting-taxation-on-tobacco-products</small></p>		

After crafting key messages, we move on to identifying the communication channels most suited for your intended audiences. Communication channels refer to the different mediums and touchpoints that are used to transmit messages to intended audience segments. When considering the SOCO, some channels will be more strategic than others. For example, engaging legislators in one-on-one meetings may be more strategic in getting them to support tobacco control policy as opposed to launching a full social media campaign at the onset. Before we continue, it is worth highlighting three broad categories of communication channels:

- **Interpersonal and community channels.** Used to appeal directly to leaders and decision-makers. These include convening meetings, conferences and workshops and deploying niche forms of media, for example, newsletters and mailing lists, to provide information directly.
- **Digital channels.** Social media platforms, websites, apps and podcasts that transmit messages by leveraging the reach of the internet. Social media can be an effective means of enjoining public support through simple and actionable online initiatives, crowdsourced content and platforms that catalyse engagement and action.
- **Mass media channels.** Communication materials broadcast through television, radio, films, magazines, newspapers and other mass media outlets are efficient in reaching vast segments of the population and shaping the public narrative and agenda surrounding an issue.

The Channel Plan Worksheet will help planners identify the appropriate channel for the planned communication intervention. Some examples have been provided for further guidance. Refer also to the checklist in the worksheet for additional guidance.

WORKSHEET 4. Mapping your channel plan and intervention mix			
	Policy learning	Policy community strengthening	Attention focusing
<i>Interpersonal and community</i>	<i>What are the interventions tailored solely to decision-makers?</i>	<i>What kind of meetings or gatherings should be conducted to foster consensus among the community?</i>	<i>What multimedia materials can we roll out to capture the attention of the public?</i>
<i>Social and digital</i>	<i>What type of workshop, webinar and masterclass can we conduct to further educate and inform policy-makers?</i>	<i>What kind of social and digital media platforms can we establish to ensure data and evidence on tobacco control are widely accessible and available to the public?</i>	<i>What are the different social media campaigns that we want to prioritize?</i>
<i>Mass media</i>	<i>What type of handbooks and guidelines should we release?</i>	<i>What newsletters should we publish to update the public with recent developments on tobacco control?</i>	<i>What kind of public service advertising can we disseminate to raise public awareness on tobacco control?</i>
<p>Below is a checklist to help select the appropriate channel for the planned intervention:</p> <ul style="list-style-type: none"> • <i>Does the channel reach members of the intended audience?</i> • <i>Will the channel reach audience members when they are most likely to pay attention to messages?</i> • <i>Will the channel reach audience members during moments of action or deliberation?</i> • <i>Do audience members trust the channel?</i> • <i>Is the channel the best for conveying complex or simple information?</i> • <i>Does the programme have the budget, time and resources to use the channel effectively?</i> • <i>Will the channel reinforce messages shared through other channels?</i> 			

Having determined the appropriate channels for your interventions, use Worksheet 5 to outline the specifics of your implementation plan.

WORKSHEET 5. Coming up with an action plan					
Project name: <i>What is the project name or campaign title?</i>					
Time period: <i>What is the time frame for the intervention from planning to implementation and evaluation?</i>					
Objective: <i>What specific communication objective does this workplan support? It is important to develop multiple workplans for projects with multiple objectives</i>					
Activity	Description	Timetable	Resources	Accountability	Indicator
Specific communication intervention, for example, event, product, programme, etc.	Target audience, theme and product description	Timeline to develop, produce, implement and evaluate	Human and financial resources	Responsible department, unit or focal point	Input, process or impact indicators
Notes: <i>May contain additional notes such as project or funding cycles, project notes if part of a multi-year engagement, donor funding source, staffing and other pertinent project details.</i>					

5.3. Step 3: Create and test – What are we communicating with?

Communication materials are comprised of a range of products that support the communication plan (Table 6). They can be further categorized into two kinds: limited reach (policy briefs, pamphlets, information sheets, newsletters, posters, etc.) and mass reach (television ads and programmes, radio ads and programmes, newspapers and magazines, online content, etc.). Again, the choice of materials will depend on the target outcome and intended audiences.



Table 6. Samples of limited reach and mass reach communication materials

Limited reach: intended for a targeted audience	Mass reach: intended for general public
<ul style="list-style-type: none"> • Policy briefs • Pamphlets • Information sheets • Newsletters • Posters • Apparel (for example, T-shirts and caps) • Stickers • Videos 	<ul style="list-style-type: none"> • Television ads and programmes • Radio ads and programmes • Newspapers and magazines • Online content

The selection of communication materials will depend on the SOCO and the communication channels identified in previous steps. Typically, creating the actual materials will require working with a creative team comprised of producers, writers, graphic designers and artists, among others. Developing these materials will go through a creative process from conceptualization to drafting or prototyping to finalization and production. However, before these products are finalized it is important that they are first pretested.

Pretesting involves exposing the creative concept and draft materials to representatives of intended audiences (Table 7). This is carried out through qualitative research methods, such as focus group discussions or in-depth interviews, and quantitative research methods, such as surveys, which can provide statistically valid data.

Table 7. Key questions for pre-testing communication materials (Health Communication Capacity Collaborative, 2020)

Aspect to be pretested	Description	Key questions
Attractiveness	Whether the message or material commands attention	<ul style="list-style-type: none"> • What do you like about this message/material? • What do you not like about this message/material? • What was the first thing that caught your eye?
Comprehension	Whether the information is understood as intended	<ul style="list-style-type: none"> • What does the message/material say? • Who do you think the message/material is speaking to? • What words/sentences/images are difficult to understand?
Acceptance	Whether the material is culturally and socially acceptable	<ul style="list-style-type: none"> • Is there anything about this message/material that you find offensive or inappropriate? • Is there anything about this message/material that someone in your community may find offensive or inappropriate?
Relevance	Whether the information is of interest to the intended audience	<ul style="list-style-type: none"> • What type of people do you think should read/watch this message/material? • In what way are those people different from you or the same as you?
Call to action	Whether the audience understand the call to action	<ul style="list-style-type: none"> • What does the message/material ask the audience to do?
Persuasion	Whether the key benefit is persuasive and appealing to the intended audience	<ul style="list-style-type: none"> • Why do you think you should do what the message/material asks you to do? • How likely are you to do that and why?
Improvement	If and how the material needs to be improved	<ul style="list-style-type: none"> • What would you change in this material/message to make it more appealing to you? • What information do you think is missing? • What else, if anything, would you like to include in this message/material?

After pretesting, summarize the feedback for the creative team and finalize the materials. Depending on the feedback, it may be necessary to go through more than one round of pretesting to ensure that the communication materials resonate with intended audiences.

5.4. Step 4: Mobilize and monitor – Are we communicating effectively?

Due to financial and human capital constraints, many public health campaigns end in the implementation phase. However, it is imperative that monitoring plans be integrated into public health campaigns as they are an important component of any communication programme or project. Throughout the course of implementing a strategic communication intervention, continuous monitoring is important to assess progress towards stated goals and adjust tactics and approaches along the way. An approach to monitoring communication activities is depicted in Table 8.

Table 8. Approach to monitoring (adapted from IDF Europe Communications and Advocacy Toolkit, 2011)

Monitor your audiences	Monitor your reputation	Monitor your channels	Monitor your network
<p>Establish a baseline and record changes in knowledge, attitudes and practices or target behaviours among different intended audience segments.</p> <p>Conduct regular focus group discussions with intended audience segments to uncover insights, guide message development and track changes in perceptions.</p>	<p>Track messaging of published media articles and statements from opinion leaders and other public personalities.</p> <p>Document public sentiment messaging and mentions of the campaign on social media (comments, posts, etc.) by the public, partners, networks and leaders.</p>	<p>Record frequency and value of earned media. Monitor partner institutions, establishments and communities where materials have been published and implemented.</p> <p>Ask partners regarding their observations in changes in target behaviour.</p>	<p>Document networks, organizations, institutions and other partnerships that were activated to promote and support tobacco control measures.</p> <p>Ask assistance from partners to determine reach of communication materials through their networks.</p>

5.4. Step 5: Evaluation and evolve – Where do we go from here?

At the conclusion of an intervention, an evaluation is carried out to determine in a systematic and objective manner whether the project was successful based on predetermined indicators (see Worksheet 6). This phase assesses the effectiveness of the strategies and actions towards meeting the desired communication outcome. It is also during this step when lessons learned and best practices are distilled in order to inform future efforts.

In this regard, there are generally two approaches to evaluation. The process evaluation approach focuses on the various activities that were carried out, their corresponding outputs and whether or not they were implemented as originally designed. On the other hand, the impact evaluation approach determines whether or not the intervention was successful in meeting its ultimate objective, for example, the single overarching communication outcome.

Following the example on raising tobacco taxes, which we have been discussing throughout this Toolkit, a process evaluation might look at the degree of engagement with different stakeholders and the total reach of communication products or materials. The corresponding impact evaluation could focus on outcomes that describe how effective the programme has been in advancing the policy change process. For example, such outcomes include public support for the policy measure, degree of political commitment as evidenced by high-level political statements and concurrence among policy-makers, or the amount of resources allocated for the implementation of the policy (Baker et. al. 2018).

Carrying out an evaluation will likely require a combination of different methodologies. It can be led by experts, for example, relying on research professionals to determine the research questions and analyse results, or participatory, where research needs, questions and priorities are co-designed and determined with community members and other stakeholders. Depending on the research objectives and available resources, a combination of both approaches may also be appropriate.

Communication research relies on a variety of methods to collect data and generate evidence. These methods are generally categorized as either quantitative or qualitative. A brief summary and comparison of both categories is provided in Table 9.

Table 9. Quantitative and qualitative research methods (Debus, 1988)

Quantitative	Qualitative
Measures level of occurrence	Enables discovery
Asks “How many?” and “How often”?	Asks “Why”?
Studies actions	Studies motivations
Objective, asks questions without revealing a point of view	Subjective, probes individual reactions to discover underlying motivations
Provides proof, is definitive	Provides depth of understanding, is exploratory
Describes and measures levels and trends	Interprets behaviour and trends through insight
Examples <ul style="list-style-type: none"> • Surveys – Conducted by telephone, online, mail or face to face; either self-administered or through trained enumerators • Secondary data analysis – Review of existing literature including national communication plans, peer-reviewed journal articles, press clips, broadcast segments, unpublished reports, PowerPoint presentations, and annual and industry reports 	Examples <ul style="list-style-type: none"> • Key informant interviews – Telephone or in-person interviews with internal and external stakeholders, members of key audiences or representatives of relevant organizations • Focus group discussions – Small group discussions among representatives of key groups that have a stake in the intervention • PhotoVoice – Combines photography, storytelling and community action; suited for low-literacy and low-health-literacy groups • Case study analysis – Detailed description and analysis of experiences related to a given health communication programme

Detailed documentation and a participatory approach will be key in this step. All partners who were involved in implementation should be engaged during debriefing. This helps ensure that different perspectives are taken into account when crafting recommendations for future use.

WORKSHEET 6. Creating a monitoring & evaluation (M&E) framework (Bullen, n.d.)								
	Indicator	Definition (How is it calculated?)	Baseline (What is the current value?)	Target (What is the target value?)	Data source (How will it be measured?)	Frequency (How often will it be measured?)	Responsible (Who will measure it?)	Reporting (Where will it be reported?)
Input								
Activities								
Outcomes								
Output								

The M&E tool is used to track the status of the communication activities by setting predetermined indicators. This ensures that interventions deliver their intended results or outcomes.



6. Conclusions



Strategic communication plays an essential role in supporting the implementation of the WHO FCTC by generating demand for policy action, fostering a supportive political environment for policy change and strengthening partnerships among tobacco control stakeholders. Strengthening the capacity of tobacco control focal points to conceptualize, implement and evaluate strategic communication interventions, coupled with other interventions recommended in the WHO FCTC, will help reduce the public health burden of tobacco and contribute to a healthier and more sustainable future.

Effective communication for tobacco control policy change requires an appreciation of the prevailing socio-political landscape, as well as developing clear, consistent and persuasive messages that are appropriate to the national or local context. Consequently, high-impact communication strategies are necessary to successfully deliver these messages to intended audiences. These audiences include, but are not limited to, government leaders, policy-makers, stakeholders involved in advancing public health and sustainable development, and relevant segments of the general public. Applying a comprehensive tobacco control strategy that includes strategic communication is necessary to promote a supportive environment for policy change.

Designing effective communication interventions to support tobacco control policy change follows a systematic process that starts with identifying the single overarching communication outcome, followed by describing intended audiences, crafting impactful messages, determining appropriate channels, creating and pretesting communication materials, and implementing monitoring and evaluation processes. The P Process is an evidence-based approach to designing effective and sustainable communication programmes and interventions.

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A decorative graphic in the top right corner of the page, consisting of a grid of colored squares. The squares are arranged in a 3x2 grid. The top row has a light orange square on the left and a dark orange square on the right. The middle row has a light orange square on the left and a light orange square on the right. The bottom row has a dark red square on the left and a dark red square on the right.

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