

Socioeconomically disadvantaged smokers' ratings of plain and branded cigarette packaging: An experimental study

Journal:	BMJ Open
Manuscript ID:	bmjopen-2013-004078
Article Type:	Research
Date Submitted by the Author:	20-Sep-2013
Complete List of Authors:	Guillaumier, Ashleigh; University of Newcastle, School of Medicine & Public Health Bonevski, Billie; University of Newcastle, School of Medicine & Public Health Paul, Chris ; University of Newcastle, Health Behaviour Research Group; School of Medicine & Public Health Durkin, Sarah; The Cancer Council Victoria, Centre for Behavioural Research in Cancer D'Este, Catherine; University of Newcastle, Priority Research Centre of Health Behaviour & Hunter Medical Research Institute
Primary Subject Heading :	Smoking and tobacco
Secondary Subject Heading:	Health policy, Public health
Keywords:	Social disadvantage, Plain packaging, Tobacco

SCHOLARONE[™] Manuscripts

BMJ Open

Socioeconomically disadvantaged smokers' ratings of plain and branded cigarette packaging: An experimental study

Ashleigh Guillaumier¹, Billie Bonevski¹, Chris Paul², Catherine D'Este³, Sarah Durkin⁴

¹School of Medicine & Public Health, University of Newcastle, Newcastle, Australia

²Health Behaviour Research Group, School of Medicine & Public Health, University of Newcastle & Hunter Medical Research Institute, Newcastle, Australia

³Centre for Clinical Epidemiology and Biostatics, School of Medicine & Public Health, University of Newcastle & Hunter Medical Research Institute, Newcastle, Australia

4Centre for Behavioural Research in Cancer, The Cancer Council Victoria, Melbourne, Australia

Corresponding author: Ashleigh Guillaumier, Phone: (02) 4033 5711, Fax: (02) 40335600, Email: <u>Ashleigh.Guillaumier@newcastle.edu.au</u>, Postal address: CTNMH, Level 5, McAuley Centre, Calvary-Mater Hospital, University of Newcastle, corners of Edith Street & Platt Street, Waratah NSW 2298 Australia.

Running head: Disadvantaged smokers and plain packaging Keywords: social disadvantage; plain packaging; tobacco Word Count: 3500

ABSTRACT

Objectives: This study aimed to test the impact of plain packaging for cigarettes on brand appeal among highly socioeconomically disadvantaged smokers using the new design for cigarettes implemented in Australia, which combines plain packaging with larger health warning labels.

Design: A 2x2 factorial design trial embedded within a cross-sectional computer touchscreen survey. Data was collected between March and December 2012.

Setting: Socially disadvantaged welfare aid recipients were recruited through a large Social and Community Service Organisation in NSW, Australia.

Participants: N=354 smokers. The majority of the sample had not completed high school (64%), earned less than AUD\$300/week (55%) and received their income from Government payments (95%).

Interventions: Participants were randomised to one of four different pack conditions determined by brand name: Winfield versus Benson & Hedges, and packaging type: branded versus plain. Participants were required to rate their assigned pack on measures of brand appeal and purchase intentions.

Results: Plain packaging was associated with significantly reduced smoker ratings of 'positive pack characteristics' (p < 0.001), 'positive smoker characteristics' (p = 0.003), and 'positive taste characteristics' (p = 0.033) in the Winfield brand name condition only. Across the four pack conditions, no main differences were found for 'negative smoker characteristic' (p = 0.427) or 'negative harm characteristics' (p = 0.411). In comparison to branded packaging, the presentation of plain packaging was associated with lower odds of smokers' purchase intentions (OR = 2.18, 95%CI = 1.34, 3.54; p = 0.002).

Conclusions: Plain packs stripped of branding elements, featuring larger health warning labels, were associated with reduced positive cigarette brand image and purchase intentions among highly socioeconomically disadvantaged smokers.

BMJ Open

ARTICLE SUMMARY

Article focus

- Previous simulation studies have shown that plain packaging for cigarettes is associated with reduced perceptions of brand appeal and cessation intentions, however none have been conducted with socially disadvantaged smokers who have among the highest smoking rates.
- This study tested the Australian Government's new plain pack design for cigarettes which combines plain packaging with larger pictorial health warning labels.

Key messages

- This experimental simulation study found that plain packaging for cigarettes reduced positive brand appeal ratings and purchase intentions among socially disadvantaged smokers compared to branded cigarette packaging.
- In this study the plain pack condition tested the new design for plain cigarette packs in Australia, which combines plain packaging with larger health warning labels.
- The results of this study support the move toward plain packaging policies for cigarettes.

Strengths and limitations of this study

- This study is the first to obtain a large sample of socially disadvantaged smokers' responses to a simulation of a one-off exposure to an important tobacco control policy development.
- Use of a convenience sample limits the external validity and generalizability of the results.
- Use of a wider range of brands for comparison is recommended for research in countries considering implementing plain packaging.

INTRODUCTION

Smoking rates are disproportionately high among groups who experience multiple levels of disadvantage such as those with low income (26%),[1] Indigenous populations (50%),[2] the homeless (69% - 73%)[3, 4] and individuals with a mental illness (35% - 90%).[5-7] Comparatively, the population smoking rate in Australia is 15%.[1] Therefore, evaluating tobacco control approaches for effectiveness with disadvantaged social groups is a priority.

Cigarette manufacturers use the cigarette pack to promote their product in a number of ways. The cigarette pack is highly visible to both the user and others,[8] and reinforces brand image.[9] Packaging distinguishes brands from competitors and communicates brand imagery, character and values.[9, 10] Pack design can also be used to target segments of the market. For example, packs targeting women typically use bright graphics and feminine colours, descriptor terms such as 'slim' and 'thin' and packaging with increased height and decreased width compared to standard packaging.[11] To engage the youth market, pack designs are novel, with fashionable designs and attractive imagery, have innovative pack construction (i.e. pack shape and method of opening), and promote 'mild' taste or 'smoothness'.[12] Economy packs that emphasise quality are important for targeting low-income smokers, and often use design elements such as price-marking (printing product price on packaging).[13] Packaging has been particularly important in markets such as Australia where stringent advertising restrictions have long prohibited traditional avenues of advertising and promotion of brand and product.

Design elements of the cigarette pack are constructed to capture starter smokers, encourage brand-switching and brand loyalty, and to expand market share.[9, 13] Packaging colours, product descriptors, brand imagery and logos have all been shown to impact on the perceptions and experiences of the product.[14] A colour code for tobacco products is well established: lighter packaging colours are perceived to contain a product that is less harmful to health. Numerous studies have shown that smokers associate the colour 'red' with high strength and harshness, 'blue' as being mild, and anything progressively lighter as healthier or less harmful.[15, 16]. Similarly, many countries have banned the use of descriptor terms such as 'light', 'mild' and 'low tar' as cigarettes labelled with these terms are falsely perceived as being less harmful to health, and easier to give up.[16] Replacement terms such as 'gold', 'silver' and 'smooth' were still perceived as less harmful than regular varieties, suggesting that removal of both colours and descriptor terms may be more effective than the

BMJ Open

removal of either alone in reducing false beliefs about tobacco risk.[14] Health warning labels (HWLs) that use pictures, supportive text and take up larger portions of the pack space have been shown to increase the effectiveness of the warnings in communicating risk and promoting cessation.[17, 18] Specifically, in a cross-sectional survey in the US, Bansal-Travers *et al.*[17] found that participants selected larger, pictorial, and loss-framed HWLs as the most effective in communicating health risks.

Evidence from plain packaging simulation studies shows that progressively plainer cigarette packaging, incorporating larger HWLs and fewer branding elements, was perceived as less attractive,[19, 20] reduced false beliefs about tobacco risk[14, 17] and was associated with cessation intentions.[8, 20] Wakefield and colleagues have conducted a number of online simulation experiments, exposing participants to pack conditions which vary by brand, degree of plain packaging[19, 21] and HWL size.[20] The studies found that packs with progressively fewer branding elements were perceived as less appealing overall,[19] larger HWLs combined with plain packs reduced adolescents' positive ratings of packs,[21] and presentation of plain packs compared with branded packs increased participant intentions of not purchasing a pack.[20] Additionally, best-worst[8] and experimental auction[22] studies have found plain packs featuring large graphic HWLs were the most effective pack type in reducing demand and promoting cessation among adult smokers.

The Australian Government's *Tobacco Plain Packaging Act 2011*, legislated mandatory plain and standardised packaging on cigarettes sold in Australia which include dark colour, pictorial and supportive text HWLs that cover at least 75% front-of-pack and 90% back-ofpack, have all logos and branding removed, and use only specified font styles and sizes.[23] The legislation was introduced to reduce product appeal, increase the effectiveness of health warnings, and reduce misperceptions about the harms of smoking. Providing some early support, the first study to examine effects of plain packaging during the roll-out phase found that compared to smokers smoking from branded packs, smokers with plain packs were more likely to perceive their tobacco as being lower in both quality and satisfaction, to think about and prioritise quitting and to support the plain packaging policy.[24] While there is evidence of reduced appeal for plain packaging compared to branded packaging of tobacco products within the general population, it is important to investigate whether similar effects are likely to occur for groups experiencing social and financial hardship. The aim of this study was to examine brand appeal and purchase intentions associated with branded cigarette packs

For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

compared to the new design Australian plain packs among a sample of socioeconomically disadvantaged smokers.

METHODS

Design

A two by two packaging type (branded versus plain) by brand name (Winfield versus Benson & Hedges (B&H)) factorial experimental design was used; randomly exposing participants to one out of a possible four cigarette pack conditions. Each participant completed a uniform series of pack ratings within the experimental condition they were assigned. Data were collected using a touchscreen computer between March and December 2012.

Setting & Sample

As the target population for the study was smokers with high social disadvantage, the sample was drawn from a service outlet of a large, national non-government, social and community service organisation (SCSO). The service provides 'emergency relief' welfare such as food vouchers, grocery items, and financial aid to individuals experiencing various forms of social and financial hardship in a large catchment area of Western Sydney, NSW. The client profile of SCSO's includes an over-representation of a number of disadvantaged groups including Aboriginal and Torres Strait Islanders, single parents, long-term unemployed, and those whose primary income is a government benefit.[25]

Those eligible to participate were clients aged over 18 years, able to comprehend English, and who were not too ill or distressed to take part (as judged by SCSO staff). Previous research has demonstrated high smoking prevalence rates of 60%-70% amongst SCSO clients.[26]

Recruitment Clients were introduced to the study when they attended the SCSO for their emergency relief appointment. SCSO staff explained that a touchscreen computer survey about smoking was being conducted and if clients were interested they were led to a private room where a Research Assistant (RA) provided further detailed information. The RA provided assistance to complete the survey if required. As the survey was anonymous, survey completion was taken as implied consent. Participants were reimbursed for their time with an AUD\$20 grocery voucher.

Smoking status

Smoking status was assessed by asking "Do you currently smoke tobacco products?" with response options i) 'Yes, daily', ii) 'Yes, at least once a week', iii) Yes, but less often than once a week' and iv) 'No, not at all', followed by asking "Have you smoked at least 100 cigarettes or a similar amount of tobacco in your life" (yes/no/not sure). Those who reported to smoke daily, or who reported to smoke occasionally as well as having smoked at least 100 cigarettes in their life were classified as current smokers. Once smoking status was assessed non-smokers exited from the survey.

Figure 1 about here

Presentation of experimental conditions

The study was conducted on a Dell Latitude XT3 (2.50 GHz processor) touchscreen computer, using Digivey version 4 software.[27] Participants were randomly allocated to one of four cigarette pack conditions by Digivey's randomise function, which uses a pseudo random number generator provided by the underlying programming language (see: http://msdn.microsoft.com/en-us/library/system.random(v=vs.90).aspx). Branded pack conditions replicated cigarette packs available for purchase at the time of survey; plain pack conditions tested the new plain packaging design, combining plain packaging stripped of branding elements with larger HWLs. The four pack conditions were: a) Branded Winfield Blue 25; b) Plain Winfield Blue 25; c) Branded B&H Smooth 25, and; d) Plain B&H Smooth 25, see Figure 1. Within each pack condition, respondents were presented with a standard set of items to rate their assigned pack. All pack conditions featured the same HWL: 'Smoking causes peripheral vascular disease'. The brands used were two of the most popular brand variants in Australia: Winfield (Blue 25) and B&H (Smooth 25).[28] Plain pack digital images were created using specifications outlined in the Australian Government's Tobacco *Plain Packaging Act 2011*, while images of branded packs were supplied by the Centre for Behavioural Research in Cancer, Victoria, Australia.

Outcome measures

Brand appeal

While viewing the assigned pack image, respondents were asked to rate packs on various pack, smoker and taste characteristic statements, see Table 1. These items were developed by

Wakefield and colleagues[19-21] based on past tobacco industry packaging studies used to assess pack attractiveness, brand imagery characteristics and perceived sensory attributes. Among adult smokers, these items have variably been used as: individual outcome items;[19] or combined to form four outcome scales and one individual item with inter-item reliability statistics presented.[20]

Table 1 about here

Purchase intentions

Participants were presented with images of the two brand name options (Winfield and B&H) on a single screen and asked: "If you ran out of cigarettes and only the packs below were available in the store you went to, which would you be most tempted to buy?" Participants could choose between the two brand name images or select 'I would not buy any'. Participants who had previously viewed and rated a plain packaging image (i.e. Pack B or D; see Figure 1) received plain image response options, and those who had previously rated a branded packaging image (i.e. Pack A or C) received branded image response options at this question.

Socio-demographic variables

Gender, age, income, income source, Aboriginal or Torres Strait Islander status, marital status, highest level of education and housing type were assessed.

Statistical Analyses

Analyses were conducted using Stata v11 (<u>www.stata.com</u>). Characteristics of participants are presented by intervention group to assess the success of the randomisation.

Instrument evaluation

Brand appeal rating items were combined to form four scales and one stand-alone item in order to replicate the outcome measure structure of Wakefield *et al.*'s previous plain packaging study.[20] The outcome measures were: (1) positive pack characteristics - 'popular among smokers'; 'attractive'; 'sophisticated'; 'a brand you might try/smoke'; (2) positive smoker characteristics - 'trendy' and 'successful'; (3) negative smoker characteristic - 'boring'; (4) positive taste characteristics - 'enjoyable to smoke' and 'satisfying in taste'; and

BMJ Open

(5) negative harm characteristics – 'high in tar and nicotine' and 'harmful to your health'. Although these measures have shown strong to moderate internal consistency on Cronbach's alpha previously,[20] they have not been tested in the current population, thus we undertook Cronbach's alpha assessment on scales with more than one item.

Outcome measure assessment

As the outcome variables were not normally distributed we used non-parametric methods for analysis. Median scores with 95% confidence intervals are presented graphically for each of the four pack conditions. Exploratory data analysis indicated that there may be a potential pack type by brand name interaction, i.e. the relationship between packaging types (branded versus plain packaging) differed for the two different cigarette brand names. As the study had limited statistical power to assess interaction effects, we did not formally test this, but undertook analysis considering the four pack conditions separately, rather than as a factorial design. The Kruskal-Wallis test was used as a global assessment of differences in factor scores among the four pack conditions. If the *p*-value for this test was <0.1, pairwise comparisons using the Wilcoxon rank sum test were undertaken to compare median scores between branded packaging and plain packaging for each of the two brand names. Odds ratio analyses were used to assess the effect of packaging type (branded versus plain) on purchase intention.

Sample size for this study was determined by requirements for another trial for which participants were recruited. Post hoc power calculations demonstrated that a sample of 350 participants (approximately 85 in each of the pack type by brand name groups) would allow detection of differences in scores between branded and plain packaging (within each brand name) of approximately half a standard deviation, with 5% significance level and 90% power (to allow for some loss of power due to the use of non-parametric analyses).

RESULTS

Sample

A total of 787 clients were approached by SCSO staff during the study period and 608 were eligible to be approached to participate by the RA. Of those, 581 (96%) completed the survey and 362 (62%) of these were identified as current smokers (daily and occasional). Eight smokers were excluded as they primarily used something other than manufactured or roll-your-own tobacco. The demographic details of the study participants in each intervention

For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

group are presented in Table 2. The majority of the sample had not finished high school (64%), earned less than AUD\$300/week (55%) and received their income from Government benefit payments (95%). Socio-demographic characteristics were similar across the four intervention groups.

Table 2 about here

Brand Appeal Ratings

Scale reliability assessments revealed the outcome measures had moderate to strong internal consistency: positive pack characteristics ($\alpha = .83$); positive smoker characteristics ($\alpha = .71$); positive taste ($\alpha = .84$), and; negative harm characteristics ($\alpha = .65$).

Figure 2 about here

Figure 2 displays ratings across the four pack conditions on the positive pack (2a), positive smoker (2b), negative smoker (2c), positive taste (2d), and negative harm (2e) response scales. The positive pack scale varied significantly across the pack conditions (p = 0.001), with pairwise comparisons revealing that branded packaging images were rated significantly more positively than plain packaging images in the Winfield condition (p < 0.001), however there was no difference in the B&H condition (p = 0.102), see Table 3. Positive smoker characteristic ratings were significantly different across the four pack conditions (p = 0.003); branded packaging images were rated more positively than plain packaging images within the Winfield condition (p = 0.001), but not the B&H brand name condition (p = 0.197), see Table 3. There was no difference in the negative smoker characteristic ratings across the four pack conditions (p = 0.427). The four pack conditions were rated significantly differently when assessing positive taste characteristics (p = 0.033). Pairwise comparisons revealed plain packaging images were less appealing on taste attributes than branded packaging images for the Winfield condition (p = 0.004), however there were no differences detected in taste ratings between plain and branded packaging images in the B&H condition. The four pack conditions rated similarly in regards to negative harm characteristics (p = 0.411) as shown in Figure 2e and Table 3.

Table 3 about here

Purchase Intent

Participants were asked to choose which pack, if any, they would prefer to purchase out of the two brand names used in this study. Participants who viewed plain packaging images only were more likely to select that they would not buy any of the presented options (35%), compared to those who viewed branded packaging images (19%) [OR = 2.2, 95%CI = 1.3, 3.5; p = 0.002].

DISCUSSION

This study found that plain cigarette packs were rated as significantly less appealing than branded packs in a sample of socioeconomically disadvantaged smokers. Branded packaging was viewed as more appealing, smokers of these packs were rated in a more positive way, and the cigarette taste was preferred compared to cigarettes in plain packaging. No differences between branded and plain packaging relating to negative smoker or negative harm characteristics were detected. Finally, plain packaging reduced cigarette purchase intentions in comparison to branded packaging among smokers. The overall results of this study are supportive of previous plain packaging simulation research conducted with general population samples suggesting that plain packs are viewed less favourably on measures of brand appeal than branded packs.[19, 20]

One unexpected finding of this research was a possible interaction effect between packaging type (branded versus plain) and brand name (Winfield versus B&H). Plain pack images were rated consistently lower than branded images on measures of positive pack, positive smoker and positive taste appeal for the Winfield condition, but no differences were detected for the B&H condition. This sample of smokers may have less experience with the B&H brand, positioned as a 'premium' brand in Australia with a higher recommended retail price than the Winfield brand, which is considered a 'mainstream' brand offering value for money.[29] While 19% of the sample reported regularly using the Winfield brand only 1.6% reported regularly using B&H cigarettes, compared to 19% and 9%, respectively, in the general population.[28] It could be interpreted that the effect of plain packaging may be stronger for personally relevant brands, or brands within market segmentations relevant to the smoker.

Similarly to Wakefield *et al.* 's previous simulation studies, this study found no difference between plain and branded cigarette packaging on negative harm ratings. This may indicate

that the removal of branding elements such as colours, logos, and fonts on packs is more effective in reducing brand appeal associations rather than tapping into negative harm perceptions. It is also likely that the measures used in this study, intended to assess brand appeal, were not adequate to assess negative harm perceptions related to packaging. There are, however, other simulation studies that indicate plain packaging reduces false beliefs about smoking[14] and increases cessation intentions.[8] Our study also found that the presentation of plain packaging, compared to branded packaging, reduced purchase intentions among socioeconomically disadvantaged smokers, consistent with previous simulations conducted with general population smokers.[20, 22]

Implications

The results of this study support the move toward plain packaging policies for cigarettes. Most research used in the development of plain packaging policies was conducted with general population samples, with limited data to indicate how socioeconomically disadvantaged groups, who have among the highest smoking rates, may respond to this tobacco control policy. The current study indicates that socioeconomically disadvantaged smokers are likely to respond similarly to the general population, with plain packaging reducing brand appeal ratings and purchase intentions among these smokers. Further research, particularly in low-income countries could provide insight about the possibility of disseminating this policy internationally.

Early research in Australia indicates plain packaging makes tobacco less appealing and increases the urgency to quit smoking,[24] however it will be important to monitor impact over time. Plain packaging policies have the potential to reduce smoking initiation. Associations with brand identity and appeal are motivating factors in smoking uptake among youth.[30, 31] There are documented cases of cigarette rebranding, for example the development of the Camel 'Smooth Character', to appeal to young adult smokers with the explicit intentions of increasing market share and prevalence of smoking among youth.[32] Plain packaging policies prevent this kind of brand targeting and have the potential to reduce uptake among youth by reducing brand appeal and purchase intentions. It will also be important to assess the use of any avoidance strategies, such as pack stickers and cigarette cases, and to monitor whether these are temporary solutions, or whether on-going changes to policy are required.

BMJ Open

Strengths and Limitations

The primary limitation of the study is its reliance on a convenience sample limiting its external validity and generalizability. However, socially disadvantaged groups are notoriously difficult to recruit and retain in health research.[33, 34] Recruitment challenges were overcome by accessing community services as recruitment sites and using convenience samples. As a result, this study is the first to obtain a large sample of socially disadvantaged smokers' responses to a simulation of a one-off exposure to an important tobacco control policy development. Since the policy has been implemented, socially disadvantaged smokers' day-to-day experience is one of being exposed to these plain packs multiple times a day, and so the findings from this study may underestimate the real world effects of this change. This study was also limited by the use of only two cigarette brands for comparison. Use of a wider range of brands for comparison is recommended for research in countries considering implementing plain packaging.

As this study tested the Australian Government's new plain pack design, which combines plain packaging with larger HWLs, we were unable to distinguish which factor (plain packaging or larger HWLs) produced the observed results. Previously, Wakefield *et al.*[20] examined the importance of branding versus HWL size on cigarette packaging, concluding that plain packaging reduced elements of brand appeal far more than increasing the size of HWLs. In their study, when packs were plain, increasing the size of HWLs above 30% did not reduce brand appeal further. This finding suggests that the effects observed in the current study are more likely due to stripping the pack of branding elements, than increasing the HWL size.

Conclusions

The findings of this study support plain packaging policy, and show this strategy has the potential to reduce positive associations with cigarette packs among a group of highly socioeconomically disadvantaged smokers. It will be important to monitor the long-term outcomes of plain packaging policy, particularly with regards to uptake of smoking in disadvantaged groups. Further plain pack research in low-income countries is recommended, to support the potential dissemination of the policy internationally.

ACKNOWLEDGEMENTS

The authors thank the Social and Community Service Organisation and its clients involved in this research, as well as Melinda Hickey, Jessica Masey and Jodie Schroder for their roles in recruiting clients into the project.

COMPETING INTERESTS

None to declare.

FUNDING

This study was part of a project funded by a grant from the Hunter Medical Research Institute (G1101150). AG was supported by an Australian Postgraduate Award PhD scholarship administered through the University of Newcastle. BB was supported by a Cancer Institute NSW Career Development Fellowship. CP was supported by Cancer Control Collaboration funding.

ETHICS APPROVAL

University of Newcastle's Human Research Ethics Committee.

BMJ Open

REFERENCES

- Australian Institute of Health and Welfare. 2010 National Drug Strategy Household Survey Report. Canberra: AIHW2011 Contract No.: Cat. no. PHE 145.
- Australian Bureau of Statistics, Australian Institute of Health and Welfare. The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples. Canberra2008.
- 3. Connor SE, Cook RL, Herbert MI, *et al.* Smoking cessation in a homeless population: There is a will, but is there a way? *J Gen Intern Med.* 2002;**17**:369-72.
- Kermode M, Crofts N, Miller P, *et al.* Health indicators and risks among people experiencing homelessness in Melbourne, 1995-1996. *Aust N Z J Public Health*. 1998 Jun;22:464-70.
- 5. Lasser K, Boyd JW, Woolhandler S, *et al.* Smoking and Mental Illness: A populationbased prevalence study. *Journal of the American Medical Association*. 2000;**284**.
- Moeller-Saxone K. Cigarette smoking and interest in quitting among consumers at a Psychiatric Disability Rehabilitation and Support Service in Victoria. *Aust N Z J Public Health.* 2008;**32**:479-81.
- 7. Reichler H, Baker A, Lewin T, *et al.* Smoking among in-patients with drug-related problems in an Australian psychiatric hospital. *Drug Alcohol Rev.* 2001;**20**:231-7.
- 8. Hoek J, Wong C, Gendall P, *et al.* Effects of dissuasive packaging on young adult smokers. *Tob Control.* 2011;**20**:183-8.
- 9. Wakefield M, Morley C, Horan JK, *et al.* The cigarette pack as image: New evidence from tobacco industry documents. *Tob Control.* 2002;**11**:i73-i80.
- Ford A, Moodie C, Hastings G. The role of packaging for consumer products: Understanding the move towards 'plain' tobacco packaging. *Addiction Research & Theory*. 2012;20:339-47.
- 11. Carpenter CM, Wayne GF, Connolly GN. Designing cigarettes for women: new findings from the tobacco industry documents. *Addiction*. 2005 Jun;**100**:837-51.
- 12. Cummings KM, Morley CP, Horan JK, *et al.* Marketing to America's youth: evidence from corporate documents. *Tob Control.* 2002 March 1, 2002;**11**:i5-i17.
- Anderson S, Hastings G, MacFadyen L. Strategic marketing in the UK tobacco industry. *The Lancet Oncology*. 2002;**3**:481-6.

14.	Hammond D, Dockrell M, Arnott D, et al. Cigarette pack design and perceptions of
	risk among UK adults and youth. <i>The European Journal of Public Health.</i> 2009; 19 :631-7.
15.	Bansal-Travers M, O'Connor R, Fix BV, et al. What do cigarette pack colors
	communicate to smokers in the U.S.? Am J Prev Med. 2011 Jun;40:683-9.
16.	Hammond D. FCTC Article 11: Tobacco labelling and packaging: a review of
	evidence2007: Available from:
	http://www.cctc.ca/cctc/EN/tcrc/books/temonograph.2007-12-
	<u>19.7863543963#.UKsFEIdkyAg</u> .
17.	Bansal-Travers M, Hammond D, Smith P, et al. The impact of cigarette pack design,
	descriptors, and warning labels on risk perception in the US. Am J Prev Med.
	2011; 40 :647-82.
18.	Hammond D. Health warning messages on tobacco products: a review. Tob Control.
	2011; 20 :327-37.
19.	Wakefield MA, Germain D, Durkin SJ. How does increasingly plainer cigarette
	packaging influence adults smokers' perceptions about brand image? An experimental
	study. Tob Control. 2008;17:416-21.
20.	Wakefield M, Germain D, Durkin S, et al. Do larger pictorial health warnings
	diminish the need for plain packaging of cigarettes? Addiction. 2012 Jun;107:1159-
	67.
21.	Germain D, Wakefield MA, Durkin SJ. Adolescents' perceptions of cigarette brand
	image: Does plain packaging make a difference? J Adolesc Health. 2010;46:385-92.
22.	Thrasher JF, Rousu MC, Hammond D, et al. Estimating the impact of pictorial health
	warnings and "plain" cigarette packaging: evidence from experimental auctions
	among adult smokers in the United States. <i>Health Policy</i> . 2011 Sep;102:41-8.
23.	Department of Health and Ageing. Tobacco Plain Packaging Bill 2011 Canberra2011.
24.	Wakefield MA, Hayes L, Durkin S, et al. Introduction effects of the Australian plain
	packaging policy on adult smokers: a cross-sectional study. BMJ Open. 2013 July 1,
	2013; 3 .
25.	Australian Council of Social Service. Australian Community Sector Survey Report
	2011 Volume 1 - National. Strawberry Hills: Australian Council of Social
	Service2011.

BMJ Open

1		
2 3	26	Bryant I Bonevski B Paul C A survey of smoking prevalence and interest in quitting
4	_0.	among social and community convice organization clients in Australia: a unique
5		among social and community service organisation clients in Austrana. a unique
о 7		opportunity for reaching the disadvantaged. BMC Public Health. 2011;11:827.
8	27.	Creseo Corporation. Digivey Survey Suite. Arizona, USA.
9	28	Scollo MM Winstapley MH Tobacco in Australia: Facts and issues Melbourne:
10 11	20.	
12		Cancer Council Victoria; 2012 [cited 2013 August]; 4th Edition:[Available from:
13		www.TobaccoInAustralia.org.au.
14 15	29.	Carter SM. The Australian cigarette brand as product, person, and symbol. <i>Tob</i>
16		C_{ontrol} 2003 December 1, 2003 12 iii 70 iii 86
17	• •	
18 10	30.	DiFranza JR, Wellman RJ, Sargent JD, et al. Tobacco Promotion and the Initiation of
20		Tobacco Use: Assessing the Evidence for Causality. Pediatrics. 2006 June 1,
21		2006: 117 :e1237-e48.
22	21	Condall D. Hook I. Thomas II. at al. Young adulta' interpretation of tabaasa brands:
23 24	51.	Gendan F, Hoek J, Hiomas JL, et al. Foung adults interpretation of tobacco brands.
25		Implications for tobacco control. <i>Nicotine Tob Res.</i> 2011.
26	32.	Wayne GF, Connolly GN. How cigarette design can affect youth initiation into
28		smoking: Camel cigarettes 1983-93 Tob Control 2002 March 1 2002 11 i32-i9
29	22	
30	33.	UyBico SJ, Pavel S, Gross CP. Recruiting vulnerable populations into research: a
31 32		systematic review of recruitment interventions. J Gen Intern Med. 2007 Jun;22:852-
33		63.
34	3/	Vancey AK Ortega AN Kumanyika SK Effective recruitment and retention of
35 36	57.	Tancey Ark, onega Arty, Rumanyika SK. Encenve recruitment and recention of
37		minority research participants. Annu Rev Public Health. 2006;27:1-28.
38		
39 40		
40 41		
42		
43 44		
44 45		
46		
47		
40 49		
50		
51 52		
52 53		
54		
55		
50 57		
58		
59		

Survey items	Response scale
Pack characteristics: How well do you think the following	Visual analogue scale: 1 (not at all) to 7
phrases relate to the cigarette pack shown?	(extremely)
This pack is popular among smokers	
This pack is attractive	
This pack is sophisticated	
This pack is a brand you might try/smoke	
Smoker characteristics: How well do you think the	Visual analogue scale: 1 (not at all) to 7
following characteristics describe a typical smoker of the	(extremely)
pack shown?	
A typical smoker of this pack is trendy	
A typical smoker of this pack is boring	
A typical smoker of this pack is successful	
Taste attributes: Please rate the following phrases	Visual analogue scale: 1 (not at all) to 2
describing the taste of cigarettes from the pack shown.	(extremely)
I would expect the cigarettes in this pack to be	
enjoyable to smoke	
I would expect the cigarettes in this pack to be high	
in tar and nicotine	
I would expect the cigarettes in this pack to be	
satisfying in taste	
I would expect the cigarettes in this pack to be	
harmful to your health	

Table 1. Standard items used to assess responses to pack images.

BMJ Open

Characteristic	Winfield	Winfield		В&Н	Tatal
	Branded	Plain	Branded	Plain	Totai
	N (%)	N(%)	N (%)	N(%)	N (%)
N	92 (26)	95 (27)	88 (25)	79 (22)	35/
Age	<i>JZ</i> (20)))(27)	00 (23)	1) (22)	554
18 - 39	56 (61)	51 (54)	51 (58)	48 (61)	206 (58)
40+	36 (39)	44 (46)	37 (42)	31 (39)	148 (42)
		()			~ /
Gender					
Female	61 (66)	46 (52)	66 (70)	43 (54)	216 (61)
Aboriginal and/or Torres Strait Islander					
Yes	23 (25)	14 (16)	17 (18)	10(13)	64 (18)
	- (-)		. (-)	- (-)	- (-)
Marital Status					
Married / De facto / Living with partner	29 (32)	15 (17)	23 (24)	20 (25)	87 (25)
Separated / Divorced	27 (29)	29 (33)	27 (28)	20 (25)	103 (29)
Never married / Single / Widowed	36 (39)	44 (50)	45 (47)	39 (49)	164 (46)
Highest Education Primary school	0(0)	4 (5)	4 (4)	4 (5)	12 (3 4)
High school years 7-10	62 (67)	54(61)		30 (40)	214(5.7)
High school years 11-12	11(12)	13(15)	13(14)	14(18)	51 (14)
TAFE / trade qualification	14(12)	13(15)	16(17)	21(27)	64 (18)
University degree	5 (5)	4 (5)	3 (3)	1(1)	13 (3.7)
					· · · ·
Personal Weekly Income					
<\$299	54 (59)	55 (58)	48 (56)	38 (48)	195 (55)
>\$300	36 (39)	33 (35)	31 (35)	37 (47)	137 (39)
Prefer not to answer	2 (2)	7 (7)	9 (10)	4 (5)	22 (6)
Income source					
Paid work	6(7)	2 (2)	4 (4)	1(1)	13 (3.7)
Government payment (Centrelink)	85 (92)	85 (97)	89 (94)	76 (96)	335 (95)
Other	1(1)	1 (1)	2 (2)	2 (3)	6 (1.7)
Housing type					
Own house/private rental	26 (28)	31 (33)	28 (32)	23 (29)	108 (31)
Government rental	55 (60)	42 (44)	44 (50)	43 (54)	184 (52)
Homeless/Supported accommodation	11 (12)	22 (23)	16 (18)	13 (17)	62 (18)
Regular cigarette brand					
Winfield	10 (17)	16 (21)	14 (24)	10 (18)	50 (20)
Benson & Hedges	1 (1.7)	1 (1.3)	2 (3.5)	0 (0)	4 (1.6)
Other	36 (62)	50 (65)	34 (59)	36 (66)	156 (63)
I don't have a regular brand	11 (19)	10(13)	8 (14)	9 (16)	38 (15)

Table 3. Effect of pack condition on brand appeal ratings (N = 354).

	Pack Condition						
	Winfield_Branded	Winfield_Plain	$B\&H_Branded$	B&H_Plain	Global test	Pairwise	
						Winfield	Benson&Hedges
	(n = 92)	(n = 95)	(n = 88)	(n = 79)		(branded v plain)	(branded v plain)
	Median (95%CI)	Median (95%CI)	Median (95%CI)	Median (95%CI)	Р	Р	Р
Positive pack	3.86 (3.5 - 4.25)	2.25 (2 - 2.5)	2.63 (2.07 - 3.25)	2.5 (1.75 – 2.75)	< 0.001	< 0.001	0.102
Positive smoker	2.5 (2 – 3.5)	1 (1 – 2)	2.5 (2 – 3)	2.5 (1.5 – 2.87)	0.003	0.001	0.197
Negative smoker (boring)	2(1-3)	2 (1 – 2)	2 (1 – 3)	3 (1.27 – 3.73)	0.427	n/a	n/a
Positive taste	4 (3.5 – 4.5)	3 (2.11 – 3.5)	3.75 (3 – 4)	3(2-4)	0.033	0.004	0.804
Negative harm	5.5 (4.55 - 6)	5.5 (4.5 - 6)	4.5 (4 – 5.5)	6 (5.14 – 6.5)	0.411	n/a	n/a

<u>5.5 (4.55 - 6)</u> <u>5.5 (4.5 - 6)</u> <u>4.5 (4 - 5.5)</u> <u>0 (5.14 - 0.5)</u> <u>0.711</u>



Figure 1. Pack image used for each pack condition within the two by two packaging type (branded versus plain) by brand name (Winfield versus Benson & Hedges) between-subject experimental design. 150x183mm (300 x 300 DPI)



Figure 2. Median ratings with 95%CI for each response scale by pack condition (N = 354). $173x212mm (300 \times 300 \text{ DPI})$

	Item No	Decommondation	
Title and chatnest	1	Recommendation	Va
The and abstract	1	(a) indicate the study's design with a commonly used term in the title or the	re
		(b) Provide in the electron informative and helenced eventeering of what was	Va
		(b) Provide in the abstract an informative and balanced summary of what was	re
		done and what was found	
Introduction			
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	Ye
Objectives	3	State specific objectives, including any prespecified hypotheses	Ye
Methods			
Study design	4	Present key elements of study design early in the paper	Ye
Setting	5	Describe the setting, locations, and relevant dates, including periods of	Ye
C		recruitment, exposure, follow-up, and data collection	
Participants	6	(a) Give the eligibility criteria, and the sources and methods of selection of	Ye
1		participants	
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and	Ye
		effect modifiers. Give diagnostic criteria, if applicable	
Data sources/	8*	For each variable of interest, give sources of data and details of methods of	Ye
measurement		assessment (measurement). Describe comparability of assessment methods if	
		there is more than one group	
Bias	9	Describe any efforts to address potential sources of bias	Ye
Study size	10	Explain how the study size was arrived at	Ye
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable,	Ye
		describe which groupings were chosen and why	
Statistical methods	12	(a) Describe all statistical methods, including those used to control for	Ye
		confounding	
		(b) Describe any methods used to examine subgroups and interactions	NA
		(c) Explain how missing data were addressed	NA
		(d) If applicable, describe analytical methods taking account of sampling strategy	NA
		(e) Describe any sensitivity analyses	NA
Doculto			
Participants	13*	(a) Report numbers of individuals at each stage of study eq numbers potentially	Ve
1 articipants	15	eligible examined for eligibility confirmed eligible included in the study	10
		completing follow-up, and analysed	
		(b) Give reasons for non-participation at each stage	Ve
		(c) Consider use of a flow diagram	N/
Descriptive data	1/1*	(a) Give characteristics of study participants (ag demographic, clinical, social)	Vo
Descriptive data	14.	and information on exposures and potential confounders	10
		(b) Indicate number of participants with missing data for each variable of interest	N
Outcome data	15*	Report numbers of outcome events or summary measures	Ve
Main results	15.	(a) Give unadjusted estimates and if applicable confounder adjusted estimates	N/
1914111 1050115	10	and their precision (eg. 95% confidence interval). Make clear which confounders	INF
		were adjusted for and why they were included	
		(b) Report category boundaries when continuous variables were astagorized	NI/
		(a) If relevant consider translating estimates of relative rich into abachty with for	
		(c) in relevant, consider translating estimates of relative risk into absolute risk for	IN A

For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

		a meaningful time period	
Other analyses	17	Report other analyses done-eg analyses of subgroups and interactions, and	NA
		sensitivity analyses	
Discussion			
Key results	18	Summarise key results with reference to study objectives	Yes
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or	Yes
		imprecision. Discuss both direction and magnitude of any potential bias	
Interpretation	20	Give a cautious overall interpretation of results considering objectives,	Yes
		limitations, multiplicity of analyses, results from similar studies, and other	
		relevant evidence	
Generalisability	21	Discuss the generalisability (external validity) of the study results	Yes
Other information			
Funding	22	Give the source of funding and the role of the funders for the present study and, if	Yes
		applicable, for the original study on which the present article is based	

*Give information separately for exposed and unexposed groups.

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at http://www.plosmedicine.org/, Annals of Internal Medicine at http://www.annals.org/, and Epidemiology at http://www.epidem.com/). Information on the STROBE Initiative is available at www.strobe-statement.org.



Socioeconomically disadvantaged smokers' ratings of plain and branded cigarette packaging: An experimental study

Journal:	BMJ Open
Manuscript ID:	bmjopen-2013-004078.R1
Article Type:	Research
Date Submitted by the Author:	20-Dec-2013
Complete List of Authors:	Guillaumier, Ashleigh; University of Newcastle, School of Medicine & Public Health Bonevski, Billie; University of Newcastle, School of Medicine & Public Health Paul, Chris ; University of Newcastle, Health Behaviour Research Group; School of Medicine & Public Health Durkin, Sarah; The Cancer Council Victoria, Centre for Behavioural Research in Cancer D'Este, Catherine; University of Newcastle, Priority Research Centre of Health Behaviour & Hunter Medical Research Institute
Primary Subject Heading :	Smoking and tobacco
Secondary Subject Heading:	Health policy, Public health
Keywords:	Social disadvantage, Plain packaging, Tobacco

SCHOLARONE[™] Manuscripts

BMJ Open

Socioeconomically disadvantaged smokers' ratings of plain and branded cigarette packaging: An experimental study

Ashleigh Guillaumier¹, Billie Bonevski¹, Chris Paul², Sarah Durkin⁴, Catherine D'Este³

¹School of Medicine & Public Health, University of Newcastle, Newcastle, Australia

²Health Behaviour Research Group, School of Medicine & Public Health, University of Newcastle & Hunter Medical Research Institute, Newcastle, Australia

³Centre for Clinical Epidemiology and Biostatics, School of Medicine & Public Health, University of Newcastle & Hunter Medical Research Institute, Newcastle, Australia

4Centre for Behavioural Research in Cancer, The Cancer Council Victoria, Melbourne, Australia

Corresponding author: Ashleigh Guillaumier, Phone: (02) 4033 5711, Fax: (02) 40335600, Email: <u>Ashleigh.Guillaumier@newcastle.edu.au</u>, Postal address: CTNMH, Level 5, McAuley Centre, Calvary-Mater Hospital, University of Newcastle, corners of Edith Street & Platt Street, Waratah NSW 2298 Australia.

Running head: Disadvantaged smokers and plain packaging Keywords: social disadvantage; plain packaging; tobacco Word Count: 3500

ABSTRACT

Objectives: This study aimed to test the potential impact of plain packaging for cigarettes on brand appeal among highly socioeconomically disadvantaged smokers using the new design for cigarettes implemented in Australia, which combines plain packaging with larger health warning labels.

Design: A 2x2 factorial design trial embedded within a cross-sectional computer touchscreen survey. Data was collected between March and December 2012.

Setting: Socially disadvantaged welfare aid recipients were recruited through a large Social and Community Service Organisation in NSW, Australia.

Participants: N=354 smokers. The majority of the sample had not completed high school (64%), earned less than AUD\$300/week (55%) and received their income from Government payments (95%).

Interventions: Participants were randomised to one of four different pack conditions determined by brand name: Winfield versus Benson & Hedges, and packaging type: branded versus plain. Participants were required to rate their assigned pack on measures of brand appeal and purchase intentions.

Results: Plain packaging was associated with significantly reduced smoker ratings of 'positive pack characteristics' (p < 0.001), 'positive smoker characteristics' (p = 0.003), and 'positive taste characteristics' (p = 0.033) in the Winfield brand name condition only. Across the four pack conditions, no main differences were found for 'negative smoker characteristic' (p = 0.427) or 'negative harm characteristics' (p = 0.411). In comparison to plain packaging, the presentation of branded packaging was associated with higher odds of smokers' purchase intentions (OR = 2.18, 95%CI = 1.34, 3.54; p = 0.002).

Conclusions: Plain packs stripped of branding elements, featuring larger health warning labels, were associated with reduced positive cigarette brand image and purchase intentions among highly socioeconomically disadvantaged smokers.

BMJ Open

ARTICLE SUMMARY

Article focus

- Previous simulation studies have shown that plain packaging for cigarettes is associated with reduced perceptions of brand appeal, reduced demand and cessation intentions, however none have been conducted with socially disadvantaged smokers who have among the highest smoking rates.
- This study tested the Australian Government's new plain pack design for cigarettes which combines plain packaging with larger pictorial health warning labels.

Key messages

- This experimental simulation study found that plain packaging for cigarettes reduced positive brand appeal ratings and purchase intentions among socially disadvantaged smokers compared to branded cigarette packaging.
- In this study the plain pack condition tested the new design for plain cigarette packs in Australia, which combines plain packaging with larger health warning labels.
- The results of this study support the move toward plain packaging policies for cigarettes.

Strengths and limitations of this study

- This study is the first to obtain a large sample of socially disadvantaged smokers' responses to a simulation of a one-off exposure to an important tobacco control policy development.
- Use of a convenience sample limits the external validity and generalizability of the results.
- Use of a wider range of brands for comparison is recommended for research in countries considering implementing plain packaging.

INTRODUCTION

Smoking rates are disproportionately high among groups who experience multiple levels of disadvantage such as those with low income (26%),[1] Indigenous populations (50%),[2] the homeless (69% - 73%)[3, 4] and individuals with a mental illness (35% - 90%).[5-7] Comparatively, the population smoking rate in Australia is 15%.[1] Therefore, evaluating tobacco control approaches for effectiveness with disadvantaged social groups is a priority.

Cigarette manufacturers use the cigarette pack to promote their product in a number of ways. The cigarette pack is highly visible to both the user and others,[8] and reinforces brand image.[9] Packaging distinguishes brands from competitors and communicates brand imagery, character and values.[9, 10] Pack design can also be used to target segments of the market. For example, packs targeting women typically use bright graphics and feminine colours, descriptor terms such as 'slim' and 'thin' and packaging with increased height and decreased width compared to standard packaging.[11] To engage the youth market, pack designs are novel, with fashionable designs and attractive imagery, have innovative pack construction (i.e. pack shape and method of opening), and promote 'mild' taste or 'smoothness'.[12] Economy packs that emphasise quality are important for targeting low-income smokers, and often use design elements such as printing product price on packaging.[13] Packaging has been particularly important in markets such as Australia where stringent advertising restrictions have long prohibited traditional avenues of advertising and promotion of brand and product.

Design elements of the cigarette pack are constructed to capture starter smokers, encourage brand-switching and brand loyalty, and to expand market share.[9, 13] Packaging colours, product descriptors, brand imagery and logos have all been shown to impact on the perceptions and experiences of the product.[14] A colour code for tobacco products is well established: lighter packaging colours are perceived to contain a product that is less harmful to health. Numerous studies have shown that smokers associate the colour 'red' with high strength and harshness, 'blue' as being mild, and anything progressively lighter as healthier or less harmful.[15, 16]. Similarly, many countries have banned the use of descriptor terms such as 'light', 'mild' and 'low tar' as cigarettes labelled with these terms are falsely perceived as being less harmful to health, and easier to give up.[16] Replacement terms such as 'gold', 'silver' and 'smooth' were still perceived as less harmful than regular varieties, suggesting that removal of both colours and descriptor terms may be more effective than the

BMJ Open

removal of either alone in reducing false beliefs about tobacco risk.[14] Health warning labels (HWLs) that use pictures, supportive text and take up larger portions of the pack space have been shown to increase the effectiveness of the warnings in communicating risk and promoting cessation.[17, 18] Specifically, in a cross-sectional survey in the US, Bansal-Travers *et al.*[17] found that participants selected larger, pictorial, and loss-framed HWLs as the most effective in communicating health risks.

Evidence from plain packaging simulation studies shows that progressively plainer cigarette packaging, incorporating larger HWLs and fewer branding elements, was perceived as less attractive,[19, 20] reduced false beliefs about tobacco risk[14, 17] and was associated with cessation intentions.[8, 20] Wakefield and colleagues have conducted a number of online simulation experiments, exposing participants to pack conditions which vary by brand, degree of plain packaging[19, 21] and HWL size.[20] The studies found that packs with progressively fewer branding elements were perceived as less appealing overall,[19] larger HWLs combined with plain packs reduced adolescents' positive ratings of packs,[21] and presentation of plain packs compared with branded packs increased participant intentions of not purchasing a pack.[20] However, none of these studies examined differences in effects by socioeconomic status (SES). Additionally, best-worst[8] and experimental auction[22] studies have found plain packs featuring large graphic HWLs were the most effective pack type in reducing demand and promoting cessation among adult smokers.

The Australian Government's *Tobacco Plain Packaging Act 2011*, legislated mandatory plain and standardised packaging on cigarettes sold in Australia which include dark colour, pictorial and supportive text HWLs that cover at least 75% front-of-pack and 90% back-ofpack, have all logos and branding removed, and use only specified font styles and sizes.[23] The policy also limits pack and stick dimensions. The legislation was introduced to reduce product appeal, increase the effectiveness of health warnings, and reduce misperceptions about the harms of smoking. The first study to examine effects of plain packaging during the roll-out phase using a computer-assisted telephone survey found that compared to smokers smoking from branded packs, smokers with plain packs were more likely to perceive their tobacco as being lower in both quality and satisfaction, to think about and prioritise quitting and to support the plain packaging policy.[24] However, this study had a low representation of disadvantaged smokers, did not examine effects by SES and did not control for novelty of HWL content. While there is evidence of reduced appeal for plain packaging compared to

branded packaging of tobacco products within the general population, it is important to investigate whether similar effects are likely to occur for groups experiencing social and financial hardship. The aim of this study was to examine brand appeal and purchase intentions associated with branded cigarette packs compared to the new design Australian plain packs among a sample of socioeconomically disadvantaged smokers.

METHODS

Design

A two by two packaging type (branded versus plain) by brand name (Winfield versus Benson & Hedges (B&H)) factorial experimental design was used; randomly exposing participants to one out of a possible four cigarette pack conditions. Each participant completed a uniform series of pack ratings within the experimental condition they were assigned. Data were collected using a touchscreen computer between March and December 2012.

Setting & Sample

As the target population for the study was smokers with high social disadvantage, the sample was drawn from a service outlet of a large, national non-government, social and community service organisation (SCSO). The service provides 'emergency relief' welfare such as food vouchers, grocery items, and financial aid to individuals experiencing various forms of social and financial hardship in a large catchment area of Western Sydney, NSW. The client profile of SCSO's includes an over-representation of disadvantaged groups including Aboriginal and Torres Strait Islanders, single parents, long-term unemployed, and those whose primary income is a government benefit.[25]

Those eligible to participate were clients aged over 18 years, able to comprehend English, and who were not too ill or distressed to take part (as judged by SCSO staff). Previous research has demonstrated high smoking prevalence rates of 60%-70% amongst SCSO clients.[26]

Recruitment

Clients were introduced to the study when they attended the SCSO for their emergency relief appointment. SCSO staff explained that a touchscreen computer survey about smoking was being conducted and if clients were interested they were led to a private room where a Research Assistant (RA) provided further detailed information. The RA provided assistance

BMJ Open

to complete the survey if required. As the survey was anonymous, survey completion was taken as implied consent. Participants were reimbursed for their time with an AUD\$20 grocery voucher.

Smoking status

Smoking status was assessed by asking "Do you currently smoke tobacco products?" with response options i) 'Yes, daily', ii) 'Yes, at least once a week', iii) Yes, but less often than once a week' and iv) 'No, not at all', followed by asking "Have you smoked at least 100 cigarettes or a similar amount of tobacco in your life" (yes/no/not sure). Those who reported to smoke daily, or who reported to smoke occasionally as well as having smoked at least 100 cigarettes in their life were classified as current smokers. Once smoking status was assessed non-smokers exited from the survey.

Figure 1 about here

Presentation of experimental conditions

The study was conducted on a Dell Latitude XT3 (2.50 GHz processor) touchscreen computer, using Digivey version 4 software.[27] Participants were randomly allocated to one of four cigarette pack conditions by Digivey's randomise function, which uses a pseudo random number generator provided by the underlying programming language (see: http://msdn.microsoft.com/en-us/library/system.random(v=vs.90).aspx). Branded pack conditions replicated cigarette packs available for purchase at the time of survey; plain pack conditions tested the new plain packaging design, combining plain packaging stripped of branding elements with larger HWLs. The four pack conditions were: a) Branded Winfield Blue 25; b) Plain Winfield Blue 25; c) Branded B&H Smooth 25, and; d) Plain B&H Smooth 25, see Figure 1. Within each pack condition, respondents were presented with a standard set of items to rate their assigned pack. All pack conditions featured the same graphic image and text HWL: 'Smoking causes peripheral vascular disease' that first appeared on Australian cigarette packs in 2006. The brands used were two of the most popular brand variants in the Australian mainstream (Winfield (Blue 25)) and premium (B&H (Smooth 25)) cigarette markets.[28] Plain pack digital images were created using specifications outlined in the Australian Government's Tobacco Plain Packaging Act 2011, while images of branded packs were supplied by the Centre for Behavioural Research in Cancer, Victoria, Australia.

Outcome measures

Brand appeal

While viewing the assigned pack image, respondents were asked to rate packs on various pack, smoker and taste characteristic statements, see Table 1. These items were developed by Wakefield and colleagues[19-21] based on past tobacco industry packaging studies used to assess pack attractiveness, brand imagery characteristics and perceived sensory attributes. Among adult smokers, these items have variably been used as: individual outcome items;[19] or combined to form four outcome scales and one individual item with inter-item reliability statistics presented.[20]

Brand appeal rating items were combined to form four scales and one stand-alone item in order to replicate the outcome measure structure of Wakefield *et al.*'s previous plain packaging study.[20] The outcome measures were: (1) positive pack characteristics - 'popular among smokers'; 'attractive'; 'sophisticated'; 'a brand you might try/smoke'; (2) positive smoker characteristics – 'trendy' and 'successful'; (3) negative smoker characteristic – 'boring'; (4) positive taste characteristics – 'enjoyable to smoke' and 'satisfying in taste'; and (5) negative harm characteristics – 'high in tar and nicotine' and 'harmful to your health'. Although these measures have shown strong to moderate internal consistency on Cronbach's alpha previously,[20] they have not been tested in the current population, thus we undertook Cronbach's alpha assessment on scales with more than one item.

Scale reliability assessments revealed the outcome measures had moderate to strong internal consistency: positive pack characteristics ($\alpha = .83$); positive smoker characteristics ($\alpha = .71$); positive taste ($\alpha = .84$), and; negative harm characteristics ($\alpha = .65$).

Table 1 about here

Purchase intentions

Participants were presented with images of the two brand name options (Winfield and B&H) on a single screen and asked: "If you ran out of cigarettes and only the packs below were available in the store you went to, which would you be most tempted to buy?" Participants could choose between the two brand name images or select 'I would not buy any'.

BMJ Open

Participants who had previously viewed and rated a plain packaging image (i.e. Pack B or D; see Figure 1) received plain image response options, and those who had previously rated a branded packaging image (i.e. Pack A or C) received branded image response options at this question.

Socio-demographic variables

Gender, age, income, income source, Aboriginal or Torres Strait Islander status, marital status, highest level of education and housing type were assessed.

Statistical Analyses

Analyses were conducted using Stata v11 (<u>www.stata.com</u>). Characteristics of participants are presented by intervention group to assess the success of the randomisation.

Outcome measure assessment

As the outcome variables were not normally distributed we used non-parametric methods for analysis. Median scores with 95% confidence intervals are presented graphically for each of the four pack conditions. Exploratory data analysis indicated that there may be a potential pack type by brand name interaction, i.e. the relationship between packaging types (branded versus plain packaging) differed for the two different cigarette brand names. As the study had limited statistical power to assess interaction effects, we did not formally test this, but undertook analysis considering the four pack conditions separately, rather than as a factorial design. The Kruskal-Wallis test was used as a global assessment of differences in factor scores among the four pack conditions. If the *p*-value for this test was <0.1, pairwise comparisons using the Wilcoxon rank sum test were undertaken to compare median scores between branded packaging and plain packaging for each of the two brand names. Odds ratio analyses were used to assess the effect of packaging type (branded versus plain) on purchase intention.

Sample size for this study was determined by requirements for another trial for which participants were recruited. Post hoc power calculations demonstrated that a sample of 350 participants (approximately 85 in each of the pack type by brand name groups) would allow detection of differences in scores between branded and plain packaging (within each brand

name) of approximately half a standard deviation, with 5% significance level and 90% power (to allow for some loss of power due to the use of non-parametric analyses).

RESULTS

Sample

A total of 787 clients were approached by SCSO staff during the study period and 608 were eligible to be approached to participate by the RA. Of those, 581 (96%) completed the survey and 362 (62%) of these were identified as current smokers (daily and occasional). Eight smokers were excluded as they primarily used something other than manufactured or roll-your-own tobacco. The demographic details of the study participants in each intervention group are presented in Table 2. The majority of the sample had not finished high school (64%), earned less than AUD\$300/week (55%) and received their income from Government benefit payments (95%). Socio-demographic characteristics were similar across the four intervention groups.

Table 2 about here

Brand Appeal Ratings

Figure 2 about here

Figure 2 displays ratings across the four pack conditions on the positive pack (2a), positive smoker (2b), negative smoker (2c), positive taste (2d), and negative harm (2e) response scales. The positive pack scale varied significantly across the pack conditions (p = 0.001), with pairwise comparisons revealing that branded packaging images were rated significantly more positively than plain packaging images in the Winfield condition (p < 0.001), however there was no difference in the B&H condition (p = 0.102), see Table 3. Positive smoker characteristic ratings were significantly different across the four pack conditions (p = 0.003); branded packaging images were rated more positively than plain packaging images within the Winfield condition (p = 0.001), but not the B&H brand name condition (p = 0.197), see Table 3. There was no difference in the negative smoker characteristic ratings across the four pack conditions (p = 0.427). The four pack conditions were rated significantly differently when

assessing positive taste characteristics (p = 0.033). Pairwise comparisons revealed plain packaging images were less appealing on taste attributes than branded packaging images for the Winfield condition (p = 0.004), however there were no differences detected in taste ratings between plain and branded packaging images in the B&H condition. The four pack conditions rated similarly in regards to negative harm characteristics (p = 0.411) as shown in Figure 2e and Table 3.

Table 3 about here

Purchase Intent

Participants were asked to choose which pack, if any, they would prefer to purchase out of the two brand names used in this study. Participants who viewed plain packaging images only were more likely to select that they would not buy any of the presented options (35%), compared to those who viewed branded packaging images (19%) [OR = 2.2, 95%CI = 1.3, 3.5; p = 0.002].

DISCUSSION

This study found that plain cigarette packs were rated as significantly less appealing than branded packs in a sample of socioeconomically disadvantaged smokers. Branded packaging was viewed as more appealing, smokers of these packs were rated in a more positive way, and the cigarette taste was preferred compared to cigarettes in plain packaging. No differences between branded and plain packaging relating to negative smoker or negative harm characteristics were detected. Finally, plain packaging reduced cigarette purchase intentions in comparison to branded packaging among smokers. The overall results of this study are supportive of previous plain packaging simulation research conducted with general population samples suggesting that plain packs are viewed less favourably on measures of brand appeal than branded packs.[19, 20]

One notable finding of this research, demonstrating the importance of branding in the tobacco market, was a possible interaction effect between packaging type (branded versus plain) and brand name (Winfield versus B&H). Plain pack images were rated consistently lower than branded images on measures of positive pack, positive smoker and positive taste appeal for the Winfield condition, but no differences were detected for the B&H condition. It might be

expected that plain packaging of B&H cigarettes is unlikely to have much effect among socially disadvantaged smokers as this brand is positioned as a premium product at a high price point,[29] with apparent low penetration among this smoker group: only 1.6% of participants reported regularly using B&H cigarettes compared to 9% in the general population.[28] Comparatively, engagement with the 'mainstream', value-for-money Winfield brand is much higher among socially disadvantaged smokers: participants reported regularly using this brand at the same rate as the general population (19%).[28] Plain packaging has the potential to show stronger effects for brands that are personally relevant to the individual smoker.

Similarly to Wakefield *et al.* 's previous simulation studies, this study found no difference between plain and branded cigarette packaging on negative harm ratings. This may indicate that the removal of branding elements such as colours, logos, and fonts on packs is more effective in reducing brand appeal associations rather than tapping into negative harm perceptions. It is also likely that the measures used in this study, intended to assess brand appeal, were not adequate to assess negative harm perceptions related to packaging. It may also be the case that effects on perceived harm are stronger among youth compared to adults, as previous simulation studies indicate plain packaging reduces false beliefs about smoking among adolescents[14] and increases cessation intentions among young adults.[8] Our study also found that the presentation of plain packaging, compared to branded packaging, reduced purchase intentions among socioeconomically disadvantaged smokers, consistent with previous simulations conducted with general population smokers.[20, 22]

Implications

The results of this study support the move toward plain packaging policies for cigarettes. Most research used in the development of plain packaging policies was conducted with general population samples, with limited data to indicate how socioeconomically disadvantaged groups, who have among the highest smoking rates, may respond to this tobacco control policy. The current study indicates that socioeconomically disadvantaged smokers are likely to respond similarly to the general population, with plain packaging reducing brand appeal ratings and purchase intentions among these smokers. Further research, particularly in low-income countries could provide insight about the possibility of disseminating this policy internationally.

BMJ Open

Early research in Australia indicates plain packaging makes tobacco less appealing and increases the urgency to quit smoking,[24] however it will be important to monitor impact over time. Plain packaging policies have the potential to reduce smoking initiation. Associations with brand identity and appeal are motivating factors in smoking uptake among youth.[30, 31] There are documented cases of cigarette rebranding, for example the development of the Camel 'Smooth Character', to appeal to young adult smokers with the explicit intentions of increasing market share and prevalence of smoking among youth.[32] Plain packaging policies prevent this kind of brand targeting and have the potential to reduce uptake among youth by reducing brand appeal and purchase intentions. It will also be important to assess the use of any avoidance strategies, such as pack stickers and cigarette cases, and to monitor whether these are temporary solutions, or whether on-going changes to policy are required.

Strengths and Limitations

The primary limitation of the study is its reliance on a convenience sample limiting its external validity and generalizability. However, socially disadvantaged groups are notoriously difficult to recruit and retain in health research.[33, 34] Recruitment challenges were overcome by accessing community services as recruitment sites and using convenience samples. As a result, this study is the first to obtain a large sample of socially disadvantaged smokers' responses to a simulation of a one-off exposure to an important tobacco control policy development. Since the policy has been implemented, socially disadvantaged smokers' day-to-day experience is one of being exposed to these plain packs multiple times a day, and so the findings from this study may underestimate the real world effects of this change. This study was also limited by the measurement of purchase intentions rather than actual behaviour, the use of only two cigarette brands for comparison. Use of a wider range of brands for comparison is recommended for research in countries considering implementing plain packaging. Although the study employed a computer image instead of actual packs, previous packaging research demonstrates results are generally consistent regardless of stimulus presentation modality. [22, 35, 36] The outcome measures used in this study pose an additional limitation. Although they were selected for the purpose of comparing results with previous plain pack research, [19, 20] they have not been evaluated for validity or reliability and this should be assessed in the future.

As this study tested the Australian Government's new plain pack design, which combines plain packaging with larger HWLs, we were unable to distinguish which factor (plain packaging or larger HWLs) produced the observed results. Previously, Wakefield *et al.*[20] examined the importance of branding versus HWL size on cigarette packaging, concluding that plain packaging reduced elements of brand appeal far more than increasing the size of HWLs. In their study, when packs were plain, increasing the size of HWLs above 30% did not reduce brand appeal further. This finding suggests that the effects observed in the current study are more likely due to stripping the pack of branding elements, than increasing the HWL size. Finally, the last 2 – 3months of survey occurred during the policy roll-out phase and participants may have already been exposed to and purchased plain packs. Prior exposure may have allowed participants to become familiar with the new pack designs, and may explain why participants did not rate packs differently on negative harm and smoker measures.

Conclusions

The findings of this study support plain packaging policy, and show this strategy has the potential to reduce positive associations with cigarette packs among a group of highly socioeconomically disadvantaged smokers. It will be important to monitor the long-term outcomes of plain packaging policy, particularly with regards to uptake of smoking in disadvantaged groups. Further plain pack research in low-income countries is recommended, to support the potential dissemination of the policy internationally.

ACKNOWLEDGEMENTS

The authors thank the Social and Community Service Organisation and its clients involved in this research, as well as Melinda Hickey, Jessica Masey and Jodie Schroder for their roles in recruiting clients into the project.

CONTRIBUTORSHIP STATEMENT

All authors contributed to the concept development and design of the project. AG led data collection, analysis and manuscript write-up. BB, CP and CDE oversaw data collection. CDE and SD advised on, and CDE oversaw data analysis. All authors contributed to manuscript drafts and approved of the final manuscript.

FUNDING

This study was part of a project funded by a grant from the Hunter Medical Research Institute (G1101150). AG was supported by an Australian Postgraduate Award PhD scholarship administered through the University of Newcastle. BB was supported by a Cancer Institute NSW Career Development Fellowship. CP was supported by Cancer Control Collaboration funding. DATA SHARING STATEMENT No additional data are available. COMPETING INTERESTS None to declare. ETHICS APPROVAL University of Newcastle's Human Research Ethics Committee.

REFERENCES

- 1. Australian Institute of Health and Welfare. 2010 National Drug Strategy Household Survey Report. Canberra: AIHW2011 Contract No.: Cat. no. PHE 145.
- 2. Australian Bureau of Statistics, Australian Institute of Health and Welfare. The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples. Canberra2008.
- 3. Connor SE, Cook RL, Herbert MI, *et al.* Smoking cessation in a homeless population: There is a will, but is there a way? *J Gen Intern Med.* 2002;**17**:369-72.
- 4. Kermode M, Crofts N, Miller P, *et al.* Health indicators and risks among people experiencing homelessness in Melbourne, 1995-1996. *Aust N Z J Public Health.* 1998 Jun;**22**:464-70.
- 5. Lasser K, Boyd JW, Woolhandler S, *et al.* Smoking and Mental Illness: A populationbased prevalence study. *Journal of the American Medical Association*. 2000;**284**.
- 6. Moeller-Saxone K. Cigarette smoking and interest in quitting among consumers at a Psychiatric Disability Rehabilitation and Support Service in Victoria. *Aust N Z J Public Health.* 2008;**32**:479-81.
- 7. Reichler H, Baker A, Lewin T, *et al.* Smoking among in-patients with drug-related problems in an Australian psychiatric hospital. *Drug Alcohol Rev.* 2001;**20**:231-7.
- 8. Hoek J, Wong C, Gendall P, *et al.* Effects of dissuasive packaging on young adult smokers. *Tob Control.* 2011;**20**:183-8.
- 9. Wakefield M, Morley C, Horan JK, *et al.* The cigarette pack as image: New evidence from tobacco industry documents. *Tob Control.* 2002;**11**:i73-i80.
- 10. Ford A, Moodie C, Hastings G. The role of packaging for consumer products: Understanding the move towards 'plain' tobacco packaging. *Addiction Research & Theory*. 2012;**20**:339-47.
- 11. Carpenter CM, Wayne GF, Connolly GN. Designing cigarettes for women: new findings from the tobacco industry documents. *Addiction*. 2005 Jun;**100**:837-51.
- 12. Cummings KM, Morley CP, Horan JK, *et al.* Marketing to America's youth: evidence from corporate documents. *Tob Control.* 2002 March 1, 2002;11:i5-i17.
- 13. Anderson S, Hastings G, MacFadyen L. Strategic marketing in the UK tobacco industry. *The Lancet Oncology*. 2002;**3**:481-6.
- 14. Hammond D, Dockrell M, Arnott D, *et al.* Cigarette pack design and perceptions of risk among UK adults and youth. *The European Journal of Public Health.* 2009;**19**:631-7.
- 15. Bansal-Travers M, O'Connor R, Fix BV, *et al.* What do cigarette pack colors communicate to smokers in the U.S.? *Am J Prev Med.* 2011 Jun;**40**:683-9.
- Hammond D. FCTC Article 11: Tobacco labelling and packaging: a review of evidence2007: Available from: <u>http://www.cctc.ca/cctc/EN/tcrc/books/tcmonograph.2007-12-</u> <u>19.7863543963#.UKsFEIdkyAg</u>.
- 17. Bansal-Travers M, Hammond D, Smith P, *et al.* The impact of cigarette pack design, descriptors, and warning labels on risk perception in the US. *Am J Prev Med.* 2011;**40**:647-82.
- 18. Hammond D. Health warning messages on tobacco products: a review. *Tob Control*. 2011;**20**:327-37.
- 19. Wakefield MA, Germain D, Durkin SJ. How does increasingly plainer cigarette packaging influence adults smokers' perceptions about brand image? An experimental study. *Tob Control.* 2008;**17**:416-21.

For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

1		
2		
3	20.	Wakefield M, Germain D, Durkin S, et al. Do larger pictorial health warnings
4		diminish the need for plain packaging of cigarettes? Addiction. 2012 Jun;107:1159-
5		67.
6	21	Germain D Wakefield MA Durkin SJ Adolescents' perceptions of cigarette brand
7		image: Does plain packaging make a difference? I Adolesc Health 2010:46:385-92
8	\mathbf{r}	Thresher IF. Pousu MC. Hommond D. at al. Estimating the impact of nietorial health
9	22.	Thrasher JF, Kousu WC, Hammond D, et ut. Estimating the impact of pictorial health
10		warnings and "plain" cigarette packaging: evidence from experimental auctions
11		among adult smokers in the United States. <i>Health Policy</i> . 2011 Sep; 102 :41-8.
12	23.	Department of Health and Ageing. Tobacco Plain Packaging Bill 2011 Canberra2011.
13	24.	Wakefield MA, Hayes L, Durkin S, et al. Introduction effects of the Australian plain
14		packaging policy on adult smokers: a cross-sectional study. <i>BMJ Open</i> , 2013 July 1.
15		2013· 3
16	25	Australian Council of Social Service, Australian Community Sector Survey Penort
17	23.	Australian Council of Social Service. Australian Community Sector Survey Report
18		2011 Volume I - National. Strawberry Hills: Australian Council of Social
19		Service2011.
20	26.	Bryant J, Bonevski B, Paul C. A survey of smoking prevalence and interest in quitting
21		among social and community service organisation clients in Australia: a unique
22		opportunity for reaching the disadvantaged. BMC Public Health. 2011;11:827.
23	27	Creseo Corporation Digivey Survey Suite Arizona USA
24	27.	Scallo MM Winstanley MH Tobacco in Australia: Facts and issues Melbourne:
25	20.	Concer Council Victoria: 2012 [cited 2012 August]: 4th Edition: [August] has from:
26		Cancel Council victoria, 2012 [cited 2015 August], 4th Edition.[Available from.
27		www.lobaccolnAustralia.org.au.
28	29.	Carter SM. The Australian cigarette brand as product, person, and symbol. <i>Tob</i>
20		<i>Control</i> . 2003 December 1, 2003; 12 :iii79-iii86.
20	30.	DiFranza JR, Wellman RJ, Sargent JD, et al. Tobacco Promotion and the Initiation of
31		Tobacco Use: Assessing the Evidence for Causality. <i>Pediatrics</i> , 2006 June 1.
32		2006: 117 :e1237-e48
32	31	Gendall P. Hoak I. Thomas II. at al. Young adults' interpretation of tobacco brands:
34	51.	Unalisations for to be sentral Nicoting Tel Des 2011
35	22	Implications for tobacco control. <i>Nicotine Tob Res</i> . 2011.
36	32.	Wayne GF, Connolly GN. How cigarette design can affect youth initiation into
37		smoking: Camel cigarettes 1983-93. <i>Tob Control</i> . 2002 March 1, 2002;11:132-19.
38	33.	UyBico SJ, Pavel S, Gross CP. Recruiting vulnerable populations into research: a
20		systematic review of recruitment interventions. J Gen Intern Med. 2007 Jun;22:852-
39 40		63.
40	34	Yancey AK Ortega AN Kumanyika SK Effective recruitment and retention of
41	51.	minority research participants Annu Ray Public Health 2006:77:1-28
42	35	Hammond D. Thrasher I. Paid II. at al. Parceived effectiveness of nictorial health
43	55.	Hammond D, Thrasher J, Keld JL, <i>et al.</i> Perceived effectiveness of pictorial health
44		warnings among Mexican youth and adults: a population-level intervention with
40		potential to reduce tobacco-related inequities. <i>Cancer Causes Control</i> . 2012 Mar;23
40		Suppl 1:57-67.
47	36.	Thrasher JF, Arillo-Santillan E, Villalobos V, et al. Can pictorial warning labels on
40		cigarette packages address smoking-related health disparities? Field experiments in
49 50		Mexico to assess pictorial warning label content <i>Cancer Causes Control</i> 2012
5U E1		Mar: 23 Sunnl 1:69-80
50		Mar, 25 Suppr 1.09-00.
52		
00 EA		
04 55		
00 50		
00 57		
5/ 50		
20 50		
59 60		
00		

Pack characteristics: How well do you think the following phrases relate to the cigarette pack shown? This pack is popular among smokers This pack is popular among smokers This pack is sophisticated This pack is sophisticated This pack is a brand you might try/smokeRespSmoker characteristics: How well do you think the following characteristics describe a typical smoker of the pack shown? A typical smoker of this pack is trendy A typical smoker of this pack is boring A typical smoker of this pack is successfulRespTaste attributes: Please rate the following phrases describing the taste of cigarettes from the pack shown. I would expect the cigarettes in this pack to be his pack to be high in tar and nicotine I would expect the cigarettes in this pack to beResp	onse scale: 1 (not at all) to 7 emely) onse scale: 1 (not at all) to 7 emely)
phrases relate to the cigarette pack shown?(extra This pack is popular among smokers This pack is attractive This pack is sophisticated This pack is a brand you might try/smoke(extra This pack is a brand you might try/smokeSmoker characteristics: How well do you think the following characteristics describe a typical smoker of the pack shown?Resp (extra (extra 	emely) onse scale: 1 (not at all) to 7 emely)
This pack is popular among smokersThis pack is attractiveThis pack is sophisticatedThis pack is a brand you might try/smokeSmoker characteristics: How well do you think thefollowing characteristics describe a typical smoker of thepack shown?A typical smoker of this pack is trendyA typical smoker of this pack is boringA typical smoker of this pack is boringA typical smoker of this pack is successfulTaste attributes: Please rate the following phrasesdescribing the taste of cigarettes from the pack shown.I would expect the cigarettes in this pack to beenjoyable to smokeI would expect the cigarettes in this pack to be highin tar and nicotineL would expect the cigarettes in this pack to be	onse scale: 1 (not at all) to 7 emely)
This pack is attractive This pack is sophisticated This pack is a brand you might try/smokeRespSmoker characteristics: How well do you think the following characteristics describe a typical smoker of the pack shown?RespA typical smoker of this pack is trendy A typical smoker of this pack is boring A typical smoker of this pack is boring A typical smoker of this pack is successfulRespTaste attributes: Please rate the following phrases describing the taste of cigarettes from the pack shown. I would expect the cigarettes in this pack to be 	onse scale: 1 (not at all) to 7 emely)
This pack is sophisticated This pack is a brand you might try/smokeRespSmoker characteristics: How well do you think the following characteristics describe a typical smoker of the pack shown?RespA typical smoker of this pack is trendy 	onse scale: 1 (not at all) to 7 emely)
This pack is a brand you might try/smokeSmoker characteristics: How well do you think the following characteristics describe a typical smoker of the pack shown?Resp (extra 	onse scale: 1 (not at all) to 7 emely)
Smoker characteristics: How well do you think the following characteristics describe a typical smoker of the pack shown?Resp. (extra 	onse scale: 1 (not at all) to 7 emely)
following characteristics describe a typical smoker of the pack shown?(extra (extra a typical smoker of this pack is trendy 	emely)
pack shown? A typical smoker of this pack is trendy A typical smoker of this pack is boring A typical smoker of this pack is boring A typical smoker of this pack is successful Taste attributes: Please rate the following phrases describing the taste of cigarettes from the pack shown. I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be high in tar and nicotine I would expect the cigarettes in this pack to be	• /
A typical smoker of this pack is trendy A typical smoker of this pack is boring A typical smoker of this pack is successful Taste attributes: <i>Please rate the following phrases</i> <i>describing the taste of cigarettes from the pack shown.</i> I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be high in tar and nicotine I would expect the cigarettes in this pack to be	
A typical smoker of this pack is boring A typical smoker of this pack is successful Taste attributes: <i>Please rate the following phrases</i> <i>describing the taste of cigarettes from the pack shown.</i> I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be high in tar and nicotine I would expect the cigarettes in this pack to be	
A typical smoker of this pack is successful Taste attributes: <i>Please rate the following phrases</i> <i>describing the taste of cigarettes from the pack shown.</i> I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be high in tar and nicotine I would expect the cigarettes in this pack to be	
Taste attributes: Please rate the following phrasesResp.describing the taste of cigarettes from the pack shown.(extraI would expect the cigarettes in this pack to beenjoyable to smokeI would expect the cigarettes in this pack to be highin tar and nicotineI would expect the cigarettes in this pack to behigh	
describing the taste of cigarettes from the pack shown. (extra I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be high in tar and nicotine I would expect the cigarettes in this pack to be	onse scale: 1 (not at all) to 7
I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be high in tar and nicotine I would expect the cigarettes in this pack to be	emely)
enjoyable to smoke I would expect the cigarettes in this pack to be high in tar and nicotine I would expect the cigarettes in this pack to be	
I would expect the cigarettes in this pack to be high in tar and nicotine I would expect the cigarettes in this pack to be	
in tar and nicotine I would expect the cigarettes in this pack to be	
I would expect the cigarettes in this pack to be	
Thousa expect the englisettes in this pack to be	
satisfying in taste	
I would expect the cigarettes in this pack to be	
harmful to your health	

Table 1. Standard items used to assess responses to pack images.

BMJ Open

Characteristic	Winfield	Winfield	B&H	B&H	Total
	Branded	Plain	Branded	Plain	
	N (%)	N (%)	N (%)	N (%)	N (%)
N	92 (26)	95 (27)	88 (25)	79 (22)	354
Age		. ,			
18-39	56 (61)	51 (54)	51 (58)	48 (61)	206 (58)
40+	36 (39)	44 (46)	37 (42)	31 (39)	148 (42)
Gender					
Female	61 (66)	46 (52)	66 (70)	43 (54)	216 (61)
Aboriginal and/or Torres Strait Islander					
Yes	23 (25)	14 (16)	17 (18)	10(13)	64 (18)
Marital Status					
Married / De facto / Living with partner	29 (32)	15 (17)	23 (24)	20 (25)	87 (25)
Separated / Divorced	27 (29)	29 (33)	27 (28)	20 (25)	103 (29)
Never married / Single / Widowed	36 (39)	44 (50)	45 (47)	39 (49)	164 (46)
Highest Education					
Primary school	0 (0)	4 (5)	4 (4)	4 (5)	12 (3.4)
High school years 7-10	62 (67)	54 (61)	59 (62)	39 (49)	214 (61)
High school years 11-12	11 (12)	13 (15)	13 (14)	14 (18)	51 (14)
TAFE / trade qualification	14 (16)	13 (15)	16 (17)	21 (27)	64 (18)
University degree	5 (5)	4 (5)	3 (3)	1(1)	13 (3.7)
Personal Weekly Income					
<\$299	54 (59)	55 (58)	48 (56)	38 (48)	195 (55)
>\$300	36 (39)	33 (35)	31 (35)	37 (47)	137 (39)
Prefer not to answer	2 (2)	7 (7)	9 (10)	4 (5)	22 (6)
Income source					
Paid work	6 (7)	2 (2)	4 (4)	1(1)	13 (3.7)
Government payment (Centrelink)	85 (92)	85 (97)	89 (94)	76 (96)	335 (95)
Other	1(1)	1 (1)	2 (2)	2 (3)	6 (1.7)
Housing type					
Own house/private rental	26 (28)	31 (33)	28 (32)	23 (29)	108 (31)
Government rental	55 (60)	42 (44)	44 (50)	43 (54)	184 (52)
Homeless/Supported accommodation	11 (12)	22 (23)	16 (18)	13 (17)	62 (18)
Regular cigarette brand					
Winfield	10 (17)	16 (21)	14 (24)	10 (18)	50 (20)
Benson & Hedges	1 (1.7)	1 (1.3)	2 (3.5)	0 (0)	4 (1.6)
Other	36 (62)	50 (65)	34 (59)	36 (66)	156 (63)
I don't have a regular brand	11 (19)	10 (13)	8 (14)	9 (16)	38 (15)
Regular tobacco type					
Manufactured cigarettes	58 (63)	77 (81)	58 (66)	55 (70)	248 (70)
Roll-your-own tobacco	34 (37)	18 (19)	30 (34)	24 (30)	106 (30)

Table 3. Effect of pack condition on b	brand appeal ratings ($N = 354$).
--	-------------------------------------

	Pack Condition						
	Winfield_Branded	Winfield_Plain	B&H_Branded	B&H_Plain	Global test	Pairwise	
						Winfield	Benson&Hedges
	(n = 92)	(n = 95)	(n = 88)	(n = 79)		(branded v plain)	(branded v plain)
	Median (95%CI)	Median (95%CI)	Median (95%CI)	Median (95%CI)	Р	Р	Р
Positive pack	3.86 (3.5 – 4.25)	2.25 (2 - 2.5)	2.63 (2.07 - 3.25)	2.5 (1.75 – 2.75)	< 0.001	< 0.001	0.102
Positive smoker	2.5 (2 – 3.5)	1 (1 – 2)	2.5 (2 – 3)	2.5 (1.5 – 2.87)	0.003	0.001	0.197
Negative smoker (boring)	2(1-3)	2 (1 – 2)	2 (1 – 3)	3 (1.27 – 3.73)	0.427	n/a	n/a
Positive taste	4 (3.5 – 4.5)	▲ 3 (2.11 – 3.5)	3.75 (3 – 4)	3(2-4)	0.033	0.004	0.804
Negative harm	5.5 (4.55 - 6)	5.5 (4.5 - 6)	4.5 (4 – 5.5)	6 (5.14 – 6.5)	0.411	n/a	n/a

5.5 (4.55-6) 5.5 (4.5-6) 4.5 (4-5.5) 6 (5.14-6.5) 0.411 n/a

BMJ Open

Socioeconomically disadvantaged smokers' ratings of plain and branded cigarette packaging: An experimental study

Ashleigh Guillaumier¹, Billie Bonevski¹, Chris Paul², Catherine D'Este³, Sarah Durkin⁴

¹School of Medicine & Public Health, University of Newcastle, Newcastle, Australia

²Health Behaviour Research Group, School of Medicine & Public Health, University of Newcastle & Hunter Medical Research Institute, Newcastle, Australia

³Centre for Clinical Epidemiology and Biostatics, School of Medicine & Public Health, University of Newcastle & Hunter Medical Research Institute, Newcastle, Australia

4Centre for Behavioural Research in Cancer, The Cancer Council Victoria, Melbourne, Australia

Corresponding author: Ashleigh Guillaumier, Phone: (02) 4033 5711, Fax: (02) 40335600, Email: <u>Ashleigh.Guillaumier@newcastle.edu.au</u>, Postal address: CTNMH, Level 5, McAuley Centre, Calvary-Mater Hospital, University of Newcastle, corners of Edith Street & Platt Street, Waratah NSW 2298 Australia.

Running head: Disadvantaged smokers and plain packaging Keywords: social disadvantage; plain packaging; tobacco Word Count: 3500

ABSTRACT

Objectives: This study aimed to test the <u>potential</u> impact of plain packaging for cigarettes on brand appeal among highly socioeconomically disadvantaged smokers using the new design for cigarettes implemented in Australia, which combines plain packaging with larger health warning labels.

Design: A 2x2 factorial design trial embedded within a cross-sectional computer touchscreen survey. Data was collected between March and December 2012.

Setting: Socially disadvantaged welfare aid recipients were recruited through a large Social and Community Service Organisation in NSW, Australia.

Participants: N=354 smokers. The majority of the sample had not completed high school (64%), earned less than AUD\$300/week (55%) and received their income from Government payments (95%).

Interventions: Participants were randomised to one of four different pack conditions determined by brand name: Winfield versus Benson & Hedges, and packaging type: branded versus plain. Participants were required to rate their assigned pack on measures of brand appeal and purchase intentions.

Results: Plain packaging was associated with significantly reduced smoker ratings of 'positive pack characteristics' (p < 0.001), 'positive smoker characteristics' (p = 0.003), and 'positive taste characteristics' (p = 0.033) in the Winfield brand name condition only. Across the four pack conditions, no main differences were found for 'negative smoker characteristic' (p = 0.427) or 'negative harm characteristics' (p = 0.411). In comparison to branded plain packaging, the presentation of plain branded packaging was associated with lower-higher odds of smokers' purchase intentions (OR = 2.18, 95%CI = 1.34, 3.54; p = 0.002).

Conclusions: Plain packs stripped of branding elements, featuring larger health warning labels, were associated with reduced positive cigarette brand image and purchase intentions among highly socioeconomically disadvantaged smokers.

BMJ Open

ARTICLE SUMMARY

Article focus

- Previous simulation studies have shown that plain packaging for cigarettes is associated with reduced perceptions of brand appeal, reduced demand and cessation intentions, however none have been conducted with socially disadvantaged smokers who have among the highest smoking rates.
- This study tested the Australian Government's new plain pack design for cigarettes which combines plain packaging with larger pictorial health warning labels.

Key messages

- This experimental simulation study found that plain packaging for cigarettes reduced positive brand appeal ratings and purchase intentions among socially disadvantaged smokers compared to branded cigarette packaging.
- In this study the plain pack condition tested the new design for plain cigarette packs in Australia, which combines plain packaging with larger health warning labels.
- The results of this study support the move toward plain packaging policies for cigarettes.

Strengths and limitations of this study

- This study is the first to obtain a large sample of socially disadvantaged smokers' responses to a simulation of a one-off exposure to an important tobacco control policy development.
- Use of a convenience sample limits the external validity and generalizability of the results.
- Use of a wider range of brands for comparison is recommended for research in countries considering implementing plain packaging.

INTRODUCTION

Smoking rates are disproportionately high among groups who experience multiple levels of disadvantage such as those with low income (26%),[1] Indigenous populations (50%),[2] the homeless (69% - 73%)[3, 4] and individuals with a mental illness (35% - 90%).[5-7] Comparatively, the population smoking rate in Australia is 15%.[1] Therefore, evaluating tobacco control approaches for effectiveness with disadvantaged social groups is a priority.

Cigarette manufacturers use the cigarette pack to promote their product in a number of ways. The cigarette pack is highly visible to both the user and others,[8] and reinforces brand image.[9] Packaging distinguishes brands from competitors and communicates brand imagery, character and values.[9, 10] Pack design can also be used to target segments of the market. For example, packs targeting women typically use bright graphics and feminine colours, descriptor terms such as 'slim' and 'thin' and packaging with increased height and decreased width compared to standard packaging.[11] To engage the youth market, pack designs are novel, with fashionable designs and attractive imagery, have innovative pack construction (i.e. pack shape and method of opening), and promote 'mild' taste or 'smoothness'.[12] Economy packs that emphasise quality are important for targeting low-income smokers, and often use design elements such as price-marking (printing product price on packaging).[13] Packaging has been particularly important in markets such as Australia where stringent advertising restrictions have long prohibited traditional avenues of advertising and promotion of brand and product.

Design elements of the cigarette pack are constructed to capture starter smokers, encourage brand-switching and brand loyalty, and to expand market share.[9, 13] Packaging colours, product descriptors, brand imagery and logos have all been shown to impact on the perceptions and experiences of the product.[14] A colour code for tobacco products is well established: lighter packaging colours are perceived to contain a product that is less harmful to health. Numerous studies have shown that smokers associate the colour 'red' with high strength and harshness, 'blue' as being mild, and anything progressively lighter as healthier or less harmful.[15, 16]. Similarly, many countries have banned the use of descriptor terms such as 'light', 'mild' and 'low tar' as cigarettes labelled with these terms are falsely perceived as being less harmful to health, and easier to give up.[16] Replacement terms such as 'gold', 'silver' and 'smooth' were still perceived as less harmful than regular varieties, suggesting that removal of both colours and descriptor terms may be more effective than the

For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

removal of either alone in reducing false beliefs about tobacco risk.[14] Health warning labels (HWLs) that use pictures, supportive text and take up larger portions of the pack space have been shown to increase the effectiveness of the warnings in communicating risk and promoting cessation.[17, 18] Specifically, in a cross-sectional survey in the US, Bansal-Travers *et al.*[17] found that participants selected larger, pictorial, and loss-framed HWLs as the most effective in communicating health risks.

Evidence from plain packaging simulation studies shows that progressively plainer cigarette packaging, incorporating larger HWLs and fewer branding elements, was perceived as less attractive,[19, 20] reduced false beliefs about tobacco risk[14, 17] and was associated with cessation intentions.[8, 20] Wakefield and colleagues have conducted a number of online simulation experiments, exposing participants to pack conditions which vary by brand, degree of plain packaging[19, 21] and HWL size.[20] The studies found that packs with progressively fewer branding elements were perceived as less appealing overall,[19] larger HWLs combined with plain packs reduced adolescents' positive ratings of packs,[21] and presentation of plain packs compared with branded packs increased participant intentions of not purchasing a pack.[20] However, none of these studies examined differences in effects by socioeconomic status (SES). Additionally, best-worst[8] and experimental auction[22] studies have found plain packs featuring large graphic HWLs were the most effective pack type in reducing demand and promoting cessation among adult smokers.

The Australian Government's *Tobacco Plain Packaging Act 2011*, legislated mandatory plain and standardised packaging on cigarettes sold in Australia which include dark colour, pictorial and supportive text HWLs that cover at least 75% front-of-pack and 90% back-ofpack, have all logos and branding removed, and use only specified font styles and sizes.[23] <u>The policy also limits pack and stick dimensions.</u> The legislation was introduced to reduce product appeal, increase the effectiveness of health warnings, and reduce misperceptions about the harms of smoking. <u>Providing some early support, tT</u>he first study to examine effects of plain packaging during the roll-out phase <u>using a computer-assisted telephone</u> <u>survey</u> found that compared to smokers smoking from branded packs, smokers with plain packs were more likely to perceive their tobacco as being lower in both quality and satisfaction, to think about and prioritise quitting and to support the plain packaging policy.[24] <u>However, this study had a low representation of disadvantaged smokers, did not</u> <u>examine effects by SES and did not control for novelty of HWL content.</u> While there is

For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

evidence of reduced appeal for plain packaging compared to branded packaging of tobacco products within the general population, it is important to investigate whether similar effects are likely to occur for groups experiencing social and financial hardship. The aim of this study was to examine brand appeal and purchase intentions associated with branded cigarette packs compared to the new design Australian plain packs among a sample of socioeconomically disadvantaged smokers.

METHODS

Design

A two by two packaging type (branded versus plain) by brand name (Winfield versus Benson & Hedges (B&H)) factorial experimental design was used; randomly exposing participants to one out of a possible four cigarette pack conditions. Each participant completed a uniform series of pack ratings within the experimental condition they were assigned. Data were collected using a touchscreen computer between March and December 2012.

Setting & Sample

As the target population for the study was smokers with high social disadvantage, the sample was drawn from a service outlet of a large, national non-government, social and community service organisation (SCSO). The service provides 'emergency relief' welfare such as food vouchers, grocery items, and financial aid to individuals experiencing various forms of social and financial hardship in a large catchment area of Western Sydney, NSW. The client profile of SCSO's includes an over-representation of a number of disadvantaged groups including Aboriginal and Torres Strait Islanders, single parents, long-term unemployed, and those whose primary income is a government benefit.[25]

Those eligible to participate were clients aged over 18 years, able to comprehend English, and who were not too ill or distressed to take part (as judged by SCSO staff). Previous research has demonstrated high smoking prevalence rates of 60%-70% amongst SCSO clients.[26]

Recruitment

Clients were introduced to the study when they attended the SCSO for their emergency relief appointment. SCSO staff explained that a touchscreen computer survey about smoking was being conducted and if clients were interested they were led to a private room where a

BMJ Open

Research Assistant (RA) provided further detailed information. The RA provided assistance to complete the survey if required. As the survey was anonymous, survey completion was taken as implied consent. Participants were reimbursed for their time with an AUD\$20 grocery voucher.

Smoking status

Smoking status was assessed by asking "Do you currently smoke tobacco products?" with response options i) 'Yes, daily', ii) 'Yes, at least once a week', iii) Yes, but less often than once a week' and iv) 'No, not at all', followed by asking "Have you smoked at least 100 cigarettes or a similar amount of tobacco in your life" (yes/no/not sure). Those who reported to smoke daily, or who reported to smoke occasionally as well as having smoked at least 100 cigarettes in their life were classified as current smokers. Once smoking status was assessed non-smokers exited from the survey.

Figure 1 about here

Presentation of experimental conditions

The study was conducted on a Dell Latitude XT3 (2.50 GHz processor) touchscreen computer, using Digivey version 4 software.[27] Participants were randomly allocated to one of four cigarette pack conditions by Digivey's randomise function, which uses a pseudo random number generator provided by the underlying programming language (see: http://msdn.microsoft.com/en-us/library/system.random(v=vs.90).aspx). Branded pack conditions replicated cigarette packs available for purchase at the time of survey; plain pack conditions tested the new plain packaging design, combining plain packaging stripped of branding elements with larger HWLs. The four pack conditions were: a) Branded Winfield Blue 25; b) Plain Winfield Blue 25; c) Branded B&H Smooth 25, and; d) Plain B&H Smooth 25, see Figure 1. Within each pack condition, respondents were presented with a standard set of items to rate their assigned pack. All pack conditions featured the same_graphic image and text HWL: 'Smoking causes peripheral vascular disease' that first appeared on Australian cigarette packs in 2006. The brands used were two of the most popular brand variants in the Australian mainstream= (Winfield (Blue 25)) and premium (B&H (Smooth 25)) cigarette markets.[28] Plain pack digital images were created using specifications outlined in the Australian Government's *Tobacco Plain Packaging Act 2011*, while images of branded packs were supplied by the Centre for Behavioural Research in Cancer, Victoria, Australia.

Outcome measures

Brand appeal

While viewing the assigned pack image, respondents were asked to rate packs on various pack, smoker and taste characteristic statements, see Table 1. These items were developed by Wakefield and colleagues[19-21] based on past tobacco industry packaging studies used to assess pack attractiveness, brand imagery characteristics and perceived sensory attributes. Among adult smokers, these items have variably been used as: individual outcome items;[19] or combined to form four outcome scales and one individual item with inter-item reliability statistics presented.[20]

Brand appeal rating items were combined to form four scales and one stand-alone item in order to replicate the outcome measure structure of Wakefield *et al.*'s previous plain packaging study.[20] The outcome measures were: (1) positive pack characteristics - 'popular among smokers'; 'attractive'; 'sophisticated'; 'a brand you might try/smoke'; (2) positive smoker characteristics – 'trendy' and 'successful'; (3) negative smoker characteristic – 'boring'; (4) positive taste characteristics – 'enjoyable to smoke' and 'satisfying in taste'; and (5) negative harm characteristics – 'high in tar and nicotine' and 'harmful to your health'. Although these measures have shown strong to moderate internal consistency on Cronbach's alpha previously.[20] they have not been tested in the current population, thus we undertook Cronbach's alpha assessment on scales with more than one item.

Scale reliability assessments revealed the outcome measures had moderate to strong internal consistency: positive pack characteristics ($\alpha = .83$); positive smoker characteristics ($\alpha = .71$); positive taste ($\alpha = .84$), and; negative harm characteristics ($\alpha = .65$).

Table 1 about here

Purchase intentions

Participants were presented with images of the two brand name options (Winfield and B&H) on a single screen and asked: "If you ran out of cigarettes and only the packs below were

BMJ Open

available in the store you went to, which would you be most tempted to buy?" Participants could choose between the two brand name images or select 'I would not buy any'.
Participants who had previously viewed and rated a plain packaging image (i.e. Pack B or D; see Figure 1) received plain image response options, and those who had previously rated a branded packaging image (i.e. Pack A or C) received branded image response options at this question.

Socio-demographic variables

Gender, age, income, income source, Aboriginal or Torres Strait Islander status, marital status, highest level of education and housing type were assessed.

Statistical Analyses

Analyses were conducted using Stata v11 (<u>www.stata.com</u>). Characteristics of participants are presented by intervention group to assess the success of the randomisation.

Instrument evaluation

Outcome measure assessment

As the outcome variables were not normally distributed we used non-parametric methods for analysis. Median scores with 95% confidence intervals are presented graphically for each of the four pack conditions. Exploratory data analysis indicated that there may be a potential pack type by brand name interaction, i.e. the relationship between packaging types (branded versus plain packaging) differed for the two different cigarette brand names. As the study had limited statistical power to assess interaction effects, we did not formally test this, but undertook analysis considering the four pack conditions separately, rather than as a factorial design. The Kruskal-Wallis test was used as a global assessment of differences in factor scores among the four pack conditions. If the *p*-value for this test was <0.1, pairwise comparisons using the Wilcoxon rank sum test were undertaken to compare median scores between branded packaging and plain packaging for each of the two brand names. Odds ratio analyses were used to assess the effect of packaging type (branded versus plain) on purchase intention.

Sample size for this study was determined by requirements for another trial for which participants were recruited. Post hoc power calculations demonstrated that a sample of 350

participants (approximately 85 in each of the pack type by brand name groups) would allow detection of differences in scores between branded and plain packaging (within each brand name) of approximately half a standard deviation, with 5% significance level and 90% power (to allow for some loss of power due to the use of non-parametric analyses).

RESULTS

Sample

A total of 787 clients were approached by SCSO staff during the study period and 608 were eligible to be approached to participate by the RA. Of those, 581 (96%) completed the survey and 362 (62%) of these were identified as current smokers (daily and occasional). Eight smokers were excluded as they primarily used something other than manufactured or roll-your-own tobacco. The demographic details of the study participants in each intervention group are presented in Table 2. The majority of the sample had not finished high school (64%), earned less than AUD\$300/week (55%) and received their income from Government benefit payments (95%). Socio-demographic characteristics were similar across the four intervention groups.

Table 2 about here

Brand Appeal Ratings

Scale reliability assessments revealed the outcome measures had moderate to strong internal consistency: positive pack characteristics ($\alpha = .83$); positive smoker characteristics ($\alpha = .71$); positive taste ($\alpha = .84$), and; negative harm characteristics ($\alpha = .65$).

Figure 2 about here

Figure 2 displays ratings across the four pack conditions on the positive pack (2a), positive smoker (2b), negative smoker (2c), positive taste (2d), and negative harm (2e) response scales. The positive pack scale varied significantly across the pack conditions (p = 0.001), with pairwise comparisons revealing that branded packaging images were rated significantly more positively than plain packaging images in the Winfield condition (p < 0.001), however there was no difference in the B&H condition (p = 0.102), see Table 3. Positive smoker characteristic ratings were significantly different across the four pack conditions (p = 0.003);

For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

BMJ Open

branded packaging images were rated more positively than plain packaging images within the Winfield condition (p = 0.001), but not the B&H brand name condition (p = 0.197), see Table 3. There was no difference in the negative smoker characteristic ratings across the four pack conditions (p = 0.427). The four pack conditions were rated significantly differently when assessing positive taste characteristics (p = 0.033). Pairwise comparisons revealed plain packaging images were less appealing on taste attributes than branded packaging images for the Winfield condition (p = 0.004), however there were no differences detected in taste ratings between plain and branded packaging images in the B&H condition. The four pack conditions rated similarly in regards to negative harm characteristics (p = 0.411) as shown in Figure 2e and Table 3.

Table 3 about here

Purchase Intent

Participants were asked to choose which pack, if any, they would prefer to purchase out of the two brand names used in this study. Participants who viewed plain packaging images only were more likely to select that they would not buy any of the presented options (35%), compared to those who viewed branded packaging images (19%) [OR = 2.2, 95%CI = 1.3, 3.5; p = 0.002].

DISCUSSION

This study found that plain cigarette packs were rated as significantly less appealing than branded packs in a sample of socioeconomically disadvantaged smokers. Branded packaging was viewed as more appealing, smokers of these packs were rated in a more positive way, and the cigarette taste was preferred compared to cigarettes in plain packaging. No differences between branded and plain packaging relating to negative smoker or negative harm characteristics were detected. Finally, plain packaging reduced cigarette purchase intentions in comparison to branded packaging among smokers. The overall results of this study are supportive of previous plain packaging simulation research conducted with general population samples suggesting that plain packs are viewed less favourably on measures of brand appeal than branded packs.[19, 20]

One notableunexpected finding of this research, demonstrating the importance of branding in the tobacco market, was a possible interaction effect between packaging type (branded versus plain) and brand name (Winfield versus B&H). Plain pack images were rated consistently lower than branded images on measures of positive pack, positive smoker and positive taste appeal for the Winfield condition, but no differences were detected for the B&H condition. This sample of smokers may have less experience with the B&H brand, positioned as a 'premium' brand in Australia with a higher recommended retail price than the Winfield brand, which is considered a 'mainstream' brand offering value for money It might be expected that plain packaging of B&H cigarettes is unlikely to have much effect among socially disadvantaged smokers as this brand is positioned as a premium product at a high price point, [29] with apparent low penetration among this smoker group: While 19% of the sample reported regularly using the Winfield brand only 1.6% of participants reported regularly using B&H cigarettes, compared to 19% and 9%, respectively, in the general population.[28] Comparatively, engagement with the 'mainstream', value-for-money Winfield brand is much higher among socially disadvantaged smokers: participants reported regularly using this brand at the same rate as the general population (19%).[28] It could be interpreted that the effect of pPlain packaging may be has the potential to show stronger effects for brands that are personally relevant brands, or brands within market segmentations relevant to the individual smoker.

Similarly to Wakefield *et al.*'s previous simulation studies, this study found no difference between plain and branded cigarette packaging on negative harm ratings. This may indicate that the removal of branding elements such as colours, logos, and fonts on packs is more effective in reducing brand appeal associations rather than tapping into negative harm perceptions. It is also likely that the measures used in this study, intended to assess brand appeal, were not adequate to assess negative harm perceptions related to packaging. It may also be the case that effects on perceived harm are stronger among youth compared to adults, as previousThere are, however, other simulation studies-that indicate plain packaging reduces false beliefs about smoking among adolescents[14] and increases cessation intentions among young adults.[8] Our study also found that the presentation of plain packaging, compared to branded packaging, reduced purchase intentions among socioeconomically disadvantaged smokers, consistent with previous simulations conducted with general population smokers.[20, 22]

Implications

The results of this study support the move toward plain packaging policies for cigarettes. Most research used in the development of plain packaging policies was conducted with general population samples, with limited data to indicate how socioeconomically disadvantaged groups, who have among the highest smoking rates, may respond to this tobacco control policy. The current study indicates that socioeconomically disadvantaged smokers are likely to respond similarly to the general population, with plain packaging reducing brand appeal ratings and purchase intentions among these smokers. Further research, particularly in low-income countries could provide insight about the possibility of disseminating this policy internationally.

Early research in Australia indicates plain packaging makes tobacco less appealing and increases the urgency to quit smoking,[24] however it will be important to monitor impact over time. Plain packaging policies have the potential to reduce smoking initiation. Associations with brand identity and appeal are motivating factors in smoking uptake among youth.[30, 31] There are documented cases of cigarette rebranding, for example the development of the Camel 'Smooth Character', to appeal to young adult smokers with the explicit intentions of increasing market share and prevalence of smoking among youth.[32] Plain packaging policies prevent this kind of brand targeting and have the potential to reduce uptake among youth by reducing brand appeal and purchase intentions. It will also be important to assess the use of any avoidance strategies, such as pack stickers and cigarette cases, and to monitor whether these are temporary solutions, or whether on-going changes to policy are required.

Strengths and Limitations

The primary limitation of the study is its reliance on a convenience sample limiting its external validity and generalizability. However, socially disadvantaged groups are notoriously difficult to recruit and retain in health research.[33, 34] Recruitment challenges were overcome by accessing community services as recruitment sites and using convenience samples. As a result, this study is the first to obtain a large sample of socially disadvantaged smokers' responses to a simulation of a one-off exposure to an important tobacco control policy development. Since the policy has been implemented, socially disadvantaged smokers' day-to-day experience is one of being exposed to these plain packs multiple times a day, and so the findings from this study may underestimate the real world effects of this change. This

study was also limited by <u>the measurement of purchase intentions rather than actual</u> <u>behaviour</u>, the use of only two cigarette brands for comparison. Use of a wider range of brands for comparison is recommended for research in countries considering implementing plain packaging. <u>Although the study employed a computer image instead of actual packs</u>, previous packaging research demonstrates results are generally consistent regardless of stimulus presentation modality.[22, 35, 36] The outcome measures used in this study pose an additional limitation. Although they were selected for the purpose of comparing results with previous plain pack research.[19, 20] they have not been evaluated for validity or reliability and this should be assessed in the future.

As this study tested the Australian Government's new plain pack design, which combines plain packaging with larger HWLs, we were unable to distinguish which factor (plain packaging or larger HWLs) produced the observed results. Previously, Wakefield *et al.*[20] examined the importance of branding versus HWL size on cigarette packaging, concluding that plain packaging reduced elements of brand appeal far more than increasing the size of HWLs. In their study, when packs were plain, increasing the size of HWLs above 30% did not reduce brand appeal further. This finding suggests that the effects observed in the current study are more likely due to stripping the pack of branding elements, than increasing the HWL size. Finally, the last 2 – 3months of survey occurred during the policy roll-out phase and participants may have already been exposed to and purchased plain packs. Prior exposure may have allowed participants to become familiar with the new pack designs, and may explain why participants did not rate packs differently on negative harm and smoker measures.

Conclusions

The findings of this study support plain packaging policy, and show this strategy has the potential to reduce positive associations with cigarette packs among a group of highly socioeconomically disadvantaged smokers. It will be important to monitor the long-term outcomes of plain packaging policy, particularly with regards to uptake of smoking in disadvantaged groups. Further plain pack research in low-income countries is recommended, to support the potential dissemination of the policy internationally.

ACKNOWLEDGEMENTS

The authors thank the Social and Community Service Organisation and its clients involved in this research, as well as Melinda Hickey, Jessica Masey and Jodie Schroder for their roles in recruiting clients into the project.

COMPETING INTERESTS

None to declare.

FUNDING

This study was part of a project funded by a grant from the Hunter Medical Research Institute (G1101150). AG was supported by an Australian Postgraduate Award PhD scholarship administered through the University of Newcastle. BB was supported by a Cancer Institute NSW Career Development Fellowship. CP was supported by Cancer Control Collaboration funding.

ETHICS APPROVAL

University of Newcastle's Human Research Ethics Committee.

REFERENCES

- 1. Australian Institute of Health and Welfare. 2010 National Drug Strategy Household Survey Report. Canberra: AIHW2011 Contract No.: Cat. no. PHE 145.
- 2. Australian Bureau of Statistics, Australian Institute of Health and Welfare. The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples. Canberra2008.
- 3. Connor SE, Cook RL, Herbert MI, *et al.* Smoking cessation in a homeless population: There is a will, but is there a way? *J Gen Intern Med.* 2002;**17**:369-72.
- 4. Kermode M, Crofts N, Miller P, *et al.* Health indicators and risks among people experiencing homelessness in Melbourne, 1995-1996. *Aust N Z J Public Health.* 1998 Jun;**22**:464-70.
- 5. Lasser K, Boyd JW, Woolhandler S, *et al.* Smoking and Mental Illness: A populationbased prevalence study. *Journal of the American Medical Association.* 2000;**284**.
- 6. Moeller-Saxone K. Cigarette smoking and interest in quitting among consumers at a Psychiatric Disability Rehabilitation and Support Service in Victoria. *Aust N Z J Public Health*. 2008;**32**:479-81.
- 7. Reichler H, Baker A, Lewin T, *et al.* Smoking among in-patients with drug-related problems in an Australian psychiatric hospital. *Drug Alcohol Rev.* 2001;**20**:231-7.
- 8. Hoek J, Wong C, Gendall P, *et al.* Effects of dissuasive packaging on young adult smokers. *Tob Control.* 2011;**20**:183-8.
- 9. Wakefield M, Morley C, Horan JK, *et al.* The cigarette pack as image: New evidence from tobacco industry documents. *Tob Control.* 2002;**11**:i73-i80.
- 10. Ford A, Moodie C, Hastings G. The role of packaging for consumer products: Understanding the move towards 'plain' tobacco packaging. *Addiction Research & Theory*. 2012;**20**:339-47.
- 11. Carpenter CM, Wayne GF, Connolly GN. Designing cigarettes for women: new findings from the tobacco industry documents. *Addiction*. 2005 Jun;**100**:837-51.
- 12. Cummings KM, Morley CP, Horan JK, *et al.* Marketing to America's youth: evidence from corporate documents. *Tob Control.* 2002 March 1, 2002;11:i5-i17.
- 13. Anderson S, Hastings G, MacFadyen L. Strategic marketing in the UK tobacco industry. *The Lancet Oncology*. 2002;**3**:481-6.
- 14. Hammond D, Dockrell M, Arnott D, *et al.* Cigarette pack design and perceptions of risk among UK adults and youth. *The European Journal of Public Health.* 2009;**19**:631-7.
- 15. Bansal-Travers M, O'Connor R, Fix BV, *et al.* What do cigarette pack colors communicate to smokers in the U.S.? *Am J Prev Med.* 2011 Jun;**40**:683-9.
- Hammond D. FCTC Article 11: Tobacco labelling and packaging: a review of evidence2007: Available from: <u>http://www.cctc.ca/cctc/EN/tcrc/books/tcmonograph.2007-12-</u> <u>19.7863543963#.UKsFEIdkyAg</u>.
- 17. Bansal-Travers M, Hammond D, Smith P, *et al.* The impact of cigarette pack design, descriptors, and warning labels on risk perception in the US. *Am J Prev Med.* 2011;**40**:647-82.
- 18. Hammond D. Health warning messages on tobacco products: a review. *Tob Control*. 2011;**20**:327-37.
- 19. Wakefield MA, Germain D, Durkin SJ. How does increasingly plainer cigarette packaging influence adults smokers' perceptions about brand image? An experimental study. *Tob Control.* 2008;**17**:416-21.

BMJ Open

2		
3	20	Wakefield M Germain D Durkin S <i>et al</i> Do larger nictorial health warnings
4	20.	diminish the need for plain packaging of cigarettes? <i>Addiction</i> 2012 Jun: 107 :1159-
5		67
6	21	Or. Cormain D. Wakafield MA. Durkin SI. Adalassants' paraantians of aigeratta brand
7	21.	image Deer align realized with Durkin SJ. Autorescents perceptions of cigarette orang
8	22	image: Does plain packaging make a difference? J Adolesc Health. 2010;40:385-92.
9	22.	Thrasher JF, Rousu MC, Hammond D, et al. Estimating the impact of pictorial health
10		warnings and "plain" cigarette packaging: evidence from experimental auctions
11		among adult smokers in the United States. <i>Health Policy</i> . 2011 Sep; 102 :41-8.
12	23.	Department of Health and Ageing. Tobacco Plain Packaging Bill 2011 Canberra2011.
13	24.	Wakefield MA, Hayes L, Durkin S, et al. Introduction effects of the Australian plain
14		packaging policy on adult smokers: a cross-sectional study. <i>BMJ Open</i> . 2013 July 1,
15		2013: 3 .
16	25.	Australian Council of Social Service, Australian Community Sector Survey Report
17	-0.	2011 Volume 1 - National Strawberry Hills: Australian Council of Social
18		Service 2011
19	26	Bryant I. Bonavski B. Daul C. A survey of smoking prevalence and interest in guitting
20	20.	bryant J, Bonevski B, I auf C. A survey of smoking prevalence and interest in quitting
21		among social and community service organisation clients in Australia: a unique
22		opportunity for reaching the disadvantaged. BMC Public Health. 2011;11:827.
23	27.	Creseo Corporation. Digivey Survey Suite. Arizona, USA.
24	28.	Scollo MM, Winstanley MH. Tobacco in Australia: Facts and issues. Melbourne:
25		Cancer Council Victoria; 2012 [cited 2013 August]; 4th Edition:[Available from:
26		www.TobaccoInAustralia.org.au.
27	29.	Carter SM. The Australian cigarette brand as product, person, and symbol. <i>Tob</i>
28		<i>Control</i> . 2003 December 1, 2003; 12 ;iii79-iii86.
29	30.	DiFranza JR, Wellman RJ, Sargent JD, et al. Tobacco Promotion and the Initiation of
30		Tobacco Use: Assessing the Evidence for Causality <i>Pediatrics</i> 2006 June 1
32		2006: 117 ·e1237-e48
32	31	Gendall P. Hoek I. Thomas II. at al. Young adults' interpretation of tobacco brands:
34	51.	Implications for tobacco control Nicoting Tob Pag. 2011
35	22	Miniplications for tobacco control. <i>Nicotine Tob Kes</i> . 2011.
36	32.	wayne GF, Connolly GN. How clgarette design can affect youth initiation into
37		smoking: Camel cigarettes 1983-93. <i>Tob Control</i> . 2002 March 1, 2002;11:132-19.
38	33.	UyBico SJ, Pavel S, Gross CP. Recruiting vulnerable populations into research: a
39		systematic review of recruitment interventions. J Gen Intern Med. 2007 Jun;22:852-
40		63.
41	34.	Yancey AK, Ortega AN, Kumanyika SK. Effective recruitment and retention of
42		minority research participants. Annu Rev Public Health. 2006;27:1-28.
43	35.	Hammond D, Thrasher J, Reid JL, et al. Perceived effectiveness of pictorial health
44		warnings among Mexican youth and adults: a population-level intervention with
45		potential to reduce tobacco-related inequities. <i>Cancer Causes Control</i> , 2012 Mar:23
46		Suppl 1:57-67.
47	36	Thrasher IF Arillo-Santillan F. Villalohos V. <i>et al.</i> Can nictorial warning labels on
48	50.	cigarette packages address smoking-related health disparities? Field experiments in
49		Maxico to assass nictorial warning label content. <i>Cancer Causes Control</i> 2012
50		Mar 22 Suppl 1:60.80
51		Mar, 23 Suppi 1.09-80.
52		
53		
04 55		
00 56		
57		
58		
50		
60		

Pack characteristics: How well do you think the following phrases relate to the cigarette pack shown? This pack is popular among smokers This pack is sophisticated This pack is a brand you might try/smoke Visual analogueResponse scale: 1 all) to 7 (extremely) Smoker characteristics: How well do you think the following characteristics describe a typical smoker of the pack shown? A typical smoker of this pack is trendy A typical smoker of this pack is boring A typical smoker of this pack is successful Visual analogueResponse scale: 1 all) to 7 (extremely) Taste attributes: Please rate the following phrases describing the taste of cigarettes from the pack shown. I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be satisfying in taste I would expect the cigarettes in this pack to be satisfying in taste I would expect the cigarettes in this pack to be harmful to your health Visual analogueResponse scale: 1 all) to 7 (extremely)	Pack characteristics: How well do you think the following phrases relate to the cigarette pack shown? Visual analogueResponse scale: 1 all) to 7 (extremely) This pack is sophisticated This pack is sophisticated This pack is sophisticated stown? Visual analogueResponse scale: 1 all) to 7 (extremely) Smoker characteristics: How well do you think the following characteristics describe a typical smoker of this pack is trendy A typical smoker of this pack is successful Visual analogueResponse scale: 1 all) to 7 (extremely) Taste attributes: Please rate the following phrases describing the taste of cigarettes from the pack shown. I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be satisfying in taste I would expect the cigarettes in this pack to be harmful to your health Visual analogueResponse scale: 1 all) to 7 (extremely)	Survey items	Response scale
 Smoker characteristics: How well do you think the following characteristics describe a typical smoker of the pack shown? A typical smoker of this pack is trendy A typical smoker of this pack is successful Taste attributes: Please rate the following phrases describing the taste of cigarettes from the pack shown. I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be satisfying in taste I would expect the cigarettes in this pack to be harmful to your health Visual analogueResponse scale: 1 all) to 7 (extremely) 	 Smoker characteristics: How well do you think the following characteristics describe a typical smoker of the pack shown? A typical smoker of this pack is trendy A typical smoker of this pack is boring A typical smoker of this pack is successful Taste attributes: Please rate the following phrases describing the taste of cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be satisfying in taste I would expect the cigarettes in this pack to be harmful to your health Visual analogueResponse scale: 1 all) to 7 (extremely) 	Pack characteristics: How well do you think the following phrases relate to the cigarette pack shown? This pack is popular among smokers This pack is attractive This pack is sophisticated This pack is a brand you might try/smoke	Visual analogue <u>Response</u> scale: 1 all) to 7 (extremely)
A typical shoker of this pack is being A typical smoker of this pack is boring A typical smoker of this pack is successful Taste attributes: <i>Please rate the following phrases</i> <i>describing the taste of cigarettes from the pack shown.</i> I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be high in tar and nicotine I would expect the cigarettes in this pack to be satisfying in taste I would expect the cigarettes in this pack to be harmful to your health Visual analogueResponse scale: 1 all) to 7 (extremely)	A typical shoker of this pack is boring A typical smoker of this pack is boring Taste attributes: Please rate the following phrases describing the taste of cigarettes from the pack shown. I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be satisfying in taste I would expect the cigarettes in this pack to be harmful to your health I would expect the cigarettes in this pack to be harmful to your health	Smoker characteristics: How well do you think the following characteristics describe a typical smoker of the pack shown?	Visual analogue <u>Response</u> scale: 1 all) to 7 (extremely)
Taste attributes: Please rate the following phrases Visual analogueResponse scale: 1 describing the taste of cigarettes from the pack shown. all) to 7 (extremely) I would expect the cigarettes in this pack to be all) to 7 (extremely) Wisual analogueResponse scale: 1 all) to 7 (extremely) all) to 7 (extremely)	Taste attributes: Please rate the following phrases describing the taste of cigarettes from the pack shown. I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be satisfying in taste I would expect the cigarettes in this pack to be harmful to your health	A typical smoker of this pack is boring A typical smoker of this pack is successful	
		 Taste attributes: Please rate the following phrases describing the taste of cigarettes from the pack shown. I would expect the cigarettes in this pack to be enjoyable to smoke I would expect the cigarettes in this pack to be high in tar and nicotine I would expect the cigarettes in this pack to be satisfying in taste I would expect the cigarettes in this pack to be harmful to your health 	Visual analogue <u>Response</u> scale: 1 all) to 7 (extremely)

Page 39 of 44

BMJ Open

Characteristic	Winfield	Winfield	B&H	B&H	Total
	Branded	Plain	Branded	Plain	
	N (%)				
N	92 (26)	95 (27)	88 (25)	79 (22)	354
Age					
18 - 39	56 (61)	51 (54)	51 (58)	48 (61)	206 (58)
40+	36 (39)	44 (46)	37 (42)	31 (39)	148 (42)
Gender					
Female	61 (66)	46 (52)	66 (70)	43 (54)	216 (61)
Aboriginal and/or Torres Strait Islander					
Yes	23 (25)	14 (16)	17 (18)	10 (13)	64 (18)
Marital Status					
Married / De facto / Living with partner	29 (32)	15 (17)	23 (24)	20 (25)	87 (25)
Separated / Divorced	27 (29)	29(33)	27(28)	20(25)	103 (29)
Never married / Single / Widowed	36 (39)	44 (50)	45 (47)	39 (49)	164 (46)
Highest Education					
Primary school	0(0)	4 (5)	4 (4)	4 (5)	12 (3.4)
High school years 7-10	62 (67)	54 (61)	59 (62)	39 (49)	214 (61)
High school years 11-12	11 (12)	13 (15)	13 (14)	14 (18)	51 (14)
TAFE / trade qualification	14 (16)	13 (15)	16 (17)	21 (27)	64 (18)
University degree	5 (5)	4 (5)	3 (3)	1(1)	13 (3.7)
Personal Weekly Income					
<\$299	54 (59)	55 (58)	48 (56)	38 (48)	195 (55)
>\$300	36 (39)	33 (35)	31 (35)	37 (47)	137 (39)
Prefer not to answer	2 (2)	7 (7)	9 (10)	4 (5)	22 (6)
Income source					
Paid work	6 (7)	2 (2)	4 (4)	1(1)	13 (3.7)
Government payment (Centrelink)	85 (92)	85 (97)	89 (94)	76 (96)	335 (95)
Other	1(1)	1 (1)	2 (2)	2 (3)	6 (1.7)
Housing type					
Own house/private rental	26 (28)	31 (33)	28 (32)	23 (29)	108 (31)
Government rental	55 (60)	42 (44)	44 (50)	43 (54)	184 (52)
Homeless/Supported accommodation	11 (12)	22 (23)	16 (18)	13 (17)	62 (18)
Regular cigarette brand					
Winfield	10 (17)	16 (21)	14 (24)	10(18)	50 (20)
Benson & Hedges	1 (1.7)	1 (1.3)	2 (3.5)	0 (0)	4 (1.6)
Other I don't have a regular brand	36 (62) 11 (19)	50 (65) 10 (13)	34 (59) 8 (14)	36 (66) 9 (16)	156 (63) 38 (15)
Regular tobacco type					
Manufactured cigarettes	<mark>58 (63)</mark>	<mark>77 (81)</mark>	<mark>58 (66)</mark>	<mark>55 (70)</mark>	<mark>248 (70)</mark>
Roll-vour-own tobacco	34 (37)	18 (19)	30(34)	24(30)	106(30)

Table 3. Effect of pack condition on brand appeal ratings (N = 354).

	Pack Condition						
	Winfield_Branded	Winfield_Plain	B&H_Branded	B&H_Plain	Global test	Pairwise	
						Winfield	Benson&Hedges
	(n = 92)	(n = 95)	(n = 88)	(n = 79)		(branded v plain)	(branded v plain)
	Median (95%CI)	Median (95%CI)	Median (95%CI)	Median (95%CI)	Р	Р	Р
Positive pack	3.86 (3.5 – 4.25)	2.25 (2 - 2.5)	2.63 (2.07 - 3.25)	2.5 (1.75 – 2.75)	< 0.001	< 0.001	0.102
Positive smoker	2.5 (2 – 3.5)	1 (1 – 2)	2.5 (2 – 3)	2.5 (1.5 – 2.87)	0.003	0.001	0.197
Negative smoker (boring)	2(1-3)	2 (1 – 2)	2 (1 – 3)	3 (1.27 – 3.73)	0.427	n/a	n/a
Positive taste	4 (3.5 – 4.5)	▲ 3 (2.11 – 3.5)	3.75 (3 – 4)	3(2-4)	0.033	0.004	0.804
Negative harm	5.5 (4.55 - 6)	5.5 (4.5 - 6)	4.5 (4 – 5.5)	6 (5.14 – 6.5)	0.411	n/a	n/a

<u>5.5 (4.55 - 6)</u> <u>5.5 (4.5 - 6)</u> <u>4.5 (4 - 5.5)</u> <u>5.14 - 5.3 (5.14 - 5.3)</u> <u>5.7 (4.55 - 6)</u>



Plain Packaging



В



С



D

173x207mm (300 x 300 DPI)



Figure 2. Median ratings with 95%CI for each response scale by pack condition (N = 354). $173x212mm (300 \times 300 \text{ DPI})$

For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

	Item No	Decommondation	
Title and abstract	1	Recommendation	Va
The and abstract	1	(a) indicate the study's design with a commonly used term in the title or the	re
		(b) Provide in the electron informative and helenced summary of what was	Va
		(b) Provide in the abstract an informative and balanced summary of what was	re
		done and what was found	
Introduction			
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	Ye
Objectives	3	State specific objectives, including any prespecified hypotheses	Ye
Methods			
Study design	4	Present key elements of study design early in the paper	Ye
Setting	5	Describe the setting, locations, and relevant dates, including periods of	Ye
Sound	5	recruitment exposure follow-up and data collection	10
Particinants	6	(a) Give the eligibility criteria, and the sources and methods of selection of (a)	Ve
i articipanto	0	narticipants	10
Variables	7	Clearly define all outcomes exposures predictors potential confounders and	Ve
variables	/	effect modifiers. Give diagnostic criteria, if applicable	10
Data courses/	0*	Ener each variable of interact, give sources of date and dataile of matheds of	Va
Data sources/	0.	For each variable of interest, give sources of data and details of interiods of	10
measurement		there is more then one group	
Disc	0	Describe some file to the allower startic because of his	V.
Blas	9	Early the state of	Ye
	10	Explain now the study size was arrived at	Ye
Quantitative variables	11	Explain now quantitative variables were nandled in the analyses. If applicable,	re
Ctatiatian 1 mathematic	10	() Describe all statistical methods including these models control for	V.
Statistical methods	12	(a) Describe all statistical methods, including those used to control for	re
			NT /
		(b) Describe any methods used to examine subgroups and interactions	N/
		(c) Explain how missing data were addressed	NA
		(d) If applicable, describe analytical methods taking account of sampling strategy	NA
		(<u>e</u>) Describe any sensitivity analyses	NA
Results			
Participants	13*	(a) Report numbers of individuals at each stage of study—eg numbers potentially	Ye
		eligible, examined for eligibility, confirmed eligible, included in the study,	
		completing follow-up, and analysed	
		(b) Give reasons for non-participation at each stage	Ye
		(c) Consider use of a flow diagram	NA
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social)	Ye
		and information on exposures and potential confounders	
		(b) Indicate number of participants with missing data for each variable of interest	NA
Outcome data	15*	Report numbers of outcome events or summary measures	Ye
Main results	16	(a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates	NA
		and their precision (eg, 95% confidence interval). Make clear which confounders	
		were adjusted for and why they were included	
		(b) Report category boundaries when continuous variables were categorized	NA

For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

		a meaningful time period	
Other analyses	17	Report other analyses done-eg analyses of subgroups and interactions, and	NA
		sensitivity analyses	
Discussion			
Key results	18	Summarise key results with reference to study objectives	Yes
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or	Yes
		imprecision. Discuss both direction and magnitude of any potential bias	
Interpretation	20	Give a cautious overall interpretation of results considering objectives,	Yes
		limitations, multiplicity of analyses, results from similar studies, and other	
		relevant evidence	
Generalisability	21	Discuss the generalisability (external validity) of the study results	Yes
Other information			
Funding	22	Give the source of funding and the role of the funders for the present study and, if	Yes
		applicable, for the original study on which the present article is based	

*Give information separately for exposed and unexposed groups.

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at http://www.plosmedicine.org/, Annals of Internal Medicine at http://www.annals.org/, and Epidemiology at http://www.epidem.com/). Information on the STROBE Initiative is available at www.strobe-statement.org.