Comprehensive Tobacco Control Programs: Mass-Reach Health Communication Interventions

Best practices for comprehensive Tobacco Control programs recommends that **17%** of program funds be used for mass-reach health communication interventions.

Health Education Campaigns Shape Tobacco-Free Norms

Mass-reach health communication (also known as public education campaigns) help shape the way we see tobacco use and its harms.[1,2,3] Anti-tobacco messaging can change attitudes and behaviors, leading to:[4,5,6]

1. Decreased tobacco use across populations.
2. Increased quitting and prevent relapse.
3. Decreased tobacco use initiation among youth.
4. Reduced smoking-related costs.

Public Education Campaigns Are Effective

Public education campaigns to counter tobacco industry marketing include investing in getting the message out in many ways. This includes traditional media, such as television and radio, as well as out-of-home messaging on billboards or on transit. This also includes digital platforms, such as streaming, social media presence, and additional earned media to extend campaign reach.

Public education campaigns must have sufficient reach, frequency, and duration to succeed.[3] If adequately funded, anti-tobacco campaigns are incredibly effective. And with adequate reach, programs can expect to raise awareness of an issue in 3-6 months, influence attitudes in 6-12 months, and change behaviors after a year.[7]

Campaigns with a greater presence and audience reach can shift behaviors even faster.[3]

Countering Tobacco Industry Messages

Tobacco companies spend $23.5 million a day to market their products, often to young people and including in digital and social media spaces.

Young people are especially vulnerable to this marketing.

New Opportunities in Anti-Tobacco Public Education Campaigns

Cuts to National Education Campaigns: In the absence of CDC's national Tips from Former Smokers campaign, state tobacco control programs are even more important to carry an anti-tobacco message. State programs can use data to identify communities where tobacco use is highest to concentrate their education campaign efforts.[6]

Understanding a Complex Media Landscape: Accurate health messages can get lost in a fragmented, complex media environment.[5] Health communicators must design content that reaches their audiences and not only gets their attention, but connects them to resources, such as the quitline. Tobacco control programs can use data to understand the media mix and to develop the right message for their audience.

Effective Programs Run Three Simultaneous Campaigns To:

1. Motivate people to quit for good.
2. Protect people from the harms of secondhand smoke.
3. Prevent youth from starting to use any tobacco products.

Understanding the Role of Digital Media: The media landscape is rapidly evolving, and digital platforms can complement traditional mass media.[6,8] Digital media is especially important for anti-tobacco messaging to reach youth and can allow tailored messages to reach very specific audiences.[9]

Combatting Health Misinformation and Disinformation: Tobacco control programs must be aware of the proliferation of misinformation and disinformation, especially in digital and social media.[10] For example, companies promoting tobacco products may include claims that lead people to think their products are less harmful than they are. Social media influencers may further contribute to mis- and disinformation about tobacco product health effects and cessation methods.

One theme is clear: **Experienced health communication staff are essential** for programs to be effective.

Programs can also use data to refine campaigns to make sure they meet a state's needs.

[1] Adapted from: Centers for Disease Control and Prevention. Best Practices for Comprehensive Tobacco Control Programs. Atlanta, GA: 2014.

[2] U.S. Department of Health and Human Services. Preventing Tobacco Use Among Youth and Young Adults—A Report of the Surgeon General. Atlanta (GA): 2012.

[3] U.S. Department of Health and Human Services. The Health Consequences of Smoking—50 Years of Progress—A Report of the Surgeon General. Atlanta (GA): 2014.

[4] U.S. Community Preventive Services Task Force. Tobacco Use: Mass-Reach Health Communication Interventions. Atlanta (GA): 2013.

[5] U.S. Department of Health and Human Services. Eliminating Tobacco-Related Disease and Death: Addressing Disparities—A Report of the Surgeon General. Atlanta (GA): 2024.

[6] Campaign for Tobacco-Free Kids. The Toll of Tobacco in the United… | Campaign for Tobacco-Free Kids. Washington (DC): 2025.

[7] Kuipers, Mirte A G et al. "Associations between tobacco control mass media campaign expenditure and smoking prevalence and quitting in England: a time series analysis." Tobacco control vol. 27,4 (2018): 455-462. doi:10.1136/tobaccocontrol-2017-053662

[8] National Cancer Institute. Cancer Monograph 22: A Socioecological Approach to Addressing Tobacco-Related Health Disparities. Bethesda (MD): National Cancer Institute; 2017.

[9] Durkin, Sarah J et al. "Optimising tobacco control campaigns within a changing media landscape and among priority populations." Tobacco control vol. 31,2 (2022): 284-290. doi:10.1136/tobaccocontrol-2021-056558

[10] U.S. Department of Health and Human Services. Confronting Health Misinformation: The U.S. Surgeon General's Advisory on Building a Healthy Information Environment. Washington (DC): U.S. Department of Health and Human Services; 2021.

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