



at the Centre for Health Promotion  
University of Toronto

*Implementing THCU's Twelve Steps*

# **Best Start's Campaign on Alcohol and Pregnancy**

*Version 1.0 October 27, 2004*

Case Study Series  
**3**

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## **Disclaimer**

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## Background

Prenatal exposure to alcohol can result in a wide range of lifelong problems and is linked to permanent brain damage, low birth weight, birth defects, and developmental delays. Fetal Alcohol Spectrum Disorder (FASD) is the umbrella term used to describe this range of defects and disabilities. Best Start: Ontario's Maternal, Newborn and Early Child Development Resource Centre is a key program of the Ontario Prevention Clearinghouse (OPC) that supports service providers across the province of Ontario working on health promotion initiatives to enhance the health of expectant and new parents, newborns, and young children. In collaboration with its partners (mentioned below), Best Start launched Ontario's first provincial, public-awareness campaign on alcohol use and pregnancy.



## Project Management

### Time Management

The campaign work, including design, implementation, and evaluation, spanned 15 months from July 2003 to October 2004. A more detailed timeline of campaign activities is shown below (see p 6).

- Material development and testing—July 2003 to January 2004
- Production—February 2004
- Distribution—March 2004
- Pre-campaign survey completed—March 2004
- Campaign implementation—May and June 2004
- Post-campaign evaluation—August and September 2004

## Money and Other Resources

The campaign was completely funded by the Government of Ontario.

With regard to staffing, Wendy Burgoyne, a health promotion consultant at Best Start, was the main project manager. The administrative staff arranged for the distribution of campaign resources. Other staff acted as reviewers. Best Start contracted Danielle D'Agostino, an external consultant, to assist with media relations and media buying for the campaign. A graphic designer was also hired to work on the campaign creative and campaign resource development.

## Stakeholder Participation

The campaign was developed with input from an advisory committee, which included representatives from FASworld, FAS/FAE Information Service, Canadian Centre on Substance Abuse, Motherisk, Health Canada, Ontario Federation of Indian Friendship Centres, OPC, Best Start, and Ontario Ministry of Health-Public Health Branch. Key stakeholders who contributed to the campaign objective and message development also included pregnant women, parents of children who had FASD and others who had experience working with pregnant women, and women struggling with substance issues. Other experts on health promotion and FASD were also involved throughout the planning process.

## Decision-Making Process

Best Start had a well-defined decision-making process from the outset. The advisory committee and other stakeholders were consulted frequently regarding campaign objectives and creative. However, Best Start reserved the right to make final decisions that were in line with effective practices, sensitive approaches, and funding guidelines.

## Data Gathering and Interpretation

Data was gathered at various stages in the project from the stakeholders described above. Best Start also used the Maternal, Newborn Network listserv to request input on campaign content, the tone of the campaign, and recommended visual images. The network was very successful in drawing responses from a wide range of people with varied input and opinions.



# Revisit Health Promotion Strategy

Best Start was established to improve maternal, newborn, and child health. The Be Safe campaign was one strategy to address the overall mission. The goal of this campaign was to raise awareness about the risks of alcohol use in pregnancy.

# 3 STEP

## Audience Analysis and Segmentation

The main audience of interest for this campaign was women of childbearing age. Alcohol is consumed in 17 to 25% of all Canadian pregnancies (Robert and Nanson, 2000). Health Canada data showed that the general public has a relatively high level of awareness that alcohol use in pregnancy can lead to lifelong problems; however, there is still confusion and misperceptions about “safe” alcohol use in pregnancy. For instance, some think that it is safe to drink alcohol in the third trimester. Others feel that drinking beer is okay. Many women receive incorrect information (AWARE, 2002) on the consequences of alcohol use during pregnancy, safe times to drink during pregnancy, and safe amounts or types of alcohol.

There are two groups of concern in Canada:

1. Women who are over 30 and have “successful careers” are most likely to report that they consumed alcohol during their last pregnancy (Health Canada, 2000).
2. Women who use other substances; have low self esteem; or who are young, poor, unemployed, or depressed are at high risk as they may need substantial care and support in order to address their alcohol use (Center for Disease Control and Prevention, 1998; May and Gossage, 2001).

Best Start recognized that the first of these two groups would be most likely to respond to a communication campaign. This group was the main focus when selecting images, messages, and strategies for the campaign.

Community members, health care providers, service providers, and family members were identified as secondary audiences, since they may share information or supports to pregnant women.



Credit: Gravity Design Inc, [www.gravitydesign.ca](http://www.gravitydesign.ca)



## Communication Inventory

The Communications Branch at the Ministry of Health and Long-Term Care provided advice throughout the campaign planning process. Nancy Dubois of THCU also assisted Best Start with the campaign planning process.



## Communication Objectives

### Individual

- To increase awareness in women of childbearing age that there is no safe time, no safe amount, and no safe kind of alcohol during pregnancy
- To increase awareness in women of childbearing age that it is safest to stop drinking alcohol before getting pregnant
- To increase knowledge of services related to alcohol use and pregnancy in women who are pregnant or planning a pregnancy

### Network

- To increase the number of health care and other service professionals who share information about alcohol and pregnancy with their patients/clients

### Societal

- To increase support from local groups and communities in general on alcohol and pregnancy



## Select Channels and Vehicles

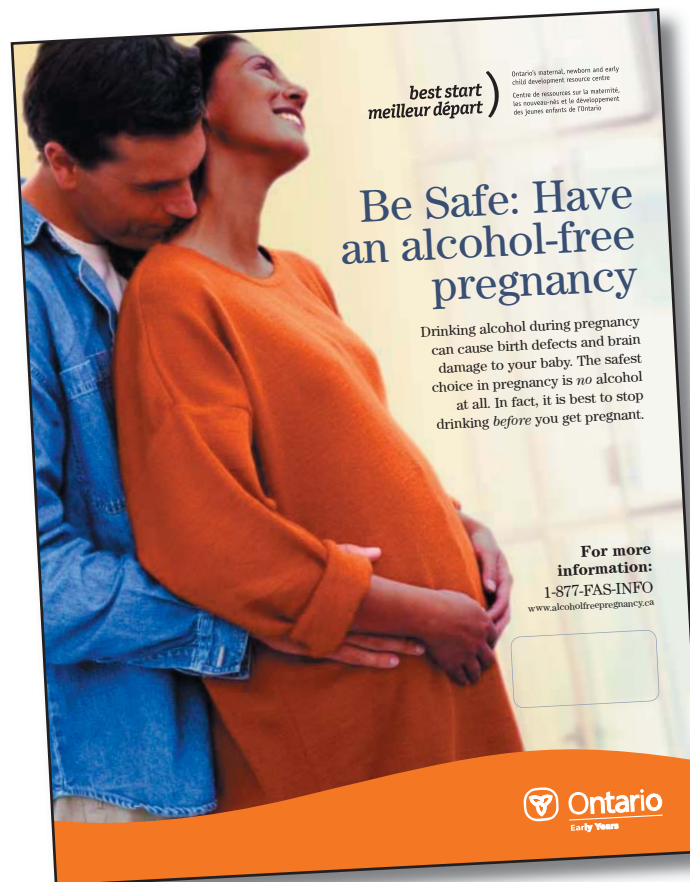
Best Start's campaign involved print vehicles such as posters and brochures and outdoor ads. Audio-visual vehicles included TV news clips and radio PSAs. A campaign website was also used to promote the campaign message electronically.

# 7 STEP

## Combine and Sequence

As a provincial organization, Best Start was able to purchase time/space from channels/vehicles that reach across the province. Local agencies are often not able to justify spending money on these channels because they are expensive and cover more than their service area.

The Best Start campaign was launched on May 11, 2004. Best Start used a very detailed timeline for all activities related to the campaign. Since the distribution of campaign materials was very large (mail-outs to 7,000 health care providers, about 200 local activities groups, etc.), it was critical that the campaign materials were distributed well in advance (i.e., in March 2004) of the provincial media campaign.



## Table 1: Campaign Timeline

**Primary Audience: Women of Childbearing Age**  
**Goal: To reduce alcohol use during pregnancy by focusing on prevention**

Step 5: Campaign Objectives		Step 6: Select...		Step 7: Combine and Sequence											
Audience	Objectives	Channels	Vehicles	N	D	N	D	J	F	M	A	M	J		
<b>Individual Level</b> Women of childbearing age <ul style="list-style-type: none"> <li>To increase awareness in women of childbearing age that there is no safe time, no safe amount, and no safe kind of alcohol during pregnancy</li> <li>To increase awareness in women of childbearing age that it is safest to stop drinking alcohol before getting pregnant</li> <li>To increase knowledge of services related to alcohol use and pregnancy in women who are pregnant or planning a pregnancy</li> </ul>		Print	<ul style="list-style-type: none"> <li>camera-ready ads, posters, displays</li> <li>brochure, pre-written newspaper articles</li> <li>feature stories, media release</li> <li>fact sheet</li> </ul>												
		Outdoor	<ul style="list-style-type: none"> <li>mail ads, transit ads (bus &amp; subway)</li> </ul>												
		Audio-Visual	<ul style="list-style-type: none"> <li>pre-movie (theatre) ads, TV news clip</li> </ul>												
		Radio	<ul style="list-style-type: none"> <li>PSAs, news clip</li> </ul>												
<b>Network Level</b> Health care professionals <ul style="list-style-type: none"> <li>To increase the number of health care and other service professionals who share information about alcohol and pregnancy with their patients/clients</li> </ul>		Print	<ul style="list-style-type: none"> <li>brochure, tear-off sheets</li> <li>information guides on screening pregnant women for alcohol use</li> </ul>												
		Electronic Media	<ul style="list-style-type: none"> <li>online service links for providers</li> </ul>												
<b>Societal Level</b> Local groups <ul style="list-style-type: none"> <li>To increase support from local groups and communities in general on alcohol and pregnancy issues</li> </ul>		Print	<ul style="list-style-type: none"> <li>idea list for local activities</li> <li>planning forms</li> <li>launch event planning guide</li> <li>tips on working with media, restaurants &amp; licensed establishments</li> <li>thank-you ads for participating restaurants</li> </ul>												
		Promotional Items	<ul style="list-style-type: none"> <li>stickers</li> <li>buttons</li> </ul>												
		Electronic Media	<ul style="list-style-type: none"> <li>community action website</li> <li>electronic files for stickers and buttons</li> </ul>												
		Print	<ul style="list-style-type: none"> <li>posters, brochure</li> </ul>												
Licensed establishments (bars, restaurants, LCBO)	<ul style="list-style-type: none"> <li>To increase support from local groups and communities in general on alcohol and pregnancy issues</li> </ul>	Promotional Items	<ul style="list-style-type: none"> <li>table toppers</li> <li>static clings</li> </ul>												





## Develop Messages

With input from a variety of stakeholders and sources, Best Start decided on the following key elements to be included in the campaign message.

**Table 2: Message Elements**

<b>What</b>	Consuming alcohol during pregnancy
<b>So What</b>	<ol style="list-style-type: none"> <li>a. There are serious, long-term consequences to alcohol use during pregnancy.</li> <li>b. There is no safe time to drink alcohol during pregnancy.</li> <li>c. There is no safe amount of alcohol during pregnancy.</li> <li>d. There is no safe kind of alcohol in pregnancy.</li> </ol>
<b>Now What</b>	<ol style="list-style-type: none"> <li>a. It is best to stop drinking before pregnancy.</li> <li>b. Help is available if you need it.</li> </ol>

Here are the campaign messages, developed in line with the framework above:

- Be Safe: Have an alcohol-free pregnancy.
- Drinking alcohol during pregnancy can cause birth defects and brain damage in your baby.
- The safest choice in pregnancy is no alcohol at all.

Some campaign materials, such as the static clings, stickers, and buttons, were too small for the complete campaign messages so truncated messages were used, such as “Be Safe: Have an alcohol-free pregnancy.” Health care provider materials used additional messages such as “You can make a difference” and “Be Safe: Promote alcohol-free pregnancies.”



## Develop Identity

Best Start did not create a special logo for the campaign but did select warm, positive colors like blue and orange for all the campaign resources. The selected colors and design had to fit communication guidelines from the Ministry of Health.

# 10 STEP

## Production

Women of childbearing age and other service providers (including the advisory committee and others who work with pregnant women, women struggling with substance abuse) felt that the campaign resources should carry warm, positive images. The stakeholders insisted on including a supportive partner in the campaign visuals and wanted to avoid negative images such as pregnant women drinking alcohol, fetus/infant drinking alcohol, and images of children with serious disabilities.

The production process was not without challenges. For instance, the graphic designers felt that positive images could be boring. Best Start insisted on positive images as per the input from stakeholders knowing from pre-testing that these images could attract the attention of the audience of interest.

Best Start developed a creative brief using the above input. Graphic designers from a creative agency called Gravity Design designed brochures, posters, ads, tear-off sheets, and other campaign materials including the launch event signage. French translators translated the approved content in French, which was field-tested with service providers and the population of interest.

Campaign visuals showed a happy, casual “pregnant couple.” Reviewers felt the campaign images needed to show a supportive partner, further emphasizing that it is not solely the woman’s responsibility and there are things others can do to make a difference. To be inclusive of a wider range of ethnicity, Best Start had a preference for images in silhouette, however government guidelines restricted use to photos of people facing the camera.

Three radio PSAs (in text format, designed to be read by radio staff) were produced along with a NewsCanada taped radio news clip. The other campaign materials are listed below, with the number of each item produced.

- Brochures—750,000 (E), 40,000 (F)
- Poster—60,000 (E), 10,000 (F)
- Transit ads—3,755
- Tear-off sheets—10,000 (E)
- Mall ads—55
- Stickies—50,000 (E), 50,000 (F)
- Health care provider brochure—8,000
- Health care provider bookmarks—10,000 (E)

(E=English, F=French)

Most campaign resources are available in French and English. Some resources are available in print versions, others in electronic versions. Campaign resources can be viewed at <http://www.alcoholfreepregnancy.ca>, including posters, brochures, fact sheets, and FAQs for the general public.

# Implementation

The campaign was rolled out across Ontario in May and June 2004. Best Start organized a launch event on May 11, 2004, in Toronto. The launch event included speeches, a mocktail competition, activities for children, and a barbecue lunch. Local groups across the province also planned community launch events to occur in May, including Mother's Day runs, mocktail competitions, band barbecues, speeches, and displays.

Danielle D'Agostino, the media consultant that Best Start hired, took care of activities related to media relations, such as answering questions from the press.

The campaign image and/or message was also projected on 339 movie theatre screens in 37 communities across the province of Ontario.

Please see Table 3: Campaign Overview (p 10) for additional details.



Credit: Gravity Design Inc. www.gravitydesign.ca

**Table 3: Campaign Overview**

<b>Step Five Set Communication Objectives</b>	<b>Step Six Select Channels and Vehicles</b>	<b>Step Seven Implementation Details</b>
<b>Individual</b>		
To increase awareness in women of childbearing age that there is no safe time, no safe amount, and no safe kind of alcohol during pregnancy	<b>Print</b> / camera-ready ads, posters, displays, brochure, pre-written newspaper articles	Provincial print, radio and outdoor time/space were booked for May and June 2004. The provincial launch event was on May 11, 2004. Local launch events were held throughout May.
To increase awareness in women of childbearing age that it is safest to stop drinking alcohol before getting pregnant	<b>Print</b> / feature stories, media release, fact sheet	Local groups were encouraged to enhance exposure at the local level.
To increase knowledge of services related to alcohol use and pregnancy in women who are pregnant or planning a pregnancy	<b>Outdoor</b> / mall ads, transit ads (bus & subway)	Media kit materials were finalized and distributed in April 2004.
	<b>Audio-Visual</b> / pre-movie (theatre) ads (projection of campaign image and message), TV news clip	Posted content on campaign website in March 2004.
	<b>Radio</b> / radio PSAs, radio news clip	
	<b>Electronic Media</b> / campaign website	
<b>Network</b>		
To increase the number of health care and other service professionals who share information about alcohol and pregnancy with their patients/clients	<b>Print</b> / brochure, tear-off sheets, information guides on screening pregnant women for alcohol use	
	<b>Electronic Media</b> / online service links for providers	

Step Five Set Communication Objectives	Step Six Select Channels and Vehicles	Step Seven Implementation Details
<b>Societal</b>		
To increase support from local groups and communities in general on alcohol and pregnancy issues		
<i>for local groups</i>	<p><b>Print</b> / idea list for local activities, planning forms, launch event planning guide, tips on working with media, restaurants and licensed establishments, thank-you ads for participating restaurants</p> <p><b>Promotional Items</b> / stickers, buttons</p> <p><b>Electronic Media</b> / community action website for local groups, electronic files for stickers and buttons</p>	<p>Distributed campaign materials to health care providers in March 2004.</p> <p>Distributed packages to community groups/organizations in March 2004.</p> <p>Posted content on community action website in November 2003 (posted French content in December 2003).</p> <p>Posted English and French PSA scripts and other media materials on the community action website in February 2004.</p>
<i>for licensed establishments</i> (bars, restaurants, LCBO, etc.)	<p><b>Print</b> / posters, brochure</p> <p><b>Promotional Items</b> / table toppers, static clings</p>	<p>Mailed out posters to LCBO in February 2004.</p> <p>Contacted Ontario Restaurant, Hotel and Motel Association to investigate opportunities for soliciting restaurant partnership through members' communications in October 2003.</p>

# Evaluation

## Formative Evaluation

The research firm Environics helped Best Start implement a pre-campaign survey of women of childbearing age. The survey took place in March 2004. In addition to demographic information, the survey included the following questions:

- In your opinion, what are the two or three most important things that pregnant women can do to increase the likelihood that their baby will be born healthy?
- Which of the following BEST describes your understanding of the effects of drinking alcohol when pregnant?
- In your opinion, how much alcohol can a pregnant woman safely consume without harming the baby she's carrying?
- Is there a safe time to drink alcohol during pregnancy? If yes, when?
- In terms of the effect on the baby that is being carried, about how many alcoholic drinks would it be safe to drink while pregnant?
- Do you believe that there is a safe kind of alcohol to drink during pregnancy and, if so, what would that be?
- If a woman is thinking about getting pregnant, when should she stop drinking alcohol?
- Do you think that drinking during pregnancy could cause any of the following problems for the child?

## Process Evaluation

Process objectives were

- to make it as easy as possible for community groups to implement local activities,
- to ensure that effective campaign resources were developed, and
- to access media coverage on alcohol and pregnancy.

Best Start called the local groups who ordered campaign resources to get their feedback on how activities were organized, what occurred, and how they were received.

Best Start is also monitoring all calls to Motherisk to assess the kind of questions posed and to find out whether the callers have seen one or more of the campaign resources.

To ensure that audiences of interest found the resources useful, Environics used focus groups to test some of the images created by graphic designers. All campaign materials were also field tested with the audience of interest and suitable revisions were made.

Best Start hired a clipping service to monitor the campaign's media coverage. Since this information-gathering process has only recently commenced, the evaluation results are not yet available.

## Outcome Evaluation

Environics conducted a post-campaign survey in August 2004 to assess whether differences in the knowledge level of women of childbearing age occurred following the campaign.

## References

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## For More Information

To learn more about the campaign contact

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