

Prevention campaigns are geared to the values of their target groups

First study based on «Sinus Milieus» criteria. With growing pressure on costs and the need to use the taxpayer's money wisely, the individual target groups in campaigns have to be reached with as little waste coverage as possible. The SFOPH recently started using the «Sinus Milieus Model» for this purpose: a Swiss «map» of target group segments showing the basic values of the respective groups as well as traditional sociodemographic criteria. The results of a first «omnibus» study confirm a number of assumptions and supplement others with valuable detailed insights.



Milieus research applied in practice: filming the new STOP AIDS spot in a kitchen typical of the Sinus milieu «consumption-oriented working class».

The «Sinus Milieus» target group segmentation model devised by the German research and consultancy company «Sinus Sociovision» is being applied in the EU, the USA and, since 2003, in Switzerland. The different «milieus» comprise groups of individuals who share the same attitudes and lifestyles. Each milieu includes the dimension of social status (income, occupation, education), plus the value-related basic orientation of the group (general awareness, lifestyle, personal goals). In 2002, Publisuisse (which markets advertising space for Switzerland's SRG state TV and radio channels), together with the SRG research service Publicadata, and Credit Suisse and Winterthur Insurance commissioned Switzerland's first Sinus Milieus studies. Ten different milieus – groups of like-minded people – were identified in Switzerland. They are characterized by different combinations of individual values, attitudes, recreational activities and general aesthetic values. Together they make up four large lifestyle segments:

- central social milieus,
- mainstream milieus,
- traditional milieus and
- unconventional, young milieus (see box on page 2).

In spring 2004, the SFOPH took part in the first omnibus (multi-topic) survey of 2000 representative individuals with 18 questions. The respondents were surveyed on smoking and passive smoking in general, personal smoking habits, attitudes to cannabis, and personal alcohol consumption, sexual behaviour and use of condoms. The questions were formulated so as to enable not only the respondents' behaviour to be recorded, but also conclusions to be drawn about the public's levels of information and problem-awareness. On the basis of the convincing results ob-

tained, the SFOPH decided to continue working with the Sinus Milieus Model in order to obtain a more precise picture of the groups they target in prevention campaigns.

Commitment to smoke-free air

Publisuisse has been using Sinus Milieus as an additional tool in the placement of TV spots for a year now. Different milieus are associated with different viewing habits. The advertising environment of the Swiss soap «Lüthy & Blanc», for instance, with its predominance of «mainstream middle-class» viewers, is quite different from that of the «Ziischtigs-Club» Tuesday discussion group, which is watched particularly by «post-materialists». So a STOP AIDS spot would not be ideally placed in the context of «Lüthy & Blanc» because, according to the SFOPH survey, unprotected high-risk sex is rare among such viewers. On the other hand, a «Smoking's harmful» spot in this milieu would reach an important target group because its «mainstream middle-class» viewers – like almost all target group segments – feel bothered by smoke in public spaces but do not dare to speak out against it. The courage to speak their mind freely is found more frequently among viewers of the «Ziischtigs-Club», who belong to the central social milieu and have an above-average tendency to ask people not to smoke in their presence. Though the «mainstream middle-class» according to the Sinus Milieus Model watches the health magazine «Pulse» and agrees with the statement that «It is important that we stay healthy, have a good life and get on well with our families», three-quarters of them never speak out in favour of cleaner air. In time, perhaps, further spots on the harm-

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Smoke-free future

At the National Conference on Tobacco Control held in Fribourg in early December, SFOPH director Thomas Zeltner described the year 2004 as a «milestone in tobacco control». More than 200 experts from the whole of Switzerland approved a resolution for a smoke-free future at the Conference. Key demands: protection against passive smoking, support for efforts to stop smoking and a ban on the advertising of tobacco products.

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Interview



A Swiss study has shown that only 36% of pregnant women are asked by medical staff about their alcohol consumption. Manuella Epiney, physician at the Maternity Clinic of Geneva University Hospitals, outlines the effects of the mother's alcohol consumption on the unborn child, the sensitization of teenagers and women to this problem, and the interdisciplinary networks that have been set up in Geneva for this purpose.

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The ten Sinus Milieus

Central social milieus:

Established (9 percent): The well-off upper class with pronounced self-confidence and elegant lifestyle. Material and social success as a basis for high-quality, pleasure-oriented living.

Post-materialist (11 percent): Left-wing/liberal oriented and strongly post-materialist upper middle class. Committed to social justice and sustainability. Represents a socio-ethical basic attitude to life.

Modern performer (10 percent): New performance-oriented generation of young people characterized by a highly materialistic basic attitude to life and the pursuit of autonomy and self-fulfilment.

Mainstream milieus:

Status-oriented (10 percent): Upwardly mobile and status-conscious middle class with clearly defined material goals and the self-confidence to achieve them. Emphasis on personal responsibility for their own lives.

Mainstream middle class (16 percent): The large mainstream milieu with a marked commitment to the status quo. Desire for a harmonious life grounded in secure social and material conditions. Fusion of middle-class values with a modern but conventional lifestyle.

Consumption-oriented working-class (8 percent): The milieu representing working-class people whose

aspirations are focused on material improvement and who are engaged in a continual struggle against social decline and exclusion. They are equally at pains to set themselves apart from social groups that are even worse off than they are (the unemployed, the homeless or foreigners).

Traditional milieus:

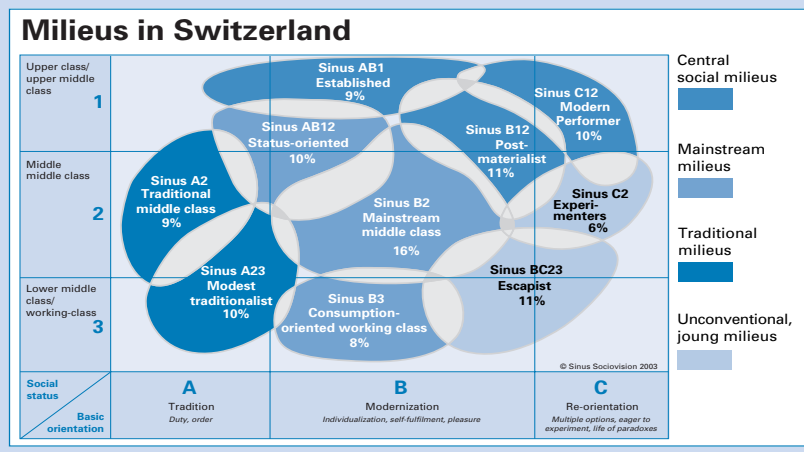
Traditional middle class (9 percent): Unshakable loyalty to traditional values and conventions. Advocates of rigid morality. Fulfilment of duties, sense of responsibility, respect for order, discipline and traditional male/female roles.

Modest traditionalist (10 percent): Tend to be rural types representing traditional worker and farmer cultures, living predominantly in Western Switzerland and Ticino. Adherence to traditional values and behaviour patterns, like the traditional middle-class.

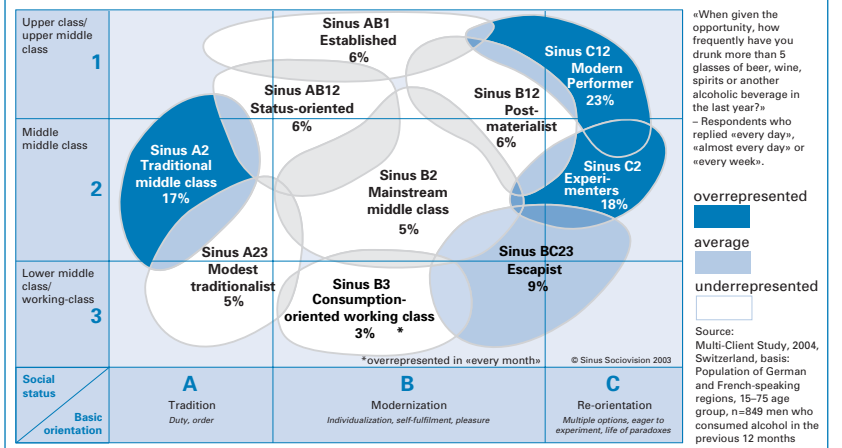
Unconventional, young milieus:

Experimenter (6 percent): Highly individualistic and eager to experiment, in search of a wide and varied range of experiences. Basic aim: to create personal space in which to live their creativity to the full.

Escapist (11 percent): Reject middle-class values and conventions. In search of intense emotional experiences, even to the extent of pushing their own limits (high level of acceptance of violence).



Frequency of alcohol consumption among men: 5 glasses or more (Ø 10%)



Continued from page 1

fulness of passive smoking could motivate this group to change its behaviour. Given this possibility, the SFOPH has briefed its advertising agency as follows for the next phase of the «Smoking's harmful» campaign: those who do not yet dare to stand up actively for fresh air (mainstream milieus) will be supplied with additional arguments for this purpose, while the central social milieus will have their existing self-confidence reinforced.

Binge drinking on the rise

The mainstream milieus (the «mainstream middle class», the «status-oriented», the «consumption-oriented working-class») have less weight when it's a question of personal alcohol consumption. Men admitting to drinking five glasses or more per occasion are found predominantly among the experience-oriented segments: «modern performers», «experimenters», «escapists» and the «traditional middle-class». Likewise, among women the younger, experience-oriented segments account for between 9 and 12 percent, whereas all the other segments make up, at the most, 3 percent of female binge drinkers who ingest four glasses or more per occasion. The drinks of choice vary according to milieu, with beer being the most popular, followed by alcopops/premixes

and spirits. The latter have less appeal for «experimenters», who, like almost all other segments, appreciate a glass of wine. Not surprisingly, a good wine goes down particularly well among the «established», «post-materialists» and «status-oriented». The elegant lifestyle of the «established», the great value the «post-materialists» attach to individuality and the great importance of status symbols for the «status-oriented» appear to cry out for products such as fine wines.

The «young» are not all the same

Rigorous cost-cutting exercises have at various times triggered calls for prevention efforts to be concentrated increasingly or even exclusively on specific target groups, particularly the young. Because mass-media campaigns target broad groups, they often involve a degree of waste coverage because they also reach people they do not actually need to reach. On the other hand, campaigns that focus on target groups regularly come up against the problem of access because not all young people visit leisure centres nor do they all smoke cannabis or drink alcopops. The Sinus Milieus map helps to position prevention topics in the right settings (the relevant groups) in such a way as to minimize waste coverage. A sweeping target group designation such as the «young», for instance, is

Taking steps towards a smoke-free future

National Conference on Tobacco Control. More than 200 specialists from all over Switzerland approved a resolution calling for a smoke-free future. The conference was held in Fribourg in early December 2004. The key demands were protection against passive smoking, support for efforts to stop smoking and a ban on advertising of tobacco products.

The scale of the disease and deaths brought about by the smoking epidemic is still underestimated by public and politicians alike in Switzerland. Every day, more than 20 people in this country die prematurely from the effects of smoking. This makes a total of over 8,000 a year, as well as the hundreds of other fatalities caused by passive smoking. 45% of tobacco-related deaths are due to cardiovascular disease, 25% to lung cancer, 18% to respiratory disease and 12% to other forms of cancer. Tobacco products are the only freely available goods whose consumers die an early death when they are used in accordance with the manufacturer's instructions.

Milestones and stumbling blocks

Thomas Zeltner, Director of the Swiss Federal Office of Public Health,

described 2004 as a «milestone in the history of tobacco control». Never has so much progress been made at all levels: the creation of the Tobacco Prevention Fund, the new Tobacco Ordinance, the raising of cigarette prices and the signing of the WHO Framework Convention on Tobacco Control. But now more than ever, he says, a great deal of persistence and courage is needed to continue the course embarked upon. Though there has been a perceptible shift in public opinion in favour of a smoke-free future, Zeltner admits that this has not yet led to a change of heart among politicians. While the majority of the population believe that not smoking is now the norm, the institutionalization of tobacco control at the federal level is a long drawn-out process that unfortunately still finds too little support in Parliament.

Franz Wyss, secretary-general of

the Cantonal Health Directors' Conference, emphasized the importance of the cantons in tobacco control, for instance in using the leeway they possess to develop innovative approaches. Eleven cantons have already decided to impose restrictions on advertising of tobacco products and a decision is pending in one. But in the majority of cantons, the required human and financial resources are lacking, powers and responsibilities are not clearly defined and there are still gaps in the networks needed.

The Fribourg Resolution

In their resolution for a smoke-free future, the participants in the National Conference on Tobacco Control in Fribourg on 1-2 December 2004 therefore called on the Swiss Government and Parliament to ratify the WHO Framework Convention on Tobacco Control in the current

legislative period. Only strict statutory regulation of tobacco products can halt the tobacco epidemic.

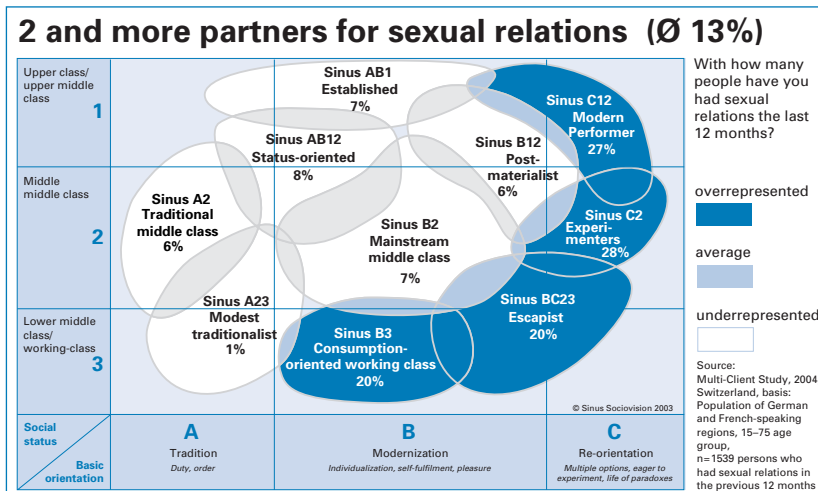
The resolution calling for a smoke-free future contains the following key demands:

- Protection from exposure to tobacco smoke: all public spaces should be smoke-free zones. Only this will reliably protect people who wish to live without smoke against the health risks associated with passive smoking.
- Support for efforts to stop smoking: The majority of smokers want to give up the habit. The measures taken in connection with the nationwide antismoking campaign, «Smoking's harmful – let it be», have been shown to make it easier for people to put a stop to their dependence on nicotine.
- A ban on advertising of tobacco products: Smoking can kill. Public

rounded out from a new perspective: in the Sinus Milieu Model, young people are not just young but may, to take two extremes of differentiation, seek their bearings in traditional values («modest traditionalists») or trigger modern trends and pursue self-fulfilment («modern performers»). These two target groups would therefore have to be addressed in different ways and reached through different channels. The SFOPH is at pains to put the newly acquired insights to good use, not only as regards the positioning of campaign products in appropriate settings. Consideration should be given to how campaign products can more consciously reflect the life-settings of the relevant target groups when they are being devised. The study will therefore concern the creative departments as well as the marketing planners.

«Gut feeling» confirmed and supplemented

«Gut feeling» is an important creative tool in the aesthetic world of advertising, as is navel-gazing, and here at least the professionals seem to be making the right assumptions, as the findings of the Sinus Milieu Omnibus Survey have confirmed. «Modern performers», «experimenters» and «escapists» enjoy an above-average amount of sex (allegedly several times a week), change their sexual partners more often (more than two sexual partners within the previous twelve months) and – fortunately – are above average in the consistent use of con-



At first hand



However effectively prevention efforts may bite, they can be toothless in one respect: when it comes to precisely defining who their target groups are. This is an area in which many questions remain unanswered. What, for instance, makes some young people indulge in regular binge drinking? What makes some motorists into road racers? Why do some 40-year-old single women with a school-leaving diploma always use condoms in sex and others don't? Why do some 30-year-old male university graduates demand smoke-free areas in restaurants and others don't?

We have two options here: we can simply grit our teeth and look away, or we can examine the gaps and see what we can find out about our target groups that's new. This edition of «spectra» opts for the latter. It shows how differently target groups are defined by project and programme managers. It makes it quite clear that there is no one single recipe. And it reports on the initial findings of a target-group study conducted last year by the Swiss Federal Office of Public Health.

The study was originally needed by campaign managers, it being almost impossible to create communication measures without knowing exactly for whom they are intended. Health messages aimed at Prince Charles, for instance, would not fit rock legend Ozzy Osbourne. Though there is no difference between these two men in terms of age, gender and education, to be effective the messages aimed at them have to be different. Welcome support is at hand here in the form of the «Sinus Milieus Model».

Besides applying socio-demographic criteria, this model takes value-based lifestyles into account. For Switzerland, it defines ten types that differ in terms of interests and manifestations. The best thing about the Sinus Milieus Model is that it reveals some of the target-group designations so popular in political circles, such as «young people», «homosexuals» or «women», to be catchwords that mean very little in terms of communication and that are inadequate for the purpose of focusing prevention efforts on specific groups.

«Help road racers. Donate brain» was a slogan seen on posters in Switzerland last summer. While brushing my teeth recently, I wondered whether all road racers actually wanted more brain? Might some people drive excessively fast simply to be different from other people? If so, why should racers want brain donated from, of all people, non-racers? Wouldn't this just make them like everyone else ... like us boring non-racers? So did this campaign reach the wrong people, i.e. us non-racers who would like to donate brain, rather than its intended target group – drivers who fit the racer profile? This gap hurts. The current issue of «spectra» aims to show how, by working together, we can rapidly fill it.

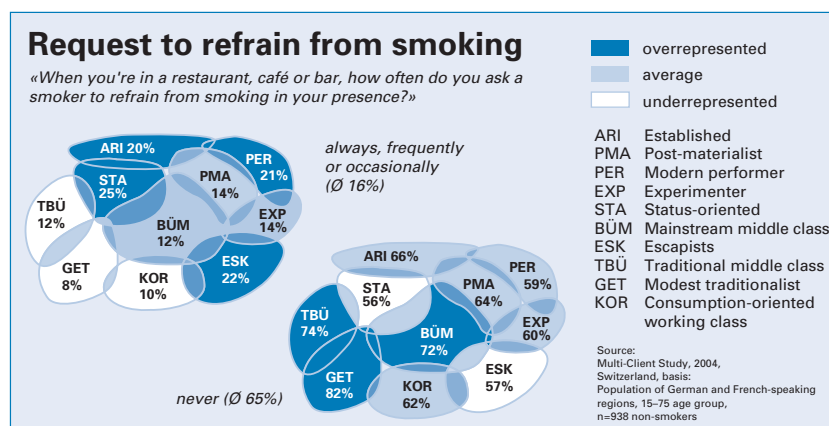
Markus Allemann
Head of Campaigns Section
Swiss Federal Office of Public Health

doms. These milieus, plus the «established», remember the different messages of the STOP AIDS campaign very well and also find them appealing. All that is just as we thought. What's new is that the model includes a segment for the «consumption-oriented working-class». This segment represents the economically disadvantaged who consider themselves to be among society's losers and take their bearings in material terms from upward mobility. The findings of the study show that this group should be equally relevant for the STOP AIDS campaign because its members change partners regularly but, unfortunately, make less consistent use of condoms. What is more, the ability of this segment to recall the STOP AIDS

campaign is below average. Just under 30 percent – the same as in the traditional milieus – stated that they were unaware of the campaign. «It's often hard for me to make decisions. Somehow it's easier when we're told exactly what to do.» Statements like this are typical of the milieu of the consumption-oriented working-class. So does it take a warning-type campaign to reach this group directly? The SFOPH – aware of the needs of this newly discovered target group – is nevertheless trying another approach.

For instance, a kitchen typical of the «consumption-oriented working-class» was included as an additional location in the production of the latest STOP AIDS TV spot (see photo of filming on page 1). This was a conscious attempt to create an environment with which the target group could identify. Thus milieu research is not only a media-planning tool but is also used selectively in the creation of advertising material.

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are at the National Conference on Tobacco and on the advertising of tobacco products.

advertising and promotion of cigarettes and other tobacco products is therefore irresponsible. Current efforts at the cantonal level to prohibit advertising of tobacco products on posters are a step in the right direction.

The National Conference in Fribourg was hosted by the Swiss League against Cancer, the Swiss Lung League and the Swiss tobacco-control association (Arbeitsgemeinschaft Tabakprävention Schweiz). In conjunction with further partners in Parliament, the health organizations will campaign to ensure that Switzerland translates these demands into action by ratifying the Framework Convention on Tobacco Control no later than 2007.

Credits

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«Healthcare professionals must raise the subject of alcohol systematically with expectant mothers»

Pregnancy and alcohol. Prevention is essential, says Manuella Epiney, physician at the Maternity Clinic of the University Hospitals of Geneva (HUG): primary prevention means making young girls and women aware of the risks associated with alcohol, while secondary prevention consists in identifying high-risk situations and referring patients to specialists in the treatment of substance dependence. All personnel involved must be aware of the limits of their professional skills and seek support from specialized colleagues when handling complex cases.

Dr Epiney, what toxic effects does alcohol have on the fetus in the different phases of pregnancy?

«Toxic» really is the correct term here because alcohol is the substance that is most closely associated with fetal defects and is the most frequent cause of avoidable mental retardation. We know that in the prenatal period alcohol crosses easily into the placenta where it exerts a toxic effect on embryo cells, particularly with regard to brain formation. The disorders alcohol causes vary according to the quantity, frequency and duration of consumption, the stage of pregnancy and the individual tolerance of the mother and fetus to alcohol. There is, for instance, a risk of miscarriage or premature labour and of increased mortality during the first ten days post partum. The fetus is at its most vulnerable during the first trimester, when the risk of malformation is greatest.

Regular consumption of large amounts of alcohol by the mother can cause withdrawal symptoms in the baby at birth. These symptoms take the form of breastfeeding problems, irritability and sleep disturbances.

After the birth, the mother's alcohol consumption mainly affects breastfeeding. Although the maternal milk does not contain high levels of alcohol, a certain amount is known to be passed on to the infant. Logically, therefore, any mother who drinks three to four glasses of alcohol a day should be advised not to breastfeed her baby. But bearing in mind the closeness of the relationship between mother and child during breastfeeding, it is difficult to find an alternative.

What physical characteristics and behavioural disorders are exhibited by the children of mothers with alcohol problems?

The spectrum is very wide. With high levels of alcohol, one of the first signs can be the fetal alcohol syndrome, which comprises delayed fetal growth, cranio-facial defects, damage to the nervous system and, later on, behavioural problems and learning difficulties. Additional defects, affecting for instance the heart, brain or genitourinary tract, are associated with this syndrome in 30% of cases. The distinctive appearance of the newborn child makes the condition easy to diagnose.

Manuella Epiney

born in Sierre in 1965, single mother with one child. Studied at Geneva University Medical Faculty. Training in gynecology and obstetrics at Neuchâtel and Geneva, qualifying as a Swiss Medical Association-recognized specialist in 2000. Chief physician at La Chaux-de-Fonds in 2001 and, from 2002, in Professor Irion's Obstetrics Unit in the Gynecology and Obstetrics Dept., University Hospitals of Geneva.

Consumption of moderate amounts of alcohol does not cause any problems that are easy to detect at birth. In the long term, however, it may cause learning difficulties in early childhood, at school or during puberty, taking the form of mild behavioural disorders, problems of personality or adaptation, memory and attention deficits, delayed development, or hyperactivity.

How great is the risk that the children of parents with alcohol problems will themselves develop some form of substance dependence?

The connection here is regarded as proven. A study has shown that 25% of the children of mothers with high-risk alcohol intake patterns themselves develop problems with alcohol, compared with only 10% whose mothers had not consumed any alcohol during pregnancy. Among children with fetal alcohol syndrome, the figure is as high as 30 to 50%. Children raised by parents who are alcohol dependent or drink heavily are five times as likely to develop some form of substance dependence later in life. The social and family environments are enormously important factors in this context.

How can an alcohol problem be identified in an expectant mother and by whom? How do you tackle the problem?

Prevention and information play a key role here, and that must be the task of the healthcare professionals who work with teenagers (gynecologists, school medical officers and pediatricians) and with women who are in the early stages of pregnancy (obstetricians, midwives). Information and prevention should also feature in prenatal consultations and family-planning advice.

There should also be widespread awareness across the existing network of professionals. Since the time available for consultations is at a premium, what action should be taken when an expectant mother shows signs of having an alcohol problem? In such cases, professionals must learn to refer the patients to other specialists. Here are two final statistics: We know from the literature that 20% of women drink alcohol during pregnancy and about 5% of them do so to an extent that represents a threat to the health of their child.

Is moderate alcohol consumption acceptable during pregnancy and while breastfeeding?

There are no studies defining a specific amount of alcohol that can be consumed without any risk at all. So there's only one possible recommendation, and that is total abstinence during pregnancy.

Binge drinking (more than four glasses per occasion) by the expectant mother also puts the child at risk because it can damage various organs. It is essential to draw attention



Manuella Epiney: «60% of expectant mothers are not aware that they are pregnant until the fourth or fifth week. And this is precisely when the fetus is at its most vulnerable».

to this fact because the drinking habits of young people are increasingly taking on a pattern of weekend bingeing. For teenagers, heavy drinking can be a particularly serious problem because it hugely increases the risk of forgetting to take the pill or engaging in unprotected sexual intercourse and then finding themselves with an unwanted pregnancy. Another serious problem arises with the increasingly early age at which young people start drinking: 60% of expectant mothers are not aware that they are pregnant until the fourth or fifth week. And this is precisely when the fetus is at its most vulnerable. Both teenagers and women who are planning to become pregnant must therefore be sensitized to the problem and persuaded not to drink alcohol.

How can the women affected be helped? Could you describe the experience gained with the advice and prevention network in the Canton of Geneva?

Yes, in two contexts. At the beginning of 2003 a group of specialists working in the areas of pregnancy and alcohol joined forces under the aegis of FEGPA, Geneva's alcohol-control federation. They include representatives from the HUG Maternity Clinic, midwives, nursing training, the health and educational authorities, the substance abuse unit and family planning, and they meet to exchange information and views. Targeting professionals who work with women and teenagers, the group produced an information flyer in October 2004 that provides reliable and easy-to-understand infor-

mation and a good opportunity to raise the topic with the patient. The flyer was distributed as widely as possible and aroused a lot of interest among the target group. With a view to continuing this work and improving the quality of training, the group conducted a forum meeting at the end of January 2005, which met with a very positive response.

The other activity in Geneva is not confined to the problem of alcohol. Alcohol problems are, in fact, rarely the only risk factor involved. They are often found in conjunction with abuse of drugs or other substances, smoking, domestic violence, difficult social conditions, etc. Against this background, a clinic was set up over two years ago to help couples and women whose pregnancy was particularly at risk. The aim is to enable the clients to benefit from more personalized counselling (by their doctor or midwife), backed up by all the resources of an interdisciplinary team (specialists in social work, pediatrics, psychology or psychiatry and possibly also in domestic violence counselling).

What role does the father play? What effect can a father with alcohol problems have?

There is often talk of co-dependence, but we have no confirmed data on this phenomenon. I feel it's important that the father should be included in the counselling as much as possible. We have in fact seen a positive effect on the part of the partner when the future mother drank dangerously high levels of alcohol.