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Assessment of
Perceived Health Risks
due to Smoking

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Prepared for: Health Canada, Office for
Tobacco Control

Focus Canada 1999-3

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Prepared by
Environics Research Group

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EXECUTIVE SUMMARY

SMOKING BEHAVIOUR

About one-third of Canadians smoke cigarettes at least occasionally. Nine in ten of those who do smoke say that they last smoked a cigarette "today."

Nearly nine in ten smokers have smoked for more than five years.

Three-quarters of smokers have tried to quit smoking at some point – one-third within the past year.

One-third of Canadians who do not currently smoke are former smokers.

SMOKING ATTITUDES: SAFETY AND ADDICTIVENESS

Canadians, smokers and non-smokers alike, overwhelmingly reject the idea that smoking cigarettes will do no harm if you don't inhale. They also overwhelmingly reject the idea that pipes, cigars or chewing tobacco are safe alternatives to cigarettes.

Three-quarters of Canadians say smoking cigarettes is as addictive as a hard drug like cocaine or heroin; however, only two-thirds of smokers say this.

RISK ASSESSMENT: GENERAL HEALTH RISKS

The health effect caused by smoking most frequently identified by Canadians is lung cancer. Other top mentions are cancer in general, heart attacks or heart disease and angina, and emphysema. Smokers are somewhat less likely than non-smokers to mention many of these health effects.

Large majorities of Canadians believe that smoking plays a major role in increasing a smoker's risk of developing lung cancer, emphysema, throat cancer, mouth cancer, heart disease, asthma and harm to babies during pregnancy. Smokers are less likely than non-smokers to ascribe a major role to smoking in almost all of the health conditions mentioned.

A large majority of Canadians believe that second-hand smoke plays a major role in increasing the risk of asthma

in children. Half of Canadians say it increases a non-smoker's risk of developing lung cancer and one-third say it increases a non-smoker's risk of developing heart disease. Smokers are less likely than non-smokers to ascribe a major role to second-hand smoke in all of the health conditions mentioned.

Inability to breathe is the most commonly mentioned result of emphysema, followed by coughing, needing an oxygen tank, death and lungs filled with fluid. Smokers are less likely than non-smokers to mention any of these results.

Pluralities of about one-third of Canadians say that a regular smoker's risk of developing lung cancer and heart disease would go back to that of a non-smoker after about five years. Smokers are slightly more likely than non-smokers to think that the risk would decline after six months or a year.

RISK ASSESSMENT: FATAL HEALTH RISKS

Majorities of Canadians think that smoking kills more Canadians annually than those who die from suicide, murder, alcohol, illegal drugs and AIDS, while a large plurality think it kills more Canadians annually than those who die in car accidents. Smokers are less likely than non-smokers to think that smoking kills more people annually than these other causes of death.

One-half of Canadians think 25,000 Canadians or fewer die each year as a result of smoking. Smokers are more likely than non-smokers to think that 25,000 or fewer Canadians die each year from smoking.

Four in ten Canadians, both smokers and non-smokers, say that most smoking-related deaths are from cancer. Smaller proportions mention respiratory disease or heart disease.

On average, Canadians think that just over one-half of regular smokers will die early as a consequence of their smoking. Smokers are somewhat more likely than non-smokers to estimate lower proportion of smokers who will die early due to smoking.

Canadians, both smokers and non-smokers, overwhelmingly believe that breast cancer is the type of cancer responsible for the most deaths of women in Canada.

Just over one-third of Canadians think a smoker is five times or less as likely to get lung cancer as a non-smoker. One-quarter think that a smoker is 50 times or more as likely to get lung cancer. Smokers are more likely than non-smokers to provide lower estimates of a smoker's chances of developing lung cancer.

On average, Canadians believe that 44 percent of people diagnosed with lung cancer die within one year of their diagnosis. Smokers are more likely to give a lower estimate of the proportion of those with lung cancer who die within one year of diagnosis.

More than half of Canadians think that 50 percent or less of young heart attack victims are smokers. Smokers are more likely than non-smokers to offer lower estimates of the number of young heart attack victims who are smokers.

A majority of Canadians have known someone who died from a smoking-related illness. Smokers are somewhat less likely than non-smokers to report knowing someone who has died from a smoking-related illness.

On average, smokers estimate their own chances of dying as a result of their smoking to be just over one in three.

INTRODUCTION

Environics Research is pleased to present the results of this survey conducted on behalf of The Office for Tobacco Control of Health Canada.

A survey of 2,061 adult Canadians, aged 18 years and older, was carried out in-home between September 27

and November 1, 1999 and included this series of questions on assessment of perceived health risks due to smoking as part of the Focus Canada national omnibus survey. Results from a survey of this size can be considered accurate within plus or minus 2.2 percent, 19 times out of 20.

SMOKING BEHAVIOUR

Incidence of Smokers

About one-third of Canadians smoke cigarettes at least occasionally. Nine in ten of those who do smoke say that they last smoked a cigarette "to-day."

When Canadians are asked whether they smoke daily, occasionally or not at all, 30 percent say they smoke daily, while five percent report that they smoke occasionally (less than every day). Sixty-four percent say they do not smoke at all.

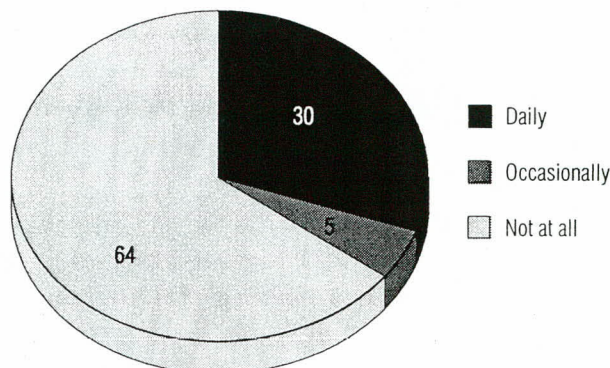
Men (31%) are slightly more likely than women (29%) to report that they smoke daily. There is a strong age pattern of increasing smoking, with those aged 60 and over being the least likely to smoke daily (18%), climbing to 29 percent of those aged 45 to 59, 35 percent of those aged 30 to 44, and the highest proportion, 37 percent, among those aged 18 to 29. There is also a strong income pattern, with those with annual incomes of \$70,000 or more being the least likely to smoke regularly (23%), rising to 27 percent among those with incomes from \$50,000 to \$70,000, 31 percent among those with incomes from \$35,000 to \$50,000, 34 percent among those with incomes from \$25,000 to \$35,000, 38 percent among those with incomes of \$15,000 to \$25,000 and 43 percent among those with incomes below \$15,000. Briefly put, the young and the poor are the most likely to smoke regularly.

Blue collar workers (48%), unskilled workers (46%) single persons (38%) and French-speaking Canadians (37%) are also more likely to smoke regularly.

A large majority of smokers (85%) say they smoke daily, whereas 15 percent smoke occasionally (less than every day).

Regional analysis indicates that residents of Quebec (35%) and the Atlantic provinces (35%) are the most likely to smoke daily, whereas residents of Vancouver (18%) and Toronto (23%) are the least likely.

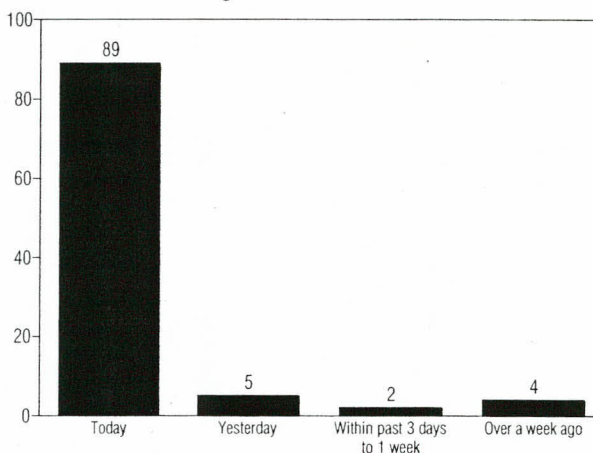
Smoke



Q.98

Do you smoke daily, occasionally or not at all?

Last Smoked a Cigarette



Q.101

When did you last smoke a cigarette?

Subsample: All those who smoke every day or occasionally

A large majority of smokers (89%) had smoked a cigarette the day they were interviewed. Five percent had smoked the day previous, a further two percent within the previous three days to a week, and four percent more than a week previous.

Smokers aged 60 and over were the most likely (96%) to have smoked a cigarette the day they were interviewed, and those aged 18 to 29 were the least likely (81%). Those with annual incomes of \$70,000 or more (77%) and those with university degrees (67%) were considerably less likely than others to have smoked a cigarette the day they were interviewed.

Regional analysis indicates that smokers in Atlantic Canada were the most likely to have smoked the day they were interviewed (94%), and those in Vancouver (78%), Manitoba (82%) and Alberta (83%) were the least likely.

Length of Time as a Smoker

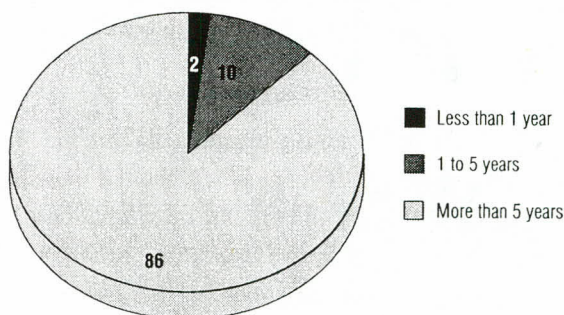
Nearly nine in ten smokers have smoked for more than five years.

When adult smokers are asked how long they have been cigarette smokers, almost nine in ten (86%) report that they have smoked for more than five years. Ten percent report that they have smoked for between one and five years, and two percent say they have smoked for less than a year.

Women (89%) are more likely than men (83%) to report smoking for more than five years. Not surprisingly, young adults (18-29) are the most likely to report smoking for one to five years (23%) or less than one year (4%). They are the least likely to report smoking for more than five years (70%).

Those in the highest income category (\$70,000+ annually) are the most likely to have smoked for only one to five years (20%), and the least likely to have smoked for more than five years (77%).

Length of Time as Smoker



Q.99

How long have you been a cigarette smoker?

Subsample: All those who smoke every day or occasionally

Occasional smokers (18%) are more likely than daily smokers (9%) to have only smoked for the past one to five years.

Regional analysis indicates that smokers in Toronto are the most likely to have smoked for only one to five years (18%) and the least likely to have smoked for more than five years (77%).

Time of Last Attempt to Quit Smoking

Three-quarters of smokers have tried to quit smoking at some point – one-third within the past year.

When smokers are asked how long ago, if ever, they last tried to quit smoking, one-third (31%) state that they last tried to quit within the last year: eight percent of those within the last month, 11 percent in the one to six months previous, and 12 percent in the six months to a year previous. Eleven percent report trying to quit smoking in the one to two years previous, 11 percent in the two to five years previous, and 19 percent more than five years previous. Twenty-seven percent say they have never tried to quit smoking.

Smokers aged 18 to 29 years (43%) are more likely to report having tried to quit smoking within the past year. Those with less than a high school education (44%) are

the most likely to have never tried to quit smoking, while those with a university education (24%) are the least likely to have never tried quitting.

Occasional smokers are slightly more likely to have tried quitting within the past year (32%), but also more likely (35%) to have never tried to quit. Similarly, those who have smoked for less than five years are more likely to have tried quitting over the past year (41%), but also more likely to have never tried quitting (32%).

Regional analysis indicates that residents of British Columbia (43%) and Ontario (35%) are the most likely to have tried quitting smoking during the past year. Smokers in Vancouver (42%) and Montreal (41%) are the most likely to have never tried quitting.

Incidence of Former Smokers

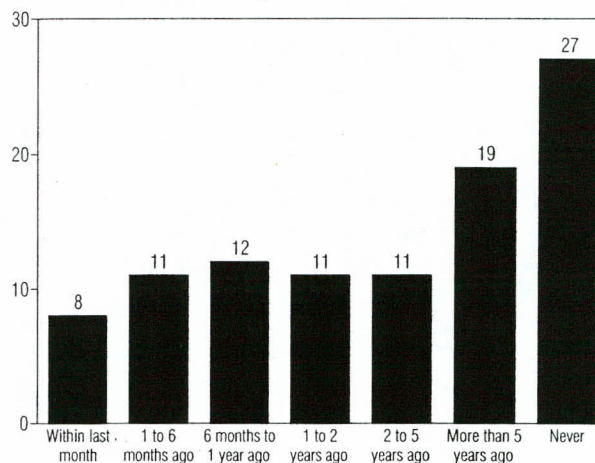
One-third of Canadians who do not currently smoke are former smokers.

When Canadians who do not smoke at the present time are asked if they have ever smoked cigarettes daily, one-third (37%) respond that they have; two-thirds (63%) indicate that they have never smoked cigarettes.

Non-smoking men (41%) and those aged 45 years or older, and those with a high school education or less are more likely than others to report that they smoked cigarettes at some time in the past.

Regional analysis indicates that non-smokers in British Columbia (49%) are the most likely to have smoked daily in the past then quit. Non-smokers in Toronto (22%) are the least likely to have ever smoked daily.

Tried to Quit Smoking

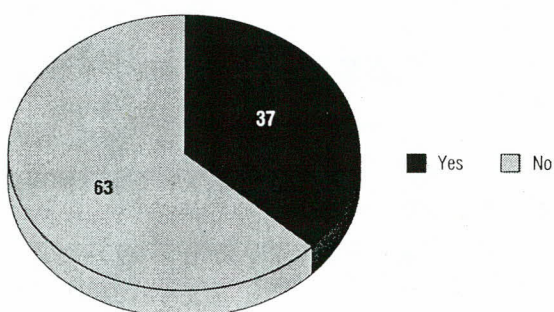


Q.100

How long ago, if ever, did you last try to quit smoking?

Subsample: All those who smoke every day or occasionally

Ever Smoked Daily



Q.102

Have you ever smoked cigarettes daily?

Subsample: All those who do not smoke at all

SMOKING ATTITUDES: SAFETY AND ADDICTIVENESS

Belief in Tobacco Safety Myths

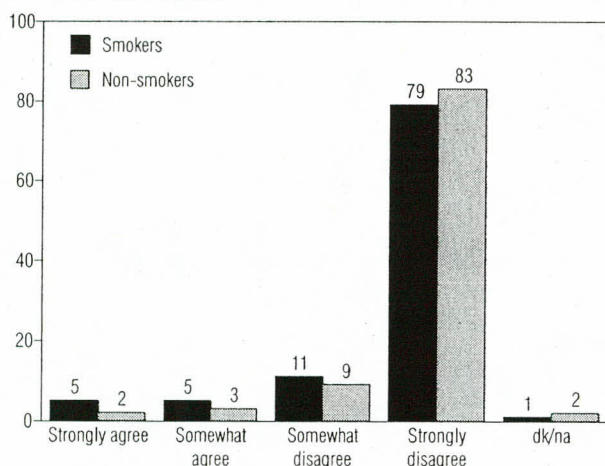
Canadians, smokers and non-smokers alike, overwhelmingly reject the idea that smoking cigarettes will do no harm if you don't inhale. They also overwhelmingly reject the idea that pipes, cigars or chewing tobacco are safe alternatives to cigarettes.

Canadians were asked if they agreed or disagreed with three common tobacco safety myths: that smoking cigarettes will do you no harm if you don't inhale, that cigars and pipes are a safe alternative to smoking cigarettes, and that chewing tobacco is a safe alternative to smoking cigarettes.

Of these three tobacco safety myths, agreement is highest with the statement that smoking cigarettes will do you no harm if you don't inhale (7%). Ninety-one percent disagree with the statement.

Four percent of Canadians agree that cigars and pipes are a safe alternative to smoking cigarettes. Ninety-four percent disagree.

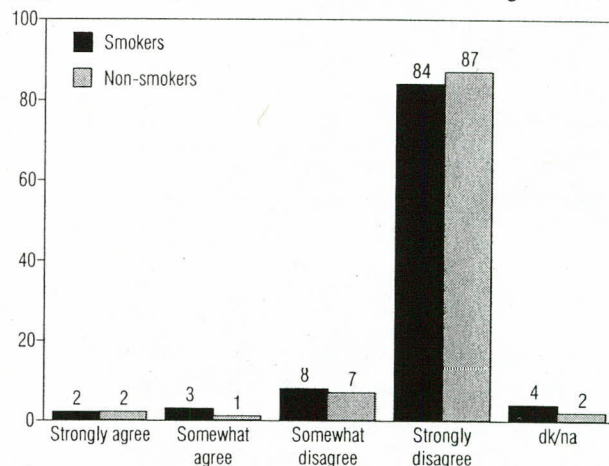
Smoking Cigarettes Will Do No Harm if You Don't Inhale



Q.103a

Please tell me whether you strongly agree, somewhat agree, somewhat disagree or strongly disagree with the following.
Smoking cigarettes will do you no harm if you don't inhale

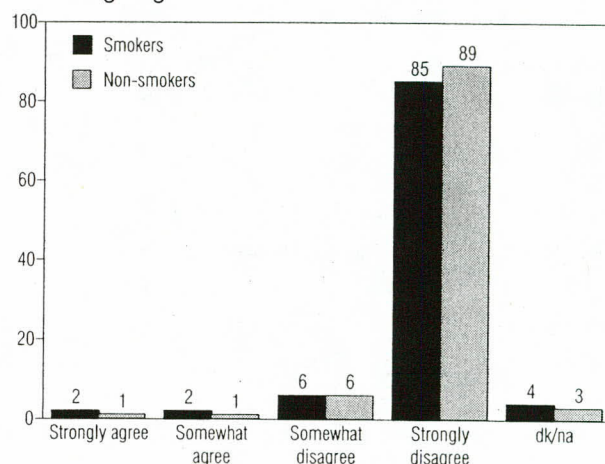
Cigars and Pipes a Safe Alternative to Cigarettes



Q.103b

Please tell me whether you strongly agree, somewhat agree, somewhat disagree or strongly disagree with the following.
Cigars and pipes are a safe alternative to smoking cigarettes

Chewing Tobacco a Safe Alternative to Smoking Cigarettes



Q.103c

Please tell me whether you strongly agree, somewhat agree, somewhat disagree or strongly disagree with the following.
Chewing tobacco is a safe alternative to smoking cigarettes.

Four percent of Canadians agree that chewing tobacco is a safe alternative to smoking cigarettes. Ninety-three percent disagree.

Smokers, particularly occasional smokers, are slightly more likely than non-smokers to agree with all three statements.

Agreement with all three statements is also slightly higher among those with less than high school education and residents of Atlantic Canada. Quebecers are slightly more likely to agree that cigarettes do no harm if not inhaled, and that pipes or cigars are safe alternatives to smoking cigarettes.

Addictiveness of Smoking Cigarettes

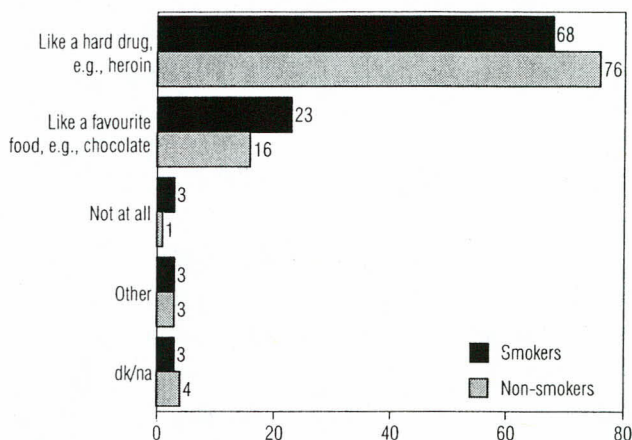
Three-quarters of Canadians say smoking cigarettes is as addictive as a hard drug like cocaine or heroin.

Canadians were asked whether smoking cigarettes is not addictive at all, about as addictive as eating a favourite food like chocolate, or about as addictive as a hard drug like cocaine or heroin.

Three-quarters of Canadians (73%) say smoking cigarettes is as addictive as a hard drug like cocaine or heroin. One-fifth (19%) say it is as addictive as eating a favourite food like chocolate. Only two percent say it is not addictive at all.

Smokers (23%), particularly occasional smokers (31%), are more likely than non-smokers (16%) to say that smoking is as addictive as eating a favourite food. Non-smokers (76%) are more likely than smokers (70%) to say that smoking is as addictive as a hard drug. Occasional smokers (6%) are the most likely to say it is not addictive at all.

Addictiveness of Smoking



Q.114

How would you rate the addictiveness of smoking cigarettes?

Women (75%) and those aged 30 to 44 (77%) are more likely to say smoking cigarettes is as addictive as a hard drug. Those with a household income of \$70,000 or more (84%) and those with a university education (82%) are also more likely to say it is as addictive as a hard drug.

Those aged 60 or more (22%), those earning less than \$15,000 annually (24%) and those with less than a high school education (28%) are more likely to say it is as addictive as a favourite food.

Regional analysis indicates that residents of Toronto (82%) and British Columbia (79%) are more likely to say smoking cigarettes is about as addictive as a hard drug like cocaine or heroin. Residents of Quebec (24%) and Atlantic Canada (24%) are more likely to say it is as addictive as a favourite food.

RISK ASSESSMENT: GENERAL HEALTH RISKS

Health Effects or Illnesses Caused by Smoking Cigarettes

The health effect caused by smoking most frequently identified by Canadians is lung cancer. Other top mentions are cancer in general, heart attacks or heart disease and angina, and emphysema.

When Canadians are asked what specific health effects or illnesses, if any, they can think of, that are caused by smoking, the most frequent response is lung cancer (61%). Other top mentions are cancer in general (41%), heart attacks/disease/angina (34%) and emphysema (33%). Frequent mentions are oral cancer (20%), asthma (20%) lung disease in general (20%), respiratory problems (17%), addiction (16%) and coughing (11%). Other mentions include death (9%), stroke (9%), bronchitis (8%), second-hand smoke (8%), effect on unborn children (8%), bad breath/smell (8%), blood circulation problems (8%), yellow teeth and fingers (8%), allergies (7%), air pollution (6%), breast cancer (6%), and high blood pressure (6%). Small proportions name loss of energy (5%), wrinkles (4%), gum disease (4%), impotence (1%) and gangrene (less than 1%). Only one percent of Canadians say no health effects or illnesses are caused by smoking cigarettes.

Daily smokers are less likely to mention most illnesses, including lung cancer (56%), cancer in general (37%), emphysema (31%), oral cancer (16%), asthma (18%) and lung disease (19%). Occasional smokers are less likely to mention lung cancer (53%), but more likely to mention heart attacks (39%) and oral cancer (28%). Canadians who know someone who has died from smoking are more likely than average to name almost all of the illnesses.

Men are slightly more likely than women to mention heart attacks (35%) and oral cancer (21%), while women are more likely than men to mention lung cancer (62%), cancer in general (42%), emphysema (36%), asthma (24%) and lung disease (21%).

Health Effects/Illnesses Caused by Smoking

	SMOKERS	NON-SMOKERS
Cancer – lung	55	63
Cancer in general	38	42
Heart attack/disease/angina	34	34
Emphysema	32	34
Cancer – oral	17	22
Asthma	18	21
Lung disease/lungs	19	21
Respiratory problems	16	18
Addiction	17	15
Coughing	10	12
Death	8	10
Stroke	9	8
Bronchitis	9	8
Second-hand smoke	6	10
Effect on fetus/unborn child	8	8
Bad breath/bad smell	9	8
Blood circulation problems	7	8
Yellow teeth/fingers/effect appearance	6	8
Allergies	5	8
Air pollution/environmental damage	5	6
Cancer – breast	7	6
High blood pressure	5	6
Poor physical condition/loss of energy	5	5
Wrinkles/premature aging	4	5
Gum disease/tooth loss	4	4
Impotence/sexual dysfunction	1	2
Gangrene	*	1
None	3	*
Other	5	5
dk/na	1	2

* Less than one percent

Q.104

What specific health effects or illnesses, if any, can you think of that are caused by smoking cigarettes?

Those aged 18 to 29 are more likely to name lung cancer (63%), cancer in general (43%), oral cancer (23%) and addiction (21%). Canadians aged 30 to 44 are more likely to mention cancer in general (44%), oral cancer (22%) and asthma (23%). Those aged 45 to 59 are more likely to name cancer in general (45%), heart attack (38%), emphysema (38%), oral cancer (21%) and lung disease (21%). Canadians aged 60 and over are more likely to mention lung cancer (63%), but less likely to mention most other ailments.

French Canadians are more likely to mention lung cancer (71%), while English Canadians are more likely to mention emphysema (39%). Professionals and those with the highest levels of income and education are more likely than average to name each of the frequently mentioned illnesses.

Regional analysis indicates that Atlantic Canadians are more likely to mention cancer in general (47%), emphysema (42%), asthma (29%) and lung disease (31%). Quebecers are more likely to mention lung cancer (69%), but less likely to mention most other illnesses. Ontarians are more likely to mention cancer in general (47%) and heart attacks (40%). Manitobans are more likely to mention emphysema (37%). Residents of Saskatchewan are more likely to mention cancer in general (53%), emphysema (49%) and oral cancer (26%). British Columbians are more likely to name lung cancer (66%), heart attacks (41%), emphysema (42%) and oral cancer (26%).

Perceived Risk of Personal Health Conditions Due to Smoking

Large majorities of Canadians believe that smoking plays a major role in increasing a smoker's risk of developing lung cancer, emphysema, throat cancer, mouth cancer, heart disease, asthma and harm to babies during pregnancy.

Canadians were provided with a list of human health conditions and diseases, and asked whether, as far as they know, smoking cigarettes plays a major role, a minor role, or no role at all in increasing a smoker's risk of developing each of the conditions.

Smoking was judged to play a major role in lung cancer by 94 percent of Canadians. Majorities also judged smoking to play a major role in emphysema (84%), throat cancer (83%), mouth cancer (79%), heart disease (77%), asthma (76%), harm to babies during pregnancy (76%), stroke (58%) and clogged blood vessels (52%).

Smaller proportions say smoking plays a major role in wrinkles and premature aging (41%), tooth loss and gum disease (37%), miscarriages (28%), stomach ulcers (20%), bladder cancer (19%), infertility (14%), impotence (11%), gangrene (7%), hepatitis (7%), acne (7%) and arthritis (6%).

Smokers are less likely to say that smoking plays a major role in all of these conditions, particularly emphysema, tooth loss and gum disease, clogged blood vessels, heart disease, miscarriage, mouth cancer and throat cancer.

University graduates (98%) are more likely than other Canadians to say smoking cigarettes plays a major role in increasing a smoker's risk of developing lung cancer. Those with a university degree (83%) and those aged 30 to 44 (81%) are more likely to say smoking plays a major role in asthma. Those with annual incomes of \$70,000 or more are more likely to say smoking plays a major role in harm to babies during pregnancy (82%), tooth loss and gum disease (50%) and fertility (19%). Francophones (61%) and retired persons (60%) are more likely to say smoking plays a major role in clogged blood vessels. Those aged 18 to 29 (34%) are more likely to say smoking plays a major role in miscarriages. Homemakers are more likely than other Canadians to say smoking cigarettes plays a major role in increasing a smoker's risk of developing stomach ulcers (29%) and arthritis (9%). Those with less than a high school education (11%) are more likely to say smoking plays a major role in hepatitis.

Atlantic Canadians are more likely to say smoking plays a major role in throat cancer (90%), miscarriages (35%) and stomach ulcers (27%).

Quebecers are more likely to say smoking plays a major role in clogged blood vessels (57%).

Ontarians are more likely to say smoking plays a major role in tooth loss and gum disease (57%). Residents of Toronto are more likely to say smoking plays a major role in throat cancer (89%), mouth cancer (88%), heart disease (83%), strokes (70%) and acne (12%).

Manitobans (89%) are more likely to say smoking plays a major role in throat cancer (89%), mouth cancer (88%), clogged blood vessels (58%), infertility (22%), impotence (23%) and hepatitis (11%).

Saskatchewan residents are more likely to say smoking plays a major role in emphysema (89%), harm to babies during pregnancy (85%), wrinkles and premature aging (58%) and bladder cancer (28%).

Residents of Alberta (12%) are more likely to say smoking plays a major role in gangrene.

Residents of British Columbia (58%) are more likely to say smoking plays a major role in wrinkles and premature aging and impotence (16%). Residents of Vancouver (69%) are more likely to say smoking plays a major role in strokes.

Those who know someone who has died from smoking are more likely to say smoking plays a major role in emphysema (89%) and heart disease (83%).

Role of Smoking in Health Conditions and Diseases

	MAJOR		MINOR		NONE		DK/NA	
	SMOKERS	Non-SMOKERS	SMOKERS	Non-SMOKERS	SMOKERS	Non-SMOKERS	SMOKERS	Non-SMOKERS
Lung cancer	89	96	7	2	3	*	1	1
Throat cancer	78	86	13	19	6	2	3	2
Emphysema	77	87	10	6	5	1	8	6
Mouth cancer	74	82	14	12	8	3	4	3
Harm to babies during pregnancy	72	78	16	14	8	4	4	4
Heart disease	72	80	19	15	7	3	2	2
Asthma	71	78	18	15	8	4	3	3
Stroke	54	61	26	24	15	9	5	7
Clogged blood vessels	47	55	28	25	16	8	9	12
Wrinkles and premature aging	36	43	28	28	29	21	7	8
Tooth loss and gum disease	31	41	32	28	31	22	7	9
Miscarriages	22	30	32	35	30	18	15	17
Stomach ulcers	17	21	27	33	46	30	10	15
Bladder cancer	15	21	23	27	44	30	18	21
Infertility	12	15	21	30	53	33	15	21
Impotence	8	12	25	29	48	34	18	24
Hepatitis	6	8	13	14	65	54	16	24
Arthritis	5	6	17	24	64	50	15	19
Acne	5	7	12	20	69	54	13	19
Gangrene	4	9	14	19	65	48	17	25

Q.105

As far as you know, does smoking cigarettes play a major role, a minor role or no role at all in increasing a smoker's risk of developing each of the following human health conditions?

Perceived Risk of Health Conditions Due to Second-hand Smoke

A large majority of Canadians believe that second-hand smoke plays a major role in increasing the risk of asthma in children. Half of Canadians say it increases a non-smoker's risk of developing lung cancer and one-third say it increases a non-smoker's risk of developing heart disease.

Canadians were provided with a list of illnesses affecting non-smokers that may or may not be linked to breathing in second-hand smoke from cigarettes other people are smoking. They were asked whether, as far as they know, second-hand smoke plays a major role, a minor role or no role at all in increasing the risk of each of these human health conditions.

Second-hand smoke was judged to play a major role in asthma in children by 71 percent of Canadians. Smaller proportions judged second-hand to play a major role in lung cancer in non-smokers (52%), heart disease in non-smoking adults (33%), ear infections in children (22%), strokes in non-smoking adults (22%), sudden infant death syndrome (SIDS) (18%), and arthritis in non-smoking adults (6%).

Smokers are less likely to say second-hand smoke plays a major role in increasing the risk of all of these conditions, particularly lung cancer (39%), heart disease (26%) and strokes (16%) among non-smoking adults and asthma in children (64%).

Working women (75%) and white collar workers (78%) are more likely than other Canadians to say second-hand smoke plays a major role in increasing the risk of asthma in children. Those with a university education (59%) are more likely to say second-hand smoke plays a major role in lung cancer in non-smokers. Technical workers (40%) are more likely to say second-hand smoke plays a major role in heart disease in non-smoking adults. Those aged 60 or more (26%) are more likely to say second-hand smoke plays a major role in strokes in non-smoking adults. Those with less than a high school education (10%) are more likely than other Canadians to say second-hand smoke plays a major role in increasing the risk of arthritis in non-smoking adults.

Residents of Toronto (41%) and are more likely to say second-hand smoke plays a major role in heart disease in non-smoking adults. Residents of Toronto (32%), the Atlantic provinces (30%) and Manitoba (30%) are more likely to say second-hand smoke plays a major role in ear

Role of Second-hand Smoke in Diseases

	MAJOR		MINOR		NONE		DK/NA	
	SMOKERS	Non-SMOKERS	SMOKERS	Non-SMOKERS	SMOKERS	Non-SMOKERS	SMOKERS	Non-SMOKERS
Asthma in children	64	75	25	19	7	3	3	3
Lung cancer in non-smokers	39	59	42	31	15	6	4	4
Heart disease in non-smoking adults	26	38	42	39	26	15	6	8
Ear infections in children	19	24	23	26	45	33	14	16
Sudden Infant Death Syndrome (SIDS)	16	20	19	21	42	31	23	27
Strokes in non-smoking adults	16	26	34	33	39	25	11	16
Arthritis in non-smoking adults	3	7	11	20	72	55	13	18

Q.106
As far as you know, does second-hand smoke play a major role, a minor role or no role at all in increasing the risk of each of the following human health conditions among non-smokers?

infections in children. Residents of British Columbia (28%) and Manitoba (26%) are more likely to say second-hand smoke plays a major role in sudden infant death syndrome (SIDS).

Symptoms of Emphysema

Inability to breathe is the most commonly mentioned result of emphysema.

Canadians were asked, as far as they know, what happens to a person who has emphysema.

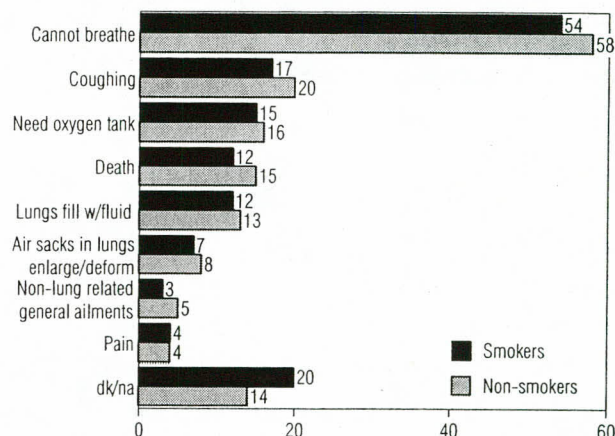
A majority of Canadians (56%) say someone suffering from emphysema cannot breathe. Smaller proportions mention coughing (19%), needing an oxygen tank (15%), death (14%) lungs filled with fluid (13%), enlarged and deformed air sacs in lungs (7%), general ailments (4%) and pain (4%).

Non-smokers are more likely to name each of the high-ranking ailments while smokers are less likely to name most of the ailments.

Women are more likely to name each of the high-ranking ailments. Those aged 18 to 29 are less likely to name most of the ailments. Those with annual incomes of \$70,000 or more are more likely to mention an inability to breathe.

Atlantic Canadians (63%) are more likely to mention an inability to breathe. Residents of Vancouver (26%) and Montreal (24%) are more likely to mention coughing. Residents of Manitoba (25%) and Vancouver (21%) are more likely to mention needing an oxygen tank. British Columbians (23%) and residents of Saskatchewan (22%) are more likely to mention death. Residents of Atlantic Canada (21%) and Manitoba (20%) are more likely to mention lungs filled with fluid. Residents of Manitoba (17%) and British Columbia (12%) are more likely to mention enlarged and deformed air sacs in lungs. Residents of Saskatchewan (18%) are more likely to mention general ailments.

Consequences of Emphysema



Q.115

As far as you know, what happens to a person who has emphysema?

Time to Return to Normal Risk for Disease

Pluralities of about one-third of Canadians say that a regular smoker's risk of developing lung cancer and heart disease would go back to that of a non-smoker after about five years.

Canadians were asked if a regular smoker quits smoking, how long it would take for their risk of developing lung cancer and heart disease to be the same as for someone who has never smoked at all: about six months, a year, five years, ten years or will the risk never go back to that of a non-smoker.

A plurality (34%) think the risk of developing lung cancer would go back to that of a non-smoker after about five years. Smaller proportions suggest it would never go back (20%), after 10 years (17%), after one year (13%), or after six months (4%).

Smokers are slightly more likely than non-smokers to think that the risk of developing lung cancer would go back to that of a non-smoker in six months or a year.

Those with annual incomes of less than \$15,000 (27%) and less than a high school education (26%) are more likely to say the risk would never go back to that of a non-smoker.

Regional analysis indicates that residents of Vancouver (33%), Saskatchewan (27%) and Quebec (26%) are also more likely to say the risk of developing lung cancer would never go back.

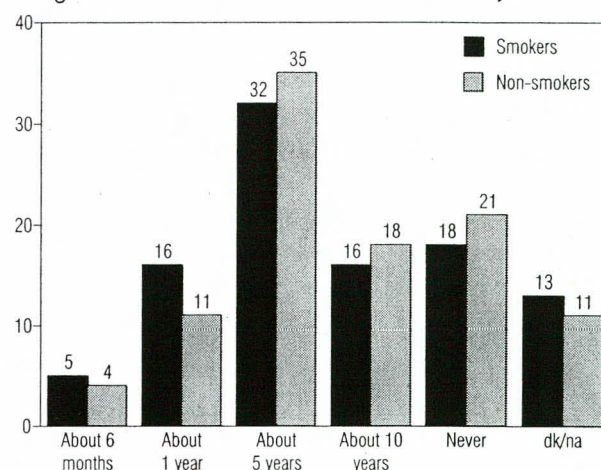
A plurality (35%) think the risk of developing heart disease would go back to that of a non-smoker after about five years. Smaller proportions suggest it would never go back (17%), after one year (15%), after ten years (15%), or after six months (4%).

Smokers are slightly more likely than non-smokers to think that the risk of developing heart disease would go back to that of a non-smoker in six months or a year.

Those with annual incomes of less than \$15,000 (23%) are more likely to say the risk would never go back to that of a non-smoker.

Regional analysis indicates that residents of Vancouver (33%) are also more likely to say the risk of developing heart disease would never go back.

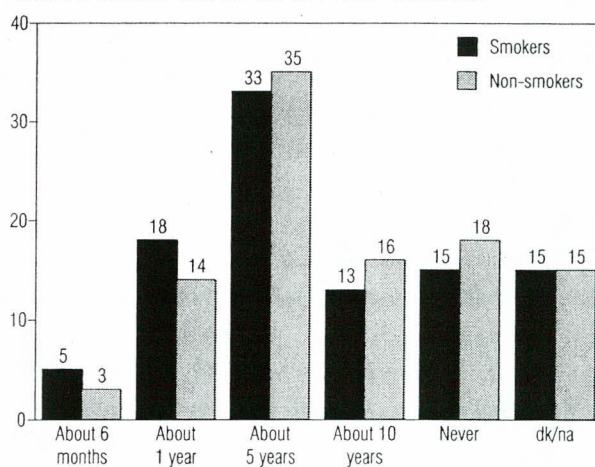
Time After Regular Smoker Quits Before Risk of Lung Cancer Same as for Non-smoker



Q.116a

If a regular smoker, quits smoking, how long would it take after quitting for their risk of developing ... lung cancer ... to be the same as for someone who has never smoked at all?

Time After Regular Smoker Quits Before Risk of Heart Disease Same as for Non-smoker



Q.116b

If a regular smoker, quits smoking, how long would it take after quitting for their risk of developing ... heart disease... to be the same as for someone who has never smoked at all?

Number of Deaths Attributable to Cigarette Smoking Annually

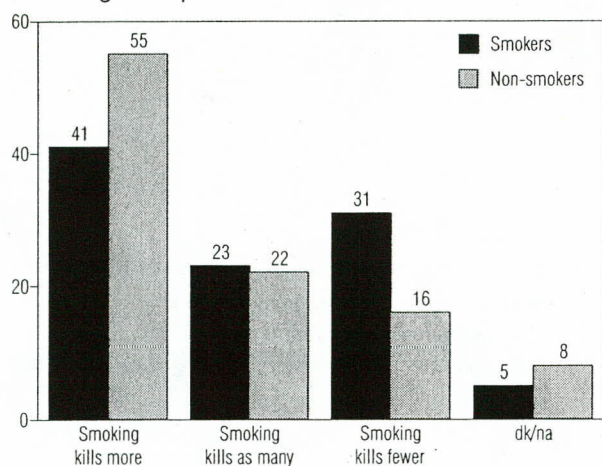
Majorities of Canadians think that smoking kills more Canadians annually than those who die from suicide, murder, alcohol, illegal drugs and AIDS, while a large plurality think it kills more Canadians annually than those who die in car accidents.

Canadians were asked whether they think cigarette smoking kills more, fewer, or about the same number of Canadians each year as several other causes of death: suicide, murder, alcohol, illegal drugs, AIDS and car accidents.

Smokers are less likely than non-smokers to think that smoking kills more Canadians annually than these other causes of death.

Fifty-nine percent of Canadians think smoking kills more Canadians annually than does suicide. Twenty percent think it kills fewer, and eight percent think it kills about the same number of Canadians.

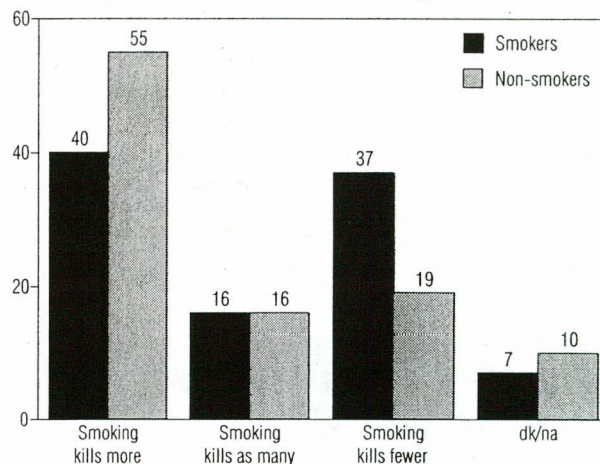
Relative Number of Canadian Deaths from Smoking Compared to Alcohol



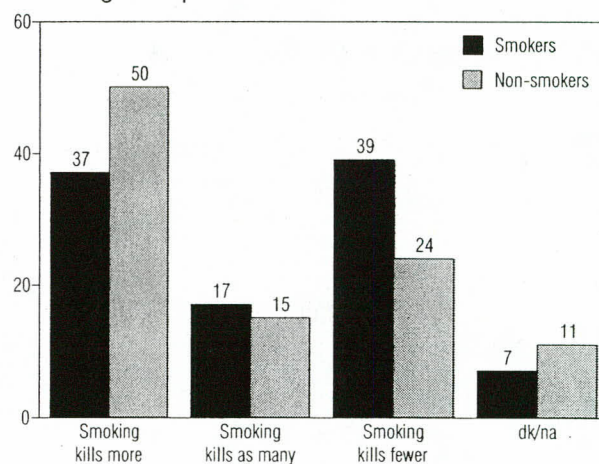
Q.107

Do you think that cigarette smoking kills more, fewer or about the same number of Canadians each year as each of the following other causes of death?

Relative Number of Canadian Deaths from Smoking Compared to Illegal Drugs



Relative Number of Canadian Deaths from Smoking Compared to Car Accidents



Q.107

Do you think that cigarette smoking kills more, fewer or about the same number of Canadians each year as each of the following other causes of death?

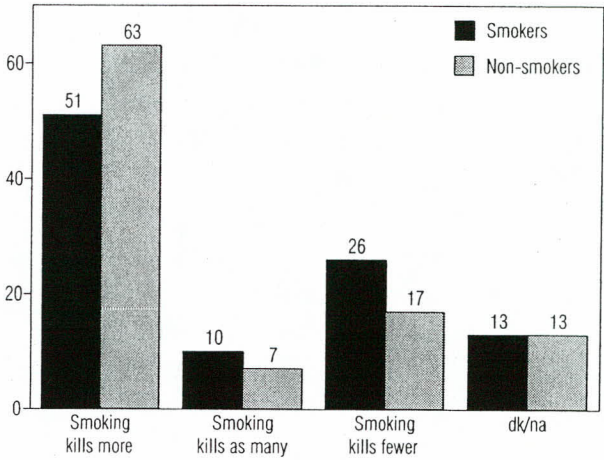
Francophones (33%), Quebecers (30%), those with annual incomes of less than \$15,000 (28%) and daily smokers (28%) are more likely to think smoking kills fewer Canadians annually than suicide.

Fifty-nine percent of Canadians think smoking kills more Canadians annually than do murders. Twenty-one percent think it kills fewer, and seven percent think it kills about the same number of Canadians.

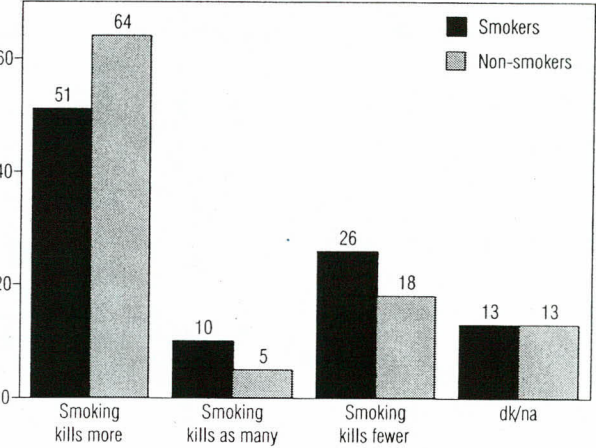
Those with less than a high school education (32%), francophones (30%), Quebecers (29%) and those with annual incomes of less than \$15,000 (29%) are more likely to think smoking kills fewer Canadians annually than do murders.

Fifty percent of Canadians think smoking kills more Canadians annual than does alcohol. Twenty-one percent think it kills fewer, and 23 percent think it kills about the same number of Canadians.

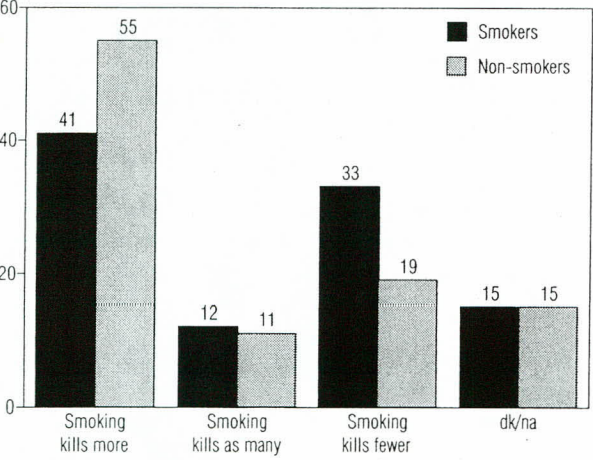
Relative Number of Canadian Deaths from Smoking Compared to Suicides



Relative Number of Canadian Deaths from Smoking Compared to Murders



Relative Number of Canadian Deaths from Smoking Compared to AIDS



Q.107

Do you think that cigarette smoking kills more, fewer or about the same number of Canadians each year as each of the following other causes of death?

Q.107

Do you think that cigarette smoking kills more, fewer or about the same number of Canadians each year as each of the following other causes of death?

Smokers (31%), those with annual incomes of less than \$15,000 (30%) and Montrealers (27%) are more likely to think smoking kills fewer Canadians annually than does alcohol.

Fifty percent of Canadians think smoking kills more Canadians annually than do illegal drugs. Twenty-six percent think it kills fewer, and 16 percent think it kills about the same number of Canadians.

Those with annual incomes of less than \$15,000 (40%), smokers (37%), and residents of Vancouver (36%) and Quebec (34%) are more likely to think smoking kills fewer Canadians annually than do illegal drugs.

Fifty percent of Canadians think smoking kills more Canadians annually than does AIDS. Twenty-four percent think it kills fewer, and 11 percent think it kills about the same number of Canadians.

Francophones (40%), Quebecers (38%), those with annual incomes of less than \$15,000 (37%) and smokers (33%) are more likely to think smoking kills fewer Canadians annually than does AIDS.

Forty-six percent of Canadians think smoking kills more Canadians annually than do car accidents. Thirty percent think it kills fewer, and 15 percent think it kills about the same number of Canadians.

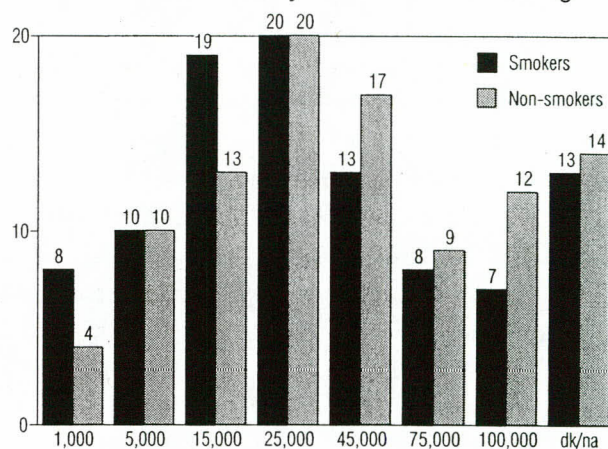
Francophones (42%), Quebecers (40%), those with annual incomes of less than \$15,000 (39%) and smokers (39%) are more likely to think smoking kills fewer Canadians annually than do car accidents.

Estimated Number of Smoking Deaths Annually

One-half of Canadians think 25,000 Canadians or less die each year as a result of smoking.

Canadians were asked which of the following is the closest approximation of the number of Canadians who die each year as a result of smoking cigarettes: 1,000; 5,000; 25,000; 45,000; 75,000 or 100,000.

Number Who Die Yearly as Result of Smoking



Q.108

Which of the following do you think is the closest approximation of the number of Canadians who die each year as a result of smoking cigarettes?

One-half of Canadians (50%) think 25,000 Canadians or less die each year as a result of smoking. Twenty percent give the figure of 25,000; 15 percent say 15,000; ten percent say 5,000; and five percent say approximately 1,000 Canadians die each year as a result of smoking.

Smokers (57%), those with a high school education (57%) and those aged 18 to 29 (54%) are more likely to think 25,000 Canadians or less die each year as a result of smoking.

Regional analysis indicates that residents of Atlantic Canada (61%), Vancouver (60%) and Quebec (54%) are more likely to think 25,000 Canadians or less die each year as a result of smoking.

Types of Smoking-Related Deaths

Four in ten Canadians say most smoking-related deaths are from cancer.

After having been given the chance to estimate the number, Canadians were informed that about 45,000 Canadians die every year as a result of smoking cigarettes. They were then asked whether they thought most of these deaths were from cancers, heart disease or respiratory disease.

Thirty-nine percent of Canadians say most smoking-related deaths are from cancer. Fourteen percent say they are from respiratory disease, and 13 percent say they are from heart disease.

Seven percent say they are from cancer and heart disease equally. Five percent say they are from cancer and respiratory disease equally, and two percent say they are from heart disease and respiratory disease equally.

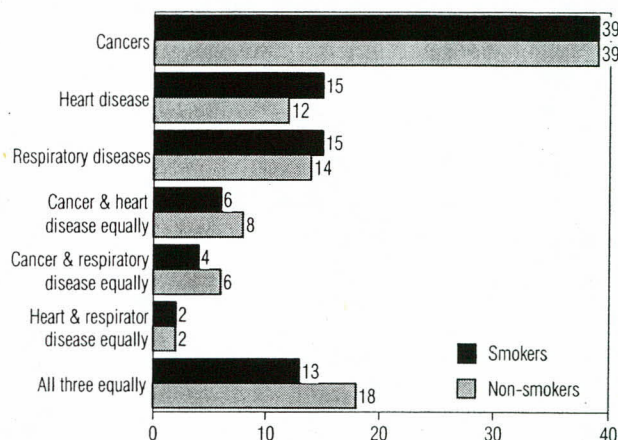
Sixteen percent of Canadians say that most smoking-related deaths are from cancer, heart disease and respiratory disease equally.

Both smokers and non-smokers give similar responses to this question; however, occasional smokers are somewhat less likely than others to say most smoking deaths are from cancer and more likely to mention respiratory disease.

Those aged 18 to 29 (47%) are more likely to say most smoking-related deaths are from cancer. Professionals (19%) are more likely to say most smoking-related deaths are from heart disease.

Residents of Toronto (46%) and Montreal (44%) are more likely to say most smoking-related deaths are from cancer. Residents of Alberta (26%), Saskatchewan (21%) and occasional smokers (19%) are more likely to say most smoking-related deaths are from respiratory disease. Residents of Alberta (18%) are more likely to say most smoking-related deaths are from heart disease. Residents of Manitoba (26%) and British Columbia (20%) are more likely to say that most smoking-related

Causes of Smoking-Related Deaths



Q.109

In fact, about 45,000 Canadians die every year from smoking cigarettes. Would you say that most of these smoking-related deaths are from....?

deaths are from cancer, heart disease and respiratory disease equally.

Estimated Smoking-Related Deaths of Regular Smokers

On average, Canadians think that just over one-half of regular smokers will die early as a consequence of their smoking.

Canadians were asked what percentage of people who regularly smoke about a pack of 25 cigarettes a day throughout their lifetimes will die early as a consequence of their smoking, if any.

The average proportion offered is 54 percent. Four percent of Canadians think no smokers will die early as a result of smoking, and 10 percent offer a figure under 25 percent. Nineteen percent think between 25 and 49 percent of smokers will die early, and 26 percent think between 50 and 74 percent of smokers will die early. Nineteen percent think between 75 and 99 percent of smokers will die early, and 11 percent of Canadians

think that all regular smokers will die early as a consequence of their smoking.

Smokers are somewhat more likely than non-smokers to estimate lower proportions of smokers will die early as a consequence of their smoking.

Residents of Toronto (74%), those with university degrees (65%) and those with annual incomes of \$70,000 or more (64%) are more likely to estimate higher proportions of smokers will die early.

Those with less than a high school education (37%) and Quebecers (44%) are more likely to estimate lower proportions of smokers will die early as a consequence of their smoking.

Type of Cancer Most Responsible for Deaths Among Women

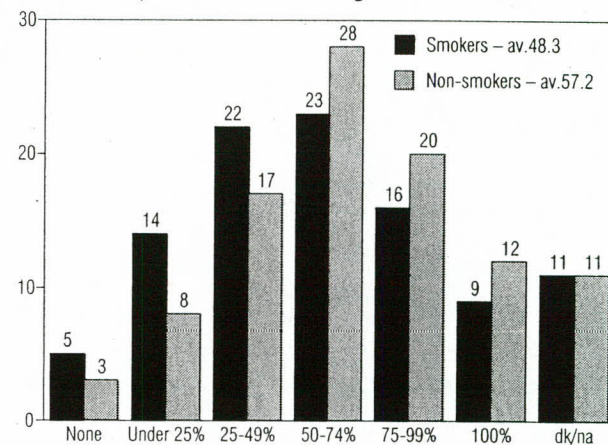
Canadians overwhelmingly believe that breast cancer is the type of cancer responsible for the most deaths of women in Canada.

When Canadians are asked what type of cancer is responsible for the most deaths among women in Canada, a solid majority name breast cancer (81%). Smaller proportions name lung cancer (11%), ovarian or cervical cancer (3%) or some other type of cancer (1%).

There is no difference between smokers and non-smokers on this question, with 81 percent of each group citing breast cancer, and 11 percent of each group citing lung cancer. Occasional smokers are somewhat less likely to mention breast cancer (71%) and more likely to mention lung cancer (17%).

Women and men are equally likely to mention breast cancer (81%). Differences among age groups are small, with those aged 60 or more slightly less likely to mention breast cancer (78%). French-speaking Canadians (87%) and those with annual incomes of \$25,000 to \$35,000 (86%) are more likely to think breast cancer is responsible for the most deaths among women in Canada.

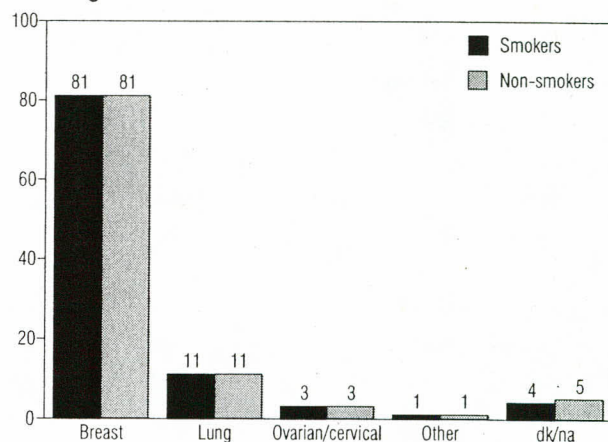
Percentage of Smokers Who Die Early As Consequence of Smoking



Q.110

What percentage of people who regularly smoke about a pack of 25 cigarettes a day throughout their lifetimes do you think will die early as a consequence of their smoking, if any?

Type of Cancer Responsible for Most Deaths Among Women in Canada



Q.65

What type of cancer do you think is responsible for the most deaths among women in Canada?

Regional analysis indicates that residents of Quebec (86%) are the most likely to think breast cancer is responsible for the most deaths among women in Canada. Residents of the Atlantic provinces (16%) and Vancouver (16%) are the most likely to identify lung cancer.

Estimated Increase in Risk of Lung Cancer Due to Smoking

Just over one-third of Canadians think a smoker is five times or less as likely to get lung cancer as a non-smoker. One-quarter think that a smoker is 50 times or more as likely to get lung cancer.

Canadians were asked what the likelihood is that someone who regularly smokes a pack of 25 cigarettes a day throughout their lifetime will develop lung cancer, compared with the likelihood for someone who has never smoked at all: is a smoker just as likely to get lung cancer as a non-smoker, twice as likely, three times as likely, five times as likely, ten times as likely, 20 times as likely, 50 times as likely or 100 times as likely?

Just over one-third (36%) of Canadians think a smoker is five times or less as likely to get lung cancer as a non-smoker. Eight percent say a smoker is just as likely, and another eight percent say a smoker is twice as likely. Eight percent say a smoker is three times as likely, and 12 percent say a smoker is five times as likely to get lung cancer as a non-smoker.

Sixteen percent of Canadians think a smoker is ten times as likely to get lung cancer as a non-smoker, and 13 percent say a smoker is 20 times as likely. Seventeen percent say a smoker is 50 times as likely, and 11 percent say a smoker is 100 times as likely to get lung cancer as a non-smoker.

Smokers (49%), residents of Alberta (49%), and the Atlantic provinces (48%) and those with an annual income of less than \$15,000 (40%) are more likely to think a smoker is five times or less as likely to get lung cancer as a non-smoker.

Likelihood that Regular Smoker Will Develop Lung Cancer Compared with Non-smoker

	SMOKERS	NON-SMOKERS
Just as likely	15	5
Twice as likely	11	6
Three times as likely	9	8
Five times as likely	14	11
Ten times as likely	13	18
Twenty times as likely	12	13
Fifty times as likely	13	19
One hundred times as likely	7	13
dk/na	6	7

Q.111

What is the likelihood that someone who regularly smokes about a pack of 25 cigarettes a day throughout their lifetime will develop lung cancer compared with the likelihood for someone who has never smoked at all?

Estimated Deaths from Lung Cancer within a Year of Diagnosis

On average, Canadians believe that 44 percent of people diagnosed with lung cancer die within one year of their diagnosis.

Canadians were asked what percentage of people diagnosed with lung cancer they think die within one year of their diagnosis.

The average proportion offered is 44 percent. Three percent of Canadians think no one diagnosed with lung cancer die within a year of diagnosis. Fifteen percent say under 25 percent die, and 21 percent say between 25 and 49 percent die. Thirty percent say between 50 and 74 percent die, and 13 percent say between 75 and 99 percent die. Two percent think 100 percent of Canadians diagnosed with lung cancer die within a year of diagnosis. Sixteen percent offer no opinion.

Smokers (41%) give a lower estimate than non-smokers (46%) of the proportion dying within one year of diagnosis.

Residents of British Columbia (51%) give a higher estimate of the proportion dying within one year of diagnosis. Those with less than a high school education (38%), and residents of Montreal (39%) and Manitoba (39%) give lower estimates of the proportion diagnosed with lung cancer who will die within one year of diagnosis.

Proportion of Heart Attack Victims under 50 who are Smokers

More than half of Canadians think that 50 percent or less of young heart attack victims are smokers.

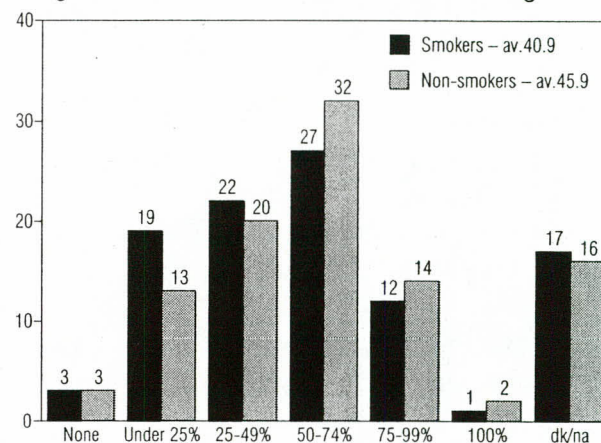
Canadians were told that about 30 percent of all Canadians smoke. They were then asked what percentage of people under the age of 50 who have heart attacks do they think are smokers: less than 20 percent, 20 to 30 percent, 30 to 50 percent, 50 to 70 percent, 70 to 90 percent or over 90 percent.

More than half of Canadians (57%) think that 50 percent or less of young heart attack victims are smokers. Ten percent say less than 20 percent are smokers, 21 percent say from 20 to 30 percent are smokers, and 26 percent say from 30 to 50 percent are smokers.

Twenty-five percent of Canadians say that from 50 to 70 percent of young heart attack victims are smokers, and seven percent say from 70 to 90 percent are smokers. One percent of Canadians say that over 90 percent of young heart attack victims are smokers.

Residents of Quebec (72%), Atlantic Canada (65%) and smokers (63%) are more likely to think that 50 percent or less of young heart attack victims are smokers.

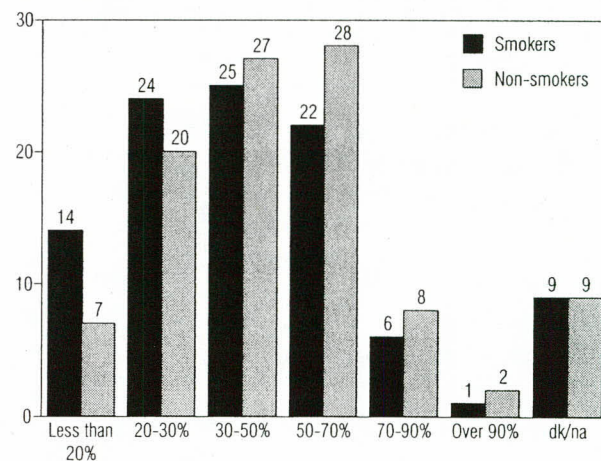
Percentage of People Diagnosed with Lung Cancer who Die Within 1 Year of Diagnosis



Q.112

What percentage of people diagnosed with lung cancer, do you think die within one year of their diagnosis?

Percentage of Those Under 50 who Have Heart Attacks and are Smokers



Q.113

As you may know, about 30 percent of all Canadians smoke. What percentage of people under the age of 50 who have heart attacks do you think are smokers?

Acquaintance with People who Died from a Smoking-Related Illness

A majority of Canadians have known someone who died from a smoking-related illness.

Canadians were asked whether they have ever known anyone, such as a friend, relative or work colleague, who died from a smoking-related illness.

A majority of Canadians (52%) say they have. Forty-four percent say they have not known anyone who has died from a smoking-related illness.

Women (53%), those aged 60 and over (58%), those with annual incomes of \$70,000 or more (62%), those with university degrees (59%), non-smokers (54%) and residents of Manitoba (64%) and Saskatchewan (61%) are more likely to say they have known someone who has died from a smoking-related illness.

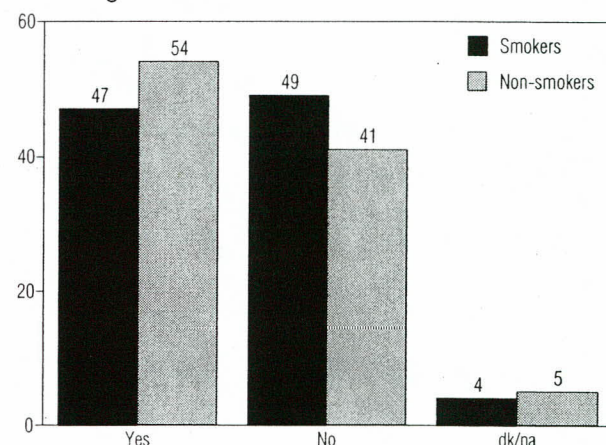
Personal Chances of Dying as a Result of Smoking

On average, smokers estimate their own chances of dying as a result of their smoking to be just over one in three.

Smokers were asked what they think their chances of dying someday as a result of their smoking are. On average, the figure offered was 36 percent. Eleven percent say there is no chance they will die from smoking, and 20 percent give a figure of under 25 percent. Fifteen percent give a figure of between 25 percent and 49 percent, and 27 percent give a figure of between 50 percent and 74 percent. Seven percent give a figure of between 75 percent and 99 percent, and four percent say they have a 100 percent chance of dying someday as a result of their smoking. Seventeen percent offer no opinion.

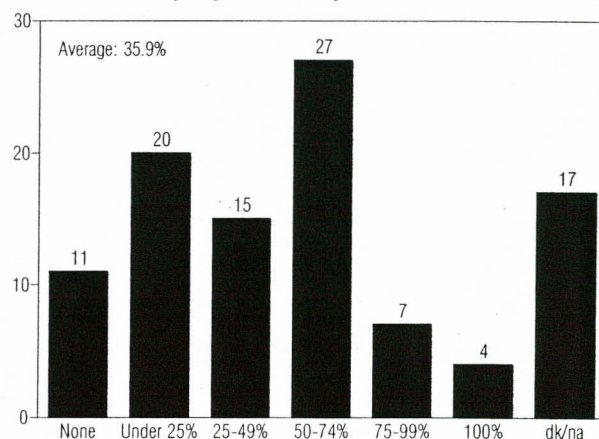
Those aged 30 to 44 (37%), daily smokers (38%) and residents of Saskatchewan (43%) and Manitoba (41%) rate their chances of dying from smoking higher.

Ever Known Anyone Who Died from Smoking-Related Disease



Q.117 Have you ever known anyone, such as a friend, relative or work colleague, who died from a smoking related illness?

Chances of Dying Someday as Result of Smoking



Q.118

What do you think are your chances of dying someday as a result of your smoking?

Subsample: All those who smoke regularly or occasionally

Those aged 45 to 59 (33%), those with annual incomes of \$70,000 or more (32%), those with less than a high school education (27%) and residents of Alberta (23%) and Vancouver (27%) rate their chances of dying from smoking lower.

The results of this survey are derived from 2,061 interviews carried out in the homes of the respondents between September 27 and November 1, 1999: 277 in the Atlantic Provinces, 502 in Quebec, 568 in Ontario and 714 in the Western Provinces.

QUESTIONNAIRE

The pre-coded questionnaire included questions for the core report as well as client questions which are not published in the report. The questionnaire was pre-tested in both English and French before being sent to interviewers.

DATA COLLECTION AND QUALITY CONTROL

The questionnaires are distributed, through regional supervisors, to approximately 150 experienced interviewers across the country. The supervisors are also responsible for training the interviewers and for briefing them on the specific instructions accompanying each survey.

Each interviewer also receives a map of his or her allocated area. On the map, the pre-selected block or blocks in which he or she must carry out his or her interviews are indicated. Starting with a pre-selected address, the interviewer must complete the number of interviews that he or she has been allocated, according to the age and sex quotas indicated on his or her route map. Only one respondent is interviewed per household. The questioning is carried out in the language chosen by the respondent.

In order to check the quality of work completed and the accuracy of the indicated responses, ten percent of each interviewer's respondents are re-contacted by the Field Director. In questionable cases, or when high standards have not been respected, the questionnaires are rejected.

SAMPLE

The sample is drawn in such a way that it represents the Canadian population aged 18 or over with the exception of those Canadians living in the Yukon or Northwest Territories or in institutions (armed forces barracks, hospitals, prisons).

The sampling model relies on stratification of the population by 10 regions (Atlantic, Montreal CMA, the rest of Quebec, Toronto CMA, the rest of Ontario, Manitoba, Saskatchewan, Alberta, Vancouver CMA, and the rest of British Columbia) and by four community sizes (1,000,000 inhabitants or more, 100,000 to 1,000,000 inhabitants, 5,000 to 100,000 inhabitants, and under 5,000 inhabitants).

The sample also relies on a gender quota, an age quota, and a working women quota.

Approximately 191 sampling points are used.

The number of cases in each region may not necessarily reflect its actual weight. The samples for some regions have been augmented in order to attain a sufficient number of cases for analysis. The results are then weighted during data processing to give each sampling stratum its proper weight.

DATA PROCESSING

Following the data collection operations, all questionnaires are edited and prepared for computer processing. Call-backs are carried out in cases where data collected are not sufficiently specific. Responses to open-ended questions are analysed and coded. Following this preparation step, the data are entered into the computer and weighted according to the actual population of each of the regions. The weighted and unweighted sample sizes are listed on the following pages.

The tabular analysis is presented separately.

MARGIN OF ERROR

The margin of error for a stratified probability sample of this size is estimated to be ± 2.2 percentage points, 19 times in 20. The margin of error increases in the case of a modified probability sample, such as the one used for this survey, and also for results pertaining to regional or socio-demographic sub-groups of the total sample.

Respondent Distribution by Analysis Criteria

	Sample				
	Approx Margin of Error ¹	N=2,061	Before Weighting %	After Weighting N= 2,061 %	1996 Census ² 21,693,400 %
TOTAL SAMPLE					
SEX					
Men		988	48	48	48
Women		1,073	52	52	52
Working Women		634	31	31	31 ³
AGE GROUP					
18 - 29		493	24	22	22
30 - 44		630	31	33	34
45 - 59		477	23	23	23
60 and over		461	22	22	22
REGIONS					
Atlantic Provinces	6.0	277	13	8	9
- Newfoundland	13.5	(60)	(3)	(2)	(2)
- Prince Edward Island	18.0	(32)	(2)	(1)	(*)
- New Brunswick	11.0	(75)	(4)	(3)	(3)
- Nova Scotia	10.0	(110)	(5)	(3)	(3)
Quebec	4.5	502	24	25	25
- Montreal Region	6.5	(200)	(10)	(14)	(14)
Ontario	4.3	568	28	38	37
- Toronto Region	7.4	(180)	(9)	(16)	(16)
West	3.7	714	35	29	29
- Manitoba	8.5	(129)	(6)	(4)	(4)
- Saskatchewan	8.5	(130)	(6)	(3)	(3)
- Alberta	6.5	(220)	(11)	(9)	(9)
- British Columbia	6.5	(235)	(11)	(13)	(13)

* Fewer than one percent

¹ For a strict probability sample of this size, 19 times in 20

² Canadians aged 18 or over in 1996, excluding those in the Yukon and Northwest Territories

³ Population 15 years of age and older 1996

Respondent Distribution by Analysis Criteria

	S A M P L E			
	N=2,061	Before Weighting %	After Weighting N=2,061 %	1996 Census %
TOTAL SAMPLE				
NON-BRITISH IMMIGRANT				
Europe	101	5	6	5 ³
Other	115	6	8	10 ³
TENURE				
Own	1,333	65	65	64 ⁴
Rent	712			
	35	34	36 ⁴	
COMMUNITY SIZE				
1,000,000 and over	490	24	36	33 ¹
100,000 to 999,999	507	25	20	23 ¹
5,000 to 99,999	506	25	22	16 ¹
Less than 5,000	558	27	23	28 ¹
EDUCATION				
0-8 years	183	9	9	2
9-13 years	1,033	50	50	2
14+ years	835	40	42	2
University degree	363	18	18	14 ³
MARITAL STATUS				
Single	452	22	21	32 ³
Married (or living as a couple)	1,236	60	59	51 ³

¹ Canadians of all ages excluding Northwest Territories and Yukon

² Report/omnibus categories are not comparable to those of Statistics Canada

³ Population 15 years of age and older 1996

⁴ Total dwellings in 1996

Respondent Distribution by Analysis Criteria

	S A M P L E			
	N=2,061	Before Weighting %	After Weighting N=2,061 %	1996 Census %
TOTAL SAMPLE				
LANGUAGE (Most often spoken at home)				
French	458	22	22	22 ¹
English	1,502	73	72	67 ¹
EMPLOYMENT STATUS				
In the work force	1,285	62	57	68 ³
Homemaker	205	9	14	²
Other (student, retired)	463	26	29	²
OCCUPATION (of work force)				
Professionals, administrators, and owners of big business	241	12	11	²
Technicians, semi-professionals, administrators and owners of small business	216	10	10	²
Office workers (white collar), service, sales	276	13	11	²
Tradespeople, skilled and semi- skilled workers (blue collar)	317	15	14	²
Unskilled workers, farmers and fishermen	222	11	10	²

¹ Population 15 years of age and older 1996 (mother tongue)

² Report/omnibus categories are not comparable to those of Statistics Canada

³ Population 15 years of age and older 1996

Respondent Distribution by Analysis Criteria

	S A M P L E			
	N=2,061	Before Weighting %	After Weighting N=2,061 %	1996 Census %
TOTAL SAMPLE				
INCOME				
Under \$15,000	227	11	11	17
\$15,000 to \$24,999	285	14	13	15
\$25,000 to \$34,999	265	13	12	15
\$35,000 to \$49,999	320	16	16	20
\$50,000 to \$69,999	276	14	14	16
\$70,000 and over	315	15	16	18
UNION MEMBERSHIP				
Respondent	344	17	15	1
TYPE OF UNION				
Private sector	103	5	5	1
Public sector	218	11	9	1
FEDERAL POLITICAL ORIENTATION²				
Liberal	728	49	50	na
Progressive Conservative	210	14	13	na
New Democratic Party	208	14	13	na
Reform Party	170	12	12	na
Bloc Québécois	153	11	10	na

¹ Report/omnibus categories are not comparable to those of Statistics Canada

² Based on 1,492 decided voters (1,469 weighted)

Questionnaire

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62. C What type of cancer do you think is responsible for the most deaths among women in Canada? **DO NOT READ...CODE ONE RESPONSE ONLY**

Lung cancer	1
Breast cancer	2
Ovarian cancer	3
Other cancer (SPECIFY)	4
DK/NA	5

separated

95. C Do you smoke daily, occasionally or not at all?

Daily	1
Occasionally	2
Not at all	3
DK/NA	4

SKIP TO Q.99C

ASK ALL WHO SMOKE EVERY DAY OR OCCASIONALLY IN Q. 95C

96. C How long have you been a cigarette smoker? Has it been...? **READ**

Less than 1 year	1
1-5 years	2
More than 5 years	3
DK/NA	4

97. C How long ago, if ever, did you last try to quit smoking? Was it...? **READ**

Within the last month	1
One to six months ago	2
Six months to a year ago	3
One to two years ago	4
Two to five years ago	5
More than five years ago	6
Never	7
DK/NA	8

98. C When did you last smoke a cigarette? Was it...? **READ**

Today	1
Yesterday	2
Within the past three days to a week	3
Over a week ago	4
DK/NA	5

ASK ALL WHO DO NOT SMOKE AT ALL IN Q.95C

99. C Have you ever smoked cigarettes daily?

Yes	1
No	2
DK/NA	3

ASK ALL

I am going to ask you some questions about the impact of smoking on human health.

100.C I am going to read you a series of statements. Please tell me whether you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following. **READ AND ROTATE**

		Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	DK/ NA
() Smoking cigarettes will do you no harm if you don't inhale	a.	1	2	3	4	5
() Cigars and pipes are a safe alternative to smoking cigarettes	b.	1	2	3	4	5
() Chewing tobacco is a safe alternative to smoking cigarettes	c.	1	2	3	4	5

101.C What specific health effects or illnesses, if any, can you think of that are caused by smoking cigarettes? **DO NOT READ...PROBE FOR AS MANY MENTIONS AS POSSIBLE**

Addiction	01
Air pollution/environmental damage	02
Allergies	03
Asthma	04
Bad breath.....	05
Blood circulation problems	06
Bronchitis	07
Cancer – Breast.....	08
Cancer – Lung	09
Cancer – Oral (tongue, lips, mouth, throat).....	10
Cancer in general.....	11
Coughing.....	12
Death.....	13
Effect on the fetus/unborn child.....	14
Emphysema	15
Gangrene	16
Gum disease/tooth loss	17
Heart attack/disease/angina	18
High blood pressure.....	19
Impotence/sexual dysfunction	20
Lung disease/lungs (unspecified).....	21
Poor physical condition/loss of energy	22
Respiratory problems/difficulty breathing/ shortness of breathe	23
Second-hand smoke.....	24
Stroke.....	25
Wrinkles/premature aging	26
Yellow teeth/fingers/effect on appearance	27
None.....	28
Other (SPECIFY).....	29
DK/NA	30

102.C I am going to read you a list of human health conditions and diseases that may or may not be linked to smoking. As far as you know, does smoking cigarettes play a major role, a minor role or no role at all in increasing a smoker's risk of developing each of the following human health conditions. **READ AND ROTATE**

		Plays a major role	Plays a minor role	Plays no role at all	DK/ NA
() Lung cancer.....	(a)	1	2	3	4
() Emphysema.....	(b)	1	2	3	4
() Clogged blood vessels.....	(c)	1	2	3	4

() Heart disease.....	(d) 1	2	3	4
() Stroke	(e) 1	2	3	4
() Arthritis.....	(f) 1	2	3	4
() Impotence.....	(g) 1	2	3	4
() Gangrene.....	(h) 1	2	3	4
() Stomach ulcers.....	(i) 1	2	3	4
() Miscarriages	(j) 1	2	3	4
() Asthma.....	(k) 1	2	3	4
() Mouth cancer.....	(l) 1	2	3	4
() Bladder cancer.....	(m) 1	2	3	4
() Throat cancer.....	(n) 1	2	3	4
() Hepatitis.....	(o) 1	2	3	4
() Wrinkles and premature aging.....	(p) 1	2	3	4
() Infertility	(q) 1	2	3	4
() Acne.....	(r) 1	2	3	4
() Tooth loss and gum disease.....	(s) 1	2	3	4
() Harm to babies during pregnancy.....	(t) 1	2	3	4

103.C Now, I am going to read you a list of illnesses affecting **non-smokers** that may or may not be linked to breathing in second-hand smoke from cigarettes other people are smoking. As far as you know, does second-hand smoke play a major role, a minor role or no role at all in increasing the risk of each of the following human health conditions among non-smokers? **READ AND ROTATE**

		Plays a major role	Plays a minor role	Plays no role at all	DK/ NA
()	Asthma in children	(b) 1	2	3	4
()	Ear infections in children	(c) 1	2	3	4
()	Heart disease in non-smoking adults	(d) 1	2	3	4
()	Arthritis in non-smoking adults	(e) 1	2	3	4
()	Lung cancer in non-smokers	(f) 1	2	3	4
()	SIDS (sudden infant death syndrome).....	(g) 1	2	3	4
()	Strokes in non-smoking adults	(h) 1	2	3	4

104.C Do you think that cigarette smoking kills more, fewer or about the same number of Canadians each year as each of the following other causes of death? **READ AND ROTATE**

		Smoking kills More	Smoking kills fewer	Smoking kills as many	DK/ NA
() Alcohol.....	a.	1	2	3	4
() Illegal drugs	b.	1	2	3	4
() Car accidents.....	c.	1	2	3	4
() AIDS	d.	1	2	3	4
() Suicides.....	e.	1	2	3	4
() Murders.....	f.	1	2	3	4

105.C Which of the following do you think is the closest approximation of the number of Canadians that die each year as a result of smoking cigarettes? Is it closest to...? **SHOW CARD "E"...READ LIST**

1,000	01
5,000	02
15,000	03
25,000	04
45,000	05
75,000	06
100,000	07
OTHER (SPECIFY)	08
NONE	09
DK/NA	10

106.C In fact, about 45,000 Canadians die every year from smoking cigarettes. Would you say that most of these smoking-related deaths are from...? **READ AND ROTATE**

() Cancers	1
() Heart disease	2
() Respiratory diseases.....	3
CANCER AND HEART DISEASE EQUALLY	4
CANCER AND RESPIRATORY DISEASE EQUALLY ..	5
HEART AND RESPIRATORY DISEASE EQUALLY	6
ALL THREE EQUALLY.....	7
NONE	8
DK/NA	9

107.C What percentage of people who regularly smoke about a pack of 25 cigarettes a day throughout their lifetimes do you think will die early as a consequence of their smoking, if any? **PROBE FOR A PRECISE PERCENTAGE OUT OF 100 (IE: 25%, 50%, ETC.)**

..... percent	1
DK/NA	2

108.C What is the likelihood that someone who regularly smokes about a pack of 25 cigarettes a day throughout their lifetime will develop lung cancer compared with the likelihood for someone who has never smoked at all? **SHOW CARD "F"** Is a smoker just as likely to get lung cancer as a non-smoker, twice as likely, three times as likely, five times as likely, ten times as likely, 20 times as likely, 50 times as likely or 100 times as likely? **INTERVIEWER NOTE: WE REALIZE THAT THE RESPONDENT WILL PROBABLY NOT KNOW THE PRECISE ANSWER BUT PROBE FOR WHICH ANSWER CATEGORY IS CLOSEST TO THEIR BEST ESTIMATE**

Smoker is just as likely to get lung cancer	01
Smoker is twice as likely to get lung cancer.....	02
Smoker is 3 times as likely to get lung cancer	03
Smoker is 5 times as likely to get lung cancer	04
Smoker is 10 times as likely to get lung cancer	05
Smoker is 20 times as likely to get lung cancer	06
Smoker is 50 times as likely to get lung cancer	07
Smoker is 100 times as likely to get lung cancer	08
OTHER (SPECIFY)	09
DK/NA	10

109.C What proportion of people diagnosed with lung cancer, do you think die within one year of their diagnosis? **PROBE FOR A PRECISE PERCENTAGE OUT OF 100 (IE: 25%, 50%, ETC.)**

..... percent	1
DK/NA	2

110.C As you may know, about 30 percent of all Canadians smoke. What percentage of people under the age of 50 who have heart attacks do you think are smokers? Would it be...? **READ LIST**

Less than 20 percent	1
20 to 30 percent	2
30 to 50 percent	3
50 to 70 percent	4
70 to 90 percent	5
Over 90 percent	6
DK/NA	7

111.C How would you rate the addictiveness of smoking cigarettes. Is smoking not addictive at all, about as addictive as eating a favourite food like chocolate, or about as addictive as a hard drug like cocaine or heroin?

Not addictive at all.....	1
Addictive as a favourite food, like chocolate	2
Addictive as a hard drug, like heroin	3
Other (SPECIFY)	4
DK/NA	5

112.C As far as you know, what happens to a person who has emphysema? **DO NOT READ...PROBE FOR UP TO TWO RESPONSES**

Lungs fill with fluid.....	1
Coughing.....	2
Death.....	3
Pain	4
Cannot breathe	5
Air sacks in lungs enlarge and deform	6
Need oxygen tank.....	7
Other (SPECIFY)	8
DK/NA	9

113.C If a regular smoker quits smoking, how long would it take after quitting for their risk of developing each of the following diseases be the same as for someone who has never smoked at all? Would it take about six months, about a year, about 5 years, about ten years or will the risk never go back to that of a non-smoker? **READ AND ROTATE**

	About six Months	About 1 year	About 5 years	About 10 years	Never	DK/ NA
() Lung cancer.....a.	1	2	3	4	5	6
() Heart disease.....b.	1	2	3	4	5	6

114.C Have you ever known anyone, such as a friend, relative or work colleague, who died from a smoking related illness?

Yes, have known someone 1
 No, have not known anyone 2
 DK/NA 3

ASK REGULAR OR OCCASIONAL SMOKERS IN Q. 95C ONLY

115.C What do you think are your chances of dying someday as a result of your smoking? **PROBE FOR A PRECISE PERCENTAGE OUT OF 100 (IE: 25%, 50%, ETC.)**

_____ percent 1
 DK/NA 2

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French Questionnaire

65. C D'après vous, quel est le type de cancer qui cause le plus de décès chez les femmes du Canada? **NE PAS LIRE - CODER UNE RÉPONSE SEULEMENT**

Cancer du poumon	1
Cancer du sein	2
Cancer des ovaires	3
Autre (PRÉCISER)	4
NSP/PR	5

(separated)

98. C À l'heure actuelle, est-ce que vous fumez des cigarettes tous les jours, à l'occasion ou pas du tout?

Tous les jours	1
À l'occasion (moins souvent que tous les jours)	2
Pas du tout	3
NSP/PR	4

PASSER À Q. 102C

DEMANDER À TOUS CEUX QUI FUMENT TOUS LES JOURS OU À L'OCCASION À Q. 98C

99. C Depuis combien de temps fumez-vous la cigarette? Est-ce que ça fait... **LIRE**

Moins de 1 an	1
De 1 à 5 ans	2
Plus de 5 ans	3
NSP/PR	4

100.C S'il y a lieu, quand avez-vous essayé d'arrêter de fumer pour la dernière fois? Est-ce que c'était... **LIRE**

Au cours du dernier mois	1
Il y a de 1 à 6 mois	2
Il y a de 6 mois à 1 an	3
Il y a de 1 à 2 ans	4
Il y a de 2 à 5 ans	5
Il y a plus de 5 ans	6
Jamais	7
NSP/PR	8

101.C Quand avez-vous fumé une cigarette pour la dernière fois? Est-ce que c'était... **LIRE**

Aujourd'hui	1
Hier	2
Il y a de 3 jours à 1 semaine	3
Il y a plus d'une semaine	4
NSP/PR	5

DEMANDER À TOUS CEUX QUI NE FUMENT PAS DU TOUT À Q.98C

102.C Est-ce que vous avez déjà fumé la cigarette quotidiennement?

Oui..... 1
Non..... 2
NSP/PR..... 3

DEMANDER À TOUS

103.C Je vais vous lire une série d'énoncés. Veuillez me dire si vous êtes fortement d'accord, plutôt d'accord, plutôt en désaccord ou fortement en désaccord avec chaque énoncé. **LIRE EN ROTATION**

		Fortement d'accord	Plutôt d'accord	Plutôt en désaccord	Fortement en désaccord	NSP PR
() Fumer la cigarette n'est pas dangereux si on n'inhale pas la fumée	a.	1	2	3	4	5
() Le cigare et la pipe sont une solution de rechange sécuritaire à la cigarette	b.	1	2	3	4	5
() Le tabac à chiquer est une solution de rechange sécuritaire à la cigarette	c.	1	2	3	4	5

104.C D'après vous, quels sont les effets sur la santé ou quelles sont les maladies, s'il y a lieu, qui sont causés par la cigarette? **NE PAS LIRE - SONDER POUR OBTENIR LE PLUS DE MENTIONS POSSIBLE**

Accoutumance	01
Pollution de l'air/dommages environnementaux	02
Allergies	03
Asthme	04
Mauvaise haleine	05
Problèmes de circulation sanguine	06
Bronchite	07
Cancer - sein	08
Cancer - poumon	09
Cancer - buccal (langue, lèvres, bouche, gorge)	10
Cancer en général	11
Toux	12
Mort	13
Effet sur le fœtus/sur l'enfant à naître	14
Emphysème	15
Gangrène	16
Maladie des gencives/perte des dents	17
Crise cardiaque/maladie cardiaques/angine	18
Hypertension (haute pression)	19
Impuissance/dysfonction sexuelle	20
Maladie des poumons/poumons (non spécifié)	21
Mauvaise condition physique/perte d'énergie	22
Problèmes respiratoires/difficulté à respirer/souffle court	23
Fumée des autres	24
ACV (accidents cérébrovasculaires)	25
Rides/vieillesse prématurée	26
Dents jaunes/doigts jaunes/apparence	27
Aucun	28
Autre (PRÉCISER)	29
NSP/PR	30

105.C Je vais vous lire une liste de maladies humaines qui peuvent ou non être reliées à la cigarette. Pour autant que vous le sachiez, est-ce que la cigarette joue un rôle important, un rôle mineur ou aucun rôle dans l'augmentation du risque qu'un fumeur ait chacune des maladies suivantes? **LIRE EN ROTATION**

	Rôle important	Rôle mineur	Aucun rôle	NSP/ PR
() Cancer du poumon (a)	1	2	3	4
() Emphysème (b)	1	2	3	4
() Blocage des vaisseaux sanguins (c)	1	2	3	4
() Maladie cardiaque (d)	1	2	3	4
() Accident cérébrovasculaire (e)	1	2	3	4
() Arthrite (f)	1	2	3	4
() Impuissance (g)	1	2	3	4
() Gangrène (h)	1	2	3	4
() Ulcères d'estomac (i)	1	2	3	4
() Fausses-couches (j)	1	2	3	4
() Asthme (k)	1	2	3	4
() Cancer de la bouche (l)	1	2	3	4
() Cancer de la vessie (m)	1	2	3	4
() Cancer de la gorge (n)	1	2	3	4
() Hépatite (o)	1	2	3	4
() Rides et vieillissement prématuré (p)	1	2	3	4
() Infertilité (q)	1	2	3	4
() Acné (r)	1	2	3	4
() Perte de dents et maladie des gencives (s)	1	2	3	4
() Danger pour les bébés pendant la grossesse (t)	1	2	3	4

106.C Je vais vous lire une liste de maladies humaines qui affectent les non-fumeurs et qui peuvent ou non être reliées à la cigarette. Pour autant que vous le sachiez, est-ce que la fumée des autres joue un rôle important, un rôle mineur ou aucun rôle dans l'augmentation du risque qu'un non-fumeur ait chacune des maladies suivantes? **LIRE EN ROTATION**

	Rôle important	Rôle mineur	Aucun rôle	NSP/PR
() Asthme chez les enfants.....(b)	1	2	3	4
() Infections de l'oreille chez les enfants(c)	1	2	3	4
() Maladies cardiaques chez les adultes non-fumeurs.....(d)	1	2	3	4
() Arthrite chez les adultes non-fumeurs(e)	1	2	3	4
() Cancer du poumon chez les non-fumeurs.....(f)	1	2	3	4
() Syndrome de la mort subite du nouveau-né.....(g)	1	2	3	4
() Accidents cérébrovasculaires chez les adultes non-fumeurs(h)	1	2	3	4

107.C Est-ce que vous pensez que la cigarette tue chaque année plus, moins ou environ le même nombre de Canadiens que les autres causes suivantes de décès? **LIRE EN ROTATION**

	La cigarette tue plus	La cigarette tue moins	La cigarette tue autant	NSP/PR
() L'alcoola.	1	2	3	4
() Les drogues illégales.....b.	1	2	3	4
() Les accidents d'auto.....c.	1	2	3	4
() Le sidad.	1	2	3	4
() Les suicides.....e.	1	2	3	4
() Les meurtres.....f.	1	2	3	4

108.C D'après vous, quelle est l'approximation la plus exacte du nombre de Canadiens qui meurent chaque année parce qu'ils fument la cigarette? Est-ce que ce nombre s'approcherait de... **PRÉSENTER LA CARTE «G» - LIRE LA LISTE**

1 000	01
5 000	02
15 000	03
25 000	04
45 000	05
75 000	06
100 000	07
AUTRE (PRÉCISER)	08
AUCUNE	09
NSP/PR	10

109.C En fait, environ 45 000 Canadiens meurent chaque année parce qu'ils fument la cigarette. Diriez-vous que la plupart de ces décès reliés à la cigarette sont causés par... **LIRE EN ROTATION**

- () Le cancer 1
- () Les maladies cardiaques 2
- () Les maladies respiratoires 3
- LE CANCER ET LES MALADIES
CARDIAQUES ÉGALEMENT 4
- LE CANCER ET LES MALADIES
RESPIRATOIRES ÉGALEMENT 5
- LES MALADIES CARDIAQUES ET
RESPIRATOIRES ÉGALEMENT 6
- LES TROIS ÉGALEMENT 7
- AUCUNE 8
- NSP/PR 9

110.C D'après vous, quel est le pourcentage de personnes qui fument régulièrement environ un paquet de cigarettes par jour pendant toute leur vie qui mourront plus jeune à cause de la cigarette? **SONDER POUR OBTENIR UN POURCENTAGE PRÉCIS (c'est-à-dire 25 %, 50 %, etc.)**

- _____ pour cent 1
- NSP/PR 2

111.C Quelle est la probabilité que quelqu'un qui fume régulièrement environ un paquet de 25 cigarettes par jour pendant toute sa vie ait un cancer, par rapport à la probabilité pour quelqu'un qui n'a jamais fumé? **PRÉSENTER LA CARTE «H».** Est-ce qu'un fumeur a autant de chances d'avoir un cancer du poudon qu'un non-fumeur, deux fois plus de chances, trois fois plus de chances, cinq fois plus de chances, dix fois plus de chances, 20 fois plus de chances, 50 fois plus de chances ou 100 fois plus de chances? **NOTE À L'INTERVIEWEUR : NOUS SAVONS QUE LE RÉPONDANT NE SAURA PROBABLEMENT PAS LA RÉPONSE PRÉCISE, MAIS SONDER POUR OBTENIR LA CARÉGORIE DE RÉPONSE LA PLUS PROCHE DE LEUR MEILLEURE ESTIMATION.**

- Un fumeur a autant de chances d'avoir un cancer du poudon 01
- Un fumeur a deux fois plus de chances d'avoir un cancer du poudon 02
- Un fumeur a 3 fois plus de chances d'avoir un cancer du poudon 03
- Un fumeur a 5 fois plus de chances d'avoir un cancer du poudon 04
- Un fumeur a 10 fois de chances d'avoir un cancer du poudon 05
- Un fumeur a 20 fois de chances d'avoir un cancer du poudon 06
- Un fumeur a 50 fois de chances d'avoir un cancer du poudon 07
- Un fumeur a 100 fois de chances d'avoir un cancer du poudon 08
- AUTRE (PRÉCISER) 09
- NSP/PR 10

112.C D'après vous, quel est le pourcentage de personnes qui reçoivent un diagnostic de cancer du poudon et qui mourront dans l'année suivant l'annonce du diagnostic? **SONDER POUR OBTENIR UN POURCENTAGE PRÉCIS (c'est-à-dire 25 %, 50 %, etc.)**

- _____ pour cent 1
- NSP/PR 2

113.C Comme vous le savez peut-être, environ 30 pour cent des Canadiens fument. À votre avis, quel est le pourcentage de gens de moins de 50 ans qui font des crises cardiaques qui sont des fumeurs? Est-ce que ce serait...? **LIRE LA LISTE**

- Moins de 20 pour cent 1
- De 20 à 30 pour cent 2
- De 30 à 50 pour cent 3
- De 50 à 70 pour cent 4
- De 70 à 90 pour cent 5
- Plus de 90 pour cent 6
- NSP/PR 7

114.C Comment évalueriez-vous l'accoutumance que la cigarette crée? Est-ce que la cigarette ne crée aucune accoutumance, à peu près autant d'accoutumance qu'un aliment favori comme le chocolat ou à peu près autant d'accoutumance qu'une drogue dure comme la cocaïne ou l'héroïne?

- Aucune accoutumance 1
 Une accoutumance comme celle d'un aliment favori, comme le chocolat 2
 Une accoutumance comme celle d'une drogue dure comme l'héroïne 3
 AUTRE (PRÉCISER) 4
 NSP/PR 5

115.C Pour autant que vous le sachiez, qu'est-ce qui arrive à une personne qui fait de l'emphysème? **NE PAS LIRE - SONDER POUR OBTENIR JUSQU'À DEUX RÉPONSES**

- Les poumons sont remplis de liquide 1
 Toux 2
 Mort 3
 Douleur 4
 On ne peut pas respirer 5
 Les alvéoles pulmonaires grossissent et se déforment 6
 Besoin d'une bombonne d'oxygène 7
 Autre (PRÉCISER) 8
 NSP/PR 9

116.C Si un fumeur régulier cesse de fumer, combien de temps lui faudra-t-il après avoir cessé pour que le risque d'avoir chacune des maladies suivantes soit le même que pour quelqu'un qui n'a jamais fumé? Est-ce que ça prendrait environ six mois, environ 5 ans, environ 10 ans ou est-ce que le risque ne serait jamais égal à celui d'un non-fumeur? **LIRE EN ROTATION**

	Environ 6 mois	Environ 1 an	Environ 5 ans	Environ 10 ans	Jamais égal	NSP/PR
() Cancer du poumon.....a.	1	2	3	4	5	6
() Maladie cardiaqueb.	1	2	3	4	5	6

117.C Est-ce que vous avez déjà connu quelqu'un, comme un ami, un parent ou un collègue de travail, qui est décédé d'une maladie reliée au tabac?

- Oui, a connu quelqu'un 1
 Non, n'a jamais connu quelqu'un 2
 NSP/PR 3

DEMANDER SEULEMENT AUX FUMEURS RÉGULIERS OU OCCASIONNELS À Q.98C

118.C D'après vous, quelles sont les chances que vous mouriez un jour parce que vous fumez? **SONDER POUR OBTENIR UN POURCENTAGE PRÉCIS (c'est-à-dire 25 %, 50 %, etc.)**

- _____ pour cent 1
 NSP/PR 2