

**Smoking Risk Assessment
and Sizing of
Health Warning Messages**

CANADIANS NORTH OF 60

410389

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TABLE OF CONTENTS

EXECUTIVE SUMMARY	5
INTRODUCTION	7
GENERAL SMOKING BEHAVIOUR	8
Incidence of Smokers	8
Incidence of Former Smokers	9
Length of Time as a Smoker	9
Brand Usually Smoked	10
Time of Last Attempt to Quit Smoking	11
RISK ASSESSMENT: GENERAL HEALTH RISKS	12
Tobacco Use as a Health Problem	12
Health Effects or Illnesses Caused by Smoking Cigarettes	12
Perceived Risk of Personal Health Conditions Due to Smoking	14
Perceived Risk of Health Conditions Due to Second-hand Smoke	16
Belief in Tobacco Safety Myths	17
RISK ASSESSMENT: FATAL HEALTH RISKS	19
Annual Number of Deaths Attributable to Cigarette Smoking	19
Estimated Number of Smoking Deaths Annually	22
Types of Smoking-Related Deaths	22
Type of Cancer Most Responsible for Deaths Among Women	23
CURRENT HEALTH WARNING MESSAGES	24
Recall of Specific Health Warning Messages	24
Support for Placing of Health Warning Messages on Cigarette Packages	25
Current Health Warning Messages – Go Too Far or Not Far Enough	26
Opinions of Current Health Warning Messages	27
Impact of Current Health Warning Messages on Smokers	31
IMPROVING HEALTH WARNING MESSAGES	34
Improving Current Health Warning Messages	34
Effectiveness of Suggested Changes to Health Warning Messages	35
Most Effective Size to Inform about Health Effects of Tobacco	38
Most Effective Size to Encourage Reduction of Tobacco Use	38
Visual Differences Between Brands	39
Effect of Brand Space Size on Brand Recognition	40
APPENDIX	
Questionnaire	

EXECUTIVE SUMMARY

GENERAL SMOKING BEHAVIOUR

Almost one-half of Canadians living North of 60 smoke cigarettes at least occasionally; one-third of these are regular smokers. Eight in ten of those who do smoke say that they last smoked a cigarette "today."

Almost one-half of non-smokers living in the North are former smokers.

More than eight in ten Northern smokers have smoked for more than five years.

Two-thirds of smokers living North of 60 name a Player's or a DuMaurier brand as their usual brand. More than one-half of Northern smokers name a light brand as their usual brand.

More than eight in ten smokers living in the North have at some point tried to quit smoking – four in ten within the past year.

RISK ASSESSMENT: GENERAL HEALTH RISKS

The vast majority of Canadians living in the North think that tobacco use is a major health problem in Canada. Among smokers, more than eight in ten share this belief; this proportion rises to more than nine in ten among non-smokers.

The health effect caused by smoking most frequently identified by Canadians living in the North is lung cancer, followed by emphysema, heart attacks or heart disease and angina, and cancer in general. Other frequent mentions are oral cancer, asthma, lung disease in general and respiratory problems. Non-smokers are more likely than smokers to mention most of these health effects or illnesses.

Large majorities of Canadians living in the North believe that smoking plays a major role in increasing a smoker's risk of developing lung cancer, throat cancer, harm to babies during pregnancy, heart disease, mouth cancer, asthma, stroke and emphysema. About half say that smoking plays a major role in wrinkles and premature aging, clogged blood vessels and tooth loss and gum disease. Smaller proportions say the same of miscar-

riages, stomach ulcers, bladder cancer, infertility, impotence, gangrene, hepatitis, acne and arthritis. Non-smokers are more likely than smokers to say that smoking plays a major role in almost all of these conditions.

Large majorities of Canadians living in the North believe that second-hand smoke plays a major role in increasing the risk of asthma in children and in increasing a non-smoker's risk of developing lung cancer. Four in ten say it plays a major role in increasing a non-smoker's risk of developing heart disease. Smaller proportions say the same of ear infections in children, strokes in non-smoking adults, sudden infant death syndrome (SIDS) and arthritis in non-smokers. Non-smokers are more likely than smokers to say that second-hand smoke plays a major role in increasing most of these risks.

Northern 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.

RISK ASSESSMENT: FATAL HEALTH RISKS

Majorities of Canadians living in the North think that smoking kills more Canadians annually than those who die from suicide, murder, illegal drugs and AIDS, while large pluralities think it kills more Canadians annually than those who die from alcohol or those who die in car accidents. In general, smokers are less likely than non-smokers to think that smoking kills more Canadians annually than these other causes of death.

Four in ten Northern Canadians think 25,000 Canadians or less die each year as a result of smoking. Smokers are more likely than non-smokers to think this.

More than four in ten Northern Canadians say most smoking-related deaths are from respiratory diseases; one-quarter each say most smoking-related deaths are from heart disease or cancer. Both smokers and non-smokers give similar responses.

Northern 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; fewer than two in ten say that lung cancer is the type of cancer responsible for the most deaths of women.

CURRENT HEALTH WARNING MESSAGES

Canadians living in the North, both smokers and non-smokers, are most likely to remember the health warning messages: "Smoking during pregnancy can harm your baby," "Smoking can kill you" and "Cigarettes cause cancer."

There is almost unanimous support among Northern Canadians for the principle of placing health warning messages on tobacco products. Non-smokers offer somewhat higher levels of support, and are more likely to offer strong support for this principle.

One-half of Canadians living in the North feel that current health warning messages on tobacco products are about right. Four in ten believe that these messages do not go far enough and just six percent think they go too far. Smokers are more likely than non-smokers to say that these messages are about right; non-smokers are more likely to say they do not go far enough.

Large majorities of Canadians living in the North, both smokers and non-smokers, agree that current health warning messages on cigarette packages provide important information for smokers to be reminded of and are worth re-reading. However, a majority of both smokers and non-smokers also agree that the messages are worn-out and have lost their effectiveness. Large majorities of both smokers and non-smokers reject the suggestions that health warning messages are inaccurate or hard to understand. A majority of smokers also reject the idea that these messages are not relevant to them; non-smokers are more likely to agree.

Six in ten in ten daily smokers living in the North say health warning messages on cigarette packages have at least some impact on making them more conscious of the health risks of smoking than they used to be and on getting them to smoke less around others. One-half of daily smokers report at least some impact on increasing their desire to quit. Four in ten daily smokers say the messages have had at least some impact on getting them to smoke less or to try quitting.

IMPROVING HEALTH WARNING MESSAGES

Canadians living in the North, both smokers and non-smokers are most likely to suggest use of more detailed information and the use of pictures in health warning messages as ways to make them more effective.

Majorities of smokers believe that using pictures, adding marker words, using colour, increasing the size of the messages and adding more detailed information are effective ways to make warning message more noticeable. Non-smokers are more likely than smokers to see most of these methods as effective; they are, however, less likely than smokers to endorse adding more detailed information.

Northern Canadians are divided on what is the most effective size of health warning message to inform Canadians about the health effects of tobacco; about one-quarter each say 25 percent coverage, 50 percent coverage or 60 percent coverage, while two in ten say 40 percent coverage. Smokers are more likely to advocate the current size of health warning messages, 25 percent coverage; non-smokers are more likely to advocate 50 percent or 60 percent coverage.

Northern Canadians are divided on what is the most effective size of health warning message to encourage Canadians to reduce their tobacco use; about one-quarter each say 25 percent coverage, 50 percent coverage or 60 percent coverage, while two in ten say 40 percent coverage. Smokers are more likely to advocate the current size of health warning messages, 25 percent coverage; non-smokers are more likely to advocate 50 percent or 60 percent coverage.

Half of regular smokers living in the North mention colour as the main visual difference between the brand they usually smoke and other brands.

Daily smokers in the North overwhelmingly agree that they would still recognize their usual brand if the space reserved for the brand were reduced to one-half or one-third of the whole package.

INTRODUCTION

Environics Research is pleased to present the results of this survey conducted on behalf of The Office for Tobacco Control of Health Canada with adult Canadians living North of 60.

A survey of 1,505 adult Canadians living North of 60, aged 18 years and older, was carried out by telephone between September 29 and November 15, 1999 and included this series of questions on cigarette packaging

and health risk assessment as part of the North of 60 omnibus survey. The regional breakdown of the sample is as follows: 636 interviews with residents of the Northwest Territories, 485 interviews with residents of the Yukon Territory, and 325 interviews with residents of Nunavut. Results from a survey of this size can be considered accurate within plus or minus 2.5 percentage points, 19 times out of 20. Margins of error are greater for smaller subsamples.

GENERAL SMOKING BEHAVIOUR

Incidence of Smokers

Almost one-half of Canadians living North of 60 smoke cigarettes at least occasionally; one-third of these are regular smokers. Eight in ten of those who do smoke say that they last smoked a cigarette "today."

When Canadians living North of 60 are asked whether, at the present time, they smoke cigarettes every day, occasionally or not at all, 36 percent report that they smoke cigarettes every day, while 12 percent report that they smoke occasionally. Fifty-one percent say that they do not smoke at all.

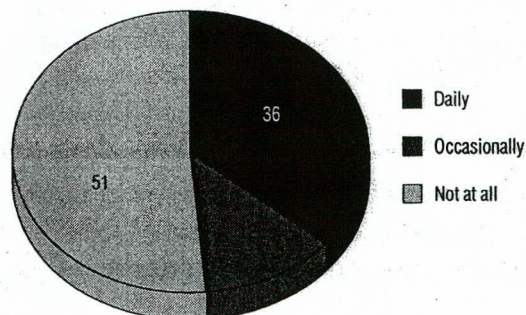
Men (39%) are more likely than women (34%) to report that they smoke cigarettes every day. The likelihood of smoking regularly decreases with age – from a high of 45 percent among those aged 18 to 29 to a low of 29 percent among those aged 60 years or older. The proportion of those who smoke regularly also decreases as income and education levels increase – 53 percent of those with less than high school education and 50 percent of those earning less than \$25,000 annually report that they smoke daily, compared to only 19 percent of university graduates and 23 percent of those who earn \$100,000 or more annually.

Aboriginals (49%) are more likely than non-aboriginals (25%) to smoke on a daily basis. Also, those who have lived in the North for more than fifteen years (39%) or for all their lives (43%) are more likely to smoke regularly. Those living in Nunavut (48%) are also more likely than those living in other territories to smoke regularly.

Among smokers, those who have smoked for more than five years are more likely to smoke every day rather than occasionally.

Eighty-three percent of smokers living in the North report that they last smoked a cigarette "today." Eight percent last smoked a cigarette "yesterday," six percent within the three days to a week previous, and two percent more than one week previous.

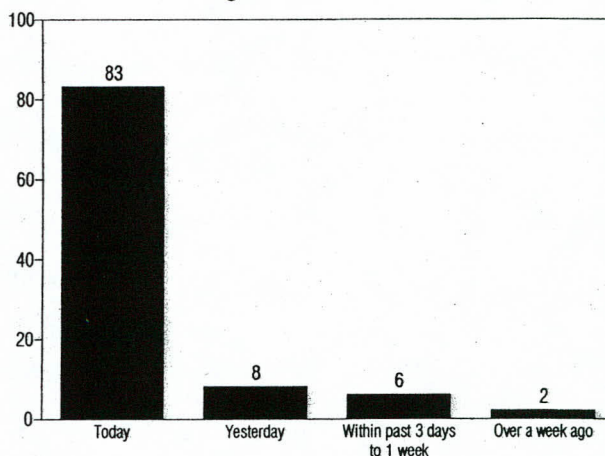
Smoke



Q.54

At the present time, do you smoke cigarettes every day, occasionally, or not at all?

Last Smoked a Cigarette



Q.58

When did you last smoke a cigarette?

Subsample: All smokers

Smokers who are 30 years and older, who have less than university education or who have smoked for more than five years are more likely to say their last cigarette was smoked on the day of the interview.

Incidence of Former Smokers

Almost one-half of non-smokers living in the North are former smokers.

When residents of the North who do not smoke at the present time are asked if they have ever smoked cigarettes daily, almost one-half (46%) respond that they have; a slightly larger proportion (54%) of non-smokers indicate that they have never smoked cigarettes.

Non-smokers who are aged 30 years or older or who have lower levels of income and education are more likely than others to report that they smoked cigarettes daily at some time in the past.

Aboriginals (60%) are more likely than non-aboriginals (40%) to report that they are former smokers. Those who have lived in the North for fifteen years or more (51%) or all their lives (56%) are also more likely to be former smokers. Residents of Nunavut (52%) are somewhat more likely than residents of other territories to be former smokers.

Length of Time as a Smoker

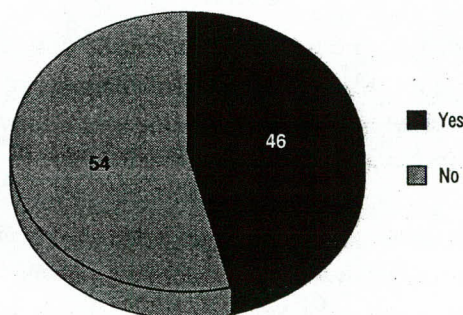
More than eight in ten smokers living in the North have smoked for more than five years.

When smokers living in the North are asked how long they have smoked cigarettes, more than eight in ten (85%) report that they have smoked for more than five years. Eleven percent indicate that they have smoked for between one and five years and four percent say they have smoked for less than one year.

Women (87%), those aged 30 years or older and those with higher levels of education are somewhat more likely to indicate that they have smoked for more than five years.

Men (12%), aboriginals (12%), those aged 18 to 29 years (19%), and those with lower levels of education are slightly more likely to report that they have smoked

Ever Smoked Daily

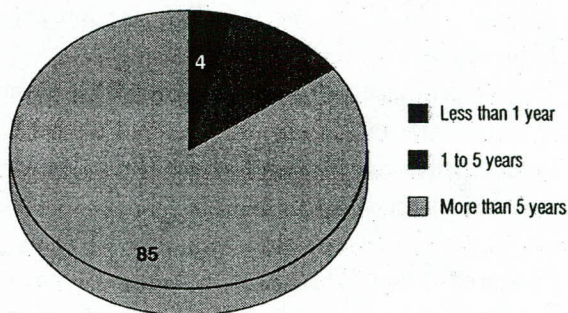


Q.59

Have you ever smoked cigarettes daily?

Subsample: Respondents who do not currently smoke

Length of Time as Smoker



Q.55

How long have you been a cigarette smoker?

Subsample: All smokers

between one and five years. Residents of Nunavut (15%) are also slightly more likely than those in other territories to report this.

The incidence of those who have smoked for less than a year is relatively constant across most demographic groups.

Occasional smokers are more likely than regular smokers to report that they have smoked for less than one year (11%) or for between one and five years (20%).

Brand Usually Smoked

Two-thirds of smokers living North of 60 name a Player's or a DuMaurier brand as their usual brand. More than one-half of Northern smokers name a light brand as their usual brand.

When smokers living North of 60 are asked what brand of cigarettes they usually smoke, more than one-third (38%) mention a Player's brand: Player's Light (28%), Player's Regular (6%) or Player's Extra Light (4%). One-quarter (28%) mention a DuMaurier brand: DuMaurier Regular (16%), DuMaurier Light (8%), DuMaurier Extra Light (2%), DuMaurier Ultra Light (1%) or other DuMaurier brands (1%). Sixteen percent of smokers mention an Export "A" brand: or Export "A" Light (6%), Export "A" Regular (5%) or Export "A" Medium (5%). Four percent mention "No.7" in general. Three percent mention Matinee Extra Mild (2%) or Matinee in general (1%). Two percent mention Cameo in general. One percent or less each mention Benson and Hedges Deluxe Ultra Light, Benson and Hedges Deluxe Ultra Light Menthol, Benson and Hedges Regular, Rothman's Regular, Rothman's Special Mild, Craven "A" Regular or Craven Menthol. Three percent mention some other brand and two percent say they have no usual brand.

More than one-half of smokers living North of 60 mention a light brand as their usual brand, while almost three in ten mention a regular brand. Men are more likely than women to mention a regular brand. Aborigines, particularly Inuktitut-speakers, are more likely than non-aborigines to mention a regular brand. Younger smokers are more likely to smoke a light brand; as age increases, more smokers report smoking a regular brand. The likelihood of smoking a light brand increases as education and income levels increase.

Brand of Cigarette Usually Smoked

Player's Light	28
DuMaurier (Regular)	16
DuMaurier Light	8
Export "A" Light	6
Player's (Regular)	6
Export "A" Medium	5
Export "A" (Regular)	5
Player's Extra Light	4
No.7	4
Cameo (general)	2
DuMaurier Extra Light	2
Matinee Extra Mild	2
DuMaurier Ultra Light	1
DuMaurier Special Mild	1
Matinee (general)	1
Rothmans (Regular)	1
Craven Menthol	1
Benson & Hedges Deluxe Ultra Light Menthol	1
Benson & Hedges Deluxe Ultra Light	*
Benson & Hedges (Regular)	*
Rothmans Special Mild	*
Craven "A" (Regular)	*
Other	3
No brand/smoke other peoples'	2
dk/na	1

* Less than one percent

Q.56

What brand of cigarettes do you usually smoke?

Subsample: All smokers

Time of Last Attempt to Quit Smoking

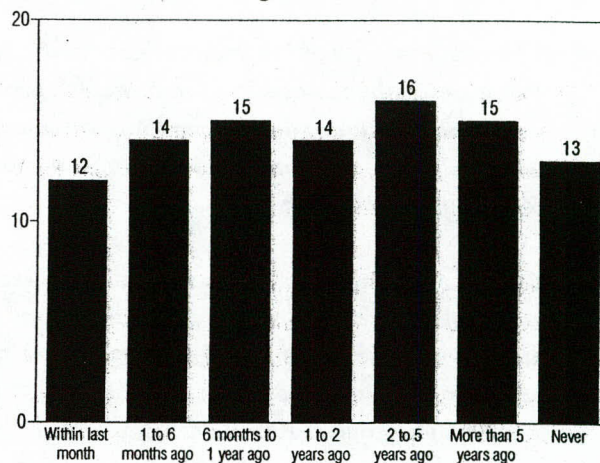
More than eight in ten smokers living in the North have at some point tried to quit smoking – four in ten within the past year.

When smokers living in the North are asked how long ago, if ever, they last tried to quit smoking, four in ten (41%) state that they have tried to quit within the last year: 12 percent of these within the last month, 14 percent in the one to six months previous, and 15 percent in the six months to a year previous. Fourteen percent report trying to quit smoking in the one to two years previous, 16 percent in the two to five years previous and 15 percent more than five years previous. Thirteen percent say they have never tried to quit smoking.

Women (47%) and those aged 18 to 29 years (53%) are more likely to report having tried to quit smoking within the past year. Those aged 60 years or older (33%) and those with less than high school education (23%) are more likely than others to report that they last tried to quit more than five years ago. Those aged 60 or older are also more likely than others to say they have never tried to quit (28%).

Those who have smoked for five years or less (58%) and those who smoke occasionally (53%) are more likely than others to say that they have tried to quit smoking within the past year; however, those who have smoked for five years or less are also more likely than other smokers to report that they have never tried to quit (20%).

Tried to Quit Smoking



Q.57

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

Subsample: All smokers

RISK ASSESSMENT: GENERAL HEALTH RISKS

Tobacco Use as a Health Problem

The vast majority of Canadians living in the North think that tobacco use is a major health problem in Canada. Among smokers, eight in ten share this belief; this proportion rises to more than nine in ten among non-smokers.

When Canadians living North of 60, both smokers and non-smokers, are asked whether, in general, they think that tobacco use is a major health problem, a minor health problem, or not a health problem at all, nine in ten (88%) respond that they think it is a major health problem. Eleven percent state that tobacco use is a minor health problem, and only one percent believe that it is not a health problem at all.

Non-smokers (93%) are more likely than smokers (83%) to believe that smoking is a major health problem. Among smokers, those who have tried to quit smoking are more likely to believe this than those who have never tried to quit.

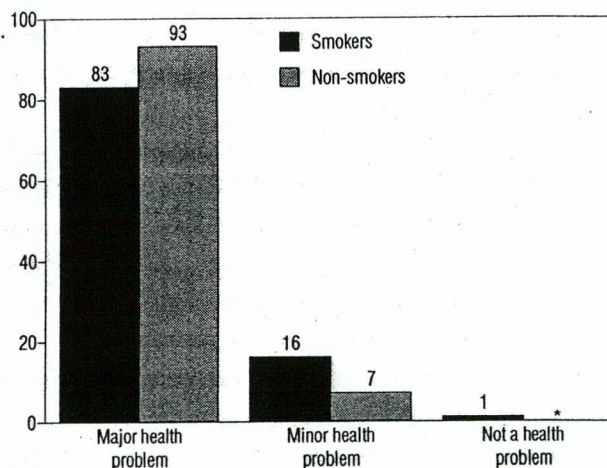
Men (86%) are somewhat less likely than women (90%) to think that tobacco use is a major health problem. Aboriginals (86%) are somewhat less likely than non-aboriginals (90%) to think that tobacco use is a major health problem. Those with annual household incomes of less than \$25,000 (81%), those aged 60 years and older (80%) and those with less than high school education (80%) are also less likely than others to think that tobacco use is a major health problem.

Health Effects or Illnesses Caused by Smoking Cigarettes

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

When Canadians living in the North are asked what specific health effects or illnesses, if any, they can think

Attitudes Toward Tobacco Use



Q.60

In general, do you think that tobacco use is a major health problem, a minor health problem or not a health problem at all in Canada?

of that are caused by smoking cigarettes, the most frequent response is lung cancer (62%), followed by emphysema (34%), heart attacks or disease and angina (28%) and cancer in general (26%). Other frequent mentions are oral cancer (22%), asthma (18%), lung disease in general (18%) and respiratory problems (13%). Smaller proportions mention poor physical condition or loss of energy (8%), bronchitis (7%), stroke (6%), effect on unborn children (5%), high blood pressure (4%), second-hand smoke (3%), bad breath/smell (2%), tooth loss and gum disease (2%), addiction (2%), coughing (2%), blood circulation problems (2%), allergies (2%), and breast cancer (2%). One percent or less mention death, air pollution, wrinkles and premature aging, yellow teeth and fingers, impotence and gangrene. Only one percent of Canadians living north of 60 say no health effects or illnesses are caused by smoking cigarettes.

Non-smokers are more likely than smokers to mention many of these health effects or illnesses, particularly lung cancer, emphysema, heart attack, cancer in general, oral cancer and asthma. Among smokers, those who smoke daily are more likely than occasional smokers to mention lung disease.

Women are more likely than men to mention emphysema (37%), cancer in general (29%), asthma (24%), loss of energy (10%) and effect on unborn children (7%).

Aboriginals, particularly Inuktitut-speakers, are notably less likely than non-aboriginals to mention many of these health effects; they are, however, equally likely to mention lung disease and more likely to mention loss of energy.

Those aged 18 to 29 are more likely to name lung disease (22%) and loss of energy (10%). Those aged 45 to 59 are more likely to name lung cancer (66%), emphysema (45%), heart attack (38%), cancer in general (28%) and respiratory problems (20%). Those aged 60 and over are less likely to mention most of these health effects.

Those with higher levels of income and education are more likely than average to name most of the frequently mentioned illnesses.

Residents of Nunavut are less likely to mention many of these health effects; they are, however, equally likely to mention lung disease and more likely to mention loss of energy. Residents of the Yukon are somewhat more likely to mention lung cancer and emphysema. Residents of the Northwest Territories are more likely to mention respiratory problems and bronchitis.

Those who believe that tobacco use is a major health problem are more likely than those who do not to name most of the frequently mentioned illnesses.

Health Effects/Illnesses Caused by Smoking

	SMOKERS	NON-SMOKERS
Cancer – lung	56	68
Emphysema	28	39
Heart attack/disease/angina	25	31
Cancer in general	24	28
Lung disease/lungs	19	18
Cancer – oral	17	27
Asthma	16	21
Respiratory problems	12	14
Poor physical condition/loss of energy	9	8
Bronchitis	8	7
Stroke	6	6
Effect on fetus/unborn child	4	7
High blood pressure	4	4
Second-hand smoke	3	3
Coughing	2	2
Death	2	1
Blood circulation problems	2	3
Gum disease/tooth loss	2	1
Bad breath/bad smell	1	2
Addiction	1	2
Yellow teeth/fingers/effect appearance	1	2
Allergies	1	3
Cancer – breast	1	2
Wrinkles/premature aging	1	2
Impotence/sexual dysfunction	1	*
Air pollution/environmental damage	*	1
Gangrene	*	*
None	2	1
Other	2	3
dk/na	6	2

* Less than one percent

Q.48

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

Perceived Risk of Personal Health Conditions Due to Smoking

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

Canadians living in the North 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 is judged to play a major role in lung cancer by 97 percent of Northern Canadians. Majorities also judge smoking to play a major role in throat cancer (87%), harm to babies during pregnancy (85%), heart disease (83%), mouth cancer (80%), asthma (78%), stroke (71%), emphysema (70%) and wrinkles and premature aging (52%),

Smaller proportions say smoking plays a major role in clogged blood vessels (49%), tooth loss and gum disease (48%), miscarriages (31%), stomach ulcers (26%), bladder cancer (19%), infertility (19%), impotence (18%), gangrene (10%), hepatitis (9%), acne (9%) and arthritis (9%).

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	95	98	4	1	1	0	*	1
Throat cancer	83	91	12	6	4	1	2	2
Harm to babies during pregnancy	83	87	13	11	2	1	1	1
Emphysema	65	76	17	13	5	3	13	8
Heart disease	82	83	13	14	3	2	2	2
Asthma	76	80	17	16	3	2	3	2
Mouth cancer	74	85	17	11	5	1	4	3
Stroke	71	70	22	23	5	3	2	4
Wrinkles and premature aging	47	56	32	30	15	9	6	5
Clogged blood vessels	46	52	37	33	12	6	6	8
Tooth loss and gum disease	46	49	39	38	12	8	2	5
Miscarriages	30	33	46	48	16	10	9	10
Stomach ulcers	24	28	45	45	24	19	7	8
Bladder cancer	19	20	40	46	28	22	13	12
Infertility	19	19	45	50	23	20	13	12
Impotence	17	19	43	45	24	21	17	15
Acne	11	7	36	38	42	41	11	13
Arthritis	10	8	38	40	44	40	9	11
Hepatitis	9	9	34	34	43	45	15	12
Gangrene	9	12	29	34	41	36	21	18

Q.49

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?

Smokers are less likely than non-smokers to say that smoking plays a major role in almost all of these conditions, particularly emphysema, clogged blood vessels, mouth cancer, throat cancer and wrinkles and premature aging. Among smokers, those who have smoked for less than five years are less likely than other smokers to say that smoking plays a major role in the risk of emphysema, clogged blood vessels, impotence, bladder cancer and wrinkles and premature aging. Those who have never tried to quit are less likely than other smokers to say that smoking plays a major role in the risk of clogged blood vessels, stroke, impotence and stomach ulcers. Occasional smokers are at least slightly more likely than daily smokers to say that smoking plays a major role in almost all of these conditions.

Women are more likely than men to say that smoking plays a major role in increasing the risk of harm to babies during pregnancy (87%), asthma (83%), mouth cancer (83%), emphysema (75%), wrinkles and premature aging (62%), clogged blood vessels (52%) and stomach ulcers (30%).

Aboriginals are more likely than non-aboriginals to say that smoking plays a major role in increasing the risk of tooth loss and gum disease (51%), miscarriage (34%), stomach ulcers (28%), infertility (24%), impotence (22%), hepatitis (13%), arthritis (13%) and acne (13%); Inuktitut-speakers are even more likely to say this of arthritis (18%) and hepatitis (16%). However, aboriginals are less likely to say that smoking plays a major role in throat cancer (81%), asthma (75%), mouth cancer (73%), emphysema (55%), clogged blood vessels (46%) and wrinkles and premature aging (48%); Inuktitut-speakers are even less likely to say this of most of these conditions.

Those aged 18 to 29 years are less likely than others to say that smoking plays a major role in emphysema (59%) and clogged blood vessels (45%); however, they are more likely to say smoking plays a major role in miscarriage (39%). Those aged 60 years and older are less likely to say that smoking plays a major role in a number of these health conditions, including throat cancer (77%), heart disease (74%), asthma (65%), mouth cancer (64%) and stroke (63%).

Those with lower levels of education and income are more likely to say that smoking plays a major role in bladder cancer, infertility, arthritis, hepatitis and acne; they are less likely to say this of asthma, mouth cancer, throat cancer, emphysema and wrinkles and premature aging.

Those who believe that tobacco use is a major health problem are more likely than those who do not to indicate that smoking plays a major role in increasing a smoker's risk of developing most of these health conditions – arthritis, gangrene, hepatitis and acne being the conditions where they are no more likely to accord smoking a major role. They are, however, more likely to think that smoking plays at least a minor role in developing arthritis and gangrene.

Perceived Risk of Health Conditions Due to Second-hand Smoke

Large majorities of Canadians living in the North believe that second-hand smoke plays a major role in increasing the risk of asthma in children and in increasing a non-smoker's risk of developing lung cancer. Four in ten say it plays a major role in increasing a non-smoker's risk of developing heart disease.

Canadians living in the North 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 the human health conditions.

Second-hand smoke is judged to play a major role in asthma in children by 75 percent of Canadians living in the North. Two-thirds (67%) judge second-hand smoke to play a major role in lung cancer in non-smokers. Smaller proportions believe that second-hand

smoke plays a major role in heart disease in non-smoking adults (43%), ear infections in children (33%), strokes in non-smoking adults (33%), sudden infant death syndrome (SIDS) (27%), and arthritis in non-smoking adults (7%).

Smokers are less likely to say second-hand smoke plays a major role in increasing the risk of most of these conditions, particularly lung cancer (60%) and strokes (30%) among non-smoking adults, asthma in children (72%) and SIDS (25%). They are more likely to say that second-hand smoke plays a major role in ear infections in children (35%). Those who have never tried to quit smoking are less likely than other smokers to say second-hand smoke plays a major role in each of these conditions. Occasional smokers are more likely than daily smokers to say that second-hand smoke plays a major role in these conditions.

Women are more likely than men to say that second-hand smoke plays a major role in asthma (81%) and ear infections (41%) in children, SIDS (34%), and lung cancer (72%) and strokes (36%) in non-smoking adults.

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	72	78	21	17	4	3	2	2
Lung cancer in non-smokers	60	73	33	23	6	2	1	2
Heart disease in non-smoking adults	42	43	42	44	13	10	3	3
Ear infections in children	35	31	31	36	27	23	6	9
Sudden Infant Death Syndrome (SIDS)	25	29	35	34	29	23	11	14
Strokes in non-smoking adults	30	36	48	45	18	14	4	4
Arthritis in non-smoking adults	9	6	34	34	49	49	8	11

Q.50

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?

Aboriginals are somewhat less likely than non-aboriginals to say that second-hand smoke plays a major role in asthma in children (73%). However, they are more likely to say that second-hand smoke plays a major role in ear infections in children (41%), SIDS (31%), and in heart disease (47%), strokes (36%) and arthritis (12%) in non-smoking adults. Inuktitut-speakers are particularly likely to say this of ear infections in children (50%) and arthritis in non-smoking adults (18%); they are also more likely to say second-hand smoke plays a major role in lung cancer in non-smoking adults (71%).

Older residents of the North, particularly those aged 60 years and older, are less likely than others to say that second-hand smoke plays a major role in most of these conditions – strokes in non-smoking adults being the only condition where they are no more likely to accord second-hand smoke a major role.

Those with lower levels of education and income are more likely to say that second hand smoke plays a major role in ear infections in children, SIDS, and in heart disease, strokes and arthritis in non-smoking adults. They are less likely to say it plays a major role in asthma in children.

Those who believe that tobacco use is a major health problem are more likely than those who do not to indicate that second-hand smoke plays a major role in increasing a non-smoker's risk of developing most of these health conditions – arthritis being the only condition where they are no more likely to accord second-hand smoke a major role.

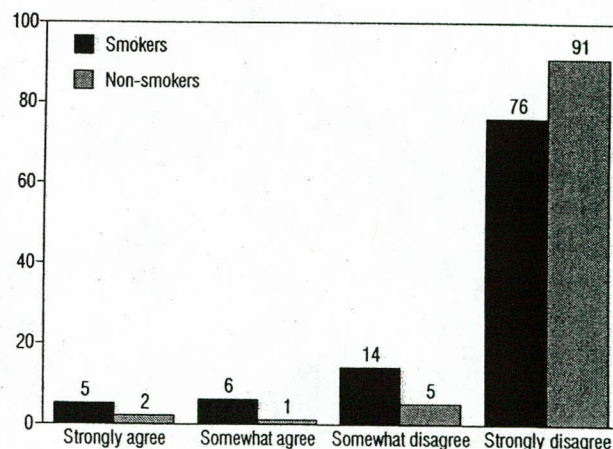
Belief in Tobacco Safety Myths

Northern 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 living north of 60 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-two percent disagree with the statement.

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



Q.47a

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 ...
Smoking cigarettes will do you no harm if you don't inhale.

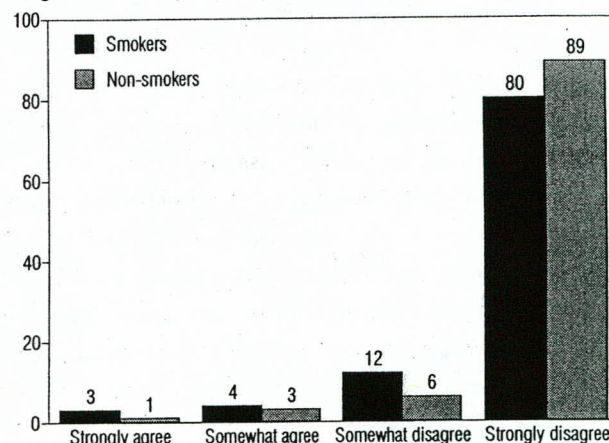
Six percent of Northern Canadians agree that cigars and pipes are a safe alternative to smoking cigarettes. Ninety-four percent disagree.

Six percent of Northern Canadians agree that chewing tobacco is a safe alternative to smoking cigarettes. Ninety-two percent disagree.

Non-smokers are somewhat more likely than smokers to disagree strongly with all three statements. Smokers, particularly those who have never tried to quit, are slightly more likely to agree with the statement that smoking cigarettes will do no harm if you don't inhale.

Aboriginals, particularly Inuktitut-speakers, are less likely to disagree strongly with all of these myths, and slightly more likely to agree or to only disagree somewhat. The same pattern is found among those in the lowest income and education groups and among residents of Nunavut.

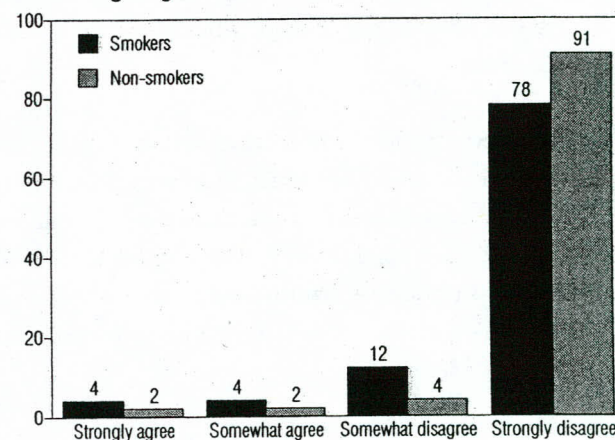
Cigars and Pipes a Safe Alternative to Cigarettes



Q.47b

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 ...
Cigars and pipes are a safe alternative to smoking cigarettes.

Chewing Tobacco a Safe Alternative to Smoking Cigarettes



Q.47c

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 ...
Chewing tobacco is a safe alternative to smoking cigarettes.

RISK ASSESSMENT: FATAL HEALTH RISKS

Annual Number of Deaths Attributable to Cigarette Smoking

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

Canadians living in the North 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.

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

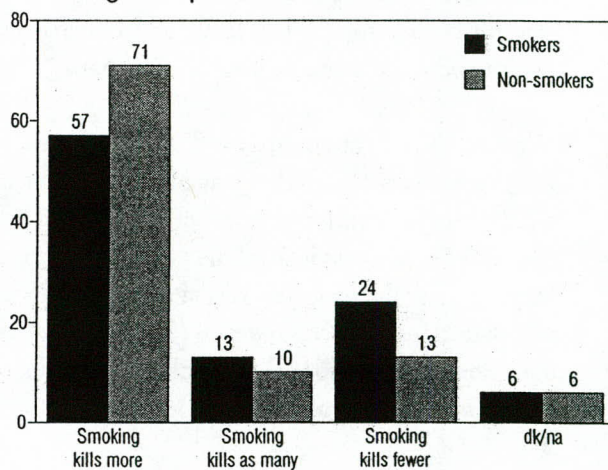
Sixty-four percent of Canadians living in the North think smoking kills more Canadians annually than do murders. Eighteen percent think it kills fewer, and eleven percent think it kills about the same number of Canadians.

Aboriginals (55%), those aged 18 to 29 years (55%) and those aged 60 years or older (42%), and those with lower levels of income and education are less likely to think that smoking kills more Canadians annually than die as a result of murder. Smokers (57%) are less likely than non-smokers (71%) to think that smoking kills more Canadians annually than die as a result of murder.

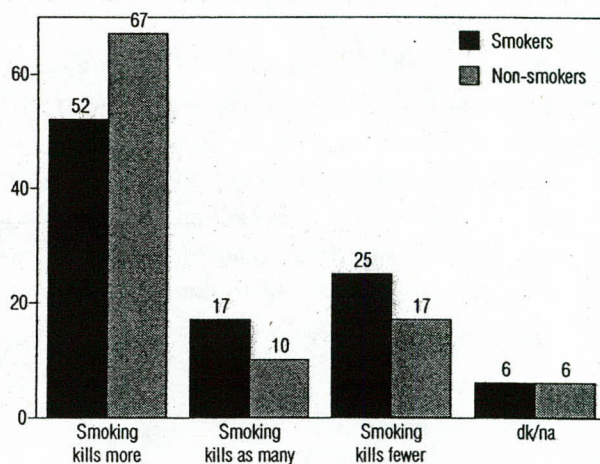
Sixty percent of Canadians living in the North think smoking kills more Canadians annually than does suicide. Twenty-one percent think it kills fewer, and fourteen percent think it kills about the same number of Canadians.

Aboriginals (51%), particularly Inuktitut-speakers (46%), those aged 18 to 29 years (53%) and those aged 60 years or older (41%), those with lower levels of income and education, life-long residents of the North (48%) and residents of Nunavut (51%) are less

Relative Number of Canadian Deaths from Smoking Compared to Murders



Relative Number of Canadian Deaths from Smoking Compared to Suicides



Q.51

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?

likely to think that smoking kills more Canadians annually than die through suicide. Smokers (52%) are less likely than non-smokers (67%) to think that smoking kills more Canadians annually than die through suicide.

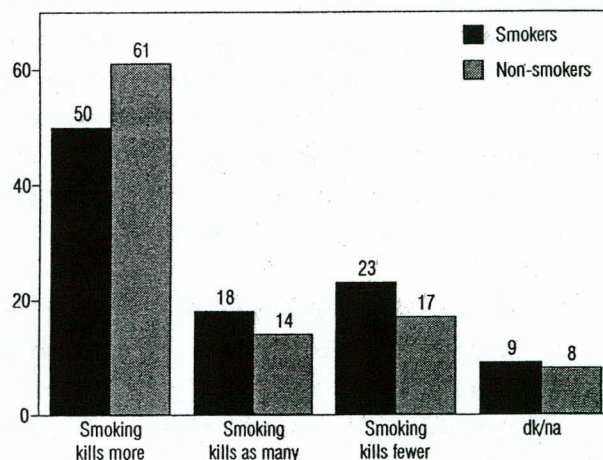
Fifty-six percent of Canadians living in the North think smoking kills more Canadians annually than does AIDS. Twenty percent think it kills fewer, and 16 percent think it kills about the same number of Canadians.

Women (52%), aboriginals (48%), those aged 18 to 29 years (47%) and those aged 60 years or older (40%), those with lower levels of income and education and lifelong residents of the North (41%) are less likely to think that smoking kills more Canadians annually than does AIDS. Smokers (50%) are less likely than non-smokers (61%) to think that smoking kills more Canadians annually than does AIDS.

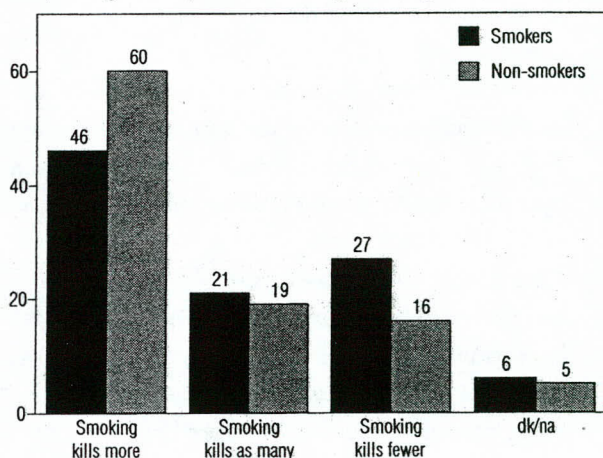
Fifty-three percent of Northern Canadians think smoking kills more Canadians annually than do illegal drugs. Twenty-two percent think it kills fewer, and 20 percent think it kills about the same number of Canadians.

Women (49%), aboriginals (46%), those aged 18 to 29 years (46%) and those aged 60 years or older (43%), those with lower levels of income and education and life-long residents of the North (40%) are less likely to think that smoking kills more Canadians annually than do illegal drugs. Smokers (46%) are less likely than non-smokers (60%) to think that smoking kills more Canadians annually than do illegal drugs.

Relative Number of Canadian Deaths from Smoking Compared to AIDS



Relative Number of Canadian Deaths from Smoking Compared to Illegal Drugs



Q.51

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?

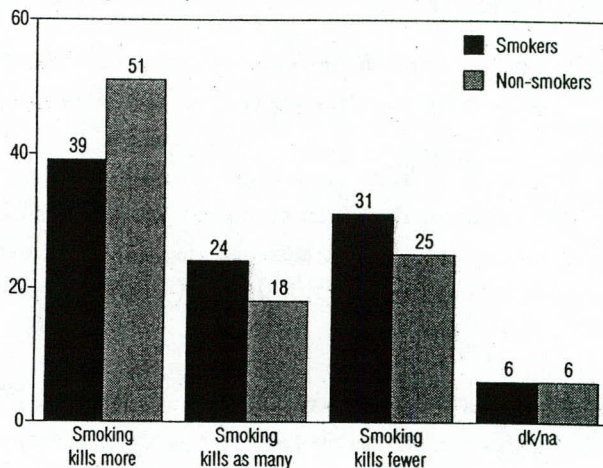
Forty-five percent of Northern Canadians think smoking kills more Canadians annually than do car accidents. Twenty-eight percent think it kills fewer, and 21 percent think it kills about the same number of Canadians.

Aboriginals (40%), particularly Inuktitut-speakers (37%), those aged 18 to 29 years (36%) and those aged 60 years or older (38%), and those with lower levels of income and education are less likely to think that smoking kills more Canadians annually than do car accidents. Smokers (39%) are less likely than non-smokers (51%) to think that smoking kills more Canadians annually than do car accidents.

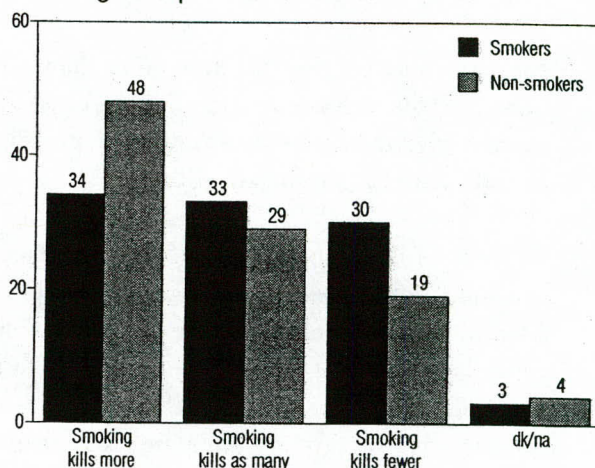
Forty-one percent of Northern Canadians think smoking kills more Canadians annually than does alcohol. Twenty-four percent think it kills fewer, and 31 percent think it kills about the same number of Canadians.

Women (39%), aboriginals (37%), those aged 18 to 29 years (35%) and those aged 60 years or older (35%), those with lower levels of income and education and life-long residents of the North (35%) are less likely to think that smoking kills more Canadians annually than does alcohol. Smokers (34%) are less likely than non-smokers (48%) to think that smoking kills more Canadians annually than does alcohol.

Relative Number of Canadian Deaths from Smoking Compared to Car Accidents



Relative Number of Canadian Deaths from Smoking Compared to Alcohol



Q.51

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?

Estimated Number of Smoking Deaths Annually

Four in ten Northern Canadians think 25,000 Canadians or less die each year as a result of smoking.

Canadians living north of 60 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.

Four in ten Northern Canadians (43%) think 25,000 Canadians or less die each year as a result of smoking. Seventeen percent give the figure of 25,000; 13 percent say 15,000; eight percent say 5,000; and five percent say approximately 1,000 Canadians die each year as a result of smoking.

A similar number (46%) think more than 25,000 Canadians die each year as a result of smoking. Twenty percent give the figure of 45,000; 11 percent say 75,000; and 15 percent say 100,000.

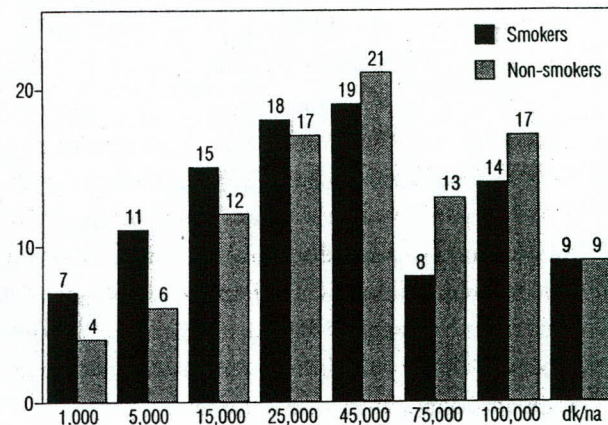
Women (46%), aboriginals (51%), particularly Inuktitut-speakers (54%), those aged 18 to 29 (53%), those with lower levels of income and education and residents of Nunavut (52%) are more likely to think 25,000 Canadians or less die each year as a result of smoking. Smokers (51%) are more likely than non-smokers (39%) to think 25,000 Canadians or less die each year as a result of smoking.

Types of Smoking-Related Deaths

More than four in ten Northern Canadians say most smoking-related deaths are from respiratory diseases.

After having been given the chance to estimate the number, Canadians living in the North 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.

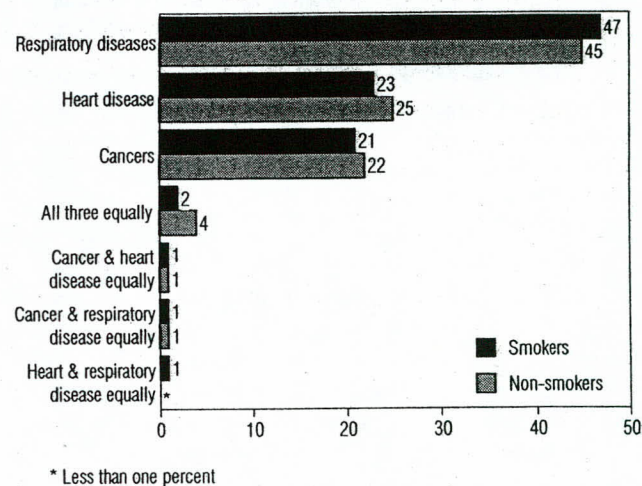
Number Who Die Yearly as Result of Smoking



Q.52

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...?

Causes of Smoking-Related Deaths



Q.53

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

Forty-six percent of Canadians living in the North say most smoking-related deaths are from respiratory diseases. Twenty-four percent say they are from heart disease, and 22 percent say they are from cancer. Six percent say that most smoking-related deaths are from an equal combination of two or more of these conditions.

Both smokers and non-smokers give similar responses to this question.

Aboriginals (56%), particularly Inuktitut speakers (61%), those aged 18 to 29 years (53%), those with lower levels of income and education, life-long residents of the North (56%) and residents of Nunavut (62%) are more likely than others to say that respiratory disease causes most smoking-related deaths. While respiratory disease is the leading response among all demographic groups, non-aboriginals (27%), those with university education (32%), and those in the higher income brackets are somewhat more likely to mention cancer, while those aged 60 years and older (32%) and residents of the Yukon (29%) are more likely to mention heart disease.

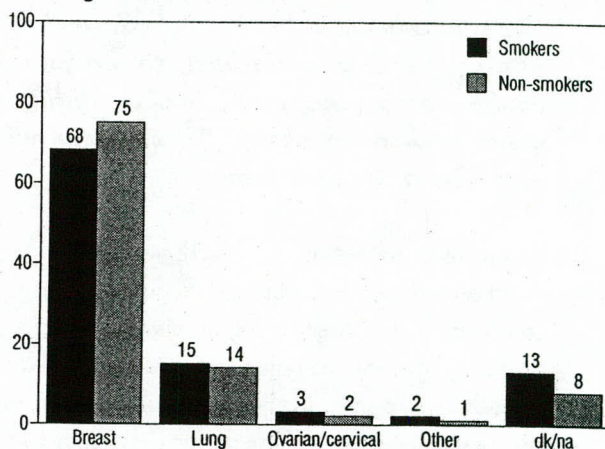
Type of Cancer Most Responsible for Deaths Among Women

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

When Canadians living north of 60 are asked what type of cancer is responsible for the most deaths among women in Canada, a solid majority name breast cancer (71%). Smaller proportions name lung cancer (14%), ovarian cancer (2%) or some other type of cancer (2%). Ten percent offer no response.

Non-smokers (75%) are more likely than smokers (68%) to mention breast cancer. Smokers (13%), especially occasional smokers (17%), are more likely than non-smokers (8%) to offer no response.

Type of Cancer Responsible for Most Deaths Among Women in Canada



Q.46

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

Women and men are equally likely to mention breast cancer (72% and 71%, respectively). Non-aboriginals (79%) are more likely than aboriginals (63%) to mention breast cancer; aboriginals, particularly Inuktitut-speakers, are more likely to mention lung cancer (17% and 28%, respectively) or to offer no opinion (16% and 21%, respectively). Differences among age groups are small, with those aged 60 or more slightly less likely to mention breast cancer (63%) and slightly more likely to mention ovarian cancer (5%) or to offer no opinion (15%).

Residents of Nunavut (24%) are more likely to mention lung cancer, while residents of the Yukon (80%) and the Northwest Territories (77%) are more likely to mention breast cancer.

Recall of Specific Health Warning Messages

Canadians living in the North, both smokers and non-smokers, are most likely to remember the health warning messages "Smoking during pregnancy can harm your baby," "Smoking can kill you" and "Cigarettes cause cancer."

Canadians living in the North were asked, in an unprompted question, what specific health messages they could remember ever seeing on cigarette packages in Canada. Multiple responses were accepted. Northern Canadians are most likely to remember seeing the following messages: "Smoking during pregnancy can harm your baby" (56%), "Smoking can kill you" (38%) and "Cigarettes cause cancer" (33%). Smaller proportions recall the following messages: "Cigarettes cause fatal lung disease" (26%), "Cigarettes cause strokes and heart disease" (19%), "Tobacco smoke causes fatal lung disease in non-smokers" (10%), "Tobacco smoke can harm your children" (7%) and "Cigarettes are addictive" (5%). Another 12 percent erroneously recall the American warning message "Surgeon-General warns that smoking is dangerous to your health." Three percent recall some other health message. Five percent say that they cannot recall any health messages.

Smokers are more likely than non-smokers to recall almost all of these messages; however, those who do not smoke are more likely to mention the Surgeon-General's warning message. Those who have been smokers for five years or less, and those who have tried to quit smoking in the past five years, tend to have greater recall of at least some of these messages.

Women (59%) are more likely than men (53%) to mention "Smoking during pregnancy can harm your baby." Aboriginals are more likely than non-aboriginals to mention most of these messages; however, non-aboriginals are more likely to mention the U.S. Surgeon-General's message. Recall of almost all these messages is higher among younger people, and tapers off as age increases; however, the message referring to the Surgeon-General's warning is mentioned more frequently by those aged 30 and older. Those aged 60 and

Specific Health Message Ever Seen on Cigarette Packages

	SMOKERS	NON-SMOKERS
Smoking during pregnancy can harm your baby	65	48
Smoking can kill you	47	29
Cigarettes cause fatal lung disease	32	20
Cigarettes cause cancer	31	34
Cigarettes cause strokes and heart disease	27	13
Tobacco smoke causes fatal lung disease in non-smokers	14	7
Tobacco smoke can harm your children	12	3
Cigarettes are addictive	8	2
Surgeon-General warns that smoking is dangerous to your health	4	19
Second-hand smoke can kill you	1	1
Smoking causes emphysema	1	1
Other	1	1
None	2	7
dk/na	0	0

Q.61

What specific health messages can you remember ever seeing on cigarette packages in Canada?

older are significantly more likely to state that they do not recall any such messages (20%).

Residents of Nunavut are more likely than residents of other territories to mention "Smoking during pregnancy can harm your baby" (64%), "Cigarettes cause fatal lung disease" (33%) and "Cigarettes cause strokes and heart disease" (25%). Residents of the Yukon and the Northwest Territories are more likely than others to recall the Surgeon-General's message (14% and 13%, respectively).

Support for Placing of Health Warning Messages on Cigarette Packages

There is almost unanimous support among Northern Canadians for the principle of placing health warning messages on tobacco products.

When Northern Canadians are asked whether they support or oppose the placing of health warning messages on tobacco products, nine in ten (91%) strongly (78%) or somewhat (13%) support such messages. Fewer than one in ten (7%) oppose these messages either strongly (4%) or somewhat (2%).

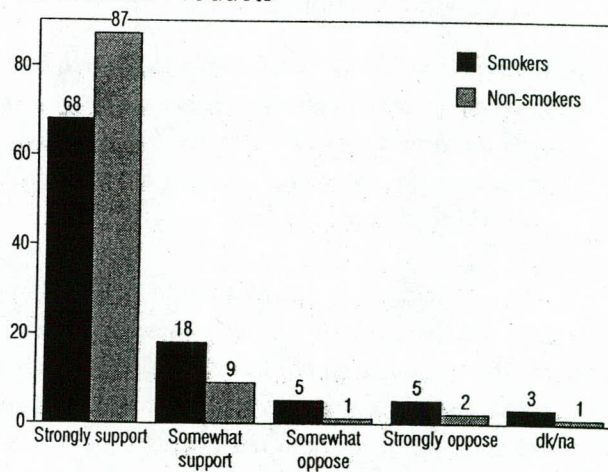
The vast majority of both smokers (86%) and non-smokers (96%) support the placing of health warning messages on tobacco products. However, non-smokers are more likely than smokers to express strong approval (87% of non-smokers vs. 68% of smokers). Among smokers, those who have never tried to quit (78%) are somewhat less likely than others to support these messages.

More than seven in ten Northern Canadians in almost all demographic groups offer strong support for the placing of health warning messages on cigarette packages. Women (81%), non-aboriginals (81%), and those in the higher income and education groups are somewhat more likely than others to offer strong support.

Residents of Nunavut (75%) are somewhat less likely than those in other territories to strongly support health warning messages.

Canadians who believe that tobacco use is a major health problem (82%) are more likely than those who do not to strongly support these messages.

Support for Health Warning Messages on Tobacco Products



Q.62

In general, do you strongly support, somewhat support, somewhat oppose or strongly oppose the placing of health warning messages on tobacco products?

Current Health Warning Messages – Go Too Far or Not Far Enough

One-half of Canadians living in the North feel that current health warning messages on tobacco products are about right. Four in ten believe that these messages do not go far enough and just six percent think they go too far.

When Canadians living in the North are asked whether they feel that the health warning messages currently on tobacco products go too far, do not go far enough or are about right, one-half (50%) say that these messages are about right. Four in ten (41%) believe that they do not go far enough, while less than one in ten (6%) say that they go too far.

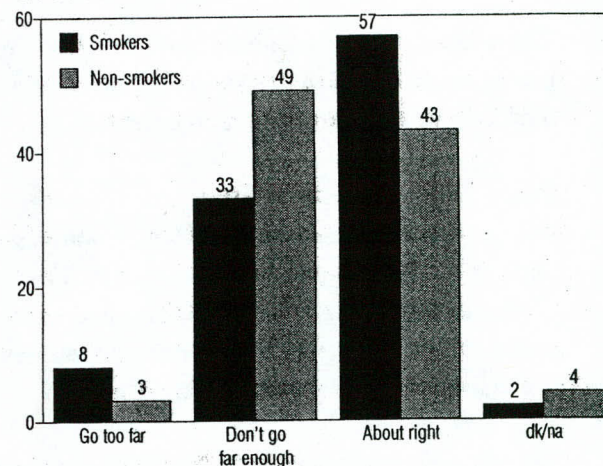
Smokers (57%) are more likely than non-smokers (43%) to say that current health warning messages are about right. Non-smokers (49%) are more likely than smokers (33%) to say that these messages do not go far enough. Among smokers, however, those who have tried to quit in the past six months (38%) are more likely than other smokers to say that current messages do not go far enough.

Older residents of the North are more likely than others to say the current messages go too far, or to express no opinion. Those with a university education are more likely than others to say current messages do not go far enough.

Residents of the Northwest Territories (55%) are somewhat more likely to say the current messages are about right; residents of the Yukon (46%) are more likely to say these messages do not go far enough.

Northern residents who believe that tobacco use is a minor health problem are more likely than others to say that current health warning messages are about right (62%) or that they go too far (13%).

Attitudes Toward Health Warning Messages on Tobacco Products



Q.63

Do you feel that the health warning messages currently on tobacco products go too far, do not go far enough or are about right?

Opinions of Current Health Warning Messages

Large majorities of Canadians living in the North agree that current health warning messages on cigarette packages provide important information for smokers to be reminded of and are worth re-reading. However, a majority also agree that the messages are worn-out and have lost their effectiveness. Large majorities reject the suggestions that health warning messages are inaccurate or hard to understand. A majority of smokers also reject the idea that these messages are not relevant to them; non-smokers are more likely to agree.

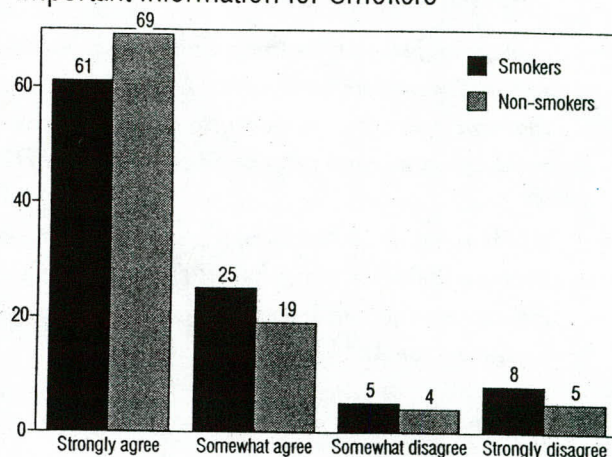
Northern Canadians were asked whether they agreed or disagreed with a series of statements about the health warning messages they may have seen on cigarette packages. Overwhelming agreement is found with the statement "The messages provide important information for smokers to be reminded of." Three-quarters also agree that "The messages are worth reading again, even after seeing them several times." However, more than six in ten also agree that "The messages are worn-out and have lost their effectiveness." Less than two in ten each agree that "The messages are inaccurate" and "The messages are hard to understand." Two-thirds of smokers disagree that "The messages are not relevant to you"; non-smokers are divided on this statement.

WARNING MESSAGES AS PROVIDERS OF IMPORTANT INFORMATION

A large majority of Northern Canadians, both smokers and non-smokers, agree that current health warning messages on cigarette packages provide important information for smokers to be reminded of.

Almost nine in ten (87%) agree strongly (65%) or somewhat (22%) that health warning messages provide important information for smokers to be reminded of; only one in ten (10%) disagree strongly (6%) or somewhat (4%).

Messages on Cigarette Packages Provide Important Information for Smokers



Q.64b

Thinking generally about the health warning messages you may have seen on cigarette packages, do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following statements....? The messages provide important information for smokers to be reminded of.

While both smokers (86%) and non-smokers (88%) overwhelmingly agree that health-warning messages provide important information for smokers to be reminded of, non-smokers (69%) are more likely than smokers (61%) to agree strongly. Among smokers, occasional smokers (67%), and those who have tried to quit are more likely to agree strongly with this statement.

Large majorities of Northern Canadians in all demographic groups agree overall with this statement. Women (68%) are somewhat more likely than men (63%) to offer strong agreement. Those 60 years or older (54%) are less likely than others to agree strongly.

Those who believe that tobacco use is a major health problem are more likely than those who do not to agree with this statement.

WARNING MESSAGES AS WORTH READING AGAIN

A large majority of Northern Canadians, both smokers and non-smokers, agree that current health warning messages on cigarette packages are worth reading again, even after seeing them several times.

Three-quarters of Northern Canadians (76%) agree strongly (52%) or somewhat (24%) that health warning messages are worth reading again; two in ten (20%) disagree strongly (11%) or somewhat (9%).

While both smokers (71%) and non-smokers (81%) agree that health-warning messages are worth reading again, non-smokers (56%) are more likely than smokers (49%) to agree strongly. Among smokers, occasional smokers (53%) are more likely to agree strongly with this statement. Smokers who have smoked for five years or less (44%) and those who have never tried to quit (41%) are less likely than other smokers to offer strong agreement.

While majorities of more than seven in ten in most demographic groups offer agreement with this statement, those 60 years or older (61%) are somewhat less likely to agree.

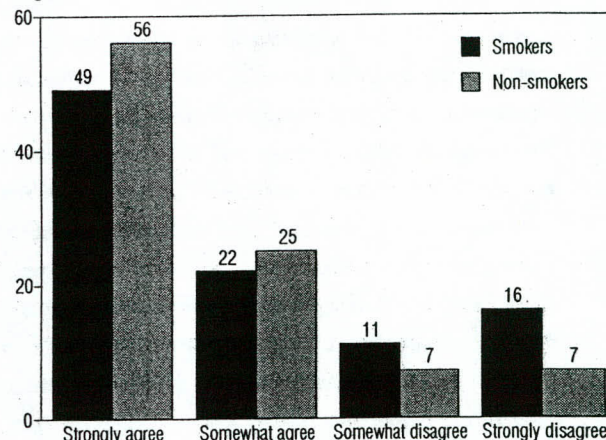
Those who believe that tobacco use is a major health problem (79%) are more likely than those who do not to agree with this statement.

WARNING MESSAGES AS WORN OUT AND LOSING EFFECTIVENESS

A majority of Canadians living in the North, both smokers and non-smokers, agree that health warning messages are worn-out and have lost their effectiveness.

Despite high levels of agreement that the current health warning messages provide important information and are worth reading again, six in ten Canadians living in the North (62%) also agree strongly (32%) or somewhat (30%) that these messages are worn out and have lost their effectiveness. About one-third (34%) disagree strongly (16%) or somewhat (18%).

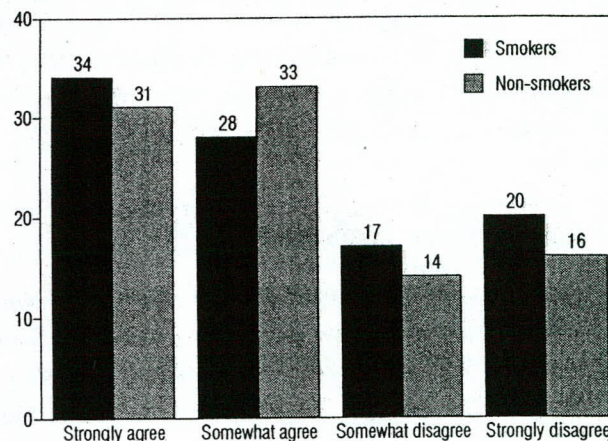
Messages on Cigarette Packages Worth Reading Again, Even After Seeing Several Times



Q.64d

Thinking generally about the health warning messages you may have seen on cigarette packages, do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following statements....? The messages are worth reading again, even after seeing them several times.

Messages on Cigarette Packages Worn Out, Lost Their Effectiveness



Q.64e

Thinking generally about the health warning messages you may have seen on cigarette packages, do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following statements....? The messages are worn out and have lost their effectiveness.

Both smokers and non-smokers report similar levels of agreement with this statement. Smokers who have never tried to quit are more likely than other smokers to offer agreement.

There is little variation in response across demographic groups; however those with less than secondary education and those who have lived in the North for more than 15 years are somewhat less likely than others to agree that current health warning messages are worn out and ineffective.

WARNING MESSAGES AS NOT RELEVANT

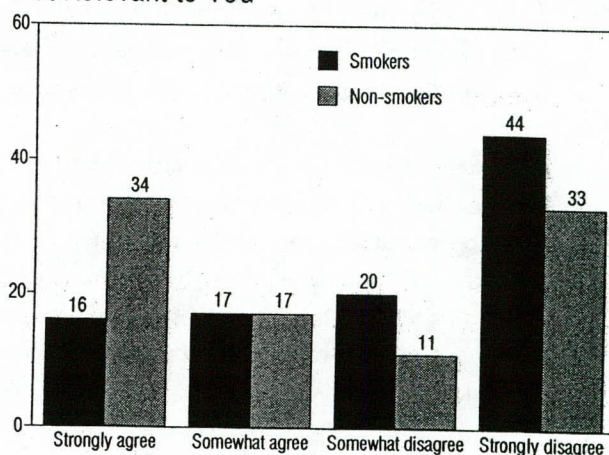
Two-thirds of smokers living in the North reject the idea that health warning messages are not relevant to them; non-smokers are more likely to agree.

Four in ten Canadians living in the North (42%) agree strongly (24%) or somewhat (17%) that the health warning messages are not relevant to them; more than one-half (54%) disagree strongly (38%) or somewhat (16%).

These responses are consonant with the findings that almost one-half of Northern Canadians currently smoke cigarettes. In fact, we find that non-smokers (51% overall, 34% strong agreement) are considerably more likely than smokers (33% overall, 16% strong agreement) to agree that health warning messages are not relevant to them. Smokers themselves clearly do regard these messages as being relevant – two-thirds (64%) disagree with this statement. Among smokers, however, those who have never tried to quit (41%) are more likely to agree that these messages are not relevant.

Men (46%) are more likely than women (40%) to agree that current health warning messages are not relevant to them. Non-aboriginals (45%) are more likely than aboriginals (40%) to agree that current health warning messages are not relevant to them. Those aged 18 to 29 years (38%), those in the highest income group (39%) and life-long residents of the North (39%) are less likely than others to agree that current health warning messages are not relevant to them.

Messages on Cigarette Packages Not Relevant to You



Q.64c

Thinking generally about the health warning messages you may have seen on cigarette packages, do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following statements...? The messages are not relevant to you.

Those who do not think that tobacco use is a major health problem are more likely than those who do to agree that the messages are not relevant.

WARNING MESSAGES AS INACCURATE

Large majorities of Canadians living in the North, both smokers and non-smokers, reject the suggestion that health warning messages are inaccurate.

Canadians living in the North overwhelmingly reject the idea that the health warning messages on cigarette packages are inaccurate. Just under two in ten Northern Canadians (19%) agree strongly (9%) or somewhat (10%) that the health warning messages are inaccurate; three-quarters (77%) disagree strongly (61%) or somewhat (16%).

Three-quarters of both smokers (74%) and non-smokers (79%) reject the idea that health-warning messages are inaccurate. Smokers, however, are somewhat more likely than non-smokers (23% of smokers vs. 16% of non-smokers) to agree with this statement. Among smokers, there is a greater tendency for those who have not tried to quit in the past five years (22%), or who have never tried to quit (22%), to agree that these messages are inaccurate; those who have smoked for less than five years (38%) are also more likely than other smokers to agree with this statement.

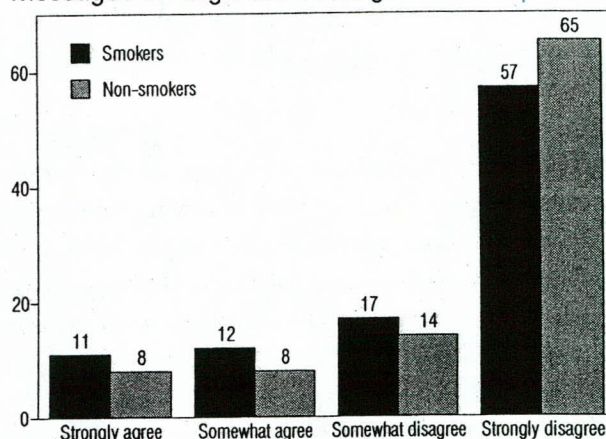
Aboriginals (28%), those with less than high school education (34%), life-long residents of the North (27%) and those in the lower income groups are more likely than others to agree with this statement.

WARNING MESSAGES AS HARD TO UNDERSTAND

Large majorities of Northern Canadians, both smokers and non-smokers, reject the suggestion that health warning messages are hard to understand.

Just over one in ten Northern Canadians (13%) agree strongly (7%) or somewhat (6%) that the current health warning messages are hard to understand; more than eight in ten (85%) disagree strongly (64%) or somewhat (21%).

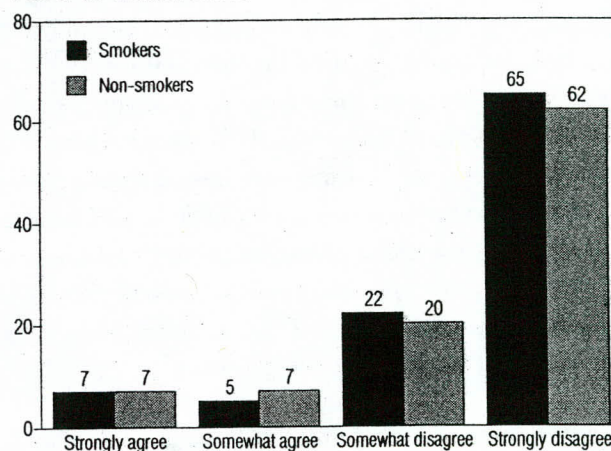
Messages on Cigarette Packages are Inaccurate



Q.64a

Thinking generally about the health warning messages you may have seen on cigarette packages, do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following statements....? The messages are inaccurate.

Messages on Cigarette Packages Hard to Understand



Q.64f

Thinking generally about the health warning messages you may have seen on cigarette packages, do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following statements....? The messages are hard to understand.

Smokers (87%) are slightly more likely than non-smokers (82%) to reject the idea that health warning messages are hard to understand.

Aboriginals (19%), residents of Nunavut (21%), Inuktitut-speakers (21%), those aged 60 years or older (17%) and those with lower levels of income and education are more likely to agree with this statement.

Impact of Current Health Warning Messages on Smokers

Six in ten in ten daily smokers living in the North say health warning messages on cigarette packages have at least some impact on making them more conscious of the health risks of smoking than they used to be and on getting them to smoke less around others. One-half of daily smokers report at least some impact on increasing their desire to quit. Four in ten daily smokers say the messages have had at least some impact on getting them to smoke less or to try quitting.

Northern Canadians who smoke every day were asked whether the health warning messages they may have seen on cigarette packages have had a major impact, some impact, a minor impact or no impact at all on their behaviour in a number of ways. Six in ten each indicate that current health warning messages on cigarette packages have had either a major impact or some impact on "making you more conscious of the risks of smoking than you used to be," and on "getting you to smoke less around others than you used to." One-half of daily smokers state that these messages have had either a major impact or some impact on "increasing your desire to quit smoking." Four in ten each report that these messages have had either a major impact or some impact on "getting you to smoke less than last year" and "recently getting you to try to quit smoking." It should be noted that these questions were posed only to those who report that they smoke cigarettes every day; occasional smokers were not included in this subsample.

Regular smokers who believe that tobacco use is a major health risk are more likely than those who do not to say that health warning messages have had a major impact on them in all of these areas. Older smokers and those who have never tried to quit are more likely than other smokers to say that health warning messages have had no impact at all on them in all of these areas.

Clearly, the warning messages on cigarette packages are having at least some impact on significant numbers of regular smokers in the North, particularly younger smokers and those who have considered quitting, in terms of making them aware of the health risks and getting them to smoke less around others, to try to quit smoking and to smoke less than previously.

WARNING MESSAGES AND CONSCIOUSNESS OF HEALTH RISKS

Six in ten regular smokers (61%) report that current health warning messages on cigarette packages have had either a major impact (33%) or some impact (28%) on making them more conscious of the risks of smoking. Fifteen percent indicate that these messages have had a minor impact, and 23 percent say the messages have had no impact at all.

Women (67%), aboriginals (65%) and those with lower levels of income and education are more likely to state that health warning messages have had at least some impact on their consciousness of risks related to smoking. Residents of Nunavut (66%) are also more likely to say this.

Smokers who have tried to quit in the past five years are more likely than other smokers to report that health warning messages have had at least some impact on their consciousness of risks related to smoking.

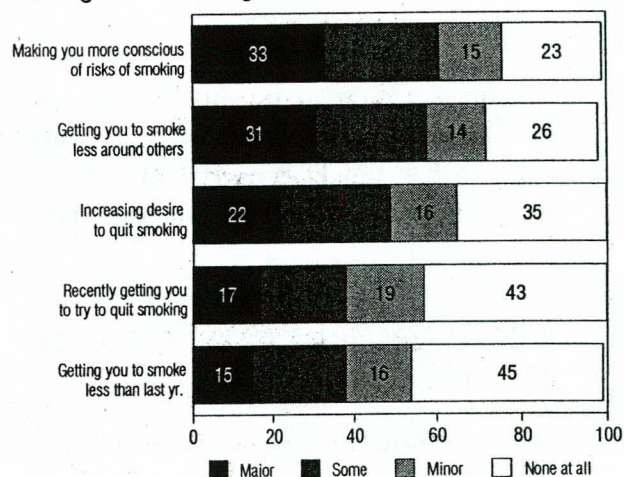
WARNING MESSAGES AND SMOKING LESS AROUND OTHERS

Six in ten regular smokers (58%) report that current health warning messages on cigarette packages have had either a major impact (31%) or some impact (27%) on getting them to smoke less around others. Fourteen percent indicate that these messages have had a minor impact, and 26 percent say the messages have had no impact at all.

Aboriginals are somewhat more likely to state that the health warning messages have had at least some impact on getting them to smoke less around others.

Smokers who have tried to quit in the past five years are more likely than other smokers to report that health warning messages have had at least some impact on getting them to smoke less around others.

Impact of Health Warning Messages on Cigarette Packages



Q.65

And thinking generally about the health warning messages you have seen on cigarettes packages, have these messages had a major impact, some impact, a minor impact or no impact at all on you in each of the following ways ... Getting you to smoke less than last year ... Getting you to smoke less around others than you used to ... Increasing your desire to quit smoking ... Recently getting you to try to quit smoking ... Making you more conscious of the risks of smoking than you used to be?
 Subsample: Daily smokers

WARNING MESSAGES AND DESIRE TO QUIT SMOKING

One-half of regular smokers (49%) report that current health warning messages on cigarette packages have had either a major impact (22%) or some impact (27%) on increasing their desire to quit smoking. Sixteen percent indicate that these messages have had a minor impact, and 35 percent say the messages have had no impact at all.

Women (53%) and aboriginals (54%) are somewhat more likely to state that health warning messages have had at least some impact on increasing their desire to quit smoking.

Those who have tried to quit smoking in the past two years are more likely to report that health warning messages have had at least some impact on increasing their desire to quit.

WARNING MESSAGES AND TRYING TO QUIT SMOKING

Four in ten regular smokers (39%) report that current health warning messages on cigarette packages have had either a major impact (17%) or some impact (21%) on getting them to try to quit smoking. Nineteen percent indicate that these messages have had a minor impact, and 43 percent say the messages have had no impact at all.

Women (41%), aboriginals (43%), particularly Inuktitut-speakers (46%) and those with lower levels of education are somewhat more likely to state that the health warning messages have had at least some impact on getting them to try to quit smoking. Residents of Nunavut (44%) are also more likely than those in other territories to say this.

Those who have tried to quit smoking in the past six months are more likely to report that health warning messages have had at least some impact on getting them to try to quit smoking.

WARNING MESSAGES AND SMOKING LESS

Four in ten regular smokers (38%) report that current health warning messages on cigarette packages have had either a major impact (15%) or some impact (23%) on recently getting them to try to quit smoking. Sixteen percent indicate that these messages have had a minor impact, and 45 percent say the messages have had no impact at all.

Women (44%), aboriginals (43%) and those with lower levels of income and education are somewhat more likely to state that the health warning messages have had at least some impact on getting them to try to quit smoking. Residents of Nunavut (43%) are also more likely than those in other territories to say this.

Those who have tried to quit smoking in the past two years are more likely to report that health warning messages have had at least some impact on getting them to try to quit smoking.

Improving Current Health Warning Messages

Canadians living in the North are most likely to suggest use of more detailed information and the use of pictures in health warning messages as ways to make them more effective.

Canadians living in the North were asked, in an unprompted question, how, if at all, the current health warning messages on tobacco products could be improved to be more effective in convincing smokers to quit. Multiple responses were accepted. The most common response is more detailed information (22%), followed by the use of pictures (15%). Less than one in ten each mention more eye-catching presentation (7%), increasing size (7%) and use of colour (6%). Smaller proportions suggest changing messages regularly (2%), giving warnings in other languages (2%) and providing a 1-800 quit-line number or Website (1%). Thirteen percent indicate that the messages do not need improving, while two percent suggest getting rid of the messages altogether. Five percent give other responses, and 35 percent offer no response.

Non-smokers are more likely than smokers to mention most of these improvements; however, smokers (16%) are somewhat more likely than non-smokers (11%) to say that the current health warning messages do not need improving. Among smokers, those who have tried to quit smoking in the past two years are more likely than other smokers to mention more detailed information.

Women are more likely than men to mention more detailed information and use of pictures; men are more likely than women to say that the messages do not need improving. Aboriginals, particularly Inuktitut-speakers, are more likely than others to mention providing warnings in other languages (although the numbers who mention this are small). Those aged 60 years or older are less likely to mention most of these improvements; they are, however, somewhat more likely to suggest getting rid of the messages. Those with post-secondary education are more likely than others to mention use of pictures, more detailed information and more eye-catching presentation.

Ways of Making Health Warning Messages More Effective

	SMOKERS	NON-SMOKERS
More detailed information	18	26
Don't need improving	16	11
Use of pictures	11	19
Increasing size	6	8
Use of colour	5	7
More eye catching presentation (general)	5	9
Get rid of them altogether	3	2
Warnings in other languages	2	1
Provide 1-800 quit-line number or Web site	1	*
Change messages regularly	1	2
More warnings in media	1	2
Increase price of cigarettes	1	1
Ban tobacco altogether	1	1
Anti-smoking/quit smoking programs	*	1
Other	1	2
dk/na	39	31

Q.66

In your opinion, how, if at all, could the current health warning messages on tobacco be improved to be more effective in convincing smokers to quit?

Those who think that tobacco use is a major health problem are more likely than others to mention most of these improvements.

Effectiveness of Suggested Changes to Health Warning Messages

Majorities of smokers believe that using pictures, adding marker words, using colour, increasing the size of the messages and adding more detailed information are effective ways to make warning messages more noticeable. Non-smokers are more likely than smokers to see most of these methods as effective; they are, however, less likely than smokers to endorse adding detailed information.

Northern Canadians were read a list of possible ways in which warning messages on cigarette packages could be changed, and asked to indicate how effective each of these ways would be in making the messages more noticeable. Majorities of both smokers and non-smokers see all of these ways as effective; the most highly rated possible change is using pictures.

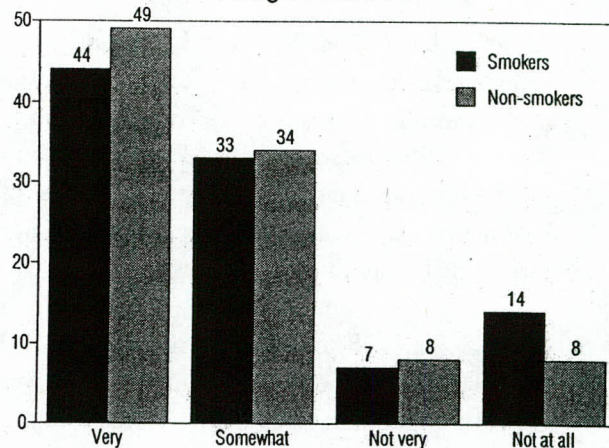
Those who see tobacco use as a major health problem are more likely than others to support all of these suggested ways of changing the warning messages on cigarette packages.

USING PICTURES

Eight in ten (80%) Northern Canadians feel that using pictures in the warning messages on cigarette packages would be very (47%) or somewhat (33%) effective in making these messages more noticeable. Two in ten (19%) believe that using pictures would be not very (8%) or not at all (11%) effective.

While majorities of both smokers and non-smokers endorse the use of pictures, non-smokers (83% overall, 49% very effective) are more likely than smokers (77% overall, 44% very effective) to think that using pictures would be effective. Smokers who have tried to quit in the past five years, smokers who have smoked for less than five years and occasional smokers are more likely to think that using pictures would be effective. Smokers who have never tried to quit (66%) are less likely than other smokers to think using pictures would be effective.

Effectiveness of Using Pictures



Q.67a

How effective would ... using pictures ... be in making the messages more noticeable?

Women (83%), aboriginals (83%), particularly Inuktitut-speakers (86%), and residents of Nunavut (87%) are more likely than others to think that using pictures would be very effective. Those aged 60 years or older (64%) are less likely to think this.

ADDING MARKER WORDS

Seven in ten (72%) Northern Canadians state that using marker words, such as "Warning" or "Danger," in the warning messages on cigarette packages would be very (30%) or somewhat (42%) effective in making these messages more noticeable. One-quarter (27%) believe that using such marker words would be not very (14%) or not at all (13%) effective.

Non-smokers (78% overall, 31% very effective) are more likely than smokers (66% overall, 29% very effective) to think that using marker words would be effective. Smokers who have never tried to quit (57%) are less likely than other smokers to think that using marker words would be effective.

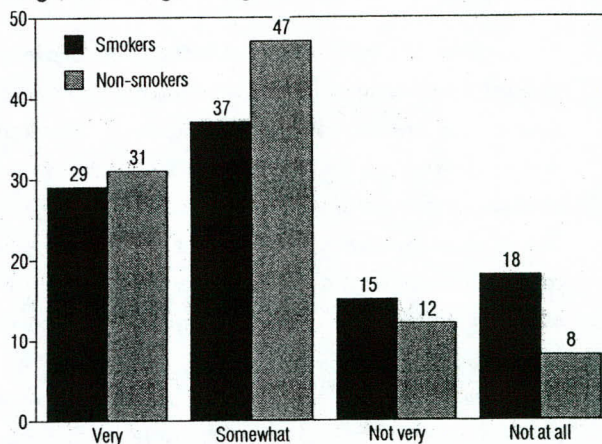
Women (75%), aboriginals (77%), particularly Inuktitut-speakers (80%), those with less than high school education (81%) and residents of Nunavut (78%) are more likely than others to think that using marker words would be at least somewhat effective.

USING COLOUR

Seven in ten (71%) Northern Canadians state that using colour in the warning messages on cigarette packages would be very (35%) or somewhat (36%) effective in making these messages more noticeable. One-quarter (28%) believe that using colour would be not very (13%) or not at all (15%) effective.

While majorities of both smokers and non-smokers endorse the use of colour, non-smokers (78% overall, 39% very effective) are more likely than smokers (63% overall, 30% very effective) to think that using colour would be effective. Occasional smokers (68%) and those who have tried to quit in the past two years are more likely to think that using colour would be effective. Former smokers (82%) are more likely than those who have never smoked (75%) to think that using colour would be effective. Smokers who have never tried to quit (47%) are less likely than other smokers to think that using colour would be effective.

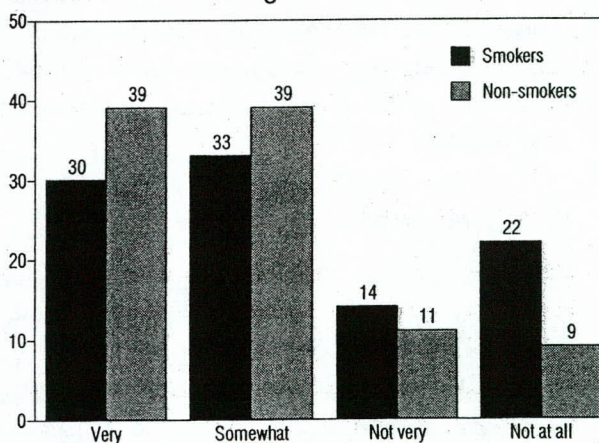
Effectiveness of Marker Words,
e.g., Warning, Danger



Q.67d

How effective would ... adding marker words, e.g., warning, danger ... be in making the messages more noticeable?

Effectiveness of Using Colour



Q.67b

How effective would ... using colour ... be in making the messages more noticeable?

Women (73%), Inuktitut-speakers (77%) and residents of Nunavut (76%) are more likely than others to think that using colour would be at least somewhat effective. Those aged 60 years or older (58%) are less likely to say that using colour would be effective.

INCREASING THE SIZE OF MESSAGES

Two-thirds (67%) of Northern Canadians state that increasing the size of the warning messages on cigarette packages would be very (30%) or somewhat (37%) effective in making these messages more noticeable. One-third (32%) believe that using such marker words would be not very (14%) or not at all (18%) effective.

Non-smokers (75% overall, 34% very effective) are more likely than smokers (59% overall, 27% very effective) to think that increasing the size of the messages would be effective. Smokers who have never tried to quit (47% overall) are less likely than other smokers to think using pictures would be effective.

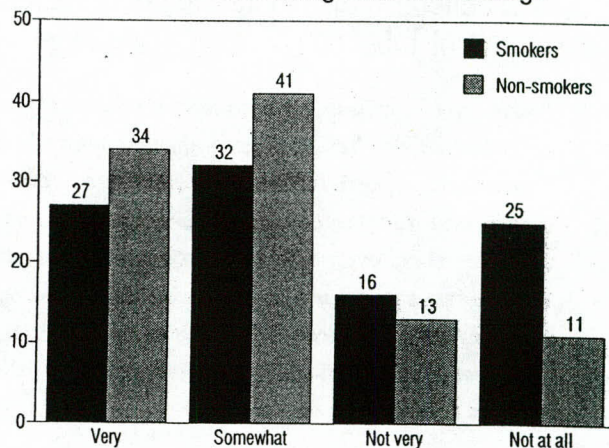
Inuktitut-speakers (75%) and residents of Nunavut (73%) are more likely than others to think that increasing the size of the warning messages would be at least somewhat effective. Those aged 60 years or older (49%) are less likely to say that increasing the size would be effective.

MORE DETAILED INFORMATION IN TEXT

Almost two-thirds (62%) of Northern Canadians believe that using more detailed information would be very (29%) or somewhat (33%) effective in making these messages more noticeable. One-third (36%) believe that using such detailed information would be not very (18%) or not at all (18%) effective.

Reversing the pattern found with other suggested means of changing health warning messages, non-smokers in the North (59% overall, 27% very effective) are less likely than smokers (66% overall, 32% very effective) to see adding more detailed information in the text as effective. Smokers who have tried to quit smoking within the past two years are more likely than other smokers to think that using more detailed information in the text of the warning messages would be effective. Former smokers (62%) are more likely than those who have never smoked (56%) to think that using detailed information would be effective.

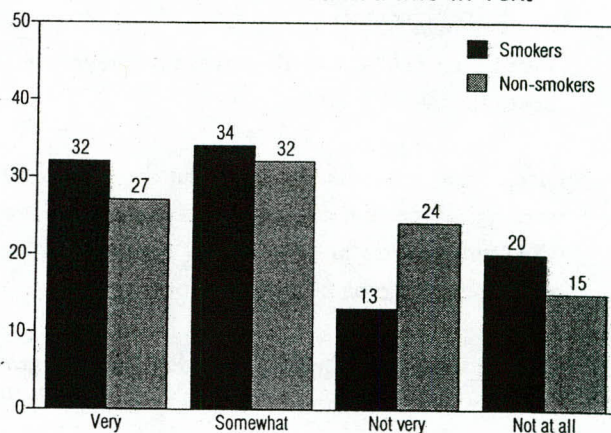
Effectiveness of Increasing Size of Message



Q.67c

How effective would ... increasing the size of the messages ... be in making the messages more noticeable?

Effectiveness of More Detailed Info in Text



Q.67e

How effective would ... more detailed information in text ... be in making the messages more noticeable?

Aboriginals (71%), those aged 18 to 29 years (70%), Inuktitut-speakers (76%), those with less than high school education (73%), those with annual incomes less than \$25,000 (76%) and residents of Nunavut (73%) are more likely than others to think that using more detailed information in the text of the warning messages would be at least somewhat effective.

Most Effective Size to Inform about Health Effects of Tobacco

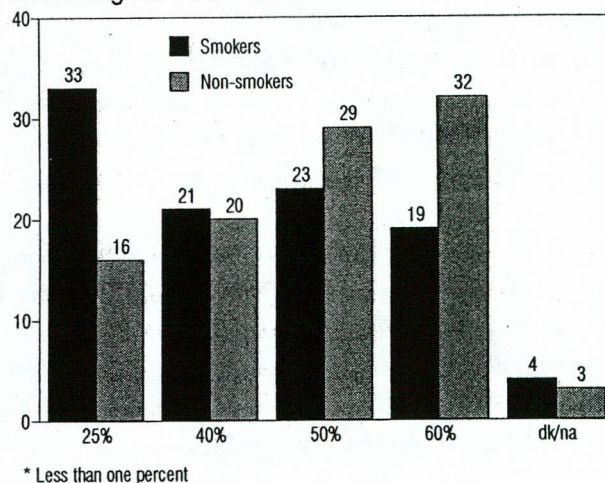
Northern Canadians are divided on what is the most effective size of health warning message to inform Canadians about the health effects of tobacco; about one-quarter each say 25 percent coverage, 50 percent coverage or 60 percent coverage, while two in ten say 40 percent coverage. Smokers are more likely to advocate 25 percent coverage, while non-smokers are more likely to advocate 50 percent or 60 percent coverage.

Northern Canadians were informed that the current size of the health warning messages on cigarette packages is about 25 percent of the cover, and were then asked which size of health warning they think would be most effective in informing Canadians about the health effects of tobacco. One-quarter each say 25 percent coverage (25%), 50 percent coverage (26%) or 60 percent coverage (26%) would be the most effective size. Two in ten (20%) say 40 percent coverage would be most effective.

Smokers are more likely to say that the current size of warning, 25 percent coverage, would be most effective, while non-smokers are more likely to choose either 50 percent coverage or 60 percent coverage.

While opinions are divided in all demographic groups, there are some differences. Women are slightly more likely to say that 50 percent coverage would be most effective. Aboriginals are slightly more likely to choose 50 percent coverage as the most effective size for warnings, while non-aboriginals are slightly more likely to choose 60 percent coverage. Inuktitut-speakers are slightly more likely to select either 25 percent coverage or 50 percent coverage. Those aged 18 to 29 years are slightly more likely to choose 40 percent coverage. Those aged 60 years or older are slightly more likely to choose 60 percent coverage, or to offer no opinion. Those in the higher income and education groups are slightly more likely to say that 60 percent coverage would be most effective.

Which Size Warning Message Most Effective in Informing About Health Effects of Tobacco



Q.69

Which of the following health message sizes on cigarette packages do you think would be most effective in informing Canadians about the effects of tobacco ... 25%, like it is now ... 40% ... 50%, twice the size of the current health warning messages ... or 60% of the cigarette package?

Most Effective Size to Encourage Reduction of Tobacco Use

Northern Canadians are divided on what is the most effective size of health warning message to encourage Canadians to reduce their tobacco use; about one-quarter each say 25 percent coverage, 50 percent coverage or 60 percent coverage, while two in ten say 40 percent coverage. Smokers are more likely to advocate 25 percent coverage, while non-smokers are more likely to advocate 50 percent or 60 percent coverage.

Northern Canadians were also asked which size of health warning they think would be most effective in encouraging Canadians to reduce their tobacco use. One-quarter each say the current size of 25 percent coverage (26%), 50 percent coverage (26%) or 60 percent coverage (25%) would be the most effective size. Two in ten (19%) say 40 percent coverage would be most effective.

Smokers are more likely to say that the current size of warning, 25 percent coverage, would be most effective, while non-smokers are more likely to choose either 50 percent coverage or 60 percent coverage.

While opinions are divided in all demographic groups, there are some slight differences. Women are slightly more likely to say that 50 percent coverage would be most effective. Aboriginals are slightly more likely to choose 50 percent coverage as the most effective size for warnings, while non-aboriginals are slightly more likely to choose 60 percent coverage. Inuktitut-speakers are slightly more likely to select 50 percent coverage. Those in the higher income and education groups are slightly more likely to say that 60 percent coverage would be most effective.

Visual Differences Between Brands

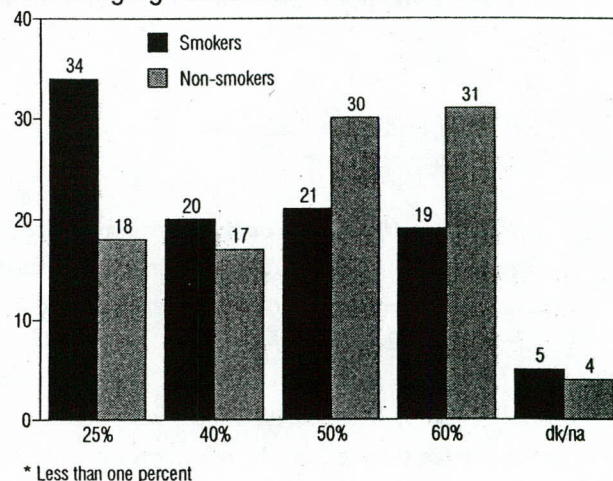
Half of regular smokers living in the North mention colour as the main visual difference between the brand they usually smoke and other brands.

Regular smokers were asked to think of the package of the brand they usually smoke, and say how this cigarette brand differs visually from other brands. One-half (50%) mention colour as the main visual difference. Five percent mention other general visual factors, and five percent mention general non-visual factors. Seventeen percent say there is no difference, and 23 percent offer no opinion. It should be noted that this question was posed only to those who report that they smoke cigarettes every day; occasional smokers were not included in this subsample.

Smokers who have tried to quit in the past two years and those who usually smoke a DuMaurier brand are more likely than other smokers to mention colour.

Non-aboriginals are more likely than aboriginals to mention colour. Aboriginals, especially Inuktitut-speakers, are more likely to offer no opinion. Those aged 60 years or older are more likely than others to say there is

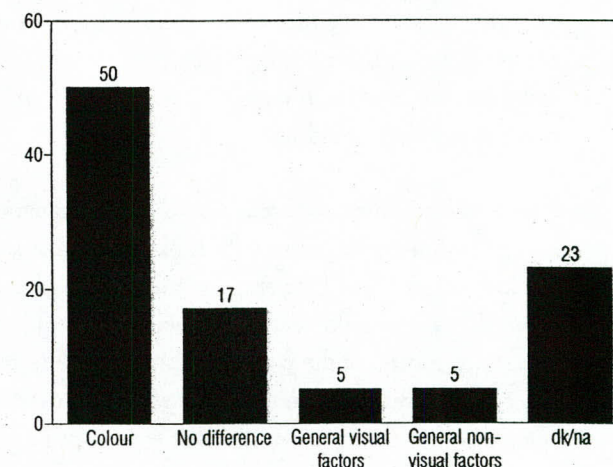
Which Size Warning Message Most Effective in Encouraging Reduction of Tobacco Use



Q.68

As you may know, the current size of the health messages on cigarette packages is about 25% of the cigarette package. Which of the following health message sizes on cigarette packages do you think would be most effective in encouraging Canadians to reduce their tobacco use... 25%, like it is now... 40%... 50%, twice the size of the current health warning messages... or 60% of the cigarette package?

Visual Differences Between Brands



Q.70

Thinking of the package of the cigarette brand you usually smoke, how does this cigarette brand differ to you visually from other brands?

Subsample: Daily smokers

no difference. Those with higher income and education levels are more likely than others to mention colour.

Effect of Brand Space Size on Brand Recognition

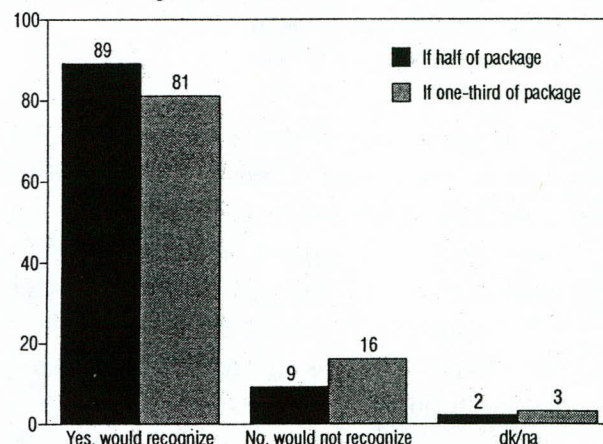
Smokers in the North overwhelmingly agree that they would still recognize their usual brand if the space reserved for the brand were one-half or one-third of the whole package.

Daily smokers living in the North were asked to think of the space reserved for the brand on the main face of cigarette packages, apart from the health warning messages, and to say whether they would still recognize their cigarette brand if that space were half of the whole package. They were then asked whether they would still recognize their brand if the brand space were one-third of the whole package. It should be noted that these questions were posed only to those who report that they smoke cigarettes every day; occasional smokers were not included in this subsample.

For a brand space of one-half the package face, nine in ten (89%) say that they would still recognize their brand; only nine percent say they could not. For a brand space of one-third of the package face, eight in ten (81%) say that they could still recognize their brand; only 16 percent say they could not.

These findings are consistent across most demographic groups. Aboriginals, especially Inuktitut-speakers, and smokers aged 18 to 29 years are slightly less likely to agree that they could recognize their brand with a reduced proportion of the package face reserved for brand space. However, even among these groups, over eight in ten say they could recognize their brand with a brand space of one-half the package face, and over seven in ten say they could recognize their brand with a brand space of one-third of the package face.

Impact of Brand Space Size on Brand Recognition



Q.71a&b

Apart for the health warning messages, thinking of the space reserved for the brand on the main face of the cigarette packages, would you still recognize your cigarette brand if the brand space was half of the whole package... one-third of the whole package?

Subsample: Daily smokers

QUESTIONNAIRE

North of 60 Survey: Health Canada Questions
PN4550

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

DO NOT READ. CODE ONE RESPONSE ONLY.

- 1 – Lung cancer
- 2 – Breast cancer
- 3 – Ovarian cancer
- 4 – Other cancer
- 5 – DK/NA

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

2. 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

- a) Smoking cigarettes will do you no harm if you don't inhale

- 1 – Strongly agree
- 2 – Somewhat agree
- 3 – Somewhat disagree
- 4 – Strongly disagree
- 5 – DK/NA

- b) Cigars and pipes are a safe alternative to smoking cigarettes

- c) Chewing tobacco is a safe alternative to smoking cigarettes

3. 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.

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

4. 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

- a) Lung cancer

- 1 – Plays a major role
- 2 – Plays a minor role
- 3 – Plays no role at all
- 4 – DK/NA

- b) Emphysema
- c) Clogged blood vessels
- d) Heart disease
- e) Stroke
- f) Arthritis
- g) Impotence
- h) Gangrene
- i) Stomach ulcers
- j) Miscarriages
- k) Asthma
- l) Mouth cancer
- m) Bladder cancer
- n) Throat cancer
- o) Hepatitis
- p) Wrinkles and premature aging
- q) Infertility
- r) Acne
- s) Tooth loss and gum disease
- t) Harm to babies during pregnancy

5. 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**

- a) Asthma in children

- 1 – Plays a major role
- 2 – Plays a minor role
- 3 – Plays no role at all
- 4 – DK/NA

- b) Ear infections in children
- c) Heart disease in non-smoking adults
- d) Arthritis in non-smoking adults
- e) Lung cancer in non-smokers
- f) SIDS (sudden infant death syndrome)
- g) Strokes in non-smoking adults

6. 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

a) Alcohol

- 1 - Smoking kills more
- 2 - Smoking kills fewer
- 3 - Smoking kills as many
- 4 - DK/NA

- b) Illegal drugs
- c) Car accidents
- d) AIDS
- e) Suicides
- f) Murders

7. 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**

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

8. 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**

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

9. At the present time, do you smoke cigarettes every day, occasionally, or not at all?

- 1 - Every day
- 2 - Occasionally (less than every day)
- 3 - Not at all
- 4 - DK/NA

GO TO Q.10

GO TO Q.10

SKIP TO Q.14

ASK ALL WHO SMOKE EVERY DAY OR OCCASIONALLY IN Q.9

10. How long have you been a cigarette smoker? Has it been...?

READ

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

11. What brand of cigarettes do you usually smoke?

DO NOT READ. CODE ONE BRAND ONLY

INTERVIEWER NOTE: PROBE FOR WHETHER RESPONDENT SMOKES REGULAR, LIGHT, EXTRA LIGHT ETC.... WITHIN THEIR BRAND...DO NOT PROBE OR RECORD WHETHER IT IS KING-SIZE OR REGULAR-SIZE - THIS DOES NOT INTEREST US.

- 01 - Benson & Hedges (Regular)
- 02 - Benson & Hedges Deluxe Ultra Light
- 03 - Benson & Hedges Deluxe Ultra Light Menthol
- 04 - Craven "A" (Regular)
- 05 - Craven Menthol
- 06 - DuMaurier (Regular)
- 07 - DuMaurier Light
- 08 - DuMaurier Extra Light
- 09 - DuMaurier Ultra Light
- 10 - Export "A" (Regular)
- 11 - Export "A" Light
- 12 - Export "A" Medium
- 13 - Matinee Extra Mild
- 14 - Player's (Regular)
- 15 - Player's Extra Light
- 16 - Player's Light
- 17 - Rothmans (Regular)
- 18 - Rothmans Special Mild
- 19 - Other (SPECIFY) _____
- 20 - DK/NA

12. How long ago, if ever, did you last try to quit smoking? Was it...?

READ

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

13. When did you last smoke a cigarette? Was it...?

READ

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

ASK ALL WHO DO NOT SMOKE AT ALL IN Q.9

14. Have you ever smoked cigarettes daily?

- 1 - Yes
- 2 - No
- 3 - DK/NA

ASK ALL

15. In general, do you think that tobacco use is a major health problem, a minor health problem or not a health problem at all in Canada?

- 1 - Major health problem
- 2 - Minor health problem
- 3 - Not a health problem at all
- 4 - DK/NA

16. What specific health messages can you remember ever seeing on cigarette packages in Canada?

DO NOT READ. PROBE FOR MULTIPLE RESPONSES. CODE ALL THAT APPLY.

- 01 - SMOKING CAN KILL YOU
- 02 - CIGARETTES CAUSE FATAL LUNG DISEASE
- 03 - SMOKING DURING PREGNANCY CAN HARM YOUR BABY
- 04 - CIGARETTES ARE ADDICTIVE
- 05 - TOBACCO SMOKE CAUSES FATAL LUNG DISEASE IN NON-SMOKERS
- 06 - CIGARETTES CAUSE CANCER
- 07 - CIGARETTES CAUSE STROKES AND HEART DISEASE
- 08 - TOBACCO SMOKE CAN HARM YOUR CHILDREN
- 09 - SURGEON-GENERAL WARNS THAT SMOKING IS DANGEROUS TO YOUR HEALTH
- 10 - OTHER (SPECIFY) _____
- 11 - NONE
- 12 - DK/NA

17. In general, do you strongly support, somewhat support, somewhat oppose or strongly oppose the placing of health warning messages on tobacco products?

- 1 - Strongly support
- 2 - Somewhat support
- 3 - Somewhat oppose
- 4 - Strongly oppose
- 5 - DK/NA

18. Do you feel that the health warning messages currently on tobacco products go too far, do not go far enough or are about right?

- 1 - They go too far
- 2 - Don't go far enough
- 3 - About right
- 4 - DK/NA

19. Thinking generally about the health warning messages you may have seen on cigarette packages, do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following statements...?

READ AND ROTATE LIST

a) The messages are inaccurate

- 1 - Strongly agree
- 2 - Somewhat agree
- 3 - Somewhat disagree
- 4 - Strongly disagree
- 5 - DK/NA

b) The messages provide important information for smokers to be reminded of

c) The messages are not relevant to you

d) The messages are worth reading again, even after seeing them several times

e) The messages are worn out and have lost their effectiveness

f) The messages are hard to understand

ASK SMOKERS ONLY, OTHERS SKIP TO Q.21

20. And thinking generally about the health warning messages you have seen on cigarettes packages, have these messages had a major impact, some impact, a minor impact or no impact at all on you in each of the following ways?

READ AND ROTATE LIST

a) Getting you to smoke less than last year

- 1 - Major impact
- 2 - Some impact
- 3 - Minor impact
- 4 - No impact at all
- 5 - DK/NA

b) Getting you to smoke less around others than you used to

c) Increasing your desire to quit smoking

d) Recently getting you to try to quit smoking

e) Making you more conscious of the risks of smoking than you used to be

ASK ALL

21. E In your opinion, how, if at all, could the current health warning messages on tobacco be improved to be more effective in convincing smokers to quit?

DO NOT READ...CODE ALL THAT APPLY

- 01 – Use of pictures
- 02 – Use of colour
- 03 – Increasing size
- 04 – More eye catching presentation (general)
- 05 – Provide 1-800 quit line number or web site
- 06 – More detailed information
- 07 – Don't need improving
- 08 – Get rid of them altogether
- 09 – Other (SPECIFY) _____
- 10 – DK/NA

22. I am going to read you a list of possible ways in which the warning messages on cigarette packages could be changed. How effective would each of these be in making the messages more noticeable? Would each be very effective, somewhat effective, not very effective or not at all effective?

READ AND ROTATE

- a) Using pictures

- 1 – Very effective
- 2 – Somewhat effective
- 3 – Not very effective
- 4 – Not at all effective
- 5 – DK/NA

- b) Using colour
- c) Increasing the size of the messages
- d) Adding marker words, such as Warning or Danger
- e) More detailed information in text

23. As you may know, the current size of the health messages on cigarette packages is about 25% of the cigarette package. Which of the following health message sizes on cigarette packages do you think would be most effective in encouraging Canadians to **reduce their tobacco use**?

READ RESPONSES. ACCEPT ONE RESPONSE.

- 1 – 25% like it is now
- 2 – 40%
- 3 – 50% twice the size of the current health warning messages, or
- 4 – 60% of the cigarette package
- 5 – DK/NA

24. Which of the following health message sizes on cigarette packages do you think would be most effective in informing Canadians **about the effects of tobacco?**
READ RESPONSES. ACCEPT ONE RESPONSE.

- 1 – 25% like it is now
- 2 – 40%
- 3 – 50% twice the size of the current health warning messages, or
- 4 – 60% of the cigarette package
- 5 – DK/NA

ASK SMOKERS ONLY

Brand Recognition

25. Thinking of the package of the cigarette BRAND you usually smoke, how does this cigarette brand differ to you visually from other brands?
PROBE FULLY. ACCEPT MORE THAN ONE RESPONSE.

- 1 – _____
- 2 – DK/NA

26. Apart for the health warning messages, thinking of the space reserved for the brand on the main face of the cigarette packages, would you still recognize your cigarette BRAND if the BRAND SPACE was

- a) Half of the whole package

- 1 – Yes
- 2 – No
- 3 – DK/NA

- b) One third of the whole package