Qualitative Research With Focus Group Testing of Social Marketing Creative Concepts for the Tobacco Control Positioning Strategy Among Aboriginal Canadians

Report of Focus Group Findings

POR-01-40

December 2001

Submitted to:

Health Canada

101 Yorkville Avenue, Suite 301
Toronto, Ontario M5R 1C1
Tel: (416) 921-0090
Fax: (416) 921-3903

- VANCOUVER
- TORONTO
- OTTAWA
- BATHURST, N.B.
- MONTREAL

POLLARA™
STRATEGIC PUBLIC OPINION & MARKET RESEARCH

Table of Contents

I. Introduction

POLLARA is pleased to present to Health Canada the following report of qualitative findings from focus groups testing various advertising concepts pertaining to the Government of Canada's Tobacco Control Program among Aboriginal Canadians.

A total of four (4) groups were conducted with Aboriginal Canadians on December 21, 2001. One group with general population participants and one group with "Involved Canadians" were held in each of the following locations: Iqaluit (Inuit) and Saskatoon (First Nations). Additional recruiting criteria ensured that each group had participants who were smokers and non-smokers. Participants were randomly recruited to participate in these discussions which lasted approximately 2 hours.

Groups examined television, print and radio advertisement executions. The executions were part of three distinct advertising concepts: "Health Care Workers", "Labels" and "Zero". Both "Labels" and "Zero" had two television executions (one 30 second and one 60 second), and all three concepts had two print executions and one radio spot.

Due to the nature of qualitative research, findings should be considered as directional rather than as statistically significant.

II. Key Findings

The following report is broken down into findings from each of the centres.

A. Saskatoon

General Comments:

- At the end of all the ads, respondents understood that this advertising is targeted to aboriginals because the government believes that smoking in their community is a problem. They denied the assertion that this was a superficial effort on the government's part, instead feeling that this was evidence of sincere effort from Health Canada to improve the health of aboriginal peoples.

- With regard to the ads that asserted that it is unsafe to smoke *any* tobacco products, respondents were able to reconcile this message with their tradition of smoking during aboriginal ceremonies. For some, smoking tobacco was not a necessary precondition to participating in ceremonies, while for others they felt that they could participate by smoking tobacco only during ceremonies and not smoking as a regular smoker. Stated simply, there is no evidence that any of the messages offended the participants. In contrary, some embraced the message as sincere, as already discussed above.

- Many smokers and non-smokers in both groups indicated that they were familiar with all the statistics and health consequences – they expressed a real desire to see ads that told them new information or gave them new understanding of the effects of smoking. Instead of negative advertising, they wanted information or assistance on how to stop smoking.

- One statistic had significant impact compared to any others - the 75% of aboriginals who smoke. The proportion was thought to be extremely high, although it was also thought to be very credible and believable. It seemed apparent that aboriginals are not used to being told that smoking is a 'problem' in their communities, since many referred to the numerous other social problems in the aboriginal community, such as alcoholism and teenage pregnancy. Generally, they were pleased to have learned this statistic, which seemed to quench their thirst for "new information" about the impact smoking has had on their people. Very few respondents questioned the incidence of smoking in other ethnic groups, suggesting that this information does not need to be backed up with other secondary information from other ethnic groups.

i. Television Executions

- In both TV executions, respondents were confused who the ads were referring to when it talked about "the victims include up to 75% of <u>our</u> people who smoke". They questioned who the "our people" are, since there is no obvious visual cue that the ads are talking about. Respondents in the first group understood this only because they were read the radio ads first, so it was therefore clear to them that this statistic refers to the proportion of aboriginal people who smoke.
    - Impact of the TV ads would be increased dramatically if there was a strong link between the 75% statistic and aboriginal peoples.
    - The proportion of aboriginal people who smoke was considered strong evidence that smoking is a problem in the aboriginal community.
    - A small number of respondents were confused as to the proportion of aboriginal people who smoke (75%) and the 45,000 smoking-related deaths. They questioned if 75% of the 45,000 deaths were aboriginal people.

- Respondent emotions were stirred the most when images of children were used or facts about children were used. While some respondents had developed habits of not smoking in front of their child, many females and some males in the two groups who had children indicated that the components of the ads which touched on second-hand smoke were very convincing, making them think twice about their own smoking habits. Still, many were sceptical that even these powerful images would motivate them to quit smoking.

Zero

- It was only when the scene shows a picture of an 'elder' did respondents realize that this ad was targeted to them as aboriginals.

- Respondents described this ad as more factual than the Label ad. It was believed that this ad had less emotion, and therefore was perceived to have less impact than the 60 second Label ad.

- The ad was considered easy to follow, credible, and believable.

- Some respondents questioned what programs and initiatives have been developed by Health Canada, since none of the respondents were aware of such programs.

- This ad was preferred by less respondents compared to the Label ad, primarily because it lacked the significant emotion, depth, and dramaticism of the other ad.

Label

- This ad struck an emotional chord with many respondents. Specifically, three scenes seemed to have particular impact on the respondents:
    - The scene discussing second hand smoke on SIDS caused many smokers to seriously think about their own children and the impact that their smoking habits have on their children.
    - The scene discussing asthma among children was also powerful, again because they instantly related their own smoking behaviours on the health of their children.

The scene dealing with impotence made many respondents laugh. Even though the men in the group seemed to have an attitude that this would happen to everyone else but themselves, there is strong indication that this scene will significantly help increase awareness of the ad and its message.

- Overall, the message in the ad was considered as shocking for most respondents because of it played on images and impacts of smoking on children
- Respondents considered this ad to be believable, credible, and easy to understand.
- Despite the strong emotion, few felt that the ad would have any meaningful impact on their own smoking habits. It was felt that people have to quit for themselves, not because of an ad they see on television.
- Overall, this ad tested the best of the television ads.

ii. Aboriginal Radio Ads

Doctor

- The use of an aboriginal doctor in this ad was considered to be very effective. Respondents felt that hearing the voice of an aboriginal person speaking would instantly catch their attention. Moreover, the ad has a lot of impact when they learn that the announcer is also a doctor. For most respondents, this ad was considered very credible as a result of it being an aboriginal doctor.

- Clearly, the most powerful component of the message was the proportion of aboriginals who smoke – 75%. Respondents found this statistic surprising, but very believable. Generally, it elevated their concern about smoking among their community.

- The statement "And I'm speaking from experience" was also very effective, since it suggested one of two things: 1) the doctor is an ex-smoker, thus adding credibility; or 2) he knows from experience that smoking is a major problem as a result of his profession.

- This ad tested very well in the groups, and clearly was considered a favourite of many respondents.

Label

- While not explicitly mentioned, it is clear from respondent reactions that the lack of any aboriginal linkage in this ad is its major downfall. While the message contained the same reference to 75% of aboriginal people who smoke, the power of the entire ad was diminished because it was clearly less relevant to their community.

- The statements referring to labels on children's toys were considered effective by some respondents. However, more pragmatic respondents rejected the symbolism as ridiculous.

- Respondents noted that there was a lack of emotion in this ad. Consequently, it was rare that respondents chose this ad as their favourite.

Zero

- Similar the Doctor radio spot, the use of aboriginal music in the background was thought to be effective at gaining their attention.

- Respondents described this ad as effective because of the dramaticism. The use of echoes was thought to be particularly effective at communicating the important components of the message.

- Again, the component of this ad that was the most effective was the fact that 75% of natives smoke cigarettes.

- Some pragmatic respondents rejected the notion that "cigarette smoke can talk", thereby making the ad less believable for them.

- Overall, however, the dramatic effects made the ad appealing, and therefore was the preferred ad of many respondents.

iii. Aboriginal Print Ads

Note: Only three of the print ads were tested because they arrived late from the printer. Ads tested were one newspaper ad (appears to be a ¼ page ad with a headline "The warning signs are everywhere"), one colour ad with several aboriginal doctors, and one two-page magazine ad. Further, discussion of print ads in one of the groups was truncated because materials arrived late – instead, there was significant focus on the radio ads as a result.

Doctors

- The headline was thought to be catchy and effective. Using aboriginal doctors was effective for the same reasons it was effective in the radio ads – they lend instant credibility among the target population.

- However, because the ad was in such early form, the message didn't communicate enough for many of the them to be attracted to it.

The Warning Signs are Everywhere

- This newspaper ad was thought to convey the right amount of information.

- The "More to Come" was confusing to many respondents.

- Many thought the images of the child and the hockey player would integrate well with the television ad "Zero".

- Respondents felt that the bulleted information in the ad would be the first thing they would read.

Two-Page Magazine Ad

- Many respondents felt this ad was too long and detailed. Most felt they would not read it because of the length.

- The images were thought to be similar to the TV ad "Zero", but some questioned the meaning of the images.

- The use of red in the ad certainly attracted their attention, and the red WARNING was thought to be effective.

- The second page was thought to be effective at communicating lots of detailed information, and they liked the Facts that Stick portion of the ad.

iv. Overall Campaign

- Generally, respondents felt that these ads do not increase their knowledge of the health risks associated with smoking. They already feel very well informed – many referred to the impact that images and statements on cigarette packages have had on their awareness levels.

- The ads did not clearly communicate the Government's position against the tobacco companies. Respondents did not feel any more enlightened with regards to how they are dealing with the industry.

- Most respondents felt that the Government is creating these ads because of the ailing health care system with the hopes of saving health care dollars for the future.

B. Iqaluit

Observations and Results

- Participants in both groups had a good general knowledge of the public information on health effects and described the purpose of this information as being ....smoking is bad: *"because they're saying its bad for you and we're not listening".*

- One person in each group had an interesting theory around cigarettes and health effects. In the noon group a male indicated that the reason there is so much information on smoking is that the media likes to cover exciting stories. In the 2pm group a female stated that fossil fuels and other contaminants were equal, if not greater, contributors to the identified health effects and that cigarette smokers were scapegoats.

- Participants expressed a range of views on whether the 60 second spot was appropriate in length and content. One participant suggested a series of related 15 second commercials, and another suggested a documentary. For personal preferences 7 of 11 chose a 60 second TV commercial.

- Participants generally had a stronger reaction to visuals (children, pregnant women, special effects zero) and audio effects (whispers) then text/narrative (except for the specific warning labels like "cigarettes hurt babies", and "don't poison us"). This was also true in relation to responses to what had an emotional impact. Emotional impact was very difficult to identify either verbally or through body language, but the responses referred primarily to the impact of images.

- The impact of the effects of second hand smoke on children, family, and co-workers/friends was dramatic.

- Participants overwhelmingly thought the ads were believable, except the female participant with the fossil fuels theory and one male participant both of whom questioned the credibility/substantiation of the statistics.

- There was practically no response to the issue of whether these campaigns would increase support of government initiatives, except in one print and one radio ad. While the participants supported the ads, they barely reacted to the question on government support. A couple of participants noted that the government also regulates (and more significantly taxes) tobacco. Quotes... "what do I do, because I smoke I wouldn't know who to help." and "the message is coming from government. I don't think of the government as a person." It was suggested that the government could be focusing on public education in the schools and in Aboriginal communities in an effort to prevent children from starting to smoke.

- While the ads educated the participants about the health risks and applicability of the problem to all Canadians, the ads were no where near strong enough to get participants to consider quitting or any other immediate action. The 2 pm group had a strong positive response to quitting in reaction to the 60 second label TV ad in subsequent questioning most of the participants in both groups only indicated a willingness to consider reducing their smoking and to be more careful of where, and around whom, they light up. The "fossil fuels" participant did acknowledge her addiction and said she would quit if there was more government support such as treatment centers/programs to help her deal with the withdrawals from nicotine addiction. This was supported by others in the group as well.

- While a few would talk to other smokers and non-smokers, even the one non-smoker said it was an individual decision/choice to quit.

- There was a strong sense of general support for stronger measures to reduce tobacco (8 of 10)

- No participant mentioned the phrase "that's the good you can do"

Most Effective Executions

Generally, participants selected the same ads as their most liked and most convincing, although there were a few shifts.

For TV of 5 of 10 (one participant left early) chose the 60 second Label ad as most liked and most effective. It was suggested that the line "we know it is hard to quit" be changed to something more assertive like "it is possible to quit"

For print, 5 of 10 chose the first print ad (its unanimous – one page) as the most effective ad and 5 of 10 chose the 45,000 victims ad as the most effective. On the print ad they did caution that the Inuit presence in the medical/health care profession not be overstated (for example, there is not a known Inuk Physician in Nunavut) and that established northern medical practitioners or health care workers, native or non-native, would be acceptable and not undermine their responsiveness to the opinions of professionals.

For Radio the noon group had a strong positive response to the audio effect of the whisper ad and chose it as both the most liked (3 of 4) and most effective (4 of 4). The 2 pm group had a strong negative reaction to the whisper ad (we were taught that whispering is rude) and chose the doctor/health care worker ad (4 of 6) as the most effective.

Recruiting Screener
General Population

December 21st - **Saskatoon**
- **Iqaluit**

Time: 6 p.m.
Incentive: $50.00
Recruit 10 participants for 8-10 to show

Respondent's name: _____

Respondent's phone #: work _____ home _____

Hello, my name is _____. I'm calling from POLLARA, the national public opinion research organization. We're organizing a discussion group to explore current issues. **EXPLAIN FOCUS GROUPS.** About ten people like yourself will be taking part.

Participation is voluntary and all your answers are confidential. They will be used for research purposes only. We are simply interested in hearing your opinions – no attempt will be made to sell you anything. The format is a "round table" discussion lead by a research professional. An audio/video tape of the group session will be produced for research purposes. The tapes will be used only by the researcher to assist in preparing a report on the research findings and will be destroyed once the report is completed. But before we invite you to attend, we need to ask you a few questions to ensure that we get a good mix/variety of people. May I ask you a few questions?

Yes	1	CONTINUE
No	2	**THANK & DISCONTINUE**

1) Would you be available to attend a discussion group on _____ **(INSERT DATE) at 6:00pm?** It will last two hours and you will receive $50.00 for your time.

Yes	1	CONTINUE
No	2	**THANK & TERMINATE**

2) Are you, or any members of your household, employed in or retired from...**(READ LIST)**

	Yes	No
Market research	1	2
Advertising, marketing, public relations	1	2
Any media (e.g., print/radio/TV)	1	2
Medical field (e.g., doctor, nurse)	1	2
Tobacco Industry	1	2
Government	1	2
Legal profession	1	2

IF YES TO ANY, THANK & TERMINATE

3) Are you a member of the Aboriginal community?

Yes – ASK: Which Aboriginal group do you belong to?
_____ (ACCEPT ONLY FIRST NATIONS MEMBERS)

No	THANK & TERMINATE
Don't know/Refused	THANK & TERMINATE

4) What age category do you fall in? **(READ LIST and RECRUIT A GOOD MIX)**

Under 18	1	**THANK & TERMINATE**
18 to 50	2	CONTINUE
51 and over	3	**THANK & TERMINATE**
Refuse	9	**THANK & TERMINATE**

(MUST BE ARTICULATE AND RESPONSIVE)

5) We want to get both smokers and non-smokers in the focus group. Which of the following categories do you fit in? **(READ LIST and RECRUIT A GOOD MIX)**

Non-smoker	1	**CONTINUE** (no more than 6)
Smoker	2	**CONTINUE** (no more than 6)

6) Have you ever attended a consumer group discussion, an interview or survey which was arranged in advance and for which you received a sum of money?

Yes	1	**CONTINUE**
No	2	**GO TO Q7**

7) When was the last time you attended a group? _____
(THANK & TERMINATE IF IN THE PAST 6 MONTHS IF NOT, CONTINUE)

8) Sometimes participants are asked to write out their answers to a questionnaire, read or watch a video during the discussion. Is there any reason why you could not participate?

Yes	1	**THANK & TERMINATE**
No	2	CONTINUE

9) Gender **(DO NOT ASK – BY OBSERVATION ONLY)**

Male	1
Female	2

10) Which of the following best describes your level of education?

(RECRUIT A GOOD MIX)

Less than high school	1
High school	2
Some college/university	3
Graduated from college/university	4
Post graduate	5

As I mentioned earlier, the group discussion will take place on _____ **for two hours**. Would you be available to attend?

Yes	1	
No	2	**THANK AND DISCONTINUE**

We ask that you arrive fifteen minutes early to be sure you find parking, locate the facility and have time to check-in with the hosts. The hosts may be checking respondent's identification prior to the group. Please be sure to bring some personal identification with you (i.e. driver's license). Also, if you require glasses for reading, please bring them with you.

As we are only inviting a small number of people, your participation is very important to us. If for some reason, you are unable to attend, please call so that we may get someone to replace you. You can reach us at our office. Please ask for _____.

May I please get your name: **ON FRONT PAGE**

Thank you very much for your help!

Recruiting Screener
Opinion Leader

December 21ST - **Saskatoon**
- **Iqaluit**

Time: 8 p.m.
Incentive: $75.00
Recruit 10 participants for 8-10 to show

Respondent's name: _____

Respondent's phone #: work _____ home _____

Target Profile:

Men and women who are currently or have in the past worked in such areas as:

- Education (Teachers, councillors, etc.)
- Child development, social or child care worker
- Medical services (Nurses, dentists)
- Social services
- Business (small = owner, medium and large = senior officer)
- Community leaders (e.g., Coaches, Scouts Canada, Girl Guides, Youth Clubs, YM/YWCA)
- Opinion leaders in ethnic communities or other community organizations

AND

- Are involved in their communities through various organizations, volunteerism or other form of active participation.

Hello, my name is _____. I'm calling from POLLARA, the national public opinion research organization. We're organizing a discussion group to explore current issues. **EXPLAIN FOCUS GROUPS.** About ten people like yourself will be taking part.

Participation is voluntary and all your answers are confidential. They will be used for research purposes only. We are simply interested in hearing your opinions – no attempt will be made to sell you anything. The format is a "round table" discussion lead by a research professional. An audio/video tape of the group session will be produced for research purposes. The tapes will be used only by the researcher to assist in preparing a report on the research findings and will be destroyed once the report is completed. But before we invite you to attend, we need to ask you a few questions to ensure that we get a good mix/variety of people. May I ask you a few questions?

Yes	1	**CONTINUE**
No	2	**THANK & DISCONTINUE**

1) Would you be available to attend a discussion group on _____ (INSERT DATE) at 8:00pm? It will last two hours and you will receive $75.00 for your time.

Yes	1	**CONTINUE**
No	2	**THANK & TERMINATE**

2) Are you, or any members of your household, employed in or retired from...**(READ LIST)**

	Yes	No
Market research	1	2
Advertising, marketing, public relations	1	2
Tobacco Industry	1	2
Legal profession	1	2

IF YES TO ANY, THANK & TERMINATE

3) Are you a member of the Aboriginal community?

Yes – ASK: Which Aboriginal group do you belong to?
_____ (ACCEPT ONLY FIRST NATIONS MEMBERS)

No	THANK & TERMINATE
Don't know/Refused	THANK & TERMINATE

4) Which of the following areas describes where you work or volunteer your time?

- Education field (Teachers, councillors, etc.)
- Child development, social or child care worker
- Medical services field (Nurses, dentists)
- Social services field
- Business owner (small = owner, medium and large = senior officer)
- Community leader (e.g., Coaches, Scouts Canada, Girl Guides, Youth clubs, YM/YWCA)
- Opinion leaders in ethnic communities or other community organizations

IF YES TO ANY, CONTINUE

5) How involved, or how active, are you in your local community? (Provide example only if asked: "volunteer," "take a great deal of interest in local affairs," "or some other form of activism, e.g., coach, etc."). Would you say you are:

Heavily involved	1	CONTINUE
Somewhat involved	2	CONTINUE
Not involved at all	3	**THANK & TERMINATE**

6) What age category do you fall in? **(READ LIST and RECRUIT A GOOD MIX)**

Under 18	1	**THANK & TERMINATE**
18 to 65	2	CONTINUE
66 and over	3	**THANK & TERMINATE**
Refuse	9	**THANK & TERMINATE**

(MUST BE ARTICULATE AND RESPONSIVE)

7) Have you ever attended a consumer group discussion, an interview or survey which was arranged in advance and for which you received a sum of money?

Yes	1	**CONTINUE**
No	2	**GO TO Q9**

8) When was the last time you attended a group?_____
(THANK & TERMINATE IF IN THE PAST 6MONTHS IF NOT, CONTINUE)

9) Which of the following best describes your level of education?

(RECRUIT A GOOD MIX)

High school or less	1
Some college/university	2
Graduated from college/university	3
Post graduate	4

10 Gender **(DO NOT ASK – BY OBSERVATION ONLY)**

Male	1
Female	2

As I mentioned earlier, the group discussion will take place on _____ **for two hours**. Would you be available to attend?

Yes	1	
No	2	**THANK AND DISCONTINUE**

We ask that you arrive fifteen minutes early to be sure you find parking, locate the facility and have time to check-in with the hosts. The hosts may be checking respondent's identification prior to the group. Please be sure to bring some personal identification with you (i.e. driver's license). Also, if you require glasses for reading, please bring them with you.

As we are only inviting a small number of people, your participation is very important to us. If for some reason, you are unable to attend, please call so that we may get someone to replace you. You can reach us at our office. Please ask for _____.

May I please get your name: **ON FRONT PAGE**

Thank you very much for your help!

Moderator Guide

Focus Group Testing of "Health Care Workers", "Label" & "Zero" Concepts with First Nations/Inuit

(General Population and Opinion Leaders)
December 2001

A. Introduction (10 minutes)

Welcome to our discussion group. Let me tell you what we are going to be up to. Explain:

- Two-way mirror, video and audio-taping.
- Clients behind the mirror (if appropriate)
- Confidentiality of their comments.
- Role of moderator is to keep everyone on track, make sure we get through our questions in time allotted
- All opinions are important, no right or wrong answer.

Today/tonight I'm going to show you some ads about tobacco. I would like to get your opinion on them. These are rough cuts, not finished products. To start, we have one video and three possible scripts for voice-overs that are being considered.

- By the way, how many here smoke? For those that do (or did), ask what brand they smoke (smoked).
- What kind of things have you been hearing about lately in the news about tobacco and smoking?
- Why do you think you have been hearing about these things?
- What kinds of things have you heard about the effects of smoking? On smokers? On non-smokers? (PROBE FOR: Health effects; number of deaths)

B. TV Exposure and Reaction: "Label" & "Zero" (30 minutes)

"Put your imagination hat on. You're sitting at home watching television, the program you are watching goes to commercial break – maybe you get up to go to the kitchen, whatever it is that you normally do when the commercials come on. And imagine this ad comes on."

MEMORABILITY TEST

- Read script and show visuals for "Label" 60 second spot

Please jot down a sentence or so about what that ad is saying.

- Read script and show visuals for "Label" 30 second spot

Please jot down a sentence or so about what that ad is saying.

- Read script and show visuals for "Zero" 60 second spot

Please jot down a sentence or so about what that ad is saying.

- Read script and show visuals for "Zero" 30 second spot.

Please jot down a sentence or so about what that ad is saying.

Ask participants to complete balance of the questionnaire (under separate cover)

MODERATOR TO LEAD DISCUSSION

Begin discussion with "Label" 60s and 30s – probe for preferences

FOR 60 SECOND SPOT PROBE: **FOR LENGTH OF SPOT, IS IT TOO LONG, IS THERE TOO MUCH/NOT ENOUGH INFO CONTAINED IN IT, ETC)**

- What first came to mind when you saw this ad? What sort of thoughts came into your mind? (PROBE) What was it about the ad that caused you to think that way?
- Did this ad catch your attention? Why?
- Was this ad clear and understandable? Why?
- Is it believable? Why?
- Does it have any emotional impact for you personally? Why?

- Does it make you think that the Government of Canada deserves your support in this initiative? Why?
- Would seeing this ad on TV motivate you to support programs and policies to reduce tobacco use?
- Would seeing this ad on TV. convince you to quit smoking or not take it up? Why?
- For the non-smokers, would seeing this ad on TV convince you that smoking is a problem that all Canadians should be concerned with?
- Probe (if nothing forthcoming): is there anything in these ads that makes you feel very uncomfortable? (GO AROUND TABLE, ELICITING RESPONSES FROM ALL)
- Repeat discussion with "Zero" TV executions (60s and 30s) probe for preferences
- Which of these four ads did you like most? Why?
- Which of the four ads do you think would be most effective at convincing people of the problems caused by smoking? Why?

C. Print Exposure & Reaction (20 minutes)

The moderator will hand out the copies of print executions in rotation. Obtain reaction to the messages for each execution along the following criteria: credibility, relevance, believability, clarity, motivational, etc.

- Display print #1 Health Care Workers Concept

Please jot down a sentence or so about what this ad is about.

- Display print #2 "Health Care Workers" Concept

Please jot down a sentence or so about what this ad is about.

- Display print #1 "Label" Concept

Please jot down a sentence or so about what this ad is about.

- Display print #2 "Label" Concept

Please jot down a sentence or so about what this ad is about.

- Display print #1 "Zero" Concept

Please jot down a sentence or so about what this ad is about.

- Display print #2 "Zero" Concept

Please jot down a sentence or so about what this ad is about.

Ask participants to complete balance of the questionnaire.

Discussion: Begin with Health Care worker 1&2 – discuss concept, probe for preferences

- Ask for a show of hands for each of the following questions:
  - Which version did the best at catching your attention? Why?
  - Which version did you find the most clear and understandable? Why?
  - Which version is the most believable? Why?
  - Which version has the most emotional impact for you personally? Why?
  - Which version makes you think that the Government of Canada deserves your support in this initiative? Why?
  - Which one, if any, would best convince you to quit smoking or not take it up? Why?
  - Which ad fits best with the version of the television ad you thought was best?

Repeat discussion for:

- "Label" 1&2
- "Zero" 1&2

Which of the six ads did you like most? Why?

- Which of the six ads do you think would be most effective at convincing people of the problems caused by smoking? Why?

D. Radio Exposure & Reaction (20 minutes)

The moderator will play audio tapes of radio executions in rotation. Obtain reaction to the messages for each execution along the following criteria: credibility, relevance, believability, clarity, motivational, etc.

- Play Radio Spot for "Health Care Workers" Concept

Please jot down a sentence or so about what this ad is about.

- Play Radio Ad for "Label" Concept

Please jot down a sentence or so about what this ad is about.

- Play Radio Ad for "Zero" Concept

Please jot down a sentence or so about what this ad is about.

Ask participants to complete balance of the questionnaire.

- Did this ad catch your attention? Why?
- Was this ad clear and understandable? Why?
- Is it believable? Why?
- Does it have any emotional impact for you personally? Why?
- Does it make you think that the Government of Canada deserves your support in this initiative? Why?
- Would seeing this ad on t.v. convince you to quit smoking or not take it up? Why?
- Would it make you discuss smoking with people you know who are smokers?

Repeat discussion for "Label" and "Concept" individually

Which of the three ads did you like most? Why?

- Which of the three ads do you think would be most effective at convincing people of the problems caused by smoking? Why?

E. Overall campaign (30 minutes).

- Do these campaigns help you better understand the health risks associated with cigarette smoke? Is one more effective than the other? Why?
- Do these campaigns help you better understand the Government of Canada's actions with the tobacco companies? Do you support them? Why? Why not? Is one more effective than the other? Why?
- The Government of Canada wants to make people more aware of the risks associated with tobacco products. Why do you think they want to do that? Should they be involved? Why, why not?
- Does this make you think we need stronger measures to reduce tobacco?
- Does this make you think that smoking is a problem for all Canadians?
- For those who smoke, does this encourage you to take action to quit? To reduce the amount you smoke?
- For those of you who don't smoke, but maybe know someone who does, does this encourage you to try to convince those people to quit smoking?

F. Wrap-up (10 minutes)

- Appoint a temporary moderator from participants. Ask group to summarize the focus group.
- Moderator to solicit questions from clients. Ask questions.
- Do you have any final comments?
- Thank you for your time.

TV-A-GP/OP

1. Please jot down a sentence or so about what ad #1 is saying.

2. Please jot down a sentence or so about what ad #2 is saying.

3. Please jot down a sentence or so about what ad #3 is saying.

4. Please jot down a sentence or so about what ad #4 is saying.

3. Which ad was the best at catching your attention?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] Same
[ ] None

4. Which ad was most clear and understandable?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] Same
[ ] None

5. Which ad was most believable?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] Same
[ ] None

6. Which ad had the most emotional impact for you personally?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] Same
[ ] None

7. Which ad makes you think that the Government of Canada deserves your support in this initiative?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] Same
[ ] None

8. Which ad would best convince you to quit smoking or not take it up?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] Same
[ ] None

9. Which ad would make you discuss smoking with people you know who are smokers?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] Same
[ ] None

10. Which ad made you feel most uncomfortable?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] Same
[ ] None

11. Which ad did you like most?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] Same
[ ] None

12. Which ad do you think would be most effective at convincing people to stop smoking?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] Same
[ ] None

13. Which ad do you think would be most effective at convincing people not to start smoking?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] Same
[ ] None

Print-A-GP/OP

1. Please jot down a sentence or so about what ad #1 is saying.

2. Please jot down a sentence or so about what ad #2 is saying.

3. Please jot down a sentence or so about what ad #3 is saying.

4. Please jot down a sentence or so about what ad #4 is saying.

5. Please jot down a sentence or so about what ad #5 is saying.

6. Please jot down a sentence or so about what ad #6 is saying.

7. Which ad was the best at catching your attention?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] # 5
[ ] # 6
[ ] Same
[ ] None

8. Which ad was most clear and understandable?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] # 5
[ ] # 6
[ ] Same
[ ] None

9. Which ad was most believable?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] # 5
[ ] # 6
[ ] Same
[ ] None

10. Which ad had the most emotional impact for you personally?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] # 5
[ ] # 6
[ ] Same
[ ] None

11. Which ad made you think that the Government of Canada deserves your support in this initiative?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] # 5
[ ] # 6
[ ] Same
[ ] None

12. Which ad would best convince you to quit smoking or not take it up?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] # 4
[ ] # 5
[ ] # 6
[ ] Same
[ ] None

Radio-A-GP/OP

1. Please jot down a sentence or so about what ad #1 is saying.

2. Please jot down a sentence or so about what ad #2 is saying.

3. Please jot down a sentence or so about what ad #3 is saying.

4. Which ad was the best at catching your attention?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] Same
[ ] None

5. Which ad was most clear and understandable?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] Same
[ ] None

6. Which ad was most believable?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] Same
[ ] None

7. Which ad had the most emotional impact for you personally?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] Same
[ ] None

8. Which ad makes you think that the Government of Canada deserves your support in this initiative?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] Same
[ ] None

9. Which ad would best convince you to quit smoking or not take it up?

[ ] # 1
[ ] # 2
[ ] # 3
[ ] Same
[ ] None

No AMICUS 28177905
Monographie

EXEMPLAIRES BNC: Conserv autr édifice - COP.CA.2.2003-1319 - AUCUN PEB
P.O.C. - COP.CA.2.2003-1319 - Copy 2

NOM(S): Canada. Health Canada
POLLARA (Firm)

TITRE(S): *Qualitative research with focus group testing of social marketing creative concepts for the tobacco control positioning strategy among Aboriginal Canadians : report of focus group findings / submitted to Health Canada

ÉDITEUR: [Ottawa] : Health Canada, 2001.

DESCRIPTION: 34 leaves ; 29 cm.

NOTES: Issued also in French under title: Groupes de discussion sur l'évaluation ... pour la stratégie de positionnement du contrôle du tabac parmi les autochtones canadiens, rapport des résultats des groupes de discussion.
"POR-01-40".
"POLLARA".

NUMÉROS: Canadiana: 20037024507

No AMICUS 27951034
Monographie

EXEMPLAIRES BNC: Conserv autr édifice - COP.CA.2.2003-55 - AUCUN PEB
P.O.C. - COP.CA.2.2003-55 - Copy 2

NOM(S): Canada. Health Canada
POLLARA (Firm)

TITRE(S): *Qualitative research with focus group testing of social marketing creative concepts for the tobacco control positioning strategy : final report of focus group findings / submitted to Health Canada

ÉDITEUR: [Ottawa] : Health Canada, 2001.

DESCRIPTION: 30 leaves ; 29 cm.

NOTES: Cover title.
Issued also in French under title: Recherche qualitative en groupes de discussion ... nouveaux concepts pour la stratégie de positionnement relative à la lutte au tabagisme.
"POR-01-39".
"POLLARA".

NUMÉROS: Canadiana: 20037004123

CLASSIFICATION: Dewey: 362.29 13

MATIÈRES: Cigarette habit--Canada--Prevention--Evaluation
Government advertising--Canada--Evaluation
Tabagisme--Canada--Prévention--Évaluation
Publicité d'État--Canada--Évaluation