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*Phase IV of 2002 Youth Anti-Tobacco Campaign
Development – Triad Groups among Youth
to Identify and Optimize Creative Concepts*

Final Report

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INTRODUCTION

The activities of the Office of Mass Media and the Communications Branch of Health Canada have been identified as important partners in the development of a comprehensive and integrated approach to tobacco control efforts. Youth have been identified as a strategic priority for these efforts. A youth campaign targeted to air in Fall 2002 will build on and support tobacco control activities undertaken at the national, provincial, territorial and regional levels in the areas of second hand smoke, smoke-free spaces, prevention, cessation, education and harm reduction, and help support strategic objectives.

The research will encompass both qualitative and quantitative components.

• The primary objectives of the qualitative portion of the research are as follows:

- 1 • To determine main message communicated by each creative concept in order to assess delivery against strategy;
- 2 • To identify which creative concepts are most relevant and motivating against tobacco perceptions and behaviours;
- 3 • To optimize these creative concepts to resonate with Canadian youth.; and,
- 4 • To dimensionalize how we can best mobilize youth behind these concepts (where relevant).

Secondary objectives include:

- 5 • To probe the roles of advocacy and mobilization within the specific context of each creative concept; and,
- 6 • To identify appropriate media opportunities within the context of each creative concept.

The primary objectives of the quantitative portion of the research are focused around obtaining preliminary insights from youth 14-19 halfway through the overall campaign, e.g. ad recall issues, whether they or their friends are discussing the ads and whether it is leading to contemplation about behavioural change.

METHODOLOGY

Qualitative Methodology

These findings are based on 16 triad gender-specific focus groups conducted in Montreal and Toronto among youth within two age ranges (between the ages of 14 and 16, and 17 and 19) and two groups in Winnipeg among off-reserve Aboriginal youth within the same age range. The groups in Toronto and Montreal were 1.5 hours in duration. The groups in Toronto and Montreal were further segmented between smokers and non-smokers. In Winnipeg, the two groups involved both smokers and non-smokers, and were segmented by age. The groups in Winnipeg were 2 hours in duration. The groups were conducted between September 9 and September 14, 2002.

In each focus group, participants were shown the creative concepts on a coloured storyboard and/or as a print ad.

With the exception of the creative concept "Stick It", all creative concepts that were tested involved at multiple treatments (storyboards and print ads) least one storyboard and one print treatment. Five concepts were evaluated and discussed:

Concept	Description of Concept	Storyboards Tested	Print Ads Tested
"Win"	A contest to win a disease from second-hand smoke	2	2
"DSS"	Diseases from second-hand smoke	1	2
"Guilty"	The role of the tobacco industry and second-hand smoke	1	2
"It's a Crime"	Second-hand smoke as a deadly weapon	1	1
"Stick it"	Second-hand smoke and stickers	0	1

Some of the creative concepts included the blue ribbon "Breathe air, not smoke" and the tagline "Don't trust the tobacco companies, second hand smoke kills".

Additionally, participants were given a questionnaire to complete, probing their overall views of the creative concept, their perceptions of the concept's main message and its target audience.

Participants were also asked to rank each concept on the following attributes: believability, appropriateness for Health Canada, provision of new information, attention getting and whether it would encourage them to think about SHS. Additionally, participants were asked to rank the concepts ability to communicate the dangers of second hand smoke and the fact that second hand smoke is a serious problem. Due to the highly qualitative nature of focus groups, the results outlined in this report should be considered directional and as input into the development of Health Canada's communications/advertising strategies, rather than statistically representative of the general public.

A copy of the recruitment screener, the moderator's guide and creative concepts are included in the appendices.

Quantitative Methodology

Ipsos-Reid conducted a national random telephone survey between January 17th and 23rd, 2003, among 300 youth between the ages of 14 and 19. The final sample of youth had been weighted by region.

QUALITATIVE STUDY

KEY FINDINGS

Among youth participants, knowledge of the dangers associated with second-hand smoke (SHS) was mixed. When asked, many participants demonstrated an initially narrow perspective on the possible effects of second-hand smoke. Second-hand smoke was often seen as smelly and unpleasant for those who do not smoke. Other participants indicated that exposure to second-hand smoke could increase one's chances of developing cancer. Few youth participants demonstrated any real awareness of other diseases associated with second-hand smoke (DSS). However, during and following the concept testing, participants demonstrated both a desire and a belief that everyone needs to gain a greater understanding of the dangers associated with exposure to second-hand smoke. This desire, although sometimes reluctant, was also present among the smokers.

Participants demonstrated a strong receptiveness towards strong concepts. Testimonial advertisements involving images such as "Debbie" were cited by many as a good example of this type of ad. They felt that a concept involving "Heather", a woman with lung cancer as a result of SHS, would be effective as well. However, some participants felt that this concept had already "been done." Having said that, the only anti-smoking advertisements voluntarily recalled by youth participants are hard-hitting ones such as "Debbie" and those involving children talking about how their parent is no longer around to see them grow up.

Participants demonstrated a willingness to move beyond safe or comfortable concepts towards those that are perceived as hard-hitting. Concepts involving SHS and targeting youth should include the following:

- information that conveys the message that exposure to SHS is dangerous,
- information that moves beyond the message that SHS is dangerous, detailing the health consequences of SHS (DSS),
- strong visuals portraying DSS and young persons,
- information that empowers youth to speak up to others about not being silent about someone smoking around them or others,
- strong concepts and taglines that challenge one's ability to "tune out" information about SHS, particularly information that they may consider old news (i.e., targeting the tobacco industry), and
- "DSS", the tag line "Don't trust the tobacco industry, second-hand smoke kills" and the blue ribbon.

The concept "Win a Contest" emerged as the clear winner. This concept was perceived as grabbing one's attention and challenging one's comfort zone. It was seen as being informative and forcing one to consider the harmful effects of SHS.

Although the smokers reacted somewhat defensively and felt that this concept makes fun of sick people, they indicated that the SHS message delivered by "Win a Contest" was clear, hard-hitting and effective. This concept demonstrated the strongest potential as a call to action. Additionally, several participants felt that this concept is not what one expects of Health Canada, and that that was a good thing.

The concepts "Win a Contest", "DSS" and "It's a Crime" are all seen as raising awareness of SHS. In detailing "DSS", "Win a Contest" and "DSS" were regarded as the most informative. The DSS TV concept, although favourably received and demonstrating some ability as a call to action, did not engender as strong a reaction from the participants. The TV concept needs additional information on the specific diseases of DSS.

The TV concept "It's a Crime" received mixed reviews among participants. While it was not well received in Montreal, participants in Winnipeg and Toronto, particularly the males, related to the concept's visual presentation of the street setting, the youth, the sense of danger and the association made between SHS and "Assault with a Deadly Weapon". While acknowledged as strong and very hard-hitting, many demonstrated a willingness to consider the concept's linkage of "Assault with a Deadly Weapon" to SHS. Again, while smokers reacted defensively to the criminalization aspect of this concept and SHS, several acknowledged that the strong message was thought-provoking. Similar to "Win a Contest", this concept was favourably regarded as a departure from the usual Health Canada advertising. The tag line "You have the right not to remain silent" received some mixed reactions, as some participants felt that it worked, while others felt it was awkward. This concept also demonstrated some potential as a call to action.

The concept "Guilty" was not a strong performer, and many participants felt that it wasn't telling anything that they didn't already know. While "Guilty" could be regarded as a safe concept, it demonstrates little ability to be a "call to action" or to make youth think about the dangers of SHS. Often, smokers felt targeted and were moved to defend the tobacco industry, indicating that they felt it was unfair to shift the entire blame for smoking and SHS onto that industry. Aside from their defence of the tobacco industry, some participants felt that this was a "finger-pointing" exercise on the part of the government. One participant who felt that this concept did not tell them anything new, said that it reminded them of a "YTV ad."

An interesting point emerging from discussions around the "Guilty" concept is the misperception among participants that the tobacco industry is willingly providing Canadians with information about the dangers of smoking. In particular, many participants incorrectly believe that the tobacco companies voluntarily provide the toxic constituency information and the graphic health consequence pictures contained on the cigarette packages in Canada. Somehow, they do not give the Government of Canada credit for informing them about the dangers of smoking in this way.

Most participants felt that the line "Don't trust the tobacco industry, second-hand smoke kills" is appropriate for the concepts. Additionally, most felt that the blue ribbon would also be appropriate. Few participants indicated that they would call the 1-800 number or visit the Web site for more information about SHS.

The Aboriginal youth in Winnipeg felt it is important that they see members of their community in any anti-smoking or SHS advertisements developed and used by Health Canada. Only one Aboriginal youth cited the sacred role that tobacco plays within his culture. Participants were more likely to provide anecdotes about the prevalence of smoking in and around them and its impact on young children. They were also supportive of Health Canada's anti-smoking and SHS initiatives.

PARTICIPANTS AND SHS

Among youth participants, knowledge of the dangers associated with second-hand smoke (SHS) was mixed. When asked, many participants demonstrated an initially narrow perspective on the possible effects of second-hand smoke. Second-hand smoke was often seen as smelly and unpleasant for those who do not smoke. Other participants indicated that exposure to second-hand smoke could increase one's chances of developing cancer. Few youth participants demonstrated any real awareness of other diseases associated with second-hand smoke (DSS).

"Second-hand smoke is smelly. After being out, my clothes stink."

"It is as harmful as smoking."

"It is more harmful for non-smokers, isn't it? Smokers have filters."

"We aren't exposed to it very much anymore because of the non-smoking by-laws."

"My little brothers and sisters don't like it when I smoke around them."

"I'm careful, I don't blow smoke in anyone's face."

"Second-hand smoke is bad for people with allergies or asthma."

"It's not a problem, all my friends smoke."

"I know second-hand smoke is dangerous, we talk about smoking in my family."

For the most part, participants felt that SHS is a problem for everyone. In Winnipeg, among the Aboriginal youth, there was an understanding that others, specifically younger family members, are the most likely to be impacted by the harmful effects of second-hand smoke. Children are viewed as innocents who do not have a choice as to whether or not they are exposed to SHS.

Most participants felt that people (other than children) who are concerned about the effects of second-hand smoke have the choice to move away from smokers.

POST CONCEPT TESTING AND SHS

During and following the concept testing, participants demonstrated both a desire and a belief that everyone needs to gain a greater understanding of the dangers associated with exposure to second-hand smoke. This tendency, although sometimes reluctant, was also present among the smokers. Following the creative concept testing, some groups were asked whether or not their viewpoint on second-hand smoke had changed. Almost all of those who were asked agreed that it had. Even some smokers felt that while they weren't likely to change their smoking behaviour, it was important that others, particularly the innocent such as young children, not be negatively impacted by second-hand smoke.

CREATIVE CONCEPT TESTING

For a complete description of the concepts, please refer to Appendix III.

"Win"

The concept "Win" emerged as the most effective and proactive concept of those tested. Overall, participants felt that it had the greatest impact. In Winnipeg, Montreal and Toronto, this concept performed the strongest. It was seen as attention-getting and effective in terms of conveying the harmful effects of second-hand smoke. Non-smokers and smokers alike found the image of the young child in the hospital bed disturbing, and were moved by the plight of the innocent child. The image of the child was viewed as much more effective than that of the older person. While smokers demonstrated unease with the concept, in that they felt it was annoying, that it perhaps goes a little too far and that through the use of the contest it made fun of people who are seriously ill, they recognized the strong message and the effectiveness of the concept. Overall, the smokers, when pressed as to which ad would provide the most information and which they would be most likely to remember, agreed that the "Win" concept was the most effective.

"It makes me feel sorry for the child. The older person has lived their life."

"I think that it makes fun of people who are sick."

"You need strong pictures like that."

"It is harsh, but it gets people's attention."

"I don't want to see anyone I know end up like that kid."

"It makes me want to talk to people about second-hand smoking."

Interestingly, many participants felt that this type of treatment is not what would be typically expected from the Government of Canada or Health Canada. Having said this, most (specifically, non-smokers) felt that this was a refreshing change, and that these types of advertisements would be very effective in getting people to talk about second-hand smoke. This concept demonstrated the strongest potential as a call to action. Regardless of their opinion, these ads were most likely to evoke strong opinions among all participants, and when forced to trade off concepts, were most likely to be preferred or to run a close second.

Some suggested improvements (The television advertisement);

- choose the child as the patient;
- convey the message that the mother is a smoker; and
- consider the effectiveness of a serious voice rather than the promotional voice.

Suggested improvements (The print advertisement):

- reconsider the current colours – images could be clearer, and therefore harder hitting;
- use a young person who appears ill; and
- make the hospital equipment (chemo) more immediately apparent.

"DSS"

In Winnipeg, Montreal and Toronto, the concept dealing with DSS (Diseases from Second-hand Smoke) were perceived by many as providing new and useful information about the diseases associated with second-hand smoke. Many participants indicated that they had been unaware of the diseases associated with second-hand smoke. When asked, many indicated that they would talk to others about the diseases associated with second-hand smoke. In Winnipeg, the Aboriginal participants often cited specific family members or friends they would talk to about DSS.

"DSS is good, I didn't know about it before this."

"DSS is good. It is like other diseases, and DSS puts a name on the diseases that you can get from second-hand smoke."

"DSS is something I will remember. I think that it is something that should be used to teach people about DSS."

Additionally, the slogan was well received. While the "DSS" television concept does appeal to some participants, there was a common perception in Montreal and Toronto that the current set-up is unrealistic. Participants felt that the television concept could be enhanced by the following:

- re-examination of the set-up, which is currently unbelievable; and
- the addition of a slide specifying the DSS diseases.

In Toronto and Winnipeg, most participants acknowledged that the line used in the "DSS" ad is catchy. The participants agreed that the use of slang such as the word "screwed" is catchy and appealing to youth their age. In Winnipeg, Toronto and Montreal, there was a consensus that although the print ad provided valuable information about DSS, it was too wordy, too small and too hard to see. Additionally, the visual performed poorly.

Suggested improvements to the "DSS" print ad:

- replace the visual with a distinguishable image involving a hard-hitting image and the effects of second-hand smoke;
- list the diseases from second-hand smoke in a concise manner; and
- use a font size, colour and background that enhance the readability of the information.

"Guilty"

In Montreal and Toronto, the concept "Guilty" received mixed reviews. Toronto youth were somewhat more receptive to this concept compared to either Winnipeg or Montreal. For the most part, there was a consensus among the participants that the concept wasn't really telling them anything new about the tobacco industry. In Toronto, this perception tended to be the strongest among the smokers, who demonstrated a marked reluctance to "blame" the tobacco companies. In Montreal, the television concept was perceived as finger-pointing by the Government of Canada. However, the television concept was acknowledged as amusing, and many participants, particularly the males, liked the use of the lie detector. Most participants generally accepted the lie detector, the dream sequence, the wit of the TV ad and the hard take on the tobacco industry. In Winnipeg, this concept was not well received. Aboriginal youth had little reaction to this concept. One participant cited the special role that tobacco has within their culture and the fact that the tobacco industry has no right to exploit it. When further prompted about the tobacco industry and SHS, Aboriginal respondents did not feel that the concept provided much information about SHS, and they didn't really identify strongly with the concept's vilification of the tobacco industry. The participants generally did not suggest any improvements to the television concept.

The print concepts for "Guilty" received mixed reviews. While some participants were able to grasp the use of the paper shredder as a proxy for the deceitfulness of the tobacco company, many did not. In Winnipeg and Toronto, there was a stronger preference for the print ad using the image of an x-ray. In Winnipeg, Montreal and Toronto, most participants felt that the graphic was eye-catching and that it sent a strong message about the effects of tobacco smoke. Participants were not clear as to whether or not the damaged lungs were meant to be those of a smoker or a non-smoker whose lungs had been damaged by second-hand smoke.

"Pictures like this (lungs) are good, because they show what happens to smokers. It's real and it's scary."

"I don't really get the paper shredder. What is that supposed to mean?"

Unfortunately, most participants felt that the rest of the information contained in the print concepts was too small and too difficult to read. As a result, this treatment has a strong graphic that is not necessarily well tied to the issue of second-hand smoke.

Suggested improvements:

- use a different background behind the information at the bottom of the print treatment.

"It's a Crime"

This concept was received more favourably among the youth in Toronto and Winnipeg than in Montreal. While not as strong a performer among the participants, many aspects of this concept resonated with them. The linkage between SHS and assault with a deadly weapon and criminal negligence served to convey the seriousness of SHS and its effects. Similar to the concept "Win", many participants felt that the message contained in this ad was necessarily harsh and severe. Regardless of location, smokers were somewhat more likely to react in a defensive manner to the linkage between SHS, assault and a criminal offence.

"We (smokers) aren't criminals."

"It is powerful."

"It won't appeal to smokers. It makes them look like criminals."

However, several participants demonstrated a willingness to accept such a linkage between SHS and "Assault with a Deadly Weapon." Additionally, some participants felt the message that one does not have to remain silent is an important one. In Toronto, male smokers and non-smokers alike were more likely to be engaged by the visuals involved in the TV ads. While the male smokers may have felt that the use of terminology such as "assault with a deadly weapon" may have been rather strong from their point of view, they were still drawn to the ad. Female smokers concurred with the message and the linkage of second-hand smoke to a deadly weapon. The line "you have the right not to remain silent" received mixed views.

"Good, it shows severity of SHS by linking it to a deadly weapon."

"I don't like it, but it would make me think of SHS more than the other ones."

In Montreal, the television advertisement received lukewarm reviews at best. The print concept was seen as lacking in focus. The wording "*agression avec une arme meurtrière*" was seen as gratuitous. Also, participants in both cohorts did not feel that the scenario was all that believable. When asked what impact this ad had, most simply felt it bordered on the ridiculous and did not provide any new information, and although a few saw it as a call to action, they wondered what it was they were being asked to do. In Montreal, it was felt that both the print and television versions of this concept would require significant changes in order to appeal to either non-smokers or smokers.

"Criminal is too strong."

"Good but criminal might be an exaggeration."

In all cities, the print portion of this concept did not perform as well as the television ads. The visuals were not viewed as clear and distinguishable. The print concept was seen as lacking in focus. Non-smokers and smokers alike wondered what the message was. Many wondered why a skateboard was used. A few participants wondered whether this was an attempt to say that

all skateboarders are smokers. In Toronto, a few participants felt that the image in the print treatment might actually backfire and promote smoking as cool.

Suggested improvements:

- include mixed gender in a discernible way; and
- Include DSS specific information such as consequences of SHS.

"Stick it"

In Montreal and Toronto, the concept "Stick it" was tested among the non-smoking group only. This print concept was the source of much confusion. Participants in all groups except one had great difficulty understanding exactly what the purpose of this advertisement was. The visuals were deemed unclear, with some participants mistaking the image of the girl with the roller skates for a "monkey" or a "gorilla." There was also confusion about what exactly was expected of the reader and whether [NO SMOKING] stickers would be provided. Furthermore, the meaning of the French wording *"Étampes en un où la fumée des autres te dérange"* in French common usage is problematic for obvious reasons. All told, this concept was not understood by most participants and should not be pursued any further. In Toronto, there was some receptiveness to the use of stickers to send a message about SHS.

VENUES FOR PRINT ADS

For the most part, most participants felt that the print ads would work well in health care facilities, on transit (bus, bus shelters, metro and metro stations) and in schools.

BLUE RIBBON

Some of the creative concepts tested included the blue ribbon "Breathe air, not smoke". Many participants did not initially notice or comment on the blue ribbon. However, when asked, most felt that the ribbon and "Breathe air, not smoke" contributes to the overall credibility of the creative ad concepts. Most participants held a positive view of the blue ribbon "Breathe air, not smoke" shown on some of the creative concepts. They supported its usage and felt that it would contribute to the credibility of the creative concepts. Some participants felt that the ribbons had been "overused", but these people were in the minority.

TAG LINE "DON'T TRUST THE TOBACCO COMPANIES, SECOND-HAND SMOKE KILLS"

Participants were asked about the usage of the tagline "Don't trust the tobacco companies, second-hand smoke kills". In some cases, the participants on an unprompted basis commented on the tagline. This was sometimes prompted by the participant's sense that it is perhaps an unfair attack on the tobacco company.

Otherwise, most participants, when asked, support the usage of the tagline "Don't trust the tobacco companies, second-hand smoke kills." Overall, participants demonstrated the same cynicism regarding the tobacco companies seen during the discussion of the "Guilty" creative concept. Due to the pre-existing perceptions of the tobacco companies, few participants felt that this tagline changed how they felt about that industry. Some participants felt that the statement was somewhat harsh, but again, these participants were in the minority. Few participants agreed that second-hand smoke is the fault of the tobacco industry, and felt instead that smokers make the choice to smoke and have the responsibility to not smoke around others.

When asked about their view of the government, most participants felt that Health Canada is doing what it is mandated to do: promote good health and health prevention. Participants supported this ad campaign on raising awareness of the harmful effects of SHS and felt that it was something that Health Canada should undertake. Most felt that the federal government's logo/word mark should be included on the creative concepts.

WEB SITE AND 1-800 NUMBER

Few youth demonstrated an interest in either visiting the Web site or calling the 1-800 number. Some participants, when pushed, indicated that they would be more likely to visit a Web site. Other participants felt that the Web site and 1-800 number should include information on the following:

- how to quit smoking; and
- the dangers of second-hand smoke.
-

Overall, participants felt that the use of the blue ribbon, the tagline "Don't trust tobacco companies, second hand smoke kills", the web address and the 1-800 number add to the

information provided within the creative concepts and to concepts credibility. There was not a sense among the participants that this information in anyway cluttered the concepts.

QUANTITATIVE STUDY

KEY FINDINGS

- The majority of respondents (81%) indicated that they do not smoke cigarettes. Of those who do indicate that they smoke, almost an equal number either smoke on a daily basis (10%) or occasionally (9%).
- The majority of respondents (95%) believe that cigarette smoking is a serious health problem in Canada. Seventy-three percent indicate that it is a "very serious" problem, while twenty-two percent indicated that it is a "somewhat serious" problem.
- A large majority of respondents believe that smoking causes serious harm to people's health. Ninety-eight percent agree with the statement that "the harm caused to smokers' health by smoking cigarettes" is serious. Equally large numbers of respondents agree with the statements "the harm caused to non-smokers' health caused by breathing second-hand smoke from cigarettes that other people are smoking" is serious (95%), and "the harm caused to non-smokers' health caused by breathing in second hand smoke for about six hours per day" is serious (95%). Eighty-three percent agree with the statement "the harm caused to non-smokers' health caused by breathing in second-hand smoke for about one-hour a day" is serious.
- Nine in ten respondents (89%) say they are aware of the topic of second-hand smoke. Within this majority, 25% describe themselves as very aware, while approximately two thirds (64%) describe themselves as somewhat aware.
- Almost three-quarters (73%) of respondents indicate that other people's smoking or second-hand smoke bothers them. Over one third (37%) indicate that they are very much bothered, while an almost equal number (36%) claim that they are somewhat bothered by second hand smoke.
- Almost half of respondents (46%) indicate that they are exposed to second-hand smoke on a daily or almost daily basis.
- Most respondents (63%) say no one smokes in their home on a daily basis, however, 37% indicate that at least one person smokes in their home on a daily basis.
- A large majority of respondents believe that non-smokers should have the right to a smoke-free environment. High percentages of respondents agree with the statements "its okay for non-smokers to ask someone not to smoke around them" (97%), "people who smoke should always be willing to put out their cigarettes if someone near them is bothered by the smoke" (95%), and "people who don't smoke should have the right to a smoke-free environment" (94%).
- Respondents unanimously agree that children should be protected from the dangers of second-hand smoke. Almost all respondents (99%) agree with the statement "young children should be protected from situations of second-hand smoke".
- A large percentage of smokers (N=57) agree they should make concessions to non-smokers. Ninety-five percent of smokers agree they are "usually willing to put out a

cigarette or not smoke if someone were to ask you," while about eight in ten (81%) agree they are "willing to not smoke in public places where others might be nearby."

- Asked whether they are prepared to take action to stop someone from exposing them to second-hand smoke, respondents say they are most comfortable "asking a close friend to put out a cigarette or to not smoke when you are with him or her" (77%) and "asking your brother or sister to put out a cigarette or to not smoke when you are with him or her" (76%).
- Respondents say they are least comfortable "asking someone who you don't know, who is standing next to you in a public place, to put out their cigarette" (32%) or "asking someone you don't know, who is sitting beside you in an outdoor patio or restaurant to put out their cigarette" (31%).
- About a third of respondents (31%), say they are likely to seek out information about second-hand smoke in the next six months. Of those surveyed, 7% claim they are very likely to seek out information, while 24% say they are somewhat likely to seek out information.
- When asked where they have either heard or seen information on second-hand smoke, respondents mention television (68%) and school or university (36%) as the main sources of information about second-hand smoke.
- When asked what sources would be the best for conveying information about second-hand smoke, respondents mention television and the Internet (both at 24%) as the best mediums for conveying information about second-hand smoke
- When asked what were the best ways for them to personally learn or hear about second-hand smoke and its effects, respondents mention television ads (96%), doctors/health professionals (95%), classes in school (90%), and parents (85%) as the best methods through which to gain knowledge about second-hand smoke.
- Respondents mention television ads (96%), doctors/health professionals (95%), classes in schools (94%), radio ads (90%), parents (87%), pamphlets and brochures (86%) and warning packages on cigarettes (81%) as the most credible sources of information about second-hand smoke. The least credible sources of information are: bus shelter ads (72%), interior bus ads (71%) and friends (71%).
- On an unaided basis, eight in ten respondents (86%) recall anti-tobacco ads about the dangers of second-hand smoke on televisions, on billboards, in bus shelters, or in magazines.
- Almost a third (32%) name the Government of Canada/Health Canada, on an unaided basis, as the sponsor of the ad they recall. Additional 14% mention health organizations/non-smoking organizations as the sponsor. Almost half (47%) of respondents surveyed were unable to identify the sponsor of the ads.
- When asked to recall what ads they remembered seeing by describing various aspects of the ads (scenes, pictures or phrases) on an unaided basis, the most popular ad mentioned

by respondents is the "party scene" advertisement (19%). On an aided basis, more than three-quarters (78%) of respondents recalled the "party scene" advertisement.

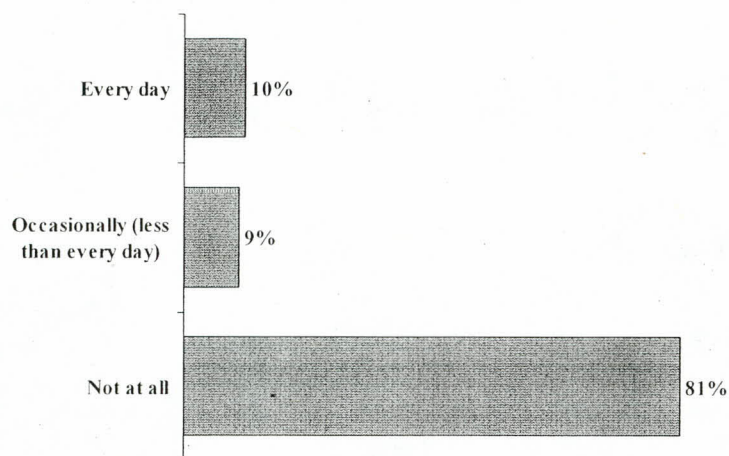
- Television is the source of exposure for an overwhelming majority of those who recall the ad depicting a party scene (97%) as well as those who recall the ad featuring the waitress Heather Crowe (93%).
- Of the various S.S.D. taglines used in ads, respondents recall the taglines "Second-hand smoke. Are you a target?" (70%), and "Second-hand smoke. There's no telling what you'll pick up tonight." (69%), the most.
- On an unaided basis, respondents most often identify lung cancer (72%), asthma (42%), and emphysema (21%) as common second-hand smoke diseases.
- When asked, respondents most often agree that smoking should be banned in shopping malls (83%), restaurants (78%), and workplaces (77%).
- A large number of respondents (88%) have a negative perception of the tobacco industry. More than half (59%) feel very negative towards the tobacco industry, while another three in ten (29%) feel somewhat negative towards the tobacco industry.
- When asked if their opinion of the tobacco industry changed in the past six months, two thirds (65%) say their opinion has stayed the same. About three in ten (28%) say their opinion has gone down, while seven percent indicate their opinion of the tobacco industry has gone up.
- Large portions of respondents believe that tobacco companies should be held responsible for some of the negative effects of smoking. Almost all respondents (98%) agree with the statement that "The tobacco industry should inform the public that cigarettes are addictive." An equal level agrees, "The tobacco industry should inform the public that light cigarettes are not safer than regular cigarettes" (96%) and also that "Second-hand smoke doesn't bother people it kills people" (96%). More than eight in ten (83%) of respondents agree with the statement "The tobacco industry is responsible for getting people hooked on cigarettes."
- Respondents negatively view allowing tobacco companies to advertise cigarettes. Only 47% agree with the statement "The tobacco industry should be allowed to sponsor events," while 44% of respondents agree "The tobacco industry should be allowed to advertise its products."

CIGARETTE CONSUMPTION

The majority of respondents (81%) indicate that they do not smoke. One in five respondents say they smoke cigarettes either every day (10%) or occasionally (9%).

Cigarette Consumption

At the present time, do you smoke cigarettes (manufactured or roll your own) every day, occasionally or not at all?



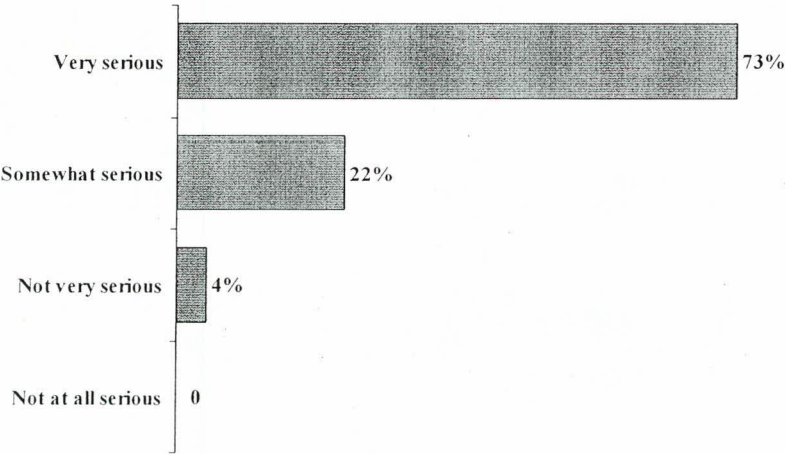
Base: N = 300

SMOKING AS A HEALTH PROBLEM

The majority of respondents (95%) believe that cigarette smoking is a serious health problem in Canada. Seventy-three percent indicate that it is a very serious problem, while twenty-two percent indicate that it is a somewhat serious problem.

Smoking as a Health Problem

Do you think that cigarette smoking is a very, somewhat, not very or not at all serious health problem in Canada today?



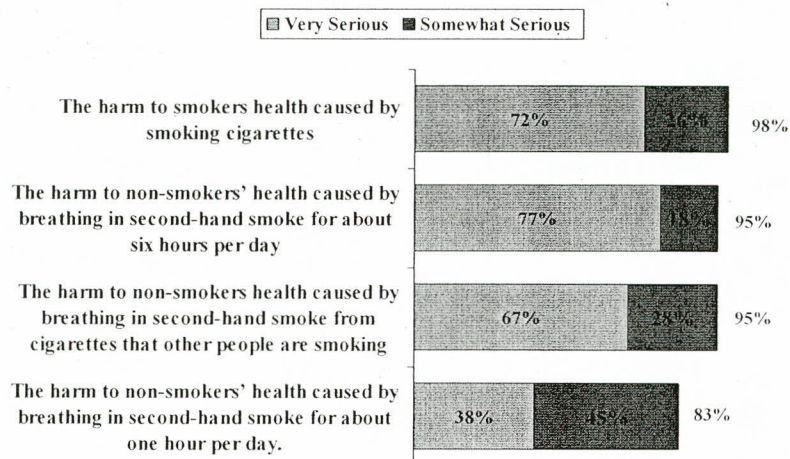
Base: N = 300

HEALTH CONSEQUENCES OF SMOKING

Large majorities of respondents believe that smoking causes serious harm to people's health. Ninety-eight percent believe that "the harm caused to smokers' health by smoking cigarettes" is serious. Ninety-five percent believe that "the harm caused to non-smokers' health caused by breathing second hand smoke from cigarettes that other people are smoking" is serious. An equal number (95%) agree that "the harm caused to non-smokers' health caused by breathing in second hand smoke for about six hours per day" is serious. Approximately eight in ten (83%) believe that "the harm caused to non-smokers' health caused by breathing in second-hand smoke for about one-hour a day" is serious.

Health Consequences of Smoking

Please tell me if you think that each of the following is very, somewhat, not very or not at all serious.



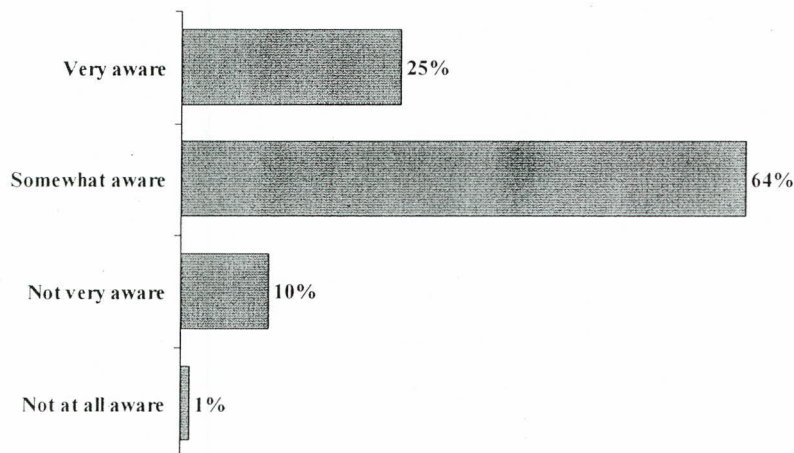
Base: N = 300

AWARENESS OF SECOND-HAND SMOKE

Almost nine in ten respondents (89%) believe that they are aware of the topic of second-hand smoke. Of those respondents aware of second-hand smoke, a quarter of respondents describe themselves as being very aware, while approximately two thirds (64%) describe themselves as being somewhat aware.

Awareness of SHS Smoke

How aware are you of the topic of second-hand smoke: very, somewhat, not very or not at all aware?



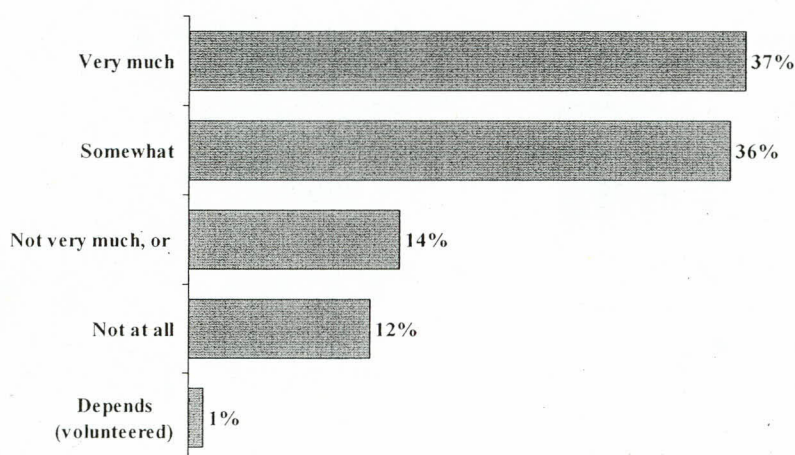
Base: N = 300

BOTHERED BY SECOND-HAND SMOKE

Almost three-quarters (73%) of respondents indicate that other people's smoking or second-hand smoke bothers them. Of those surveyed, 37% indicate that they are very much bothered, while an almost equal number (36%) claim that they are somewhat bothered by second hand smoke.

Bothered By SHS Smoke

*To what extent, if at all, are you personally bothered by other people's smoking, or second-hand smoke?
Would that be very much, somewhat, not very much or not at all?*



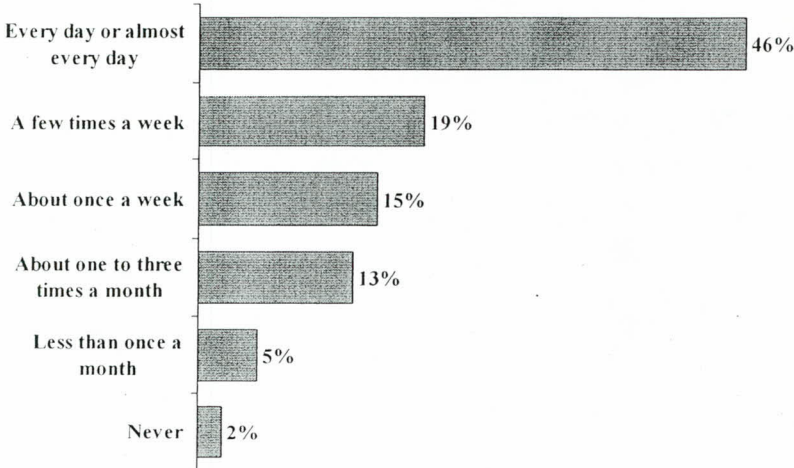
Base: N = 300

EXPOSURE TO SECOND-HAND SMOKE

Almost half of respondents (46%) say that they are exposed to second-hand smoke on a daily or almost daily basis. About one in five (19%) indicate that they are exposed to second-hand smoke a few times a week, while another 15% indicate that they are exposed to second-hand smoke on a weekly basis.

Exposure to SHS Smoke

How often are you personally in a situation of breathing in second-hand smoke from cigarette or tobacco products that other people are smoking, ... would that be every day or almost every day, a few times a week, about once a week, about one to three times a month, less than once a month or never?



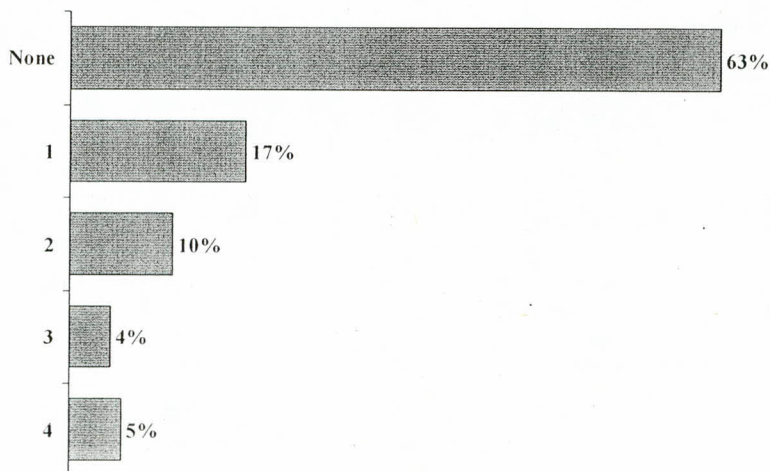
Base: N = 300

EXPOSURE TO SMOKING IN THE HOME

Almost two-thirds (63%) of respondents say nobody smokes in their home on a daily basis. Nearly one in five (17%) say one person smokes in their home daily, while 10% say that two people smoke in their home on a daily basis. An additional 4% say three people in their home smoke, while 5% say that four people in their home smoke.

Exposure to Smoking in the Home

Including family members and regular visitors, how many people smoke inside your home every day or almost every day? (PROBE: Include cigarette, cigar and pipe.) (RECORD NUMBER - RANGE 0 - 99)



Base: N = 300

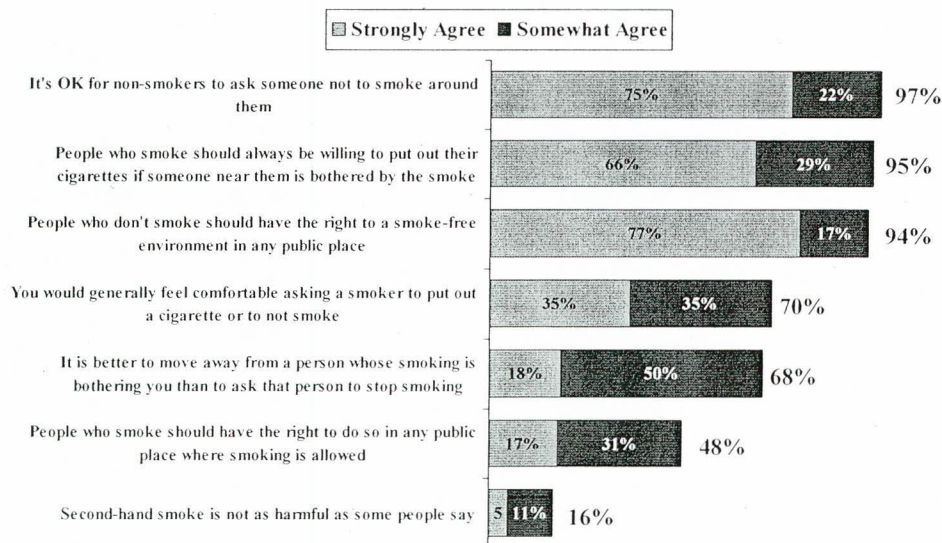
PUBLIC PLACES AND SECOND-HAND SMOKE

A large majority of respondents believe that non-smokers should have the right to a smoke-free environment. High percentages of respondents agree with the statements "its ok for non-smokers to ask someone not to smoke around them" (97%), "people who smoke should always be willing to put out their cigarettes if someone near them is bothered by the smoke" (95%), and "people who don't smoke should have the right to a smoke-free environment in any public place." (94%).

A large majority says they would feel comfortable asking smokers not to smoke (70%). However, an equal majority (68%) say it is better simply to move away from a smoker than to ask the person to stop smoking. About half of respondents (48%) say smokers should have the right to smoke in public places where it is permitted. Fewer than one in five (16%) agree that second-hand smoke is not as harmful as some people say it is.

Public Places and SHS Smoke

Do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following statements?

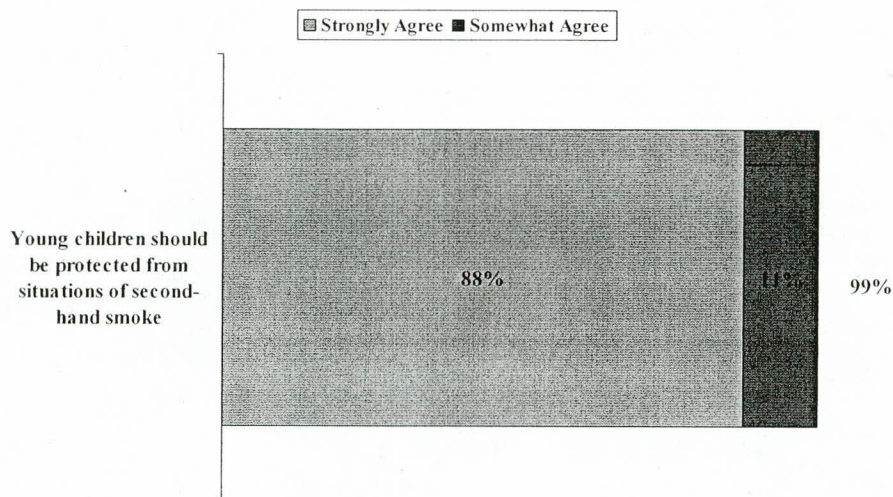


YOUTH AND SECOND-HAND SMOKE

Respondents unanimously agree that children should be protected from the dangers of second-hand smoke. Almost all respondents surveyed (99%) agree with the statement "young children should be protected from situations of second-hand smoke."

Youth and SHS

Do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following statements?



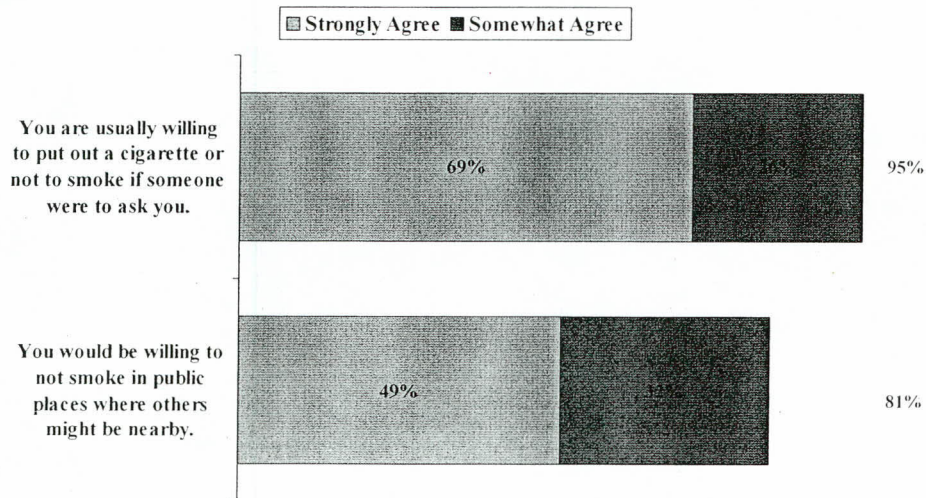
Base: N = 300

SMOKERS AND SECOND-HAND SMOKE

A large percentage of smokers surveyed (N=57) agree that smokers should make concessions to non-smokers when it concerns second-hand smoke. Ninety-five percent of respondents who smoke agree with the statement "you are usually willing to put out a cigarette or not smoke if someone were to ask you", while about eight in ten (81%) agree with the statement "you would be willing to not smoke in public places where others might be nearby."

Smokers and SHS

Do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following statements?



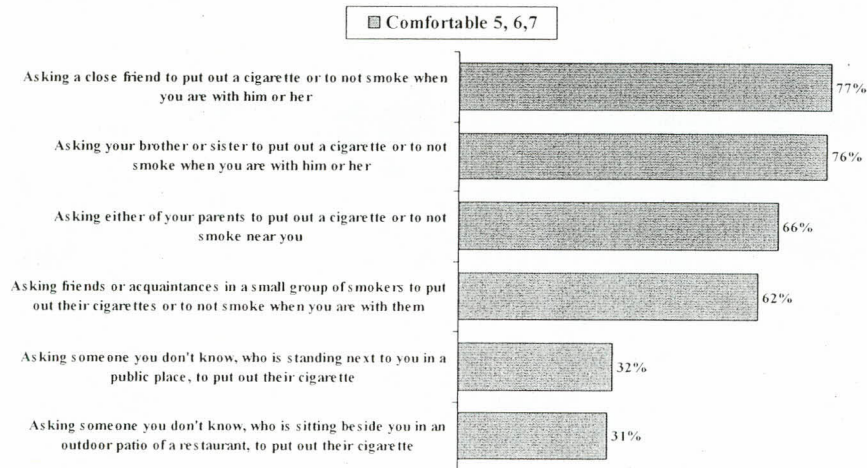
Base: Smoker N = 52

PROACTIVE BEHAVIOR WHEN EXPOSED TO SECOND-HAND SMOKE

Respondents were asked about how they would feel taking action in situations where they are exposed to second hand smoke. The two situations where respondents felt the most comfortable in taking action were "asking a close friend to put out a cigarette or to not smoke when you are with him or her" (77%) and "asking your brother or sister to put out a cigarette or to not smoke when you are with him or her" (76%). The two situations where respondents felt the least comfortable in taking action were "asking someone who you don't know, who is standing next to you in a public place, to put out their cigarette" (32%), and "asking someone you don't know, who is sitting besides you in an outdoor patio or restaurant to put out their cigarette" (31%).

Proactive Behavior When Exposed to SHS

Here are some situations where you might experience second-hand smoke. Using a scale from 1 to 7, where 1 is not at all comfortable and 7 is extremely comfortable and the mid-point 4 is neither, how would you feel doing each of the following?



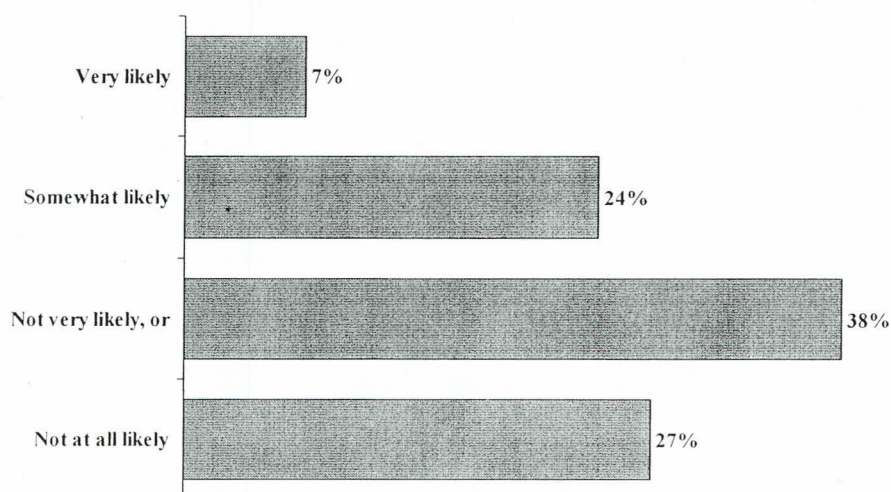
Base: N = 300

LIKELIHOOD OF SEEKING INFORMATION ABOUT SECOND-HAND SMOKE

About a third of respondents (31%) say they are likely to seek out information about second-hand smoke in the next six months. Among these respondents, 7% claim they are very likely to seek out information, while 24% say they are somewhat likely to seek out information.

Likely to Seek Information about SHS

In the next six months, how likely are you to seek out information about second-hand smoke?



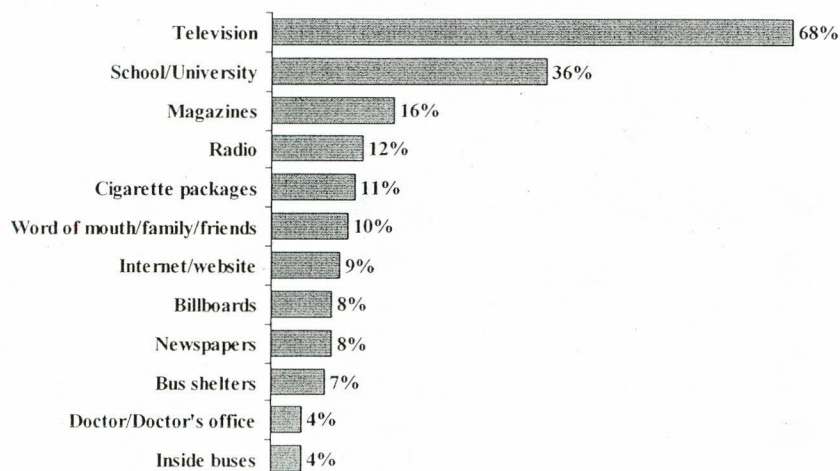
Base: N = 300

SOURCES OF INFORMATION ON SECOND-HAND SMOKE

When asked, on an unaided basis, about where they have either heard or seen information on second-hand smoke recently, respondents most commonly mention television (68%) and school or university (36%) as the main sources of information about second-hand smoke. Other sources are mentioned by 16% of respondents or fewer.

Top-of-Mind Mentions Sources of Information about SHS

Thinking generally about information about the topic of second-hand smoke, where have you seen or heard any of this kind of information recently? Anywhere else?



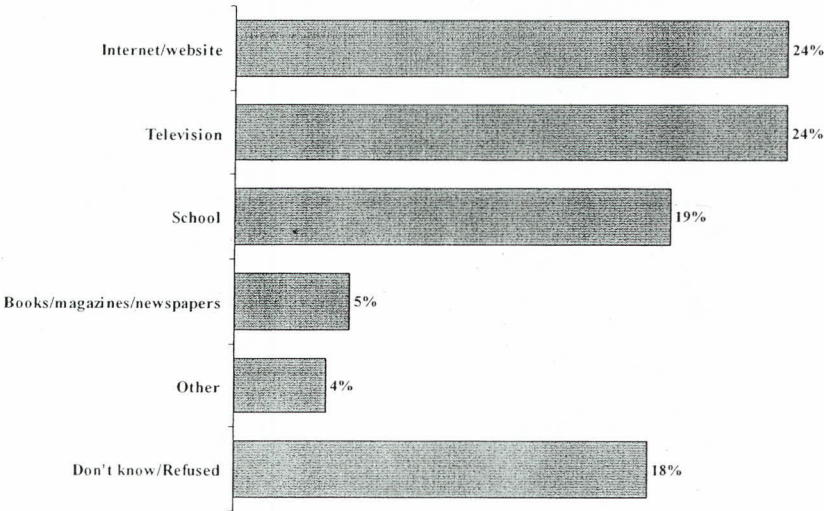
Base: N = 300

SOURCES OF INFORMATION ON SECOND-HAND SMOKE

When asked, on an unaided basis, what sources would be the best for conveying information about second-hand smoke respondents mention television and the Internet (both at 24%) as the best mediums for conveying information about second-hand smoke. School is also named by one in five respondents (19%). Other responses are mentioned by 5% of respondents or fewer, while 18% could not say what the best source of information about second-hand smoke would be.

Best Source of Information on SHS

What, for you, would be the best source of information about the effects of second hand smoke?



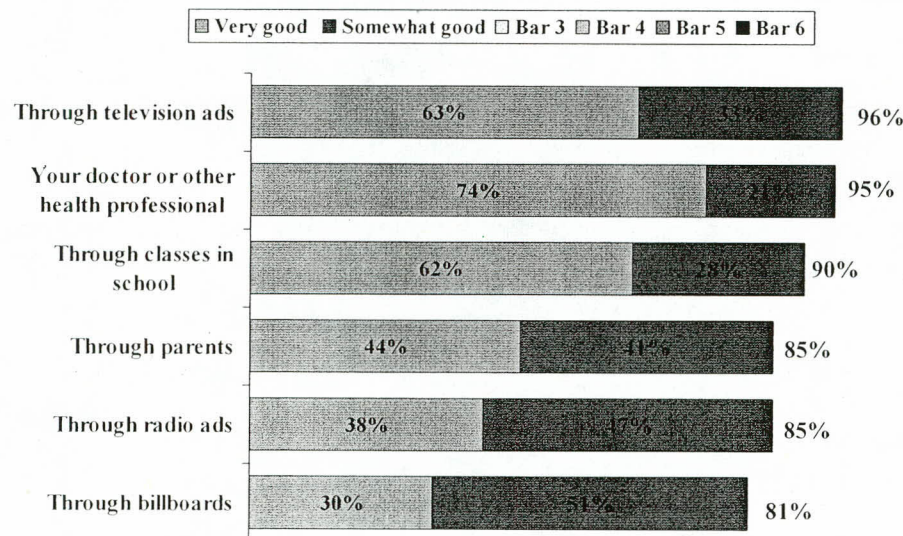
Base: N = 300

BEST WAYS TO LEARN ABOUT SECOND-HAND SMOKE

Respondents were asked to evaluate several ways to learn about second-hand smoke and its effects. Among the tested means of learning about second-hand smoke, respondents mention television ads (96%), doctors and health professionals (95%), and classes in school (90%) as the best methods through which to gain knowledge about second-hand smoke (rating as very or somewhat good).

Best Way to Learn About SHS (Top Tier)

Would each of the following be a very good, somewhat good, or not very good way for you to learn about or hear about the topic of second-hand smoke and its effects?



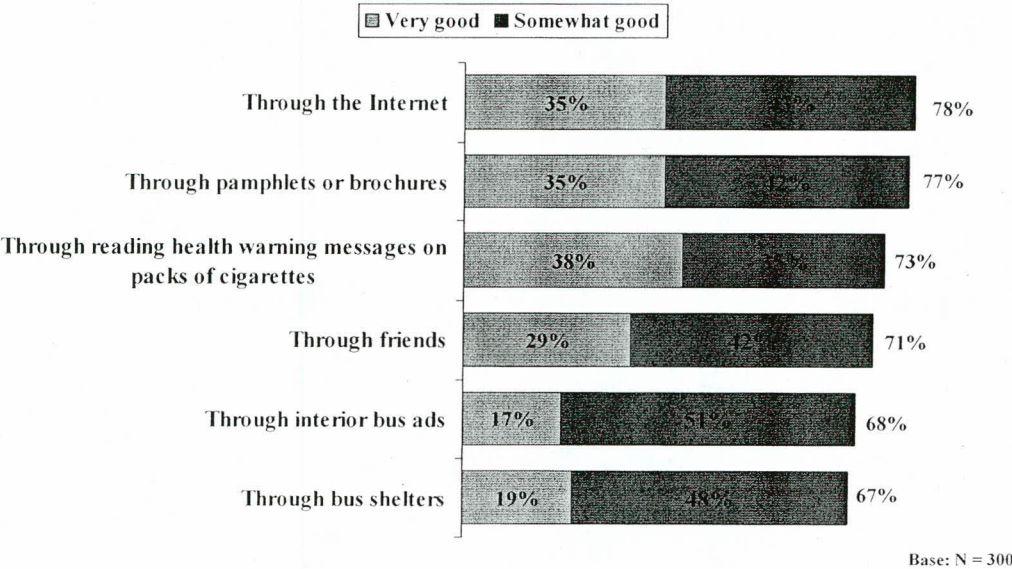
Base: N = 300

Among the tested means of learning about second-hand smoke, respondents are least likely to consider communications in bus shelters (67%), the interior of buses (68%) or by communicating with friends (71%) as good ways of learning about second-hand smoke.

Best Way to Learn About SHS

(Bottom Tier)

Would each of the following be a very good, somewhat good, or not very good way for you to learn about or hear about the topic of second-hand smoke and its effects?

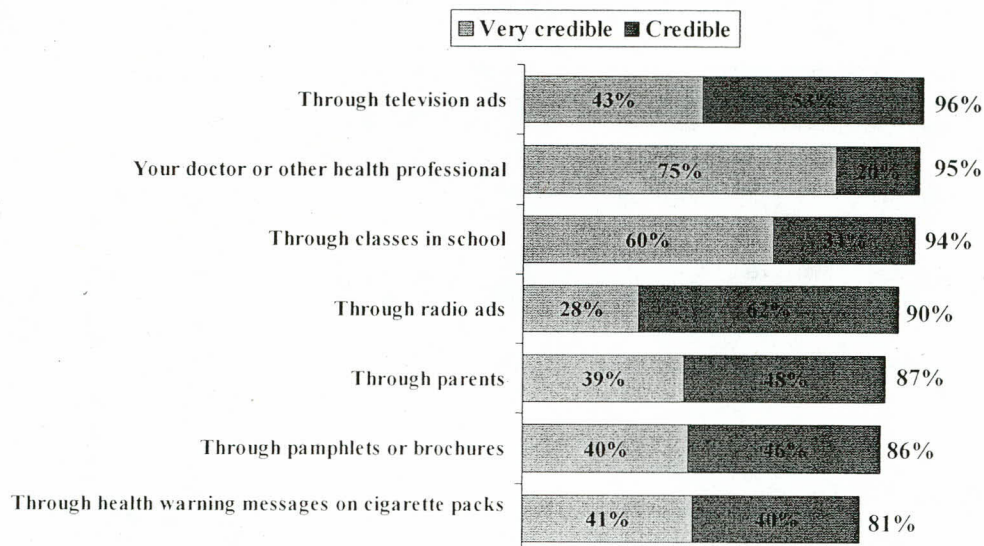


CREDIBLE SOURCES OF INFORMATION ABOUT SECOND-HAND SMOKE

Respondents were asked about the credibility of certain sources of information on second-hand smoke. The sources respondents view as most credible include: television ads (96%), doctors/health professionals (95%), classes in schools (94%) and radio ads (90%).

Credible Sources of Information on SHS (Top Tier)

For each of the following, tell us whether you think they are very credible, credible or not credible ways for you to learn about second-hand smoke and its effects



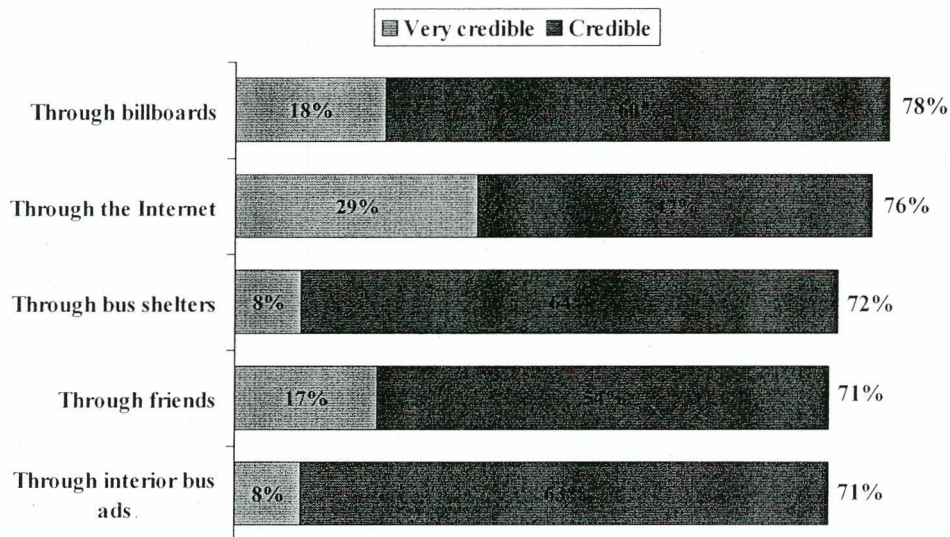
Base: N = 300

Among various sources of information on second-hand smoke, respondents are least likely to view ads inside bus shelters (72%) ads inside buses (71%) and friends (71%) as credible sources of information about second-hand smoke.

Credible Sources of Information on SHS

(Bottom Tier)

For each of the following, tell us whether you think they are very credible, credible or not credible ways for you to learn about second-hand smoke and its effects



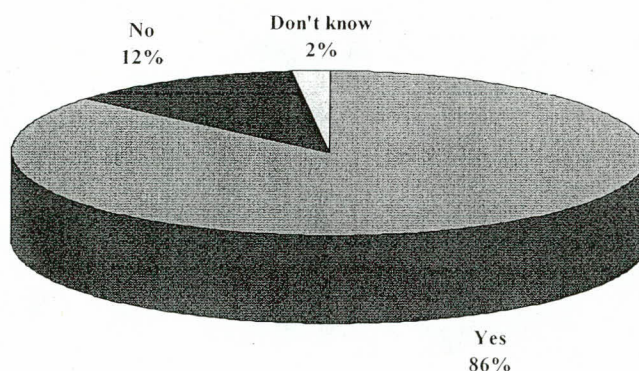
Base: N = 300

AD RECALL (UNAIDED)

When asked on an unaided basis if they remember seeing or hearing any anti-tobacco ads or ads about the dangers of second-hand smoke on televisions, on billboards, in bus shelters, or in magazines, more than eight in ten respondents (86%) said yes.

Unaided Ad Recall

Over the past few months, do you recall seeing or hearing any anti-tobacco advertisements or any ads about the dangers of smoking or second-hand smoke? Please include anything you may have seen on television, billboards, inside buses, bus shelters or seen in a magazine.



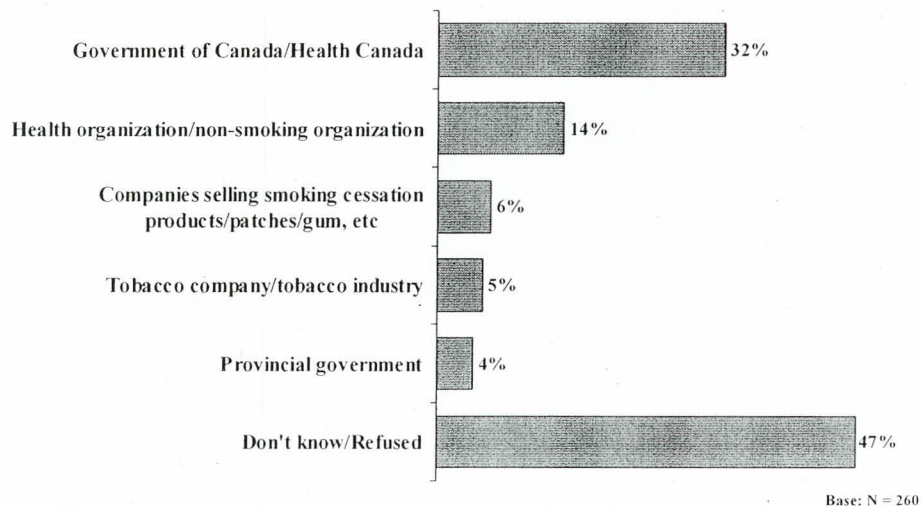
Base: N = 300

SPONSORSHIP OF ADS

Respondents were asked, on an unaided basis, who they thought sponsored the ads describing the dangers of second-hand smoke. One in three (32%) say the Government of Canada/Health Canada, while 14% mention health organizations/non-smoking organizations as the sponsor. Almost half (47%) of respondents surveyed were unable to identify the sponsor of the ads.

Sponsorship of Ads (unaided)

Do you recall who sponsored this advertising? Any others?

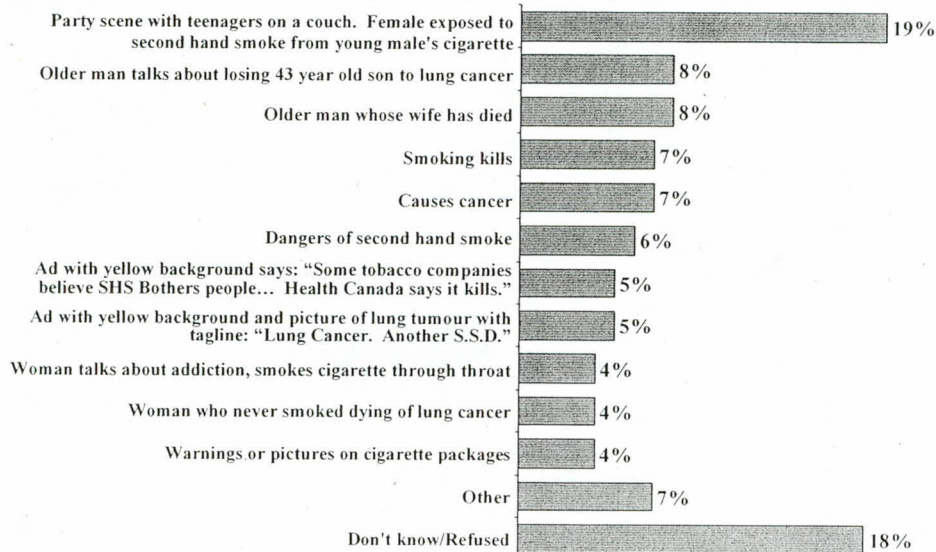


ANTI-SMOKING ADS RECALL (UNAIDED)

Respondents were asked, on an unaided basis, to describe various aspects of the ads they could recall (such as scenes, pictures or phrases). Respondents most often mention the ad depicting a party with teenagers on a couch, where the female is being exposed to the male's second-hand smoke (19%). Respondents also describe an ad featuring an old man talking about the death of his 43 year old son as well as an ad featuring an older man whose wife died (8% each). Other ads are mentioned by 7% of respondents or fewer.

Anti-Smoking Ads Recalled (Unaided)

What anti-tobacco ads or second-hand smoke ads do you recall? Please describe some scenes, pictures or phrases. Do you recall scenes, pictures or phrases from any other anti-tobacco ads?



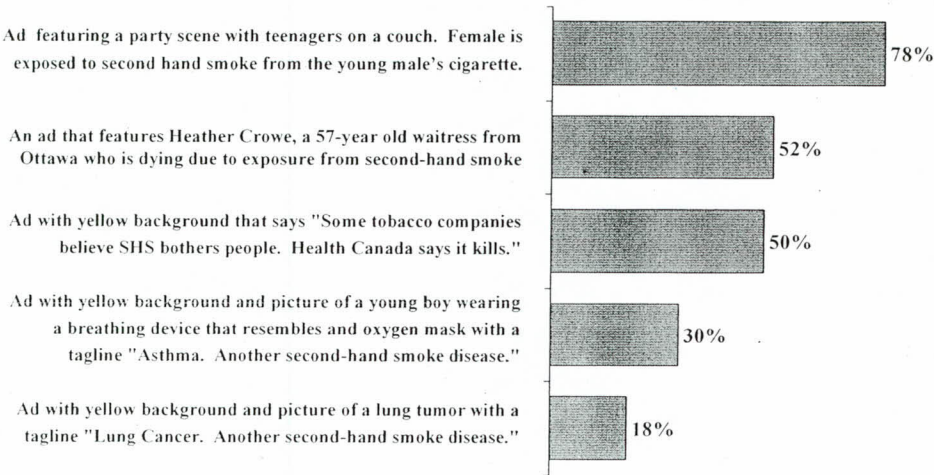
Base: N = 260

RECALL OF ADS ABOUT SHS SMOKE DISEASE

Respondents were asked on an aided basis to recall what ads about second-hand smoke diseases (S.S.D.) they saw on television, in the movies or in print. More than three-quarters (78%) of respondents recall the "party scene" ad. More than half of the respondents recall the "Heather Crowe" ad (52%) and the yellow sign with the tagline "Some tobacco companies believe second-hand smoke bothers people. Health Canada says it kills." (50%). Fewer than half recall the ads with the tagline "Asthma. Another second-hand smoke disease" (30%) and the tagline "Lung cancer. Another second-hand smoke disease" (18%).

Aided Recall of Ads about Second-hand Smoke Diseases

Over the past few weeks or months, do you recall seeing any of the following television, cinema or print ads?
%Yes



Base: N = 260

Respondents who could recall the tested advertisements were asked, for each advertisement, where they recall seeing or hearing the ad.

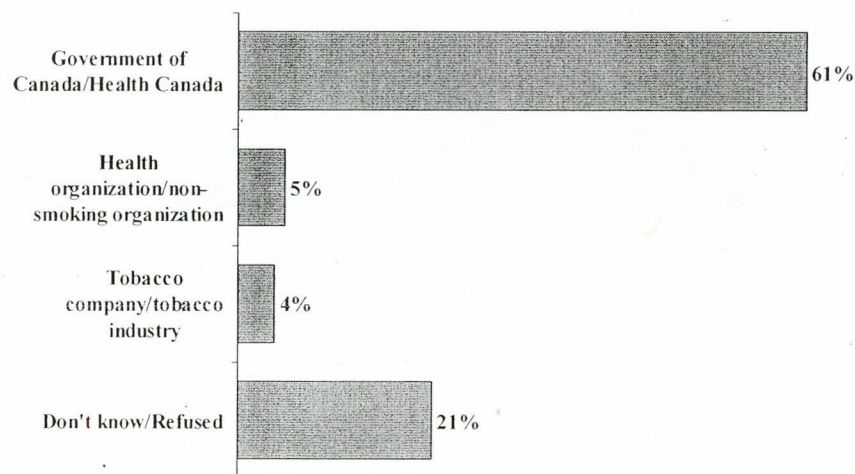
Considering the ad featuring the party scene, respondents overwhelmingly recall seeing this ad on television (97%). Similarly, 93% recall seeing the ad featuring Ottawa-waitress Heather Crowe on television.

A lower level recalls seeing on television the ad bearing the tagline "Some tobacco companies believe second-hand smoke bothers people. Health Canada says it kills" (76%). One in ten (9%) recall seeing this ad inside buses, while 7% recall hearing it on radio and 5% seeing it on a billboard.

Respondents who could recall any of the tested ads were also asked who they thought sponsored the ads they recall. The Government of Canada/ Health Canada (61%) is most often named as the main sponsor of these ads, while 21% could not say who sponsored the ads.

Sponsor of Ads

Thinking about the ad that you saw, who do you think was the main sponsor? That is who paid for it?



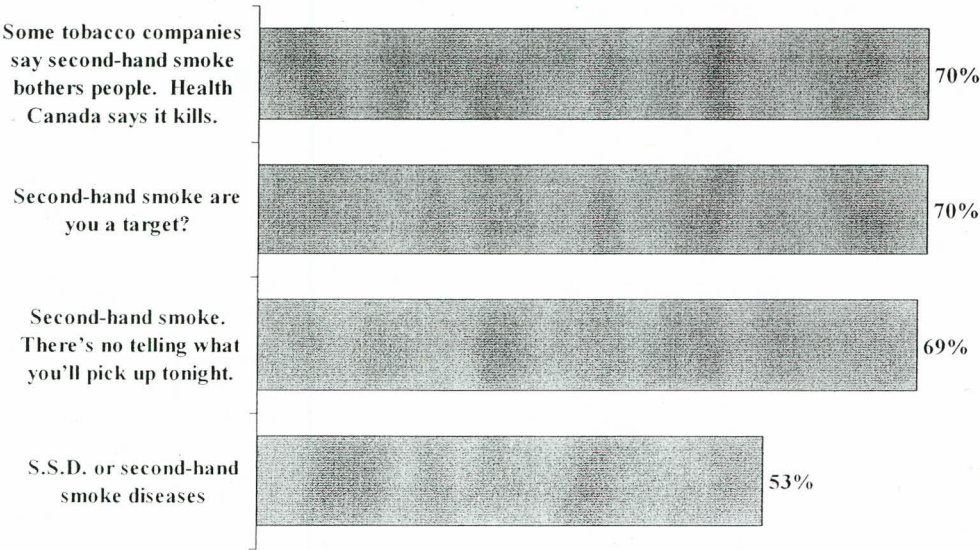
Base: N = 279

AWARENESS OF EXPRESSIONS DESCRIBING SECOND-HAND SMOKE DISEASES

Respondents were asked whether they have seen or heard expressions used in second-hand smoke advertising. Among these, equally high levels of awareness are attributed to the expressions, "Some tobacco companies say second-hand smoke bothers people. Health Canada says it kills" (70%)¹, "Second-hand smoke. Are you a target?" (70%), and "Second-hand smoke. There's no telling what you'll pick up tonight" (69%) the most. "S.S.D. or second-hand smoke diseases" is afforded a lower level of awareness (53%).

Awareness of Taglines about Second-hand Smoke

Over the past few weeks or months, have you seen or heard any of the following expressions?
% Yes



Base: N = 300

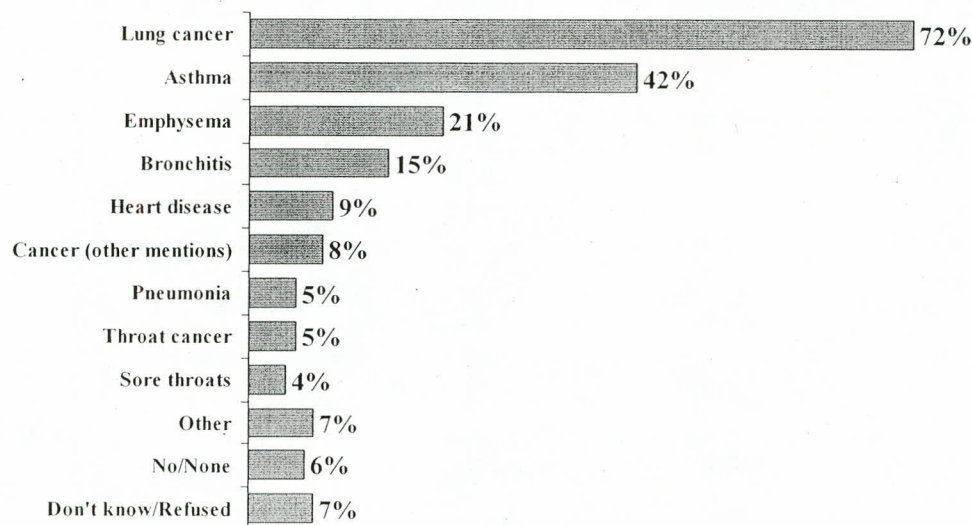
¹ This result should be viewed cautiously in light of an earlier portion of this study when respondents were asked whether they had seen advertising featuring the language, "Some tobacco companies... Health Canada says it kills." Half (50%) of respondents recall the ad featuring this tagline. It is likely that this initial exposure led to the higher level of awareness cited here (70%). See also page 27.

AWARENESS OF SECOND-HAND SMOKE DISEASE (UNAIDED)

On an unaided basis, respondents were asked to identify second-hand smoke diseases. The S.S.D's that respondents identify most include lung cancer (72%), asthma (42%), and emphysema (21%).

Awareness of Second-Hand Smoke Diseases (Unaided)

Can you name any second-hand smoking disease (SSD's)?



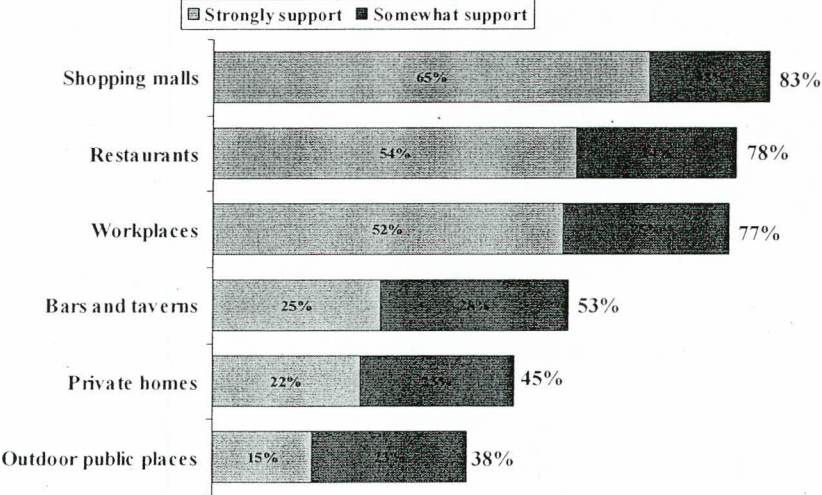
Base: N = 300

BANNING SMOKING

Respondents were asked if they agree or disagree with banning smoking in various places. Places where respondents most commonly agree that smoking should be banned include shopping malls (83%), restaurants (78%), and workplaces (77%). Respondents were much less likely to agree that smoking should be banned in homes (45%) or in outdoor public places, such as the street, parks or outside offices (38%).

Banning Smoking

Do you strongly support, somewhat support, somewhat oppose, or strongly oppose each of the following?
Banning smoking in...



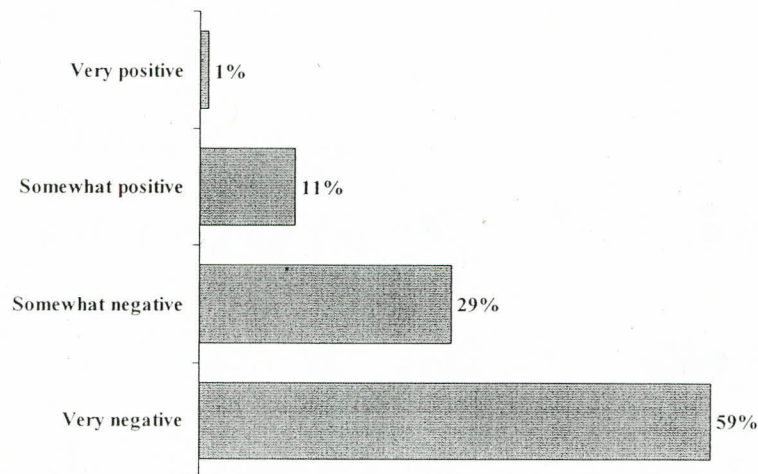
Base: N = 300

PERCEPTIONS OF THE TOBACCO INDUSTRY

A large number of respondents (88%) view the tobacco industry negatively. Among these respondents over half (59%) feel very negative towards the tobacco industry, while three in ten (29%) feel somewhat negative towards the tobacco industry. Just over one in ten say they feel either somewhat (11%) or very positive (1%) about the tobacco industry.

Perceptions Of The Tobacco Industry

How do you feel about the tobacco industry ... very positive, somewhat positive, somewhat negative, or very negative?



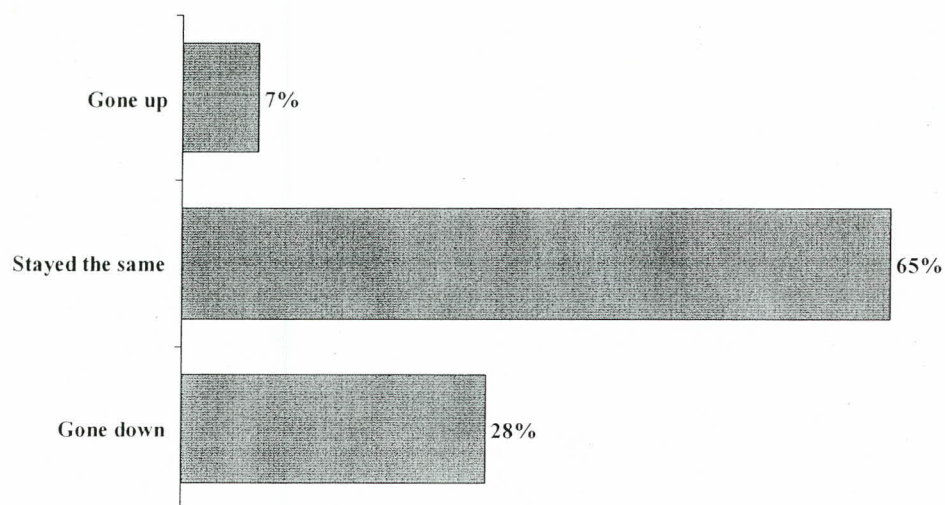
Base: N = 300

SHIFT OF OPINION TOWARDS THE TOBACCO INDUSTRY

Respondents were asked if their opinion towards the tobacco industry has changed over the past several months. About two thirds of respondents (65%) indicated that their opinion has stayed the same. About three in ten (28%) indicated that their opinion has gone down, while seven percent indicated that their opinion towards the tobacco industry has gone up.

Shift in Opinion of Tobacco Industry

Over the past several months, has your general opinion of the tobacco industry gone up, stayed the same or gone down?



Base: N = 300

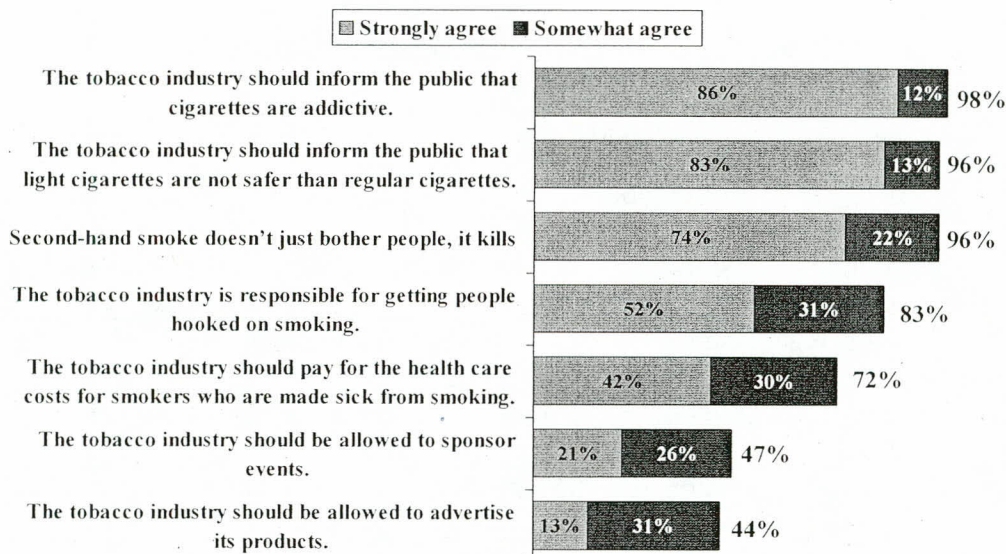
ATTITUDES TOWARDS TOBACCO COMPANIES

Large portions of respondents believe that the tobacco industry should be held responsible for some of the negative effects of smoking. Almost all respondents (98%) agree with the statement that "The tobacco industry should inform the public that cigarettes are addictive." An almost equal number agree with the statement "The tobacco industry should inform the public that light cigarettes are not safer than regular cigarettes." (96%) and "Second-hand smoke doesn't bother people it kills people." (96%). More than eight in ten (83%) of respondents agreed with the statement "The tobacco industry is responsible for getting people hooked on cigarettes."

Respondents also take a negative view of allowing tobacco companies to be able advertise cigarettes to the public. Only 47 percent agree with the statement "The tobacco industry should be allowed to sponsor events," while 44 percent of respondents agree with the statement "The tobacco industry should be allowed to advertise its products."

Attitudes Towards Tobacco Companies

Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with each of the following statements



APPENDIX I – SCREENER (QUALITATIVE)

INTERVIEWER NOTE: Read screener exactly as written; Never mention client's name; Should there be any problems, consult your supervisor immediately

Good evening, this is _____ from Ipsos-Reid (formerly Angus Reid Group), a national market research and public opinion firm. We have been commissioned by Health Canada to test some proposed advertisements with teenagers between the ages of 14 and 19. As part of the research program we are conducting group discussions with a small number of teens. Do you have a son or daughter in high school?

- Yes CONTINUE
- No THANK AND TERMINATE

What are the ages of your teenager(s)

- Between 14 and 16
- Or
- Between 17 and 19

We would like to invite your son/daughter to participate. As a token of our appreciation for their participation, we would like to offer them an honorarium of \$65. The group lasts for approximately an hour and a half. During the group discussions there will be two other teens in the room with the moderator (group leader). Parents are not allowed in the room during the discussion.

Assuming they are interested, would **you** agree to your son/daughter's participation in one of these groups which would be held in: **[Do not read smoker/non-smoker]**

For Each City	Monday, September 9 th	Tuesday, September 10 th	Tuesday, September 10 th	Wednesday, September 11 th
4:00 pm – 5:30 pm	Non-Smokers Female 14 – 16	Smokers Female 14 - 16	Non-Smokers Female 14 – 16	Smokers Female 14 - 16
5:30 pm – 7:00 pm	Non-Smokers Male 14 – 16	Smokers Male 14 - 16	Non-Smokers Male 14 – 16	Smokers Male 14 - 16
7:00 pm to 8:30 pm	Non-Smokers Female 17 – 19	Smokers Female 17 - 19	Non-Smokers Female 17 – 19	Smokers Female 17 - 19
8:30 pm – 10:00 pm	Non-Smokers 17 – 19 Male	Smokers Male 17 - 19	Non-Smokers Male 17 – 19	Smokers Male 17 - 19

- Yes CONTINUE
- No THANK AND TERMINATE

Now, I would like to ask your son or daughter a few questions to see if they qualify to attend.

[READ TO YOUTH]

We are going to have some group discussions with teens your age. There will be two other teens in the room and the discussion should last about an hour and a half and you will receive \$65 as a token of our appreciation. While your parents may accompany you to the group discussion they will not be allowed in the room during the discussion group. I would like to ask you some questions to see if you qualify.

Are you **[READ AGE CATEGORIES]** ? **[WATCH FOR A GOOD MIX OF AGES WITHIN EACH GROUP]**

- Between ages 14 – 16
- or
- Between 17 - 19

(INTERVIEWER RECORD GENDER DO NOT ASK – REMEMBER GROUPS ARE GENDER SPECIFIC)

• **SCREENER**

a) Are you a member of the First Nations, Metis or Inuit? (e.g.: native Indian from a specific band Cree, Micmac, or Objibway)

- Yes
- No

[IF YES CONTINUE]

How often do you go to the movies? **[CONTINUE ALL]**

- More once a week
- About once a week
- About twice a month
- Less than twice a month
- DK/REF

Do you workout at a gym or recreational center regularly? **[CONTINUE ALL]**

- Yes
- No

Have you attended a concert or live music show in the last three months? **[CONTINUE ALL]**

- Yes
- No

We are going to have two different types of discussion groups. The first group will be with smokers and the second group will be with non-smokers. Which group would you like to be in?

[Reassure teen that their parents will not be in the room and that what is discussed during the group discussion will remain confidential– incase parents do not know that their child smokes and please watch gender and age quotas.]

Smoking Group

Non-Smoking Group

[ASK NON-SMOKER]

- Does anyone in your family or do any of your friends smoke?
- Yes – Continue
- No – Thank and terminate

Please tell me the name of your favourite television show and a couple of reasons why you like it.

If respondent cannot articulate or communicate clearly, thank and terminate

Sometimes participants are also asked to read certain ideas or to write out their answers to a questionnaire or watch a TV commercial during the discussion. If you require reading glasses you should bring them to the group. Is there any reason why you could not participate?

- Yes [] - Terminate
- No [] - Continue

Terminate if respondent offers any reason such as sight or hearing problems, a written or verbal language problem, or a concern with not being able to communicate effectively.

Thank you. You qualify to attend the discussion group. As I mentioned earlier, the group will last about an hour and a half, you will receive \$65 as a token of our appreciation and refreshments will be served. The session will be held at: [DO NOT READ SMOKER/NON-SMOKER]

For Each City	Monday, September 9 th	Tuesday, September 10 th	Tuesday, September 10 th	Wednesday, September 11 th
4:00 pm – 5:30 pm	Non-Smokers Female 14 – 16	Smokers Female 14 – 16	Non-Smokers Female 14 – 16	Smokers Female 14 – 16
5:30 pm –	Non-	Smokers	Non-	Smokers

7:00 pm	Smokers Male 14 – 16	Male 14 - 16	Smokers Male 14 – 16	Male 14 - 16
7:00 pm 8:30 pm	Non- Smokers Female 17 – 19	Smokers Female 17 - 19	Non- Smokers Female 17 – 19	Smokers Female 17 - 19
8:30 pm – 10:00 pm	Non- Smokers 17 – 19 Male	Smokers Male 17 - 19	M Non- Smokers Male 17 – 19	Smokers Male 17 - 19

We are reserving a special place for you at this session. There will only be 3 people attending, so if for any reason you cannot attend, please call **(FIELD SUPERVISOR PHONE NUMBER)** as soon as possible so that we can select someone else to take your place. Also, someone from our office will be calling you back to confirm these arrangements. Could I please have your name and phone number where we can reach you during the evening and during the day?

NAME: _____

DAYTIME PHONE NUMBER: _____

EVENING PHONE NUMBER: _____

THANK YOU VERY MUCH!

WE LOOK FORWARD TO SEEING YOU THERE.

RECRUITED BY: _____

CONFIRMED BY: _____

**Winnipeg, Sept 9th and 10th@
Western Opinion Research
213 Notre Dame Avenue, Suite 804
204-989-8999**

**Montreal, Sept 9th and 10th@
Espace Marketing
487, boul. Saint-Joseph est
Across from subway-Laurier Stn--St Joseph exit
514-286-8274**

**Toronto, Sept 10 and 11@
Ipsos Reid Corp
160 Bloor St East, Suite 610
Northeast corner of Church and Bloor
416-324-2900 ext 327**

APPENDIX II – MODERATOR'S GUIDE (QUALITATIVE)

Draft 4 Moderator's Guide: Advertising Concepts for Second-hand Smoke Campaign

INTRODUCTION (5 MINUTES)

Explain to participants:

- Ipsos-Reid
- the length of session (2 hours)
- taping of the discussion
- one-way mirror and colleagues viewing in back room
- results are confidential and reported in aggregate/individuals are not identified/participation is voluntary/
- the role of moderator is to ask questions, timekeeper, objective/no vested interest
- role of participants: not expected to be experts, no need to reach consensus, speak openly and frankly about opinions, no right/wrong answers

Ask participants to introduce themselves and their occupation/hobbies etc.

WARM UP (5 MINUTES)

- ☐ Have you ever thought about the effects of second-hand smoke?
- ☐ Do you think that second hand smoke is a serious problem that affects everyone or a minor problem that only affects smokers and the people they know?
- ☐ What can people who are worried about second hand smoke do about it?

STORY BOARD EVALUATIONS (15 MINUTES PER CONCEPT, 75 MINUTES TOTAL)

Each concept to be presented separately (rotate order between triads).

Describe the concept note that these are in the developmental stage and will eventually become television and print advertisements.

Show prints ads first, followed by the television story boards. Divide the time between the two as follows: print 60% and television 40%. Keep in mind we have about 15 minutes per concept.

For each treatment allow participants a few minutes to think about their application to television and/or print advertising.

Then have participants answer the questionnaire (attached) before discussing their responses.

DSS Print with blue ribbon and DSS TV Boards with denorm re: tobacco industry. (15 minutes)

- ☐ What are your views overall? Likes? Dislikes?
- ☐ What is the main message? Is the message easy to understand? Who is the ad aimed at?
- ☐ How did you answer the questionnaire? (Show of hands for each question and probe high/low responses) Why?
- ☐ The TV ad talks about the diseases you can get from second hand smoke. Do you believe this? What diseases come to mind?
- ☐ Do you have any suggestions for improving this ad?

Would the print work well on its own? **Would this print ad work well as magazine, billboards or transit ads?**

Guilty Print and Guilty TV Boards with blue ribbon and denorm re: tobacco industry. (15 minutes)

- ☐ What are your views overall? Likes? Dislikes?
- ☐ What is the main message? Is the message easy to understand? Who is the ad aimed at?
- ☐ How did you answer the questionnaire? (Show of hands for each question and probe high/low responses) Why?
- ☐ How does this ad make you feel about the tobacco industry?
- ☐ Do you have any suggestions for improving this ad?

Would the print work well on its own? **Would this print ad work well as magazine, billboards or transit ads?**

It's a Crime Print "Right Not to Remain Silent" with blue ribbon and It's a Crime TV Boards with denorm re: tobacco industry (15 minutes)

- For TV

- ☐ What are your views overall? Likes? Dislikes?
- ☐ What is the main message? Is the message easy to understand? Who is the ad aimed at?
- ☐ How did you answer the questionnaire? (Show of hands for each question and probe high/low responses) Why?
- ☐ Do you think that second hand smoke should be characterized as "assault with a deadly weapon"?
- ☐ Do you have any suggestions for improving this ad?

Would the print work well on its own? **Would this print ad work well as magazine, billboards or transit ads?**

Stick It Print (need to narrow this to one concept) and Stick It TV Boards with Blue Ribbon (15 minutes)

- For TV

- ☐ What are your views overall? Likes? Dislikes?
- ☐ What is the main message? Is the message easy to understand? Who is the ad aimed at?
- ☐ How did you answer the questionnaire? (Show of hands for each question and probe high/low responses) Why?
- ☐ What do you think about the idea of the boy putting the anti-smoking sign on the table? Is it something you would do?
- ☐ Do you have any suggestions for improving this ad?

Would the print work well on its own? **Would this print ad work well as magazine, billboards or transit ads?**

Probe: Asking if the two concepts "It's a Crime" and "Stick it" could/should be combined. If so, how?

Win Print (need to narrow this to one concept) and Win TV Boards with Blue Ribbon (15 minutes)

- For TV

- ☐ What are your views overall? Likes? Dislikes?
- ☐ What is the main message? Is the message easy to understand? Who is the ad aimed at?
- ☐ How did you answer the questionnaire? (Show of hands for each question and probe high/low responses) Why?
- ☐ Does the "contest" part of this ad make second hand smoking seem like something that is not too serious?
- ☐ Do you have any suggestions for improving this ad?

Would the print work well on its own? **Would this print ad work well as magazine, billboards or transit ads?**

AFTER ALL ADS

If not mentioned during discussions prompt reaction to inclusion/exclusion of ribbon and denorm.

- ☐ Some of the ads have a logo of a blue ribbon that says "breathe air not smoke". Did you notice it? What do you think of this logo? Positive – Negative? Should it be included in the ads? Why? Why not?
- ☐ Some of the ads have a line close to the end that says "Don't trust the tobacco industry. Second hand smoke kills." What do you think of this line? How does it make you feel about the tobacco industry? Is second hand smoke their fault? How does it make you feel about the government? Should it be included in the ads? Why? Why not?

CONCLUSION and GENERAL VIEWS – DISCUSSION OF ALL ADS (10 MINUTES)

After showing and discussing all five treatments.

- ☐ Which concept would be the most likely to make you more likely to talk to your friends/family about second hand smoke?
- ☐ Which ad concept did you personally like best? Why?
- ☐ Is it clear who these ads brought to you by? (i.e. who is the sponsor)
- ☐ Do these ads make you feel more/less positive toward the Government of Canada/Health Canada? Why?
- ☐ Would you call the 1-800 **number?** Can you tell me what the 1-800 number was? Which ad would encourage you most to call? **What would you like/expect to receive from the government if you called the 1-800 number?**

- ☐ Would you go to the web site? Do you remember the web site? What kind of information do you think you'll find at the web site.
- ☐ If you could give Health Canada one piece of advice on this advertising (creative, techniques, messages, etc...) what would it be?

Advertisement Questionnaire

Ad # _____: Title: _____

Overall Views: _____

Main Message of the ad: _____

Using a scale of 0 to 10 please mark each ad (circle your response) on the following:

Not very believable					believable					Very
0	1	2	3	4	5	6	7	8	9	10
Not very appropriate for Health Canada					Very appropriate					
0	1	2	3	4	5	6	7	8	9	10
Does not explain the issue of 2 nd hand smoke					Explains the issues well					
0	1	2	3	4	5	6	7	8	9	10
Does not provide new information					Provides new information					
0	1	2	3	4	5	6	7	8	9	10
Does not communicate the dangers					Communicates the dangers of 2 nd smoke					
0	1	2	3	4	5	6	7	8	9	10
2 nd Hand Smoke Not a Serious Problem					Is very serious problem					
0	1	2	3	4	5	6	7	8	9	10
Would not catch my attention					Would get my attention					
0	1	2	3	4	5	6	7	8	9	10
Ad Would likely encourage me to talk to my friends/family about second hand smoke										
Disagree										
Agree										

Which concept would make you more likely to talk to family or friends about second hand smoke?

Concept #	Please indicate which concept would make you more likely to talk to your family or friends about second hand smoke.

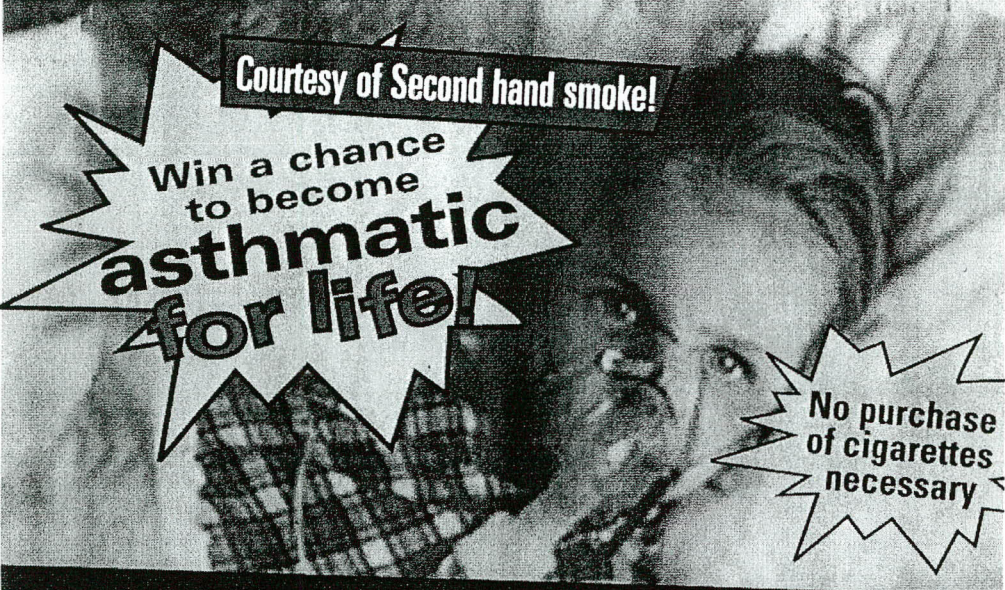
Which concept did you like the best?

Concept #	Please indicate which concept you liked the best.

Please tell me why you liked this concept the best.

APPENDIX III – CREATIVE CONCEPTS (QUALITATIVE)





Courtesy of Second hand smoke!

Win a chance
to become
**asthmatic
for life!**

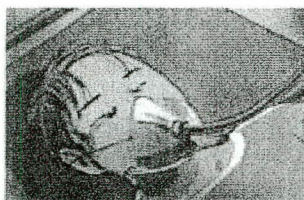
No purchase
of cigarettes
necessary

Don't trust the tobacco industry. Second hand smoke kills.

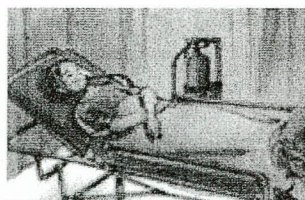
For more information : 1 800 O-Canada / 1 800 622-6232 TTY/TDD : 1 800 465-7735 www.gosmokefree.ca

 Health Canada  Santé Canada

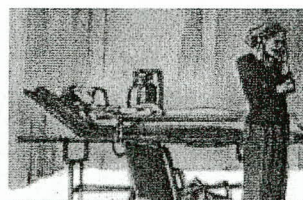




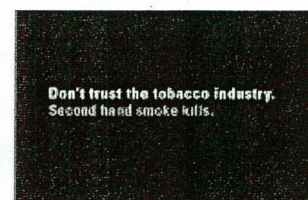
Introducing the "Win asthma for life" Contest!
Your chance to spend long,
painful hours hooked up to an oxygen machine.
Best of all, you don't have to be a smoker to participate!



To enter, just breathe in as much
2nd hand smoke as possible. It's that easy!
Additional prizes include ear infection,
special edition bronchitis and cancer!



Remember, the more 2nd hand smoke you inhale,
the greater your chances of suffering!
No purchase necessary.
curtains ends...



Don't trust the tobacco industry.
Second hand smoke kills.



For more information
1 800 Q-Canada / 1 800 622-6232
www.gosmoketfree.ca



Canada

A message from the Government of Canada



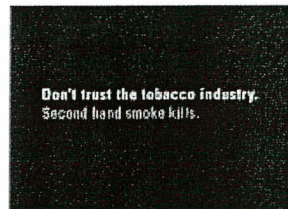
Introducing the "Win a Cross Trip to the Cancer Ward" Contest! Your chance to spend long painful hours in the oncology ward of your local hospital.
One of all you don't have to be a smoker to participate!



To enter, just breathe in as much of hand smoke as possible. It's that easy!
Additional prizes include emphysema, asthma attacks and heart attacks!



Remember, the more g-hand smoke you inhale, the more chances you have of suffering!
No purchase necessary. Contest ends...



Don't trust the tobacco industry.
Second hand smoke kills.



For more information
1 800 O-Canada / 1 800 622-6232
www.gosmoketree.ca



Canada

A message from the Government of Canada

It's funny,
when people do it
around you,
you're the one
who gets screwed.



diseases from secondhand smoke

It's not easy being around smokers. Because studies have shown you can contract a host of problems and diseases just from breathing their 2nd hand smoke. Emphysema, heart disease, coronary problems and cancer are just a few of the goodies you can look forward to later on in life. So be careful. Because the diseases from secondhand smoke (d.s.s.) could nail you... big time.

For more information:

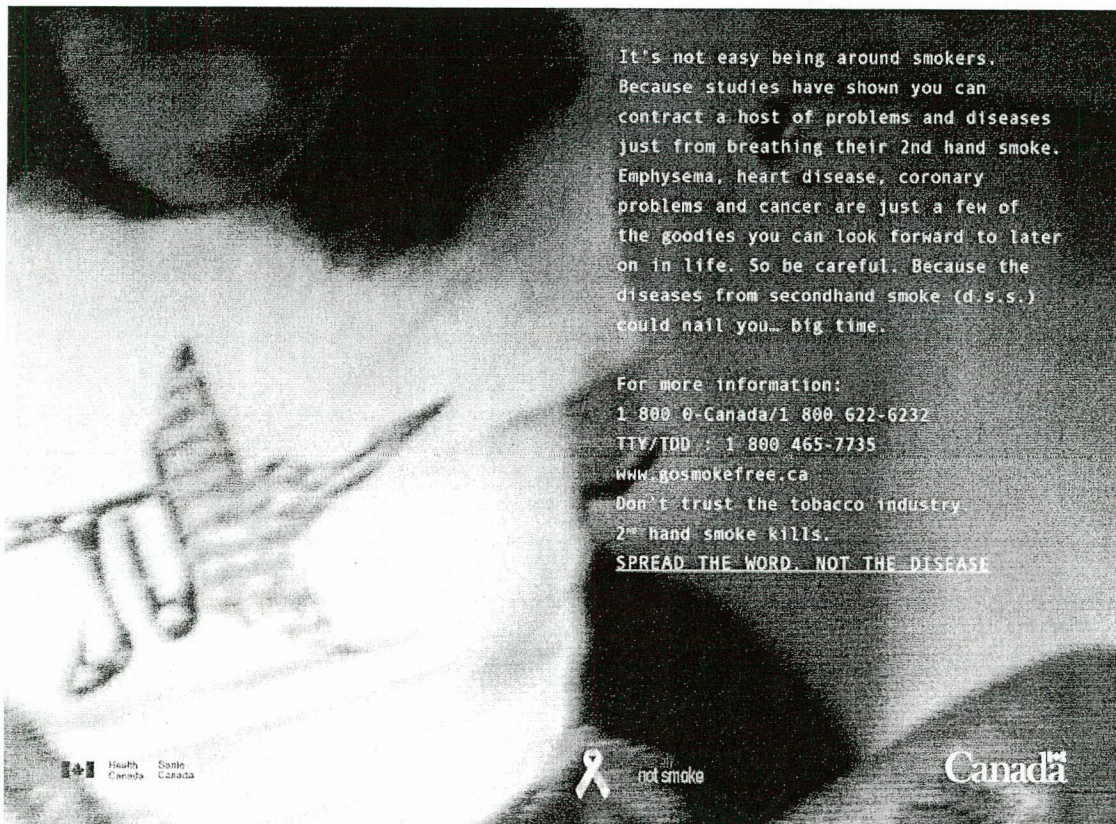
1 800 0-Canada/1 800 622-6232

TTY/TDD : 1 800 465-7735

www.bosmokefree.ca

Don't trust the tobacco industry.
2nd hand smoke kills.

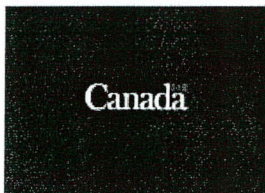
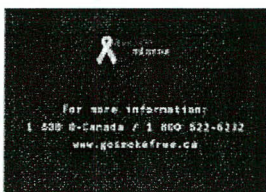
SPREAD THE WORD. NOT THE DISEASE

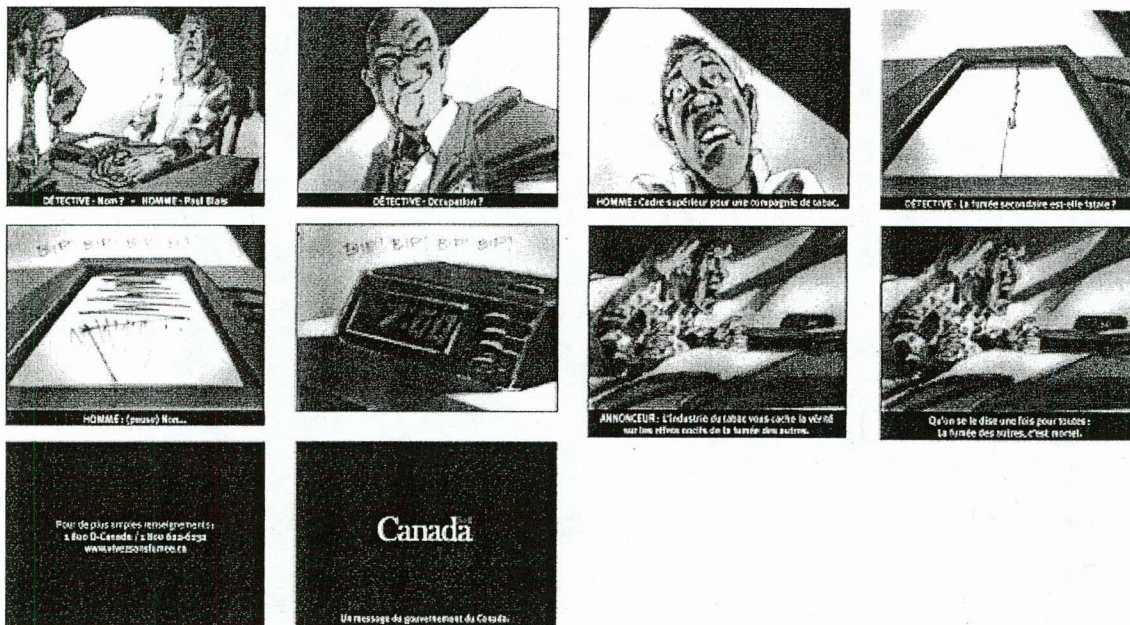


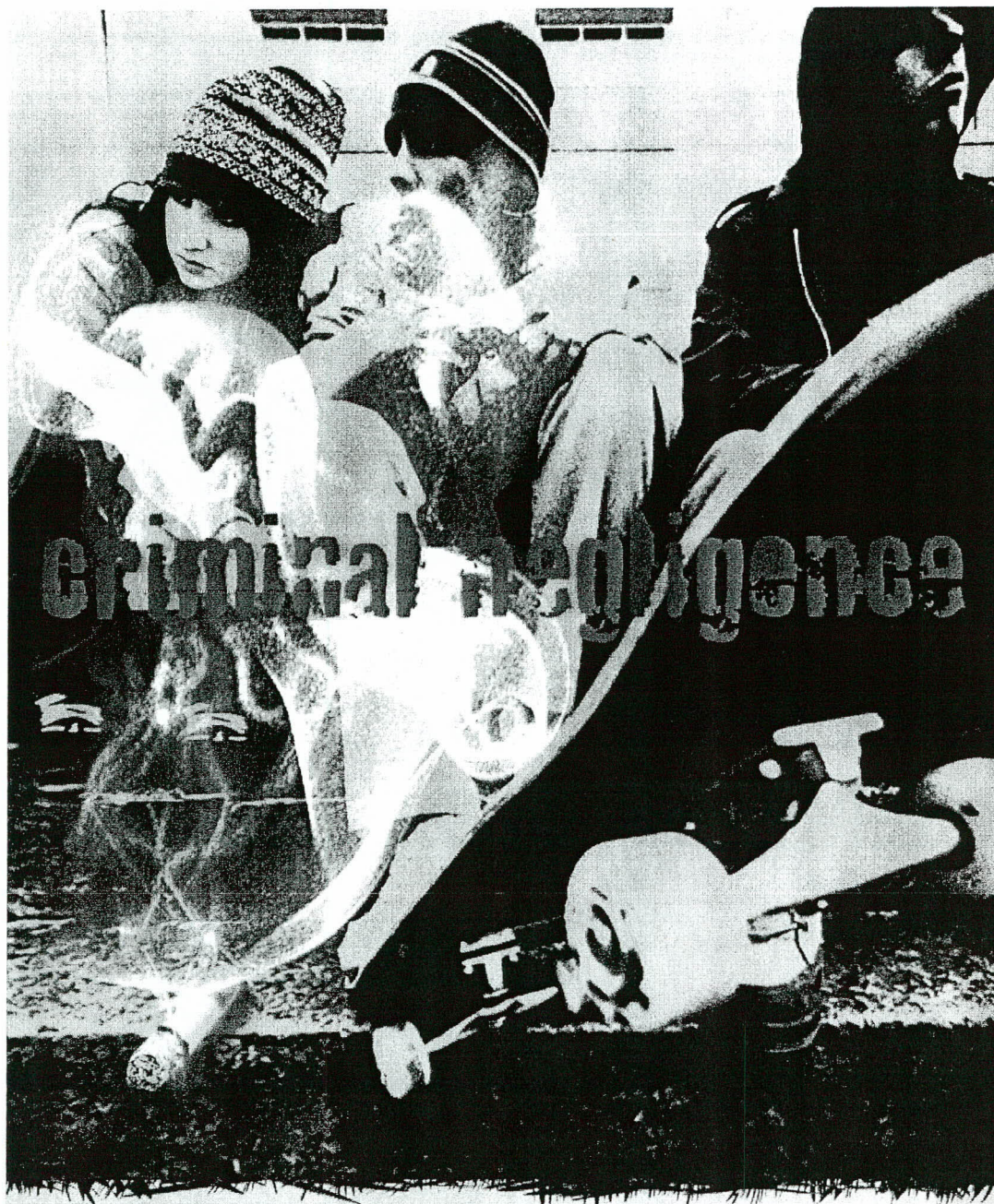
 Health Canada
Santé Canada



Canada



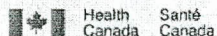


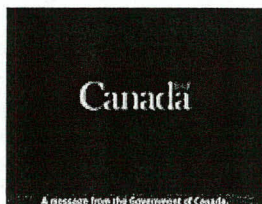
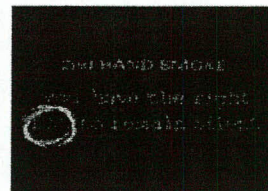
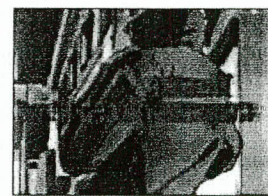


2nd HAND SMOKE
you have the right not to remain silent

FOR MORE INFORMATION >

> 1 800 622-6232 (TTY/TDD : 1 800 485-7735)







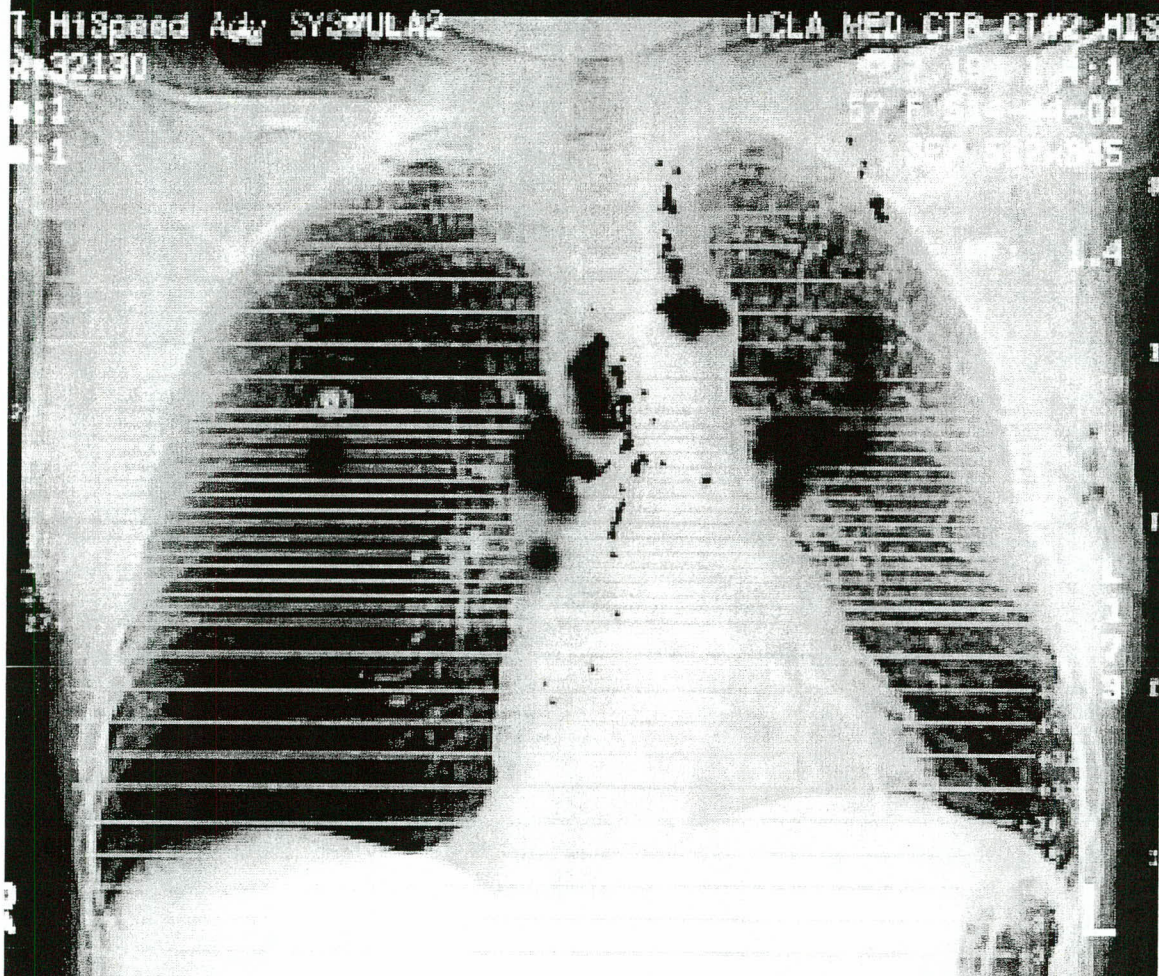
SECOND HAND SMOKE SUCKS

GIVE US SOME
BREATHING SPACE



FOR IT TO WORK, IT HAS TO BE ENFORCED

LIE DETECTOR



Secondhand smoke. It's a killer.

The tobacco industry believes that what you don't know about the effects of secondhand smoke can't hurt you. They couldn't be further from the truth.

For more information: www.gosmokefree.ca

1 800 O-Canada (1 800 622-6232) TTY/TDD: 1 800 465-7735



**The tobacco industry has been using
special filters for years.**

Secondhand smoke. It's a killer.

The tobacco industry believes that what you don't know about the effects of secondhand smoke can't hurt you. They couldn't be further from the truth.

For more information: www.gosmokefree.ca

1 800 O-Canada (1 800 622-6232) TTY/TDD: 1 800 465-7735