277992

ID CODE : 103401 /B2

Final Report

Health Warning Messages on Smokeless Tobacco, Cigars and Pipe Products A Qualitative Study with Consumers

Prepared for
HEALTH CANADA
Tobacco Control Programme
POR 02-94 H4097-02-5029

April, 2003

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1. EXECUTIVE SUMMARY

1. BACKGROUND AND METHODOLOGY

Context

- Health Canada is considering amending the Tobacco Products Information Regulations in order to refresh messages which have begun to wear out. The labeling of all tobacco product packaging would be under consideration.

- Cigars (including cigarillos and cheroots) and pipe tobacco products must display one of four bilingual HWMs (Health Warning Messages) on the primary display surface.

- Chewing tobacco and oral/nasal snuff products must display one of four bilingual HWMs, as well as constituent values for nicotine, lead and nitrosamines, on any container side or bottom (nasal snuff warnings are different than those for chewing tobacco and oral snuff).

- Health Canada wanted to update qualitative information obtained in 1998 and to learn about the current impact of HWMs for these products.

Purpose of the Qualitative Study

- The purpose of this qualitative research was to assess the impact on consumers of the current cigar, pipe and smokeless tobacco HWMs (full list in appendix).

  → More specifically, it was hoped that findings would reveal the relevance, credibility, understanding and usefulness of HWMs.

Methodology

- ***Number and type of sessions***:

  → Overall, 9 focus groups were conducted from February 21-27 in 3 Canadian cities (Toronto, Montreal and Lethbridge) with 70 consumers of smokeless tobacco, cigars and pipes, aged 16-60+.

- ***The report***

  → Written in respondents' own language, provides input from all 9 groups together, with differences pointed out where relevant, whether by location or language, or by product type (large cigars and pipes, small cigars, and chewing tobacco and snuff). For convenience, the report refers to:

  - the 3 French-speaking groups as francophones
  - the 6 English-speaking groups as anglophones.

- ***Qualitative research***

  → Works best when used as an exploratory learning tool to help understand the range and depth of reactions towards the topic under discussion at a certain point in time. However, findings are **not** quantifiable, and may or may not be representative of the population at large. It is left to the reader's judgement to evaluate the hypotheses generated from such research.

2. OVERVIEW OF FINDINGS

- Overall, for the most part, findings confirm and validate those from the previous 1998 qualitative study.

  → Exceptions relate to some attitudes regarding HWMs, which essentially demonstrate that the current messages have in fact either worn out or have minimal impact, as will be shown later.

- A large majority of respondents using smoke and smokeless tobacco also smoked cigarettes, which strongly coloured perceptions of their products, the harmfulness of their products, and the HWMs on their products.

  → Along with non-cigarette smokers, those who smoked cigarettes tended to see their particular product as less addictive and generally less harmful than cigarettes, to varying degrees.

  → However, smokeless tobacco users felt the most strongly addicted to nicotine and consequently, to their product.

Product Usage

- ***Frequency of usage***

  → Varied for all product groups -- smokeless tobacco had the highest frequency because it substituted or replaced cigarettes.

  → Large cigars -- from once a day to once every few months.

  → Pipes -- from evening use to celebratory occasions.

  → Small cigars -- from almost once a day to twice a month.

  → Chewing tobacco and snuff -- from regular daily use (on the job, whenever a nicotine fix was needed and smoking wasn't allowed) to occasional use, during sports or socializing – more frequent rural than urban use.

- ***Perceived popularity***

  → Overall, small cigars were generally thought to be growing in popularity.

  → In contrast, large cigars and pipe usage was seen to be on the decline.

  → Chewing tobacco use was seen as decreasing in urban centres and increasing in rural areas.

  → Snuff use was thought to be declining.

- ***General impressions --*** of people who used various tobacco products

  → Generally positive for large cigar and pipe smokers, with a strong positive image value.

  → Generally positive for small cigar smokers – varied impressions suggest product's potential appeal to a broad variety of users, fairly positive image value.

  – Generally negative for smokeless tobacco users, products seen as socially risky with a low image in urban centres and an acceptable image in the rural location.

- ***Key drivers*** -- 3 key drivers emerged for both smoke and smokeless product usage:

  → Smoke products

  – Reduction of cigarettes -- part of a strategy to reduce or help stay away from cigarettes

    - seen as less harmful or less addictive than cigarettes.

  – Immediate gratification

    - sensory pleasure (taste, aroma),
    - relaxation
    - satisfaction (for some) of nicotine craving.

  – Some image value

  → Smokeless products

  – Nicotine relief (rather than pleasure) -- generally not part of a strategy to reduce cigarette use or dependency

    - seen as cigarette replacement, so equally addictive
    - because smokeless, considered less harmful to lungs.

- Immediate gratification
  - of nicotine craving
  - very limited sensory appeal (mostly rural respondents liked taste, rest did not)
  - relaxation (only because nicotine need was met)
  - satisfaction (only because nicotine need was met).
- Smokeless-ness -- strong rationale due to the lack of smoke, pollution and smell.

- ***Key negative concerns*** about product use
  - Smoke products
    - Perceived harm – potential cancer and addiction but less likely than with cigarettes – some concern about mouth diseases
      - sore throat (small cigar users).
    - Smoke-related issues
      - inhaling (or not inhaling) tended to concern small cigar users more than users of other product types
      - awareness of second-hand smoke dangers was extremely high among all smoke product users (pipes and large and small cigars),
        - all took preventative actions – they mainly smoked outside, when alone or when given permission by others (bars, restaurants where smoking allowed).
    - Sensory -- problematic issue of smell, for large and small cigar and pipe users -- well aware of their product's negative effect on others
      - however, smoking alone or outside nullified this effect.
    - Usage problems for large cigar and pipe users, related to messiness and extinguishing.
  - Smokeless products
    - Perceived harm – potential cancer and addiction – some concern about mouth diseases
      - specific awareness of oral harm.
    - Sensory -- difficult taste adjustment for urban users, but not for rural.
    - Usage problems -- having to spit.
    - No second-hand smoke was an important justification for using smokeless products.

Harmfulness

- Respondents seemed to be in conflict or ambivalent over the issue of product harmfulness.

- In all 9 groups, most participants could name several toxic chemicals in their particular product, but also could identify reasons why their product was both less harmful and more harmful than cigarettes.

- Overall there was a strong tendency – coloured by their desire or hope -- to see their particular product as less harmful than cigarettes, for various reasons.

  → Less harmful because

  1) use product less often or consume a smaller quantity of the product (all 3 categories)

  2) don't inhale, or don't inhale as much (all cigars, pipes)

     - all small cigar and many smokeless users especially felt there were fewer lung problems with their product than with cigarettes

  3) natural tobacco, therefore fewer chemicals and additives (all cigars, pipes).

- At the same time, when queried directly, many participants were also aware of their particular product's potential to be more harmful than cigarettes.

  → More harmful in terms of mouth diseases (mouth, throat or lip cancer) because

  1) no filter (all cigars, pipes)
  2) stronger tobacco (all cigars, pipes)
  3) higher nicotine levels and a faster absorption rate (large cigars)
  4) tobacco in direct contact with mucous membranes (smokeless)

  → Even so, some smoke product users emphatically believed they would never let their oral condition advance as far as the extreme depiction on one HWM.

  → However, some smokeless users in Lethbridge had personally experienced a few of the mouth-related symptoms, or knew someone who did.

- ***Addiction-related harm*** – a major finding in this study relates to addiction.

  → Even though addiction itself was often misunderstood, addiction-related messages have the potential to create concern for all 3 product categories.

→ Smoke products

- Users expressed some misunderstandings about addiction as well as some concern.

- Most large cigar smokers thought their product was less addictive than cigarettes, or not addictive at all because

  - they smoked for pleasure, or smoked less daily

  - one person believed he was addicted because he had an addictive personality, rather than because of the product.

  Small cigar smokers were split on the addictive quality of their product

  - some felt their product wasn't addictive because they didn't inhale
  - others felt their addiction to cigarillos was similar to that of cigarettes.

→ Smokeless products

- Users generally saw their product as addictive, and as toxic as cigarettes.

- Most had chosen their product because they needed nicotine when they couldn't smoke.

- However, some who hated the taste of chew mistakenly believed it wasn't addictive for that very reason.

Health Warning Messages

- Participants felt there was plenty of information available on the dangers of smoking, and some even felt harassed to varying degrees by the preponderance of health-related messages everywhere, in all the media.

- Despite such media exposure, and product usage, unaided recall of HWMs on their products was generally low, with vague impressions overall.

- ***HWM approval*** -- in all 3 product categories, participants generally approved of HWMs in principle, BUT mainly for others – to prevent people, especially the young, from starting.

  → Participants felt HWMs were on packages for 4 main reasons:

  1) the government's legal obligation or responsibility
  2) to encourage quitting smoking – to warn or remind people of long term health consequences, especially the young (but not them)
  3) to cut down on health-related costs
  4) pressure from anti-tobacco groups.

- ***Personal impact*** – despite general approval, acknowledged personal impact was

→ generally <u>low to non-existent</u> for 4 main reasons:

1) Respondents in all 3 product categories felt they already knew the health risks.

2) Many who still smoked cigarettes had turned to smoke products in an effort to reduce their cigarette consumption, and so were reluctant to accept similar news.

3) Many didn't see, notice or pay attention to the messages, at least not anymore.

   - Some were turned off by the disgusting images.
   - Many large cigar smokers bought individual cigars, so had seen no warnings.
   - The text only messages for smokeless tobacco users didn't draw attention, and were generally unconvincing.

4) Message credibility was questioned by some – for different reasons:

   - Small cigar smokers, especially in Montreal, were skeptical because
     - the messages were untruthful, misleading, and inappropriate for cigarillo smokers
       - the images were unrealistic and exaggerated
       - it seemed like a PR effort for the government
     - some in various groups and product categories felt that if the dangers were really that serious
       - the government would ban their product
       - or, they would at least hear more about it in the media.

→ On the other hand, there were those who thought the messages had some <u>limited impact</u>.

- Some large cigars and pipe smokers thought warnings were valid reminders.
- Some smokeless product users in Lethbridge admitted to being a bit scared – in fact, had already experienced tooth loss, bleeding gums or stomach ulcers.

Reactions to Individual HWMs

Smoke Product Messages

- The table on the following page provides an overview for each of the 4 product messages, in terms of consistency, credibility, impact of text and visual, familiarity, overall effectiveness, and the changes suggested by respondents.

Tobacco use causes mouth diseases / Le tabagisme cause des maladies de la bouche

- Findings were generally consistent across groups, with some differences in credibility between regions generated by both the text and the visual.
- This HWM elicited the strongest reactions because of the mouth visual, and tended to be rejected because it was seen as disgusting, unrealistic and for many, hard to believe as depicted.
- There were few, if any, neutral or indifferent responses.
- While this HWM had a strong visual impact, it was generally a negative one, which neutralized or cancelled any positive effects of the credible textual message.

Tobacco smoke affects everyone / La fumée du tabac affecte tout le monde

- There were consistent findings on this HWM across groups, which tended to reinforce current behaviour (smoking alone or outside), rather than change anything.
- This message had a low visual impact across all groups and low to moderate overall impact because it was old information, which everyone already knew about.

Tobacco smoke hurts children / La fumée du tabac nuit aux enfants

- There were consistent findings across groups.
- While many had seen this HWM before, it was mainly on cigarettes.
- While credibility was high, this message tended to reinforce current behaviour (smoking alone or outside, and not in the presence of children) rather than change it.
- The overall impact was low to moderate because it was old information, which people already knew about.

Where there's smoke, there's poison / Qui dit fumée dit poison

- Findings were generally consistent across groups -- the text was considered strong, the smoke visual weak.

- This was generally seen as the strongest of all 4 HWMs, because

  → it gave new information (50 toxic ingredients) and tended to make people think
  → it seemed to have the most impact and effect.

- However, there were some regional differences over credibility:

  → Francophones displayed more skepticism about the actual number of toxic ingredients

    – while some said they already knew there were toxic chemicals in their tobacco product, others didn't believe there were 50 substances, and thought this figure was exaggerated.

  → Anglophones demonstrated more acceptance and interest.

- Overall impact ranged from moderate to high, mainly for the message.

TABLE: OVERVIEW OF HWMS ON SMOKE PRODUCTS

	Tobacco use causes mouth disease	Tobacco smoke affects everyone	Tobacco smoke hurts children	Where there's smoke, there's poison
Consistency of findings	• High	• High	• High	• High
Credibility	• High	• High	• High	• Mixed – francophones more skeptical than anglophones about 50 toxins
Text impact	• Low • Unnoticed -- offset by visual	• Very low – weak • Old information	• Low –weak • Old information	• High -- • New information
Visual impact	• Strong, highly negative and unrealistic • Ignored	• Low	• Low	• Low
Familiarity	• To many, but mainly from cigarettes	• To some • Information familiar to everyone, not visual	• To many, but mainly from cigarettes	• Not to most
Overall effectiveness	• Limited, because of the visual	• Low • Only reinforces current behaviour	• Low to moderate • Only reinforces current behaviour	• Moderate to high • Mainly for message in small print
Changes suggested by respondents	• Enlarge small print • Make the small print the main message • Tobacco products cause mouth disease • Cigars cause (or this product causes) mouth disease • Tobacco smoke causes oral cancer, gum disease and tooth loss • Use arrows, indicating this is oral cancer, etc	• Be more specific • Use a stronger visual than the smoke • Have what's in the small print in large print – would have greater impact • Change affects to causes health risks • Causes diseases that kill • Smoking causes lung cancer in non-smokers	• Focused mainly on weak or unspecific text, plus a few on the visual • Make small print bigger ***Text*** • Needs stronger wording • Change can to will • Hurts everyone • Second-hand smoke hurts children • Tobacco smoke kills more children ***Visual*** • Put a cigar or cigarette in a child's mouth, that would disgust me • Can't even see the mask, it looks like he's sneezing into a tissue	• Concerned text and visual ***Text*** • Switch small print to large – new important information • Enlarge the small print • Itemize some of the cancer-causing agents -- the most important ones, or the top 10 ***Visual*** • Make it stronger • Show smoke coming from a smoking product (I.e. Cigar) • Show test tubes labeled with the chemical names • Show a skull and crossbones • Show someone in a lab with a gas mask • Show a cancer lesion

Smokeless Product Messages

- The table on the following page provides an overview for each of the 4 product messages, in terms of consistency, credibility, impact of the text, familiarity, overall effectiveness, and the changes suggested by respondents.

  → Note that these HWMs had text only, and no visuals.

This product is highly addictive / Ce produit crée une forte dépendance

- While there were contrasting regional differences in interpretation, across groups respondents generally agreed that nicotine was addictive.
- However, people did not seem to clearly understand addiction and what it entailed.

  → Francophones talked about how quickly addiction developed and disliked the reference to strength of dependence, an aspect which didn't emerge in anglophone groups.

  → Most tended to be aware of their addiction to nicotine because their product was used as a cigarette/nicotine substitute or fix.

    - However, some felt they weren't addicted to chew per se because they strongly disliked the taste.

- This HWM was familiar to some anglophones in Toronto and Lethbridge.
- Impact ranged from high (francophones) to low (anglophones).

This product causes mouth diseases / Ce produit cause des maladies de la bouche

- This message generated some consistent reaction – with credibility as the main regional difference.

  → For francophones, not credible for occasional users.
  → For anglophones, especially in Lethbridge, it was believable.

- Was not considered a strong enough message, especially without a visual -- for most, it was too vague -- not a deterrent, but merely a reminder.
- However, this HWM was relevant because the tobacco was directly in your mouth.
- Overall impact was generally low.

This product is not a safe alternative to cigarettes / Ce produit n'est pas un substitut sécuritaire a la cigarette

- Findings were consistent in that this was the most confusing and unclear of the 4 HWMs – it was misunderstood in both languages – people just didn't get it.
- It lacked impact because the comparison with cigarettes made no sense – participants chewed when they couldn't smoke, and believed their product was safer than cigarettes because of its smokeless qualities.
- The message was considered pointless, redundant, and not informative.

Use of this product can cause cancer / L'usage de ce produit peut causer le cancer

- Findings were generally consistent, with some contrasting regional differences, mainly relating to impact and effectiveness.
- Most considered the message to be credible.
- However, francophones also found the message easy to understand, relevant and persuasive in relation to mouth diseases.
- In contrast, anglophones thought it was old information, and too vague to be effective.
- Impact ranged from low (anglophone) to high (francophone).

TABLE: OVERVIEW OF HWMS ON SMOKELESS PRODUCTS

	This product is highly addictive	This product causes mouth diseases	This product is not a safe alternative to cigarettes	Use of this product can cause cancer
Consistency of findings	• High, with some regional differences	• High, with some regional differences	• High	• High, with some regional differences
Credibility	• High for francophones • Low for anglophones	• Low for francophones, due to occasional use • High among anglophones	• Low	• High
Text impact	• Moderate • All agree product addictive • Some confusion over nature of addiction	• Low • Text too vague – diseases need to be specified	• Very low • Product was safer than cigarettes – for others, because it was smokeless • Personal harm not considered, since product used as cigarette replacement	• High for francophones, clear, understandable, persuasive • Low for anglophones – information vague and old
Familiarity	• To some anglophones	• To some in Toronto only	• To some in various groups	• To some in various groups
Overall effectiveness	• High for francophones • Low for anglophones	• Generally low	• Very low because message made no sense	• High for francophones • Low for anglophones because redundant
Changes suggested by respondents	• The nicotine in this product is highly addictive	• Suggestions mostly from Lethbridge ***Text*** • Describe the diseases • You will die an excruciating death • Lip cancer is painful • Blisters and bleeding in mouth • Bleeding gums or rotted lip ***Visual*** • Show graphic pictures on bottom of snuff can	• None suggested	• Will cause cancer

New HWM Suggestions from Users

- Overall, findings show that people tended to want what amounted to guarantees or high statistical probabilities that they were in danger from using their particular product (more than they thought).

- Participants in both categories seemed to want stronger more direct language, using words like:

  → death, kill, die
  → will, rather than can or may.

- Some in each category also suggested messages relating to addiction:

  → strength of addiction (smokeless product users)

  → images of strong dependence -- medical needle, handcuffs, prisoner's chains (smoke product users).

- Many in both categories also seemed to like:

  → the idea of concrete statistics or numbers to illustrate a particular fact
  → extreme visuals related to death -- death's head, coffin, tombstone, body bag.

- Other suggestions

  → additional images of body parts (pipe/large cigar smokers)
  → frame the visual so it doesn't blend into the package (chewing tobacco users)
  → sarcastic humour
  → use of celebrities
  → greater media coverage.

- Many of the above suggestions were also made by participants in the previous 1998 study.

3. Concluding Comments and Observations

- Findings in this study generally confirm those from the previous qualitative study.

- However, the main difference relates to the notion that the current HWMs have indeed seemed to have worn out, due to:

  → old information

  → the omnipresence of anti-smoking efforts and information in the media and elsewhere.

- This study answers the 8 main study objectives as follows.

1) ***Attitudes toward HWMs***

- General approval in principle
  - good to prevent others, especially the young, from starting
  - for majority – doesn't pertain to "me" or my product
  - cumulative effect fosters concern for some smoke product users.

2) ***Awareness of HWMs***

- Very low – only general awareness, more for cigarettes.
- Message recall was strongly influenced by cigarette message recall.

3) ***Understanding of HWMs***

- General understanding only.
- For many participants, denial and defensiveness affected the way they interpreted the messages.

4) ***Credibility of HWMs***

- Credibility was a key issue.
- Messages had high credibility when related to:
  - second-hand smoke – although old information
  - mouth-related diseases – for all 3 product categories
  - addiction – for small cigars and especially for smokeless products.
- Messages had limited credibility when seen as:
  - mainly applying to cigarette use
  - too extreme or exaggerated
  - too vague -- not specific enough to mean "me " or my product
  - not me because I don't use my product as often as cigarettes are used (by me or others)
- Strongly tied in with relevance
  - Messages were generally not relevant – couldn't be relevant – to me or my product.

5) ***Health risks related to product usage***

- General awareness tobacco can cause cancer and other diseases.
  - Again related more to cigarettes.
- Most not convinced these risks apply specifically to their product.
  - The lack of statistics and media coverage validates perceptions that their product causes less harm than cigarettes.
- Mouth-related diseases elicited varying degrees of concern in all 3 product categories.

6) ***Awareness of chemical or toxic substances in product used***

- General awareness of some toxicity
  - However, even with this toxicity, their particular product was considered less harmful than cigarettes for various reasons.
- Surprise that their product contains over 50 cancer-causing agents
  - Especially effective for a number of cigarillo smokers.
  - Not effective for smokeless tobacco users (hooked on nicotine).

7) ***Ability of HWMs to motivate behaviour change and enhance awareness of use-related health risks***

- Messages and images resembling those on cigarette packages have no impact.
  - People think it doesn't apply to them – it helps feed their denial.
- Messages can enhance awareness if made more specific to their product, otherwise people are likely:
  - to be defensive and to rationalize and argue against them
  - to associate them with cigarettes rather than their particular product.
- Current messages related to harmfulness have low or no impact
  - mainly because of the way harm is conveyed or depicted
  - if not specific to their product.
- Lack of media coverage about their particular product
  - contributes to low awareness and motivation to stop using
  - confirms that their product is less harmful than cigarettes.

- Many chewing tobacco users are clearly and admittedly addicted to nicotine.

  - Most (in large urban centres) disliked the product, yet couldn't stop.
  - This seems to be the most difficult target group for HWMs.

8) ***Development of more effective warning messages***

- Addiction message has potential in all categories, especially smokeless.

  - It does make some people think.

- There is a strong need to break the message link with cigarettes – messages need to be visually and textually unique to each product category.

  - When tied to cigarettes, participants

    - don't see or notice the message
    - tend to believe their product is generally safer.

- Specific negative information about their product – preferably using a number or statistic directly related to their product – does get attention.

  - For example, favourable response generated among cigar smokers by idea that their product contained over 50 cancer-causing agents.

- New HWM suggestions from respondents generally show how conflicted participants were about their use of smoke and smokeless tobacco products.

  - Their desire for strong language and images shows that they want guarantees of harm before they become willing to let go of their habits.

  - While at the same time they tend to disbelieve or argue with extreme images and claims.

4. IMPLICATIONS

- Results show that to increase effectiveness for smoke and smokeless tobacco users, HWMs need to meet the following criteria.

→ ***Specificity***

- Information needs to be product specific; otherwise it will be ascribed to cigarettes and not their product.

→ ***Newness***

- Information needs to be updated to prevent wear-out.

→ ***Balanced visuals***

- Visuals need to be somewhat graphic but not too extreme or unrealistic, to prevent disbelief and avoidance.

→ ***Focus on***

- ***mouth and throat***

  - this aspect seems to have the highest credibility, and avoids arguments about inhalation.

- ***addictive aspect***

  - while addictiveness has the potential to generate concern, more information about the nature of addiction needs to be in the public arena.

2. INTRODUCTION

1. About this Report

- In this report, input from all 9 groups is presented together, but data is frequently sub-divided into the 3 product categories (large cigars and pipes, small cigars, and chewing tobacco and oral snuff).

- Any differences among respondents across the various demographic classifications—whether by language or location, or by product category have been pointed out where relevant.

- Note that for convenience, and in accordance with usual participant descriptions, the report refers to:

  → the 3 French-speaking groups as francophones
  → the 6 English-speaking groups as anglophones.

- The report begins with an executive summary, which briefly outlines the main findings, and ends with some concluding observations and implications for communications.

- The report continues with the detailed findings, which presents respondents attitudes, awareness and views on the health risks associated with using their tobacco products, as well as on the HWMs related to their product category, along with respondents' suggestions for improvement.

- Throughout the report, we use respondents' own language wherever possible, to let them speak in their own words.

  → However, for easier reading, we have not used quotation marks, except for special emphasis, or to explain or clarify some perspectives.

- The report is written in bullet format for clarity and ease of access to findings.

2. Background and Objectives

2.1 Context

- Health Canada is considering amending the Tobacco Products Information Regulations in order to refresh HWMs (Health Warning Messages) which have begun to wear out. The labeling of all tobacco product packaging would be under consideration.

- Cigars and pipe tobacco products must display one of four bilingual HWMs on the primary display surface. Cigars include cigarillos or cheroots.

  → Smokers of large cigars and smokers of small cigars are very different segments. In terms of purchasing habits, smokers of large cigars are closer to users of pipe tobacco products than to users of smokeless tobacco.

- Chewing tobacco and oral/nasal snuff products must display one of four bilingual HWMs, as well as constituent values for nicotine, lead and nitrosamines, on any container side or bottom (warnings for chewing tobacco and oral snuff are not exactly the same as those for nasal snuff).

- There are various types of packages, such as pouch, can, tube, flip-top box, soft package, bundle, plastic or metal container.

- In 1998, Health Canada conducted a similar qualitative study. This year, Health Canada was interested in learning about the current and cumulative impact of HWMs for the 3 product categories.

2.2 Purpose of the Study

- The purpose of this qualitative research was to provide an overall assessment of the impact on consumers of the current HWMs on cigar, pipe and smokeless tobacco packaging.

- More specifically, the relevance, credibility, understanding and usefulness of HWMs was explored according to the following study objectives:

  1. establish general attitudes and views toward the presence of HWMs
  2. determine awareness of HWMs
  3. assess understanding of HWMs
  4. assess credibility of HWMs
  5. determine awareness of health risks related to product usage
  6. determine awareness of chemical or toxic substances in product used
  7. determine whether HWMs can motivate behaviour change and enhance awareness of health risks related to usage
  8. explore issues that would help to develop more efficient warning messages

3. METHODOLOGY

3.1 Qualitative Approach

- Given the nature of the research objectives and the very low incidence of the targeted consumers (<4%), the conventional focus group discussion method was used – with most sessions comprised of 8-10 participants, and several with 4-6.

- We believe that when conducting exploratory research, qualitative works best when used as a learning tool to help understand the range and depth of reaction to the issues at a given moment in time. Such an in-depth review of complex factors, opinions and rationales, including their emotional and psychological basis, is not possible with a quantitative survey.

- However, while the findings do provide unique insights into the perceptions and attitudes surrounding the various issues, and snapshot-in-time impressions, these are **not** quantifiable, and may or may not be representative of the population at large. It is left to the reader's judgement to evaluate the hypotheses generated from such research.

3.2 Targeted Tobacco Users

- The target groups were comprised of Canadian consumers aged 16 and older who used the following products (solely or in addition to other tobacco products, e.g. cigarettes)

  → large cigars and pipe tobacco (24 respondents, including 1 female)
  → small cigars or cigarillos (24 respondents, including 4 females)
  → chewing tobacco or oral snuff (22 respondents, including 2 females)
    - of the 6 snuff users, 5 used oral snuff and 1 used nasal snuff
      - 3 of the 5 oral snuff users were francophones.

- The estimated incidence of these 3 product categories among the population age 16 and older is below 2%.

3.3 Number and Type of Sessions

- From February 21-27, 2003, 9 focus groups were conducted in 3 Canadian centres with a total of 70 participants aged from 16-60+.

  → 6 anglophone groups (4 in Toronto and 2 in Lethbridge)
  → 3 francophone groups in Montreal

- The groups were comprised as shown in the following table.

	Total	Large cigars and pipe tobacco	Small cigars	Smokeless tobacco
Montreal (French)	**3**	1	1	1
Toronto	**4**	1	2	1
Lethbridge	**2**	1	---	1
TOTAL	**9**	**3**	**3**	**3**

- Each session lasted approximately 2 hours, and was audio-taped.

3.4 Participant Selection Criteria

- One hundred retailers were recruited to help find respondents, 40 for each of Montreal and Toronto, 20 in Lethbridge & surroundings. Retailers invited buyers of the tobacco products under study to provide their names, ages and phone numbers in order to participate as respondents in a study on tobacco products. Each retailer was paid $5 for each potential respondent.

- All participants were recruited **randomly** by Créatec+ (using the sampling lists obtained from retailers as outlined above), according to the following criteria:

  → Age ranged from 16-60+.

  → Diverse range of incomes, education, ethnicity.

  → No one had been in a focus group over the past 2 years, and no one had ever participated in a qualitative session on a topic related to smoking or quitting smoking.

  → Some standard employment categories were excluded – no one or members of their family worked for:

    - any PR or advertising agency, any level of government, any market research or marketing firm, radio, TV or other media, any company or organization in the health sector, pharmaceutical or tobacco industry.

3.5 Participant Incentive

- As is standard practice, each respondent received an incentive payment to thank them for their participation (amounts based on incidence).

  → Users of large cigars, pipes or small cigars received $50.
  → Users of chewing tobacco and oral/nasal snuff received $100.

3.6 Discussion Guide

- Participants in all 9 groups were queried along the lines of the client-approved discussion guides in English and French (see appendix 1).

  → Two individual open-ended questionnaires were administered during each session -- responses have been incorporated into the report.

3.7 Moderating and Analysis

- **Mr. Grégoire Gollin** acted as the project manager, responsible for client relations, the design of the work methodology, supervision of the final report as well as overall coordination.

- **Ms. Natalie Gold** moderated the 6 anglophone groups in Toronto and Lethbridge, prepared the detailed analysis incorporating results from all 9 groups, presented a verbal debrief to the client (on March 11, 2003) and wrote the final report.

- **Ms. Louise Saint-Pierre** moderated the 3 francophone groups in Montreal and prepared the detailed analysis for these groups

3. DETAILED RESULTS

3.1 PRODUCT USAGE

3.1.1 Habits and Patterns

Overview

- A large majority of respondents were cigarette smokers, most of whom felt their product was less addictive (to varying degrees) than cigarettes, except smokeless product users (mostly aware of their addiction to nicotine).
- Non cigarette smokers also tended to view their particular product as less addictive.
- In sharp contrast, smokeless tobacco users felt the most strongly addicted than those in the other 2 product categories.
- Inhaling (or not inhaling) tended to concern small cigar users more than users of other product types.
- Smoke product users (pipes and large and small cigars) were absolutely aware of the dangers of second-hand smoke, and took preventative actions.
- The following provides a brief overview of product usage habits and patterns for each of the 3 product categories.

Large Cigars

- Category included 1 female.
- Most participants used other tobacco products:
  - → mainly cigarettes (almost all in Montreal and about half in Toronto and Lethbridge)
  - → just over a third formerly smoked a pipe.
- Some from Lethbridge said they were addicted to cigars.
- Inhaling did not appear to be an issue (was not mentioned).
- Product used mainly outside or when alone.
  - → On the golf course
  - → In the car
  - → At home
  - → Cigar-friendly restaurants, clubs (including a dance club)
  - → Parties
  - → Where no minors are.

- Frequency varied from once a day to once every few months.

  → Like small cigars, perception was that large cigars were used infrequently, especially compared to cigarettes.

Pipes

- Current usage was minimal (only 3 Montreal respondents).

  → Data from some in Toronto and Lethbridge who used to smoke pipes -- but shifted to large cigars -- has been incorporated whenever available.

- Generally pipes replaced cigarettes.
- Users wanted to quit smoking cigarettes.
- Pipe smokers said they did not inhale the smoke.
- Frequency and occasions – in the evening, when alone, at special celebratory occasions.

Small Cigars

- Category included 4 females.
- Some inhaled smoke from small cigars.
- Some felt they don't inhale as much smoke as with cigarettes.
- Most used other tobacco products.

  → A strong majority in all 3 locations also smoked cigarettes.

    – Several quit cigarettes after switching to small cigars.

    – Some still felt addicted to cigarettes, even though they smoked fewer due to small cigars.

    – One Toronto respondent also used nasal snuff occasionally.

    – One Toronto respondent also formerly chewed tobacco.

- Product used mainly outdoors or when alone.

  → Outdoors
  → Alone -- none of my friends like the smell
  → At home
  → Watching sports -- someone's house or bar.

- Frequency varied from almost once a day to twice a month.

  → Like large cigars, perception was that small cigars were used infrequently, especially compared to cigarettes.

Chewing Tobacco/Snuff

- Category included 2 females.
- Most used other tobacco products.
  - → Large majority also smoked cigarettes.
  - → A few from Lethbridge also occasionally smoked pipes and various-sized cigars.
  - → 5 used oral snuff (Montreal and Lethbridge).
  - → 1 used nasal snuff (Toronto).
- Product was mainly used anywhere you can't have a cigarette (but need one).
  - → Outdoors, in nature, fishing
  - → At sporting events (at Skydome, etc.)
  - → When playing baseball, hockey, skidooing, walking in the forest
  - → When working -- electrical work, plumbing, in the warehouse, on the farm – pigs and chickens love the used plug
  - → At home – discrete at home use for some in Montreal, because believed to be socially unacceptable
  - → Bars.
- Some mentioned that you need to swallow if product used in public places.
  - → Most in Lethbridge spit rather than swallow.
- Chewing tobacco frequency varied by location – rural participants used it more often.
  - → Some used daily -- on a regular basis, on the job, whenever they needed a nicotine fix and couldn't smoke.
    - From once a week, to 1 tin a week, to as much as 15 times a day, or every half-hour when fishing.
  - → Some used only occasionally -- when playing sports or socializing at parties (including 1 young Lethbridge female).
- Oral snuff users chewed tobacco when they were out of snuff or smoked cigarettes.
- Some smokeless tobacco users were concerned about a perceived negative image associated with their product.

3.1.2 Perceptions of Popularity

- Overall, the popularity of small cigars was generally thought to be on the rise.
- Large cigars and pipe usage was seen to be on the decline.
- The perceived popularity of chewing tobacco depended on location – decreasing in urban centres and increasing in rural areas.

Large cigars and pipes

- General tendency was to think large cigars and pipes were less popular because:
  - → friends have stopped
  - → fewer friends smoke cigars
  - → society doesn't accept it (because of the smell and the smoke).
- Some thought large cigars were more popular because:
  - → seen more at weddings, special occasions
  - → more people are aware of them and the brands
  - → magazines such as "Smoke"
  - → friends do it.

Small cigars

- Findings were consistent in the 3 small cigar groups (all of which were in urban centres).
- The main perception was that small cigars are more popular – more socially acceptable.
  - → In business I see it a lot.
  - → Women started smoking (small) cigars -- cigarillos are less harsh, smaller.
  - → Some have friends who smoke cigarillos.
  - → It was a fad a year ago.
  - → One saw famous person on cover of "Afficiando" (Arnold Schwartzeneggar).

Chewing Tobacco and Snuff

- Different perceptions emerged between urban and rural participants.
  - → Most in Toronto and Montreal felt it's less popular.
    - – It's not the prettiest thing to stick in your mouth – its an acquired taste.
    - – More brands available now.
    - – Only a few have friends who also chew.

→ In Lethbridge, there was the feeling that it's more popular.

- Smoking is being outlawed, but you can chew in places you can't smoke.
- I know people who chew.
- Not as expensive as cigarettes.
- Better flavour than cigarettes and you can chew longer.
  - Several in Lethbridge showed they purchased cherry flavoured chew.

3.1.3 Reasons for Using Product

- Participants were asked why they used their particular tobacco product, and how they got started -- findings are presented in the table which follows.
- Note that in all 3 product categories, and in all locations, most participants chose their product in relation to their cigarette smoking habit, for various reasons:

→ Cigarette replacement and reduction in an effort to cut down or en route to quitting were cited in all 3 product categories.

→ Large cigars and pipes

- Cigar smokers thought their product was socially more acceptable than cigarettes.
  - A few large cigar users had switched from pipes.

→ Small cigars

- Some small cigar users thought their product was less toxic than cigarettes.

→ Chewing tobacco and snuff

- Users needed a nicotine fix whenever and wherever they couldn't smoke cigarettes.

- ***Positive product features*** -- the main ones included:

→ Smoke products (pipes, large and small cigars)

- Taste, aroma, relaxation and a particular type of image
  - *Le cigare, c'est une gâterie qu'on prend le temps de déguster.* (A cigar is a treat that takes time to savour and enjoy)

→ Smokeless products (chewing tobacco and snuff)

- Chewing tobacco and snuff users mainly used it as a smokeless substitute for cigarettes, or, in the case of one Lethbridge female, as a social lubricant.

- ***How product use began*** -- overall, participants cited for 4 main reasons:

1) Family or social influences

   - In most instances.
   - This was strongest with smokeless tobacco users and weakest with large cigar and pipe smokers.

2) Positive product features

   - Smoke products only were started for this reason, and were usually those connected to pleasure (aroma and relaxation).

3) Image

   - Played a part in inducing some smoke product users to start.
     - *J'aime le prestige et la différenciation associé au fait de fumer le cigare. Je fume lorsque je sors.* (I like the prestige associated with smoking cigars. I smoke cigars when I go out.)

4) Curiosity

   - Tempted a few large cigar and chewing tobacco or snuff users to try.

- ***Summary of key drivers***:

→ <u>Smoke products</u>

   - Reduction of cigarettes, plus the bonus of pleasure, relaxation and some image value.
   - Part of a strategy to reduce or stay away from cigarettes.

→ <u>Smokeless products</u>

   - Nicotine relief (rather than pleasure).
   - Generally not part of a strategy to reduce cigarette use or dependency.

TABLE: WHY PRODUCTS USED AND HOW PEOPLE GOT STARTED

Why large cigars /pipes	Why small cigars	Why chewing tobacco/snuff
1) Cigarette-related: • As replacement when quit smoking cigarettes • To reduce number of cigarettes • Smoke less than cigarettes • Socially more acceptable 2) Switch from pipe use -- not as messy, avoid burn from pipe 3) Taste and flavour better 4) Aroma 5) Relaxation, like a good wine 6) Image • Feels elegant, more sophisticated, classy • Appeal of cowboy look (1 in Montreal) ***Pipe smokers*** 1) Relaxation 2) Pleasant aroma 3) Range of flavours 4) More prestigious than cigarettes • One chose it for the look, got positive feedback from others re aroma	1) Cigarette-related: • Trying to quit cigarettes, cigars last longer • Change of pace – cigarettes get boring after awhile • Cigarettes stink, but cigars have a smell • Less toxic than cigarettes 2) Flavour, taste 3) Relaxation 4) Duration – I get my enjoyment but it's not burning for hours (like large cigars) 5) Image -- a special mindset • Cool Clint Eastwood (2 in Toronto)	1) All cigarette-related (substitute) • Where I can't smoke (e.g. Work, outdoors, sports events) • Quit smoking cigarettes • Trying to quit smoking (nasal snuff user) 2) Others do it at parties and playing sports
How got started		
1) Social influence • At poker game, stags, vacation in Cuba 2) Drawn by aroma -- so good 3) Image – of high roller, looks classy 4) Curiosity and experiment 5) Rebellion -- father hated it	1) Social influence -- bachelor party, sporting events, trip to Cuba, when fishing 2) Family influence -- offered by husband, friend, father 3) Celebrated when son was born, cheaper than cigars 4) Image -- admired how cool Clint Eastwood looked (2 Toronto)	1) Family influence – parents grandparents, or other relatives • Trying to quit smoking, and dad chewed • Started when I was 7 • Started at 11 (grand-father gave him some) 2) Social influence – friends, when playing baseball 3) Peer pressure – started with nasal snuff, but didn't like, makes you sneeze, but gives a nicotine rush different than smoking 4) Curiosity

3.2 PRODUCT ATTRIBUTES

3.2.1General Perceptions of Tobacco Products

- Participants were asked to participate in a projective exercise.
  - → A game where they were to imagine that each of 7 tobacco products (6 product categories) (including cigarettes and 2 types of large cigar) were part of a family, and to assign various roles, personality traits or descriptions to each.
- This exercise produced a fair amount of consistency in the gender, roles and personality traits given to most products.

Cigarettes

- The overall impression of cigarette smokers tended to be negative, and generally implied that smoking cigarettes was socially risky.
- This product was usually feminine -- mother or sister -- because filtered, lighter.
  - → Mother, like in a 50's sitcom – elegant, like Harriet Nelson (of Ozzie & Harriet TV show fame).
  - → Modern mother.
- Some said they could be either gender, but focused on age.
  - → Rebellious adolescent, unruly kids, because smoking cigarettes is a way to
    - rebel -- not allowed in school
    - experiment -- kids like to try things.
  - → Grandpa – because of personal association with own relative.
- Associated personality traits:
  - → outgoing
  - → hooked, nervous, nagging, stressed, loser, lacks will power.

Large cigars

- The overall impression of large cigar smokers was positive, with a strong image value.
- All saw this product as a male authority figure.
  - → Father, uncle, oldest son, older generation
    - Older, 60's or 70's.

→ Rich -- boss, chief, leader, rich uncle

- Established, can afford it.
- "Players" in a club
- Bold personality
- Reputation of quality.

- a few thought of the celebratory reasons for smoking cigars

→ guy getting married, had a kid

Pipes

- The overall impression of pipe smokers was generally positive, with a rather upscale image value.

- All saw this product as male, usually older.

→ Grandfather (even great-grandfather), or elder uncle

- Wisdom, laid back, quiet observer, mellow, eccentric.

→ Professional elder statesman, sophisticated, rich doctor, lawyer

- Intellectual, intelligent
- Unconventional – artist, sailor
- Eldest kid, part-way through law school.

Small cigars

- This product category evoked the most varied response, which indicates the potential appeal of small cigars to a broad variety of users.

→ There were mainly positive image values with some negative.

- Most saw this product as male, but some included females as well.

→ Teenagers, young man of family, brother, cousin

- Someone trying to fit in
- A rebel
- Gay uncle, effeminate
- A little pretentious – not real cigar smokers
- On the go.

→ Middle class

- Sophisticated, almost gastronomic
- Sensual, mellow.

→ Unpretentious father, brother

- Jeans and a T-shirt
- Casual, relaxed (beer and BBQ).

Chewing tobacco

- The overall impression of chewing tobacco users was generally negative, with some positive sports associations.
- This product was generally seen as male.

→ From the past, ancestors

- Grandpa – chewing has been around longer than smoking.

→ Old product, low-end

- Drunken uncle, retired sailor who got kicked off the ship
- Cousin you don't see too often
- Redneck southerner—a cracker, cowboy
- Someone coming to borrow money -- cheap-looking.

→ Current product, younger age

- Baseball players (current or former) or sportsmen associated with habit
- Teenagers – skateboard kids.

Nasal snuff

- The overall impression of nasal snuff was generally mixed, with a risky social value.
- This product was seen as mostly male of various ages.
- Teenagers, uncle or dad

→ Rebel, outlaw, delinquent, experimental
→ Exciting cousin you see once in awhile
→ Flash-in-the-pan guy
→ Ethnic.

- Occupational

→ Underground miners – can't smoke in mines
→ Cowboy, rancher, farmer.

- Grandfather – not much in fashion, more common in older generation

→ Victorian, old gentleman type with frills on shirt, tweed jacket
→ Different from everyone else.

- One respondent saw this product as an old aunt – who had a distinct smell.

3.2.2Positive and Negative Product Aspects

- All participants were asked to complete a second open-ended questionnaire about their tobacco product -- findings are presented in the table which follows.

- ***Best thing about products --*** the top 3 positive responses (best thing) mentioned in all product categories were mainly of an immediate (rather than long-term) nature -- related to the senses, relaxation, satisfaction and smokeless-ness.

  → Smoke products (large cigars, pipes, small cigars)

  - Strong sensory appeal, in terms of taste and smell.
  - Strong relaxation appeal, soothing, calming
    - especially since their product lasted longer than cigarettes.
  - Satisfaction – due to enjoyment
    - for some small cigar smokers, this also related to relief of nicotine craving.

  → Smokeless products (chewing tobacco and snuff)

  - Very limited sensory appeal.
    - In fact, taste was far from compelling for the 2 urban groups of smokeless tobacco users, most of whom emphasized their strong dislike – this was not a product they enjoyed, but rather one that they needed.
    - In contrast, the rural group of chewing tobacco users used a sweet-tasting cherry-flavored brand, and enjoyed it.
  - Relaxation -- mainly because their nicotine craving was met.
  - Satisfaction -- mainly because their nicotine craving was met quickly.
  - Smokeless-ness -- strong rationale due to the lack of smoke, pollution and smell.

- ***Cigarette-related feature --*** while many positive responses were repeated when trying to convince others to switch to their tobacco product, an additional important cigarette-related feature was mentioned in all 3 product categories.

  → Smoke products

  - Were **less harmful or less addictive** because you smoked or inhaled less.

  → Smokeless products

  - Reduced cigarette smoking (satisfied nicotine craving without smoke).

- ***Most annoying thing about products --*** the top 3 negative responses (most annoying thing) mentioned in all categories related to the senses, perceived harm and usage problems.

  → Smoke products

  - Sensory -- problematic issue of smell, for large and small cigar and pipe users -- well aware of their product's negative effect on others.
  - Perceived harm -- awareness among small cigar users (sore throat, addiction), but no mention by large cigar and pipe users.
  - Usage problems for large cigar and pipe users, related to messiness and extinguishing.

  → Smokeless products

  - Sensory -- difficult taste adjustment for urban users, but not for rural.
  - Perceived harm -- some awareness and concern about oral harm.
  - Usage problems -- having to spit.

  → Again, while similar negative responses were repeated when trying to convince others not to use their tobacco product, the focus here in all 3 categories was on perceived harm related to disease -- including cancer and addiction.

TABLE: PERCEIVED PRODUCT ATTRIBUTES

LARGE CIGARS/PIPES	SMALL CIGARS	CHEWING TOBACCO / SNUFF
Best thing about tobacco product I use		
1) Tastes good (most), light, mild 2) Smells good, aroma (many) 3) Relaxes me, soothing effects • Feels smooth when inhaling, less abrasive • Nice to hold 4) Bargain for price 5) Image 6) Shorter smoking time ***Pipe smokers***: • Aroma • Helps you avoid cigarettes • More status than cigarettes • Ritual (accessories used)	1) Taste, smooth taste, lasting taste 2) Relaxing, calming effect, enjoyment • Something to do with my hands 3) Satisfaction of tobacco craving • Less addictive 4) Affordability, price 5) Convenience (shorter time than large cigar, avoid outside in winter) 6) Slow burning, duration (goes out itself so you can light up again) 7) Full body of smoke	1) Satisfies nicotine craving • Gets me through the day, when I can't smoke a cigarette • Get nicotine rush right away (nasal snuff user) 2) Relaxing, soothing – keeps me from snapping 3) No smoke, no pollution, no odour 4) Easy to use, use it anywhere 5) Taste 6) Easy to obtain 7) Long-lasting, less costly

LARGE CIGARS/PIPES	SMALL CIGARS	CHEWING TOBACCO / SNUFF
Most annoying thing about tobacco product I use		
1) Strong smell , people dislike it, smells up my clothes, hands • Usage problems • Must keep humidified, get dry • Goes out all the time • Leaves get messy and roll onto fingers • Butt doesn't stay on, no filter, get tobacco in mouth 2) Cost, very expensive 3) Annoying irritating 'don't smoke' things on package 4) Low availability (only in us, duty free shop) ***Pipe smokers***: • Mouth cancer • Pipe juice	1) Odour, smell, smell to others 2) Harmful, even if you smoke a little • Will eventually kill me, bad for you • Overuse leads to sore throat • Could be addictive if you inhale • Dependency -- starting is worst thing to do 3) Cost 4) Not being able to enjoy where I want -- few places to smoke cigars 5) Come in singles 6) Taste	1) Taste, flavour 2) Having to spit, the spittle • Waste product (remaining flavour gone) • Dirty habit 3) Harmful, can induce illness or disease • It hurts when I use it sometimes 4) Expensive 5) Stains on my hands, teeth 6) Socially unacceptable • Girlfriend despises it • People think you're doing hard drug (nasal snuff user) 7) Hard to find, poor availability
I would convince people not to use my tobacco product by saying		
1) Unhealthy -- poison, causes cancer, harmful to health 2) Addictive 3) Smells too strong, smells bad on clothes, car • Terrible for non-smokers 4) Expensive 5) Doesn't look good	1) Unhealthy -- will eventually kill you, causes cancer, other diseases, harmful to lungs, 2) Dependency, addictive – once hooked, wish you never started 3) Smelly, smells a lot 4) Cost, expense 5) Inconvenient -- can't smoke cigars everywhere	1) Harmful -- causes cancer, mouth diseases, it will kill you • Can cause tooth loss 2) Tastes terrible, acquired taste 3) Bad habit, dirty habit 4) Too expensive 5) Not easy to find
I would convince people using other tobacco products to switch to mine by saying		
1) Tastes good (many) 2) Likeable aroma (many) 3) Less harmful than cigarettes --you smoke less, don't inhale • Real tobacco -- better quality • Doesn't stain fingers 4) Relaxing 5) Cost, not too expensive 6) A nice change, a mild smoke 7) Prestigious	1) Tastes good, sweet, smooth and mellow 2) Cuts down on cigarette use • Smoke less (because of high nicotine content) • Less addictive than cigarettes 3) More satisfying, enjoyable 4) Value, costs less than cigarettes 5) Smell 6) Leisurely, relaxing	1) Can chew anywhere, handy 2) Doesn't affect other people 3) Helps reduce smoking • Its like the patch for me • Less harmful – less damaging to lungs • Less smell, odour • Less tar, less staining 4) Tastes good – sweet 5) Not too expensive ***Nasal snuff user*** • Fast, relatively clean
Nutshell overview		
• More pleasure • Less harmful than cigarettes	• More pleasure • Less harmful than cigarettes	• More relief (nicotine need met) • Cigarette substitute

3.3 HEALTH-RELATED ISSUES

3.3.1 Perceived Health Risks

- There was a great deal of consistency both within and across the 3 product categories about health risks, in that respondents seemed to be in conflict or ambivalent over the issue of product harmfulness.

- However, there was a strong overall tendency – coloured by their desire or hope -- to see their particular product as less harmful than cigarettes.

- Participants in all 3 product categories defensively cited a host of reasons why their product was less harmful than cigarettes – the 3 main reasons were:

  1) Use product less often or consume a smaller quantity of the product (all 3 categories).

  2) Don't inhale, or don't inhale as much (all cigars, pipes)

     - Note that all small cigar and many chewing tobacco users especially felt there were fewer lung problems with their product than with cigarettes.

  3) Natural tobacco, therefore fewer chemicals and additives (all cigars, pipes)

     - *Y as-tu de la nicotine dans le cigare?* (Is there any nicotine in a cigar?)

- When probed, awareness of health-related problems and concerns lay just below the surface in all groups.

- Participants identified 4 main reasons why their product could be more harmful than cigarettes – but the diseases specified were connected mostly to mouth diseases, especially mouth, throat or lip cancer:

  1) no filter (all cigars, pipes)
  2) stronger tobacco (all cigars, pipes)
  3) higher nicotine levels and a faster absorption rate (large cigars)
  4) tobacco in direct contact with mucous membranes (chewing tobacco/snuff).

- Note that some in the small cigar and smokeless tobacco categories thought their product was less harmful even on the specific issue of mouth problems or cancer.

- Other potential diseases mentioned included:

  → emphysema (pipes, large and small cigars)
  → heart problems, including hypertension, clogged arteries (pipes, large and small cigars)
  → gastric problems, ulcers (smokeless tobacco).

TABLE: PERCEIVED HEALTH RISKS

LARGE CIGARS/PIPES	SMALL CIGARS	CHEWING TOBACCO/SNUFF
Perceived health risks		
1) Most agree less harmful than cigarettes, fewer health risks • Smoke fewer cigars • Smoke less often, only occasionally • Don't inhale, or inhale less tobacco • Fewer chemicals or additives -- natural tobacco, non-treated • No paper or glue, so safer burning • No filters with chemicals 2) Some think worse mouth and throat cancer • No filter • Higher nicotine levels • Faster absorption rate • Tobacco stronger 3) Most think same risks between cigars and pipes • One thinks pipe less unhealthy: less tobacco and heat of bowl 4) Most agree chewing tobacco worse: stays longer in mouth and on lips	1) All agree more mouth problems, but fewer lung problems than cigarettes if you don't inhale 2) Some think less harmful than cigarettes (mainly from Montreal) • Don't inhale • Don't inhale as much • Natural tobacco - Higher quality - Less or no additives • No yellow fingers 3) Some think equal harm 4) Some think more harmful than cigarettes • No filter • Stronger tobacco • More damaging if inhale – danger of emphysema	1) Depends on frequency 2) Many feel there's more mouth problems, but no lung problems 3) Some think less harmful than cigarettes • Chew less than you smoke - You smoke more cigarettes • Don't use it often 4) Some think as harmful as cigarettes 5) Some think more harmful • Tobacco in contact with mucous membranes • Some people have to get part of lip cut out
Specific health problems:		
1) Cancer • Throat and mouth cancer 2) Lung disease • Emphysema • Phlegm 3) Clogged arteries 4) Hypertension 5) Addiction	1) Cancer --mouth and throat 2) Asthma 3) Emphysema • Takes your breath away 4) Heart problems, heart disease 5) Risk to pregnancy 6) Impotence 7) Appearance problems • Nicotine stains • Discoloured teeth, rots them 8) Aftertaste – even next day • Need to brush teeth and tongue after	1) Cancer • Lip cancer, tumors • Lose part of lip • Throat cancer 2) Gum disease • Depletion to gums 3) Gastric distress if swallowed • Ulcers 4) Taste is affected 5) Appearance problems • Stains your teeth • Lip sticks out • Brown stain down cheek

3.3.2Effects on Non-Users

- The effects of second-hand cigar or pipe smoke wasn't talked about very much, compared to second-hand cigarette smoke, according to some respondents.

- The general perception was that large and small cigars and pipes did give off toxic smoke, even denser and potentially more harmful than cigarette smoke, and were for that reason anti-social products.

  → *Le cigare, ça ne se fume pas n'importe où; les gens sont encore plus intolérants qu'avec la cigarette.* (You cannot smoke cigars anywhere. People are more intolerant to cigars than to cigarettes.)

- However, throughout the discussions, all participants felt they were considerate of others in this regard.

  → They smoked alone – either outside or only in the company of others who also smoked or who gave permission (I.e. in bars or restaurants where smoking these products is allowed).

- No second-hand smoke and no smell or aroma was an important justification or rationalization for using chewing tobacco or snuff.

- Therefore, as far as participants were concerned, their smoking had no negative effects on non-users.

- In contrast, some cigarillo smokers mentioned that they knew people who actually liked the smell of their product, while no one liked the smell of cigarettes.

3.3.3Addiction

- The general perception was that their tobacco product was

  → either less addictive than cigarettes, or non-addictive – for smoke products
  → equally addictive – for smokeless products.

- ***Large cigars***

  → Most large cigar smokers thought their product was

  – less addictive than cigarettes, or not addictive at all because they
    - smoked for pleasure
    - smoked less daily.

  – However, several in Lethbridge said they were addicted to all tobacco products, including cigars.

    - One believed its because he has an addictive personality – that people react differently to different ingredients – not necessarily because cigars are addictive.

- The addictive quality of pipe tobacco was perceived as lower than cigarettes.

- ***Small cigars***

  → Small cigar smokers were split on the addictive quality of their product.

  - Many in one group agreed cigarillos are not that addictive because you don't inhale.

    - *I don't do it enough to say I'm hooked.*

    - *I don't smoke a lot, so I convince myself I can stop* (female respondent).

  - However, most in another group agreed that the addiction to cigarillos was similar to that of cigarettes.

- ***Chewing tobacco and snuff***

  → Most chewing tobacco and snuff users tended to see their product as addictive, and as toxic as cigarettes.

  - Most were realistic about their addiction, and had chosen snuff or chewing tobacco because they needed nicotine.

    - Many in Toronto agreed they disliked it when they started, but kept using because they needed the nicotine fix when they couldn't smoke cigarettes.

    - One person in Lethbridge tried to quit and couldn't.

  - However, some in Toronto believed chew was not addictive because the taste was such a turnoff.

    - Here is a case where the term "addiction" was misunderstood or not understood correctly -- the impression was that you couldn't be addicted to something you disliked and didn't really want.

- This study indicates that addiction-related messages

  → speak quite strongly to chewing tobacco users
  → have potential among large and small cigar users to create concern.

3.3.4Health Risk Rationales

- The following quotes from all 3 product category users illustrate the attitudes, rationales and justifications they took regarding the health risks of using their tobacco product – it's what they told themselves about their product.

Large cigars and pipes

- *It's a time-bomb, I've gone through quadruple bypass, but I smoke because I enjoy it* (one respondent each in Toronto and Lethbridge).
- *In the hierarchy of doing things, there are worse things I do to myself.*
- *You rationalize; it's a stress relief, so it's medicinal.*
- *Dans une feuille de tabac naturel, il n'y a pas de produits toxiques et beaucoup moins d'additifs.* (In a tobacco leaf, there are no toxic products and considerably fewer additives.)

Small cigars

- *It doesn't affect your body or nervous system as much as cigarettes.*
  - → *You don't smoke as many and you don't inhale.*
- *A cigarette is a race, a cigar is a pace.*
- *You don't see the same kind of hype around cigarillos as cigarettes – you don't see it in the media.*
- *I try to do everything in moderation.*
- *If that doesn't get me, something else will.*
- *I enjoy smoking, I know its not good.*
- *I know it's harmful, but until something is a problem, I won't do anything about it.*
- *People who smoke are gonna smoke – if they tell you you'll die after one cigarette, you'll still smoke it.*
- *I don't smoke around people who don't smoke.* (Many agree)

Chewing tobacco and snuff

- *I think about it, but the addiction -- I'm so on the edge all the time, so I smoke or chew.*
- *I don't use enough for it to be a problem.*
- *You're going to die anyway.*

- *I don't think people want to think about it.*
- *Why don't they make it illegal if it's so harmful?*
- *My mom died of lung cancer and she smoked, and my aunt never smoked and died of lung cancer too!*

3.3.5Known Chemicals

- Overall, participants in all 9 groups identified from 6-8 chemicals or toxins in their particular product.

  → Most people could name 2-3, and several in each group were aware of more.

- Participants in all product categories felt their product was more natural than cigarettes and therefore contained few or no artificial ingredients, compared to cigarettes.

  → This contributed to the perception that their product was less harmful than cigarettes.

- In the table below, we can see that all 3 product categories mentioned nicotine, tar and cyanide and that 2 also cited formaldehyde.

  → Note that some of these ingredients may or may not be real (e.g. "toxin").

Chemicals Identified		
Large cigars	**Small cigars**	**Chewing Tobacco/Snuff**
1) Nicotine	1) Nicotine	1) Nicotine
2) Tar	2) Tar	2) Tar
3) Cyanide	3) Cyanide	3) Cyanide
4) Strychnine	4) Formaldehyde	4) Formaldehyde
5) Benzene	5) Carbon	5) Iodine
6) Carcinogens	6) Carbon monoxide	6) Toxin
7) No added chemicals		7) Flavouring
		8) Same as in cigarettes

3.4 HEALTH WARNING AWARENESS

3.4.1Information Sources

- Respondents in all groups agreed that information about the health risks of smoking was everywhere – indeed, it was highly visible.
  - → TV, media, news, magazines
    - Stop-smoking commercials
    - Law suits against cigarette producers
  - → School
  - → Parents
  - → Government
  - → Doctors, doctors' offices
  - → Warning labels on packages (large and small cigars)
    - They show bad lungs on the label (referring to cigarettes).
- Many also seemed to know where they could find out more information, if and/or when they needed or wanted it.
  - → Internet
    - Just do a keyword search
    - AMA
    - Health Canada
  - → Hospital
  - → Call 1-800 number on package.
- Participants generally felt that there was plenty of information available on the dangers of smoking cigarettes.
  - → In fact, the absence of similar information about their particular product helped foster their belief that their product was less harmful than cigarettes.
- In addition, because of the preponderance of health-related information about the dangers of smoking (cigarettes), people assumed they already knew the risks and hazards of using their particular product (or knew what they should know).
  - → This helped to diminish the interest and attention they paid to HWMs, which usually contained old information, or information not related to their specific product.

3.4.2Usefulness of HWMs

- Overall, respondents in all 3 categories generally approved of HWMs in principle
  - → but mainly for others, as a preventative
  - → acknowledged personal impact was generally low to non-existent.

- Messages which seemed to be aimed at respondents personally tended to be rejected – respondents were reluctant to be told anything because:

  → they felt they already knew the information or what they should know

  → in addition, to a certain degree, those who also smoked cigarettes (a majority in this study), felt somewhat harassed and frustrated -- they had already turned to their product (mainly large and small cigars) in an effort to cut down their cigarette consumption and so were not particularly open to hearing bad news about this product too.

- In this section, we present findings on the usefulness of HWMs by product category.

Large Cigars and Pipes

- Many bought large cigars individually, so they hadn't seen any warnings.

- Large cigar and pipe users were split on whether HWMs were useful or not.

- Some who had seen them said they didn't look or never read them because of the disgusting or revolting pictures.

  → *I refuse to look at it.*

  → *I've bought packages before and asked for a different package, because of the pictures.*

- Others thought the HWMs might have some limited effect.

  → Most people put health risks at the back of their minds, but here its always there – it's effective from that perspective.

- Messages were on the package because:

  → *It is the law, so they're obliged.*
  → *To encourage quitting smoking, to warn people.*
  → *To dissuade you, to show its bad for you.*
  → *To stop health costs.*
  → *Anti-tobacco groups don't distinguish between high and low toxic tobacco products.*

- Personal impact of messages

  → *None, because most people are already aware of the risks.*

  → *Not really aimed at me, only at cigarette smokers.*

    – *Les avertissements concernant les dangers, les effets négatifs du tabac sont sur les paquets de cigarettes, je n'en ai jamais vu sur le tabac à pipe et les cigares.* (Warnings about dangers and negative effects of tobacco are only put on cigarette packs. I have never seen them on cigars or pipe tobacco.)

- Approval granted

  → Any message relating to others was accepted.

    – Will discourage young people considering smoking, or who aren't regular or addicted smokers.

Small cigars

- Some in this category had seen no warning messages on their product.

  → *Les petits cigares, c'est moins nocif pour la santé. Si ce l'était, le gouvernement l'inscrirait sur le paquet.* (Cigarillos are less harmful. If they were, the government would put a warning on the pack.)

- Overall, small cigar users were split on the usefulness of HWMs – by region

  → Tendency in Toronto to approve.

  → Tendency in Montreal to either disapprove or be neutral.

    – *C'est inutile la mise en garde. Un vrai fumeur ne la remarque pas.* (It is useless to have a warning. A real smoker pays no attention to that).

- Messages were on the package because:

  → *Not good to smoke any tobacco product.*

  → *Health Canada protecting itself, avoiding pre-emptive legal action from anti-tobacco groups and smokers.*

- Personal impact of messages

  → Not for most in both locations

    – *I already know this information.*
    – *It's exaggerated.*
    – *Not really aimed at cigarillo smokers.*

- Approval granted (mainly from Toronto)

  → *It gives information.*
  → *Shows long term consequences for new users.*
  → *May stop kids, safeguard our young, stop it before it starts.* (Female)
  → *The government does have some responsibility.*

- Disapproval or neutrality (mainly from Montreal)

  → *Won't change anything.*
  → *They don't tell the truth, are misleading.*
  → *Nobody looks at them.*
  → *Images are unrealistic, exaggerated, ugly.*
  → *Inappropriate or less appropriate for cigarillos.*

→ *Ineffective for long-time smokers.*

→ In one Toronto group, some were more concerned about cost and government posturing.

- *Costs the manufacturer money and then costs consumer more.*
- *Just lets the government off the hook, if it was really that bad the government would ban them.*
- *Something they're doing to make themselves look good.*

Chewing Tobacco/Oral Snuff

- These users generally approved of HWMs on their products.
- Messages were on the package because

→ *It's a law.*
→ *Health care costs.*
→ *It could kill you.*
→ *Government wants to decrease number of people who smoke.*
→ *Aimed at people who don't know that tobacco is harmful (I.e., not me)*
- *For young people.*

- Personal impact of messages – generally low, in all 3 locations

→ *Not noticed.*
→ *Text alone, without pictures, ineffective.*
→ *Not persuasive or convincing -- usually say "may" cause – but I'm not convinced it "will".*

→ Some in Lethbridge admit they are a bit concerned:

- *Scares me.*
- *You don't think it will happen to you.*

- Approval granted by most because

→ *Young people need to know about bad things.*
→ *May prevent new smokers from trying it.*
→ *Just giving information.*

- Disapproval by a few because

→ *Wastes money.*
→ *If you chew, you accept the consequences.*

3.4.3 Unaided Recall of HWMs

- Overall, there was low unaided HWM recall and mainly vague impressions – in many instances the messages on their product were either unseen, unnoticed or ignored.

  → Many small cigar smokers in Montreal didn't believe there were any warning messages on their product.

  → Also in Montreal, HWMs were said to be on the sides of boxes of oral snuff – when opened, the message was cut into 2 parts (on the lid and on the box), rendering them ineffective.

  → The nasal snuff user from Toronto said he saw no messages because he repackaged the snuff.

- While HWM recall was low for all products in this study, it was generally higher for cigarettes, since many respondents were also cigarette smokers.

- Many participants said they either

  → didn't look at or see HWMs anymore, didn't pay attention, blocked them out
  → or hadn't noticed any at all
  – especially those who bought large cigars on individual basis.

- There was some general awareness or vague impressions of textual message content regarding the dangers of smoking.

- There was also some general references to visuals – primarily the "teeth", "disgusting pictures" or "the child".

- Sporadic recall of specific HWMs in various groups included the following:

  → *This is not a safe alternative to cigarettes.* (Several recalled this)
  → *Can harm your children, pregnancy.* (Small cigar, Toronto)
  → *A whole city dies every year.* (Cited several times)
  → *Smoking may be hazardous to your health.* (Small cigar, Toronto)
  → *May cause internal mouth damage.* (Chewing tobacco, Lethbridge)
  → *This product may cause mouth cancer.* (Chewing tobacco, Lethbridge)
  → *Can cause oral cancer.* (Chewing tobacco, Lethbridge)

3.4.4Unaided Perceptions of HWMs

- All participants were asked to complete a second open-ended questionnaire about HWMs on the tobacco product they used (and were recruited specifically for) -- findings are presented in the following table.

- ***Overall*** -- there were as many positive as negative aspects cited.

  → Respondents tended to question both the credibility and usefulness of the messages, for them.

  → While regarding HWMs with indifference or as having low-to-no impact on themselves personally, respondents general approved of their existence in principle – albeit mainly for the benefit of others.

- ***Best thing about HWMs*** -- the top 3 positive responses in all product categories included words like "truth," "harmful effects," "risks" and "awareness".

  → Most also appreciated that youth, minors, beginners and non-smokers were being informed, educated, deterred or made aware.

  → However, there were only a few comments indicating that the messages may have had some impact, however minor.

  - *Tells me I'm blowing my money.*
  - *Seems amusing and scary at the same time.*
  - *Shows quantity of nicotine and tar in pipe tobacco.* (Pipe smoker)

- ***Most annoying thing about HWMs*** -- the top 3 negative responses referred to

  → the disgusting graphics
  → the reminder of potential health hazards -- worrisome
  → their credibility – *Are they true?*

- ***Messages for the Minister of Health*** -- participants in all 3 product categories had both positive and negative messages for the Health Minister about HWMs.

  → <u>Positive</u> statements generally included

  - encouragement to continue – it was especially important to stop the young or others from starting, or to encourage others to quit.
  - requests to include all toxic ingredients, and to be more precise.

  → <u>Negative</u> statements addressed

  - the waste of time and money
  - the fact that they don't work because people will continue to smoke and no one reads them anyway
  - a request to stop moralizing
  - some admonishment or taunt to ban them if they're so bad.

- ***Impact of HWMs*** -- most participants in all 3 categories felt

  → either indifferent to HWMs or that they had no impact

  - *I don't pay attention.*
  - *I'm not stupid, I know its harmful.*
  - *It shouldn't matter, as long as it doesn't affect anyone else.*

  → However, interestingly enough, some participants in all 3 product categories admitted both on paper and later to their groups that HWMs did have some limited impact on them.

  - *Sometimes I think about it and it scares me a little (large cigar/pipe).*
  - *Every once in awhile I'll stop and look at it and think about health.*
  - *I think about it very often.*

TABLE: ATTITUDES TO HWMS

LARGE CIGARS/PIPES	SMALL CIGARS	CHEWING TOBACCO / SNUFF
The best thing about HWMs on packages of tobacco product I use		
1) Tells the truth about tobacco 2) Provides a message 3) Advises people of risks, warns about consequences of smoking 4) Makes people aware, should make you think 5) Deters use by minors 6) Warns beginners about tobacco dependency 7) Shows quantity of nicotine and tar in pipe tobacco (pipe smoker) 8) Is discreet	1) Lets me know harmful effects, potential health hazards, points out risks 2) Tells truth about tobacco 3) Educates youth 4) Good, if it stops someone from using 5) Could deter others from starting 6) They are there 7) Information 8) Tells me I'm blowing my money	1) Awareness of possible health problems 2) Persuade young people not to use 3) Provides a service to non-smokers 4) Seems amusing and scary at the same time 5) Sends a subtle message 6) Not aware of any, don't see it, don't pay attention, don't read it
The most annoying thing about HWMs on packages of tobacco product I use		
1) Pictures are ugly, disgusting, exaggerated, take too much space 2) Unnecessary, enough media coverage • We already know 3) Ingredient list is not complete	1) Reminder -- smoking is harmful, killing myself slowly, makes me question, wasting money 2) The word "may" 3) Graphic pictures, disgusting • Aesthetically messes up package 4) Moralizing, too pushy, my choice 5) Terminology hard to understand 6) Only in English and French 7) Don't recall seeing, don't read	1) Too graphic 2) Are they true? 3) Repetitive – doesn't change 4) Don't care – addicted 5) Don't really work, not persuasive 6) Frightens people 7) Talking about cancer 8) They're everywhere

LARGE CIGARS/PIPES	SMALL CIGARS	CHEWING TOBACCO / SNUFF
When it comes to HWMs, I would tell the minister of health that		
1) Keep it up, keep them -- Holland used skull & cross-bone and smoking dropped incredibly 2) Include all toxic ingredients 3) Waste of money, time, unnecessary, already know 4) Don't think people will quit smoking because of them 5) Stop selling tobacco or stop warnings 6) A cigar is like a good meal	1) Effective and a good idea • May stop the young from starting • May get older adults to quit • Get the message across to people • Tell it like it is • Be more convincing, precise • Be more visible, use bold letters • Ask tobacco companies to remove addictive substances 2) They don't work, people will smoke if they want to 3) Stop moralizing 4) If its that bad – ban them, stop selling them 5) If its so deadly, why continue to sell them for a profit?	1) It is the right thing to do – people must know • Some will think about it • Some will stop using • Give more information 2) It's my business! 3) Would rather not see them 4) Pointless, bad idea • Waste of time and money • No one reads them 5) Only reduce purchases by a slight percent 6) Make it illegal if its so bad 7) Ban all tobacco products 8) Mind his own business, focus on things that matter
When it comes to the effect of HWMs on me, I would say		
1) Sometimes I think about it and it scares me a little, to imagine getting one of the diseases associated with smoking 2) Danger, it's poison 3) Indifferent 4) Have no effect, don't bother me, don't work – leave it in my pocket, look at package less	1) Try to avoid it because it scares me – I don't want to get sick 2) Every once in awhile I'll stop and look at it and think about health 3) No effect, doesn't deter me, don't pay attention, I don't smoke a lot 4) Am fully aware, but not too bothered or worried • My choice • Am not stupid, I know it's harmful	1) I think about it very often 2) It makes me more aware of the danger 3) Concerns me a little 4) Shouldn't matter, as long as it doesn't affect anyone else 5) Have no effect, not effective

* ***Note***: *Toronto large cigar smokers had not seen any HWMs since they purchased individual cigars, so they did not complete this questionnaire.*

3.5 Reaction to Individual HWMs

3.5.1 Cigar and Pipe Messages

- ***Procedure***

  → All respondents had an individual coloured copy (showing text and visual) of each of the 4 HWMs to refer to during the discussion (see appendix for HWMs).

  → The discussion order varied in each group -- participants generally chose the discussion order themselves.

Tobacco use causes mouth diseases /Le tabagisme cause des maladies de la bouche

- ***Overall***

  → Findings were generally consistent across groups, with some differences in credibility between regions generated by both the text and the visual.

  → This HWM elicited the strongest reactions because of the visual, and tended to be rejected because of it.

    - While many had seen this HWM before, it was mainly on cigarettes.

  → There were few, if any, neutral or indifferent responses.

  → While this HWM had a strong visual impact, it was generally a negative one, which neutralized or cancelled any positive effects of the textual message.

- ***The visual***

  → Most participants reacted strongly to the mouth visual – it was the most remembered visual, perhaps because it was also on cigarette packages.

  → Differences regarding the visual split across the urban/rural divide.

  → <u>Urban</u>

    - Most participants in the 2 large urban centres (Montreal and Toronto) had a strong negative reaction to the visual, which affected its credibility.

      - Because they saw it as embarrassing, horrible, unrealistic, too exaggerated, a depiction of an extremely advanced disease, and modified to make it extreme – there was a strong tendency not to believe it.

- *It has to do with oral hygiene – the person in the photo wasn't looking after their teeth.*

- *It looks like bad personal hygiene, not smoking – I'd never let it get that far!*

- *I've never seen anyone who looked like that!*

- Some participants deliberately ignored the HWM to avoid seeing the disgustingly ugly visual.

- However, one respondent felt that it unless it's overdone, it won't work.

→ Rural

- On the other hand, in Lethbridge the visual was considered realistic and utterly believable – in fact, most knew people who looked like this.

- ***The text***

→ Also evoked different reactions, but along a regional divide.

→ Anglophones

- Toronto and Lethbridge participants generally considered the message believable and effective.

  - Some also saw it as persuasive, although not enough to curb addiction.

- There was also a feeling that the text in smaller print – tobacco smoke causes oral cancer, gum diseases and tooth loss -- would be more effective, and a better message because it was more specific.

- Some tended to ignore the text because of the strong visual.

→ Francophones

- In contrast, francophones in Montreal felt the message was not credible, not relevant and not persuasive because it was more applicable to cigarettes.

  - *You don't inhale.*
  - *Even if you do inhale, smoke is less harmful than cigarette smoke.*

- Tended to ignore the text because of the strong visual.

- ***Changes suggested by respondents***

  → Put tobacco <u>products</u> cause mouth disease.

  → Put <u>cigars</u> cause mouth disease, or <u>this product</u>.

  - *I don't think I'm smoking tobacco, I smoke cigars!* (the 2 who liked this suggestion don't smoke cigarettes)

  → It's very small print, people may not take time to read it – enlarge the print.

  → Make the smaller print the main message.

  - Tobacco smoke causes oral cancer, gum disease and tooth loss.
  - Use arrows, indicating this is oral cancer, etc – many in one group liked this idea.

Tobacco smoke affects everyone / La fumée du tabac affecte tout le monde

- ***Overall***

  → There were consistent findings on this HWM across groups, which tended to reinforce current behaviour, rather than change anything.

  → The specific HWM was familiar to some, but the message information was very familiar to everyone.

  → This message had a low visual impact across all groups and low to moderate overall impact.

- ***The visual***

  → The same smoke visual was used for 2 of the 4 HWMs.

  → For the most part, it was generally ignored, and usually not commented on unless probed.

  → When mentioned by respondents, it was not considered a strong, attention-getting device.

  → It had low-to-no impact.

  → At best, only a few recalled seeing it, but could not connect it to any particular message.

- ***The text***

  → Participants in all locations generally saw the message as clear and credible.

  - *Very clear message – everybody is affected.*

  → However, while some found it relevant and effective, many found it redundant and ineffective – it was old news.

  - *We know this already; tell me something I don't know.*
  - *We already do this -- we smoke outside and less often.*
    - *We're more inclined to be generous with other people – it's*
      - *Okay to wreck yourself, but not others.*
  - *Car exhaust affects everyone too.*
  - *It's inappropriate for cigarillo smokers.*
  - *They're trying to do the guilt trip.*
  - *It causes lung cancer in non-smokers -- what about smokers?*

- ***Changes suggested by respondents***

  → Be more specific

  - Change affects to causes health risks
  - Should say causes diseases that kill
  - Prefer smoking causes lung cancer in non-smokers

  → Use a stronger visual than the smoke

  → Have what's in the small print in large print – would have greater impact.

Tobacco smoke hurts children / La fumée du tabac nuit aux enfants

- ***Overall***

  → There were consistent findings across groups.

  → While many had seen this HWM before, it was mainly on cigarettes.

  → While credibility was high, this message tended to reinforce current behaviour rather than change it.

  → The overall impact was low to moderate.

- ***The visual***

  → For the most part, it was usually not commented on unless probed.

  - Most seemed to find it okay.

  → Some recalled seeing it before, but weren't sure where.

→ When mentioned by respondents, it was not considered a strong, attention-getting device.

→ It had low impact.

- ***The text***

→ Reaction was quite consistent across groups.

– Most participants agreed with the message that you shouldn't smoke around kids.

• *It was clear, relevant and persuasive.*

→ However, since most felt they already followed this advice, the message was seen as a bit redundant, not news, not informative.

→ For most, because this message seemed only to reinforce current behaviour, it was not considered particularly effective.

– *No effect – I already don't smoke around kids, or other people.*

– *I developed asthma from my parents smoking around me – I won't let my son in a room where people smoke.*

→ However, it was a little persuasive for a few.

– One respondent wouldn't have bothered to switch to cigarillos if this had been on the package, or if it had been noticed.

– To another, it was a good excuse for considering quitting – without giving the impression of capitulation to anti-smoking social pressure.

→ There were also a few defensive comments.

– *What about other things that cause asthma attacks?*

- ***Changes suggested by respondents***

→ Focused mainly on weak or unspecific text, plus a few on the visual.

→ <u>Changes to text</u>

– *It doesn't trigger asthma attacks in older people?*

– *Needs stronger wording -- change smoking <u>can</u> trigger, a lot of things <u>can</u> trigger.*

– *Should be tobacco smoke hurts <u>everyone</u>.*

– Many in one group agreed it should say *<u>second-hand</u> smoke hurts children.*

– *Should say tobacco smoke <u>kills</u> more children.*

- *The small print should be bigger.*

→ Changes to visual

- *Put a cigar or cigarette in a child's mouth, that would disgust me.* (Female)
- *You can't even see the mask; it looks like he's sneezing into a tissue.*

Where there's smoke, there's poison / Qui dit fumée dit poison

- ***Overall***

→ Findings were generally consistent across groups -- the text was considered strong, the smoke visual weak.

→ This HWM was not familiar to most.

→ This was generally seen as the strongest of all 4 HWMs, because

- it gave new information and tended to make people think
- it seemed to have the most impact and effect.

→ However, there were some regional differences over credibility.

- Francophones displayed more skepticism about the actual number of toxic ingredients.
  - While some said they already knew there were toxic chemicals in their tobacco product, others didn't believe there were 50 substances, and thought this figure was exaggerated.
- Anglophones demonstrated more acceptance and enthusiasm.

→ Overall impact ranged from moderate to high, mainly for the message.

- ***The visual***

→ The same smoke visual was used for 2 of the 4 HWMs.

→ For the most part, this was seen as a very weak visual to illustrate what was considered to be strong and relevant text.

- It had low-to-no impact.

- ***The text***

→ Participants generally found the information clear and relevant – especially in the small print regarding 50 cancer-causing agents -- many didn't know this.

- *If it was more visible on pipe tobacco, it would make me think.*
- *If it wasn't displayed, I'd be certain it isn't harmful at all, or not harmful enough to warrant a warning.*
- *It's probably believable because it's a government agency.*

→ In a number of groups, people wanted the ingredients listed.

- *Sais-tu ce que tu fumes? On aimerait savoir quels sont les ingrédients et leur quantité.* (Do you know what you're smoking? I'd like to know the real substances and their proportions.)

→ However, some in various groups got defensive while discussing this HWM, claiming their product was less harmful than cigarettes.

- *I would be very surprised to learn my product is as harmful as cigarettes.*

- ***Changes suggested by respondents***

→ Concerned both the text and visual.

→ <u>Text</u>

- Switch what's in the small to big print – new important information
  - or enlarge the small print.
- Itemize some of the cancer-causing agents
  - perhaps the most important ones, or the top 10.

→ <u>Visual</u>

- Change the visual to make it stronger.
  - Show the smoke coming from a smoking product (I.e. cigar).
  - Show test tubes labeled with the chemical names.
  - Should put skull and crossbones on, instead of smoke.
  - Show someone in a lab with a gas mask.
  - Show a cancer lesion.

New Message Suggestions from Users

- In this section, we show new suggestions made by each region in the smoke product category.

- ***Overall***

→ Suggestions involved using stronger more direct language and visuals.

- For example, words like -- death, kill, die.

→ Many also seemed to like the idea of statistics or numbers.

Large cigars and pipes

- Montreal
  - → Smoke (not smoking) can kill you.
  - → Smoke makes you get older faster (la fumée te fait vieillir plus vite).
    - Strongly approved of by rest of group.
  - → Use images suggesting
    - Strong dependence
      - Medical needle, handcuffs, prisoner's chains.
    - Tobacco users are losers -- lose money, health, etc.
- Toronto
  - → Use statistics
    - I.e. every year a small town dies.
  - → Change the visuals:
    - Use picture of a coffin.
    - Show more of those photographs with body parts -- I.e. Lung with tumor.
  - → Ask how much of your life are you willing to pay
    - Say that a cigar costs you 2 weeks (or whatever)
    - Say this cigar costs you $5 and 2 weeks of your life.
  - → Use sarcastic humour
    - Enjoy this cigar? Your kid didn't.
  - → Use Hollywood celebrities
  - → How to reach single cigar purchasers? (asked only in Toronto)
    - On cigar bands
    - A sign in the shop, which you might not see
    - Make a bylaw that placards are mandatory in stores
    - Put a sticker on moisture bag or box used by retailers at purchase
    - Advertise in cigar-related magazines -- cigar Aficionado, smoke.

- Lethbridge

  → Have more effective messages -- be more specific, more direct and blunt.

  → Frame the picture – surround it with foil or something, so it doesn't blend into package

Small cigars

- Montreal

  → Because they seek and find pleasure smoking cigarillos, respondents said no HWM will deter them.

    – Do you know what you smoke? (*Sais-tu ce que tu fumes?*)

      - This would draw attention to the many substances in cigarillo smoke.

    – Choose your death.

    – Have warnings similar to dangerous domestic products.

- Toronto (2 groups combined)

  → Smoke this and die (but it won't stop me, though).

  → Use statistics (suggested by both groups)

    – Like the city one – the equivalent of a city dies
    – Put statistics on how much it costs our health system every year
      - Each Canadian pays x dollars in taxes for health care re tobacco use
      - Use concrete actual figures

  → Use numbers

    – 1 out of x males -- use comparisons.

  → The current pictures are redundant – choose more effective ones.

3.5.2Chewing Tobacco and Oral Snuff Messages

- ***Procedure***

  → All respondents had an individual copy (showing text) of each of the 4 HWMs to refer to during the discussion (see appendix for HWMs).

    – Note that the HWMs for smokeless tobacco products had no visuals.

  → The discussion order varied in each group -- participants generally chose the discussion order themselves.

This product is highly addictive / Ce produit crée une forte dépendance

- ***Overall***

  → While there were contrasting regional differences in interpretation, across groups respondents generally agreed that nicotine was addictive.

    – Note that these smokeless tobacco users tended to be the most aware of their addiction, because the product was used as a cigarette substitute/nicotine fix.

  → It was familiar to some anglophones in Toronto and Lethbridge.

  → Impact ranged from high (francophones) to low (anglophones).

- This HWM was favoured by francophones in Montreal because it was understandable, clear and credible.

  → However, some disliked the term "highly" – you're either an addict or you're not – once you start, you can't stop (like eating potato chips).

  → Several felt that the speed of addiction was more credible than the strength – in French, "forte" translates as "strong" rather than "very", as suggested by the term "highly" in the English version.

- In contrast, among the 6 anglophone groups, it was considered neither effective, informative, persuasive nor credible.

  → *So is cocaine (addictive) – it all depends on how you use it.*

  → *It's definitely <u>not</u> addictive, it's only an alternative when you can't smoke – I don't enjoy the taste, I don't think "oh, I want this".*

    – This comment indicates how confused some people are about addiction and what it means to be addicted.

  → *It's not true for snuff either.*

- ***Changes suggested by respondents*** – were minimal.

  → The <u>nicotine</u> in this product is highly addictive.

This product causes mouth diseases / Ce produit cause des maladies de la bouche

- ***Overall***
  - → This message generated some consistent reaction on most aspects – with credibility as the main regional difference.
  - → This HWM was not considered a strong enough message, especially without a visual.
    - For most, it was not a deterrent per se, but merely a reminder.
  - → It was considered neither informative nor persuasive.
    - Too vague for some – need to specify mouth diseases.
  - → However, it was relevant because the tobacco was directly in your mouth.
  - → It was familiar only to some in Toronto.
  - → Impact was generally low.
- The contentious issue was credibility.
  - → Francophones
    - In Montreal, this message was not considered credible for occasional users.
  - → Anglophones
    - People in Toronto and Lethbridge generally agreed it was believable.
      - *It causes depletion to gums, affects your tongue, throat, lips.*
- ***Changes suggested by respondents*** (mostly from Lethbridge)
  - → Describe the diseases
    - *You will die an excruciating death.*
    - *Lip cancer is painful.*
    - *Blisters and bleeding in mouth.*
    - *Bleeding gums or rotted lip.*
  - → Show graphic pictures on bottom of snuff can.

This product is not a safe alternative to cigarettes / Ce produit n'est pas un substitut sécuritaire a la cigarette

- ***Overall***

  → This HWM was familiar to some in various groups.

  → Findings were consistent, in that of the 4 HWMs, this was the most confusing and unclear.

  - It was misunderstood in both languages.

  → It had no impact.

- The text message didn't make sense to users in all 3 locations.

  → In Montreal especially, the French terminology *"n'est pas un substitut sécuritaire"* was complex, confusing, unclear.

- The comparison with cigarettes was the main confusing aspect, because it seemed to contradict participants' reasons for chewing in the first place.

  → Participants chewed when they couldn't smoke, and saw their product as a safer cigarette substitute – safer for others, that is

  - one of the key benefits of chew was it's non-impact on others.
  - Another was that you could use it anywhere, especially where you couldn't smoke.

  → Therefore, people interpreted this HWM in a variety of ways.

  - *It's telling you cigarettes are safer.*
  - *The fact is, it doesn't affect anyone else (unlike cigarettes that do affect others).*
  - *I feel I'm not harming others (unlike cigarettes).*

- Because it made no sense, the message was considered pointless, redundant, and not informative.

- ***Changes suggested by respondents***

  → Actually, no changes were suggested, because respondents were generally convinced their product was less harmful than cigarettes (to non-smokers) due to its smokeless properties.

  → Moreover, personal harmfulness (to themselves) seemed like a non-issue when a nicotine/cigarette fix was needed.

Use of this product can cause cancer / L'usage de ce produit peut causer le cancer

- ***Overall***

  → Findings were generally consistent, with some contrasting regional differences, mainly relating to impact and effectiveness.

  - Impact ranged from low (anglophone) to high (francophone).

  → While the message was credible, for anglophones, it was too vague to be effective.

  → This HWM was familiar to some in various groups.

- ***Regional differences***

  → Francophones

  - In Montreal, this HWM was generally thought to be credible, easy to understand, relevant and persuasive.

  → Anglophones

  - In contrast, while participants in Toronto and Lethbridge found this message credible, they also saw it as redundant, vague and ineffective.

    - *I don't see these anymore.*
    - *Everyone knows the connection between tobacco and cancer.*
    - *Everything causes cancer.*
    - Some disputed the use of the word "can", which implied possibility rather than certainty.

      - *<u>Can</u> is too hypothetical, chance you may not get cancer, even a remote one.*
      - *<u>Can</u> is weak – a lot of things <u>can</u> cause cancer.*

    - *It's more of a safety net for tobacco companies.*

- ***Changes suggested by respondents***

  → Instead of <u>can</u> cause cancer, say <u>will</u> cause cancer.

New Message Suggestions from Users

- In this section, new suggestions from the 3 different locations have been combined for the smokeless product category.

- ***Overall***

  → People in all 3 locations wanted language to be more explicit and gory, and specifically related to:

  - death or duration of life – *just straight up and tell me!*

    - *You'll die a horrible death!*
    - *You are going to die.*
    - *This product kills you. (Ce produit te tue.)*
    - *This will take 15 years off your life.*
    - *You will not get a chance to grow old.*

  - Addiction

    - *This product is as addictive as cocaine and heroin.*
    - *This product is more addictive than cocaine and heroin.*

  - Some liked the use of statistics, which were seen as more concrete -- for example:

    - *80% of people who chew get cancer.*

  → Because the text was considered ineffective on its own, some also wanted strong visuals.

  - *Death's head, coffin, tombstone on the lid.*
  - *Big picture of body bag.*

3.5.3 Nasal Snuff Messages

- Nasal snuff HWMs were very briefly shown to the Toronto chewing tobacco group, since there was 1 nasal snuff user.

  → THIS PRODUCT IS NOT A SAFE ALTERNATIVE TO CIGARETTES.
  → THIS PRODUCT CONTAINS CANCER CAUSING AGENTS.
  → THIS PRODUCT MAY BE ADDICTIVE.
  → THIS PRODUCT MAY BE HARMFUL.

- The "safe alternative" HWM had already been discussed (in relation to chewing tobacco) and was considered confusing and unclear.

- The remaining 3 were seen as ineffective, much weaker and having even less of an impact than the similar messages for chewing tobacco and oral snuff.

  → Only one was commented on -- THIS PRODUCT CONTAINS CANCER CAUSING AGENTS

  - *Useless, pointless.*
  - *I already know this.*

APPENDIX 1

DISCUSSION GUIDE

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February, 2003

DISCUSSION GUIDE
* Smokeless tobacco, cigar, pipe *

1. INTRODUCTION (5 minutes)

This initial stage of the discussion is to establish a level of confidence and a rapport between the moderator and participants. Respondents are informed of the objective of the discussion and what is expected of them.

GUIDELINES

- Word of welcome and introduction of moderator
- Objectives of the research: *"To gather your opinions, impressions and suggestions as consumers, on* ***some aspects related to the packaging of the tobacco products you use****. I would like your feedback on what you think and also what you feel. There are no right or wrong answers. All opinions are acceptable."*
- Confidentiality: *"All your answers will remain confidential. Your name will not be included in the report or mentioned to anyone and your opinions will be combined with those of other participants and will help us understand consumers' views.*
- Role of moderator / client observing discussion / recording
- Neutrality and independence of moderator (*does not work for the government, advertiser, tobacco product manufacturer or packaging firm*).
- Role of participants
- Duration: about 2 hours
- Are there any questions?

GO-AROUND

- Given name, occupation
- Describe the tobacco product you use (say you aren't familiar with these products)
  - Name, brand, flavour, etc. (questions about tobacco behaviour, frequency, occasions, etc. to be asked later)

2. PRODUCT USAGE (10 minutes)

Say: All of you are in this group because you use tobacco products other than cigarettes (cigars, cigarillos, pipes, chewing tobacco, nasal/oral snuff).

1. How many of you also smoke cigarettes?

Go-around

2. Why do you smoke / chew / use (name tobacco product used for which they were recruited)?

3. a How did you start using these tobacco products?

b How long have you been using them?

4. ab Where do you usually use these tobacco products? How often?

5. In general, do you feel that these tobacco products are becoming more or less popular?

6. Do you have friends or people around you who also use these tobacco products?

3. PRODUCT FEATURES (25 minutes)

Group of products exercise

Moderator: *Show the tobacco products family (cigarettes, pipe tobacco, chewing tobacco, large cigars, cigarillos, nasal snuff) and say: We're going to play a little game. Imagine that these tobacco products are a family or a team or group working together – they don't have to share the same family background. They can be from the past, present or future.*

Note: No rotation required. Ask participants to begin with any of the products.

Trigger question (watch for rational and emotional benefits)

7ab **1.** What role would each product play in the group? (Probe characteristic of role and to what extent views are shared by all respondents)

QUESTIONNAIRE 1

2. *Complete the following sentences in writing – on a form to be collected – then probe (go-around) all at once for each respondent. Specify to the respondents that the tobacco product I use refers to the tobacco product on the basis of which they were recruited for the focus group e.g., chewing tobacco, nasal snuff, large cigars etc.*

8a-d

a) The best thing about the tobacco product I use is...
b) The most annoying thing about the tobacco product I use is...
c) I would convince people not to use my tobacco product by saying ...
d) I would convince people using other tobacco products to switch to my tobacco product by saying...

4. HEALTH RISKS (10 minutes)

9 **1.** What are your opinions on the health risks of consuming these tobacco products? *(Name the products used for which they were recruited – e.g., chewing tobacco and nasal snuff – probe one type of product at a time)*

10 ab **2.** What kind of health problems do you believe are associated with these tobacco products? (Probe for: disease, addiction, appearance of users)

11 **3.** How do you compare these health problems with those associated with cigarettes?

12 **4.** What about the effects of these tobacco products on non-users?

13a-c **5.** Are you worried about any health risks associated with these products?

- What kind of concerns do you have?
- How do these health concerns affect your usage of these products?

14 **6.** Could you name any toxic or chemical substances in the tobacco product you use?

5. HEALTH INFORMATION (20 minutes)

15 **1.** How did you learn about the health issues connected with using these tobacco products?

16 **2.** Where can you find out about the health risks of using these tobacco products?

17 **3.** Can you recall any health information on (read tobacco product used to recruit the group – probe one type of product at a time) packages?

18 ab **4.** What do you think of this health information? (Probe very generally – the aim is to see if respondents pay attention (on unaided basis) to HWM, and their credibility

19 ab **5.** **If required:** Are you aware of any health warning messages/labels that are on (read tobacco product used to recruit the group)?

19 **6.** Without looking, can you describe all or any of the warning labels on the packages of the tobacco product you use? (use flip chart) (Probe well for text, colours, placement, visibility, etc.)

QUESTIONNAIRE 2

20 a-7d **7.** *Complete the following sentences in writing – on a form to be collected – then probe (go-around) for each respondent. Specify to the respondents that the tobacco product I use refers to the tobacco product on the basis of which they were recruited for the focus group e.g., chewing tobacco, nasal snuff, large cigars etc.*

a) The best thing about health warning messages on the packages of the tobacco product I use is…

b) The most annoying thing about health warning messages on the packages of the tobacco product I use is…

c) When it comes to health warning messages, I would tell the Minister of Health that…

d) When it comes to the effect of health warning messages on me, I would say that…

6. OVERALL REACTION TO HWMs (10 minutes)

Moderator: *Distribute the* ***LIST OF 4 HWMs*** *to each respondent.*

21 **1.** Do you remember seeing these before?

- Go-around. Count how many have seen each of them.

22 **2.** Why do you think these health warning labels are displayed on the packages of the tobacco product you use?

23ab **3.** Do they make a difference to you? Did you take them into account in selecting brands, using product more or less, changing tobacco products etc.

24a-d **4.** Do you approve or disapprove of the obligation to display these health warning messages? a

- In what way do they speak to you? b
- Do you pay attention to them? c Do you see them? d

25 **5.** What would it take for these messages to make you notice them more?

7. REACTION TO EACH HWMs (25 minutes)

Moderator: *For each HWM*
- *Read the warning*
- *and ask*

1. What does this message mean to you?
   - (Probe for clarity, personal relevance, relevance related to the product, believability / strength of the argument)
   - Is it informative? Persuasive? Useless?
2. What is the effect of this message?
   - On you?
   - On other people who might be considering using this tobacco product?
3. How would you change this warning to make it more effective / relevant?

8. SUGGESTIONS (10 minutes)

Moderator says: Let's try to think of some more effective health warning messages.. Please take a minute and try to come up with a new warning message or idea that you think would be more effective. Let's talk about the ideas you came up with.

Go-around. Record on flip chart – encourage people to improve ideas suggested.

1. Why do you think this would be more effective?
2. What type of health information (content and layout) would be most useful on– depending of product used by the group -cigars, pipe tobacco or smokeless tobacco products?

9. END OF DISCUSSION (5 minutes)

1. Do you have any suggestions to make, or comments you would like to add?

THANK AND CONCLUDE

QUESTIONNAIRE 1

a) The best thing about the tobacco product I use is...

_____

_____

_____

b) The most annoying thing about the tobacco product I use is...

_____

_____

_____

c) I would convince people not to use my tobacco product by saying...

_____

_____

_____

d) I would convince people using other tobacco products to switch to my tobacco product by saying...

_____

_____

_____

The tobacco product I use to qualify for this focus group is:

- Large cigars ..... ( )
- Small cigars/cigarillos ..... ( )
- Pipe tobacco ..... ( )
- Chewing tobacco ..... ( )
- Nasal snuff ..... ( )

QUESTIONNAIRE 2

a) The best thing about health warning messages on the packages of the tobacco product I use is...

_____

_____

_____

b) The most annoying thing about health warning messages on the packages of the tobacco product I use is...

_____

_____

_____

c) When it comes to health warning messages, I would tell the Minister of Health that...

_____

_____

_____

d) When it comes to the effect of health warning messages on me, I would say that...

_____

_____

_____

The tobacco product I use to qualify for this focus group is:

- Large cigars ..... ( )
- Small cigars/cigarillos ..... ( )
- Pipe tobacco ..... ( )
- Chewing tobacco ..... ( )
- Nasal snuff ..... ( )

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Projet : 574-043
Février 2003

GUIDE DE DISCUSSION
* Tabac sans fumée, cigare, pipe *

1. INTRODUCTION (5 minutes)

Cette première partie de l'entretien consiste à détendre l'atmosphère et créer un climat de confiance entre l'animateur et les participants. C'est à ce moment que l'animateur informe les participants sur les objectifs de la discussion et précise ses attentes à leur égard.

CONSIGNES

- Bienvenue et introduction de l'animateur
- Objectifs de l'étude*: « Obtenir vos opinions, impressions et suggestions en tant que consommateurs sur **divers aspects reliés à l'emballage des produits de tabac que vous utilisez**. J'aimerais avoir vos réactions sur ce que vous pensez et également sur ce que vous ressentez. Il n'y a pas de bonnes ou de mauvaises réponses. C'est une question d'opinion. Toutes les opinions sont acceptables. »*
- Confidentialité: « *Toutes vos réponses demeurent confidentielles. Votre nom ne sera transmis à personne et vos points de vue seront combinés avec ceux des autres participants afin de nous aider à comprendre les points de vue des consommateurs. »*
- Rôle de l'animateur / observation / enregistrement
- Neutralité et indépendance de l'animateur (ne travaille pas pour le gouvernement, un annonceur, un fabricant de cigarettes ou une firme d'emballage).
- Rôle des participants
- Durée: environ 2 heures
- Des questions?

TOUR DE TABLE

- Prénom, occupation
- Décrivez le produit du tabac que vous utilisez (dites que vous n'êtes pas familier avec ces produits)
    - Nom, marque, goût, etc. (questions sur les habitudes du tabac, la fréquence les occasions, etc. à être demandées plus tard)

2. USAGE DU PRODUIT (10 minutes)

Dites : Vous êtes tous ici dans ce groupe parce que vous consommez des produits de tabac autres que la cigarette (cigares, cigarillos, pipes, tabac à chiquer, tabac à priser nasal/oral).

1. Combien parmi vous fument la cigarette?

Tour de table

2. Pourquoi fumez-vous / mâchez-vous / utilisez-vous (nom du produit de tabac utilisé pour lequel ils ont été recrutés)?

3. Qu'est-ce qui vous a amené à utiliser ces produits de tabac?

- Depuis combien de temps les utilisez-vous?

4. Où consommez-vous habituellement ces produits de tabac? À quelle fréquence?

5. En général, avez-vous le sentiment que ces produits de tabac deviennent de plus en plus ou de moins en moins populaire?

6. Avez-vous des amis ou des gens autour de vous qui consomment également ces produits de tabac?

3. CARACTÉRISTIQUES DU PRODUIT (25 minutes)

Exercice du groupe de produits

Animatrice *: Montrez la famille des produits de tabac (cigarettes, tabac pour pipe, tabac à mâcher, gros cigares, cigarillos, tabac à priser par le nez) et dites : Nous allons jouer à un petit jeu. Imaginez que ces produits de tabac sont une famille ou une équipe ou un groupe travaillant ensemble – ils n'ont pas à partager le même contexte familial. Ils peuvent provenir du passé, du présent ou du futur.*

Note : Aucune rotation requise. Demander aux participants de commencer avec n'importe quel des produits.

Question déclenchante (porter une attention sur les aspects rationnels et émotionnels)

1. Quel rôle jouerait chaque produit dans le groupe? (Sonder les caractéristiques du rôle et dans quelle mesure les opinions sont partagées par tous les répondants)

QUESTIONNAIRE 1

2. *Compléter les phrases suivantes en écrivant – sur une feuille à être ramassée – ensuite sonder (faire un tour de table) sur l'ensemble des réponses de chaque répondant. Préciser aux répondants que le produit de tabac que je consomme fait référence au produit de tabac à propos duquel ils ont été recrutés pour le groupe de discussion, i.e. tabac à mâcher, tabac à priser (par le nez), gros cigares, etc.*

a) La meilleure chose à propos du produit de tabac que j'utilise, c'est...
b) La chose la plus négative à propos du produit de tabac que j'utilise, c'est...
c) Je convaincrais les gens de ne pas utiliser mon produit de tabac en disant...
d) Je convaincrais les gens qui utilisent d'autres produits de tabac d'adopter mon produit de tabac en disant...

4. RISQUES POUR LA SANTÉ (10 minutes)

1. Quelles sont vos opinions sur les risques pour la santé de consommer ces produits de tabac? *(Nommer les produits utilisés pour lesquels ils ont été recrutés – i.e. tabac à mâcher et tabac à priser (par le nez) – sonder un type de produit à la fois.)*

2. À quel genre de problèmes pour la santé associez-vous ces produits de tabac? (Sonder pour : maladie, dépendance, apparence de ceux qui en font usage)

3. Comment se comparent ces problèmes pour la santé avec ceux associés à la cigarette?

4. Et quels sont les effets de ces produits de tabac sur les non-utilisateurs?

5. Êtes-vous préoccupés par les risques pour la santé associés à ces produits?

- Quel genre d'inquiétudes avez-vous?
- Comment ces inquiétudes pour la santé affectent-elles l'usage que vous faites de ces produits?

6. Pourriez-vous nommer les substances toxiques ou chimiques contenues dans le produit de tabac que vous utilisez?

5. INFORMATION SUR LA SANTÉ (20 minutes)

1. Comment avez-vous appris l'existence de problèmes pour la santé reliés à l'usage de ces produits de tabac?

2. Où peut-on retrouver de l'information sur les risques pour la santé dus à l'usage de ces produits de tabac?

3. Vous souvenez-vous de messages d'information de la santé sur les emballages de (lire le produit de tabac utilisé lors du recrutement du groupe – sonder un type de produit à la fois)?

4. Que pensez-vous de ces informations de la santé? (Sonder de façon très générale – le but est de voir si les répondants portent attention (sur une base spontanée) aux mises en garde et leur crédibilité).

5. **Si requis :** Êtes-vous au courant de mises en garde / avertissements / d'étiquettes qui sont sur (lire le produit de tabac utilisé pour recruter le groupe)?

6. Sans regarder, pouvez-vous décrire tous les ou quelques-uns des avertissements apparaissant sur les emballages de produit de tabac que vous utilisez? (Utiliser le flip chart) (Bien sonder pour le texte, les couleurs, emplacement, visibilité, etc.)

QUESTIONNAIRE 2

7. *Compléter les phrases suivantes en écrivant – sur une feuille à être ramassée – ensuite sonder (faire un tour de table) pour chaque répondant. Préciser aux répondants que le produit de tabac que j'utilise fait référence au produit de tabac pour lequel ils ont été recrutés pour le groupe de discussion i.e. tabac à mâcher, tabac à priser (par le nez), gros cigares, etc.*

a) La meilleure chose à propos des mises en garde sur les emballages de produit de tabac que j'utilise, c'est...

b) La chose la plus irritante à propos des mises en garde sur les emballages de produit de tabac que j'utilise, c'est...

c) À propos des mises en garde, je dirais au Ministre de la santé que ...

d) À propos de l'effet que les mises en garde peuvent avoir sur moi, je dirais que...

6. RÉACTION D'ENSEMBLE AUX MISES EN GARDE (10 minutes)

***Animatrice** : Distribuez la **LISTE DES 4 MISES EN GARDE** à chaque répondant.*

1. Vous rappelez-vous les avoir déjà vues?

- Tour de table. Compter combien ont vu chacune d'elles.

2. Pourquoi pensez-vous que ces étiquettes de mises en garde sont affichées sur les emballages du produit de tabac que vous utilisez?

3. Quelle différence font-elles dans votre cas? En avez-vous déjà tenu compte pour choisir une marque, utiliser plus ou moins un produit, changer de produit de tabac, etc.

4. Êtes-vous pour ou contre l'obligation d'afficher ces mises en garde?

- De quelle façon vous parlent-elles?
- Portez-vous attention à elles? Les voyez-vous?

5. Qu'est-ce que ça prendrait pour ces messages afin que vous les remarquiez davantage?

7. RÉACTION À CHAQUE MISE EN GARDE (25 minutes)

Animatrice *:Pour chaque mise en garde*

- *Lire l'avertissement*
- *et demander*

1. Qu'est-ce que ce message signifie pour vous?

   - (Sonder pour la clarté, pertinence personnelle, pertinence reliée au produit, crédibilité / force de l'argument)

   - Est-il informatif? Persuasif? Inutile?

2. Quel est l'effet de ce message?

   - Sur vous?
   - Sur d'autres qui pourraient considérer l'utilisation de ce produit de tabac?

3. Comment changeriez-vous cet avertissement pour le rendre plus efficace / pertinent?

8. SUGGESTIONS (10 minutes)

L'animatrice dit : Essayons de penser à des mises en garde plus efficaces. Prenez une minute et essayez de proposer un nouveau message d'avertissement ou une idée qui selon vous serait plus efficace. Nous parlerons ensuite des idées que vous proposez.

Tour de table. Noter sur le flip chart – encouragez les gens à améliorer les idées qui sont suggérées.

1. Pourquoi pensez-vous que ce serait plus efficace?

2. Quel type d'informations pour la santé (contenu et disposition) serait le plus utile dans le cas de – dépendamment du produit utilisé dans les groupes - cigares, tabac à pipe ou produits de tabac sans fumée?

9. FIN DE LA DISCUSSION (5 minutes)

1. Avez-vous des suggestions à formuler ou des commentaires que vous aimeriez ajouter?

REMERCIER ET TERMINER

QUESTIONNAIRE 1

a) La meilleure chose à propos du produit de tabac que j'utilise, c'est...

_____
_____
_____

b) La chose la plus négative à propos du produit de tabac que j'utilise, c'est...

_____
_____
_____

c) Je convaincrais les gens de ne pas utiliser mon produit de tabac en disant...

_____
_____
_____

d) Je convaincrais les gens qui utilisent d'autres produits de tabac d'adopter mon produit de tabac en disant...

_____
_____
_____

Le produit de tabac que je consomme qui m'a qualifié pour ce groupe de discussion est:

- Cigares..... ( )
- Petits cigares/cigarillos..... ( )
- Tabac pour la pipe ..... ( )
- Tabac à mâcher..... ( )
- Tabac à priser (par le nez)..... ( )

QUESTIONNAIRE 2

a) La meilleure chose à propos des mises en garde sur les emballages de produit de tabac que j'utilise, c'est...

_____
_____
_____

b) La chose la plus irritante à propos des mises en garde sur les emballages de produit de tabac que j'utilise, c'est...

_____
_____
_____

c) À propos des mises en garde, je dirais au Ministre de la santé que...

_____
_____
_____

d) À propos de l'effet que les mises en garde peuvent avoir sur moi, je dirais que...

_____
_____
_____

Le produit de tabac que je consomme qui m'a qualifié pour ce groupe de discussion est:

- Cigares..... ( )
- Petits cigares/cigarillos..... ( )
- Tabac pour la pipe ..... ( )
- Tabac à mâcher..... ( )
- Tabac à priser (par le nez)..... ( )

APPENDIX 2

HEALTH WARNING MESSAGES

CHEWING TOBACCO AND ORAL SNUFF

THIS PRODUCT IS HIGHLY ADDICTIVE

CE PRODUIT CRÉE UNE FORTE DÉPENDANCE

THIS PRODUCT CAUSES MOUTH DISEASES

CE PRODUIT CAUSE DES MALADIES DE LA BOUCHE

THIS PRODUCT IS NOT A SAFE ALTERNATIVE TO CIGARETTES

CE PRODUIT N'EST PAS UN SUBSTITUT SÉCURITAIRE À LA CIGARETTE

USE OF THIS PRODUCT CAN CAUSE CANCER

L'USAGE DE CE PRODUIT PEUT CAUSER LE CANCER

NASAL SNUFF

THIS PRODUCT IS HIGHLY ADDICTIVE

CE PRODUIT CRÉE UNE FORTE DÉPENDANCE

THIS PRODUCT CONTAINS CANCER CAUSING AGENTS

CE PRODUIT CONTIENT DES AGENTS CANCÉRIGÈNES

THIS PRODUCT MAY BE ADDICTIVE

CE PRODUIT PEUT CRÉER UNE DÉPENDANCE

THIS PRODUCT MAY BE HARMFUL

CE PRODUIT PEUT ÊTRE NOCIF