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**UNDERSTANDING AND IMPACT OF
LIGHT & MILD DESCRIPTORS AND
HEALTH WARNING MESSAGES
FINAL REPORT**

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INTRODUCTION

Background

Smoking is the leading cause of preventable death in Canada. Every year, over 45,000 Canadians die prematurely as a result of disease and illness caused by tobacco use. At least 1,000 of these Canadians will be non-smokers.

To support the Tobacco Control Programme's strategy of protection, prevention, cessation and harm reduction/product modification, the Office of Research, Surveillance and Evaluation is responsible for:

- Increasing knowledge of the health effects of tobacco use
- Monitoring and analyzing changes in tobacco consumption patterns, public attitudes, industry practices and the product
- Providing relevant and timely information to support decision-making and the development of effective anti-tobacco policies and programs

Research Objectives

The primary purpose of the research is to achieve a better overall understanding of how and why smokers choose between Light and Mild and Regular brands of cigarettes. The research was also designed to gauge the understanding and impact of the pictures and text associated with Health Warning Messages on cigarette packs.

This project is intended to delve into the knowledge, attitudes and behaviours associated with choosing between Light or Mild and Regular cigarettes. Specific objectives for Light and Mild component of the research are as follows:

- Examine knowledge, attitudes and behaviour of **new smokers** to determine which criteria they used to choose Light or Mild Cigarettes instead of Regular Cigarettes. (Were they influenced by the Light and Mild descriptors, and if so, in what way?)
- Examine the knowledge and attitudes of smokers which prompted a **switch** from Regular to Light or Mild cigarettes. (Was there a perceived health benefit? Was it a stage in the quit process?)
- Determine if **long-term Regular cigarettes smokers** had ever considered switching to Light or Mild cigarettes, and identify reasons why they had not. (Taste, image, no health benefit, etc.).
- Determine if **current Light or Mild cigarette smokers** had ever tried or regularly smoked Regular cigarettes, and if not, why? If they had regularly smoked Regular cigarettes, why did they switch to Light or Mild?
- Identify smokers perceptions of Light and Mild cigarettes as compared to Regular cigarettes (i.e. relative health risk, levels of chemical content, taste, etc.).

- Identify impressions of smokers who use various brands, in terms of health consciousness, age, amount smoked, and masculinity/femininity.
- Identify impressions of Light and Mild or Regular brands, in terms of ease of draw effort, taste pleasantness, level of nicotine and tar delivery, addiction, and toxicity

Specific objectives for Health Warning Messages component of the research are as follows:

- Assess which pictures have the least/most impact.
- Assess which text messages have the least/most impact.
- Determine which messages smokers seek to avoid, and why.
- Compile a list of themes smokers would like to see addressed in new messages.

Methodology

A total of eight focus groups were held to gather information on the two primary research objectives. The focus groups were held in Toronto, Montreal, Vancouver and Halifax. The groups in Montreal were conducted in French, while those in the other three markets were conducted in English.

Segmentation was as follows:

Toronto

- One group of **Initiators** (defined as Young adults (aged 16-21) who have begun smoking either Light or Mild cigarettes within the past year, and were not previously smokers.)
- One group of **Switchers** (defined as Smokers (aged 18 and above) who have changed brands from Regular to Light or Mild cigarettes within the past six months.

Montreal

- One group of **Initiators**
- One group of **Switchers**

Vancouver

- One group of **recent uptakers of Light/Mild** (defined as smokers (aged 18 and above) who have been smoking for less than five years and currently use Light or Mild cigarettes)
- One group of **Regular smokers** (defined as smokers who have continuously used only regular cigarettes, for a period of at least 20 years.).

Halifax

- One group of **recent uptakers of Light/Mild**
- One group of **Regular smokers**

An average of about 10 people participated in each group, and each session lasted approximately two hours.

The groups were held between September 15 and September 26 2003.

Caution:

The participants for this research were screened according to the criteria outlined above by Health Canada. In the course of conducting the focus groups, there was some indication that the screening criteria might have put some limitations on the amount of information that could be gleaned from the research. There were relatively few in any of the sessions who smoked 'mild' cigarettes, and virtually no one who smoked any of the brands which the tobacco companies alternatively label as 'extra light', 'ultra light', 'light smooth', 'deluxe ultra lights'. It could be that it is those who smoke the latter types of cigarettes are ones who believe they are making a healthier choice.

Please note that this research was qualitative in nature. Therefore, even though some tools were used in the groups as research aids, the results from these questions are not included in this report. As the research undertaken was qualitative in nature, the results of this report are not projectable to the general population. In this context, numeric data have little meaning.

EXECUTIVE SUMMARY

'Light' Has More To Do With Taste Than Health (Except for Some Switchers)

Qualitatively, it appears that those who are smoking light cigarettes seem to have made a conscious choice to do so. Many of those interviewed have tried regular cigarettes and opted for light because of the taste. They find regular cigarettes harsh, with a strong taste. By way of contrast, they find light cigarettes to be smoother, with a more palatable taste.

Some have chosen light because of what it *doesn't do* to them. That is, they find that if they smoke regular cigarettes, they get a headache, a rough throat, burning in their lungs. This does not happen to the same degree with light cigarettes.

Those who smoke regular cigarettes have chosen *against* light because they do not find the taste, or the smoking experience satisfying. The very elements which attract some people to light, tend to deter others. Those who have been smoking for years simply do not find they get what they need from light cigarettes.

Very few in the groups acknowledged openly that they were influenced to try light cigarettes by the 'light' descriptor. However, a few, particularly Switchers, have chosen light cigarettes because they believe they are less harmful. They tended to interpret 'light' in the context of tobacco the way they interpret 'light' in the context of products like cheese or beer. That is, they believe that 'light' must mean something has been 'lightened' or reduced in the product. In the case of tobacco, they believe that it is the nicotine content which is lower than it is in regular cigarettes. It is clear that a few people did choose light cigarettes for this reason. They believe that if they smoke light cigarettes, they are not introducing as much nicotine into their systems as they would if they smoked regular cigarettes.

A few people did say they switched to light because they believe the lower nicotine content will help them quit smoking altogether. They see light cigarettes as one stepping stone on the road to quitting. While this view did not seem widespread (qualitatively), it clearly does exist.

Overall, the way in which smokers perceive the various types of cigarettes tends to be a reflection of what they smoke. The type they smoke tends to be the one they consider to be the tastiest, the easiest draw on and, in some cases, the safest to smoke. However, all types are considered addictive, and there is a sense that there are no 'levels' of addiction. While a number do believe that light cigarettes have less nicotine, this is not widely considered a reason to consider them less addictive, largely because many feel they probably smoke more light cigarettes than regular in order to get the same 'hit'. Similarly, there is a perception that light cigarettes have more chemicals in them than regular cigarettes do, and that this simply 'counter-balances' any positive impact that might be felt from less nicotine.

On balance, smokers seem prepared to believe that smoking light cigarettes is no safer than smoking regular cigarettes. While there are a few who prefer to believe otherwise, on a totally rational level it is a message that carries a lot of credibility.

Messages And Visual Images

In the discussion of the messages and visuals, a number of themes emerged. One theme has to do with children. Messages which focus on children tend to have impact because people believe children are defenseless. They recognize that children do not always have the choice to leave an environment in which someone is smoking, and can therefore be a victim of second-hand smoke. Similarly, they believe that children do not have the judgement to understand that they should not start smoking, and yet are easily influenced by those who do smoke, including their own parents. For these reasons, many of the smokers interviewed feel that the messages which point out the impact of smoking on children are ones which have the potential to influence them.

In this respect, visuals which show babies in the hospital can have impact; there is nothing more helpless than a baby, and this tends to generate a lot of sympathy. However, the visuals of children that were evaluated were considered contrived. The visuals on their own, without the text, seemed to have relatively little impact.

Similarly, the visual which shows a pregnant woman smoking seemed to generate mixed response. While most agreed that a woman should not smoke during pregnancy, there is a sense that the message about the harm to the baby has been effectively communicated, and that anyone who is still smoking during pregnancy is unlikely to pay any attention to the messages on cigarette packages.

A second theme is disease. The mention of serious medical conditions like strokes, heart disease, lung cancer, while not new news, continue to have an impact on some people, particularly those who have seen a smoking friend or relative suffer through one of these. When the mention of the disease is coupled with a statistic, the impact seems to be even greater.

Similarly, one of the key types of images which they feel has an impact are those which show diseased organs – lungs, heart, brain. These are considered real, they are graphic, and smokers know without a doubt that these pictures could be of their own organs. Qualitatively it appears that these visuals alone, the text alone, or the visual and text together are among the most effective messages.

Text messages about some of the less fatal ailments, such as gum disease and tooth loss seem to be less effective. However, the visual which clearly has impact is the one which shows the outward physical signs of smoking. The picture of the diseased mouth was selected in virtually every group as one of the more disgusting (and therefore impactful) visuals. When the signs of smoking appear in the mouth, on yellow stains on the fingers and teeth, in wrinkled skin, smokers get concerned. These visuals play to their egos, in

that no one wants to present a physical appearance that others will find disgusting. To some, their outward appearance can be more important than the physical problems which can be occurring internally.

Qualitatively, it would appear that the message about impotence had a significant effect on the younger males interviewed, as well as some of the younger women. This message seems to be less widely known than some of the others. When used in combination with the visual of the limp cigarette, the overall message seems extremely effective. Impotence was described as 'every guy's nightmare', and the visual is an effective way of communicating the potential problem.

There seems to some degree of recognition that cigarettes contain chemicals other than nicotine, and there was some awareness that light cigarettes in particular have a lot of chemicals. When smokers see these chemicals listed in a message, it can have an impact simply because the names are associated with something serious. It is particularly effective when a number of chemicals are listed. However, others feel the impact is diminished by the fact that they do not know what the chemicals do, and why they are there. It is easy to dismiss the message if they do not fully understand it. It is even easier to dismiss it when only one chemical is mentioned.

The visuals that were associated with these messages did not resonate well. Neither a dirty ashtray nor drifting smoke was considered effective. These are everyday sights that smokers are used to, and are able to ignore.

Some of the straightforward, factual messages tend to have an impact, particularly when a statistic or fact that is easily checked is used. In this respect, while some respond to the idea that the equivalent of a small city dies each year from tobacco use, others would prefer to see numbers. The addition of the graphic to the text tends to add credibility to the text message.

Second-hand smoke as a general theme does not necessarily have a lot of impact, as smokers tend to believe that legislation has dealt with the problem to a large extent. It continues to have impact, however, in the context of parents who smoke around their children. However, as noted, the visuals that have been attached to the second-hand smoke messages, even the one featuring children, do not appear to have much impact.

Some Other Themes Were Suggested For These Messages

In each group, participants were asked if there were other themes that could be depicted through visuals or text messages on cigarette packs. Some of their suggestions included:

- the cost of smoking; how long you must work to pay for a pack; what else could be purchased with the money spent on cigarettes
- suggestions/tips for quitting
- raising awareness of the threat of fire from lit cigarettes

- more on the outward signs that smoking can have on one's physical appearance – tongue, fingers, skin, teeth, etc.
- more specific information on what the chemicals in cigarettes do



DETAILED FINDINGS

REACTION TO THE CONCEPT OF 'LIGHT'

As noted in the introduction to this report, there were four different sub-sets of the smoking population interviewed in this research:

- *Initiators*
- *Switchers*
- *Recent Uptakers*
- *Regulars*

The discussion which follows highlights the similarities and the differences across these groups in terms of how they regard 'light' versus 'regular' cigarettes.

There Are Similarities In Terms Of How People Started Smoking

Each of the four sub-groups was defined at least partially by age, and partially by how long they had been smoking. Aside from these obvious differences, there were some marked similarities in terms of how people got started smoking.

The oldest group – those who have been smoking for 20 years or more – tended to start very young. They typically claimed to have had their first cigarette in their early teens, and to have been reasonably heavy smokers before they left their teens. Some started smoking because they saw their parents smoke. One man said his dad used to ask him to light a cigarette for him while he was driving, and the boy began to take one puff, then another and another before handing the cigarette to his father. He eventually began 'borrowing' cigarettes in order to have a complete smoke.

Some of the oldest participants in the 'Regular' group said that cigarettes were easy to buy when they were young, and that because cost was not a deterrent, they fell into the habit of buying them regularly. One man said he used his lunch money to buy cigarettes when he was growing up in England.

Many said they began to smoke because their friends did. It was a status symbol; it was the 'thing to do'.

This latter scenario was replayed by the younger people in the groups. Those in the Recent Uptake group also said they started in high school, or even the younger grades. They wanted to be cool, and to fit in with their peers. One woman said that she had changed schools in high school, and felt it would help her to assimilate into her new school if she smoked with her peers. Some in this group also started because their parents smoked, and it was easy to 'borrow' cigarettes.

A few in the Recent Uptake group had recently re-started smoking after having quit for a number of years. One had survived a dramatic car accident and felt that life was too short to worry about getting cancer or heart disease from smoking when he knew he could have been killed much more quickly in the accident. (His logic may be suspect, but he clearly

believed what he was saying.) Another woman had re-started smoking when she began a stressful job. Overall, a new stress or significant change in lifestyle tended to be the main trigger for those who recently re-started smoking.

The people in Initiators group were, by definition, younger than those in the other groups. Most said they were in their late teens or early twenties when they started smoking. Some of these said they started to smoke socially when they went to bars; qualitatively, there seemed to be a clear link between drinking and smoking. Overall, the bar scene and the consumption of alcohol in social situations seems to have been the main trigger among this group. Several do not consider themselves "real smokers".

Some in the Initiators group started smoking when they got their first job. A few said they started smoking when they noticed their co-workers would take 'smoke breaks'. Others said they smoked on the job because 'there was nothing to do' at work, and they were bored. Smoking a cigarette helped to fill the time. Some suggested they started to smoke because someone convinced them that it would help relieve stress on the job or at school.

The people in the Switcher group tended to reflect all of the above stories to some extent. However, qualitatively it appeared that some of these people, particularly in the English markets, were lighter smokers than the others. A number of them indicated that they smoke 'only on weekends' or 'only when I drink'. That is, they seemed to associate smoking with specific activities and sometimes specific times of the week. Moreover, they indicated that their consumption of cigarettes is light, with relatively few of them indicating they smoke more than a pack a week.

This does not reflect the Montreal Switcher group. Most were heavy smokers.

Why Smoke Light Cigarettes?

Three of the four sub-groups were defined as people who smoke light or mild cigarettes. They were asked why they have chosen 'light' or 'mild' as opposed to 'regular' cigarettes. It should be noted that there were relatively few people in any of the groups who smoked mild cigarettes, and there was typically little knowledge of mild cigarettes. A number of participants indicated that there are relatively few brands of mild cigarettes, and that this contributed to their overall lack of information about mild. Overall, then, most of the participants in the research who did not smoke regular cigarettes, smoked light ones. The balance of this report focuses on light and regular cigarettes.

It is important to note, however, that the market seems to be basically segmented in three major categories: Regular, Light, and Extra/Ultra Light or Mild. There are sub-categories within each segment that have to do with both the length and the strength of the cigarette. For instance, "regular" can mean both regular strength and regular length light cigarettes.

In some respects, the light segment is actually a mid-strength segment, which includes brands such as Players Light and Export A Medium. It is not monolithic in terms of strength, since a brand like Players Light would be stronger than most other light cigarettes, the Players brand having been historically positioned as stronger, more masculine and satisfying than brands such as DuMaurier and Matinée. Similarly, the Extra/Ultra Mild segment comprises milder cigarettes, as well as extremely weak ones.

There is a lot of confusion among smokers on what these descriptors mean. For example, most believe 'mild' to mean less strong than 'light', but a few disagree. Others claim the taste of 'mild' vs 'light' depends on the brand.

Some believe the descriptors refer to the amount of nicotine in the cigarette, but again, there is confusion. This confusion is made worse by the fact that cigarette manufacturers must now show a range of tar and nicotine levels, as opposed to an easy-to-understand fixed amount. As a result, many consumers have resorted to buying by the colour-coding, especially the popular Export brand, the darker colours being associated with a stronger, fuller flavour.

Regardless of the sub-group they fell into, the Initiators and Recent Uptakers tended to voice similar reasons for choosing 'light'.

Qualitatively, it appears that, for most, it was a conscious choice. A few said they had been introduced to smoking with light cigarettes, and had always smoked them. Because they enjoy the taste and the experience, they had no reason to try 'regular'. Several, especially among Initiators, had just adopted them because it was the brand they were introduced to and which people around them smoke. In addition, some light brands are among the most popular. In many instances, there are indicators that they were selected mainly because of their popularity, the 'Light' descriptor being somewhat inherent.

Others, however, have tried regular cigarettes, and they chose light because of the taste, and the smoking experience. They described the taste of light cigarettes as smoother, less harsh than regular cigarettes. They find the experience sufficiently satisfying, without the stronger taste they associate with regular cigarettes.

In Montreal, most of the Switchers had started with regular strength cigarettes and moved to lighter cigarettes because they believed (or hoped) that they were either less harmful or more socially acceptable. For instance, one woman explained that it gives her a defense against non-smokers who "bug her about her smoking" because it allows her to "tell them that she is doing something about it". A few believe it is the first step towards quitting.

Generally speaking, however, most admit not knowing how much lighter light cigarettes really are. Some even claim they have heard they contain more chemicals than regular cigarettes.

A number of Switchers believe that light cigarettes have less of a negative impact on their throat and lungs; for example, one woman said she switched to light after having the flu

because she found the regular cigarettes irritated her throat. Similarly, a few indicated that they will switch to light when they have a cold for the same reason.

Others describe the 'after-effect' as being less severe. For example, several people suggested they can smoke light cigarettes all evening (in a bar or at a party), and not have a headache or sore throat the next day. They felt the same could not be said of regular cigarettes. As one woman said, she 'doesn't feel it as much' when she smokes light cigarettes.

A couple of people suggested they prefer light cigarettes because they are involved in sports, and they find the light cigarettes easier to handle. They are not as likely to feel a burning in their lungs if they participate in sports after smoking a light cigarette.

A few people, particularly women, said they find light cigarettes less smelly. Not only did they find the smoke itself more palatable, they find that when they smoke a lot of cigarettes, they do not have the same smoky smell attached to their skin, hair and clothes that they notice with regular cigarettes.

A few of those who smoke light cigarettes said they are smoking fewer cigarettes now, and that a light cigarette now satisfies their craving for nicotine.

Qualitatively, there are a few people who smoke light cigarettes because they believe (or choose to believe) it will help them quit smoking altogether. There is a general acknowledgement that light cigarettes have less tar and nicotine than regular cigarettes. If this is the case, some argue, then they are bringing less tar and nicotine into their systems, and are therefore gradually cutting back. They believe this will help them to eventually quit smoking. The discussion of nicotine was the only time in which any of the participants suggested that the information on the package had influenced their decision to smoke light cigarettes.

It should be noted that some of those who choose to smoke light because they have less nicotine openly admit they are deluding themselves into believing they are doing something good for themselves. That is, while they believe there is less tar and nicotine in each cigarette, they also suspect they are smoking more cigarettes as a result. The notion that they are doing something good for themselves is largely psychological, and a number are prepared to admit it.

Most of the people interviewed are not attracted to Extra/Ultra Light/Mild cigarettes, which they describe as "smoking air", usually because the filter is punctured. Some who had tried them admitted covering the filter's holes with their fingers or even tape, or cutting it in half outright. In essence, they consider their own light brand to be "middle-of-the-road".



Why Not Light?

Those who smoke regular cigarettes were also asked whether or not they have ever considered light cigarettes. A few have tried light cigarettes almost by accident, when they borrowed a cigarette from a friend because their own pack was empty.

Others made a conscious choice to try light cigarettes, partly out of curiosity to see what they taste like, and partly to see what the impact would be on their lungs and throat. One man suggested he tried light cigarettes for a time in order to 'give his lungs a rest'. Several temporarily switch to lighter cigarettes when they have a cold.

To a large extent, those who smoke regular cigarettes were not impressed with light. They typically described them as having less flavour and less impact. Light cigarettes were described as a 'waste of time' because they do not offer the same 'hit' as regular cigarettes. Smoking a light cigarette is like 'smoking air' was a frequently heard comment. A number of these regular cigarette smokers believe they would need to smoke three light cigarettes in order to have the same effect as one regular cigarette. Those who have been smoking for 20 years or more (as these people were recruited to do) believe their systems are used to the regular tobacco, and, in fact, need the regular tobacco in order for them to feel the effect they crave. Light cigarettes simply did not satisfy them.

This is especially true of Extra/Ultra Light brands which smokers of regular cigarettes do not even see as "real cigarettes".

Perceptions of Similarities And Differences Across Different Types of Cigarettes

** All Types Have Elements In Common*

Participants in each group were asked to describe how they believe light, mild and regular cigarettes are the same, and how they are different. The perceptions of the various sub-groups are fairly similar in terms of how they believe the different types of cigarettes are similar:

- all cigarettes cost the same
- all are packaged the same
- many of the same brands offer all three types

- all have a filter
- all have the same look and feel

- all have the same basic ingredients; all have tar and nicotine; all contain other ingredients
- all are bad for you; all lead to cancer, heart disease, wrinkles
- all are addictive
- all smell bad

However, the various sub-groups had slightly different views of how the three types of cigarettes are different.

* *Perceptions Of Light Cigarettes*

In terms of physical differences, there was some agreement across the sub-groups that **light** cigarettes have less nicotine, but possibly have more other chemical additives. This is something they have learned from the package labeling. However, some believe light cigarettes have more additives to make up for the weaker tobacco taste.

The differences across the sub-groups emerged in the way in which they described the taste of light cigarettes.

* *Those Who Smoke Light Believe They Taste Better*

Those who smoke light tend to describe light cigarettes as smoother, and milder in taste than regular, yet more satisfying than extra-light or mild cigarettes. They find them enjoyable, easier to inhale. The light cigarettes offer sufficient taste to ease their stress and/or calm their nerves.

Light cigarettes are considered as easy to draw on than regular cigarettes, and much easier than Extra or Ultra Light ones. Those who smoke light find they cough more if they smoke a regular cigarette.

Some of those who have switched to light recently believe they can smoke more light cigarettes than regular ones, and this is considered a benefit to those who like the ritual of lighting and holding the cigarette. This is especially true of switchers who believe light cigarettes are less harmful.

Some of those who smoke light cigarettes believe they are different from regular because they have less tar and nicotine and are therefore 'safer' to smoke. This was not widely articulated, but there are clearly some people who believe it.

Those who smoke light cigarettes personify them as outgoing, cool and popular. If a light cigarette was a person, they viewed it as being like themselves – either working or a student, probably an occupation with a little stress. Light cigarettes tend to be perceived as younger, and less overtly masculine (or macho) than regular cigarettes. There is some sense that 'light cigarette' is someone who plays it safe.

* *Those Who Smoke Regular Believe Light Have No Taste*

Those who smoke regular cigarettes suggest light cigarettes are also differentiated on taste, but in their view the taste is weak. One man said light cigarettes are the 'rice cakes' of cigarettes, meaning he felt they had no discernible taste.

Some of those who smoke regular suggested light cigarettes burn faster, and therefore are not as satisfying to smoke. They also felt they had to inhale deeper in order to 'get something' from the light cigarette. For these reasons, they felt they had to smoke more light cigarettes to get the effect they get from regular cigarettes.

Those who smoke regular cigarettes were perhaps the most adamant in their view that 'light' is simply a marketing term used by the tobacco manufacturers to convince people that smoking light cigarettes will help them quit smoking. While many of those who smoke light cigarettes seem to share this view, the opinion was expressed most forcefully by those who smoke regular cigarettes.

Those who smoke regular cigarettes tend to personify light cigarettes as female, skinny, or 'fluffy'. One man described them as having no passion. They are considered 'wimpy', or as having no conviction, by those who smoke regular cigarettes. A few feel that 'light cigarette' is delusional because she believes she is doing something good for herself, when she really is not.

Perceptions of Regular Cigarettes

To a large extent, the perception of regular cigarettes was consistent across the sub-groups interviewed. The difference lies more in the reaction to the descriptors, than in the descriptions themselves.

For example, virtually everyone agrees that regular cigarettes have a stronger taste and smell than light cigarettes. Those who smoke light cigarettes describe the taste as 'harsh', while those who smoke regular cigarettes describe it as a deep or rich flavour.

Similarly most agree that regular cigarettes have a more significant impact on the throat and lungs. Those who smoke light cigarettes say the smoke from a regular cigarette 'catches in their throat', makes them cough or gives them a heavy feeling when they inhale, and this is not something they enjoy. Those who prefer regular cigarettes, however, say this is the 'hit' they are looking for.

Those who smoke light cigarettes feel that regular ones are more likely to make them feel sick. They say they get dehydrated faster if they smoke regular cigarettes, or that they get a headache or sore throat. Those who prefer regular cigarettes did not report these conditions.



The perceived personality of regular cigarettes also varied between those who smoke light cigarettes and those who smoke regular. All tend to see regular cigarettes as male, and as older than light cigarettes.

Those who smoke light cigarettes tend to personify regular cigarettes as grumpy, miserable, rough. They tend to see 'him' as a blue collar worker such as a truck driver, cowboy or perhaps a bar owner. They believe he does experience stress in his life. He probably enjoys fishing, camping and other outdoor activities in his leisure time, as opposed to spending time with his family.

Those who smoke regular cigarettes tend to personify him as 'macho' rather than rough, and as up-front and honest. They see him as proud to admit that 'he is what he is'. He is less guilt-ridden, and does not lie to himself. He is steady, consistent in what he says and what he does. However, he is here 'for a good time, not necessarily a long time'.

It should be noted that imagery seems to be more a function of the brands than the strength segment, although there is some overlap since most regular strength smokers seem to be smoking either Export A or Players – two brands which were historically positioned as masculine, independent, and somewhat rebellious. For years, Export A has exploited the stereotype of the truck driver, as the Canadian version of the Marlboro Man, while Players has had a long-time association with motor sports. By contrast, the Matinée brand, which has several Mild entries, including "Slims", has always positioned itself as a feminine brand.

In The Final Analysis...

In a head-to-head comparison, when people were asked which one of light, mild or regular cigarettes was the 'best' and the 'worst' for each of a series of issues, 'mild' was virtually never considered part of the mix. Rather, the following results emerged:

ISSUE	TYPE OF CIGARETTE	
	Light	Regular
Safest to smoke?	- many choose light on the basis of less nicotine	- some choose regular because it is believed to have fewer additives - some choose regular because they believe they smoke fewer of them
Least safe to smoke?	- a number choose light because they believe it is more processed and has more chemicals	- most say regular on the basis of the most nicotine
Easiest to draw?	- most choose light as being the most comfortable to draw on - don't have to suck too hard	- easiest draw for those who smoke them
Hardest to draw?	- harder for those who smoke regular because they suck harder to 'get a hit'	- harder for those who smoke light because even a gentle suck catches in the throat
Best taste?	- definitely preferred by those who smoke them	- definitely preferred by those who smoke them
Worst taste?	- considered to have no taste by those who smoke regular	- considered to have a harsh taste by those who smoke light
Most nicotine?		- all agree regular has more nicotine, based on what they read on the package
Least nicotine?	- most agree light have less nicotine based on what they read on the package	
Most addictive?	- the typical response is that all cigarettes are addictive, and that are no 'levels' of addiction	
Least addictive?	- a few want to believe that light are less addictive	
Most chemicals?	- considered to have more chemicals, based on package information	
Least chemicals?		- considered to have fewer chemicals based on the package



What Does Light Mean In The Context Of Cigarettes?

There is no question that some people believe that 'light' cigarettes, like 'light cheese' or 'light beer' is somehow less harmful to them. While no one believes that any cigarette is good for them, some people do believe that they are doing less harm to themselves by smoking light cigarettes, just as they believe they are doing less harm if they consume products with less fat or fewer carbohydrates. They know (or suspect) that there is less nicotine in light cigarettes, and, as noted earlier, this means they believe that as long as they smoke the same number of cigarettes, they are introducing less nicotine into their system.

Some believe the word 'light' simply refers to the smoking experience. They say that because the taste is smoother, and the immediate effect on their throat is less harsh, that the experience can be described as 'lighter', meaning not as strong.

As noted, there are people, particularly those who smoke regular cigarettes, who believe that 'light' is simply a marketing term designed to convince people that cigarettes with that label are somehow better for them. In reality, they do not believe this is true.

However, many concur that there is something inherently positive in the word 'light'. Rationally, most admit this is "probably just a marketing gimmick". However, it has worked to the extent that some are attracted by many 'light' products, on the grounds that they are somehow healthier (or less harmful) than non-light products. 'Light' produces a more or less conscious "feel better" effect.

Very Few Are Surprised To Hear That Light Cigarettes Are No Safer To Smoke

The participants in the groups worked through the discussion of light versus regular cigarettes, and in many ways tended to suggest that they understand that light cigarettes are just as harmful as regular cigarettes. However, when it was explicitly suggested to them that light cigarettes are no safer to smoke than regular cigarettes, a number of people expressed some surprise; qualitatively, it did not appear to be widespread, but the statement clearly did shock a few. Some Switchers claimed it might get them to consider switching back to regular strength cigarettes.

A number of people said that while they were not sure if it were true, they would be inclined to believe the statement if it came from a credible source. Some of these questioned whether any source could be considered credible, given that every company or organization has its own agenda. However, others said that Health Canada, or another health organization such as the Heart & Stroke Foundation or the Cancer Society would be a credible source of this information.

A number of people also suggested that the tobacco companies themselves would be a credible source of this information. While they doubted the tobacco companies would

come forward to (apparently) contradict their own marketing, they felt they would believe it if the tobacco companies said it.

When confronted with the eventuality of cigarette companies not being allowed to use the descriptor 'light' any more, most claim it would not matter, since the concept would be communicated through colour-coding on the packages.



FOCUS ON THE MESSAGES

In the second phase of the focus groups, participants were given a list of the 16 different text messages that appear on cigarette packages. They were asked to rank those messages in the order in which they have impact. In this respect, then the message with the most impact was given a rank of 1, the second most impact a rank of two, and so on. The messages which several people ranked in their top five were then discussed to determine why those particular messages have impact. Similarly, the ones which ranked near the bottom were also discussed to determine why they have little or no impact on smokers.

A similar exercise was then done for the visual images that appear on cigarette packages. The images were deliberately separated from the text in order to evaluate them on their own.

Overview

Qualitatively, most of the smokers in the groups claimed they used to read the health warnings when they were first introduced, but have gradually stopped doing so – to the extent that they do not notice them anymore. The same applies to the pictures, albeit to a lesser extent.

Among those who still glance at the health warnings, they seem to look only at the words in large, capitalized letters, yet in most instances, the pictures are said to have more impact than the words. Some admitted seeing the pictures associated with the words when first shown the worded health warnings – which may have affected their evaluation.

A few smokers say they actively avoid some particularly gruesome or unsettling pictures, by asking for another pack at the retailer. In several instances, their regular cigarette merchant knows what not to give them. A few hide their pack under a cover.

General Comments on the Messages

The following chart outlines the specific comments that were made against the statements that made it to the top of the list, or to the bottom. In many instances, the same statement made it to both lists, but for different people. The implication of this is that a series of different statements with different messages is needed to attract the attention of different people.

In the discussion of the messages, a number of themes emerged. One theme has to do with children. Messages which focus on children tend to have impact because people believe children are defenseless. They recognize that children do not always have the choice to leave an environment in which someone is smoking, and can therefore be a victim of second-hand smoke. Similarly, they believe that children do not have the

judgement to understand that they should not start smoking, and yet are easily influenced by those who do smoke, including their own parents. For these reasons, many of the smokers interviewed feel that the messages which point out the impact of smoking on children are ones which have the potential to influence them.

A second theme is disease. The mention of significant medical conditions like strokes, heart disease, lung cancer, while not new news, continue to have an impact on some people, particularly those who have seen a smoking friend or relative suffer through one of these. When the mention of the disease is coupled with a statistic, the impact seems to be even greater.

Messages about some of the less fatal ailments, such as gum disease and tooth loss seem to be less effective, (although as will be seen, the message in conjunction with a picture can be extremely effective.)

In this respect, the messages which deal with smoking during pregnancy also seem to have an impact. However, there is a sense that the message about the harm to the baby has been effectively communicated, and that anyone who is still smoking during pregnancy is unlikely to pay any attention to the messages on cigarette packages.

Qualitatively, it would appear that the message about impotence had a significant effect on the younger males interviewed. This message seems to be less widely known than some of the others.

There seems to some degree of recognition that cigarettes contain chemicals other than nicotine. As noted in the discussion of light cigarettes, there was some awareness that light cigarettes in particular have a lot of chemicals. When smokers see these chemicals listed in a message, it can have an impact simply because the names are associated with something serious. It is particularly effective when a number of chemicals are listed. However, others feel the impact is diminished by the fact that they do not know what the chemicals do, and why they are there. It is easy to dismiss the message if they do not fully understand it. It is even easier to dismiss it when only one chemical is mentioned.

Some of the straightforward, factual messages tend to have an impact, particularly when a statistic or fact that is easily checked is used. In this respect, while some respond to the idea that the equivalent of a small city dies each year from tobacco use, others would prefer to see numbers.

Second-hand smoke as a theme on its own does not necessarily have a lot of impact, as smokers tend to believe that legislation has dealt with the problem to a large extent. It continues to have impact, however, in the context of parents who smoke around their children.

Table I - Reaction to Specific Messages

STATEMENT	WHY IT HAS IMPACT	WHY IT DOES NOT HAVE IMPACT
A WARNING: CIGARETTES ARE HIGHLY ADDICTIVE: Studies have shown that tobacco can be harder to quit than heroin or cocaine. Health Canada.	- hear horror stories about heroine, and did not think of tobacco in the same way - positions the issue as addiction, not the substance	- suggests I am not strong enough to quit - not believable; a number suggested that heroine withdrawal can lead to death, while the same is not true for tobacco
B WARNING: CHILDREN SEE, CHILDREN DO: Your children are twice as likely to smoke if you do. Half of all premature deaths among life-long smokers result from tobacco use. Health Canada.	- parents don't want their kids to start smoking - "reminds me that I'm hiding my behaviour, and I feel stupid" - raises some guilt among smoking parents; makes them think	- considered by some to be important only if you are a parent - not new news
C WARNING: CIGARETTES HURT BABIES: Tobacco use during pregnancy reduces the growth of babies during pregnancy. These smaller babies may not catch up in growth after birth and the risks of infant illness, disability and death are increased. Health Canada.	- considered a critical issue for pregnant women because the fetus is innocent and totally at the mercy of the mother's behaviour - smokers seem appalled to see a pregnant woman smoking	- not new news - not applicable to men - not applicable to those past child-bearing - upsetting to some; "how stupid can you be if you smoke during pregnancy!" - considered important only to pregnant women and their partners
D WARNING: TOBACCO USE CAN MAKE YOU IMPOTENT: Cigarettes may cause sexual impotence due to decreased blood flow to the penis. This can prevent you from having an erection. Health Canada.	- younger people believe this and worry about; mostly males, but some females as well - they know that smoking dehydrates them, and they think it is related - sexual impotence is a big fear; 'every guy's nightmare'	- not important to some females, particularly older ones - considered a male issue - seems less important to older people

Table continues

STATEMENT	WHY IT HAS IMPACT	WHY IT DOES NOT HAVE IMPACT
E DON'T POISON US: WARNING: Second-hand smoke contains carbon monoxide, ammonia, formaldehyde, benzo[a]pyrene and nitrosamines. These chemicals can harm your children. Health Canada.	- mention of children has impact; kids can't make their own choices, therefore can be victims of second-hand smoke; no one wants to hurt children - mention of chemicals hits hard, as people don't what the effect of them is - personal experience with a relative friend who has a disease as a result of second-hand smoke from a parent	- don't know what the chemicals are or what they do - not sure why kids are centred out – don't these chemicals harm everyone?
F WARNING: TOBACCO SMOKE HURTS BABIES: Tobacco use during pregnancy increases the risk of preterm birth. Babies born preterm are at an increased risk of infant death, illness and disability. Health Canada.	- babies have no choice - strikes an emotional chord in most	
G WARNING: CIGARETTES CAUSE STROKES: Tobacco smoke can cause the arteries in your brain to clog. This can block the blood vessels and cause a stroke. A stroke can cause disability and death. Health Canada.	- impacts those who have had personal experience through family, friends with strokes - the message is real, believable because they have seen it - 'you can live a long and miserable life that is worse than death' if you suffer a stroke - text is very descriptive; scaring - straightforward, blunt, factual; tells me like it is	
H WARNING: CIGARETTES CAUSE MOUTH DISEASES: Cigarette smoke causes oral cancer, gum diseases and tooth loss. Health Canada.	- associated with the gruesome picture	- hard to believe

Table continues



Millward Brown
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STATEMENT	WHY IT HAS IMPACT	WHY IT DOES NOT HAVE IMPACT
I WARNING: EACH YEAR, THE EQUIVALENT OF A SMALL CITY DIES FROM TOBACCO USE. Health Canada.	- the mention of the city has impact in terms of communicating size of the problem - offers a different perspective on the problem - some get a visual image of the number of people - factual	- the concept is too big, too hard to fathom for some - concept is too impersonal - some are not sure it can be proved - how big is a small city?
J WARNING: CIGARETTES LEAVE YOU BREATHLESS: Tobacco use causes crippling, often fatal lung diseases such as emphysema. Health Canada.	- has an impact on those who have had personal experience through family, friends - hits home to those who participate in sports	- line 'leaves you breathless' is considered 'too cute' - no new news in the message
K WARNING: CIGARETTES ARE A HEARTBREAKER: Tobacco use can result in the clogging of arteries in your heart. Clogged arteries can cause heart attacks and can cause death. Health Canada.	- blunt message similar to message in 'G' - some have personal experience with friend, relative	
L WARNING: CIGARETTES CAUSE LUNG CANCER: Every cigarette you smoke increases your chance of getting lung cancer. Health Canada.	- a major fear for some	- no percentage given (as there is in 'M') to put it in perspective - everybody knows it
M WARNING: CIGARETTES CAUSE LUNG CANCER. 85% of lung cancers are caused by smoking. 80% of lung cancer victims die within 3 years. Health Canada.	- the mention of death has some impact	- not new

Table continues

STATEMENT	WHY IT HAS IMPACT	WHY IT DOES NOT HAVE IMPACT
N WARNING: IDLE BUT DEADLY: Smoke from a lit cigarette contains toxic substances like hydrogen cyanide, formaldehyde and benzene. Second-hand smoke can cause death from lung cancer and other diseases. Health Canada.	- informative - factual, direct - brings to mind the bus ads which list the chemicals	- not new information - impersonal message, especially if you don't know what the chemicals are or what they do - chemicals don't play on emotions the way diseases do - no one is forcing anyone to stay where smokers are - smokers are more concerned about first-hand smoke than second-hand
O WARNING: WHERE THERE'S SMOKE THERE'S HYDROGEN CYANIDE: Tobacco smoke contains hydrogen cyanide. It can cause headaches, dizziness, weakness, nausea, vertigo and stomach aches in smokers and non-smokers. Health Canada.	-	- none of the ailments are considered fatal - alcohol can also cause all of these - no clear understanding of why the one chemical is being centred out
P WARNING: YOU'RE NOT THE ONLY ONE SMOKING THIS CIGARETTE: The smoke from a cigarette is not just inhaled by the smoker. It becomes second-hand smoke, which contains more than 50 cancer-causing agents. Health Canada.		



FOCUS ON THE VISUAL IMAGES

General Comments on The Visual Images

As was the case with the messages, there were some themes that emerge in terms of the way in which smokers responded to the visual images they were shown. One of the key types of images which they feel has an impact are those which show diseased organs – lungs, heart, brain. These are considered real, they are graphic, and smokers know without a doubt that these pictures could be of their own organs. While they clearly don't like to think about the possibility that it could be them, qualitatively it appears that enough of them have had experience with friends and relatives to know it can happen.

A second type of visual which clearly has impact is the one which shows the outward physical signs of smoking. The picture of the diseased mouth was selected in virtually every group as one of the more disgusting (and therefore impactful) visuals. When the signs of smoking appear in the mouth, on yellow stains on the fingers and teeth, in wrinkled skin, smokers get concerned. These visuals play to their egos, in that no one wants to present a physical appearance that others will find disgusting.

Visuals which show babies in the hospital can have impact; there is nothing more helpless than a baby, and this tends to generate a lot of sympathy.

While the messages regarding children clearly have an impact, the visuals that were evaluated did not. Both visuals featuring children (not babies) were considered contrived.

Qualitatively, it appeared that the limp or wilted cigarette had a significant impact on younger males and some younger women. Impotence was described as 'every guy's nightmare', and the visual is a effective way of communicating the potential problem.

Statistics, and the use of graphics, have some impact, but the statistics must be believable, and possibly referenced to a source other than Health Canada.

Visuals that simply show a cigarette, or an ashtray filled with cigarette butts do not seem to generate any kind of reaction from smokers. These are everyday sights, and as such have no interest value.

The chart which follows gives a description of the visual, and a summary of the kinds of reactions which smokers offered to each. Those which have no comments beside them were ones that were not considered very impactful, or lacking in impact. (Note that the full set of visuals is included in the Appendix).

Table II - Reaction to Specific Images

VISUAL IMAGE	WHY IT HAS IMPACT	WHY IT DOES NOT HAVE IMPACT
A Ashtray loaded with butts		- just implies someone has smoked a lot; no other meaning - dirty, but just the aftermath of a party - implies laziness
B Woman smoking beside young girl		- looks posed, contrived - woman does not look like a real smoker
C Pregnant woman smoking	- has to do with the innocence of babies - babies have no choice	
D Wilting lit cigarette		- not considered relevant to older people
E Two boys	- suggests we should not smoke around kids - affects moms who smoke; raises guilt about what they might be doing to their kids	- pose looks 'corny' - without the text it could be for anything; no impact on its own - kids look too happy
F Sleeping infant with monitor	- babies are innocent; have no choices	
G Diseased brain showing blood clot	- gross, graphic - vivid image - direct, 'in your face' - don't want to think that my brain could look like this	
H Diseased mouth showing rotten gums	- particularly disgusting because it is visible; affects your outer appearance; can't hide from it; they have seen it - brings it up front - "imagine the kiss!" - people want to be attractive even if they are not healthy; hits them in their vanity	

Table continues

VISUAL IMAGE	WHY IT HAS IMPACT	WHY IT DOES NOT HAVE IMPACT
I Graph showing deaths from various means	- clearly shows tobacco is the number one killer	- not interesting - question the statistics
J Man with inhaler	- do not want to be in that situation	
K Diseased heart showing clogged artery	- gross, graphic - don't want to think that my heart could look like this	
L Man in hospital bed, hooked up to a machine	- don't want that to be me	
M Diseased lung showing cancer	- gross, graphic - hard to look at because it could be me - this is known as a key cause of death among smokers	
O Blue cigarette smoke in air		- no clear meaning - ordinary; what I see each time I light up
P Lit cigarette standing on filtered end		- no visual impact - what is it saying? - no meaning - just a cigarette; not graphic, not harmful; not life threatening

Some Other Themes Were Suggested For These Messages

In each group, participants were asked if there were other themes that could be depicted through visuals or text messages on cigarette packs. Some of their suggestions included:

- the cost of smoking; how long you must work to pay for a pack; what else could be purchased with the money spent on cigarettes
- suggestions/tips for quitting
- raising awareness of the threat of fire from lit cigarettes
- more on the outward signs that smoking can have on one's physical appearance – tongue, fingers, skin, teeth, etc.
- more specific information on what the chemicals in cigarettes do

APPENDIX



Millward Brown
Goldfarb

PROJECT #20101811

September 5, 2003

MILLWARD BROWN GOLDFARB**SCREENER**

Good morning/ afternoon/ evening. This is _____ from Millward Brown Goldfarb, an independent research firm. We are conducting a study on behalf of Health Canada with people in the area. We are not selling anything, rather we are simply interested in your attitudes and opinions. May I have a few moments of your time?

1. We are interested in people's occupations. Do you, or does anyone living in your household work for any of the following?

	<u>No</u>	<u>Yes</u>
Advertising agency	☐	☐
Newspaper	☐	☐
Radio or television station	☐	☐
Market or opinion research company	☐	☐

IF "YES" TO ANY OF THE ABOVE THANK AND TERMINATE

2. RECORD GENDER:

Male ☐
 Female ☐

CHECK QUOTAS

3. In which of the following age categories do you fall?

Under 16 ☐ **TERMINATE**
 16 - 18 ☐
 19 - 21 ☐
 22 - 24 ☐
 25 - 34 ☐
 35 - 44 ☐
 45 - 54 ☐
 55 or over ☐

ENSURE GOOD MIX OF AGES AS APPROPRIATE

4. Do you smoke cigarettes?

Yes ☐
 No ☐ **THANK AND TERMINATE**
 Don't know / refused ☐ **THANK AND TERMINATE**

5. How long have you smoked cigarettes?

- Less than a year ☐
 1 – 3 years ☐
 4 – 5 years ☐
 6 – 10 years ☐
 11 - 20 years ☐
 More than 20 years ☐

6. And what type of cigarettes do you smoke – regular, light or mild?

- Regular ☐ **SKIP TO Q.8**
 Light ☐ **ASK Q.7 a)**
 Mild ☐ **ASK Q.7a)**

7a) **IF CURRENTLY SMOKING LIGHT OR MILD, ASK...** Have you always smoked light/mild cigarettes, or did you ever smoke regular cigarettes?

- Always smoked light/mild ☐ **SKIP TO Q.9**
 Used to smoke regular ☐

7b) **IF USED TO SMOKE REGULAR, ASK...** How long ago did you switch to light/mild cigarettes?

- Less than 6 months ago ☐
 6 months to a year ago ☐
 More than a year ago ☐

8. **IF CURRENTLY SMOKING REGULAR, ASK...** Have you always smoked regular cigarettes, or did you ever smoke light or mild cigarettes?

- Always smoked regular ☐
 Used to smoke light/mild ☐ **THANK AND TERMINATE**

9. In which of the following classifications does your total household before taxes income fall? **[READ LIST, CHECK ONE]**

- Under \$25,000 ☐
 \$25,000 - \$39,999 ☐
 \$40,000 - \$49,999 ☐
 \$50,000 - \$74,999 ☐
 \$75,000 – or more ☐
 Refused / Don't know ☐ **[DO NOT READ]**

ENSURE GOOD MIX OF INCOME GROUPS.

QUALIFICATIONS:**A. IF PARTICIPANT IS..**

- AGED 16 – 21 (Q.3), AND
- STARTED SMOKING IN THE LAST YEAR (Q.5) AND
- SMOKES LIGHT OR MILD CIGARETTES (Q.6),

HE/SHE QUALIFIES AS 'INITIATOR'**B. IF PARTICIPANT IS..**

- AGED 18 or over (Q.3), AND
- STARTED SMOKING IN THE LAST 5 YEARS (Q.5) AND
- SMOKES LIGHT OR MILD CIGARETTES,

HE/SHE QUALIFIES AS 'RECENT UPTAKE'**C. IF PARTICIPANT IS..**

- AGED 18 or over (Q.3), AND
- SMOKES LIGHT OR MILD CIGARETTES (Q.6), AND
- SWITCHED TO LIGHT/MILD FROM REGULAR IN THE LAST SIX MONTHS (Q.7a, b)

HE/SHE QUALIFIES AS 'SWITCHER'**D. IF PARTICIPANT IS..**

- AGED 35 or over (Q.3), AND
- HAS SMOKED FOR AT LEAST 20 YEARS (Q.5) AND
- SMOKES REGULAR CIGARETTES,

HE/SHE QUALIFIES AS 'REGULAR SMOKER'**INVITATION TO GROUP:**

We would like to extend an invitation to you to attend a marketing research session scheduled for **DATE/LOCATION/TIME** which will last 2 hours. The objective is to get your opinions on some of the issues related to smoking. There will be absolutely no attempt to sell anything. We are interested only in your thoughts and opinions. We think it will be enjoyable and you would receive \$60.

Would you be interested in attending?

Yes
No

☐☐ **TERMINATE**

NAME: _____

ADDRESS: _____

CITY: _____ ZIP: _____

RESIDENCE PHONE: _____ BUSINESS PHONE: _____

RECONFIRMED BY: _____ DATE: _____

WILL ATTEND GROUP: _____ DATE: _____ TIME: _____



Millward Brown
Goldfarb

Questionnaire de dépistage

Recruter 12 par groupe.

Bonjour/bonsoir. Mon nom est ____ de LLM, une firme indépendante de recherche. Nous effectuons présentement une étude pour le compte de Santé Canada auprès des gens de votre quartier. Nous ne vendons rien. Nous sommes simplement intéressés à vos attitudes et à vos opinions. Puis-je avoir quelques minutes de votre temps?

1. D'abord, nous sommes intéressés à l'occupation des gens. Est-ce que vous ou quelqu'un d'autre dans votre foyer travaille pour... (Lire la liste.)

Une agence de publicité ☐
 Un journal ☐
 Une station de radio ou de télévision ☐
 Une compagnie de recherche ou d'études de marché ☐
 [Si "oui" à l'un ou l'autre ci-dessus, TERMINER]

2. Enregistrer le sexe.
 Homme ☐ 50% Femme ☐ 50%

3. Veuillez-vous me dire dans quel groupe d'âge suivant vous vous situez.

Moins de 16 ans ☐ Remercier et Terminer
 16 - 21 ☐ Groupe 2
 18 - 21 ☐ Groupe 1
 22 - 24 ☐ Groupe 1
 25 - 34 ☐ Groupe 1
 35 - 44 ☐ Groupe 1
 45 - 54 ☐ Groupe 1
 55 ans ou plus ☐ Groupe 1

4. Est-ce que vous fumez présentement la cigarette ?

Oui ☐
 Non ☐ → Remercier et Terminer
 NSP/Refus ☐ → Remercier et Terminer

5. Depuis combien de temps est-ce que vous fumez la cigarette ?

Moins d'un an ☐
 1 - 3 ans ☐
 4 - 5 ans ☐
 6 - 10 ans ☐
 11 - 20 ans ☐
 Plus de 20 ans ☐

6. Et quel type de cigarette est-ce que vous fumez – régulières, légères, ou douces ?

Régulières ☐ Remercier et Terminer
 Légères ☐ Poser la Q.7a)
 Douces ☐ Poser la Q.7a)

- 7a) **Si fume légères ou douces, demander...** Est-ce que vous avez toujours fumé des cigarettes légères/douces, ou est-ce que vous avez déjà fumé des cigarettes régulières ?

Toujours fumé légères/douces
Déjà fumé régulières

☐ **Passer à la Q.8**
☐

- 7b) **Si déjà fumé régulières, demander...** Depuis combien de temps est-ce que vous avez changé pour des cigarettes légères/douces ?

Il y a moins de 6 mois
Il y a 6 mois à un an
Il y a plus d'un an

☐
☐ **Remercier et Terminer**
☐ **Remercier et Terminer**

8. Dans laquelle des catégories suivantes est-ce que se situe le revenu annuel de votre foyer avant impôt ?
[Lire la liste, cocher une case.]

Moins de \$25,000 ☐
\$25,000 - \$39,999 ☐
\$40,000 - \$49,999 ☐
\$50,000 - \$74,999 ☐
\$75,000 - ou plus ☐
NSP / Refus ☐

☐ **[Ne pas lire.]**

Avoir un bon mix de niveaux de revenus.

QUALIFICATIONS:

- A. Si le répondant est..
- Âgé de 16 – 21 ans (Q.3), ET
- a commencé à fumer au cours de la dernière année (Q.5) ET
- fume des cigarettes légères ou douces (Q.6),
il/elle se qualifie comme 'INITIATOR' (Groupe 2)
- C. Si le répondant est..
- Âgé de 18 ans ou plus (Q.3), ET
- fume des cigarettes légères ou douces (Q.6), ET
- est passé des cigarettes régulières aux cigarettes légères/douces, au cours des 6 derniers mois (Q.7a, b)
il/elle se qualifie comme 'SWITCHER' (Groupe 1)

Invitation au groupe :

J'aimerais vous inviter à participer à une étude de marché. La session aura lieu chez :

Legendre Lubawin Marketing inc., 1172-A rue Saint-Mathieu, niveau du sol :

le 17 septembre, à 18h00 // 20h00

... qui durera deux heures. L'objectif de cette étude est d'obtenir vos opinions sur des sujets reliés au tabac. Personne n'essayera pas de vendre quoi que ce soit. Nous ne sommes intéressés qu'à vos idées et opinions. Nous pensons que l'expérience sera agréable et vous recevrez 60\$. Est-ce que je peux confirmer votre présence?

Oui

☐

Non

☐

TERMINER

NOM: _____

ADRESSE: _____

VILLE: _____ CODE POSTAL: _____

TÉL. (résidence) _____ TÉL. (bureau) _____

RÉCONFIRMÉ PAR: _____ DATE: _____

PROJECT #20101811**September 11, 2003 – final****DISCUSSION OUTLINE****1. Introduction Of Moderators & Project (5 minutes)**

Before we begin, could I ask you to turn off any cell phones or pagers you might have with you.

First off, I would like to thank each one of you for taking the time to speak with me today.

This research project is being conducted for Health Canada. We are not asking you for any confidential information about you (including your full name), and your individual responses are never revealed to anyone. This session is being audiotaped, as I want to give you my full attention for the duration of the group. The tape gives me a record I can review so that I can write a detailed report for my client. There are observers behind the mirror from Health Canada; they are here to listen and learn. We want your open and honest opinions, and the reasons for your opinions.

One thing which you all have in common is that you are all smokers, and today we are going to talk about the issue of smoking, and some of your behaviour and opinions with respect to cigarettes. Please be honest in your opinions. In this kind of research there are no right or wrong answers, and everyone's opinion is valuable.

2. Introduction of Participants (5 minutes)

Let's begin by having you introduce yourself by your first name, and tell us a bit about yourself – are you married or single, do you have any children, what do you do for a living, what do you like to do in your spare time?

3. General Discussion On Smoking (15 minutes)

I want to start the discussion by talking a little about your smoking behaviour.

- 1abc - How long have you been smoking? ^{1a} When did you start? ^{1b} How did you start? ^{1c}
- 2abc - How much do you smoke? ^{2a} Do you consider yourself a heavy, moderate or light smoker? ^{2b}
- 3abc - How many cigarettes a day do you typically smoke? ^{2c}
- 3ab - Where do you smoke? (probe: in the car, at home, at work/school, outside, in bars, etc.)

4. Focus on Type of Cigarette Smoked (45 minutes)

- 4 a→e - What kind of cigarettes do you smoke – regular? ^{4a} light? ^{4b} mild? Why do you smoke that type? Was it a conscious choice to smoke that type? ^{4c} If yes, what factors played into your decision? (Probe for taste, health reasons, trying to quit, etc.) ^{4d}
- 5 a→k - If currently smoke Light or Mild, ask... Have you ever smoked Regular cigarettes? ^{5a}

- If never smoked Regular, have you ever considered it? ^{5b} If considered it ask... is there any particular reason why you did not actually try the Regular cigarettes? ^{5c} If did not consider regular cigarettes, ask... why have you never even considered Regular cigarettes? ^{5d}
- If have tried Regular, ask... how long ago did you smoke Regular cigarettes? ^{5e} Why did you switch to Light or Mild? ^{5f} Did you find that smoking regular cigarettes was different from smoking Light or Mild? ^{5g} If yes, how was it different? ^{5h} (probe: did you draw on the cigarette differently? Inhale less often/more often? Bought cigarettes less often/more often?) ⁵ⁱ

^{6a} If currently smoke Regular, ask... have you ever smoked Light or Mild cigarettes? ^{6a}

- If never smoked Light or Mild, ask... have you ever considered it? ^{6b} If considered it ask... is there any particular reason why you did not actually try the Light or Mild cigarettes? ^{6c} If did not consider Light or Mild cigarettes, ask... why have you never even considered Light or Mild cigarettes? ^{6d}
- If have tried Light or Mild, ask... how long ago did you smoke Light or Mild cigarettes? ^{6e} Why did you switch to Regular? ^{6f} Do you find that smoking regular cigarettes is different from smoking Light or Mild? ^{6g} If yes, how is it different? ^{6h} (probe: do you draw on the cigarette differently? Inhale less often/more often? Buy cigarettes less often/more often?) ⁶ⁱ

^{7a} think about Light, Mild and Regular cigarettes. What do you know about these three types of cigarettes? ^{7b} Let's start with what they have in common. (ON FLIP CHART, WRITE HEADING LIGHT, MILD AND REGULAR - SIMILARITIES) What do these three types of cigarettes have in common? How are the same? (RECORD SIMILARITIES) ^{7c}

- Why do you say that? ^{7d} Where do you get information about the different types of cigarettes? What has helped to form your impressions? ^{7e}

⁸ (ON FLIP CHART, PUT 3 COLUMNS, HEADED LIGHT, MILD, REGULAR) How are these three types different? (RECORD ALL UNPROMPTED DIFFERENCES ON FLIP CHART) ^{7f}

^{9a} Probe: (for each one not mentioned, ask...) how do the three compare for - (RECORD RESPONSES ON FLIP CHART)

- ^{9a} healthiest/best for you? Which one is the safest to smoke? ^{9b} Least safe? ^{9c} Why? ^{9d}
- ^{9e} ease of draw effort? Which one is the easiest to draw on? ^{9f} Which is hardest? ^{9g} Why do you say that? ^{9h}
- ⁹ⁱ taste? Which one tastes the best? ^{9j} The worst? ^{9k} Why do you say that? ^{9l}
- ^{9m} level of nicotine and tar delivery? Which one has the most nicotine? ⁹ⁿ Tar? Which has the least? ^{9o} Why do you say that? ^{9p}
- ^{9q} addictive qualities? Which one is the most addictive? ^{9r} Least addictive? ^{9s} Why do you say that? ^{9t}
- chemical content? Which one has the most chemical? ^{9u} Least chemicals? ^{9v} Why do you say that? ^{9w}

- 10abc - now let's think about these three types of cigarettes in a different way. Use your imaginations a little, and think of them as if they were people. (NEW PAGE ON FLIP CHART - ROTATE ORDER IN WHICH YOU DISCUSS EACH TYPE FROM GROUP TO GROUP). Let's start with 'Light' cigarettes. If a 'Light cigarette was a person, what type of person would it be? (Probe for gender, age, occupation, family structure (eg. — 10a married vs. single, children vs. childless, etc.), preferred vacation destination, hobbies, make/model of car, favourite type of movie, preferred beverage (eg. beer, vs. wine, vs liquor vs. soft drink, etc.), favourite restaurant. Is Light Cigarette someone who exercises — 10c regularly?)

11abc (mild) → 12abc (regular)
Repeat exercise for each of Mild and Regular

MODERATOR NOTE: The following discussion will only be necessary if these issues have not already come out unprompted in the discussion above:

- 13abcd - Let's focus for a moment on the word 'Mild'. In the context of cigarettes, what does this word mean? 13a What does the word say about the cigarettes? 13b What is 'mild' about these cigarettes? (Probe on taste, tar/nicotine, health risk, etc.) 13c 13d
- 14 a-f - What about the word 'Light'? 14a Does it mean the same thing, or does it mean something different from 'Mild' when put in the context of cigarettes? Is a Light cigarette different from a Mild one? How? Is a Light cigarette different from a Regular one? How? 14b 14c 14d 14e 14f
- 15 - Any other comments on the issue of Light, Mild and Regular cigarettes?
- 16abc - Suppose I were to tell you that Light or Mild cigarettes are no safer to smoke than Regular cigarettes. Do you believe me? If yes, why? If not, what do you need to hear to convince you? 16a 16b 16c

5. Focus On Health Warning Messages (45 minutes)

I want to switch topics a little and take a look at some of the images and text which appear on cigarette packages.

Instructions: I'm going to give you each a set of statements. You will notice that each one has a letter code beside it. Please read all of the statements, and then rank them in the order in which you feel they have the most impact on how you view your cigarettes and your smoking behaviour. That is, the one you feel has the most impact on you should get a rank of one. Put the number '1' beside the letter code for that statement. The one which has the second most impact should get the rank of two, and you will write a 2 beside the letter code for that statement, and so on. You can give more than one statement the same rank if you want. (HAND OUT STATEMENTS. GIVE 5 MINUTES TO RANK.) Now, let me go around the room and have you tell me which

letter codes you ranked the highest. Give me the top 4 or 5. (RECORD LETTER CODES THAT ARE OFFERED.) Now give me the bottom 4 or 5. (RECORD)

Let's look a little more closely at those which a number of people ranked in the top 5.

17a → e- READ FIRST TEXT MESSAGE. Have you seen it or read it before? What does it mean to you? What comes to mind when you read it? What is it about this statement which leads you to say it has an impact on how you view your cigarettes or your smoking behaviour? Why? 17e

REPEAT FOR ALL TEXT MESSAGES IN TOP 5.

REPEAT FOR ALL MESSAGES IN BOTTOM 5

Now I'm going to give you each a set of pictures. Again, each one has a letter code beside it. Please examine all of the pictures, and then rank them in the order in which you feel they have the most impact on how you view your cigarettes and your smoking behaviour. That is, the one you feel has the most impact on you should get a rank of one. Put the number '1' beside the letter code for that picture. The one which has the second most impact should get the rank of two, and you will write a 2 beside the letter code for that picture, and so on. You can give more than one picture the same rank if you want. (HAND OUT PICTURES. GIVE 5 MINUTES TO RANK.) Now, let me go around the room and have you tell me which letter codes you ranked the highest. Give me the top 4 or 5. (RECORD LETTER CODES THAT ARE OFFERED.) Now give me the bottom 4 or 5. (RECORD)

Let's look a little more closely at those which a number of people ranked in the top 5.

20a → e- SHOW FIRST PICTURE/GRAPHIC. Have you seen it before? What does it mean to you? What comes to mind when you see it? What is it about this picture which leads you to say it has an impact on how you view your cigarettes or your smoking behaviour? Why? 20e

REPEAT FOR ALL PICTURES IN TOP 5.

REPEAT FOR ALL PICTURES IN BOTTOM 5.

The government has mandated the cigarette companies to put these kinds of messages on the packages. Which, if any, of these messages do you read? Which, if any, do you avoid? 23a 23b

In terms of the Health Warning Messages, what themes or issues would you like to see addressed? (if necessary say... by themes or issues, I mean things like second-hand smoke, the diseases you can get from smoking, the implications of smoking while pregnant, etc.) Which themes or issues would you prefer not to see? 24a

Any other comments?

Thanks for coming.

PROJET #20101811**Septembre 11, 2003 – Final****GUIDE D'ENTRETIEN****1. Présentation de l'animateur et du projet (5 minutes)**

Avant de commencer, est-ce que je peux vous demander de fermer vos téléphones cellulaires ou téléavertisseurs, si vous en avez sur vous.

D'abord permettez-moi de vous remercier d'avoir pris le temps de venir ici aujourd'hui..

Il s'agit d'un projet de recherche qui est réalisé pour le compte de Santé Canada. Nous ne vous demanderons aucune information confidentielle, même pas votre nom au complet, et vos réponses individuelles ne seront jamais révélées à qui que ce soit. Je fais un enregistrement audio de cette réunion parce que je veux être en mesure de vous donner toute mon attention. Les rubans audio me permettent d'avoir des notes que je peux réécouter de façon à rédiger un rapport final détaillé pour mon client. Il y a des observateurs derrière le miroir, des gens qui représentent Santé Canada qui sont là pour écouter et apprendre. Nous recherchons vos opinions honnêtes et sincères et les raisons de celles-ci.

Vous avez tous en commun le fait que vous fumez, et aujourd'hui nous allons parler du tabac et de certaines opinions et comportements qui ont trait à la cigarette. Encore une fois, soyez sincères. Dans ce genre de recherche, il n'y a pas de bonnes ou de mauvaises réponses et l'opinion de chacun est importante..

2. Présentation des participants (5 minutes)

Pour commencer, je vous demanderais de vous présenter en me donnant votre prénom, et en me parlant un peu de vous. Êtes-vous marié ou célibataire? Est-ce que vous avez des enfants? Qu'est-ce que vous faites dans la vie, comme genre de travail et dans vos moments de loisirs?

3. Discussion générale sur le tabac (15 minutes)

J'aimerais commencer la discussion en vous demandant de me parler un peu de votre comportement de fumeur.

- Depuis combien de temps fumez-vous ? Quand avez-vous commencé ? Comment avez-vous commencé ?
- Quelle quantité de cigarettes fumez-vous ? Est-ce que vous vous considérez comme un gros fumeur, un fumeur moyen ou occasionnel ? Combien de cigarettes fumez-vous dans une journée typique ?
- Où est-ce que vous fumez ? (**Approfondir** : Dans l'auto, à la maison, au travail, à l'école, à l'extérieur, dans des bars, etc.)

6. *Type de cigarettes fumées* (45 minutes)

- Quel type de cigarettes fumez-vous : régulières ? légères ? douces ? Pourquoi fumez-vous ce type de cigarettes ? Est-ce que cela a été un choix conscient de fumer ce type de cigarettes ? *Si oui, quels facteurs ont influencé votre décision (Approfondir : Goût, raisons de santé, essayé d'arrêter, etc.) ?*
- *Si fume présentement des cigarettes légères ou douces, demandez... Avez-vous déjà fumé des cigarettes régulières ?*
 - *Si n'a jamais fumé des cigarettes régulières, demander... Est-ce que vous l'avez déjà envisagé ? Si envisagé, demandez... Est-ce qu'il y a une raison en particulier pour laquelle vous n'avez pas essayé des cigarettes régulières ? Si n'a pas envisagé des cigarettes régulières, demandez... Pourquoi vous n'avez jamais envisagé de fumer des cigarettes régulières ?*
 - *Si essayé des cigarettes régulières, demandez... Il y a combien de temps depuis que vous avez fumé des cigarettes régulières ? Pourquoi avez-vous changé à des cigarettes légères ou douces ? Est-ce que vous voyez une différence entre les cigarettes régulières et les cigarettes légères ou douces ? Si oui... Quelle différence ? (Approfondir : Est-ce que vous aspiriez la fumée différemment ? Est-ce que vous inhaliez moins ou plus souvent ? Est-ce que vous achetiez des cigarettes moins ou plus souvent ?)*
- *Si fume présentement des cigarettes régulières, demandez... Avez-vous déjà fumé des cigarettes légères ou douces ?*
 - *Si n'a jamais fumé de cigarettes légères ou douces, demandez... Est-ce que vous l'avez déjà envisagé ? Si oui, demandez... Est-ce qu'il y a une raison en particulier pour laquelle vous n'avez pas effectivement essayé des cigarettes légères ou douces ? Si n'ont pas envisagé des cigarettes légères ou douces, demandez... Pourquoi n'avez-vous jamais envisagé des cigarettes légères ou douces ?*
 - *Si ont essayé des cigarettes légères ou douces, demandez... Il y a combien de temps depuis que vous avez fumé des cigarettes légères ou douces ? Pourquoi avez-vous changé à des cigarettes régulières ? Est-ce que vous voyez une différence entre les cigarettes régulières et des cigarettes légères ou douces ? Si oui... Quelle est la différence ? (Approfondir : Est-ce que vous aspirez la cigarette de façon différente ? Est-ce que vous inhalez plus ou moins souvent ? Est-ce que vous achetez des cigarettes plus ou moins souvent ?)*
- En pensant aux cigarettes légères, douces, et régulières... Qu'est-ce que vous savez de ces trois types de cigarettes ? Commençons par ce qu'elles ont en commun. (ÉCRIRE AU TABLEAU : LÉGÈRES, DOUCES, ET RÉGULIÈRES – SIMILITUDES.) Qu'est-ce que ces trois types de cigarettes ont en commun ? En quoi sont-elles similaires ? (ENREGISTREZ LES SIMILITUDES.)
 - Qu'est-ce qui vous fait dire cela ? D'où obtenez-vous de l'information sur les divers types de cigarettes ? Qu'est-ce qui vous amené à former vos impressions ?

- (FAIRE TROIS COLONNES INTITULÉES : LÉGÈRES, DOUCES, RÉGULIÈRES.) En quoi ces trois types de cigarettes sont-ils différents ? (ENREGISTRER TOUTES LES DIFFÉRENCES MENTIONNÉES SPONTANÉMENT.)
- **Approfondir :** (Pour chaque différence non mentionnée, demandez...) Comment est-ce que ces trois types de cigarettes se comparent en termes de – (ENREGISTRER LES RÉPONSES AU TABLEAU).
 - La plus de santé/la meilleure pour vous ? Laquelle est la plus risquée de fumer ? La moins risquée ? Pourquoi ?
 - Le fait d'aspirer ? Laquelle est la plus facile à aspirer ? Laquelle est la plus difficile ? Qu'est-ce qui vous fait dire cela ?
 - Le goût ? Laquelle a le meilleur goût ? Le moins bon goût ? Qu'est-ce qui vous fait dire cela ?
 - Les taux de goudron et nicotine ? Laquelle a le plus de nicotine ? De goudron ? Laquelle en a le moins ? Qu'est-ce qui vous fait dire cela ?
 - La dépendance ? Laquelle produit la plus grande dépendance ? La moins grande dépendance ? Qu'est-ce qui vous fait dire cela ?
 - Le contenu chimique ? Laquelle contient le plus de produits chimiques ? Le moins de produits chimiques ? Qu'est-ce qui vous fait dire cela ?
- Envisageons maintenant ces trois types de cigarettes d'une façon différente. Utilisez un peu votre imagination, et essayez de vous les représenter comme si elles étaient des personnes humaines. (CHANGEZ DE PAGE AU TABLEAU, FAIRE UNE ROTATION DE L'ORDRE DANS CHAQUE GROUPE.) Commençons par les cigarettes légères. Si une cigarette légère était une personne, quel type de personne serait-elle ? (Approfondir : le sexe, l'âge, l'occupation, le type de foyer (par exemple, mariée versus célibataire, avec enfant, sans enfant, etc.), destinations de vacances préférées, passe-temps préférés, type d'auto, genre de film préféré, boisson préférée (par exemple, bière versus vin versus spiritueux versus boissons gazeuses), restaurant favori.) Est-ce que la cigarette légère serait quelqu'un qui fait régulièrement de l'exercice ?
- Répétez l'exercice pour les cigarettes douces et régulières

NOTE POUR L'ANIMATEUR: La discussion qui suit ne sera nécessaire que si ces dimensions n'ont pas été déjà couvertes spontanément dans la discussion qui aura précédé :

- Concentrons-nous quelques instants sur le mot « douce ». Dans le contexte des cigarettes, qu'est-ce que signifie ce mot ? Qu'est-ce que ce mot vous dit sur les cigarettes ? Qu'est-ce qu'il y a de doux dans ces cigarettes ? (Approfondir : Goût, goudron/nicotine, risque pour la santé, etc.)
- Qu'est-ce qui en est du mot « légère » ? Est-ce qu'il signifie la même chose, ou est-ce qu'il signifie quelque chose de différent de douce dans le contexte d'une cigarette ? Est-ce que une cigarette légère est différente d'une cigarette douce ?



De quelle façon ? Est-ce qu'une cigarette légère est différente d'une cigarette régulière ? De quelle façon ?

- Avez-vous d'autres commentaires sur la question des cigarettes légères, douces et régulières ?
- Si je vous disais que les cigarettes douces et légères ne présentent pas moins de danger que les cigarettes régulières, est-ce que vous me croiriez ? *Si oui* pourquoi ? Si non, qu'est-ce qui pourrait vous convaincre ?

7. *Message de mise en garde (45 minutes)*

Changeons maintenant de sujet, et jetons un coup d'œil à quelques-unes des images et des textes qui apparaissent sur les paquets de cigarettes.

Je vais vous remettre à chacun une batterie d'énoncés. Vous remarquerez que chacun est accompagné d'une lettre qui est en fait un code. Veuillez lire ces énoncés et les placez en ordre. Vous placez en premier ceux qui ont le plus d'impact sur la façon dont vous percevez vos cigarettes et votre comportement de fumeur. Essentiellement, donnez le premier rang à celui dont vous trouvez qu'il a le plus d'impact. Écrivez le chiffre « 1 » à côté de la lettre qui représente le code pour cet énoncé. Vous donnez le deuxième rang à l'énoncé dont vous pensez qu'il a le deuxième plus grand impact, et vous écrivez un « 2 » à côté de la lettre code de cet énoncé, et ainsi de suite. Vous pouvez donner le même rang à plus d'un énoncé si vous voulez. (REMETTRE LES ÉNONCÉS, ET ACCORDEZ 5 MINUTES POUR LES METTRE EN RANG.) Maintenant, permettez-moi de faire le tour de la salle et de vous demander à quelles lettres vous avez donné le rang le plus élevé ? Donnez-moi les 4 ou 5 plus élevés. (ENREGISTREZ LES CODES DES LETTRES QUI SONT OFFERTES.) Maintenant donnez-moi les 4 ou 5 qui ont les rangs les moins élevés. (ENREGISTREZ.)

Regardons un peu plus près ceux que plusieurs personnes ont placés parmi les 5 premiers.

- LIRE LE TEXTE DU MESSAGE. Est-ce que vous aviez vu ou lu ce texte auparavant ? Qu'est-ce qu'il veut dire pour vous ? Qu'est-ce qui vous vient à l'esprit quand vous le lisez ? Qu'est-ce qui fait que cet énoncé vous fait dire qu'il a un impact sur la façon dont vous voyez vos cigarettes et votre comportement de fumeur ?
- RÉPÉTEZ POUR TOUS LES MESSAGES PLACÉS PARMI LES 5 PREMIERS.
- RÉPÉTEZ POUR TOUS LES MESSAGES PLACÉS PARMI LES 5 DERNIERS.

Je vais maintenant vous remettre à tous une série de photos. Encore une fois, chacune est accompagnée d'une lettre qui représente un code. Veuillez examiner toutes les photos, et les mettre en ordre de la même façon, selon qu'elles ont le plus d'impact sur la façon dont vous voyez vos cigarettes et votre comportement de fumeur. Bref, celle dont vous trouvez qu'elle a le plus grand impact devra avoir le rang 1. Vous écrivez le chiffre « 1 » à côté de la lettre qui représente le code de cette photo; celle qui aurait le deuxième plus grand impact, aurait le deuxième rang, et vous écririez un « 2 » à côté de la lettre code de cette photo, et ainsi de suite. Vous pouvez donner le même rang à plus d'une photo si vous voulez. (REMETTRE LES

PHOTOS, ACCORDEZ 5 MINUTES POUR LES PLACER EN RANG). Maintenant, permettez-moi de faire le tour de la salle et dites-moi quelles sont les lettres auxquelles vous avez donné les rangs les plus élevés. Donnez-moi les 4 ou 5 plus élevées. (ENREGISTRER LES CODES DES LETTRES AINSI OFFERTES.) Maintenant, donnez-moi les 4 ou 5 plus faibles. (ENREGISTRÉ.)

Regardons d'un peu plus près les photos que plusieurs personnes ont placées parmi les 5 premières.

- MONTREZ LA PREMIÈRE PHOTO. L'aviez-vous déjà vue ? Qu'est-ce qu'elle veut dire pour vous ? Qu'est-ce qui vous vient à l'esprit quand vous la voyez ? Qu'est-ce qu'il y a dans cette photo qui vous fait dire qu'elle aurait un impact sur la façon dont vous voyez vos cigarettes et votre comportement de fumeur ? Pourquoi ?
- RÉPÉTEZ POUR TOUTES LES PHOTOS PLACÉES PARMIS LES 5 PREMIÈRES.
- RÉPÉTEZ POUR TOUTES LES PHOTOS PLACÉES PARMIS LES 5 DERNIÈRES.
- Le gouvernement oblige les compagnies de cigarettes à mettre ce genre de messages sur les paquets. Lesquels de ces messages, le cas échéant, lisez-vous ? Lesquels, le cas échéant, évitez-vous ?

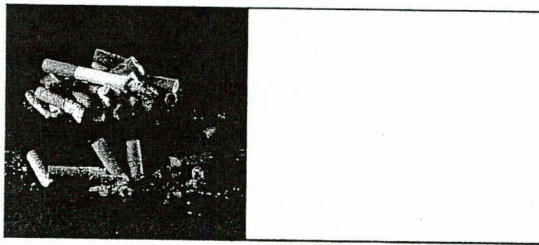
En termes de mise en garde, quels thèmes ou questions devraient être abordés, selon vous ? Si nécessaire, mentionnez que, par thème ou question, on veut dire des choses comme la fumée secondaire, les maladies que le tabac peut entraîner, les implications de fumer lorsqu'on est enceinte, etc. Quels sont les thèmes ou questions que vous préféreriez ne pas voir ?

Avez-vous d'autres commentaires ?

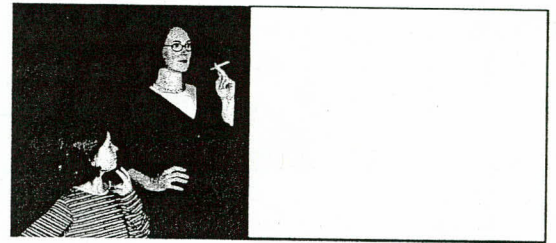
Merci d'être venu.

VISUAL IMAGES

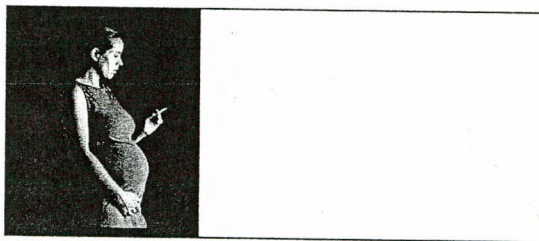
A. _____



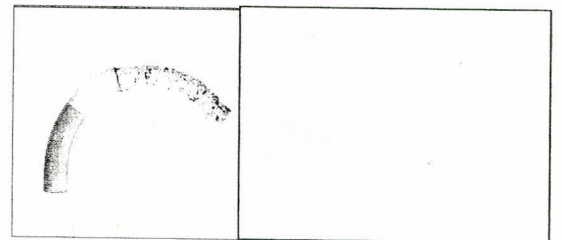
B. _____



C. _____



D. _____



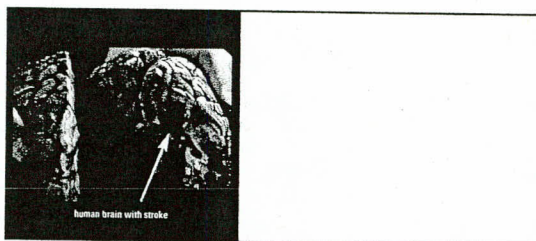
E. _____



F. _____



G. _____



H. _____



I. _____

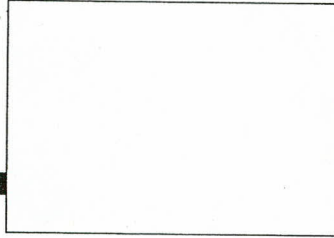
Estimated Deaths in Canada,

■ Murders - 510

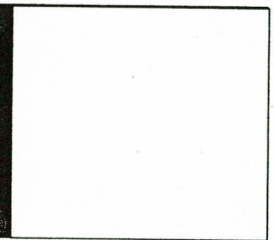
■ Alcohol - 1,900

■ Car accidents - 2,900

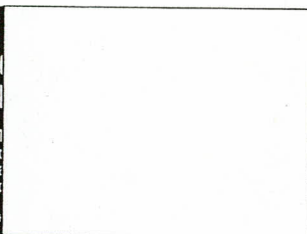
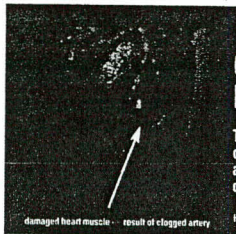
■ Suicides - 3,900



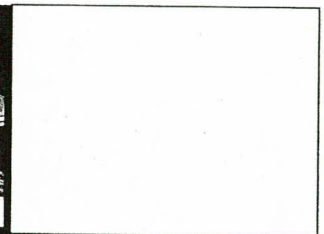
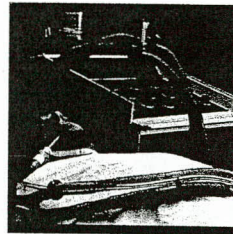
J. _____



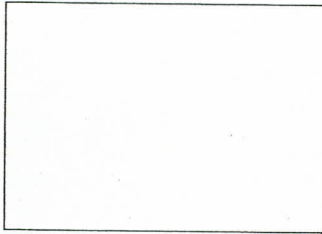
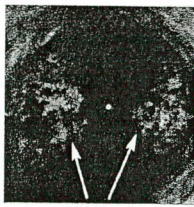
K. _____



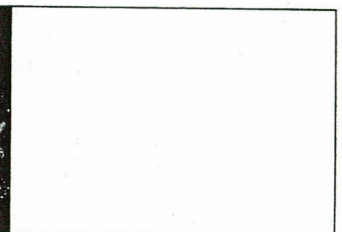
L. _____



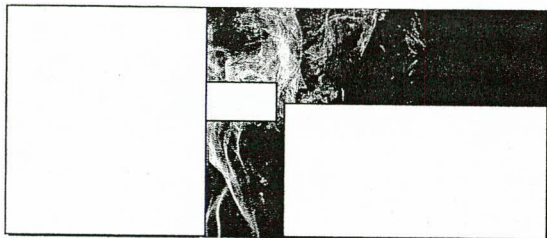
M. _____



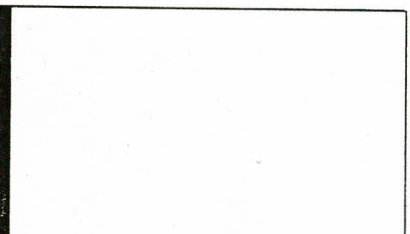
N. _____



O. _____



P. _____



ENGLISH MESSAGES EVALUATED :

CODE	MESSAGE
A. _____	WARNING: CIGARETTES ARE HIGHLY ADDICTIVE: Studies have shown that tobacco can be harder to quit than heroin or cocaine. Health Canada.
B. _____	WARNING: CHILDREN SEE, CHILDREN DO: Your children are twice as likely to smoke if you do. Half of all premature deaths among life-long smokers result from tobacco use. Health Canada.
C. _____	WARNING: CIGARETTES HURT BABIES: Tobacco use during pregnancy reduces the growth of babies during pregnancy. These smaller babies may not catch up in growth after birth and the risks of infant illness, disability and death are increased. Health Canada.
D. _____	WARNING: TOBACCO USE CAN MAKE YOU IMPOTENT: Cigarettes may cause sexual impotence due to decreased blood flow to the penis. This can prevent you from having an erection. Health Canada.
E. _____	DON'T POISON US: WARNING: Second-hand smoke contains carbon monoxide, ammonia, formaldehyde, benzo[a]pyrene and nitrosamines. These chemicals can harm your children. Health Canada.
F. _____	WARNING: TOBACCO SMOKE HURTS BABIES: Tobacco use during pregnancy increases the risk of preterm birth. Babies born preterm are at an increased risk of infant death, illness and disability. Health Canada.
G. _____	WARNING: CIGARETTES CAUSE STROKES: Tobacco smoke can cause the arteries in your brain to clog. This can block the blood vessels and cause a stroke. A stroke can cause disability and death. Health Canada.
H. _____	WARNING: CIGARETTES CAUSE MOUTH DISEASES: Cigarette smoke causes oral cancer, gum diseases and tooth loss. Health Canada.
I. _____	WARNING: EACH YEAR, THE EQUIVALENT OF A SMALL CITY DIES FROM TOBACCO USE. Health Canada.
J. _____	WARNING: CIGARETTES LEAVE YOU BREATHLESS: Tobacco use causes crippling, often fatal lung diseases such as emphysema. Health Canada.
K. _____	WARNING: CIGARETTES ARE A HEARTBREAKER: Tobacco use can result in the clogging of arteries in your heart. Clogged arteries can cause heart attacks and can cause death. Health Canada.
L. _____	WARNING: CIGARETTES CAUSE LUNG CANCER: Every cigarette you smoke increases your chance of getting lung cancer. Health Canada.
M. _____	WARNING: CIGARETTES CAUSE LUNG CANCER. 85% of lung cancers are caused by smoking. 80% of lung cancer victims die within 3 years. Health Canada.
N. _____	WARNING: IDLE BUT DEADLY: Smoke from a lit cigarette contains toxic substances like hydrogen cyanide, formaldehyde and benzene. Second-hand smoke can cause death from lung cancer and other diseases. Health Canada.
O. _____	WARNING: WHERE THERE'S SMOKE THERE'S HYDROGEN CYANIDE: Tobacco smoke contains hydrogen cyanide. It can cause headaches, dizziness, weakness, nausea, vertigo and stomach aches in smokers and non-smokers. Health Canada.
P. _____	WARNING: YOU'RE NOT THE ONLY ONE SMOKING THIS CIGARETTE: The smoke from a cigarette is not just inhaled by the smoker. It becomes second-hand smoke, which contains more than 50 cancer-causing agents. Health Canada.



FRENCH MESSAGES EVALUATED :

CODE	Message
A. _____	LA CIGARETTE CRÉE UNE TRÈS FORTE DÉPENDANCE : Des études indiquent qu'il peut être plus difficile d'arrêter de fumer que de renoncer à l'héroïne ou à la cocaïne. Santé Canada.
B. _____	VOS ENFANTS VOUS IMITENT: Si vous fumez, vos enfants ont deux fois plus de risques de fumer eux aussi. Chez les fumeurs à vie, la moitié de tous les décès prématurés sont dus à l'usage du tabac. Santé Canada.
C. _____	LA CIGARETTE NUIT AU BÉBÉ: L'usage du tabac nuit à la croissance du bébé pendant la grossesse. Plus petit à la naissance, le bébé risque de ne pouvoir rattraper ce retard et les risques de maladies infantiles, d'incapacités et de décès sont plus grands. Santé Canada.
D. _____	LE TABAGISME PEUT VOUS RENDRE IMPUISSANT: La cigarette peut provoquer l'impuissance sexuelle car elle réduit la circulation du sang dans le pénis. Cela peut vous rendre incapable d'avoir une érection. Santé Canada.
E. _____	DE L'AIR S'IL VOUS PLAÎT!: La fumée secondaire contient du monoxyde de carbone, de l'ammoniac, du formaldéhyde, du benzo[a]-pyrène et des nitrosamines. Ces produits chimiques peuvent nuire à vos enfants. Santé Canada.
F. _____	LA FUMÉE DU TABAC NUIT AUX BÉBÉS: L'usage du tabac pendant la grossesse accroît le risque d'un accouchement prématuré. Les bébés prématurés font face à des risques plus grands de mort infantile, de maladies et d'incapacités. Santé Canada.
G. _____	LA CIGARETTE CAUSE DES ACCIDENTS CÉRÉBROVASCULAIRES: La fumée du tabac peut bloquer les artères du cerveau, empêcher le sang de circuler dans les vaisseaux sanguins et provoquer un accident cérébrovasculaire. Cela peut entraîner une incapacité et la mort. Santé Canada.
H. _____	LA CIGARETTE CAUSE DES MALADIES DE LA BOUCHE: La fumée de cigarette cause le cancer buccal, des maladies de gencives et la perte de dents. Santé Canada.
I. _____	CHAQUE ANNÉE, L'ÉQUIVALENT DE LA POPULATION D'UNE PETITE VILLE MEURT DES SUITES DU TABAGISME. Santé Canada.
J. _____	LA CIGARETTE VOUS COUPLE LE SOUFFLE: L'usage du tabac cause des maladies du poumon incurables, souvent mortelles, comme l'emphysème. Santé Canada.
K. _____	LA CIGARETTE, ÇA BRISE LE COEUR! L'usage du tabac peut bloquer les artères de votre cœur. Cela provoque des crises cardiaques et peut entraîner la mort. Santé Canada.
L. _____	LA CIGARETTE CAUSE LE CANCER DU POUMON: Chaque cigarette que vous fumez augmente vos chances de contracter le cancer du poumon. Santé Canada.
M. _____	LA CIGARETTE CAUSE LE CANCER DU POUMON: 85% des cancers du poumon sont causés par le tabagisme. 80% de ceux qui sont atteints vont mourir en moins de 3 années. Santé Canada.
N. _____	MORTELE MÊME SI ON NE LA FUME PAS: La fumée d'une cigarette contient des substances toxiques, dont l'acide cyanhydrique, la formaldéhyde et le benzène. La fumée secondaire peut causer la mort suite au cancer du poumon et à d'autres maladies. Santé Canada.
O. _____	QUI DIT FUMÉE DIT ACIDE CYANHYDRIQUE: La fumée du tabac contient de l'acide cyanhydrique. Ce produit peut causer des maux de tête, des étourdissements, de la fatigue, des nausées, des vertiges et des maux d'estomac chez les fumeurs et les non-fumeurs. Santé Canada.
P. _____	VOUS NÊTES PAS SEUL À FUMER CETTE CIGARETTE: Le fumeur n'est pas seul à respirer la fumée de sa cigarette. La fumée secondaire que respire son entourage contient plus de 50 agents cancérogènes. Santé Canada.