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Final Report

PRE AND POST EVALUATION OF THE 2006/07 SECOND-HAND SMOKE ADVERTISING CAMPAIGN AMONG SMOKING PARENTS

HC-06-60



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Le sommaire de ce rapport est également disponible en français

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LES ÉTUDES DE MARCHÉ CRÉATEC +

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TABLE OF CONTENTS

1.	EXECUTIVE SUMMARY.....	1
1.1	PURPOSE OF THE STUDY	1
1.2	METHODOLOGY	1
1.3	ADVERTISING RECALL.....	2
1.4	CALL TO ACTION.....	3
1.5	ADVERTISING EFFECTS	3
1.6	SMOKING IN THE HOME	4
1.7	CHILDREN'S EXPOSURE TO SHS	5
1.8	CONCERN ABOUT SHS.....	5
1.	SOMMAIRE DES RÉSULTATS.....	6
1.1	OBJECTIF DE L'ÉTUDE	6
1.2	MÉTHODOLOGIE	6
1.3	RAPPEL PUBLICITAIRE	7
1.4	INCITATION À L'ACTION	8
1.5	EFFETS PUBLICITAIRES	9
1.6	FUMER À LA MAISON	10
1.7	EXPOSITION DES ENFANTS À LA FUMÉE SECONDAIRE	10
1.8	PRÉOCCUPATIONS RELIÉES À LA FS.....	11
2.	BACKGROUND.....	12
2.1	BACKGROUND TO THE 2006/07 SHS CAMPAIGN.....	12
2.2	OBJECTIVES OF THE 2006/07 SHS CAMPAIGN	14
3.	PURPOSE OF THE STUDY.....	15
4.	METHODOLOGY.....	18
4.1	TARGET POPULATION	18
4.2	SAMPLING	18
4.3	SAMPLE SIZE.....	19
4.4	SAMPLING ERROR	19
4.5	RESPONDENT SELECTION	20

4.6	WEIGHTING	20
4.7	LIMITATIONS OF PRE/POST DESIGN	21
4.8	LIMITATIONS OF ADVERTISING RECALL MEASURES	22
4.9	QUESTIONNAIRE	23
4.10	FIELD DATES	23
4.11	RESPONSE RATE	23
4.12	DATA PROCESSING.....	25
4.13	STATISTICAL TESTING.....	25
4.14	ABOUT THE TABLES	25
4.15	ABOUT THIS REPORT	26
5.	DETAILED FINDINGS	28
5.1	SAMPLE CHARACTERISTICS.....	29
	▪ Non-respondents to the Post-survey.....	29
	▪ Respondents to the Post-survey	29
5.2	UNAIDED AD RECALL	32
	▪ Free Advertising Recall	32
	▪ Unaided Ad recall	32
5.3	AIDED AD RECALL	34
	▪ Television.....	34
	▪ Radio	35
	▪ Overall Campaign (both Media).....	36
	▪ Call to Action.....	36
5.4	RESTRICTIONS OR BAN ON SMOKING IN THE HOME	38
	▪ Parts of Home where Smoking was not Permitted.....	38
	▪ Moments when Smoking was not Permitted in the Home.....	39
	▪ Effect of SHS Advertising	40
5.5	REASONS TO RESTRICT OR BAN SMOKING IN THE HOME	41
	▪ Unprompted Reasons.....	41
	▪ Effect of SHS Advertising	42
	▪ Prompted Reasons	42
	▪ Effect of SHS Advertising	43
5.6	CHILDREN'S EXPOSURE TO SHS	45
	▪ In the Home	45
	▪ In the Car	46
	▪ In the Home or Car	47
	▪ Effects of SHS Advertising	47

5.7	SHS CONTROL ACTIVITIES IN THE HOME.....	48
	▪ Restriction Rules over the Past Three Months	48
	▪ Effects of SHS Advertising	49
	▪ Reduction Methods over the Past Three Months	49
	▪ Effects of SHS Advertising	50
5.8	EFFECTIVENESS OF REDUCTION METHODS IN THE HOME	51
	▪ Perceived Effectiveness	51
	▪ Perception / Usage Gap	52
	▪ Effects of SHS Advertising	53
5.9	CONCERNS ABOUT SHS.....	54
	▪ Discussed SHS with Others	54
	▪ Beliefs about the Dangers of SHS.....	54
	▪ Health Risks Associated with SHS	55
	▪ Overall Concern about the Dangers of SHS	56
	▪ Effects of SHS Advertising	56
6.	SUMMARY TABLES.....	57
TABLE 1	CHARACTERISTICS OF NON-RESPONDENTS TO THE POST-SURVEY	59
TABLE 2	CHARACTERISTICS OF THE UNWEIGHTED AND WEIGHTED POST-SURVEY SAMPLE	61
TABLE 3	FREE ADVERTISING RECALL OF TOBACCO-RELATED ISSUES	63
TABLE 4	AIDED RECALL OF TV AD	65
TABLE 5	AIDED RECALL OF RADIO ADS.....	66
TABLE 6	AIDED RECALL OF SHS ADVERTISING CAMPAIGN	67
TABLE 7	AIDED SHS ADVERTISING RECALL BY DEMOGRAPHIC AND SMOKING-RELATED CHARACTERISTICS	68
TABLE 8	CALL TO ACTION.....	70
TABLE 9	RESTRICTIONS OR BAN ON SMOKING IN THE HOME – PARTS OF HOME WHERE SMOKING IS NOT PERMITTED –	72
TABLE 10	RESTRICTIONS OR BAN ON SMOKING IN THE HOME – SITUATIONS WHEN SMOKING IS NOT PERMITTED –	73
TABLE 11	RESTRICTIONS OR BAN ON SMOKING IN THE HOME – WHERE AND WHEN SMOKING IN THE HOME IS RESTRICTED COMBINED –	74
TABLE 12	<u>UNPROMPTED</u> REASONS TO RESTRICT OR BAN SMOKING IN THE HOME.....	75
TABLE 13	RESTRICTIONS OR BAN ON SMOKING IN THE HOME <u>BECAUSE</u> OF CHILDREN – PARTS OF HOME AND SITUATIONS COMBINED –	76
TABLE 14	<u>PROMPTED</u> REASONS TO RESTRICT OR BAN SMOKING IN THE HOME.....	77
TABLE 15	CHILDREN’S EXPOSURE TO SHS IN THE HOME	79
TABLE 16	CHILDREN’S EXPOSURE TO SHS IN THE CAR.....	80
TABLE 17	CHILDREN’S EXPOSURE TO SHS – IN THE HOME AND IN THE CAR COMBINED –	81
TABLE 18	RULES IMPLEMENTED OVER THE PAST 3 MONTHS TO RESTRICT SMOKING IN THE HOME.....	82

TABLE 19	METHODS IMPLEMENTED OVER THE PAST 3 MONTHS TO REDUCE THE AMOUNT OF SHS IN THE HOME.....	84
TABLE 20	PERCEIVED EFFECTIVENESS OF VARIOUS METHODS TO REDUCE THE AMOUNT OF SHS IN THE HOME.....	85
TABLE 21	DISCUSSION ABOUT SHS IN THE HOME OVER THE PAST 3 MONTHS	87
TABLE 22	BELIEFS ABOUT THE DANGERS OF SHS	88
TABLE 23	<u>UNPROMPTED</u> KNOWLEDGE ABOUT THE DANGERS OF SHS	89
TABLE 24	OVERALL LEVEL OF CONCERN ABOUT THE DANGERS OF SHS	90

APPENDIX 1 - QUESTIONNAIRE (English and French versions)

APPENDIX 2 - TABLE OF CONFIDENCE INTERVALS AND SAMPLING ERRORS

1. EXECUTIVE SUMMARY

1.1 PURPOSE OF THE STUDY

- Créatec was commissioned by Health Canada to conduct a pre/post campaign evaluation (ad recall and changes in knowledge, attitudes and behaviour) of the 2006/07 Second-Hand Smoke (SHS) advertising among the core of its target audience: smoking parents between the ages of 20 and 54.
- The objectives of the 2006/07 SHS advertising campaign were to increase awareness of appropriate ways to protect others from SHS (e.g., increase awareness that opening a window is not effective) and to convince the audience to take appropriate action after seeing / hearing the ads.
 - The campaign included one television ad and two radio ads.
 - The SHS TV ad aired December 18 2006 to March 4, 2007.
 - Radio ads were on air from January 8 to March 4, 2007. While the TV ad was new, radio ads were originally produced and aired during the 2004/05 SHS *Make Your Home and Car Smoke-Free* campaign.

1.2 METHODOLOGY

- The pre- and post-evaluations were based on the same random (RDD - Random Digit Dialling) sample of smoking parents who were interviewed just before and immediately after the SHS advertising campaign, using the same questionnaire (repeated measures, longitudinal analysis).
 - The pre-survey was conducted by telephone between December 6 and 18, 2006, in all provinces and territories, with n=806 respondents; n=758 agreed to a follow-up interview.
 - The post-survey was conducted by telephone between March 2 and 12, 2007, with n=583 respondents (77% of pre-survey respondents who agreed to be called again).
 - The interviews were conducted in English or French, according to the respondent's language preference, and averaged 15 minutes in length.
 - The response rate achieved in the pre-survey was 46%.
 - Advertising recall indicators were measured using ACET questions (Government of Canada's Advertising Campaign Evaluation Tool).

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- In this survey, ninety-five percent of the time, sampling error (error due to the random selection process) was no greater than 4.1 percentage points for the overall post-survey sample, plus or minus the percentage reported. Sampling error for smaller sub-groups was likely somewhat higher.
 - Note that sampling error is the only potential error that can be measured. In addition, results of any survey may contain non-sampling errors, including coverage error, measurement error, non-response error and, in some cases, other types of error. The quality of a survey rests on the effective management of these sources of potential error to achieve the lowest total survey error.
 - Also note that public opinion surveys cannot be exact measures of perceptions, but only approximations at a certain point in time.
 - **All figures are based on the weighted sample of respondents who answered both the pre- and post-surveys (n=583), unless otherwise noted.** Percentages over .5 are rounded up.

1.3 ADVERTISING RECALL

- Despite the limitations inherent in any survey aimed at measuring advertising recall¹, findings revealed, quite clearly, that the 2006/07 SHS advertising campaign achieved a remarkable impact:
 - **93%** of all respondents claimed to have seen or heard at least one ad of the SHS advertising campaign, based on a description (aided campaign recall - TV and radio).
 - Aided recall of the campaign was fairly consistent across the country.
 - **76%** were able to prove they saw the TV ad by selecting the right creative clues among several choices (proven aided recall of TV ad). This was the measure used to assess the effect of the SHS campaign.
 - Proven aided TV ad recall was significantly lower in Quebec (63%) and higher in B.C. (86%).
 - **40%** of all respondents said they had heard or may have heard the SHS radio advertising (at least one of the two ads) based on a description (aided recall of radio advertising).
 - Aided recall of SHS radio advertising was significantly higher in Quebec (47%) and Ontario (46%) and much lower in B.C. (24%) and the Atlantic Provinces (23%).

¹ *Recent studies have demonstrated that advertising can work whether consumers consciously know it or not. Therefore, advertising recall measures do not necessarily equate to whether the campaign was successful or not (ROBERT HEATH and AGNES NAIRN 'Measuring Affective Advertising: Implications of Low Attention Processing on Recall.' Journal of Advertising Research - 45, 2 (2005): 269-281 Robert.heath@lowattentionprocessing.com)*

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- While television advertising contributed the most to the campaign impact, radio advertising clearly strengthened the impact of the campaign.
 - **37%** were able to play back a creative element that could be attributed to a SHS ad (unaided campaign recall).
 - Unaided recall of the campaign was significantly lower in Quebec (25%).
 - This remarkable impact was fully confirmed by an ACET survey conducted separately but at the same time, after the campaign, among the general public.² In addition, compared to recall levels reported for the previous 2004/05 SHS advertising campaign, the current campaign achieved significantly higher recall scores for the TV advertising, was ‘internalized’ by more respondents (higher unaided recall scores), although its radio advertising had a slightly lower recall.

1.4 CALL TO ACTION

- A sizeable minority of ad recallers acknowledged that they did something or intended to do something as a result of seeing or hearing the ads. Although not a behavioural but rather an attitudinal indicator, this high level of self-stated action indicates that the SHS advertising was quite successful in encouraging the target audience to act in the intended way, i.e., not smoking inside the home.
 - **22%** of ad recallers reported that they did something as a result of seeing or hearing the ads.
 - **34%** of ad recallers said they intended to do something as a result of seeing or hearing the ads.
- The most frequent action taken or planned was thinking about quitting smoking, smoking less, or not smoking inside.

1.5 ADVERTISING EFFECTS

- Despite the limitations of the pre/post design in evaluating the effects of the SHS advertising campaign³, there were some significant changes statistically linked with exposure to the campaign which suggested that the campaign was able to influence its target audience in the intended way (i.e., opening a window is not an effective way to combat second-hand smoke).

² The 2006/07 SHS – ACET Recall Survey -- March 2007, Créatec + -- POR 283-06.

³ Note that the contrast between the ‘before’ and ‘after’ measures used in this study to assess the possible effects of the SHS advertising includes not only the possible effects of the SHS advertising but also the effects of other (uncontrollable) factors.

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- Exposure to the SHS advertising had four significant effects:
 1. Reduced the perception that opening a window is an effective way to control second-hand smoke in the house (58% before vs. 41% after the campaign thought that opening a window was at least somewhat effective).
 - This was the largest variation observed since the beginning of the campaign – so large that this method was no longer at the top rank of the most effective methods, as observed in previous surveys.
 2. Reduced the frequency of opening a window as a method to control SHS in the home (47% before vs. 41% after the campaign said that in the past three months, they opened a window to reduce SHS in the home).
 3. As a result of the SHS advertising, friends and acquaintances were asked significantly more often not to smoke in the home (for example, 38% before vs. 48% after the campaign said that in the past three months, they asked ‘always’ to friends not to smoke in the home).
 4. Also, as a result of the SHS advertising, the knowledge that respiratory problems can be caused by passive smoking increased significantly (49% before vs. 55% after the campaign could name a respiratory problem as one of the dangers of breathing in second-hand smoke).
 - All the above effects were observed even though the number of totally smoke-free homes had significantly increased since the previous campaign (from 43% in 2005 to 56% this year), making these effects harder to achieve for the current campaign. Note that the first two effects reflect the intended / explicit message of the advertising, while the two others are likely a consequence (implicit message) of the comprehension of the explicit message.

1.6 SMOKING IN THE HOME

- **56%** of all respondents lived in totally smoke-free homes – smoking was banned at all times and in all parts of the home.
 - Respondents from Quebec were much less likely than any other group to live in a totally smoke-free home (27%).
 - **34%** had smoking restrictions in some parts of the home or in some particular situations.
 - **10%** lived in homes where smoking was allowed anywhere, anytime.

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- There was no significant difference in these second-hand smoke control behaviours inside the home before and after the SHS advertising campaign. This observation suggests that although the SHS advertising did influence the knowledge and behaviour related to the method of 'opening of a window', it did not bring some smoking parents to completely ban smoking or start to impose restrictions on smoking in the home.

1.7 CHILDREN'S EXPOSURE TO SHS

- **48%** thought that their children were at least occasionally exposed to second-hand smoke in their home, with **25%** indicating that they were exposed regularly, i.e., daily.
 - Children in Quebec (46%) were much more likely than any other group to be exposed regularly to second-hand smoke in their homes. Less likely were those living in B.C. (15%) and Ontario (15%), and children of younger parents (15%).⁴
- **51%** thought that their children were at least occasionally exposed to second-hand smoke in the car, with **4%** indicating that they were exposed regularly.
- **67%** of the respondents said their children were exposed to second-hand smoke at least occasionally in the home or in the car.
- Comparisons of before/after differences between those who recalled the TV ad (proven aided recall) and those who did not were inconclusive. Therefore, there was no statistical indication, at the time of the survey, that the SHS campaign significantly changed or influenced second-hand smoke control behaviours in the home or in the car, so that children's exposure was reduced.

1.8 CONCERN ABOUT SHS

- **68%** of respondents said that over the past three months they discussed the topic of second-hand smoke with other people, including with family members.
- **43%** were 'very' concerned with the health risks associated with second-hand smoke in the home.
- **40%** thought that the dangers of breathing in other people's tobacco smoke are exaggerated.
 - Most likely to share this belief were a majority of respondents from Quebec (55%) and males (48%).
- There was no statistical evidence that the SHS campaign increased the current level of concern with the dangers of second-hand smoke in the home.

⁴ Respondents from Quebec were also the least likely to live in a totally smoke-free home (27% vs. 56% on average).

1. SOMMAIRE DES RÉSULTATS

1.1 OBJECTIF DE L'ÉTUDE

- Créatec a été mandaté par Santé Canada pour mener une évaluation avant/après campagne publicitaire 2006/07 (rappel des annonces et les changements sur le plan de la connaissance, des attitudes et du comportement) sur la fumée secondaire (FS) auprès du cœur de son audience cible : les parents qui fument âgés entre 20 et 54 ans.
- Le but de la campagne publicitaire FS de 2006/07 était d'accroître la connaissance des moyens appropriés pour éviter aux autres d'être exposés à la fumée secondaire (ex. ouvrir une fenêtre n'est pas efficace) et de convaincre l'audience de poser les gestes appropriés après avoir vu/entendu les annonces.
 - La campagne comprenait une annonce télévisée ainsi que deux annonces radiophoniques.
 - L'annonce FS télévisée a été en ondes du 18 décembre 2006 au 4 mars 2007.
 - Les annonces radio ont été en ondes du 8 janvier au 4 mars 2007. Alors que l'annonce TV était nouvelle, les annonces radio avaient déjà été produites et mises en ondes durant la campagne FS 2004/05 « *Faites de votre maison et de votre voiture des environnements sans fumée* ».

1.2 MÉTHODOLOGIE

- Les évaluations avant et après campagne ont utilisé le même échantillon aléatoire de parents fumeurs (RDD – 'Random Digit Dialling') et les entrevues téléphoniques ont eu lieu juste avant et immédiatement après la campagne publicitaire FS, à l'aide du même questionnaire (mesures répétitives, analyse longitudinale).
 - Le sondage avant campagne a été mené entre le 6 et le 18 décembre 2006, auprès de n=806 répondants répartis dans toutes les provinces et territoires; n=758 ont accepté d'être rappelés.
 - Le sondage après campagne a été mené entre le 2 et le 12 mars 2007 auprès de n=583 répondants (77% des répondants du pré-sondage qui avaient accepté d'être rappelés).
 - Les entrevues se sont déroulées en français ou en anglais, selon la préférence du répondant, et duraient en moyenne 15 minutes.
 - Le taux de réponse s'est établi à 46% au cours du pré-sondage.

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- Les indicateurs de rappel publicitaire ont été mesurés à l'aide des questions de l'Outil d'évaluation des campagnes publicitaires du gouvernement (OECP).
 - Dans ce sondage, l'erreur d'échantillonnage (causée par le processus de sélection aléatoire) est de 4,1 points de pourcentage, 19 fois sur 20, en plus ou en moins du pourcentage rapporté. L'erreur d'échantillonnage tend à augmenter lorsque la taille des sous-groupes diminue.
 - Veuillez noter que l'erreur d'échantillonnage est la seule erreur potentielle qui peut être mesurée. Par ailleurs, les résultats de tout sondage peuvent contenir d'autres sources d'erreur que celle due à l'échantillonnage, telles que l'erreur de couverture, l'erreur d'observation, l'erreur de non-réponse et, dans certains cas, d'autres types d'erreur. La qualité d'un sondage réside dans une gestion efficace de toutes ces sources d'erreur potentielle afin d'aboutir à la plus petite erreur totale.
 - Veuillez également noter que les sondages d'opinion ne peuvent être des mesures exactes des perceptions, mais seulement des approximations à un certain moment donné.
 - **Tous les résultats proviennent de l'échantillon pondéré de répondants qui ont répondu au pré- et au post-sondage (n=583), à moins qu'il en soit mentionné autrement. Les pourcentages au-dessus de 0,5 ont été arrondis à la hausse.**

1.3 RAPPEL PUBLICITAIRE

- Malgré les limites inhérentes à tout sondage visant à mesurer des rappels publicitaires⁵, les résultats ont révélé très clairement que la campagne publicitaire FS 2006/07 a réussi un impact remarquable :
 - **93%** de tous les répondants ont affirmé avoir vu ou entendu au moins l'une des annonces de la publicité FS après qu'on les leur eut décrites (rappel assisté de la campagne - TV et radio).
 - Le rappel assisté de la campagne a été assez uniforme à travers le pays.
 - **76%** ont été capables de prouver qu'ils ont effectivement vu l'annonce télévisée en choisissant le bon indice de création parmi plusieurs réponses possibles (rappel assisté vérifié de la publicité TV). C'est la mesure utilisée pour évaluer les effets de la campagne FS.
 - Le rappel assisté vérifié a été significativement le plus bas au Québec (63%) et le plus élevé en C.-B. (86%).

⁵ Des études récentes ont démontré que la publicité fonctionne, que les consommateurs soient conscients ou non de l'avoir remarquée. Par conséquent, le rappel publicitaire ne traduit pas nécessairement le succès d'une campagne (ROBERT HEATH and AGNES NAIRN 'Measuring Affective Advertising: Implications of Low Attention Processing on Recall.' *Journal of Advertising Research* - 45, 2 (2005): 269-281 Robert.heath@lowattentionprocessing.com)

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- **40%** de tous les répondants ont reconnu avoir entendu ou peut-être avoir entendu la publicité radio FS (au moins une des deux annonces), après qu'on leur eut décrit ces annonces (rappel assisté des annonces radio).
 - Le rappel assisté de la publicité radio FS a été significativement plus élevé au Québec (47%) et en Ontario (46%), et beaucoup plus faible en C.-B. (24%) et dans les provinces de l'Atlantique (23%).
 - Bien que le gros de l'impact de la campagne provienne de la télévision, il est clair que la publicité radio a clairement renforcé cet impact.
 - **37%** ont été capables de réciter (sans assistance) un élément créatif qu'il a été possible d'attribuer à une annonce FS (rappel spontané de la campagne).
 - Le rappel spontané de la campagne a été significativement plus bas au Québec (25%).
 - Cet impact remarquable a entièrement été confirmé par un sondage d'évaluation OECP mené au même moment, après la campagne, auprès du grand public.⁶ De plus, comparativement aux niveaux de rappel observés lors de la campagne publicitaire FS précédente 2004/05, la campagne actuelle a atteint des scores de rappel significativement plus élevés pour la publicité télévisée, a été 'intériorisée' par davantage de répondants (niveau de rappel spontané plus élevé), bien que sa publicité radio ait eu un rappel légèrement inférieur.

1.4 INCITATION À L'ACTION

- Une minorité appréciable de ceux qui se sont rappelés des annonces ont dit avoir fait quelque chose ou avoir l'intention de le faire après avoir vu ou entendu les annonces. Bien que ce ne soit pas une mesure comportementale mais plutôt attitudinale, ce niveau auto-évalué d'action indique que la publicité FS a franchement réussi à encourager l'audience cible à agir dans le sens voulu, c'est-à-dire ne pas fumer dans la maison.
 - **22%** de ceux qui se sont rappelés des annonces ont dit avoir fait quelque chose après avoir vu ou entendu les annonces.
 - **34%** de ceux qui se sont rappelés des annonces ont dit avoir l'intention de faire quelque chose après avoir vu ou entendu les annonces.
- L'action la plus fréquente qu'on a dit avoir fait ou avoir l'intention de faire était de songer à cesser de fumer, fumer moins, ou ne pas fumer à l'intérieur.

⁶ La campagne 2006/07 FS – Sondage de rappel OECP. Mars 2007, Créatec +, POR 283-06

1.5 EFFETS PUBLICITAIRES

- Malgré les limites d'un plan pré/post pour évaluer les effets de la campagne publicitaire FS⁷, des variations statistiquement significatives ont été observées attribuables à l'exposition à la campagne, ce qui suggère que la campagne a été en mesure d'influencer son audience cible dans le sens souhaité (i.e. ouvrir une fenêtre n'est pas une méthode efficace de combattre la fumée secondaire).
- L'exposition à la publicité FS a eu quatre effets significatifs :
 1. Réduit la perception qu'ouvrir une fenêtre est une façon efficace de contrôler la fumée secondaire dans la maison (58% juste avant la campagne et 41% immédiatement après la campagne pensaient qu'ouvrir une fenêtre était au moins assez efficace).
 - Il s'agit là de la plus grande variation observée depuis le début de la campagne – si grande que cette méthode ne se classe désormais plus au premier rang des méthodes les plus efficaces, comme on l'observait dans les sondages antérieurs.
 2. Réduit la fréquence d'ouverture d'une fenêtre pour contrôler la FS dans la maison (47% avant vs 41% après la campagne ont dit qu'au cours des trois derniers mois, ils ont ouvert une fenêtre pour réduire la FS dans la maison).
 3. Comme conséquence de l'exposition à la publicité FS, on a demandé significativement plus souvent aux amis et aux connaissances de ne pas fumer dans la maison (par exemple, 38% avant la campagne vs 48% après la campagne ont dit avoir 'toujours' demandé aux amis de ne pas fumer dans la maison, au cours des trois derniers mois).
 4. Également, comme conséquence de l'exposition à la publicité FS, la connaissance que des problèmes respiratoires peuvent être causés par l'exposition passive à la fumée de tabac a augmenté significativement (49% avant vs 55% après la campagne pouvaient nommer un problème respiratoire comme l'un des dangers de respirer de la fumée secondaire).
- Tous les effets mentionnés plus haut ont été observés alors que le nombre de maisons complètement sans fumée a augmenté de façon remarquable depuis la campagne précédente (de 43% en 2005 à 56% cette année), rendant ces effets encore plus difficiles à réaliser pour la campagne actuelle. Veuillez noter que les deux premiers effets reflètent le message explicite / but de la publicité, alors que les deux autres sont une conséquence (message implicite) de la compréhension du message explicite.

⁷ *Veillez noter que le contraste entre les mesures 'avant' et 'après' utilisées dans cette étude dans le but d'évaluer les effets possibles de la publicité FS incluent non seulement les effets possibles de la publicité FS mais aussi les effets d'autres facteurs (incontrôlables).*

1.6 FUMER À LA MAISON

- **56%** de tous les répondants vivaient dans une maison complètement sans fumée – fumer était interdit en tout temps et partout dans la maison.
 - Les répondants du Québec étaient beaucoup moins susceptibles que tout autre groupe de vivre dans un logement complètement sans fumée (27%).
 - **34%** imposaient des restrictions sur l'usage du tabac à certains endroits de la maison ou lors de certaines situations.
 - **10%** vivaient dans des maisons où l'usage du tabac était permis en tout temps et partout.
 - Il n'y a pas eu de différence significative avant et après la campagne publicitaire FS dans ces comportements pour contrôler la fumée secondaire dans la maison. Cette observation suggère que bien que la publicité FS ait influencé la connaissance et le comportement reliés à la méthode 'd'ouvrir une fenêtre', elle n'a pas amené certains parents à complètement interdire de fumer ou à commencer à restreindre de fumer à l'intérieur de la maison.

1.7 EXPOSITION DES ENFANTS À LA FUMÉE SECONDAIRE

- **48%** pensaient que leurs enfants étaient, au moins à l'occasion, exposés à la fumée secondaire dans la maison, incluant **25%** qui indiquaient que cette exposition était régulière, c'est-à-dire quotidienne.
 - Les enfants au Québec (46%) étaient beaucoup plus susceptibles que ceux de tout autre groupe d'être exposés régulièrement à la fumée secondaire dans la maison. Les moins susceptibles étaient ceux qui vivaient en C.-B. (15%) ou en Ontario (15%), et les enfants des plus jeunes parents (15%).⁸
- **51%** pensaient que leurs enfants étaient, au moins à l'occasion, exposés à la fumée secondaire dans la voiture, incluant **4%** qui indiquaient que cette exposition était régulière.
- **67%** des répondants ont dit que leurs enfants étaient exposés à la fumée secondaire au moins occasionnellement dans la maison ou dans la voiture.
- Les comparaisons avant/après entre ceux qui se souvenaient de la publicité télévisée (rappel assisté vérifié) et ceux qui ne s'en souvenaient pas n'ont pas été concluantes. Par conséquent, il n'y a pas eu d'indication statistique, au moment du sondage, que la campagne FS a significativement changé ou influencé les comportements de contrôle de la fumée secondaire à la maison ou dans l'auto, de façon telle que l'exposition des enfants s'en est trouvée réduite.

⁸ Les répondants du Québec étaient aussi les moins susceptibles de vivre dans une maison complètement sans fumée (27% vs 56% en moyenne).

1.8 PRÉOCCUPATIONS RELIÉES À LA FS

- **68%** des répondants ont rapporté qu'au cours des trois derniers mois, ils ont discuté avec d'autres personnes à propos de fumée secondaire, y compris avec des membres de leur famille.
- **43%** des répondants étaient 'très' préoccupés par les risques sur la santé associés à la fumée secondaire dans la maison.
- **40%** des répondants pensaient que les dangers de respirer la fumée de tabac des autres sont exagérés.
 - Les répondants du Québec (55%) ainsi que les hommes (48%) étaient les plus susceptibles de le croire.
- Il n'y a pas eu d'indication statistique que la campagne FS a accru le degré actuel de préoccupation envers les dangers de la fumée secondaire à la maison.

2. BACKGROUND

2.1 BACKGROUND TO THE 2006/07 SHS CAMPAIGN

- Addressing the health hazards of second-hand smoke (SHS) has historically been a part of Health Canada's activities, and has been identified as a priority under the *Federal Tobacco Control Strategy*, which was introduced in April 2001.
- In March 2002, the government of Canada undertook a social marketing campaign to inform Canadians about the dangers of second-hand smoke in the home, especially for children⁹.
 - The primary audience was parents aged 25-54 (smokers and non-smokers living with a smoker) with children at home.
 - The campaign centered on the health risks associated with second-hand smoke and provided the target audience with the means to curtail and/or eliminate second-hand smoke in their homes.
- In the Spring of 2003, Health Canada once again aired the second-hand smoke home campaign, continuing to focus on the dangers of second-hand smoke and children.
- In 2004, Health Canada commissioned a survey to explore the knowledge, attitudes and behaviours of parents who smoke¹⁰.
 - It was noted at that time that parental knowledge and attitudes did not translate into behaviour: Seventy percent (70%) of smoking Canadian parents acknowledged that, at least to some degree, their children were exposed to second-hand smoke in the home and/or car, and 50% reported smoking in the home and car.
- In January 2005, Health Canada launched a new SHS campaign, again aimed at parents aged 25-54 (smokers, and non-smokers living with a smoker) with children at home. It consisted of a number of components, including a revised version of the second-hand smoke television ad 'Target' with a new call to action "*Don't let your children be a target. Make your home smoke-free*". Along with the 'Target' ad, Health Canada re-aired a television ad entitled 'Not Much' which featured a baby in a crib being exposed to second-hand smoke in the home.

⁹ *Children and infants are more vulnerable to SHS than adults. They have smaller airways, faster breathing rates and immature immune systems.*

¹⁰ *Baseline Survey of Smoking Parents on SHS in Car and Home – Ekos March 2004 - Health Canada POR-03-102.*

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- In March 2005, Health Canada conducted a post-evaluation survey among smoking parents to assess recall of the second-hand smoke campaign (which included two television ads and two radio ads) using the government's Advertising Campaign Evaluation Tool (ACET)¹¹.
 - Aided recall for the TV component of the campaign was quite high: 83% claimed to have seen at least one TV ad and each TV ad was recalled (aided) by two-thirds of smoking parents.
 - However, when asked about the effectiveness of smoking restriction methods, well over half of respondents believed that opening a window or using an air purifier was a very or moderately effective way not only to reduce second-hand smoke in the home but also its impact on other people. Approximately one-third of respondents continued to believe that smoking behind closed doors in another room and using a fan were very or moderately effective reduction methods.
 - Exposure to the SHS ads did not seem to have any significant impact on these perceptions.
 - Finally, in the Fall of 2005, Health Canada conducted in-depth interviews to explore the gap between attitudes and the knowledge that people held regarding second-hand smoke and their subsequent behaviour¹². Results were enlightening and strongly suggested that people would support a campaign that would:
 - (1) Provide facts, rather than moralization, about how second-hand smoke operates and the damage it does, especially the damage only a little can do;
 - (2) Show the ineffectiveness of currently-used and easy-to-relate-to mitigating behaviours and situations (i.e., smoking near an open window);
 - (3) Provide information to explain simply why and how such behaviours are ineffective; and,
 - (4) Present the smoker in an empathetic way (i.e., smokers are not bad people, they just have a bad habit or bad addiction; smokers care about their children and want to do right by them and keep them safe; kudos to smokers who go the extra mile for their children, who go outside to smoke, who keep second-hand smoke totally away from them).

¹¹ *Ad Recall Survey of Adult Smoker SHS Campaign – Ipsos Reid – March 2005 - Health Canada POR-04-72.*

¹² *Second-hand smoke Perceptions and Barriers – Createc – December 2005 - Health Canada POR-200-05.*

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- From this research, Health Canada developed a new second-hand smoke TV ad to be used in the 2006/07 fiscal year. The ad was tested twice – once in storyboard format, where four different concepts were assessed. The ‘Ghost’ concept tested best, and a full ad was developed from that concept. This was then tested through focus groups in August 2006 and through an online panel in September 2006. Overall, the TV ad tested very well among smokers and non-smokers alike. The ad also prompted a call to action by a significant number of participants, especially by non-smokers who lived with smokers. Watching the TV ad sparked some of these non-smoking participants to go home and talk to the smoker(s) in their homes about measures to reduce or eliminate second-hand smoke.
 - The ‘Ghost’ TV ad was aired from December 18 2006 to March 4 2007. Radio ads were aired from January 8 to February 4 2007 including one of the weeks the television ad was off-air (Jan 8). Two English and two French radio ads were rotated over the 4-week period. These radio ads were originally produced and aired during the 2004-2005 SHS *Make Your Home and Car Smoke-Free* campaign.

2.2 OBJECTIVES OF THE 2006/07 SHS CAMPAIGN

- The objectives of the 2006/07 second-hand smoke advertising campaign were to increase the awareness of appropriate ways to protect others from second-hand smoke (e.g., increase awareness that opening a window is not effective) and to convince the audience to take appropriate action after viewing or hearing the ads (i.e., increase smoking restrictions in the home or car, smoke outside, etc.).

3. PURPOSE OF THE STUDY

- The overall purpose of this quantitative evaluation was to measure the impact and effects of the second-hand smoke advertising campaign among its primary target audience, i.e., ad recall and changes in the knowledge, attitudes and behaviour of parents who smoke or who live with a smoking spouse, after exposure to the campaign.
- More precisely, the following repeated measurements were used with the same respondents (longitudinal analysis) before (pre-survey) and after (post-survey) the advertising campaign:
 1. **Free advertising recall**¹³ – Unprompted recall of any advertising seen, read or heard related to smoking, second-hand smoke, or any other tobacco-related issues.
 - What was remembered
 - Where advertising was noticed.
 2. **Unaided ad recall** – Unprompted recall of elements linked to an ad of the campaign (TV or radio) under evaluation.
 3. **Aided ad recall** – Prompted recall of a specific ad of the SHS advertising campaign, based on a description.
 - Advertising noise for the TV ad was measured by the level of aided ad recall in the pre-survey (before the ad was aired).
 - Advertising noise for the two radio ads was not measured. (Radio ads in this campaign were the same as those aired during the previous campaign.)
 4. **Proven aided ad recall of the TV ad** – Two creative clues were described to those who recalled the TV ad. To earn the ‘proven’ label, at least one of the creative clues needed to be accurately recalled. This is the campaign recall measure used throughout the analysis of the effects of the 2006/07 SHS advertising campaign, because it was the most reliable measurement of ad exposure¹⁴.
 5. **Aided campaign recall** – Combined prompted recall (unduplicated) of any ad in the campaign (TV or radio), based on a description.

¹³ All too often and mistakenly called ‘unaided ad awareness’. Free advertising recall measures the degree to which tobacco issues are perceived to be advertised. It is caused largely by historical levels of advertising (and other communications activities). It does not refer to the particular advertisement under evaluation. However, if the ‘Ghost’ TV ad or radio ads emerged significantly in this type of question in the post-survey, it would be an indication of a strong impact.

¹⁴ Usually, aided ad recall is not further probed in advertising recall studies. However, in heavily advertised product categories or when the topic of the advertising is “socially desirable” (as is the case for SHS), experience tells that aided ad recall scores may still contain a substantial amount of “noise”. Assessing the effect of advertising using a more conservative (minimally proven) measure of aided ad recall (such as in this study) provides more robust conclusions.

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6. **Call to action** – The proportion of respondents who said they took action, or considered doing something as a result of seeing or hearing the ads.
 7. **Restrictions or a ban on smoking in the home** – The proportion of respondent homes with smoking restrictions (in parts of the home or particular moments when smoking is permitted) or totally smoke-free homes (never smoke inside).
 8. **Reasons for implementing smoking restrictions or a ban in the home** – Asked of those who reported putting restrictions in their home.
 - Unprompted
 - Prompted (7 reasons).
 9. **Children's exposure to SHS in the home** – The proportion of respondents who acknowledged that, at least occasionally, their children were in a situation close to or around someone smoking inside their home.
 - Also the proportion of respondents who acknowledged that their children were in a situation where they were breathing in second-hand smoke¹⁵ in their home.
 10. **Children's exposure to SHS in the car** – The proportion of respondents who acknowledged that, at least occasionally, their children were in a situation where they were inside a car (the respondent's or someone else's) with someone smoking.
 - Also, the proportion of respondents who acknowledged that their children were in a situation where they were breathing in second-hand smoke in a car.
 11. **Rules implemented over the past 3 months to restrict smoking in the home** – Self-reported frequency of implementing five restricting rules (e.g., restrict smoking to outdoors only).
 12. **Methods implemented over the past 3 months to reduce SHS in the home** – Self-reported behaviour around six methods used to reduce the amount of second-hand smoke (e.g., using a fan).
 13. **Perceived effectiveness of 6 methods of reducing the amount of SHS in the home** – Same methods as those prompted about implementation over the past 3 months.
 14. **SHS as a topic discussed within the family over the past 3 months** – With children, another adult or member of the family, or with other people.

¹⁵ *Second-hand smoke was defined to respondents as 'other people's tobacco smoke' when the term was used for the first time during the interview.*

15. **General knowledge and attitude indicators about SHS** – The proportion of respondents who:

- Believed that the health of non-smokers could be damaged by other people's tobacco smoke.
- Thought that the dangers of breathing in other people's tobacco smoke have been exaggerated.
- Could name the dangers of breathing in second-hand smoke (unprompted mentions).
- Were concerned about the health risks associated with second-hand smoke in their homes.

4. METHODOLOGY

4.1 TARGET POPULATION

- The target population for the pre/post campaign evaluation was precisely the core target audience of the campaign, i.e., Canadian parents between the ages of 20 and 54, either active smokers themselves or who lived with an adult smoker, with one or more children under 18 living at home.
 - The incidence level of the primary target audience was 6-7%, identical to what was observed in the previous ad recall survey (POR-04-72).
- It should be noted that the sample obtained was representative of the target audience able to respond to a telephone interview in French or English, which included those who had direct dial telephone service. (Residents with no telephone service or those using cellular phones only may together represent an exclusion rate of approximately 5% of the target audience.)

4.2 SAMPLING

- The sampling method was random (probabilistic) and non-proportionally stratified by province or territory.
 - Telephone numbers were randomly selected from the most recent electronic database of ASDE (www.surveysampler.com) using their “Canada Sampling Software”.
 - The RDD (Random Digit Dialling) sampling feature ensured that residents with unlisted telephone numbers were included in the sample with an equal probability of selection.
- The same respondent sample was interviewed before and after the advertising campaign, using the same questionnaire (repeated measures, longitudinal analysis). Variance analysis of before/after scale slides, in total and by ad awareness, measured the effects of the campaign on knowledge, attitudes and behaviours with regard to second-hand smoke.
 - The pre-survey included respondent permission to call again in a few months.
 - 95% of pre-surveyed respondents agreed to participate in the post-survey.
 - 74% of pre-surveyed respondents did participate in the post-survey.

4.3 SAMPLE SIZE

- A total of **N = 806** interviews were completed before the campaign and **N = 583** after the campaign.
- The next table presents the regional distribution of the completed sample (for discussion of weighting, see section 4.6).

REGIONAL DISTRIBUTION OF THE SAMPLE

PROVINCE / TERRITORY	%* SMOKING POPULATION	COMPLETED SAMPLE		NON-RESPONSE TO POST-SURVEY		POST-SURVEY	
		Pre-survey N	Post-survey N	N	%**	Unweighted %***	Weighted %***
▪ Atlantic	9	132	97	35	26	17	9
▪ Quebec	28	208	158	50	24	27	28
▪ Ontario	33	234	168	66	28	29	33
▪ Prairies	19	123	86	37	30	15	19
▪ B.C./Terr.	11	109	74	35	32	12	11
TOTAL	100	806	583	223	28	100	100

Note: Some totals may not equal 100% due to rounding. Territories are included with B.C. (pre-survey n=8 / post-survey n=3 respondents from the Territories).

* 2005 CTUMS (15 years and older).

** Percent of respondents in the pre-survey who did not complete the post-survey (attrition rate).

*** Percent of all respondents in the post-survey.

4.4 SAMPLING ERROR

- Results of any survey contain several distinct sources of potential errors that include: coverage error, measurement error, non-response error, sampling error and, in some cases, other types of error. The quality of a survey rests on the effective management of these sources of potential errors to achieve the lowest total survey error.
 - Sampling error is the only type of error that can be measured easily and with accuracy.
- In this survey, ninety-five percent of the time, sampling error (error due to the random selection process) was no greater than 4.1 percentage points for the overall post-survey sample, plus or minus the percentage reported. Sampling error for smaller sub-groups was likely somewhat higher.
 - A dependent sample (same respondents surveyed on 2 different occasions – repeated measures) of N=583 can detect a variation of at least 6 percentage points as significant at the 95% confidence interval.

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- Recent Health Canada research on second-hand smoke in cars and homes (POR-03-102) suggests that public opinion data on second-hand smoke is quite sensitive to question wording and context, and may result in inconsistencies, such as overestimating smoking restrictions once child-related issues are introduced in the survey. Therefore, the reader is advised that child-related questions may increase the tendency of respondents to present themselves in a positive light or to give more socially-acceptable answers, or may result in discrepancies between attitudes and behaviour toward second-hand smoke in the home and car.
 - Because the same questionnaire was used and the focus was on comparability rather than extrapolation, this type of bias is less critical in this study.
 - Every feasible effort was made to obtain a response and reduce error. However, the reader should be aware that some error is inherent in all research.

4.5 RESPONDENT SELECTION

- For households selected as part of the sample which contained more than one eligible smoker, interview selection was made with the smoker available at the time of the interview. If the smoking parent was not available after two call-backs, the non-smoking parent was invited to participate in the study. Therefore, the reader should be aware that selection of the respondents was not as strict as in a purely random survey.
 - These convenient procedures were dictated by the very low incidence of the target audience and the high field costs involved.
 - Also, because the focus of this study was on comparison rather than extrapolation, this violation is not serious, especially when only 4% of all respondents were non-smoking parents.

4.6 WEIGHTING

- As mentioned in Section 3.2, the sampling method in this study was non-proportional stratification by province or territory. The advantage of this stratification approach is to provide adequate sample sizes for regional analysis. However, to bring sample projections in line with known distribution figures, the data should be weighted to balance demographic cells. Because the initial non-proportionality was low, no respondents had weights beyond the generally accepted tolerance of 3 (the maximum was 2.8).
 - As can be seen in **Table 2** (Summary Tables section), there was a strong over-representation of females in the unweighted sample (61%) compared to the general smoking prevalence figures (42%).

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- This discrepancy could be at least partially caused by the nature of the target group itself, i.e., smoking parents, because it is known that a sizeable number of Canadian families are female single parents.¹⁶
 - Therefore, this survey could reveal that, among smoking parents, there were significantly more females than males, contrary to the general smoking population.
 - If this characteristic is true, weighting gender based on general smoking prevalence would be a wrong choice. However, as this characteristic of smoking parents is not known precisely and because a potential sampling bias could not be ruled out, gender has been weighted based on general population figures.
 - Consequently, to allow for descriptive statistics that apply to the entire target audience (smoking parents), weights were assigned to individual respondents based on the proportion of respondents that would be expected in the 2005 CTUMS¹⁷ for region and on population figures for gender.
 - To show the impact of weighting on the breakdown of the background characteristics of respondents, demographic and smoking-related data reported in **Table 2** (Summary Tables section) are presented for both the unweighted and the weighted sample.
 - All results are presented solely for the weighted sample, as these more accurately represent the target audience.

4.7 LIMITATIONS OF PRE/POST DESIGN

- The contrast between the before and after measures includes not only the possible effects of the SHS ad campaign but also the effects of other (uncontrollable) factors. In other words, it is important not to confuse ‘time’ and ‘advertising’, i.e., the contrast was not ‘with vs. without’ advertising but the ‘period before vs. the period after’.
 - To reduce the risk of confusion, the best precaution was to establish a ‘control’ group. The ‘control’ group for the purposes of this study was those respondents who said they did not notice the SHS TV ad (either no aided recall or TV ad recall without recognizing its creative clues based on a description). Their differences before and after the campaign were compared with those who could recall the TV ad and recognize its creative clues (proven aided recall).

¹⁶ The 2001 Census counted a total of 11,562,975 household and 1,311,190 lone-parent families (about 75% of these families are headed by females) representing 16% of all families in Canada. Among smoking parents, the proportion of lone-families headed by a female is likely to be much higher.

¹⁷ Canadian Tobacco Use Monitoring Survey. http://www.hc-sc.gc.ca/hl-vs/tobac-tabac/research-recherche/stat/ctums-esutc/index_e.html

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- Note that this is not a 'control group' in the strictest sense, as often defined in experimental research, where subjects are randomly assigned to groups. Prior differences may introduce a bias between those who noticed and those who did not notice the advertising.
 - Therefore, results on the effects of the advertising should be interpreted judiciously and statistical tests of 'significance' should be used with caution.

4.8 LIMITATIONS OF ADVERTISING RECALL MEASURES

- Advertising recall measures, such as free advertising recall and aided ad recall, were developed on theories about how advertising works, theories which are very dated.
- These theories have been discredited over the last 15 years by advances in neuroscience that have addressed the consumer's process in dealing with media and/or advertising, which involves low-attention cognitive processing.
- Recent studies have demonstrated that whether consumers remember an advertisement or not has little relationship to the actual impact the ad has in influencing attitudes; learning can take place even when we pay no attention whatever. In other words, asking consumers directly if they felt or did anything because of the advertising has proven faulty and problematic.¹⁸
 - These studies have demonstrated that advertising works whether consumers consciously know it or not.
 - Therefore, advertising recall measures do not equate to whether the campaign was successful or not.
- There is a growing consensus in the advertising research literature that it is by observing changes in consumer attitudes and behaviour, using the scientific practice of experimental designs, that a reliable measure of advertising effectiveness can be obtained.
- Therefore, the reader is advised that relying only on claimed advertising recall may lead to faulty conclusions about the true performance of the campaign and the reader should be cautious in the interpretation of recall measures.

¹⁸ ROBERT HEATH and AGNES NAIRN 'Measuring Affective Advertising: Implications of Low Attention Processing on Recall.' *Journal of Advertising Research* - 45,2 (2005): 269-281 Robert.heath@lowattentionprocessing.com

4.9 QUESTIONNAIRE

- The questionnaire was the result of a collaborative effort between Créatec+ and Health Canada, built on previous quantitative work conducted in 2004 and 2005 (see Appendix I).
- The interviews averaged 15 minutes in length.
- Following Health Canada approval and before going into the national field, the questionnaire was pre-tested before the campaign with a sample of 20 respondents, evenly distributed by language, to ensure that the:
 - Wording of questions was clear;
 - Questioning sequence was appropriate;
 - Response categories were appropriate; and,
 - English and French versions were comparable.

4.10 FIELD DATES

- Pre-survey: between December 6 and 18, 2006.
- Post-survey: between March 2 and 12, 2007.

4.11 RESPONSE RATE

- Up to 8 call-backs were made before abandoning a selected number, without replacement.
- A 46% response rate was achieved in the pre-survey, calculated according to MRIA standards (see the next table), and 81% in the post-survey, for an attrition rate of 28%.
<http://www.airms.org/pages/an/reponse.htm>.

ADMINISTRATIVE REPORT OF CONTACTS AND RESPONSE RATE*

	PRE-SURVEY		POST-SURVEY	
	Frequency	Total	Frequency	Total
Numbers generated		33,599		758
A. Invalid numbers				
- Out of service	5,384		28	
- Non-residential	590	5,974	1	29
B. Numbers not in sample				
- Language problem	363		0	
- Age, sickness	133		5	
- Duplicate	18		0	
- Not eligible	20,763		0	
- Quota reached	0	21,277	0	5
C. Numbers in sample for which eligibility could not be established				
- No answer**	2,819		5	
- Refused before establishing eligibility	2,088	4,907	13	18
D. Eligible numbers in sample for which an interview could not be completed				
- Absent for a long period	99		26	
- Incomplete questionnaire	23		6	
- Call-back not completed	322		61	
- Refused after establishing eligibility	191	635	30	123
E. Completed interviews		806		583
RESPONSE RATE :	E			
_____ =				
C x (E.R.)*** + D + E		46%	81%	

* Presented as per AIRMS standards.

** For a number to be considered "No answer", there must be no answer at the number throughout the period of data collection. Thus, for example, an appointment for which there is no answer when called back must be considered "Call-back not completed" and not "No answer".

*** Eligibility rate =
$$\frac{D + E}{B + D + E} = 6\% \text{ (Pre-survey)} / 99\% \text{ (Post-survey)}$$

4.12 DATA PROCESSING

- All data were processed by Créatec's statistical staff using SPSS and STATXP, a VOXCO statistical software (www.voxco.com) and consisted of:
 - Systematic editing;
 - Weighting;
 - Cross-tabulating; and,
 - Statistical testing.
- Detailed computer tables, cross-tabulations of weighted answers by region, language, age, gender, education, number of children and member of household with respiratory problems were produced under separate cover. Summary tables focusing on the pre- and post-campaign differences and the link with aided campaign recall were built, incorporated into this report, and associated with the appropriate statistical tests.

4.13 STATISTICAL TESTING

- The purpose of statistical testing was to help draw conclusions about the possible effects of the SHS advertising campaign, based on pre- and post-campaign differences.
- A consistent standard was used to determine whether to call a difference “statistically significant”. In order to earn this label, Anova F-tests or T-tests for paired comparisons (univariate analysis) must have had a probability of a type I error of less than 0.05, with a 95% confidence interval.
- In this report, the term “*significant differences*” means that the observed differences were probably “real” and not due to chance. However, because of the limitation of the control group, a significant difference does not mean that it was entirely caused by the advertising.

4.14 ABOUT THE TABLES

- Throughout the report, percentages may not always add to 100 due to rounding. For questions with multiple responses allowed, percentages will not total 100% and therefore should not be added.
- Throughout the tables in the Summary Tables section, numbers in (N) refer to the number of cases (survey respondents) on which percentages have been calculated (sample base) for a specific analysis.
- In reporting percentages, “<1%” indicates that at least one respondent was included in the category while “0%” means no one was included in the category.

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- In reporting differences, the terms “statistically” or “significant” are used to qualify the result of a statistical test (T-Test with type I error of less than 0.05 and at a 95% confidence interval). For example, a “significant difference” means that the observed difference was probably “real” and not due to chance.
 - **All findings are presented based solely on the weighted sample of respondents who answered to both the pre- and post-surveys (n=583), unless otherwise noted.**

4.15 ABOUT THIS REPORT

- Interpretation primarily focused on the differences pre- vs. post-campaign, and the link between those differences and proven aided recall of the TV ad. The objective throughout was to clearly determine if the 2006/07 SHS advertising campaign had a significant effect on the knowledge, attitudes and behaviour related to second-hand smoke.
- In order to provide clear and consistent analysis of the information presented in this report, the following approach was used:
 - Each section within the Detailed Findings chapter begins with a summary of the questions respondents were asked and which are dealt with in that section.
 - In each section, overall findings based on the entire sample are highlighted first, with a reference to the corresponding tables in the Summary Tables section where further details can be found.
 - Then, demographic groups significantly above and below the national average in the various post-survey measures are presented.
 - Finally, the effect of SHS advertising (proven aided recall of TVA ad) is examined.
- The following demographic or smoking-related variables were considered in the analysis:
 - Region (5);
 - Gender (2);
 - Age (3);
 - Education (2);
 - Presence of smoking children (2);
 - Presence of non-smoking parent (2);
 - Language (2).
- The Table of Contents was designed to allow easy navigation through the sections (themes) and sub-sections (aspects) contained in the survey, in the same order as the interview sequence.

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- The Summary Tables section, with its own Table of Contents, regroups all the findings into an easy-to-read tabular format, with findings cross-tabulated by time (before and after the campaign) and aided recall of the TV ad (proven and not proven). Results of statistical tests are indicated.
 - The terms 'smoking parents' and 'respondents' are used interchangeably in the report.



5. DETAILED FINDINGS

5.1 SAMPLE CHARACTERISTICS

NON-RESPONDENTS TO THE POST-SURVEY

- **Table 1** (Summary Tables section) presents the respondent rate of retention from the pre- to the post-survey, i.e., the percentage of pre-survey respondents who also responded to the post-survey.
 - Overall, 72% of those who participated in the pre-survey also participated in the post-survey.
- Respondents with a mother tongue other than French or English (retention rate of 61%) and those of Aboriginal descent (64%) were slightly more likely than others to drop-out of the study. In turn, Francophones (78%) were slightly more likely to participate in the post-survey. Throughout all other demographic and smoking-related groups, the retention rate between the pre- and post-surveys was quite evenly distributed, which suggests that bias caused by non-response, if any, was evenly distributed across the post-survey sample.

RESPONDENTS TO THE POST-SURVEY

- **Table 2** (Summary Tables section) presents the post-survey profile for the main demographic and smoking-related variables (unweighted and weighted), to show the impact of weighting.¹⁹
 - After weighting based on the proportion of respondents expected – according to census data (for gender) and CTUMS smoking prevalence (for region) – not surprisingly, only the effect of weighting on gender and region was significant.
 - All results that follow are presented and based solely on the weighted sample.
- The weighted gender distribution reflects the general population (49% males and 51% females) and not the smoking prevalence reported by the Canadian Tobacco Usage Monitoring Survey (CTUMS – 58% males and 42% females).
 - There was a strong over-representation of females in the unweighted sample (61%) compared to the general smoking prevalence figures (42%).
 - Findings of this survey suggest that, among smoking parents, there were significantly more females, as compared to the general smoking population.
- Also, as can be seen in **Table 2** (Summary Tables section), because of the initial non-proportional regional stratification of the sampling process, the weighted regional distribution reflects the prevalence of smoking as recorded by the CTUMS.

¹⁹ For further details on weighting see Section 4.6 in 'Methodology'.

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- Therefore, Quebec (28%) was slightly over-represented and Ontario (33%) was slightly under-represented, compared to general population figures.
 - While the screener allowed the non-smoking parent to be interviewed when the smoking parent was not available, it turned out that almost all respondents (97%) were smokers themselves.
 - Two-thirds (64%) of the smokers who responded to the survey were the only smoker in their households (even when children who smoked were included).
 - Most respondents (58%) had more than one child at home and 8% reported a smoking child in their home.
 - The average age of parents in the post-survey was almost 40 (39.8).
 - The highest educational level achieved by the smoking parents who responded to the post-survey was lower than census figures but reflects what is known about the smoking population: only 12% had completed university compared to 23% in the general population.
 - 27% of respondents reported that a family member had respiratory problems. In 36% of these homes, it was reported that someone smoked inside everyday.
 - Almost all (98%) said they watched television, and an overwhelming majority (89%) said they had listened to the radio in the 7 days before they were questioned.
 - Over that 7-day period, respondents watched TV an average of 12.4 hours and listened to the radio for the same amount of time (12.5 hours).
 - The next table presents the demographic profile of the weighted sample of smoking parents who participated in this Pre/Post campaign evaluation.
 - **All findings are presented based solely on the weighted sample of those who responded to both the pre and post survey (n=583), unless otherwise noted. Those who responded to the pre-survey only (n=223) could not be used to assess the impact and effect of the SHS advertising and were eliminated from the analysis.**

BASIC PROFILE OF THE WEIGHTED POST-SURVEY SAMPLE

Main demographic and smoking-related variables	Number of respondents	Weighted sample (583) %
▪ Smoker	562	97
▪ Non-smoking spouse	21	3
▪ Children who smoked at home	47	8
▪ Male	226	49*
▪ Female	357	51*
▪ Completed university	71	12
▪ More than one child	338	58
▪ Atlantic	97	9**
▪ Quebec	158	28**
▪ Ontario	168	33**
▪ Prairies	86	19**
▪ B.C.	69	10**
▪ NWT / NT / YK	5	1**
▪ Francophones (language of interview)	163	29
▪ Anglophones	420	71
▪ Age 20-34	146	24
▪ Age 35-49	381	66
▪ Age 50-54	56	10
▪ Working	445	78
▪ H/H income < \$60 K	308	49
▪ H/H member with respiratory problems	158	27

* *Weighting based on 2001 Census.*

** *Weighting based on 2005 CTUMS.*

5.2 UNAIDED AD RECALL

The initial ACET question asked respondents if they were aware of any recent advertising about smoking, second-hand-smoke or other tobacco-related issues. This measures advertising awareness, i.e., the perception that smoking-related issues have been advertised recently. Free advertising recall is not an ad awareness figure related to any particular ad. Unaided ad recall is determined in response to the free recall question when unprompted elements can be linked to a specific ad.

All results are percentages of post-survey respondents, unless otherwise noted.

Further details can be found in **Table 3** (see Summary Tables section).

FREE ADVERTISING RECALL

- **Free advertising recall was quite high, both before (73%) and after (80%) the campaign, differing only slightly (+ 7%).**
 - These high percentages of respondents who claimed to have seen, heard or read recent advertising about smoking, second-hand-smoke or other tobacco issues, indicate that tobacco-related issues are perceived to be quite heavily advertised and therefore, the presence of significant advertising noise in recall measures should not be ruled out.
 - Free advertising recall ranged from 75% (Prairies) to 85% (Quebec).
 - Younger respondents (20-34 years old) were less likely (69%) than any other group to recall any advertising on tobacco.

UNAIDED AD RECALL

- When asked to describe in their own words the advertising they noticed, 46% of respondents in the post-survey who claimed to have noticed advertising on tobacco-related issues were able to state (without prompting) some element that could be linked to the 2006/07 SHS advertising campaign.
 - When this proportion was translated to the total sample, it was estimated that 37% of the respondents had **unaided recall of the overall SHS advertising campaign** (TV or radio)²⁰.
 - 34% had unaided recall of the ‘Ghost’ TV ad;
 - 3% had unaided recall of a radio ad.

²⁰ In an ACET survey conducted at the same time among the general population, free advertising recall was 65% and unaided recall of the overall SHS advertising campaign was 23% (19% TV ad and 4% radio ad). Differences in recall levels with this study indicate that smoking parents (the target group of this study) pay more attention to advertising related to tobacco than the general public. For a definition of recall measures see section 3 -- Purpose of the Study.

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- Among respondents in the post-survey who could recall some advertising related to tobacco on an unprompted basis, 70% said they had seen it on television and 12% said they heard it on radio.²¹
 - Compared to pre-campaign figures, tobacco-related advertising awareness increased for both television (+ 23 points after the campaign) and radio (+ 4 points) (No other paid advertising media had a before/after difference larger than radio and television.) This tends to support the assumption that the increase of free advertising recall since the beginning of the campaign was caused by the 2006/07 SHS advertising campaign.
 - These findings about unaided ad recall also suggest that the 2006/07 SHS advertising campaign was 'internalized' by a sizeable proportion of the audience (37%). It also significantly added to the already large amount of advertising clutter on tobacco-related issues.
 - Unaided recall of the SHS advertising campaign was much lower in Quebec (25%), but fairly consistent in other parts of the country, ranging from 37% to 43%.
 - Respondents from Quebec (25%) and males (30%) were less likely to play back some of the current Health Canada SHS advertising,

²¹ See section 4.8 about "Limitations of advertising recall measures". Also, we have observed in past advertising recall surveys that respondents tend to attribute advertisements that are conveyed by other media to TV. Therefore, these findings should be interpreted judiciously, as they are perceptions not facts.

5.3 AIDED AD RECALL

Respondents were read descriptions of the 'Ghost' TV ad and the two radio ads aired during the campaign, and asked whether they had seen or might have seen, had heard or might have heard these ads.

Note that any aided ad recall measured immediately after a campaign is likely to contain some amount of advertising 'noise'. Advertising 'noise' is the product of past ads or advertising 'slippage', i.e., other communications mistakenly remembered as 'advertising', etc.

In this study, because some amount of advertising noise contained in the aided TV ad recall needed to be factored out, two follow-up validating questions ('creative clues') were asked to verify what respondents claimed to have seen or might have seen: a) was the woman near the window standing up; and b) was the teddy bear sitting alone on a chair? A correct answer to at least one of these measured 'Proven' Aided TV Ad Recall.

Because answers to the two validating questions revealed that the amount of advertising noise contained in the aided TV ad recall was quite substantial, analysis of the effects of the campaign was based on Proven Aided TV Ad Recall, the most reliable figure of advertising exposure among all recall measures in this study.

All results are percentages of post-survey respondents, unless otherwise noted.

*Further details can be found in **Tables 4-8** (see Summary Tables section).*

TELEVISION

- **A remarkable 90% of all post-survey respondents said they had seen or might have seen the 'Ghost' TV ad, based on a description.^{22*}**
 - In the pre-survey, an equally remarkable 29% claimed to have seen this TV ad when in fact it had not been shown.
 - This finding illustrates quite clearly that some recall measures may contain a sizeable amount of advertising 'noise'.
 - Aided recall of the TV ad was lowest in Quebec (85%), but fairly evenly distributed in other regions (92%-94%).

²² **Ghost:** *Where a woman is smoking near a window? Some of the smoke that she blows out the window makes its way inside the room and makes its way around the house with hand-like shapes – on a lamp, a couch, on grapes and on a teddy-bear. A little girl enters the room, picks up the teddy bear and leaves.*

* *In an ACET survey conducted at the same time among the general public, aided recall of the TV ad was 75%. For a definition of recall measures see section 3 -- Purpose of the Study.*

- The least likely to recall seeing the TV ad were parents whose mother tongue was other than French or English (72%), and the most likely were parents living with a family member having respiratory problems (95%).
- The two validating questions²³ helped confirm the presence of advertising noise in the post-survey measures: 16% of those who recalled the TV ad, based on a description, could not be confirmed with even one right answer when asked which of several options applied to the creative clues.
- **When advertising noise was factored out, it translated into a proven aided TV ad recall of 76%, based on the total sample.**
 - This is the measure that was used to evaluate the effects of the campaign, as it produces more reliable conclusions.
 - Proven TV ad recall was significantly lower in Quebec (63%) and higher in B.C. (86%). The following groups were less likely to have proven aided recall of the TV ad: mother tongue other than French or English (62%), Francophones (64%) and those who completed university (66%).
- Further details can be found in **Table 4** (Summary Tables section).

RADIO

- **40% of all post-survey respondents said they had heard or might have heard the SHS radio advertising, based on a description.**²⁴
 - This recall level, although not proven, suggests that radio advertising strengthened the impact of TV advertising.
 - Aided recall of SHS radio advertising was significantly higher in Quebec (47%) and Ontario (46%), and much lower in coastal areas both in the west (24% in B.C.) and the east (23% in Atlantic Provinces).
 - Francophones (47%) were more likely to have heard the SHS radio advertising than Anglophones (37%)²⁵. Non-working respondents (30%) were less likely to have noticed the radio ads.
- Aided recall of each ad indicated that:
 - 15% recalled both radio ads;

²³ **Q4a1** Can you recall if the woman near the window was standing up, sitting down, or are you not sure?
Q4a2 Can you recall if the teddy bear was sitting alone on a chair, with other toys in a box, or are you not sure?

²⁴ Aided recall of radio ad was not measured before the campaign. In an ACET survey conducted at the same time among the general public, aided recall of SHS radio advertising was 37%.

²⁵ Another radio ad on SHS in the car in Quebec airing at the same time may have added to the recall rates of Francophones - <http://www.tvds.ca/enquete/index.htm>

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- One radio ad, 'Buckle,' was recalled by slightly more respondents than the other (31% for 'Buckle' vs. 23% for 'Kids').²⁶
 - Further details can be found in **Table 5** (Summary Tables section).

OVERALL CAMPAIGN (BOTH MEDIA)

- **Overall, when both media were combined, an astonishing 93% of all respondents reported seeing or hearing some or all of the 2006/07 SHS advertising campaign²⁷, based on a description.**
- Television contributed the most to campaign recall, with 53% of respondents remembering only the TV ad, 3% remembering only the radio ads and 37% recalling both TV and radio ads, based on a description.
 - While the TV ad clearly played the key role in this campaign, these findings reinforce the assumption that the radio advertising contributed quite significantly by strengthening the impact of the TV ad.
- Overall, recall of the campaign (any ad) was fairly consistent across the country, ranging from 91% (Quebec) to 95% (Ontario).
 - The least likely to have noticed any SHS advertising were respondents whose mother tongue was other than French or English.

CALL TO ACTION

Respondents who recalled (aided) at least one SHS ad, whether TV or radio, were asked what they did as a result of seeing or hearing the ad(s).

- **22% of ad recallers reported that they did something as a result of seeing or hearing the ads; extrapolated to the total sample, they represented 20% of all respondents.²⁸**
 - Francophone ad recallers (30%), residents from Quebec (30%) and ad recallers with a member of the family having respiratory problems (30%) were more likely than others to report taking action after being exposed to the ads.

²⁶ **Kids:** "With children in the car who don't speak up about difficulties breathing and having sore eyes from cigarette smoke. It also discusses some illnesses that you can get from second-hand smoke."

Buckle: "Which talks about some steps parents take to ensure their children are safe in the car. They buckle seat belts and drive slowly. They then light up a cigarette exposing their children to second-hand smoke."

²⁷ In an ACET survey conducted at the same time among the general public, aided recall of the overall SHS campaign was 85%.

²⁸ In an ACET survey conducted at the same time among the general public, call to action was 10%, higher among those who had a smoker in the home.

- The most frequent action taken was ‘thinking about quitting smoking, smoking less or not smoking inside’.
- 34% of ad recallers said they **intended to do something** as a result of seeing or hearing the ads; they represented 32% of all respondents.
 - Again, Francophone ad recallers (52%), residents from Quebec (52%) and females (44%) were more likely than others to have plans to do something after being exposed to the ads.
 - Again, ‘planning to quit or smoke less inside the home’ was mentioned most often.
- The following table summarizes the advertising recall indicators measured in this survey, based on the total sample. Note that all recall indicators (except the questions used to validate aided TV ad recall) were measured using the ACET questions (the government’s Advertising Campaign Evaluation Tool).
- Further details can be found in **Tables 6-8** (Summary Tables section).

**2006/07 SECOND-HAND SMOKE ADVERTISING CAMPAIGN
SUMMARY OF ADVERTISING RECALL INDICATORS**

<i>All figures based on the total sample of respondents who answered to both pre and post surveys (N=583)</i>	Before campaign %	After campaign %	Difference (After-Before) %
▪ Free advertising recall on tobacco-related issues and SHS	73	80	+7
▪ Unaided recall of TV ad	4	34	+30
▪ Unaided recall of radio ads	NA	3	NA
▪ Unaided recall of overall SHS campaign (both media)	NA	37	NA
▪ Aided recall of TV ad	29	90	+61
▪ Proven aided recall of TV ad	NA	76	NA
▪ Aided recall of radio ads	NA	40	NA
○ <i>‘Kids’ radio ad</i>	NA	23	NA
○ <i>‘Buckle’ radio ad</i>	NA	31	NA
○ <i>Both radio ads</i>	NA	15	NA
▪ Aided recall of overall SHS campaign (both media)	NA	93	NA
○ <i>Only TV ad</i>	NA	53	NA
○ <i>Only radio ads</i>	NA	3	NA
○ <i>Both TV and radio ads</i>	NA	37	NA
Action taken as a result of	NA	20	NA
Action planned as a result of	NA	32	NA

All figures based on total sample. Do not add column down to 100% because not all indicators are exclusive. Before and after samples are dependent (same respondents).

NA indicates that the question was not asked in the pre-survey.

5.4 RESTRICTIONS OR BAN ON SMOKING IN THE HOME

This section highlights second-hand smoke rules or control behaviours in Canadian smoking parents' homes (totally smoke-free homes, smoking restrictions in some parts of the home or in some situations, and totally unrestricted smoking).

The possible effects of the 2006/07 SHS advertising campaign on these second-hand smoke rules are then explored.

Respondents were first asked if there were any parts of their homes where smoking was not permitted inside. Those who acknowledged that their home was not totally smoke-free were also asked if there were any situations or moments when smoking was not permitted inside.

All results are percentages of post-survey respondents, unless otherwise noted.

*Further details can be found in **Tables 9-11** (Summary Tables section).*

PARTS OF HOME WHERE SMOKING WAS NOT PERMITTED

- **The overwhelming majority (85%) of smoking parents who responded to this survey said they imposed restrictions or a ban on smoking in their home.**
 - Slightly more than half (56%) of smoking parents banned smoking in all parts of their home (smoke-free home);
 - 29% restricted smoking in some but not all parts of their home; and,
 - A minority (15%) did not impose any restrictions – smoking was allowed anywhere in their home.
- Two similar surveys conducted over the past three years (March 2004 – POR-03-102 and March 2005 – POR-04-72) with the same target group and the same question reported a higher percentage of smoking parents with no smoking restrictions in their home (smoking allowed anywhere) and a lower percentage with all parts of their home smoke-free.
- The next table compares the findings from the three available surveys. As can be seen, a trend has emerged over the past three years where smoking restrictions inside the homes of smoking parents have increased, but it is really since 2005 that the increase has been remarkable.
 - 'A smoking ban in all parts of home' increased continuously, from 37% in 2004 to 43% in 2005 and 56% this year.

- While this proportion has increased over the last three years, especially since 2005, findings based on differences between those exposed and not exposed to the SHS TV ad reveal that second-hand smoke control behaviours were not statistically linked to the 2006/07 SHS advertising campaign.²⁹

SMOKING RESTRICTIONS IMPOSED IN PARTS OF HOME SINCE 2004

<i>All figures based on total samples</i>	March 2004* 100%	March 2005** 100%	March 2007*** 100%
▪ Smoke-free home	37	43	56
▪ Restricted parts of home	38	35	29
▪ Smoking allowed anywhere	25	22	15

* POR 03-102 ** POR 04-72 *** This post-survey

- Parents from Quebec (27%) and less-educated respondents (51%) were less likely to claim that all parts of their home were smoke-free, while those from B.C. (77%) and younger respondents (67%) were more likely to claim smoke-free status.
- Bedrooms were cited most often as the specific location in the house where smoking was not permitted (17% of the total sample), followed at a distance, in equal numbers, by other parts of the home (2-4%).³⁰
- Further details can be found in **Table 9** (Summary Tables section).

MOMENTS WHEN SMOKING WAS NOT PERMITTED IN THE HOME

- Among those respondents who permitted smoking somewhere in the home (totally unrestricted or partially restricted), half (50%, or 22% of the total sample) reported that there were no smoking restrictions in the home based on situations or moments, while for the other half there was some form of restriction. Further details can be found in **Table 10** (Summary Tables section).
- When these findings on restricted moments were combined with those on restrictions related to locations in the home, it was estimated that:
 - **56% of all respondents lived in totally smoke-free homes – smoking was banned at all times and in all parts of the home.**
 - Respondents from Quebec were much less likely than any other group to live in a totally smoke-free home (27%).

²⁹ Note that there was no change regarding smoking restrictions in the home between the pre and post survey.

³⁰ In previous surveys, it was also the bedrooms where smoking restrictions were applied most often.

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- 34% had smoking restrictions in some parts of the home or in some particular situations.
 - 10% lived in homes where smoking was allowed anywhere, anytime.
 - Therefore, it is estimated that, in 90% of the homes of Canadian smoking parents, there are at least some SHS control activities in place, if not a total ban. Extrapolated to population figures, this represents nearly 730,000 homes.³¹ However, the extrapolation also indicates that in nearly 80,000 homes, smoking is still allowed anywhere, anytime and in nearly 280,000 homes, smoking is only restricted and not totally banned.

EFFECT OF SHS ADVERTISING

Overall

- There was no significant difference in second-hand smoke control behaviours inside the home before and after the SHS advertising campaign.
 - The percentage of totally smoke-free homes claimed, and homes with smoking restrictions in some situations or parts, did not vary more than 1 percentage point pre- to post-campaign (see **Table 11** in Summary Tables section).
 - The largest variation was seen for restrictions in the kitchen or eating area, from 7% (before campaign) to 3% (after campaign), but it was not statistically significant.

Effect of SHS TV ad

- There was no significant difference between before and after the campaign that could be linked with exposure to the SHS TV ad (proven aided recall).
 - SHS control behaviours inside the home (in parts of the home or situations) remained unchanged during the advertising campaign, among those with proven aided recall of the TV ad as well as those with no proven aided recall of the TV ad.

³¹ *Incidence of the target group, i.e., smoking parents, is estimated to be 7% of Canadian households and 90% of them (this post-survey) said that they impose restrictions on smoking in their home. The 2001 census enumerated 11,562,975 households. Therefore, the incidence reported in this survey translates into 730,000 households where smoking is restricted in some way.*

5.5 REASONS TO RESTRICT OR BAN SMOKING IN THE HOME

Surveyed parents who restricted or banned smoking in their homes were first asked to explain why the restrictions were put in place (unprompted reasons). Then, they were asked to rate the importance of each of 7 possible motivations to restrict smoking in their homes, using a 7-point scale, where '1' meant not important at all and '7' meant extremely important.

All results are percentages of post-survey respondents, unless otherwise noted.

Further details can be found in **Tables 12-14** (Summary Tables section).

UNPROMPTED REASONS

- In accordance with previous surveys, **child-related concerns were the primary reason for restricting smoking in the home by 62% of those who restricted or banned smoking (translated to the total sample, they represented 56%).**
 - The largest child-related concern was the desire 'to avoid exposing children to second-hand smoke' (48%), followed by a 'child health condition' (30%).³²
 - 38% of the total sample totally banned smoking inside their homes because of their children.
- In addition to a clear focus on children, '**preventing the house from smelling**' (36%) ranked as one of the top reasons for restricting smoking in the home. Combined with 'dirt' (8%), 'preventing smell and dirt' was an even more important reason for restrictions (39%).
 - Other reasons cited included 'protection from the harmful effects of second-hand smoke' (21%) and 'courtesy towards non-smokers' (16%).
- Child-related reasons were evenly distributed across the various demographic groups, while smell prevention was more likely to be mentioned in B.C. (43%) or the Prairies (44%) and less likely in Quebec (25%).
- The next table compares results obtained for this open-ended question with those reported in previous surveys. As can be seen, more mentions occurred this year that were related to smell prevention and the health of children.
- Further details can be found in **Tables 12 and 13** (Summary Tables section).

³² Note that 27% of the sample reported that a member of their household had respiratory problems.

UNPROMPTED REASONS TO RESTRICT OR BAN SMOKING IN THE HOME

Smoking parents who restrict or ban smoking in the home	March 2004*	March 2005**	March 2007***
	%	%	%
▪ Avoid exposing children to SHS	43	47	48
▪ Health of children	17	18	30
▪ Smell prevention	31	22	36

* POR 03-102 ** POR 04-72 *** This post-survey

EFFECT OF SHS ADVERTISING

Overall

- When second-hand smoke control behaviours in the home and unprompted reasons were connected, it was found that the proportion of all respondents who restricted or banned smoking in their home because of socially-related reasons (courtesy towards non-smokers, visitors) increased after the campaign (from 7% to 16%), as well as the general belief that second-hand smoke is harmful (from 12% to 21%).

Effect of SHS TV ad

- There was **no link with proven aided recall** of the TV ad. Therefore, the before/after campaign decline of child-related reasons and the before/after campaign increase of socially-related reasons are both likely to be time-related or related to other advertising rather than to Health Canada SHS advertising.
- Therefore, there was no statistical indication that the SHS advertising campaign influenced respondents to restrict or ban smoking because of child-related or other types of reasons.

PROMPTED REASONS

- Overall, the **health of their children** (88% said it was extremely important) and the **smell or dirt** from cigarette smoke (67%) were, by far, the most influential factors in the decision to restrict or ban smoking in the home. These two factors were acknowledged to be more important than:
 - Allergies of a family member – 40%;
 - Effects of second-hand smoke on parents' own health – 40%;
 - Because their children asked – 41%; and,
 - Because an adult family member asked – 38%.
- When all ratings were considered in calculating the mean importance rating of each possible reason, it was noted that respondents were **the least concerned about the impact of second-hand smoke on their own health.**

Effect of SHS on the health of children

- Among the seven reasons listed in the survey, the most influential reason stated by respondents was clearly related to their children's health:
 - 88% said that 'the effect of second-hand smoke on the health of their children' was an 'extremely' important factor in their decision to restrict or ban smoking in their homes.
 - Respondents from the Atlantic Provinces were the most likely to ascribe the highest importance to this reason (95%).
- The importance of another child-related reason was also rated above-average:
 - 66% said they wanted to prevent their children from being 'influenced by others to start smoking'.
 - Again, respondents from the Atlantic Provinces were the most likely to ascribe the highest importance to this reason (73%).

Smell and dirt caused by cigarette smoke

- Reflecting their unprompted reasons for placing restrictions on smoking in their home, a clear majority (67%) said that 'the smell and dirt caused by cigarette smoke' played an 'extremely' important role in their decision.
 - Respondents from B.C. (80%) and those living with a family member experiencing respiratory problems (76%) were more likely to restrict smoking to prevent smell and dirt. In contrast, respondents from Quebec (56%) were the least likely.

EFFECT OF SHS ADVERTISING

Overall

- SHS advertising did not seem to have an impact on the importance smoking parents ascribed to reasons for restricting smoking in their homes.
 - Overall, the before vs. after campaign mean rating differences on the 7-point importance scale were not significant (statistically the same).

Effect of SHS TV Ad

- There was no significant difference in reasons for smoking restrictions between those that saw the TV ad and those that did not.
 - For example, the importance ascribed to the effect of second-hand smoke on the health of their children was exactly the same before and after the campaign among those with proven aided TV ad recall as well as those with no such proven recall (zero variation).
- The following table highlights the mean ratings of importance, before and after the campaign. Further details can be found in **Table 14** (Summary Tables section).

PROMPTED REASONS TO RESTRICT OR BAN SMOKING IN THE HOME – MEAN RATINGS OF IMPORTANCE –

<i>Figures based on those who restricted or banned smoking in the home (n=525)</i>	Before campaign	After campaign	Difference (After – Before)
▪ The effects of second-hand smoke on the health of your children	6.5	6.5	0
▪ The smell and dirt caused by cigarette smoke	5.9	5.9	0
▪ To prevent children from being influenced by others to start smoking	5.8	5.8	0
▪ Because your children asked	5.0	5.1	0.1
▪ Allergies of a family member	4.7	5.0	0.3
▪ Because an adult family member asked	4.7	4.9	0.2
▪ The effects of second-hand smoke on your own health	4.6	4.4	-0.2

Q14 *People may restrict smoking in their home for a number of reasons. On a 7-point scale, where 1 means not at all important, and 7 means extremely important, please tell me how important the following factors are in your decision to restrict smoking in your home...*

Mean rating on 7-point scale. 'Don't know' and 'Not applicable' were excluded from the calculations.

5.6 CHILDREN'S EXPOSURE TO SHS

This section reports on the frequency of children's exposure to second-hand smoke in the home, in the car, and in the home and car combined.

Because the same questions were asked in previous surveys, it was possible to conduct a retrospective analysis to determine if any trend occurred, and if the current SHS advertising campaign had any effect on children's exposure to second-hand smoke.

All results are percentages of post-survey respondents, unless otherwise noted.

*Further details can be found in **Tables 15-17** (Summary Tables section).*

IN THE HOME

- As observed in previous surveys, most respondents reported very different patterns in terms of children's exposure to second-hand smoke in their homes.
 - Half (52%) of the respondents thought that their children were never close to or around someone smoking inside their homes. The other half (48%) thought that their children were at least occasionally exposed, with **25% indicating that they were exposed regularly, i.e., daily.**³³
 - Children in Quebec (46%) were much more likely than any other group to be exposed regularly to second-hand smoke in their homes. Less likely were those living in B.C. (15%) or Ontario (15%), and children from younger parents (15%).³⁴
- Based on current findings, it has been estimated that the percentage of Canadian households where children are regularly exposed to second-hand smoke in the home is 2%, or at least 200,000 children.³⁵ About the same number are exposed occasionally. **These figures, when combined, translate into at least 400,000 children exposed to second-hand smoke in the home, at least occasionally.**³⁶

³³ A follow-up question asked for frequency of situations where children are breathing in SHS (instead of being close to / around someone; this follow-up question received identical answers.)

³⁴ Respondents from Quebec were also the least likely to live in a totally smoke-free home (27% vs. 56% on average).

³⁵ Incidence of the target group i.e., smoking parents, is estimated to be 7% of Canadian households and 25% of them (this post-survey) reported that their children are exposed to SHS everyday or almost everyday. The 2001 census enumerated 11,562,975 households. Therefore, the 2% incidence reported in this survey translates into 200,000 households and at least the same number of children.

³⁶ According to the latest results from the Canadian Tobacco Use Monitoring Survey (CTUMS), for data collected in the first half of 2006, 15% of Canadian households had at least one person who smoked inside the home everyday or almost everyday and 10% of children under the age of 12 (about 379,000 children) were regularly exposed to second-hand smoke at home.

- The following table compares the findings with those from previous surveys. As can be seen, there has been a clear trend over the past three years toward children being less exposed to second-hand smoke in the home. Further details can be found in **Table 15** (Summary Tables section).

CHILDREN'S EXPOSURE TO SHS IN THE HOME

Reported frequency of exposure (All figures based on total samples of smoking parents)	March 2004* %	March 2005** %	March 2007*** %
▪ Everyday	33	29	25
▪ At varying frequency	35	40	23
▪ Never	32	31	52

* POR 03-102 ** POR 04-72 *** This post-survey

IN THE CAR

- Again, as was observed in previous surveys, respondents continued to report that their children were exposed to second-hand smoke in the car on a less regular basis than in the home.
 - Half (49%) of the respondents thought that their children were never close to or around someone smoking inside a car. The other half (51%) thought that their children were at least occasionally exposed, with **4% indicating that they were exposed regularly, i.e., daily**.
 - Children from younger smoking parents were the most likely (62%) never to be exposed to second-hand smoke in the car.
 - Over the past three years, the incidence of children being exposed daily to second-hand smoke in the car remained almost unchanged (4% in this survey) and well below regular passive smoking in the home .
- Based on current findings, it has been estimated that the percentage of Canadian children who are exposed daily to second-hand smoke in the car is nearly 0.3% or about 35,000 children. But many more are exposed occasionally (at least 380,000 children). When these figures are combined, **it is estimated that about 415,000 children are exposed to second-hand smoke in the car, at least occasionally** (nearly the same number as those exposed in the home).
- Retrospective analysis indicates that the proportion of respondents who said their children were 'never' exposed to second-hand smoke in the car has declined continuously over the past three years, while the occasional exposure of children to second-hand smoke in the car has steadily increased, as shown in the next table.
- Further details can be found in **Table 16** (Summary Tables section).

CHILDREN'S EXPOSURE TO SHS IN THE CAR

Reported frequency of exposure (All figures based on total samples of smoking parents)	March 2004* %	March 2005** %	March 2007*** %
▪ Everyday	6	5	4
▪ At varying frequency	23	35	47
▪ Never	71	60	49

* POR 03-102 ** POR 04-72 *** This post-survey

IN THE HOME OR CAR

- When the frequencies of children's exposure to second-hand smoke in the home and in the car were combined, it turned out that **67% of the respondents said their children were exposed to second-hand smoke at least occasionally.**
 - Respondents from Quebec were the most likely to have exposed their children to second-hand smoke in their home or car (82% vs. 67% on average). Only 18% of Quebecers never exposed their children in the home or car (vs. 33% on average).
 - Extrapolated to population figures, **it has been estimated that at least 580,000 children have been exposed at least occasionally to second-hand smoke in the home or in the car.**
 - A sizeable minority (29%) reported that their children were exposed in varying degrees to second-hand smoke both in the home and in the car, which can be estimated to be at least 235,000 at-risk children.
- Further details can be found in **Table 17** (Summary Tables section).

EFFECTS OF SHS ADVERTISING

Overall

- There were no significant before/after campaign differences in children's frequency of exposure to second-hand smoke in the home, or in the car.

Effect of SHS TV ad

- Comparisons of before/after differences between those who recalled the TV ad (proven aided recall) and those who did not were inconclusive.
- Therefore, there was no statistical indication, at the time of the survey, that the SHS campaign significantly changed or influenced second-hand smoke control behaviours in the home or in the car, so that children's exposure was reduced.

5.7 SHS CONTROL ACTIVITIES IN THE HOME

This section deals with SHS control activities (rules, equipment, behaviours) that respondents put in place over the past three months (before the post-survey) to restrict smoking or reduce the amount of second-hand smoke in their homes.

Respondents were first asked to report how frequently over the past three months some smoking restriction rules were applied in their homes, by any member of their household.

Then they were asked which of six second-hand smoke reduction methods were put in place during the past three months.

All results are percentages of post-survey respondents, unless otherwise noted.

*Further details can be found in **Tables 18-19** (Summary Tables section).*

RESTRICTION RULES OVER THE PAST THREE MONTHS

- As reported previously, over half of the respondents (56%) claimed to live in a totally smoke-free home, while 34% said they did restrict smoking in some way and 10% indicated they had no restrictions (anytime, anywhere) on smoking in their home.
- Not surprisingly, the smoking restriction applied **most often** over the past three months was 'smoking outdoors only' (59% in the post-survey said they always asked for that).
 - Respondents from Quebec were the least likely to always restrict smoking to the outdoors (29%).
- Many also asked friends and acquaintances (48% always) as well as relatives (45% always) 'not to smoke' inside their homes, and to restrict smoking when children were around (46% always).
 - Respondents from Quebec were the least likely to always restrict smoking when children were around (30%), or to ask friends and acquaintances (25%) or relatives (21%) not to smoke.³⁷
- Restricting smoking in the home to one room or area only was the rule applied **least often** (21% always). This finding should not be surprising, when one knows that most respondents restrict smoking in all parts of their homes.
 - Respondents from Quebec were the most likely to always restrict smoking to one room or area only (28%).

³⁷ Respondents from Quebec were also the least likely to live in a totally smoke-free home (27% vs. 56% on average).

EFFECTS OF SHS ADVERTISING

Overall

- Two quite similar smoking restriction rules varied significantly pre- vs. post-SHS advertising campaign.
 - Always ask friends and acquaintances not to smoke – increased from 38% pre-campaign to 48% post-campaign.
 - Always ask relatives not to smoke – increased from 35% to 45%.

Effect of SHS TV ad

- These two differences before and after the campaign tested significantly between those who recalled the TV ad and those who did not recall it.
- **Therefore, the ‘Ghost’ TV ad was positively associated with the smoking restriction rule which consists of asking other smokers (friends, acquaintances and relatives) not to smoke in the home.**

REDUCTION METHODS OVER THE PAST THREE MONTHS

- Besides asking others not to smoke or not permitting smoking inside the home (71% in the post-survey said they did this in the past three months), respondents were the **most likely** to say that they opened a window (41% in the post-survey).
- Following ‘opening a window’, other methods were much less frequently used in the past three months (according to the post-survey):
 - Smoking behind closed doors in another room or area – 28%
 - Using a spray or another form of air freshener – 20%
 - Using a fan – 19%
 - Smoking outside – 19%
 - Using an air purifier unit in the home – 17%
- In the past three months, respondents from Quebec were more likely to have used an air purifier unit (26%) or a fan (30%), opened a window (62%), or used a spray or air freshener (34%). In turn, they were less likely to have banned smoking in their homes (48%). Respondents from the Atlantic Provinces were the most likely (40%) to have restricted smoking behind closed doors in another room or area.
- Retrospective analysis shown in the next table indicates that all these methods were used less often this year than over the past three years. This trend mirrors the increasing proportion of smoke-free homes observed during the same period.
- Further details can be found in **Table 19** (Summary Tables section).

METHODS USED TO REDUCE SHS OVER THE PAST THREE MONTHS

Reported use of method (All figures based on total samples of smoking parents)	March 2004* %	March 2005** %	March 2007*** %
▪ Open a window	65	66	41
▪ Use a fan	44	46	19
▪ Use a spray or air freshener	36	38	20
▪ Smoke behind closed doors in another room	33	36	28
▪ Use an air purifier	28	32	17
▪ Smoking outside	9	13	19
▪ Candles	4	2	2
▪ None of these methods	24	22	44

* POR 03-102 ** POR 04-72 *** This post-survey

EFFECTS OF SHS ADVERTISING

Overall

- In contrast with ‘not allowing people to smoke in the home’, which increased significantly, from 66% pre-survey to 71% after the campaign, some other SHS reduction methods in the home declined significantly:
 - Using a fan – from 25% to 19%
 - Opening a window – from 47% to 41%
 - Using a spray or air freshener – from 27% to 20%

Effect of SHS TV ad

- Only one difference in the use of SHS control methods can be directly attributed to the TV ad.
 - Those who saw the TV ad opened a window to reduce SHS significantly less often than those who said they did not see it.
 - This finding reflects the effect of the TV ad noted above, i.e., it encouraged respondents to ask others not to smoke in their homes.
 - These findings suggest that the SHS advertising campaign **was successful in conveying the message that opening a window is not an effective way to combat second-hand smoke.**

5.8 EFFECTIVENESS OF REDUCTION METHODS IN THE HOME

After asking respondents if they had taken any of six actions to reduce the amount or impact of second-hand smoke in their homes, they were queried about the **effectiveness** of each of these methods.

All results are percentages of post-survey respondents, unless otherwise noted.

Further details can be found in **Table 20** (Summary Tables section).

PERCEIVED EFFECTIVENESS

- **Only one method was seen to be at least moderately effective by a majority of respondents.**
 - **52% said that using an air purifier unit in the home was ‘very’ (13%) or ‘somewhat’ (39%) effective.**
- Opening a window, which in previous surveys was the method perceived to be effective by the largest majority of respondents, was seen as ‘at least somewhat effective’ by only 43% this year.
 - Respondents from Quebec (53%) were the most likely to believe that opening a window was at least somewhat effective in reducing second-hand smoke in the home.
- All other methods were thought to be ineffective by most surveyed smoking parents (76%-90%).
- Retrospective analysis shown in the next table indicates a major trend: all methods are being perceived to be less and less effective.
 - The perceived effectiveness of an air purifier tended to decline only slightly and its effectiveness was acknowledged by more respondents than any other method, even more than opening a window.
 - In turn, the perceived effectiveness of opening a window declined quite sharply from the top to the second rank.
- Further analysis presented later in this section shows that the sharp decline of the perceived effectiveness of opening a window is statistically linked with the SHS advertising, i.e., it could be attributed to the campaign.

PERCEIVED EFFECTIVENESS OF METHODS TO REDUCE SHS IN THE HOME

All figures based on total samples of smoking parents	March 2004*	March 2005**	March 2007***
	%	%	%
▪ Opening a window	70	60	43
▪ Using an air purifier	60	55	52
▪ Using a fan	40	30	20
▪ Smoking behind closed doors	34	30	24
▪ Using a spray or air freshener	16	14	8

* POR 03-102 ** POR 04-72 *** This post-survey

PERCEPTION / USAGE GAP

- Perceptions of effectiveness and usage (behaviour) were not always attuned. The following table shows the reported incidence of usage in the past three months and the perception of effectiveness in reducing second-hand smoke in the home.
- Perception and behaviour were attuned for using a fan, opening a window and smoking behind closed doors.
- They were not aligned for using an air purifier unit and a spray or air freshener.
 - The gap between perception and behaviour was particularly sharp for the purifier unit: many more perceived this method to be at least somewhat effective (52%) compared to those who used it in the past three months (17%).
 - This important gap may indicate that this method, despite its cost barrier, could become more popular among the target group, especially because the perceived effectiveness of opening a window has declined substantially. In respondents' eyes, the purifier method has now risen to the top of effective methods.
 - The gap associated with an air freshener indicates that it was used more often (20%) than it was thought to be 'at least somewhat' effective (8%). This gap is not surprising, given that the question asked about the effectiveness of reducing the amount of SHS. However, the air freshener may be used primarily to combat the 'smell' and not the 'amount' of second-hand smoke.

USAGE AND PERCEIVED EFFECTIVENESS OF METHODS TO REDUCE SHS IN THE HOME

All figures based on total sample	March 2007		Perception / usage gap %
	At least somewhat effective %	Used in past 3 months %	
▪ Opening a window	43	41	2
▪ Using an air purifier	52	17	35
▪ Using a fan	20	19	1
▪ Smoking behind closed doors in another room	24	28	-4
▪ Using a spray or air freshener	8	20	-12

EFFECTS OF SHS ADVERTISING

Overall

- The perceived effectiveness (is at least somewhat effective) of three methods of reducing SHS in the home varied significantly during the campaign:
 - ‘Opening a window’ – decreased from 58% to 43% (- 15 points)
 - ‘Using a fan’ – decreased from 26% to 20% (- 6 points)
 - ‘Smoking behind closed doors’ – decreased from 31% to 24% (- 7 points).
- Perceptions about ‘using an air purifier unit’ did not vary significantly (from 56% to 52%), and this was the only method considered effective by most respondents.
- **‘Opening a window’ had the largest pre/post variation observed in this study.** It seems as if this entrenched belief was almost broken during the 2006/07 advertising campaign (from 60% in 2005 to 58% just before the campaign and 43% immediately after the campaign).

Effect of SHS TV ad

- Among all the methods surveyed, only the before and after campaign variation of the perceived effectiveness of **‘opening a window’** was significantly linked to the TV ad: for recallers of the ‘Ghost’ TV ad, the perception of this method's effectiveness declined much more sharply during the campaign than among those who could not prove their recall or had no recall at all.
 - **This was the most visible and direct effect linked statistically to the 2006/07 SHS advertising campaign. It suggests that the campaign was successful in conveying the message that opening a window is not an effective way to control second-hand smoke.**

5.9 CONCERNS ABOUT SHS

This section examines respondent feedback about their SHS concerns, the health risks they associate with SHS, and some key beliefs about the dangers of breathing in second-hand smoke.

All results are percentages of post-survey respondents, unless otherwise noted.

*Further details can be found in **Tables 21-24** (Summary Tables section).*

DISCUSSED SHS WITH OTHERS

- **A clear majority of respondents (68%) said that over the past three months they discussed the topic of second-hand smoke with other people, including family members.**
 - 44% said it was with their children;
 - 45% said it was with another adult in their family; and,
 - 40% said it was with people other than family members.
- The incidence of a discussion on second-hand smoke during the campaign increased significantly, from 62% before to 68% after the campaign. However, it could not be statistically linked with the SHS TV ad.
- Further details can be found in **Table 21** (Summary Tables section).

BELIEFS ABOUT THE DANGERS OF SHS

- **89% of respondents believed that the health of non-smokers can be damaged by other people's tobacco smoke.³⁸**
 - This belief did not vary during the campaign (from 90% before to 89% after the campaign) and was shared equally by those exposed and those not exposed to the SHS TV ad.
- However, the 'seriousness' of the damage that second-hand smoke can do to non-smokers was not shared by a sizeable number.
 - **40% thought that the dangers of breathing in other people's tobacco smoke are exaggerated.**

³⁸ *In the 2004 survey (POR-03-102), an almost equal number (86%) thought that "exposure to SHS is at least moderately hazardous to health".*

- Most likely to share this belief were a majority of respondents from Quebec (55%) and males (48%).
- The belief that the dangers of second-hand smoke are or are not exaggerated remained the same during the campaign, among those exposed to the TV ad, but among those without proven recall of the TV ad, fewer believed the dangers were exaggerated, after the campaign. Although significant, this link with the SHS advertising cannot be attributed to the campaign. It could simply be caused by the survey process itself (treatment effect because of the focus on second-hand smoke).
- This finding suggests that behaviours aimed at controlling the presence or amount of second-hand smoke in the homes of smoking parents are not influenced by the general perception that SHS is harmful, but by the perceived seriousness of its harmful effects. This assumption is supported by the findings shown in the next table, which compares key beliefs about the harmfulness of second-hand smoke between smoke-free homes, homes with restrictions, and homes without any smoking restrictions.

PERCEPTION OF SHS HARMFULNESS BY PRESENCE OF SMOKING RESTRICTIONS

<i>% who strongly or somewhat agree with the statements based on total post-survey sample</i>	Total (583) %	Totally smoke-free homes (326) %	Homes with restrictions (193) %	No smoking restrictions (64) %
▪ Believe that the health of non-smokers can be damaged by other people's tobacco smoke	89	94	83	78
▪ Think that the dangers of breathing in other people's tobacco smoke are exaggerated	40	28	56	60

- There were no changes related to these beliefs pre- and post-campaign, and no statistical link with proven aided TV ad recall.
- Further details can be found in **Table 22** (Summary Tables section).

HEALTH RISKS ASSOCIATED WITH SHS

- When asked in an open-ended manner to cite the risks or dangers of breathing in second-hand smoke, **respondents pointed most often to cancer (54%) and respiratory problems or infections (55%), almost equally.**
 - 18% mentioned that these risks were the same as for 'first-hand' smoke;
 - Only 10% mentioned the risks of heart disease; and,
 - 13% had no idea of risks associated with passive smoking.

-
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- Only comments related to respiratory problems and the perception that the risks of second-hand smoke were the same as those for first-hand smoke changed substantially since the beginning of the campaign.
 - Respiratory problems – mentions increased from 49% before to 55% after the campaign.
 - Same risks as first-hand smoking – mentions increased from 12% to 18%.
 - There was statistical evidence of a direct link with the SHS TV ad for respiratory problems only.
 - Further details can be found in **Table 23** (Summary Tables section).

OVERALL CONCERN ABOUT THE DANGERS OF SHS

- At the end of the interview, smoking parents were asked about the extent to which they were concerned about the dangers of second-hand smoke. It turned out that most (70%) said that they were at least somewhat concerned but **less than half (43%) were very concerned with the health risks associated with second-hand smoke in the home.**
 - The least likely to be 'very' concerned were respondents from Quebec (35% vs. 43% on average) and the most likely were those living with a family member having respiratory problems (50%).
- However, consistent with the number who thought these dangers were exaggerated (40%), a sizeable number (28%) were not very or not at all concerned.
- Since the campaign began, no significant variation was observed in this overall level of concern. In addition, there was no statistical evidence of a direct link with the SHS TV ad.
- Further details can be found in **Table 24** (Summary Tables section).

EFFECTS OF SHS ADVERTISING

- There was only one significant correlation with SHS advertising: knowledge (unprompted) that **respiratory problems could be caused by passive smoking increased substantially among those who could prove they saw the TV ad.**



6. SUMMARY TABLES

LIST OF TABLES

TABLE 1	CHARACTERISTICS OF NON-RESPONDENTS TO THE POST-SURVEY	59
TABLE 2	CHARACTERISTICS OF THE UNWEIGHTED AND WEIGHTED POST-SURVEY SAMPLE.....	61
TABLE 3	FREE <u>ADVERTISING</u> RECALL OF TOBACCO-RELATED ISSUES	63
TABLE 4	AIDED RECALL OF TV AD.....	65
TABLE 5	AIDED RECALL OF RADIO ADS	66
TABLE 6	AIDED RECALL OF SHS ADVERTISING CAMPAIGN.....	67
TABLE 7	AIDED SHS ADVERTISING RECALL BY DEMOGRAPHIC AND SMOKING-RELATED CHARACTERISTICS.....	68
TABLE 8	CALL TO ACTION	70
TABLE 9	RESTRICTIONS OR BAN ON SMOKING IN THE HOME – PARTS OF HOME WHERE SMOKING IS NOT PERMITTED –.....	72
TABLE 10	RESTRICTIONS OR BAN ON SMOKING IN THE HOME – SITUATIONS WHEN SMOKING IS NOT PERMITTED –	73
TABLE 11	RESTRICTIONS OR BAN ON SMOKING IN THE HOME – WHERE AND WHEN SMOKING IN THE HOME IS RESTRICTED COMBINED –.....	74
TABLE 12	<u>UNPROMPTED</u> REASONS TO RESTRICT OR BAN SMOKING IN THE HOME	75
TABLE 13	RESTRICTIONS OR BAN ON SMOKING IN THE HOME <u>BECAUSE</u> OF CHILDREN – PARTS OF HOME AND SITUATIONS COMBINED –.....	76
TABLE 14	<u>PROMPTED</u> REASONS TO RESTRICT OR BAN SMOKING IN THE HOME	77
TABLE 15	CHILDREN’S EXPOSURE TO SHS IN THE HOME.....	79
TABLE 16	CHILDREN’S EXPOSURE TO SHS IN THE CAR	80
TABLE 17	CHILDREN’S EXPOSURE TO SHS – IN THE HOME AND IN THE CAR COMBINED –.....	81
TABLE 18	RULES IMPLEMENTED OVER THE PAST 3 MONTHS TO RESTRICT SMOKING IN THE HOME	82
TABLE 19	METHODS IMPLEMENTED OVER THE PAST 3 MONTHS TO REDUCE THE AMOUNT OF SHS IN THE HOME.....	84
TABLE 20	PERCEIVED EFFECTIVENESS OF VARIOUS METHODS TO REDUCE THE AMOUNT OF SHS IN THE HOME.....	85
TABLE 21	DISCUSSION ABOUT SHS IN THE HOME OVER THE PAST 3 MONTHS.....	87
TABLE 22	BELIEFS ABOUT THE DANGERS OF SHS.....	88
TABLE 23	<u>UNPROMPTED</u> KNOWLEDGE ABOUT THE DANGERS OF SHS	89
TABLE 24	OVERALL LEVEL OF CONCERN ABOUT THE DANGERS OF SHS	90

TABLE 1 CHARACTERISTICS OF NON-RESPONDENTS TO THE POST-SURVEY

PARENTS OR GUARDIANS AGED 20-54	Respondents in Pre-survey N1	Non-respondents in Post-survey N2	Retention rate (N1-N2)/N1 x 100
Smoking status			
▪ Smoker	777	215	72
> Everyday	686	191	72
> Not everyday	91	24	74
▪ Non-smoker living with a smoking spouse / husband	29	8	72
Presence of non-smoking parent/guardian	33	9	73
Age			
▪ 20-34 years	219	73	67
▪ 35-49 years	508	127	75
▪ 50-54 years	79	23	71
Gender			
▪ Male	312	86	72
▪ Female	494	137	72
Mother tongue			
▪ English	518	145	72
▪ French	217	49	77
▪ Other	75	29	61
Language of interview			
▪ English	596	176	70
▪ French	210	47	78
Education			
▪ High school or less	430	129	70
▪ College or some university	275	67	76
▪ University completed	92	21	77
▪ Dk/Na	9	6	33
Number of children (< 18 years)			
▪ One	353	108	69
▪ Two or more	453	115	75
Presence of smoking children	64	17	73

TABLE 1 CHARACTERISTICS OF NON-RESPONDENTS IN THE POST-SURVEY
(CONTINUED)

PARENTS OR GUARDIANS AGED 20-54	Respondents in Pre-survey N1	Non-respondents in Post-survey N2	Retention rate (N1-N2)/N1 x 100
Employment status			
▪ Working	607	162	73
▪ Not working	191	56	71
▪ Dk/Na	8	5	38
Household income			
▪ Less than \$60 k	424	116	73
▪ \$60 k or more	266	64	76
▪ Dk/Na	116	43	63
Aboriginal descent	64	23	64
H/H member with respiratory problems	221	63	71
Region			
▪ Atlantic	132	35	73
▪ Quebec	208	50	76
▪ Ontario	234	66	72
▪ Prairies	123	37	70
▪ B.C.	101	32	68
▪ NWT / NT / YK	8	3	63
TOTAL	806	223	72

Note: Recent Health Canada data (POR-03-102) suggests that there are significant differences in behaviour, and to a lesser degree in attitudes, among smoking parents based on demographic and smoking-related characteristics. Parents of children who are at greater risk include regular (everyday) smokers, parents who are not the only smoker in the home, less educated parents, lower-income parents, Francophones/Quebecers and parents of older children.

TABLE 2

**CHARACTERISTICS OF THE UNWEIGHTED
AND WEIGHTED POST-SURVEY SAMPLE**

PARENTS OR GUARDIANS AGED 20-54	Number of survey respondents (N)	Unweighted %	Weighted %
Smoking status			
▪ Smoker	562	96	97
> Everyday	495	85	85
> Not everyday	67	11	12
▪ Non-smoker living with a smoking spouse / husband	21	4	3
Presence of non-smoking parent/guardian	24	4	4
Age			
▪ 20-34 years	146	25	24
▪ 35-49 years	381	65	66
▪ 50-54 years	56	10	10
▪ Average (years)		39.8	39.8
Gender			
▪ Male	226	39	49
▪ Female	357	61	51
Mother tongue			
▪ English	373	64	62
▪ French	168	29	30
▪ Other	46	8	9
Language of interview			
▪ English	420	72	71
▪ French	163	28	29
Education			
▪ High school or less	301	52	52
▪ College or some university	208	36	35
▪ University completed	71	12	12
▪ Dk/Na	3	1	1
Number of children (< 18 years)			
▪ One	245	42	42
▪ Two or more	338	58	58
Presence of smoking children	47	8	8

Note: Weighting based on smoking population figures (region, gender) reported in the 2005 CTUMS. Percentage of all respondents totals 100% when columns are read vertically. Some totals do not add to 100% due to rounding.

TABLE 2

**CHARACTERISTICS OF THE UNWEIGHTED AND
WEIGHTED POST-SURVEY SAMPLE**
(CONTINUED)

PARENTS OR GUARDIANS AGED 20-54	Number of survey respondents (N)	Unweighted %	Weighted %
Employment status			
▪ Working	445	76	78
▪ Not working	135	23	21
▪ Dk/Na	3	1	1
Household income			
▪ Less than \$60 k	308	53	49
▪ \$60 k or more	202	35	38
▪ Dk/Na	73	13	13
Aboriginal descent	41	7	7
H/H member with respiratory problems	158	27	27
Region			
▪ Atlantic	97	17	9
▪ Quebec	158	27	28
▪ Ontario	168	29	33
▪ Prairies	86	15	19
▪ B.C.	69	12	10
▪ NWT / NT / YK	5	1	1
TOTAL	583	100	100
Time spent watching TV in last 7 days			
▪ None	13	2	2
▪ 1-4 hours	175	30	29
▪ 5-10 hours	147	25	25
▪ 11 hours	245	42	43
▪ DK/Na	3	1	1
▪ Average		12.4	12.4
Time spent listening to radio last 7 days			
▪ None	74	13	11
▪ 1-4 hours	247	42	43
▪ 5-10 hours	85	15	16
▪ 11 hours	173	30	29
▪ DK/Na	4	1	1
▪ Average		12.5	12.5

Note: Weighting based on smoking population figures (region, gender) reported in the 2005 CTUMS. Percentage of all respondents totals 100% when columns are read vertically. Some totals do not add to 100% due to rounding.

TABLE 3

FREE ADVERTISING RECALL OF TOBACCO-RELATED ISSUES

<i>All figures based on total post-survey sample</i>	TOTAL (583)			AFTER CAMPAIGN				
	Before campaign %	After campaign %	Difference %	BC (74) %	Prairies (86) %	Ontario (168) %	Quebec (158) %	Atlantic (97) %
<i>Q1 Over the past weeks or so, have you seen, heard or read any <u>advertising</u> about smoking, second-hand-smoke or other tobacco-related issues?</i>								
▪ Yes / maybe	73	80	+7	76	75	78	85	78
▪ No	27	20	-7	24	25	21	15	22
<i>Q2 Please tell me everything you can remember about this (these) ads. What pictures or images come to mind? (Probe) Anything else?</i>								
Current SHS TV ad								
▪ Woman / smoke / teddy bear	4	34	+30	39	43	39	22	35
Current SHS Radio ad								
▪ Family in a car: parents are smoking, children are breathing in the smoke	NA	3	NA	1	2	4	5	4
Current SHS TV or Radio ad								
▪ Publications addressed to adolescents / teens about SHS	9	9	0	3	2	7	18	4
▪ About children	13	9	-4	4	5	6	18	9
▪ Effects on our health (cancer, lung diseases, death)	10	6	-4	12	3	6	5	4
▪ Image on cigarette packs	18	8	-10	7	9	10	5	5
▪ Publications on the danger of SHS (dangers for smokers, also)	13	9	-4	7	12	9	7	7
▪ Other	13	16	+3	11	15	13	23	13
▪ Dk/Na / No free recall	44	31	-13	34	38	31	26	36

 Difference significant at $P < 0.05$

TABLE 3

FREE ADVERTISING RECALL OF TOBACCO-RELATED ISSUES
(CONTINUED)

<i>All figures based on total post-survey sample</i>	TOTAL (583)			AFTER CAMPAIGN				
	Before campaign %	After campaign %	Difference %	BC (74) %	Prairies (86) %	Ontario (168) %	Quebec (158) %	Atlantic (97) %
<i>Q3 Where did you notice this (these) advertisement(s)?</i>								
▪ Ethnic paper	0	0	0	0	0	0	0	0
▪ Fair/exhibition	<1	0	0	0	0	0	0	0
▪ Internet/website banner	2	1	-1	2	1	0	2	0
▪ Local weeklies	<1	0	0	0	0	0	0	0
▪ Magazines	3	2	-1	1	3	3	1	0
▪ Newspaper	7	4	3	2	0	5	7	1
▪ Outdoor billboards	2	3	+1	0	1	1	7	0
▪ Pamphlet/brochure in the mail	1	1	0	2	0	<1	1	0
▪ Pharmacies	1	<1	0	0	0	<1	0	0
▪ Public transit	<1	1	0	1	0	1	1	0
▪ Radio	8	12	+4	6	7	14	17	7
▪ Television	47	70	+23	63	72	70	70	71
▪ Word-of-mouth	<1	0	0	0	0	0	0	0
▪ Cigarette packs	27	16	-11	20	22	16	11	14
▪ Poster/signs in public areas	7	8	+1	8	7	8	10	5
▪ Dk/Na	3	1	-2	0	0	0	2	0
▪ Did not recall any advertising	27	20	-7	24	25	21	15	22

 Difference significant at $P < 0.05$

TABLE 4

AIDED RECALL OF TV AD

	TOTAL (583)			AFTER CAMPAIGN				
	Before campaign %	After campaign %	Difference %	BC (74) %	Prairies (86) %	Ontario (168) %	Quebec (158) %	Atlantic (97) %
<i>Q4_TV Do you remember seeing a television ad over the past few weeks or so? (READ - Interviewer: pronounce each word clearly / speak slowly) Do you recall seeing this television ad?</i>								
Where a woman is smoking near a window? Some of the smoke that she blows out the window makes its way inside the room and makes its way around the house with hand-like shapes – on a lamp, a couch, on grapes and on a teddy-bear. A little girl enters the room, picks up the teddy bear and leaves.								
▪ Yes / Maybe	29	90	+61	94	90	92	85	92
▪ No / Dk/Na	71	10	-61	6	10	8	15	8
<i>Q4a1 Can you recall if the woman near the window was standing up, sitting down, or are you not sure?</i>								
▪ Correct answer	NA	61	NA	64	62	68	50	64
<i>Q4a2 Can you recall if the teddy bear was sitting alone on a chair, with other toys in a box, or are you not sure?</i>								
▪ Correct answer	NA	61	NA	72	65	69	48	57
▪ Proven aided recall of TV ad*	NA	76	NA	86	77	82	63	80

* At least one of the two key advertising clues recalled correctly.

 Difference significant at P < 0.05

TABLE 5

AIDED RECALL OF RADIO ADS

	TOTAL (583)			AFTER CAMPAIGN				
	Before campaign %	After campaign %	Difference %	BC (74) %	Prairies (86) %	Ontario (168) %	Quebec (158) %	Atlantic (97) %
<i>Q4_Radio Do you remember hearing a radio ad over the past few weeks or so? (READ - Interviewer: pronounce each word clearly / speak slowly) Do you recall hearing this radio ad?</i>								
a) With children in the car who don't speak up about difficulties breathing and having sore eyes from cigarette smoke. It also discusses some illnesses that you can get from second-hand smoke.								
▪ Yes / Maybe	NA	23	NA	14	18	24	34	12
▪ No	NA	76	NA	86	82	76	66	89
▪ Dk/Na	NA	<1	NA	0	0	0	1	0
b) Which talks about some steps parents take to ensure their children are safe in the car. They buckle seat belts and drive slowly. They then light up a cigarette exposing their children to second-hand smoke.								
▪ Yes / Maybe	NA	31	NA	20	34	38	31	15
▪ No	NA	69	NA	81	66	62	68	85
▪ Dk/Na	NA	0	NA	0	0	0	0	0
▪ Aided recall of at least one radio ad	NA	40	NA	24	36	46	47	23
▪ Aided recall of both radio ads	NA	15	NA	9	17	16	18	3
▪ No aided recall of SHS radio advertising	NA	60	NA	76	64	54	53	77

TABLE 6

AIDED RECALL OF SHS ADVERTISING CAMPAIGN

	TOTAL (583)			AFTER CAMPAIGN				
	Before campaign	After campaign	Difference	BC	Prairies	Ontario	Quebec	Atlantic
	%	%	%	(74) %	(86) %	(168) %	(158) %	(97) %

*Q4_TV Do you remember seeing a television ad over the past few weeks or so? (READ - Interviewer: pronounce each word clearly / speak slowly) Do you recall seeing this television ad?**

*Q4_Radio Do you remember hearing a radio ad over the past few weeks or so? (READ - Interviewer: pronounce each word clearly / speak slowly) Do you recall hearing this radio ad? ***

	NA	53	NA	70	56	49	44	70
▪ Only TV ad	NA	3	NA	0	2	3	6	1
▪ Only radio ads	NA	37	NA	24	34	43	41	22
▪ Both TV and radio ads	NA	7	NA	6	8	5	9	7
▪ No aided recall of SHS	NA	93	NA	94	92	95	91	93
▪ TV or Radio ads (overall campaign)	NA	76	NA	86	77	82	63	80
▪ Only TV ad proven recall	NA	85	NA	87	82	91	81	81
▪ TV (proven recall) or radio ads (overall campaign)								

* *Where a woman is smoking near a window? Some of the smoke that she blows out the window makes its way inside the room and makes its way around the house with hand-like shapes – on a lamp, a couch, on grapes and on a teddy-bear. A little girl enters the room, picks up the teddy bear and leaves.*

** a) *with children in the car who don't speak up about difficulties breathing and having sore eyes from cigarette smoke. It also discusses some illnesses that you can get from second-hand smoke.*
 b) *which talks about some steps parents take to ensure their children are safe in the car. They buckle seat belts and drive slowly. They then light up a cigarette exposing their children to second-hand smoke.*

TABLE 7 AIDED SHS ADVERTISING RECALL BY DEMOGRAPHIC AND SMOKING-RELATED CHARACTERISTICS

<i>All figures based on total post-survey sample (N = 583)</i>	AFTER CAMPAIGN AIDED AD RECALL			
	TV* %	Radio** %	Total campaign*** %	TV proven recall %
Total	90	40	93	76
Smoking status				
▪ Smoker	90	40	93	76
> Everyday	91	41	93	76
> Not everyday	84	34	91	74
▪ Non-smoker living with a smoking spouse / husband	88	46	96	81
Presence of non-smoking parent/guardian	98	54	98	87
Age				
▪ 20-34 years	90	40	93	76
▪ 35-49 years	90	41	93	74
▪ 50-54 years	89	34	91	85
▪ Average (years)	39.7	39.4	39.7	39.9
Gender				
▪ Male	87	38	92	71
▪ Female	92	41	94	81
Mother tongue				
▪ English	93	38	95	82
▪ French	87	45	93	68
▪ Other	72	35	76	62
Language of interview				
▪ English	92	37	94	81
▪ French	86	47	92	64
Number of children (< 18 years)				
▪ One	91	38	96	77
▪ Two or more	89	41	91	75
Presence of smoking children	94	38	99	84

* **Q4_TV** Do you remember seeing a television ad over the past few weeks or so? (READ DESCRIPTION - Interviewer: pronounce each word clearly / speak slowly) Do you recall seeing this television ad?

** **Q4_Radio** Do you remember hearing a radio ad over the past few weeks or so? (READ DESCRIPTION - Interviewer: pronounce each word clearly / speak slowly) Do you recall hearing this radio ad? Aided recall of radio advertising was positive if at least one of the two radio ads was recalled.

*** Combined recall of TV and/or radio advertising.

Note: Do not cumulate column down. Figures read as follow (for TV): 90% of smoking parents in the sample acknowledged having seen the TV ad after it was described to them (aided recall).

 Difference significant at $P < 0.05$

TABLE 7

**AIDED AD RECALL BY DEMOGRAPHIC AND
SMOKING-RELATED CHARACTERISTICS**
(CONTINUED)

<i>All figures based on total post-survey sample (N = 583)</i>	AFTER CAMPAIGN AIDED AD RECALL			
	TV* (527) %	Radio** (228) %	Total campaign*** (544) %	TV proven recall (452) %
Education				
▪ High school or less	91	36	93	77
▪ College or some university	92	44	95	79
▪ University completed	83	43	87	66
▪ Dk/Na	35	65	100	35
Employment status				
▪ Working	90	42	94	75
▪ Not working	90	30	91	78
▪ Dk/Na	61	74	100	61
Household income				
▪ Less than \$60 k	88	36	91	74
▪ \$60 k or more	92	45	95	79
▪ Dk/Na	89	42	96	75
Aboriginal descent	91	29	94	80
H/H member with respiratory problems	95	42	97	77
Region				
▪ Atlantic	92	23	93	80
▪ Quebec	85	47	91	63
▪ Ontario	92	46	95	82
▪ Prairies	90	36	92	77
▪ B.C.	94	24	94	86
▪ NWT / NT / YK	100	18	100	82
TOTAL	100	100	100	100

* **Q4_TV** Do you remember seeing a television ad over the past few weeks or so? (READ DESCRIPTION - Interviewer: pronounce each word clearly / speak slowly) Do you recall seeing this television ad?

** **Q4_Radio** Do you remember hearing a radio ad over the past few weeks or so? (READ DESCRIPTION - Interviewer: pronounce each word clearly / speak slowly) Do you recall hearing this radio ad?
Aided recall of radio advertising is positive if at least one of the two radio ads was recalled.

*** Combined recall of TV and/or radio advertising.

Note: Do not cumulate column down. Figures read as follow (for TV): 91% of those at the high school or less educational level acknowledged having seen the TV ad after it was described to them (aided recall).

Difference significant at $P < 0.05$

TABLE 8

CALL TO ACTION

Among those who claimed to have noticed the SHS advertising campaign (TV and/or radio)	TOTAL After campaign (544) %	AFTER CAMPAIGN				
		BC (70) %	Prairies (78) %	Ontario (160) %	Quebec (145) %	Atlantic (91) %
<i>Q22 You said previously that you noticed some ads that I described to you. Did you do anything as a result of seeing/hearing this (these) ad(s)?</i>						
▪ Yes	22	19	22	17	29	21
▪ Maybe	1	2	3	0	1	0
▪ No	77	78	75	81	70	79
▪ Dk/Na	<1	0	0	1	0	0
<i>Q23 What did you do? Anything else? [Probe. Open-ended. Accept up to three responses].</i>						
▪ Thinking about stop smoking/smoking less	10	9	11	5	18	6
▪ Less/not smoking inside car	7	4	7	8	6	9
▪ Stop smoking near a fan or a window	2	1	3	1	1	1
▪ Convince people around me not to smoke	4	11	5	2	3	5
▪ More attention with regard to children	2	1	2	1	3	1
▪ Other	2	0	2	2	3	<1
▪ Dk/Na	<1	0	1	1	0	0
▪ Did not see anything else	77	78	75	83	70	79

N.B. Figures are based on respondents who claimed to have noticed the SHS advertising (TV and/or radio).

TABLE 8

CALL TO ACTION
(CONTINUED)

<i>Among those who claimed to have noticed the SHS advertising campaign (TV and/or radio)</i>	TOTAL After campaign (544) %	AFTER CAMPAIGN				
		BC (70) %	Prairies (78) %	Ontario (160) %	Quebec (145) %	Atlantic (91) %
<i>Q24 Do you intend to do anything as a result of seeing/hearing this (these) ad(s)?</i>						
▪ Yes	34	27	27	30	47	38
▪ Maybe	4	2	4	4	5	3
▪ No	60	71	67	65	48	57
▪ Dk/Na	1	0	2	1	1	1
<i>Q25 What do you intend to do? Anything else? [Probe. Open-ended. Accept up to three responses].</i>						
▪ Thinking about stop smoking/smoking less	29	22	26	23	42	31
▪ Less/not smoking inside car	6	6	6	7	7	4
▪ Stop smoking near a fan or a window	<1	0	0	0	1	0
▪ Convince people around me not to smoke	2	2	2	2	1	3
▪ More attention with regard to children	2	0	0	2	3	3
▪ Other	1	1	0	1	0	4
▪ Dk/Na	<1	0	0	1	0	0
▪ Do not intend to do anything else	62	71	69	66	49	59

N.B. Figures are based on respondents who claimed to have noticed the SHS advertising (TV and/or radio).

TABLE 9

**RESTRICTIONS OR BAN ON SMOKING IN THE HOME
– PARTS OF HOME WHERE SMOKING IS NOT PERMITTED –**

Q5 Are there any parts of your home where smoking is not permitted? If so, where? **Probe** - Anywhere else?

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign %	After campaign %	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
1. No restrictions, smoking allowed anywhere inside home	14	15	+1	-1	1	+2
2. Yes, not on main floor	3	4	+1	-1	-3	-2
3. Yes, not in bedrooms	18	17	-1	0	5	+5
4. Yes, not in the kitchen/eating area	7	3	-4	4	4	0
5. Yes, smoke only in basement	4	3	-1	2	0	-2
6. Yes, smoke only in bathroom	2	3	+1	0	-1	-1
7. Yes, smoke only in garage (connected or not to the house)	1	2	+1	-1	-2	-1
8. Yes, smoke only near an open window	1	1	0	0	-1	-1
9. Yes, smoking not permitted anywhere inside home	55	56	+1	0	-3	-3
10. Yes, other restrictions	1	8	+7	-8	-11	-3
11. Dk/Na	0	0	0	0	-1	-1
	100%	100%		100%	100%	
▪ Homes with smoking allowed anywhere	14	15	+1	-1	1	+2
▪ Homes with some parts where smoking is restricted	30	29	-1	1	3	+2
▪ Totally smoke-free homes	55	56	+1	0	-3	-3

Do not cumulate percentages because of multiple answers.

Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 10

**RESTRICTIONS OR BAN ON SMOKING IN THE HOME
– SITUATIONS WHEN SMOKING IS NOT PERMITTED –**

Q6 Are there any *situations or moments* when smoking is not permitted *inside* your home? If so, *when?* **Probe** - Anything else?

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign %	After campaign %	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
1. No restrictions, smoking allowed anytime inside home	23	22	-1	2	-1	-3
2. Yes, when children are home	5	5	0	0	2	+2
3. Yes, when children are near	3	5	+2	-2	-1	+1
4. Yes, when children are awake	<1	<1	0	0	-1	-1
5. Yes, when company is over	9	8	-1	-1	5	+6
6. Yes, when partner/spouse is home	0	0	0	0	0	0
7. Yes, other restrictions	5	7	+2	-2	-2	0
8. Dk/Na	2	2	0	0	-1	-1
Yes – smoking not permitted anywhere inside home*	55	56	+1	0	-3	-3

* Question 6 was not asked of those who claimed that their home was totally smoke-free. Do not cumulate percentages because of multiple answers.

 Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 11

**RESTRICTIONS OR BAN ON SMOKING IN THE HOME
– WHERE AND WHEN SMOKING IN THE HOME IS RESTRICTED COMBINED –**

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign 100%	After campaign 100%	Difference 100%	Proven (452) %	Aided recall not proven (131) %	Differential %
Q5 Are there any <u>parts</u> of your home where smoking is not permitted? If so, <u>where</u> ? Probe - Anywhere else?						
Q6 Are there any <u>situations</u> or <u>moments</u> when smoking is not permitted <u>inside</u> your home? If so, <u>when</u> ? Probe - Anything else?						
▪ Homes with smoking allowed anywhere, anytime	10	10	0	0	1	+1
▪ Homes with restrictions	35	34	-1	0	3	+3
▪ Totally smoke-free homes	55	56	+1	0	-3	-3
Q8 Including all family members (and yourself) and regular visitors, how many people smoke <u>inside</u> your home every day or almost every day? (Includes any tobacco products)						
▪ None	60	59	-1	2	1	-1
▪ One	19	21	+2	-2	-3	-1
▪ More than one	21	19	-2	1	1	0
▪ Dk/Na	<1	1	0	-1	0	+1

Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 12

UNPROMPTED REASONS TO RESTRICT OR BAN SMOKING IN THE HOME

Q7 What are your reasons for putting restrictions on smoking inside your home? Any other reasons?

<i>Figures based on those who restrict or ban smoking in the home</i>	PARENTS WHO RESTRICT/ BAN SMOKING IN THE HOME (525)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign %	After campaign %	Difference %	Proven (408) %	Aided recall not proven (117) %	Differential %
1. Children – related reasons	69	62	-7	7	7	0
2. Smell / dirt	35	39	+4	-3	-6	-3
3. Spouse – related reasons	9	7	-2	1	6	+5
4. Requirement of rental/lease/sublet	1	0	-1	0	1	+1
5. Second-hand smoke is harmful	12	21	+9	-8	-12	-4
6. Fire hazard	5	3	-2	1	2	+1
7. Courtesy towards non-smokers, visitors	11	26	+15	-15	-16	-1
8. Helps me stop smoking or smoke less	<1	2	+2	-1	-1	0
9. Quality of the air/too much smoke	2	6	+4	-3	-3	0
10. Other	0	<1	0	0	0	0
11. Dk/Na	4	2	-2	2	0	-2

All figures based on those who said they restrict smoking totally or only in some way. Do not cumulate percentages because of multiple answers. Comparison of answers to the same unprompted question asked on two different occasions should always be interpreted very carefully because depth of response cannot be precisely controlled and may result in a wide 'unexplained' variance.

 Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 13

**RESTRICTIONS OR BAN ON SMOKING IN THE HOME BECAUSE OF CHILDREN
– PARTS OF HOME AND SITUATIONS COMBINED –**

Q5 Are there any parts of your home where smoking is not permitted? If so, where? **Probe** - Anywhere else?

Q6 Are there any situations or moments when smoking is not permitted inside your home? If so, when? **Probe** - Anything else?

Q7 What are your reasons for putting restrictions on smoking inside your home? Any other reasons?

All figures based on total post-survey sample	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign 100%	After campaign 100%	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
▪ Totally smoke-free homes because of children	43	38	-5	6	5	-1
▪ Totally smoke-free homes not because of children	12	18	+6	-6	-8	-2
▪ Smoking restrictions because of children	20	21	+1	-1	0	+1
▪ Smoking restrictions not because of children	14	13	-1	0	4	+4
▪ Homes with smoking allowed anywhere, anytime	10	10	0	0	1	+1

 Difference significant at P < 0.05

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 14

PROMPTED REASONS TO RESTRICT OR BAN SMOKING IN THE HOME

Q14 People may restrict smoking in their home for a number of reasons. On a 7-point scale, where 1 means not at all important, and 7 means extremely important, please tell me how important the following factors are in your decision to restrict smoking in your home... (Read / Rotate list) How about?

<i>Figures based on those who restrict or ban smoking in the home</i>	PARENTS WHO RESTRICT/ BAN SMOKING IN THE HOME (525)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign %	After campaign %	Difference %	Proven (408) %	Aided recall not proven (117) %	Differential %
1. Allergies of a family member						
▪ Extremely important ¹	46	40	-6	8	0	-8
▪ Not at all important ²	27	18	-9	9	9	0
▪ Mean score ³	4.7	5.0	+0.3	-0.3	-0.4	-0.1
2. The effect of second-hand smoke on your own health						
▪ Extremely important	45	40	-5	5	7	+2
▪ Not at all important	25	29	+4	-7	6	+13
▪ Mean score	4.6	4.4	-0.2	0.3	0	-0.3
3. The effect of second-hand smoke on the health of your children						
▪ Extremely important	88	88	0	0	0	0
▪ Not at all important	3	3	0	-1	2	+3
▪ Mean score	6.5	6.5	0	0	0	0
4. The smell and dirt caused by cigarette smoke						
▪ Extremely important	69	67	-2	0	9	+9
▪ Not at all important	8	6	-2	3	2	-1
▪ Mean score	5.9	5.9	0	-0.1	0.1	+0.2

All figures based on those who said they restrict smoking totally or only in some way.

¹ Top two box rating (6 and 7) on 7-point scale. "Don't know" and "Not Applicable" included from the calculations.

² Bottom two box rating (1 and 2) on 7-point scale. "Don't know" and "Not Applicable" included from the calculations.

³ Mean score on the 7-point scale. "Don't know" and "Not Applicable" excluded from the calculations.

■ Difference significant at P < 0.05

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 14

PROMPTED REASONS TO RESTRICT OR BAN SMOKING IN THE HOME

(CONTINUED)

<i>Figures based on those who restrict or ban smoking in the home</i>	PARENTS WHO RESTRICT/ BAN SMOKING IN THE HOME (525)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign %	After campaign %	Difference %	Proven (408) %	Aided recall not proven (117) %	Differential %
5. So that your children won't be influenced by others to start smoking						
▪ Extremely important ¹	68	66	-2	-1	8	+9
▪ Not at all important ²	10	10	0	2	-3	-5
▪ Mean score ³	5.8	5.8	0	0	0.4	+0.4
6. Because your children asked						
▪ Extremely important	49	41	-8	7	10	+3
▪ Not at all important	20	15	-5	7	3	-4
▪ Mean score	5.0	5.1	+0.1	-0.2	0.1	+0.3
7. Because an adult family member asked						
▪ Extremely important	43	38	-5	4	9	+5
▪ Not at all important	25	18	-7	7	8	+1
▪ Mean score	4.7	4.9	+0.2	-0.2	-0.2	0

All figures based on those who said they restrict smoking totally or only in some way.

¹ Top two box rating (6 and 7) on 7-point scale. "Don't know" and "Not Applicable" excluded from the calculations.

² Bottom two box rating (1 and 2) on 7-point scale. "Don't know" and "Not Applicable" excluded from the calculations.

³ Mean score on the 7-point scale. "Don't know" and "Not Applicable" excluded from the calculations.

 Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 15

CHILDREN'S EXPOSURE TO SHS IN THE HOME

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign 100%	After campaign 100%	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
<i>Q9 How often do you think your children are in a situation where they are <u>close to or around someone</u> smoking <u>inside</u> your home? Would it be...?</i>						
▪ Every day or almost every day	26	25	-1	3	-5	-8
▪ A few times a week	6	6	0	1	-1	-2
▪ About once a week	4	4	0	0	0	0
▪ About one to three times a month	6	6	0	0	1	+1
▪ Less than once a month	6	6	0	0	2	+2
▪ Never	50	52	+2	-4	2	+6
▪ Dk/Na	1	1	0	1	0	-1
<i>Q10 How often do you think your children are in a situation where they <u>are breathing</u> in second-hand smoke (other people's tobacco smoke) in your home? Would that be...?</i>						
▪ Every day or almost every day	25	24	-1	2	1	-1
▪ A few times a week	7	5	-2	3	0	-3
▪ About once a week	3	5	+2	-2	-3	-1
▪ About one to three times a month	4	5	+1	0	-2	-2
▪ Less than once a month	3	5	+2	-2	-1	+1
▪ Never	6	4	-2	3	2	-1
▪ Dk/Na	1	<1	0	0	2	+2

 Difference significant at P < 0.05

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 16

CHILDREN'S EXPOSURE TO SHS IN THE CAR

All figures based on total post-survey sample	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign 100%	After campaign 100%	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
Q11 How often do you think your children are in a situation where they are <u>inside a car</u> (yours or someone else's car) <u>with someone smoking</u> ? Would that be...?						
▪ Every day or almost every day	6	4	-2	2	4	+2
▪ A few times a week	11	10	-1	1	0	-1
▪ About once a week	11	9	-2	4	-1	-5
▪ About one to three times a month	12	11	-1	0	4	+4
▪ Less than once a month	10	15	+5	-5	-5	0
▪ Never	48	49	+1	-1	-1	0
▪ Dk/Na	2	2	0	0	-2	-2
Q12 How often do you think your children are in a situation where they are <u>breathing in second-hand smoke</u> (other people's tobacco smoke) in a <u>car</u> (yours or someone else's car)? Would that be...?						
▪ Every day or almost every day	5	4	-1	1	0	-1
▪ A few times a week	10	9	-1	1	1	0
▪ About once a week	11	8	-3	4	2	-2
▪ About one to three times a month	11	10	-1	-1	5	+6
▪ Less than once a month	9	15	+6	-5	-6	-1
▪ Never	3	2	-1	1	1	0
▪ Dk/Na	3	3	0	-1	0	+1
▪ Never	48	49	+1	-1	-1	0

■ Difference significant at P < 0.05

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 17

**CHILDREN'S EXPOSURE TO SHS
– IN THE HOME AND IN THE CAR COMBINED –**

Q9 How often do you think your children are in a situation where they are close to or around someone smoking inside your home? Would it be...?

Q11 How often do you think your children are in a situation where they are inside a car (yours or someone else's car) with someone smoking? Would that be...?

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign 100%	After campaign 100%	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
▪ In the home or the car	68	67	-1	1	4	+3
▪ Only in the home	18	17	-1	1	0	-1
▪ Only in the car	19	21	+2	-3	2	+5
▪ In the home and the car	31	29	-2	3	-4	-7
▪ Never in the home or the car	32	33	+1	-1	-4	-3

 Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.


TABLE 18

RULES IMPLEMENTED OVER THE PAST 3 MONTHS TO RESTRICT SMOKING IN THE HOME

Q13 Again, thinking about your *home*, please tell me if over the *past 3 months* you or other members of your household always, frequently, sometimes or never did the following. How about...?

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign 100%	After campaign 100%	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
1. Restrict smoking to the outdoors only						
▪ Always	56	59	+3	-2	-4	-2
▪ Frequently	9	8	-1	0	2	+2
▪ Sometimes	11	13	+2	-1	-6	-5
▪ Never	23	19	-4	2	8	+6
▪ Dk/Na	1	1	0	0	-1	-1
2. Restrict smoking in the home to one room or area only						
▪ Always	20	21	+1	-1	1	+2
▪ Frequently	6	5	-1	1	-3	-4
▪ Sometimes	9	9	0	-1	3	+4
▪ Never	57	63	+6	-6	-2	+4
▪ Dk/Na	8	2	-6	7	1	-6
3. Restrict smoking in the home when children are around						
▪ Always	42	46	+4	-4	-3	+1
▪ Frequently	9	8	-1	2	-2	-4
▪ Sometimes	13	11	-2	2	0	-2
▪ Never	29	32	+3	-5	2	+7
▪ Dk/Na	7	3	-4	5	3	-2

Note: These closed-ended questions on smoking restrictions in the home were asked after open-ended questions on smoking restrictions in parts of the home or situations when smoking is permitted in the home.

 Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 18 **RULES IMPLEMENTED OVER THE PAST 3 MONTHS TO RESTRICT SMOKING IN THE HOME**
(CONTINUED)

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign 100%	After campaign 100%	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
4. Ask friends and acquaintances not to smoke						
▪ Always	38	48	+10	-12	-5	+7
▪ Frequently	7	6	-1	1	2	+1
▪ Sometimes	10	11	+1	-2	2	+4
▪ Never	39	31	-8	9	7	-2
▪ Dk/Na	6	4	-2	4	-5	-9
5. Ask relatives not to smoke						
▪ Always	35	45	+10	-12	-6	+6
▪ Frequently	5	5	0	-1	0	+1
▪ Sometimes	8	10	+2	-2	1	+3
▪ Never	45	34	-11	11	9	-2
▪ Dk/Na	8	6	-2	3	-5	-8

Note: These closed-ended questions on smoking restrictions in the home were asked after open-ended questions on smoking restrictions in parts of the home or situations when smoking is permitted in the home.

 Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 19 METHODS IMPLEMENTED OVER THE PAST 3 MONTHS TO REDUCE THE AMOUNT OF SHS IN THE HOME

Q15 *There are different things that people might do to reduce the amount of second-hand smoke (other people's tobacco smoke) in their home or its impact on other people. Please tell me if during the past 3 months you have done any of the following to reduce the amount of second-hand smoke in your home. How about...?*

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign %	After campaign %	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
1. Using an air purifier unit in the home	19	17	-2	3	-3	-6
2. Using a fan	25	19	-6	7	5	-2
3. Opening a window	47	41	-6	8	1	-7
4. Smoking behind closed doors in another room or area	26	28	+2	-3	0	+3
5. Using a spray or other form of air freshener	27	20	-7	6	5	-1
6. Not allowing people to smoke in the house (read second-to-last)	66	71	+5	-5	-6	-1
7. Something else (read last) If yes, specify						
> Smoking outside	8	19	+11	-11	-11	0
> Smoking under the stove hood	5	7	+2	-1	-4	-3
> Lighting a candle	2	2	0	-1	-1	0
> Quitting or smoking less	3	7	+4	-5	-2	+3


 Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 20 PERCEIVED EFFECTIVENESS OF VARIOUS METHODS TO REDUCE THE AMOUNT OF SHS IN THE HOME

Q16 How effective do you think each of the following methods is in terms of reducing the amount of second-hand smoke (other people's tobacco smoke) in a home? How about...? Do you think this is very effective, moderately effective, not very effective or not at all effective?

All figures based on total post-survey sample	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign 100%	After campaign 100%	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
1. Using an air purifier unit in the home						
▪ Very effective	20	13	-7	7	6	-1
▪ Moderately effective	36	39	+3	-4	-2	+2
▪ Not very effective	18	20	+2	-4	-1	+3
▪ Not at all effective	17	22	+5	-6	-3	+3
▪ Not applicable	9	5	-4	4	-1	-5
2. Using a fan						
▪ Very effective	6	2	-4	4	2	-2
▪ Moderately effective	20	18	-2	1	6	+5
▪ Not very effective	25	22	-3	3	1	-2
▪ Not at all effective	47	56	+9	-10	-7	+3
▪ Not applicable	2	2	0	1	-2	-3
3. Opening a window						
▪ Very effective	16	6	-10	11	7	-4
▪ Moderately effective	42	37	-5	7	0	-7
▪ Not very effective	23	29	+6	-8	-1	+7
▪ Not at all effective	18	26	+8	-9	-6	+3
▪ Not applicable	1	1	0	-1	-1	0

 Difference significant at P < 0.05 (very or moderate effective vs. the rest)

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 20 PERCEIVED EFFECTIVENESS OF VARIOUS METHODS TO REDUCE THE AMOUNT OF SHS IN THE HOME
(CONTINUED)

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign 100%	After campaign 100%	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
4. Smoking behind closed doors in another room or area						
▪ Very effective	8	4	-4	3	5	+2
▪ Moderately effective	23	20	-3	3	3	0
▪ Not very effective	27	24	-3	3	4	+1
▪ Not at all effective	40	50	+10	-10	-9	+1
▪ Not applicable	2	2	0	0	-2	-2
5. Using a spray or other form of air freshener						
▪ Very effective	2	2	0	1	-1	-2
▪ Moderately effective	10	6	-4	4	4	0
▪ Not very effective	22	16	-6	5	7	+2
▪ Not at all effective	64	74	+10	-11	-8	+3
▪ Not applicable	1	2	+1	3	-2	-5
6. Not allowing people to smoke in the house						
▪ Very effective	91	93	+2	-4	-1	+3
▪ Moderately effective	3	2	-1	1	1	0
▪ Not very effective	1	1	0	0	0	0
▪ Not at all effective	4	2	-2	2	2	0
▪ Not applicable	2	2	0	1	-2	-3

■ Difference significant at $P < 0.05$ (very or moderate effective vs. the rest)

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 21

DISCUSSION ABOUT SHS IN THE HOME OVER THE PAST 3 MONTHS

Q17 *Over the past 3 months, has the topic of second-hand smoke (other people's tobacco smoke) ever come up in discussions between...?*

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign %	After campaign %	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
1. You and your children	39	44	+5	-3	-8	-5
2. You and another adult in your family	41	45	+4	-6	-2	+4
3. You and people other than family members or children	39	40	+1	-3	1	+4
You and anyone (children, other adult or anyone else)	62	68	+6	-6	-3	+3

 Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 22

BELIEFS ABOUT THE DANGERS OF SHS

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign %	After campaign %	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
<i>Q18 Do you believe that the health of non-smokers can be damaged by other people's tobacco smoke?</i>						
▪ Yes	90	89	-1	1	5	+4
<i>Q19 Do you think that the dangers of breathing in other people's tobacco smoke are exaggerated?</i>						
▪ Yes	42	40	-2	0	7	+7

 Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 23

UNPROMPTED KNOWLEDGE ABOUT THE DANGERS OF SHS

Q20 What would you say are the risks or dangers of breathing in second-hand smoke?

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign %	After campaign %	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
▪ Cancer (lung / others)	56	54	-2	2	0	-2
▪ Asthma/emphysema/bronchitis/respiratory problems	49	55	+6	-7	3	+10
▪ Allergies	9	8	-1	0	5	+5
▪ Heart disease	9	10	+1	0	-3	-3
▪ Cough	1	2	+1	-1	1	+2
▪ Long-term affects on your overall general health	5	8	+3	-1	-5	-4
▪ Same risks as for smokers	12	18	+6	-7	-5	+2
▪ Death	1	3	+2	-2	1	+3
▪ Other	0	7	+7	-8	-5	+3
▪ Dk/Na	16	13	-3	3	0	-3

Note that while unprompted responses may be more effective in determining the depth of knowledge about the dangers of SHS compared to questions that prompt, changes over time should be interpreted very carefully because the interviewing process alone could cause a large response variance. Do not cumulate percentages because of multiple answers.

 Difference significant at P < 0.05

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

TABLE 24

OVERALL LEVEL OF CONCERN ABOUT THE DANGERS OF SHS

Q21 Overall, how concerned are you with the health risks associated with second-hand smoke in your home? Would you say...?

<i>All figures based on total post-survey sample</i>	TOTAL (583)			BEFORE / AFTER DIFFERENCE BY TV AD PROVEN RECALL		
	Before campaign 100%	After campaign 100%	Difference %	Proven (452) %	Aided recall not proven (131) %	Differential %
▪ Very concerned	41	43	+2	-2	-2	0
▪ Somewhat concerned	30	27	-3	2	8	+6
▪ Not very concerned	13	12	-1	3	-6	-9
▪ Not at all concerned	16	16	0	0	1	+1
▪ Dk/Na	<1	1	0	-1	1	0

 Difference significant at $P < 0.05$

The differential is the difference of before/after differences between those who recalled the campaign and those who did not.

APPENDIX 1

QUESTIONNAIRE
(English and French versions)

SHS ADVERTISING EVALUATION POST-SURVEY WITH TARGET AUDIENCE

CRÉATEC +
Project: 574-064
February 2007
Final

POR-283-06
HC-06-10

INTRODUCTION

[Ask to speak to phase 1 respondent]

Hello, my name is _____ and I am with the Créatec research team. Last December you participated in a survey we were conducting on behalf of Health Canada about tobacco and issues related to smoking. Thank you for having agreed to be called back this March and to participate in this second wave of our study.

Again, the survey is short; it will take about 10-12 minutes of your time. Your answers will be kept strictly confidential.

Interviewer: *If during the interview the respondent says that he/she already completed the same survey, say: "We are asking many of the same questions to see how certain things or views have changed over time".*

May we now complete the survey?

- Yes available
- Call-back..... **MAKE AN APPOINTMENT**
- Refuses..... **REASSURE OR CONCLUDE**

This survey is registered with the national survey registration system (1-800-554-9996, project number 574-064).

Qa To start, please tell me how many parents or guardians between the ages of 20 and 54 smoke cigarettes in your household (manufactured or roll-your-own)?

- One..... **CONTINUE**
- Two or more
- None..... **CONCLUDE**

If the number mentioned is different from December survey, ask Qb

Qb Last December, you reported a different number (READ DEC RESPONSE). Since that time, did a change occur in the number of parents or guardians who smoke cigarettes in your household?

- Yes, a change occurred **INTERVIEWER: MAKE**
- No, December number was wrong **APPROPRIATE CORRECTIONS**
- No, current number is wrong.....

FREE ADVERTISING RECALL

Q1 Over the past weeks or so, have you seen, heard or read any advertising about smoking, second-hand-smoke or other tobacco-related issues?

- Yes
- Maybe.....
- No **SKIP TO Q4**

Q2 Please tell me everything you can remember about this (these) ads. What pictures or images come to mind? (**Probe**) Anything else? (**Open-ended. Accept all responses**)

Q3 Where did you notice this (these) advertisement(s)? (**Do not read. Probe – anywhere else? Accept all responses**)

- Ethnic paper
- Fair/Exhibition.....
- Internet/Website banner.....
- Local weeklies
- Magazines
- Newspaper
- Outdoor billboards
- Pamphlet/brochure in the mail
- Pharmacies
- Public transit.....
- Radio
- Television
- Word of mouth.....
- Other (**specify**).....
- Dk/Na SINGLE PUNCH

AIDED AD RECALL

ROTATE TV and RADIO ADVERTISING

TV

Q4_TV Do you remember seeing a television ad over the past few weeks or so? (READ - *Interviewer: pronounce each word clearly / speak slowly*) Do you recall seeing this television ad?

DESCRIPTION	Yes	Maybe	No	Dk/Na
a) Where a woman is smoking near a window? Some of the smoke that she blows out the window makes its way inside the room and makes its way around the house with hand-like shapes – on a lamp, a couch, on grapes and on a teddy-bear. A little girl enters the room, picks up the teddy bear and leaves.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

IF NO/Dk/Na SKIP TO Q4_RADIO

ROTATE Q4a1–Q4a2

Q4a1 Can you recall if the woman near the window was standing up, sitting down, or are you not sure?

- Standing up
- Sitting down
- Not sure

Q4a2 Can you recall if the teddy bear was sitting alone on a chair, with other toys in a box, or are you not sure?

- Alone on a chair
- With other toys in a box
- Not sure

RADIO

Q4_Radio Do you remember hearing a radio ad over the past few weeks or so? (READ - *Interviewer: pronounce each word clearly / speak slowly*) Do you recall hearing this radio ad?

ROTATE b) and c)	Yes	Maybe	No	Dk/Na
b) With children in the car who don't speak up about difficulties breathing and having sore eyes from cigarette smoke. It also discusses some illnesses that you can get from second-hand smoke.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

ROTATE b) and c)		Yes	Maybe	No	Dk/Na
c)	Which talks about some steps parents take to ensure their children are safe in the car. They buckle seat belts and drive slowly. They then light up a cigarette exposing their children to second-hand smoke.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

KNOWLEDGE ATTITUDES BELIEFS (KAB)

INTERVIEWER READ: I have now some questions about the smoking habits inside your home. I'd like to remind you that all your answers will remain strictly confidential.

Q5 Are there any parts of your home where smoking is not permitted? If so, where? **Probe** - Anywhere else? (**Do not read list / Probe – any others? / Accept all that apply**)

- 1. No restrictions, smoking allowed anywhere inside home – SINGLE PUNCH
- 2. Yes, Not on main floor.....
- 3. Yes, Not in bedrooms.....
- 4. Yes, Not in the kitchen/eating area
- 5. Yes, Smoke only in basement.....
- 6. Yes, Smoke only in bathroom
- 7. Yes, Smoke only in garage (connected or not to the house?)
- 8. Yes, Smoke only near an open window.....
- 9. Yes, Smoking not permitted anywhere inside house– SINGLE PUNCH.....
- 10. Yes, other restrictions (specified).....
- 11. Dk/NA – SINGLE PUNCH.....

IF SMOKING IS NOT PERMITTED ANYWHERE INSIDE THE HOME (CODE 9 IN Q5) RESPONDENTS SKIP Q6 / GO TO Q7

Q6 Are there any situations or moments when smoking is not permitted inside your home? If so, when? **Probe** - Anything else? (**Do not read list / Probe – any others? / Accept all that apply**)

- 1. No restrictions, smoking allowed anytime inside home – SINGLE PUNCH
- 2. Yes, When children are home.....
- 3. Yes, When children are near.....
- 4. Yes, When children are awake
- 5. Yes, When company is over
- 6. Yes, When partner/spouse is home
- 7. Yes, other restrictions (specify).....
- 8. Dk/Na – SINGLE PUNCH

IF CODE 1 IN Q5 AND CODE 1 IN Q6 (NO RESTRICTIONS), SKIP Q7 / GO TO Q8

Q7 What are your reasons for putting restrictions on smoking inside your home? Any other reasons? (Do not read list / **Probe – any others?** / **Accept all that apply**)

- 1. Children – not want exposed to second hand smoke
- 2. Children – not want exposed to poor role model/example..
- 3. Children – health conditions
- 4. Children -- other reference – **PROBE FOR DETAILS**
- 5. Smell
- 6. Dirt
- 7. Negotiations with spouse/partner
- 8. Spouse/partner sets the rules
- 9. Spouse/partner not smoke/not like smoke
- 10. Requirement of rental/lease/sublet
- 11. Second-hand smoke is harmful.....
- 12. Fire hazard
- 13. Other (specify)
- 14. Dk/Na

FOR HALF SAMPLE, Q14-Q16 WILL BE ASKED HERE

IF CODE 9 IN Q5, SKIP TO Q9

Q8 Including all family members (and yourself) and regular visitors, how many people smoke inside your home every day or almost every day? (**Includes any tobacco products**)

ASK ALL

Q9 How often do you think your children are in a situation where they are close or around someone smoking inside your **home**? Would it be...? (**Read list**)

- Every day or almost every day
- A few times a week
- About once a week
- About one to three times a month
- Less than once a month, or
- Never
- Dk/Na

SKIP TO Q11

Q10 How often do you think your children are in a situation where they are breathing in second-hand smoke (other people's tobacco smoke) in your **home**? Would that be...? (**Read list**)

- Every day or almost every day.....
- A few times a week
- About once a week.....
- About one to three times a month.....
- Less than once a month, or.....
- Never.....
- Dk/Na

Q11 How often do you think your children are in a situation where they are inside a **car** (yours or someone else's car) with someone smoking? Would that be...? (**Read list**)

- Every day or almost every day.....
 - A few times a week
 - About once a week.....
 - About one to three times a month.....
 - Less than once a month, or.....
 - Never.....
 - Dk/Na
- SKIP TO Q13**

Q12 How often do you think your children are in a situation where they are breathing in second-hand smoke (other people's tobacco smoke) in a **car** (yours or someone else's car)? Would that be...? (**Read list**)

- Every day or almost every day.....
- A few times a week
- About once a week.....
- About one to three times a month.....
- Less than once a month, or.....
- Never.....

Q13 Again, thinking about your home, please tell me if over the past 3 months whether you or other members of your household always, frequently, sometimes or never did the following. How about...? (**Read / Rotate list**)

READ AND ROTATE	Always	Frequently	Sometimes	Never	Don't know	Does not apply
1. Restrict smoking to outdoors only	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Restrict smoking to one room or area only	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Restrict smoking when children are around	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Ask friends and acquaintances not to smoke	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Ask relatives not to smoke	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

[Q14-Q16] ASKED AFTER Q7 FOR HALF SAMPLE

IF CODE 1 IN Q5 AND CODE 1 IN Q6 (NO RESTRICTIONS), SKIP TO Q15

Q14 People may restrict smoking in their home for a number of reasons. On a 7-point scale, where 1 means not at all important, and 7 means extremely important, please tell me how important the following factors are in your decision to restrict smoking in your home... **(Read / Rotate list)** How about?

READ AND ROTATE	Not at all important				Extremely important			Don't know	Does not apply
	1	2	3	4	5	6	7		
1. Allergies of a family member	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The effect of second-hand smoke on your own health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The effect of second-hand smoke on the health of your children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The smell and dirt caused by cigarette smoke	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. So that your children won't be influenced by others to start smoking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Because it was asked by your children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Because it was asked by an adult family member	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

ASK ALL

Q15 There are different things that people might do to reduce the amount of second-hand smoke (other people's tobacco smoke) in their home or its impact on other people. Please tell me if during the past 3 months you have done any of the following to reduce the amount of second-hand smoke in your home. How about...? **(Read / Rotate list; review one at a time; accept all that apply)**

READ AND ROTATE	Yes	No	Dk/Na
1. Using an air purifier unit in the home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Using a fan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Opening a window	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Smoking behind closed doors in another room or area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Using a spray or other form of air freshener	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Not allowing people to smoke in the house (read second-to-last)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Or something else (read last) If yes, specify	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q16 How effective do you think each of the following methods is in terms of reducing the amount of second-hand smoke (other people's tobacco smoke) in a home? How about...? Do you think this is very, moderately, not very or not at all effective? **(Read / Rotate list) [Repeat scale as necessary]**

READ AND ROTATE	Very effective	Moderately effective	Not very effective	Not at all effective	Not applicable
1. Using an air purifier unit in the home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Using a fan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Opening a window	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Smoking behind closed doors in another room or area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Using a spray or other form of air freshener	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Not allowing people to smoke in the house (Read last)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q17 Over the past 3 months, has the topic of second-hand smoke (other people's tobacco smoke) ever come up in discussion between...? **(Read in rotation)**

READ AND ROTATE	Yes	No	Dk/Na
1. yourself and your children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. yourself and another adult of your family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. yourself and people other than family members or children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q18 Do you believe that the health of non-smokers can be damaged by other people's tobacco smoke?

- Yes
- No
- Dk/Na

Q19 Do you think that the dangers of breathing in other people's tobacco smoke are exaggerated?

- Yes
- No
- Dk/Na

Q20 What would you say are the risks or dangers of breathing in second-hand smoke? **(Do not read / Probe well. Any others?)**

Q21 Overall, how concerned are you with the health risks associated with second-hand smoke in your home? Would you say...? **(Read)**

- Very concerned
- Somewhat concerned.....
- Not very concerned
- Not at all concerned
- Dk/Na

**IF TV OR ONE RADIO AD WAS NOTICED ASK Q22 TO Q25.
IF NO RECALL AT ALL SKIP TO Q26**

Q22 You said previously that you noticed some ads that I described to you. Did you do anything as a result of seeing/hearing this (these) ad(s)?

- Yes
- No
- Maybe.....
- Dk/Na

**IF YES OR MAYBE IN Q22, ASK Q23
IF NO IN Q22, SKIP TO Q24**

Q23 What did you do? Anything else? **[Probe. Open-ended. Accept up to three responses].**

Q24 Do you intend to do anything as a result of seeing/hearing this (these) ad(s)?

- Yes
- No
- Maybe.....
- Dk/Na

IF YES OR MAYBE IN Q24, ASK Q25, IF NO/DK SKIP TO Q26

Q25 What do you intend to do? Anything else? **[Probe. Open-ended. Accept up to three responses].**

DEMOGRAPHICS

The Interview is almost over. To terminate, I'd like to ask you a few questions for statistical purposes only. I'd like to remind you that all your answers are completely confidential.

Q26 Excluding video cassettes and DVDs, how much time, in total, did you personally spend watching television during the last 7-day weekly period, Monday to Sunday?

hours + minutes

- None / zero...
- Dk/Na

Q27 How much time, in total, did you personally spend listening to the radio during the last 7-day weekly period, Monday to Sunday?

hours + minutes

- None / zero...
- Dk/Na

Thank you very much. Your participation is greatly appreciated and will help Health Canada in its efforts to better inform Canadians.

ÉVALUATION PUBLICITAIRE FS SONDAGE 'POST' AUPRÈS DE L'AUDIENCE CIBLE

CRÉATEC +
Projet : 574-064
Février 2007
Final

POR-283-06
HC-06-10

INTRODUCTION

[Demandez à parler au répondant de la phase 1]

Bonjour/Bonsoir. Je m'appelle _____ et je représente l'équipe de recherche Créatec. En décembre dernier, vous avez participé à un sondage que nous effectuons pour le compte de Santé Canada, sur des questions reliées au tabagisme. Merci d'avoir accepté d'être rappelé en mars pour compléter la seconde vague de notre étude.

À nouveau, ce sondage est court; ça prendra environ 10-12 minutes de votre temps. Vos réponses demeureront strictement confidentielles.

Intervieweur : *Si durant l'entrevue le répondant dit qu'il/elle a déjà répondu au même sondage, dites : « Nous posons beaucoup des mêmes questions pour voir comment certaines choses ou points de vue changent avec le temps. »*

Pouvons-nous compléter maintenant la suite de notre sondage?

- Oui disponible
- Pas disponible **PRENDRE UN RENDEZ-VOUS**
- Refus..... **REMERCIER OU TERMINER**

Cette enquête a été enregistrée auprès du système national d'enregistrement des sondages (1-800-554-9996, numéro du projet 574-064).

Qa. Pour commencer, dites-moi combien y a-t-il de parents ou de tuteurs âgés entre 20 et 54 ans qui fume(nt) la cigarette dans votre maison (vendue en paquet ou que vous roulez vous-même)?

- Un.....
- Deux ou plus **CONTINUEZ**
- Aucun **TERMINEZ**

Si le nombre est différent de celui mentionné en décembre dernier, demander Qb

Qb. En décembre dernier vous aviez mentionné un nombre différent (LIRE RÉPONSE EN DEC). Depuis ce temps, est-ce qu'un changement est survenu dans le nombre de parents ou de tuteurs qui fument la cigarette dans votre maison?

- Oui, il y a eu changement
 - Non, le nombre de décembre est erroné
 - Non, le nombre actuel est erroné.....
- INTERVIEWEUR : FAIRE LES CORRECTIONS APPROPRIÉES**

RAPPEL PUBLICITAIRE SPONTANÉ

Q1 Au cours des dernières semaines environ, avez-vous vu, entendu ou lu une publicité à propos du tabagisme, de la fumée secondaire ou sur d'autres sujets reliés au tabac?

- Oui.....
- Peut-être.....
- Non..... **PASSEZ À LA Q4**

Q2 Veuillez me dire tout ce que vous vous souvenez à propos de cette ou de ces publicités. Quelles images vous viennent à l'esprit? (**Sonder**) Y a-t-il autre chose? (**Question ouverte. Acceptez toutes les réponses**)

Q3 Où aviez-vous remarqué cette (ces) publicité(s)? (**Ne pas lire. Sonder – y a-t-il d'autres endroits? Acceptez toutes les réponses**)

- Journal de groupe ethnique
- Foire/exposition
- Internet/Bannière de site Web.....
- Hebdomadaires locaux.....
- Magazines
- Journaux.....
- Panneaux publicitaires à l'extérieur
- Dépliant/brochure reçus par la poste
- Pharmacies
- Transport en commun
- Radio
- Télévision
- Bouche à oreille.....
- Autre (**préciser**)
- Nsp/Nrp ENTRÉE UNIQUE

RAPPEL AIDÉ DE L'ANNONCE

ROTATION DE LA PUBLICITÉ TV et RADIO

TV

Q4_TV Vous souvenez-vous d'avoir vu une publicité télévisée au cours des dernières semaines?
(LIRE - *Intervieweur* : prononcez chaque mot clairement / parlez lentement) Vous souvenez-vous d'avoir vu cette publicité télévisée?

DESCRIPTION	Oui	Peut-être	Non	Nsp/Nrp
a) Où on voit une femme qui fume près d'une fenêtre. Une partie de la fumée qu'elle souffle dehors par la fenêtre réussit à revenir à l'intérieur de la pièce et à circuler autour de la maison en prenant la forme de mains - sur une lampe, un sofa, des grappes de raisins et un ourson en peluche. Une fillette entre dans la pièce, prend l'ourson et s'en va.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SI Non/Nsp/Nrp PASSER À LA Q4_RADIO

ROTATION DE Q4a1–Q4a2

Q4a1 Vous rappelez-vous si une femme près de la fenêtre était debout, assise ou bien vous n'en êtes pas certain(e) ?

- Debout.....
- Assise.....
- Pas certain(e).....

Q4a2 Vous rappelez-vous si un ourson était assis seul sur une chaise, avec d'autres jouets dans une boîte, ou bien vous n'en êtes pas certain(e) ?

- Seul sur une chaise.....
- Avec d'autres jouets dans une boîte.....
- Pas certain(e).....

RADIO

Q4_Radio Vous souvenez-vous d'avoir entendu une publicité à la radio au cours des dernières semaines? (LIRE - **Intervieweur** : *prononcez chaque mot clairement / parlez lentement*)
Vous souvenez-vous d'avoir entendu cette publicité à la radio?

Rotation b) et c)	Oui	Peut-être	Non	Nsp/Nrp
b) avec des enfants dans une voiture qui ne disent pas tout haut qu'ils ont du mal à respirer, mais qui ont les yeux irrités par la fumée de cigarette. Ils discutent aussi de quelques maladies qui peuvent être causées par la fumée secondaire.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) où il est question de certaines mesures que prennent les parents pour s'assurer que leurs enfants sont en sécurité dans la voiture. Ils attachent leur ceinture et conduisent lentement. Ils allument ensuite une cigarette, exposant ainsi leurs enfants à la fumée secondaire.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CONNAISSANCES, ATTITUDES, CROYANCES (CAC)

INTERVIEWEUR, LIRE : J'ai maintenant quelques questions qui traitent des habitudes sur le tabagisme à l'intérieur de votre maison. J'aimerais vous rappeler que toutes vos réponses demeureront strictement confidentielles.

Q5 Y a-t-il des parties de votre maison où il est interdit de fumer? Si oui, lesquelles? Y en a-t-il d'autres? (**Ne pas lire la liste / Sonder – y a-t-il d'autres endroits? / Accepter tout ce qui s'applique**)

1. Aucune restriction, il est permis de fumer partout à l'intérieur de la maison –
ENTRÉE UNIQUE.....
2. Oui, pas au rez-de-chaussée
3. Oui, pas dans les chambres.....
4. Oui, pas dans la cuisine/le coin-repas
5. Oui, on peut fumer uniquement au sous-sol
6. Oui, on peut fumer uniquement dans la salle de bain.....
7. Oui, on peut fumer uniquement dans le garage (rattaché ou non à la maison?)
8. Oui, on peut fumer uniquement près d'une fenêtre ouverte
9. Oui, il est interdit de fumer partout dans la maison – ENTRÉE UNIQUE.....
10. Oui, d'autres restrictions (précisées).....
11. Nsp/Nrp – ENTRÉE UNIQUE

S'IL EST INTERDIT DE FUMER PARTOUT DANS LA MAISON (CODE 9 EN Q5), SAUTEZ Q6 / PASSEZ À Q7

Q6 Y a-t-il des situations ou des moments où il n'est pas permis de fumer à l'intérieur de votre maison? Si oui, quand? **Sonder** : Autres moments? (**Ne pas lire la liste / Sonder : Y en a-t-il d'autres? / Accepter tout ce qui s'applique**)

1. Aucune restriction, on peut fumer n'importe quand à l'intérieur de la maison – ENTRÉE UNIQUE
2. Oui, lorsque les enfants sont à la maison
3. Oui, lorsque les enfants sont dans les environs
4. Oui, lorsque les enfants ne dorment pas
5. Oui, lorsque nous avons de la visite
6. Oui, lorsque le/la partenaire/le/la conjoint(e) est à la maison
7. Oui, autres restrictions (préciser)
8. Nsp/Nrp – ENTRÉE UNIQUE

SI CODE 1 EN Q5 ET CODE 1 EN Q6 (AUCUNE RESTRICTION), SAUTEZ LA Q7 / PASSEZ À LA Q8

Q7 Pour quelles raisons mettez-vous des restrictions sur le tabagisme à l'intérieur de votre maison? Y a-t-il d'autres raisons? (**Ne pas lire la liste; / Sonder - Y en a-t-il d'autres? / Accepter tout ce qui s'applique**)

1. Les enfants – ne veut pas qu'ils soient exposés à la fumée secondaire
2. Les enfants – ne veut pas leur donner le mauvais exemple.....
3. Enfants – trouble de santé
4. Les enfants – autre raison – **SONDER POUR OBTENIR DES DÉTAILS**
5. L'odeur
6. La saleté.....
7. Négociations avec le/la conjoint(e)/le/la partenaire
8. Le/la conjoint(e)/le/la partenaire établit les règles.....
9. Le/la conjoint(e)/le/la partenaire ne fume pas/n'aime pas la fumée.....
10. Exigence du propriétaire/du bail/du sous-bail
11. La fumée secondaire est nuisible.....
12. Danger d'incendie
13. Autre (préciser).....
14. Nsp/Nrp (ENTRÉE UNIQUE)

POUR LA MOITIÉ DE L'ÉCHANTILLON, Q14-Q16 SERONT DEMANDÉES ICI

SI CODE 9 EN Q5, PASSEZ À LA Q9

Q8 En comptant tous les membres de votre famille (et vous-même) et les gens qui vous rendent régulièrement visite, combien de personnes fument à l'intérieur de votre maison tous les jours ou presque? (**Inclut tous les produits du tabac**)

DEMANDEZ À TOUS

Q9 Selon vous, à quelle fréquence vos enfants sont-ils dans une situation où ils sont près ou aux alentours de quelqu'un qui fume à l'intérieur de votre maison? Est-ce...? (**Lire la liste**)

- Tous les jours ou presque
 - Quelques fois par semaine
 - Environ une fois par semaine.....
 - Environ une à trois fois par mois.....
 - Moins d'une fois par mois ou.....
 - Jamais
 - Nsp/Nrp
- PASSEZ À LA Q11**

Q10 Selon vous, à quelle fréquence vos enfants sont-ils dans une situation où ils respirent de la fumée secondaire (la fumée du tabac des autres) dans votre maison? Est-ce...? (**Lire la liste**)

- Tous les jours ou presque
- Quelques fois par semaine
- Environ une fois par semaine.....
- Environ une à trois fois par mois.....
- Moins d'une fois par mois ou.....
- Jamais
- Nsp/Nrp

Q11 Selon vous, à quelle fréquence vos enfants sont-ils dans une situation où ils sont à l'intérieur d'une voiture (la vôtre ou la voiture d'un autre) avec quelqu'un qui fume? Est-ce...? (**Lire la liste**)

- Tous les jours ou presque
 - Quelques fois par semaine
 - Environ une fois par semaine.....
 - Environ une à trois fois par mois.....
 - Moins d'une fois par mois ou.....
 - Jamais
 - Nsp/Nrp
- PASSEZ À LA Q13**

Q12 Selon vous, à quelle fréquence vos enfants sont-ils dans une situation où ils respirent de la fumée secondaire (la fumée du tabac des autres) dans une voiture (la vôtre ou la voiture d'un autre)? Est-ce...? (**Lire la liste**)

- Tous les jours ou presque
- Quelques fois par semaine
- Environ une fois par semaine.....
- Environ une à trois fois par mois.....
- Moins d'une fois par mois ou.....
- Jamais

Q13 En songeant de nouveau à votre maison, veuillez me dire si au cours des 3 derniers mois vous-même ou d'autres membres de votre foyer avez fait toujours, souvent, parfois ou jamais les choses suivantes. Comme...? (**Lire / Faire la rotation de la liste**)

LIRE EN ROTATION		Toujours	Souvent	Parfois	Jamais	Ne sait pas	Ne s'applique pas
1.	Permettre que l'on fume uniquement à l'extérieur	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2.	Permettre que l'on fume uniquement dans une pièce ou un secteur de la maison	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3.	Restreindre de fumer en présence des enfants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.	Demander aux amis et connaissances de ne pas fumer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.	Demander aux membres de la famille de ne pas fumer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

[Q14-Q16] DEMANDÉES APRÈS Q7 POUR LA MOITIÉ DE L'ÉCHANTILLON

SI CODE 1 EN Q5 ET CODE 1 EN Q6 (AUCUNE RESTRICTION), PASSEZ À LA Q17

Q14 Il existe de nombreuses raisons pour lesquelles les gens peuvent restreindre de fumer dans leur maison. Sur une échelle de 7 points, où 1 signifie pas du tout important et 7, extrêmement important, veuillez me dire dans quelle mesure chacun des facteurs suivants est important dans votre décision d'interdire de fumer dans votre maison... (**Lire / Faire la rotation de la liste**) En ce qui concerne?

LIRE EN ROTATION	Pas du tout important			Extrêmement important				Ne sait pas	Ne s'applique pas
	1	2	3	4	5	6	7		
1. Les allergies d'un membre de la famille	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. L'effet de la fumée secondaire sur votre propre santé	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. L'effet de la fumée secondaire sur la santé de vos enfants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. L'odeur et la saleté causées par la fumée de cigarette	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Pour que vos enfants ne subissent pas l'influence des autres pour commencer à fumer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Parce que cela a été demandé par vos enfants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Parce que cela a été demandé par un membre adulte de la famille	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

DEMANDER À TOUS

- Q15** Les gens peuvent faire différentes choses pour réduire la quantité de fumée secondaire (la fumée du tabac des autres) dans leur maison ou son effet sur les autres personnes. Veuillez me dire si au cours des 3 derniers mois vous avez déjà fait l'une ou l'autre des choses suivantes pour réduire la quantité de fumée secondaire dans votre maison. Avez-vous...? (**Lire / Faire la rotation. Présenter une chose à la fois, accepter tout ce qui s'applique**)

LIRE EN ROTATION	Oui	Non	Nsp/Nrp
1. utilisé un purificateur d'air dans votre maison	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. utilisé un ventilateur	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. ouvert une fenêtre	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. fumé dans une autre pièce ou partie dont la porte était fermée	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. utilisé un vaporisateur ou une autre forme de désodorisant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. ne pas permettre aux gens de fumer dans la maison (lire en avant-dernier)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. fait autre chose (lire en dernier) Si oui, préciser	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- Q16** Dans quelle mesure chacun des moyens suivants est-il efficace selon vous pour réduire la quantité de fumée secondaire (la fumée du tabac des autres) dans la maison? Comme...? Croyez-vous que cela est très efficace, plutôt efficace, pas très efficace ou pas du tout efficace? (**Lire / Faire la rotation de la liste**) [Répétez l'échelle si nécessaire]

LIRE EN ROTATION	Très efficace	Plutôt efficace	Pas très efficace	Pas du tout efficace	Ne sait pas	Ne s'applique pas
1. l'utilisation d'un purificateur d'air dans votre maison	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. l'utilisation d'un ventilateur	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. le fait d'ouvrir une fenêtre	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. le fait de fumer dans une autre pièce ou partie dont la porte est fermée	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. l'utilisation d'un vaporisateur ou d'une autre forme de désodorisant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. ne pas permettre aux gens de fumer dans la maison (lire en dernier)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q17 Au cours des 3 derniers mois, est-ce que la question de la fumée secondaire (la fumée du tabac des autres) a déjà fait l'objet d'une discussion entre...? (**Lire en rotation**)

LIRE EN ROTATION		Oui	Non	Nsp/Nrp
1.	vous et vos enfants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2.	vous et un autre adulte de votre famille	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3.	vous et des gens autres que les membres de la famille ou les enfants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q18 Croyez-vous que la fumée du tabac des autres personnes peut nuire à la santé des non-fumeurs?

- Oui.....
- Non.....
- Nsp/Nrp

Q19 Pensez-vous que les dangers de respirer la fumée du tabac des autres sont exagérés?

- Oui.....
- Non.....
- Nsp/Nrp

Q20 D'après vous, quels seraient les risques ou les dangers de respirer la fumée secondaire? (**Ne pas lire / Bien sonder. Y en a-t-il d'autres?**)

Q21 Dans l'ensemble, dans quelle mesure êtes-vous préoccupé par les risques pour la santé associés à la fumée secondaire dans votre maison? Diriez-vous...? (**Lire**)

- Très préoccupé
- Plutôt préoccupé
- Pas très préoccupé
- Pas du tout préoccupé
- Nsp/Nrp

**SI UNE ANNONCE TV OU RADIO A ÉTÉ REMARQUÉE, DEMANDEZ Q22 À Q25.
SI AUCUN RAPPEL, PASSEZ À LA Q26**

Q22 Vous avez mentionné précédemment avoir remarqué certaines publicités que je vous avais décrites. Avez-vous fait quoi que ce soit après avoir vu/entendu cette ou ces publicités?

- Oui.....
- Non.....
- Peut-être.....
- Nsp/Nrp

**SI OUI OU PEUT-ÊTRE EN Q22, DEMANDEZ Q23
SI NON EN Q22, PASSEZ À LA Q24**

Q23 Qu'avez-vous fait? Autre chose? [**Sonder. Question ouverte. Accepter jusqu'à trois réponses.**]

Q24 Avez-vous l'intention de faire quoi que ce soit maintenant que vous avez vu/entendu cette ou ces publicités?

- Oui
- Non
- Peut-être.....
- Nsp/Nrp

SI OUI OU PEUT-ÊTRE EN Q24, DEMANDEZ Q25. SI NON / NSP, PASSEZ À LA Q26

Q25 Qu'avez-vous l'intention de faire? Autre chose? [**Sonder. Question ouverte. Accepter jusqu'à trois réponses.**]

DONNÉES DÉMOGRAPHIQUES

L'entrevue s'achève. Avant que nous terminions, j'aimerais vous poser quelques questions à des fins statistiques uniquement. Je vous rappelle que toutes vos réponses demeureront strictement confidentielles.

Q26 Sans compter les cassettes vidéo et les DVD, environ combien de temps avez-vous consacré personnellement à regarder la télévision au cours des 7 jours de la semaine dernière, soit de lundi à dimanche?

heures + minutes

- Aucun / zéro
- Nsp/Nrp

Q27 Environ combien de temps avez-vous consacré personnellement à écouter la radio au cours des 7 jours de la semaine dernière, soit de lundi à dimanche?

heures + minutes

- Aucun / zéro
- Nsp/Nrp

Merci beaucoup. Votre participation est grandement appréciée et aidera Santé Canada dans ses efforts à mieux informer les Canadiens.

APPENDIX 2

TABLE OF CONFIDENCE INTERVALS AND SAMPLING ERRORS

CONFIDENCE INTERVALS

Level of confidence: 95%

Sampling error for selected proportions and sample sizes (infinite population)

Sample size	2% or 98%	4% or 96%	6% or 94%	8% or 92%	10% or 90%	12% or 88%	15% or 85%	20% or 80%	25% or 75%	30% or 70%	35% or 65%	40% or 60%	45% or 55%	50%
75	3.2	4.4	5.4	6.1	6.8	7.4	8.1	9.1	9.8	10.4	10.8	11.1	11.3	11.3
100	2.7	3.8	4.7	5.3	5.9	6.4	7.0	7.8	8.5	9.0	9.3	9.6	9.8	9.8
150	2.2	3.1	3.8	4.3	4.8	5.2	5.7	6.4	6.9	7.3	7.6	7.8	8.0	8.0
200	1.9	2.7	3.3	3.8	4.2	4.5	4.9	5.5	6.0	6.4	6.6	6.8	6.9	6.9
250	1.7	2.4	2.9	3.4	3.7	4.0	4.4	5.0	5.4	5.7	5.9	6.1	6.2	6.2
300	1.6	2.2	2.7	3.1	3.4	3.7	4.0	4.5	4.9	5.2	5.4	5.5	5.6	5.7
400	1.4	1.9	2.3	2.7	2.9	3.2	3.5	3.9	4.2	4.5	4.7	4.8	4.9	4.9
500	1.2	1.7	2.1	2.4	2.6	2.8	3.1	3.5	3.8	4.0	4.2	4.3	4.4	4.4
600	1.1	1.6	1.9	2.2	2.4	2.6	2.9	3.2	3.5	3.7	3.8	3.9	4.0	4.0
700	1.0	1.5	1.8	2.0	2.2	2.4	2.6	3.0	3.2	3.4	3.5	3.6	3.7	3.7
800	1.0	1.4	1.6	1.9	2.1	2.3	2.5	2.8	3.0	3.2	3.3	3.4	3.4	3.5
900	0.9	1.3	1.6	1.8	2.0	2.1	2.3	2.6	2.8	3.0	3.1	3.2	3.3	3.3
1,000	0.9	1.2	1.5	1.7	1.9	2.0	2.2	2.5	2.7	2.8	3.0	3.0	3.1	3.1