



**The Quit Group
Pack Warnings Ad Campaign Evaluation
Post Survey Report
Prepared by Premium Research
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Table of Contents

		Page
1.0	Introduction	1
1.1	The Quit Group	1
1.2	Pack Warnings TVC Campaign	1
1.3	Research Objectives	1
1.4	Pack Warnings Ad Impact Evaluation Post Survey (PWPS)	2
2.0	Research Approach	3
2.1	Research Method	3
2.2	Procedure	3
2.3	Sample	3
2.4	Data Analysis and Reporting	6
3.0	Summary of Results	7
4.0	Advertising Reach	15
4.1	Unprompted Advertising Recall	15
4.2	Unprompted advertising recall: First Mentioned Advertisement	16
4.3	Unprompted advertising recall: Total Recall	17
4.4	Prompted (total) advertising recall: Adrian	18
5.0	Adrian: Message Recall	19
5.1	Adrian: Unprompted Message Outtake	19
6.0	Adrian: Credibility	21
6.1	Adrian is an Actor	21
6.2	Learnt new information from the Adrian ads	22
6.3	What has happened to Adrian is as likely to happen to smokers as non smokers	23
6.4	What happened to Adrian is as likely to happen to heavy smokers as light smokers	24
7.0	Message Acceptance	25
7.1	Unprompted awareness of effects on the body caused by smoking	25
7.2	Perception of the extent to which smoking contributes to key illnesses	27
7.3	Understanding of smoking harms	29
7.4	Dangers of smoking	30
7.5	Learning about the harmful effects of smoking	31
8.0	Self Reported Response to the Adrian ad	34
8.1	Adrian ad prompts worry about own health	34
8.2	Encouraged to quit smoking by the Adrian Ads	36
9.0	Consideration of Taking Action	37
9.1	Seeing the Adrian ad has made me more likely to quit smoking	37
9.2	Seeing the Adrian ad has made me more likely to call the Quitline	39
9.3	Seeing the Adrian ad has made me more likely to stay quit	40
9.4	Seeing the Adrian ads is an important reason why I have quit smoking	41
9.5	Intention to quit	42
9.6	Intention to call the Quitline	44
9.7	Intention to speak to a health professional about quitting smoking	45
10.0	Action Taken	46
10.1	Seeing the Adrian ad has made me talk about quitting with a health professional	46
10.2	I have called the Quitline because of seeing the Adrian ads	48
10.3	I have had a go at quitting smoking because of seeing the Adrian ads	49
10.4	Deliberately quit smoking	50
10.5	Receiving help with quitting	53
10.6	Health professionals	55

11.0	Combination of Adrian ad and Cigarette and Tobacco Packet Pictorial Warnings	56
11.1	Perception that the Adrian ad and pictorial warnings have similar messages	56
11.2	Adrian and the picture warnings increases likelihood of quitting	57
11.3	Adrian and the picture warnings increases likelihood of staying quit	58
11.4	Awareness of pack warning labels	59
11.5	Impact of pack warning labels	60
11.6	Impact of the pack warnings on thinking about the health risks of smoking	61
11.7	Impact of the pack warnings on intention to quit smoking	62
11.8	Impact of the pack warnings on staying quit	63
Appendix:		
	Questionnaire	65
	Data Tables	80
	Variable Table	138

1.0 Introduction

1.1 The Quit Group

The Quit Group is a charitable trust established to run quit smoking programmes in New Zealand, including the national free telephone support Quitline. The aim of The Quit Group is to reduce the number of New Zealanders who smoke, with a particular focus on Māori smokers.

The Quit Group develops and provides innovative quit smoking programmes, television, radio, and print quit campaigns as well as evidence based tobacco control facts and figures. The programmes are funded by the Ministry of Health.

Vision: Quit for life: contributing to a Smokefree Aotearoa/New Zealand 2020.

Mission: To be a national leader in smoking cessation for Aotearoa/New Zealand, with effective help available for people to successfully quit smoking.

The Ministry of Health and The Quit Group have recently commissioned TVC advertising about the health impacts of smoking to support the introduction of pictorial health warnings on cigarette and tobacco packets in New Zealand.

1.2 Pack Warnings TVC Campaign

The Pack Warnings TVC campaign is designed to compliment the introduction of pictorial health warnings on cigarette and tobacco packets in New Zealand. The Pack Warnings TVC campaign was launched at the beginning of June 2008, and aired continuously for 13 weeks until 29 August 2008. The advertising will air again in November and December 2008.

The advertising on air during June, July and August is referred to in this report as the Adrian ad. The Adrian ad is a series of six ads showing Adrian Pilkington, a man in his 50s, who has oral cancer and has had radiotherapy and an operation to remove his tongue. He speaks through a 'trachy' (a hole in his throat) and can't eat. We see him looking at photos of when he was younger with his mother, and hear his sister talking also.

1.3 Research Objectives

The objectives of the Pack Warnings Ad Impact Evaluation are to determine the following.

- The extent to which the Adrian ad reach the intended audiences.
- The extent to which the intended audiences understand the messages from the Adrian ad.
- The extent to which the intended audiences perceive the Adrian ad messages are credible.
- The extent to which the intended audiences have changed their level of acceptance of the messages from the Adrian ad (e.g. extent to which they agree that smoking can cause mouth/oral cancer).
- The intended audiences' personal reaction to the Adrian ad (e.g. fear, encouragement, motivation, denial).
- The extent to which the intended audiences consider taking action as a result of seeing the Adrian ad (e.g. calling Quitline, quitting smoking, discussing quitting smoking with a health professional).
- The extent to which the intended audiences take action as a result of seeing the Adrian ad (e.g. calling Quitline, quitting smoking, discussing quitting smoking with a health professional).
- The extent to which the Adrian ad motivate the intended audience to quit smoking.
- The extent to which the combination of the Adrian ad and pictorial health warnings on cigarette and tobacco packets are working together to encourage intended audiences to take steps to quit smoking.

A benchmark survey was undertaken in May 2008 prior to the launch of the Adrian ad (pre survey) and a second survey (post survey) was undertaken after the June to August advertising to assess the impact of the Adrian ad.

1.4 Pack Warnings Ad Impact Evaluation Post Survey

This document reports on the Pack Warnings Ad Impact Evaluation Post Survey (PWPS).

The objectives of the PWPS were to determine the following.

- The extent to which the Adrian ad reached the intended audiences¹.
 - Unprompted and prompted awareness of the Adrian ad.
- The extent to which the intended audience understood the messages from the Adrian ad.
 - Unprompted message outtake from the Adrian ad.
- The extent to which the intended audience perceived the messages from the Adrian ad as credible.
 - Self reported level of belief in the ads.
- The extent to which the intended audience have changed their level of acceptance of the messages from the Adrian ad (i.e. extent to which they agree that smoking can cause mouth/oral cancer).
 - Comparison of self reported acceptance of messages from the Adrian ad (smoking can cause oral cancer) between the benchmark and the follow on survey.
- The intended audiences' personal reaction to the Adrian ad (e.g. fear, encouragement, motivation, denial).
 - Self reported response to the Adrian ad.
- The extent to which the intended audiences considered taking action as a result of seeing the Adrian ad (e.g. calling Quitline, quitting smoking, discussing quitting smoking with a health professional).
 - Self reported consideration of taking action because of the Adrian ad.
 - Comparing self reported consideration of quitting between the benchmark and the follow on survey.
- The extent to which the intended audiences took action as a result of seeing the Adrian ad (e.g. calling Quitline, quitting smoking, discussing quitting smoking with a health professional).
 - Self reported action taken because of the Adrian ad.
 - Comparing self reported action taken between the benchmark and the follow on survey.
- The extent to which the combination of the Adrian ad and cigarette and tobacco packet pictorial warnings are working together to encourage intended audiences to take steps to quit smoking.
 - Self reported perception.
 - Comparing consideration of and quitting behaviour between the benchmark and follow on surveys.

This report describes the findings of the PWPS. The findings are presented in order of the research objectives. Each section summarises the conclusions for each objective and then describes the findings that the conclusions are drawn from.

¹ Smokers and recent quitters living in the Northland, Tairāwhiti, Lakes and Whanganui district health board (DHB) regions.

2.0 Research Approach

2.1 Research Method

The PWPS was undertaken using Computer Assisted Telephone Interviewing (CATI). The data was recorded directly into Personal Computers by the CATI operators as they undertook the interviews.

2.2 Procedure

The PWPS CATI interviews were all undertaken in September 2008 by Reid Research. At the time of data collection, the Adrian ad had ended on 29 August 2008 and a new Quit campaign Video Diaries Joe was on air.

During June and September 2008, two smokefree Ads (but not Quit campaigns), Smokefree Cars and Smoking Not Our Future, were on air periodically.

The respondents for both the pre and post survey were found using random digit dialling to households in the DHB regions of interest.

Questionnaire

The questionnaire was developed jointly by The Quit Group and Premium Research. The questionnaire was also reviewed by Reid Research. As an overview, the questionnaire content was as follows:

- Introduction and screener questions
- Effects of smoking
- Advertising recall
- Adrian ad
- Picture warning labels
- Smoking behaviour
- Quitting
- Demographics.

The full questionnaire is in Appendix A.

2.3 Sample

Population of Interest

The population of interest for this research was current smokers and recent quitters living in the Northland, Tairāwhiti, Lakes and Whanganui District Health Board (DHB) regions. These DHBs were identified by the Ministry of Health as the four priority DHBs requiring more assistance and activities to encourage quitting.

Current smokers were defined as people who have smoked more than 100 cigarettes in their life and currently smoke at least one cigarette per month.

Recent quitters were defined as people who have smoked more than 100 cigarettes in their life but have quit smoking in the last 12 months.

Quotas

The pre survey used sample quotas to ensure representative distribution of respondents within the sample:

- *Area*: quotas were used so that the geographic distribution of the sample matched the population of smokers across the four DHB regions.
- *Ethnicity*: quotas were used so that the ethnic distribution of the sample matched the population of smokers in the four DHB regions, by key ethnic groupings.
- *Age*: quotas were used so that the age distribution of the sample matched the population of smokers in the four DHB regions, by key age groupings.
- *Gender*: quotas were used so that the distribution of the sample matched the population of smokers in each of the four DHB regions, by gender.

2006 Census data was used to determine the quota targets.

A total sample of n=468 was achieved for the pre survey.

In order to ensure comparability, the post survey used survey quotas determined on the basis of the achieved sample for the pre survey. A total sample of n=462 was achieved for the post survey.

The **achieved** quotas (n=) were as follows:

Table 1: Area

	Pre	Post
Northland DHB	189	186
Tairāwhiti DHB	66	66
Lakes DHB	126	124
Whanganui DHB	87	86

Table 2: Ethnicity

	Pre	Post
Māori	194	191
All other ethnicities	274	271

Table 3: Age

	Pre	Post
15-19 years	37	34
20-49 years	300	297
50 years plus	131	131

Table 4: Gender

	Pre	Post
Male	205	203
Female	263	259

Sample Characteristics

The following table provides the demographic and smoking behaviour profile for the pre and post samples. There is one significant difference between the two samples: a significantly lower proportion of respondents living in two adult plus one or more children households in the post survey.

Table 5: Sample Profile

		Pre	Post
Region	Northland DHB	40%	40%
	Tairāwhiti DHB	14%	14%
	Lakes DHB	27%	27%
	Whanganui DHB	19%	19%
Ethnicity*	Māori	41%	41%
	Pacific	1%	2%
	NZ European/Other	70%	68%
Age	15-19	8%	7%
	20-49	64%	64%
	50+	28%	28%
Household income	\$30,000 or less	25%	28%
	\$30,001-\$50,000	23%	23%
	\$50,001 or more	44%	39%
	Refused	3%	3%
	Don't know	6%	6%
Gender	Male	44%	44%
	Female	56%	56%
Household structure	1 adult plus 1 or more children	9%	11%
	2 adults plus 1 or more children	43%	36%
	3 adults plus 1 or more children	7%	10%
	Adults only	41%	42%
Smoking status	Recent quitters	12%	13%
	At least once a day	78%	81%
	At least once a week	6%	4%
	At least once a month	4%	3%
Recent quitters	Less than 3 months ago	39%	26%
	3 to less than 6 months ago	19%	36%
	6-12 months ago	42%	38%
Nicotine dependency (current smokers only)	High (first cigarette within 30 minutes after waking)	38%	38%
	Low (first cigarette at 30 minutes or longer after waking)	59%	61%
	Don't know/not specified	3%	1%

* Multiple response possible

2.4 Data Analysis and Reporting

Response Rate

Response rate was defined as the proportion of eligible individuals who completed the survey. Response rates were calculated using the following formula:

$$\text{Response rate} = \frac{D}{(D+B)+C^*e}$$

$$E = \frac{D+B}{D+B+A}$$

Key:

- A non working telephone number or non eligible household
- B eligible respondents who did not complete an interview
- C unknown eligibility did not complete an interview
- D completed interviews

The response rate for the **pre** survey was 21 percent (see below for details)

A	Non working numbers, were not current or recently quit smokers.	5151
B	Break off during survey.	101
C	Appointments, refusals, not interviewable and screened on demographics.	15424
D	Completes.	468

The response rate for the **post** survey was 23 percent (see below for details)

A	Non working numbers, were not current or recently quit smokers.	7421
B	Break off during survey.	130
C	Appointments, refusals, not interviewable and screened on demographics.	22331
D	Completes.	462

Data Preparation and Weighting

Reid Research undertook all data preparation and prepared tabulations in SurveyCraft. No post-weighting of the data was undertaken. The sample is representative of the smoker population in the four priority DHBs, but not to the New Zealand smoker population as a whole.

Statistical Considerations

Throughout this report significant differences are shown where:

- There is a statistically significant difference between the findings in the pre and the post survey (as indicated by a red square on data charts).
- There is a statistically significant difference between the named variables and the rest of the sample (for questions only included in the post survey only).
- The significant difference is at the 95 percent confidence level or higher.
- The sample size for the variable of interest is n=30 or greater.²

² A small sample calculation is required to calculate significant differences on samples of less than n=30, therefore standard tests of significance cannot be used.

3.0 Summary of Results

Conclusions

Objective: To determine the extent to which the Adrian ad reached the intended audiences.

Conclusion: The Adrian ad has achieved a high level of reach among the intended audience. Ninety-four percent of the survey sample of smokers and recent quitters do recall seeing the Adrian ad, when prompted. Unprompted recall of Adrian is also high, 41 percent of respondents mentioned the Adrian ad without prompting.

Objective: To determine the extent to which the intended audience understood the messages from the Adrian ad.

Conclusion: There was no one clear message that respondents associated with the Adrian ad. The most commonly recalled messages were generic stop smoking messages.

Objective: To determine the extent to which the intended audience perceived the messages from the Adrian ad were credible.

Conclusion: Adrian was generally perceived to be a credible person, 70 percent of respondents believed that Adrian was not an actor. Most respondents did accept that what happened to Adrian is as likely to happen to light as to heavy smokers. Respondents were however divided on whether they believed that what had happened to Adrian was as likely to happen to smokers as non smokers – resistance to accept the message that smoking does increase the risk of illness like oral cancer is still evident.

Objective: To determine the extent to which the intended audience have changed their level of acceptance of the messages from the Adrian ad (i.e. extent to which they agree that smoking can cause mouth/oral cancer).

Conclusion: The research found that the Adrian ad has raised levels of awareness that smoking can cause oral cancer. Unprompted, a third of respondents now identify oral cancer as being a disease caused by smoking (up from 22% to 33%). Oral cancer has risen in prominence, up from the seventh most likely to be identified as an effect of smoking on the body to third most likely to be identified as an effect of smoking on the body. There has also been a significant increase in the proportion of respondents that agree to a 'large extent' that smoking causes oral cancer (up from 41% to 54%). There has also been a significant increase in those who say they have recently learnt something new about the harmful effects of smoking (up from 18% to 30%). Of those have learnt something new, 21 percent say the new information was that smoking causes oral cancer.

Objective: To determine the audience's personal reaction to the Adrian ad.

Conclusion: The Adrian ad is causing serious concern among around half of the sample population. Just over half of the respondents (including both current smokers and recent quitters) said the Adrian ad had caused them to be concerned about their own health. Likewise, around half of the current smokers said the Adrian ad had made them consider quitting smoking. Respondents aged 20-49 years and those with a low nicotine dependency are more likely to be concerned or considering quitting smoking as a result of seeing the Adrian ad.

Objective: To determine the extent to which the intended audience considered taking action as a result of seeing the Adrian ad.

Conclusion: Forty percent of the current smokers, who have seen the Adrian ad, say seeing the ad has made them more likely to quit smoking. There has, however, not been a significant increase between the pre and post surveys in the proportion of smokers who are actively considering quitting. Twenty-nine percent of respondents said seeing the Adrian ad made them more likely to call the Quitline. There has, however, not been a significant increase in the proportion of respondents that said they will call the Quitline between the pre and post surveys.

Objective: To determine the extent to which the intended audience took action as a result of seeing the Adrian ad.

Conclusion: Some respondents report taking action because of seeing the Adrian ad: a fifth of current smokers have spoken to a health professional, six percent have called the Quitline and 18 percent have had a go at quitting smoking. Between the pre and post surveys there has not, however, been a significant change in the proportion of current smokers that have deliberately quit smoking for at least 24 hours.

Objective: To determine the extent to which the combination of the Adrian ad and cigarette and tobacco packet pictorial warnings are working together to encourage intended audiences to take steps to quit smoking.

Conclusion: Most respondents can see the links between the Adrian ad and the pictorial warnings on packets. Nearly half of the current smokers perceive that the combination of the ad and the warnings in packets increases the likelihood that they will quit smoking. There has been a significant increase between the pre and post surveys in the proportion of respondents who say the pictorial warnings on packets have stopped them having a cigarette when they were just about to have one (up from 12% to 17%).

Advertising Reach

Respondents were asked: *Do you recall seeing and/or hearing any advertising in the last three months about the harmful effects of smoking?* Recall of advertising about smoking was at very high levels in both the pre and post surveys. Ninety-two percent of respondents recalled advertising in the pre survey and 90 percent in the post survey. There has not been a significant change in the unprompted recall of advertising about the harmful effects of smoking as a result of the Adrian TVC.

Respondents who recalled advertising were asked: *Please describe the first advertisement that comes to mind.* In the post survey the advertising recalled by the highest proportion of respondents, as the first advertisement that came to mind was: the Adrian ad (30%). The top of mind recall of the Adrian ad resulted in a significant decrease in top of mind recall of the pictorial warnings on cigarette and tobacco packets (down from 41% to 27%). Awareness of the Adrian ad was similar across all demographic groups. There were no significant differences, by demographic group, for first mentioned recall of the Adrian ad.

Respondents who recalled advertising were asked: *Can you please now tell me of all other advertisements you have seen about the harmful effects of smoking?* In the post survey the advertising recalled by the highest proportion of respondents (total unprompted recall) was: the Adrian ad (41%). Other large, and statistically significant changes between the pre and post survey, were as follows:

- A decrease in the proportion of respondents that spontaneously recalled cigarette and tobacco packet warnings between the pre and post survey (down from 57% to 41%)
- An increase in the proportion who recalled Smokefree cars (up from 25% to 39%³).

All respondents were asked: *You may have already mentioned this, but just to be sure, do you recall the following advertisement? A series of ads showing Adrian a man in his 50s, he speaks through a hole in his throat (trachy). He has oral cancer and has had radiotherapy and an operation to remove his tongue and can't eat.* Ninety-four percent of respondents in the post survey recalled seeing the Adrian ad. Prompted recall of the Adrian ad was similar across all demographic groups.

³ The Smokefree Cars Ad was on air for five weeks, during June, July and August 2008

Adrian: Message Recall

Respondents who recalled the Adrian ad were asked: *And what were the messages from these ads about Adrian?* The most common messages recalled from advertising were: don't smoke (23%), smoking is bad for you (16%), it's not worth it (which is the tag line of the Adrian ad) (14%), smoking causes oral cancer (12%), quit smoking (9%), Adrian regrets smoking (8%), Adrian has had major life changes because of cancer (6%) and cancer can happen to you (5%).

Adrian: Credibility

Respondents who recalled the Adrian ad were asked to answer yes or no to the following question about the Adrian ad: *I think Adrian is an actor.* Seventy percent of respondents believe Adrian is a real person, 22 percent think he is an actor and eight percent are unsure.

Respondents who recalled the Adrian ad were asked to answer yes or no to the following question about the Adrian ad: *I have learnt new information about the risks of smoking from the Adrian ad.* Fifty-three percent of respondents said they had learned new information about the risks of smoking from the Adrian ad, 47 percent said they had not.

Respondents who recalled the Adrian ad were asked to answer yes or no to the following question about the Adrian ad: *I think what has happened to Adrian is just as likely to happen to smokers as non-smokers.* Fifty-five percent of respondents said what has happened to Adrian is as likely to happen to smokers as to non-smokers, 43 percent said the likelihood is not the same. Two percent said they don't know.

Respondents who recalled the Adrian ad were asked to answer yes or no to the following question about the Adrian ad: *I think what has happened to Adrian is just as likely to happen to heavy smokers as to light smokers.* Seventy-two percent of respondents said what has happened to Adrian is as likely to happen to heavy smokers as light smokers, 22 percent said the likelihood is not the same. Five percent said they don't know.

Message Acceptance

Respondents were asked: *Please can you tell me all of the effects to the body, including diseases, you are aware of that can be caused by smoking? Please list as many as you can remember⁴.* There has been a significant increase in the proportion of respondents that spontaneously mention oral cancer as being an effect of smoking on the body (up from 22% in the pre survey to 33% in the post survey). Oral cancer has risen in prominence, up from the seventh most likely to be identified as an effect of smoking on the body, to third most likely to be identified.

The most common dangers of smoking spontaneously mentioned by respondents continue to be lung cancer (63% in the pre survey and 60% in the post survey) and heart attacks (37% in the pre survey and 34% in the post survey). There have been significant decreases between the pre and the post survey in the proportion of respondents that identify blindness and gangrene as being an effect of smoking on the body, even though these two illnesses were featured in the current set of cigarette and tobacco packet pictorial warnings.

For the pre survey there were no demographic groups that were significantly more likely than the rest of the population to mention oral cancer. In the post survey 20-49 years olds show evidence of a greater awareness of oral cancer than the rest of the sample. Looking across the demographic groups, those showing the largest increase in awareness of oral cancer (where the sample size is large enough to identify a statistically significant change) are:

- 20-49 years (awareness up from 24% to 37%)
- Living in a household with an income of between \$30,001 and \$50,000 per annum (awareness up from 23% to 40%)
- NZ European/Other (awareness up from 23% to 34%)

⁴ Note this question was asked first, prior to any questioning specifically about advertising and the Adrian ads.

- In a household with two adults plus one or more children (awareness up from 25% to 39%).

Respondents were asked: *I am going to read out a list of health conditions. From what you have read, heard or known, please indicate the extent to which you think smoking tobacco contributes to each of the following conditions...(list) Is that...large extent, some extent, small extent, no extent.* Between the pre and post surveys there has been a significant increase in the proportion of respondents that believe smoking contributes to the following key illnesses to a large extent:

- Oral cancer (up from 41% to 54%)
- Gangrene (up 17% to 27%)
- Lung cancer (up from 71% to 79%)
- Lung diseases (up from 71% to 77%).

Respondents were asked: *From what you have read, heard or known, please indicate how much you agree or disagree with each of the following statements on a scale of one to four where one is strongly disagree and four is strongly agree.*

- Smoking is highly addictive
- Smoking can harm children
- If you smoke when you are pregnant the baby is smoking too
- Tobacco smoke is poisonous
- Smoking blocks your arteries.

Agreement ('agree' or 'strongly agree') with all these statements continues to be high – ranging between 86 and 88 percent. Between the pre and post surveys there has been a significant increase in the proportion of respondents that agree smoking blocks your arteries (up 9%) and a significant decrease in the proportion that agree smoking is highly addictive (down 7%).

Respondents were asked: *Do you believe the dangers of smoking have been exaggerated?* There has not been a significant change in the proportion of respondents that believe the dangers of smoking have been exaggerated between the pre and post surveys. A third of respondents (35%) continue to believe that the dangers of smoking have been exaggerated.

Respondents were asked: *Have you learnt anything new about the harmful effects of smoking in the last three months?* There has been a significant increase between the pre and post surveys in the proportion of respondents that agree they have recently learnt something new about the harmful effects of smoking (up from 18% to 30%).

Respondents who did recall recently learning new information about the harmful effects of smoking were asked: *What was it that you learnt?* The most common new learnings about the harmful effects of smoking mentioned by five percent or more of the respondents in the post survey were: smoking causes damage to the body (24%), smoking can cause oral cancer (21%), diseases from smoking don't just effect old people (15%), smoking is harmful (14%), quit smoking (8%), smoking can cause gangrene (7%), second hand smoke is poisonous (6%), smoking is expensive (5%) and second hand smoke harms children (5%). Between the pre and post surveys there has been a significant increase in the proportion of respondents that have newly learnt:

- Smoking can cause oral cancer (up from 6% to 21%)
- Smoking can cause gangrene (up from 0% to 7%).

There has been a corresponding significant decrease in respondents saying they have recently learnt:

- Smoking causes damage to the body (down from 54% to 24%)
- Smoking is harmful (down from 24% to 14%).

Respondents who did recall recently learning new information about the harmful effects of smoking were asked: *Where did you learn it from?* TV advertising was the main source of new information about the harmful effects of smoking in the post survey (63%). The other key sources were cigarette and tobacco packets (53%).

Between the pre and post surveys there has been a significant increase in the proportion of respondents that have newly learnt information from:

- TV advertising (up from 42% to 63%)

Between the pre and post surveys there has been a significant decrease in the proportion of respondents that have newly learnt information from:

- Radio (down from 5% to 0%).

Self Reported Response to the Adrian Ad

Respondents who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: I feel worried about my own health when I see the Adrian ad.* Just over half of respondents who could recall the Adrian ad (55%) said they felt worried about their own health when they saw the Adrian ad.

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: I feel encouraged to quit smoking when I see the Adrian ad.* Just over half of the current smokers who could recall the Adrian ads (51%) said the Adrian ad made them feel encouraged to quit smoking.

Consideration of Taking Action

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Seeing the Adrian ad has made me more likely to quit smoking.* Forty-four percent of the current smokers who can recall the Adrian ad say this ad has made them more likely to quit smoking.

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Seeing the Adrian ad has made me more likely to call the Quitline.* Twenty-nine percent of the current smokers who can recall the Adrian ad say this ad has made them more likely to call the Quitline.

Recent quitters who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Seeing the Adrian ad has made me more likely to stay quit.* Fifty-nine percent of the recent quitters who can recall the Adrian ad say this ad has made them more likely to stay quit.

Recent quitters who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Seeing the Adrian ad is an important reason why I have quit smoking.* Thirteen percent of the recent quitters who can recall the Adrian ad say this ad was an important reason why they quit smoking.

Current smokers were asked: *Are you seriously considering quitting within the next **six months**? Would you say: 'No, I have no intention of quitting', 'Yes, I am thinking of quitting', or 'Yes, I am thinking of quitting in the next 30 days'.* There has not been a significant change in the intention to quit for current smokers between the pre and post surveys. In the post survey, a third of respondents (32%) said they had no intention of quitting smoking, just over half said they are thinking about quitting (51%) and 15 percent said they are thinking of quitting in the next 30 days.

Current smokers who said they were considering quitting were asked: *Who or what prompted you to consider this?* As in the pre survey, the key reasons for considering quitting smoking continue to be friends and family (40%), my own decision (34%) and my health (30%). Seven percent of respondents say the Adrian ad is a key reason why they are considering quitting smoking.

Current smokers were asked: *You may have already mentioned the Quitline, an advice and support service for people who would like to quit smoking. How likely is it that you would ring the Quitline in the future?* Between the pre and post surveys there has not been a significant change in the proportion of respondents that are likely to call the Quitline in the future. Similar to the pre survey, in

the post survey a quarter of current smokers (26%) said they were likely or definitely likely to call the Quitline in the future. A fifth (20%) said they were unlikely to call the Quitline in the future and a third (34%) said they were highly unlikely to call the Quitline in the future.

Current smokers were asked: *In the future, how likely are you to speak to a doctor, nurse or other health professional about quitting smoking?* Between the pre and post surveys there has been a significant increase in the proportion of smokers that say they are definitely likely to speak to a health professional about smoking (up from 10% to 15%). There has been a significant decrease in the proportion of respondents that say they are highly unlikely to speak to a health professional about quitting smoking (down from 36% to 25%).

Action Taken

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Seeing the Adrian ad has made me talk about quitting smoking with a health professional.* A fifth of current smokers who recall seeing the Adrian ad say they have talked with a health professional about quitting smoking as a result of seeing this ad (20%).

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: I have called the Quitline because of seeing the Adrian ad.* Six percent of current smokers who recall seeing the Adrian ad have called the Quitline because of seeing the Adrian ad.

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: I have had a go at quitting smoking because of seeing the Adrian ad.* Eighteen percent of current smokers who recall seeing the Adrian ad say they have had a go at quitting smoking because of seeing the ads.

Current smokers were asked: *In the last three months have you ever deliberately quit smoking for at least 24 hours?* Between the pre and post surveys there has not been a significant change in the proportion of current smokers that have deliberately quit smoking for at least 24 hours. Similar to the pre survey, in the post survey nearly half of the respondents (43%) said they had attempted to quit smoking for at least 24 hours. Twenty-four percent said they had not tried to quit for at least 24 hours and 33 percent said they had never tried to quit at all.

Current smokers who had tried to quit smoking in the last 3 months were asked: *How many times did you quit smoking for more than 24 hours in the last three months?* In both the pre and post survey the mean number of times the current smokers that had tried to quit in the last three months was between three and four times.

Current smokers who had tried to quit smoking in the last 3 months were asked: *Thinking about when you most recently quit, what were your reasons for trying to quit? Please mention all that apply.* Similar to the pre survey, in the post survey the main reason those who had tried to quit smoking gave for trying to quit was their personal health (56%). Other reasons given by five percent or more of respondents were smoking is too expensive (17%), to be around for children/grandchildren (7%), the health of someone I live with (8%), as a role model for children/grandchildren (9%), I was sick of smoking (6%) and pressure from family (7%).

Current smokers who have tried to quit smoking in the last 3 months and recent quitters were asked: *When you stopped smoking did you receive any advice or use any products to help you quit smoking?* Between the pre and post surveys there has not been a significant change in the proportion of respondents who have received help when they have tried to quit smoking. Similar to the pre survey, in the post survey, less than a third (29%) of those who had recently quit smoking or tried to quit smoking had had advice or used any products to help quit smoking.

Those who had used assistance to help them to quit smoking were asked: *Please identify any help, advice, programmes and products used to help you quit during your last quit attempt. Please say as many as apply.* Between the pre and post survey there was no significant change in the type of assistance used to help quit smoking. Similar to the pre survey, in the post survey, those who had had help to quit smoking were most likely to have used nicotine patches (45%), the Quitline (27%) or nicotine gum (24%). Other sources of help used by five percent or more were a doctor (10%), hypnotherapy (6%) or Champix (6%).

Respondents were asked: *Within the last 3 months, have you ever talked about smoking or quitting smoking with a doctor, nurse or other health professional?* Between the pre and post surveys there has not been a significant change in the proportion of respondents who have recently spoken with a health professional about smoking. Similar to the pre survey, in the post survey 25 percent of respondents said they had spoken to a health professional about smoking or trying to quit smoking.

Combination of Adrian Ad and Cigarette and Tobacco Packet Pictorial Warnings

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: The Adrian ad seems to have similar messages to the new picture warnings on packets.* Eighty percent of current smokers say that the Adrian ad seems to have similar messages to the new picture warnings on packets.

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Having both the Adrian ad on TV and the new picture warnings on packets makes me more likely to quit smoking.* Forty-nine percent of current smokers agree that having both the Adrian ad on TV and the new picture warnings on TV makes them more likely to quit smoking.

Recent quitters who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Having both the Adrian ad on TV and the new picture warnings on packets makes me more likely to stay quit.* Sixty-one percent of recent quitters agree that having both the Adrian ad on TV and the new picture warnings on TV makes them more likely to stay quit.

Respondents were asked: *In the last month, how often, if at all, have you noticed the picture warning labels on cigarette and tobacco packages?* Between the pre and post surveys there has not been a significant change in the level of awareness of picture warning labels on cigarette and tobacco packages. Similar to the pre survey, in the post survey, around half of respondents (48%) said they had very often noticed the pictorial warning labels in the last month. A further 19 percent said they had often noticed the labels, 15 percent said they had sometimes noticed the labels and nine percent said they had rarely noticed the labels. Just eight percent of respondents said they had never noticed the labels.

Respondents were asked: *In the last month, have the picture warning labels stopped you from having a cigarette when you were about to smoke one?* Between the pre and post surveys there has been a significant decrease in the proportion of respondents that say pack warnings have never stopped them from having a cigarette (down from 78% to 69%). There had been a corresponding increase in the proportion of respondents that say pack warnings have stopped them from having a cigarette when they were just about to smoke one (up from 12% to 17%).

Respondents were asked: *To what extent, if at all, do the picture warning labels make you think about the health risks of smoking?* Between the pre and post surveys there has not been a significant change in the proportion of respondents that said the picture warning labels had made them think about the health risks of smoking. Similar to the pre survey, in the post survey respondents were quite evenly spread on the extent to which they felt the labels had made them think about the health risks of smoking. Twenty-nine percent said the warning labels had made them think a lot about the health risks of smoking. Twenty percent said the labels had made them think about the health risks of smoking somewhat, 26 percent said a little and 25 percent said not at all.

Current smokers were asked: *To what extent, if at all, do the picture warning labels on cigarette and tobacco packs make you more likely to quit smoking?* Between the pre and post surveys there has not been a significant change in the impact of picture warning labels on intention to quit smoking. Similar to the pre survey, in the post survey more than half of respondents (63%) said the warning labels had made them more likely to quit smoking (19% said it made them more likely to quit smoking, 22% somewhat and 22% a little). Thirty-six percent of respondents said the pack warnings had not made them more likely to quit smoking at all.

Recent quitters were asked: *To what extent, if at all, do the picture warning labels on cigarette and tobacco packs make you more likely to stay quit?* Between the pre and post surveys there has not been a significant change in the proportion of quitters that say the picture warning labels make them more likely to stay quit (the small sample size of recent quitters mean that the change between the

pre and post surveys would have to be very large to be statistically significant). Similar to the pre survey, in the post survey more than two-thirds of respondents (69%) said the warning labels had made them more likely to stay quit (40% said it made it a lot more likely, 12% somewhat and 17% a little). Twenty-nine percent of respondents said the pack warnings had not made them more likely to stay quit.

4.0 Advertising Reach

Objective: To determine the extent to which the Adrian ad reached the intended audiences.

Conclusion: The Adrian ad has achieved a high level of reach among the intended audience. Ninety percent of the survey sample of current smokers and recent quitters do recall seeing the Adrian ad, when prompted. Unprompted recall of the Adrian ad is also high, forty-one percent of respondents mentioned the Adrian ad without prompting.

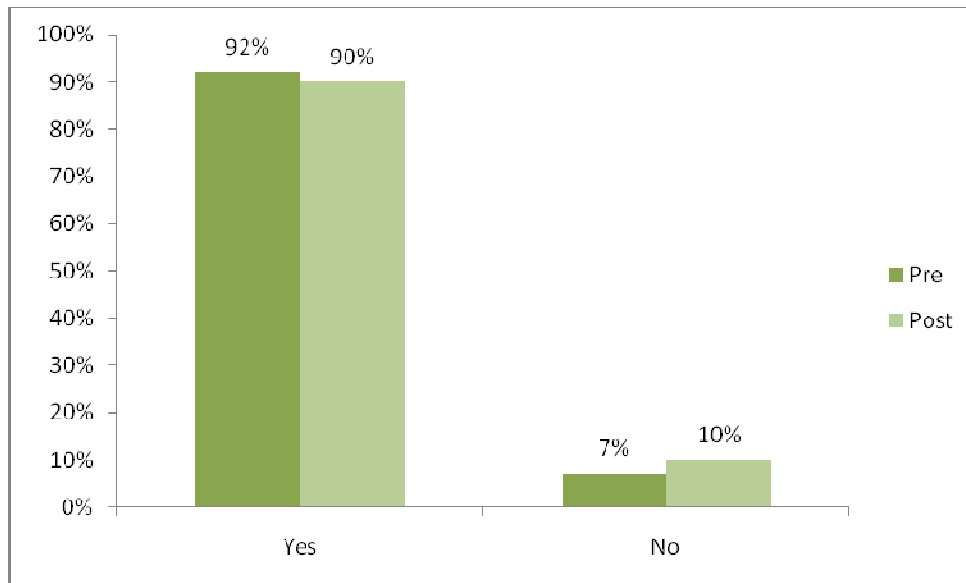
4.1 Unprompted Advertising Recall

Respondents were asked: *Do you recall seeing and/or hearing any advertising in the last three months about the harmful effects of smoking?*

Findings: Recall of advertising about smoking was at very high levels in both the pre and post surveys. Ninety-two percent of respondents recalled advertising in the pre survey and 90 percent in the post survey.

There has not been a significant change in the unprompted recall of advertising about the harmful effects of smoking as a result of the Adrian TVC.

Figure 1: Unprompted advertising recall



Base: All respondents n=468/462

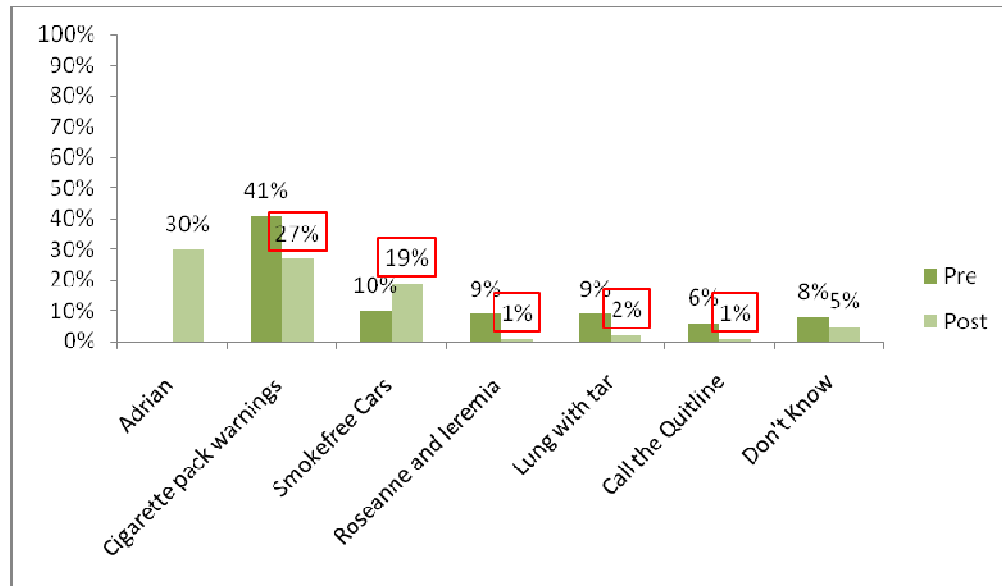
4.2 Unprompted Advertising Recall: First Mentioned Advertisement

Respondents who recalled advertising about smoking were asked: *Please describe the first advertisement that comes to mind.*

Findings: In the post survey the advertising recalled by the highest proportion of respondents, as the first advertisement that came to mind, was the Adrian ad (30%). The high top of mind recall of the Adrian ad resulted in a significant decrease in recall of the cigarette and tobacco packet warnings (down from 41% to 27%).

Awareness of the Adrian ad was similar across all demographic groups. There were no significant differences, by demographic group, for first mentioned recall of the Adrian ad.

Figure 2: First mentioned advertisement (unprompted)



Base: Respondents who have seen advertising n=432/415

4.3 Unprompted Advertising Recall: Total Recall

Respondents who recalled advertising were asked: *Can you please now tell me of all other advertisements you have seen about the harmful effects of smoking?*

The graph below shows the total unprompted advertising recall (first advertising mentioned as well as all other advertisements mentioned).

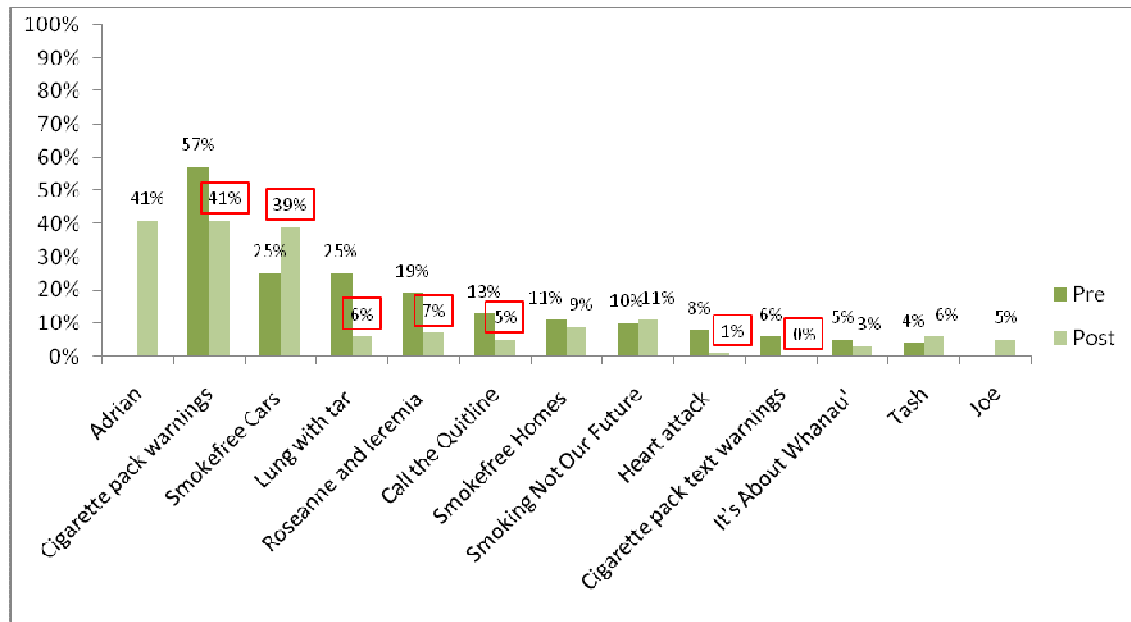
Findings: in the post survey the advertising recalled by the highest proportion of respondents (total unprompted recall) was: the Adrian ad (41%). Other large, and statistically significant changes between the pre and post survey, were as follows:

- A decrease in the proportion of respondents that spontaneously recalled cigarette and tobacco packet warnings between the pre and post survey (down from 57% to 41%)
- An increase in the proportion who recalled Smokefree Cars (up from 25% to 39%).

The respondents that were significantly more likely than other respondents to spontaneously recall the Adrian ad were:

- Aged 20-49 years (46%)
- Female (47%).

Figure 3: All advertisements recalled (unprompted)



Base: Respondents who have seen advertising n=432/415

4.4 Prompted (Total) Advertising Recall: Adrian

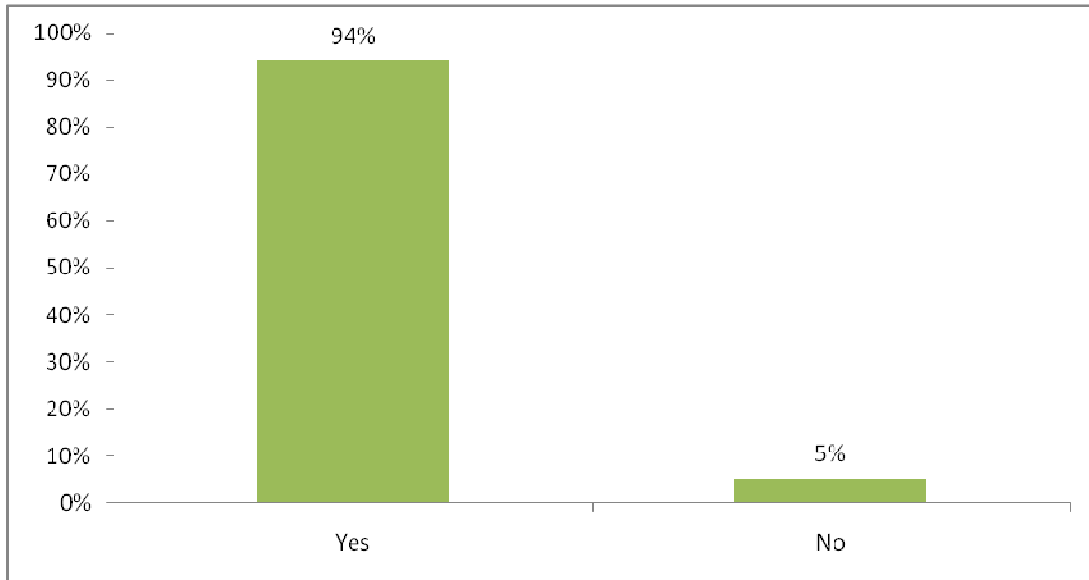
All respondents were asked: *You may have already mentioned this, but just to be sure, do you recall the following advertisement? A series of ads showing Adrian a man in his 50s, he speaks through a hole in his throat (trachy). He has oral cancer and has had radiotherapy and an operation to remove his tongue and can't eat.*

The graph below shows the prompted advertising recall for the Adrian ad.

Findings: Ninety-four percent of respondents in the post survey recalled seeing the Adrian ad.

Prompted recall of the Adrian ad was similar across all demographic groups. There were no significant differences, by demographic group, for prompted recall of the Adrian ad.

Figure 4: Prompted recall of Adrian ad



Base: All respondents n=462

5.0 Adrian: Message Recall

Objective: To determine the extent to which the intended audience understood the messages from the Adrian ad.

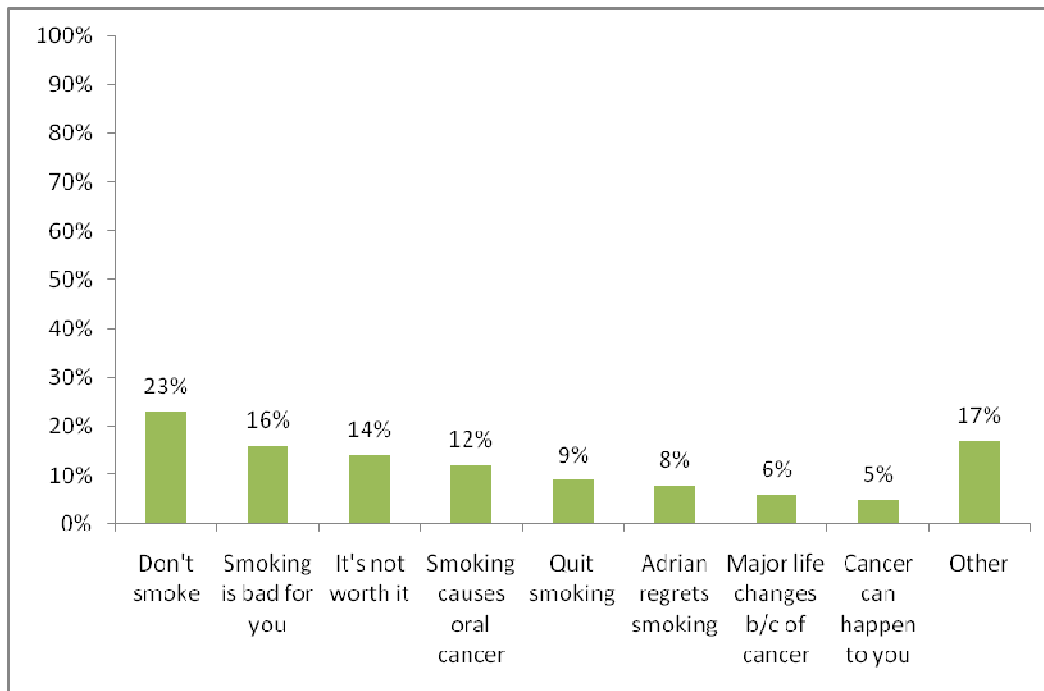
Conclusion: There was no one clear message that respondents associated with the Adrian ad. The most commonly recalled messages were generic stop smoking messages.

5.1 Adrian: Unprompted Message Outtake

Respondents who recalled advertising were asked: *And what were the messages from these ads about Adrian?*

Findings: The most common messages recalled from the Adrian ad were: don't smoke (23%), smoking is bad for you (16%), it's not worth it (14%), smoking causes oral cancer (12%), quit smoking (9%), Adrian regrets smoking (8%), Adrian has had major life changes because of cancer (6%) and cancer can happen to you (5%).

Figure 5: Messages recalled from the Adrian ad



Base: Respondents who recalled the Adrian ad n=436

The respondents who were significantly more likely than the rest of the population to say *don't start smoking* were:

- NZ European/Other (27%).

The respondents who were significantly more likely than the rest of the population to say *smoking is bad for you* were:

- A caregiver (24%).

The respondents who were significantly more likely than the rest of the population to say *it's not worth it* were:

- Māori (20%)
- 15-19 years (33%)
- Intending to quit within the next 30 days (25%).

6.0 Adrian: Credibility

Objective: To determine the extent to which the intended audience perceived the messages from the Adrian ad were credible.

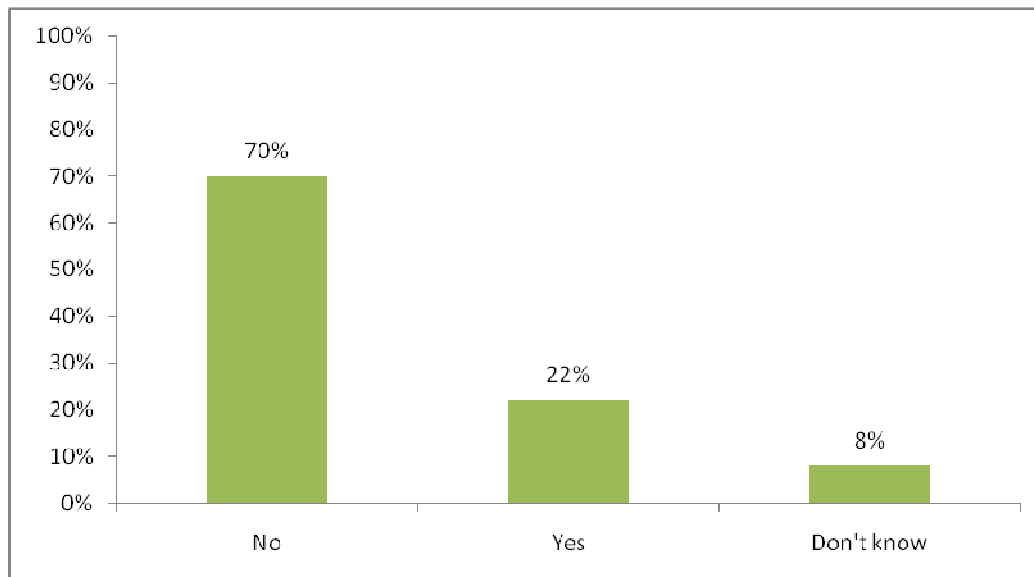
Conclusion: Adrian was generally perceived to be a credible person, 70 percent of respondents believed that Adrian was not an actor. Most respondents did accept that what happened to Adrian is as likely to happen to light as to heavy smokers. Respondents were however divided on whether they believed that what had happened to Adrian was as likely to happen to smokers as non smokers – resistance to accept the message that smoking does increase the risk of illness like oral cancer is still evident.

6.1 Adrian is an Actor

Respondents who recalled the Adrian ad were asked: *to answer yes or no to the following question about the Adrian ad: I think Adrian is an actor?*

Findings: Seventy percent of respondents believe Adrian is a real person, 22 percent think he is an actor and eight percent are unsure.

Figure 6: Adrian is an actor



Base: Respondents who recalled the Adrian ad n=436

The respondents who were significantly more likely than the rest of the population to think Adrian was not an actor were:

- 20-49 years (76%)
- Those who had noticed picture warnings on cigarette and tobacco packets (72%)
- A caregiver (76%)
- Those that said the dangers of smoking had not been exaggerated (77%).

The respondents who were significantly more likely than the rest of the population to think Adrian was an actor were:

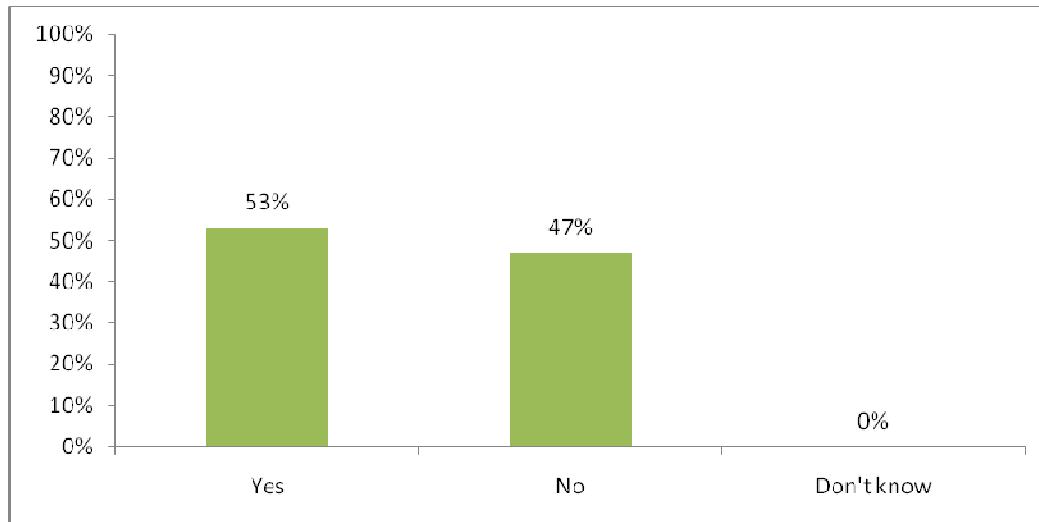
- 50 years plus (32%)
- Those that said the dangers of smoking had been exaggerated (32%)
- Living in Whanganui DHB (32%).

6.2 Learnt New Information From the Adrian Ad

Respondents who recalled the Adrian ad were asked: *to answer yes or no to the following question about the Adrian ad: I have learnt new information about the risks of smoking from the Adrian ad.*

Findings: Fifty-three percent of respondents said they had learnt new information about the risks of smoking from the Adrian ad, 47 percent said they had not.

Figure 7: Learnt new information from the Adrian ad



Base: Respondents who recalled the Adrian Ads n=436

The respondents who were significantly more likely than the rest of the population to say they had learnt new information from the Adrian Ads were:

- Māori (68%)
- 15-19 years (94%)
- Intending to quit in the next 6 months, but not in the next 30 days (59%)
- Intending to quit in the next 30 days (66%)
- Those who had noticed picture warnings on cigarette and tobacco packets (55%)
- Not a caregiver (71%).

The respondents who were significantly more likely than the rest of the population to say they had not learnt new information from the Adrian Ads were:

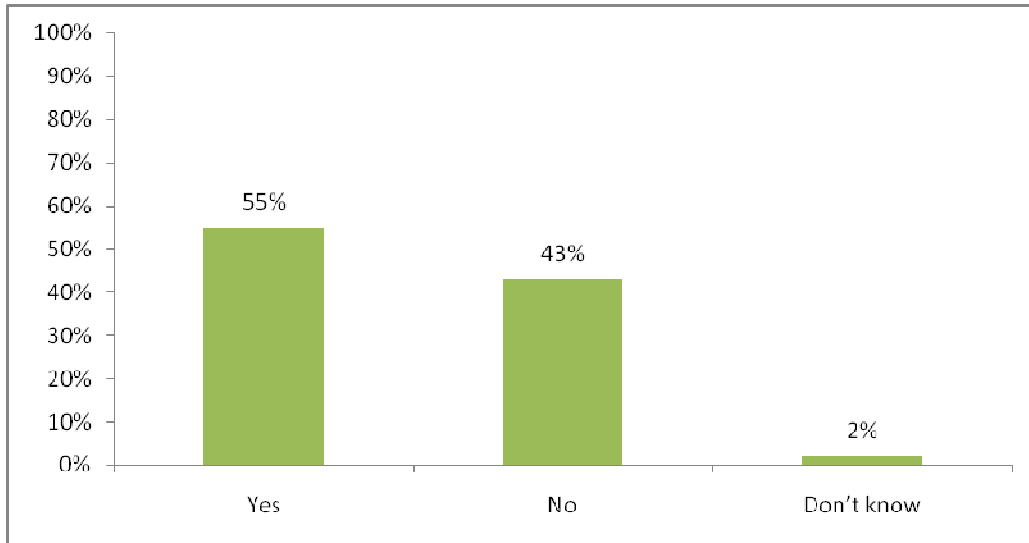
- NZ European/other (55%)
- Aged 50 years plus (60%)
- Not intending to quit (62%)
- Those who had not noticed picture warnings on cigarette and tobacco packets (74%)
- In a household with adults only (56%).

6.3 What Has Happened to Adrian Is As Likely To Happen To Smokers as Non Smokers

Respondents who recalled the Adrian ad were asked: *to answer yes or no to the following question about the Adrian ad: I think what has happened to Adrian is just as likely to happen to smokers as non-smokers.*

Findings: Fifty-five percent of respondents said what has happened to Adrian is as likely to happen to smokers as to non-smokers, 43 percent said the likelihood is not the same.

Figure 8: What has happened to Adrian is as likely to happen to smokers as non-smokers



Base: Respondents who recalled the Adrian ad n=436

The respondents who were significantly more likely than the rest of the population to say what has happened to Adrian is just as likely to happen to smokers as non-smokers were:

- Māori (63%)
- Those that said the dangers of smoking have been exaggerated (67%).

The respondents who were significantly more likely than the rest of the population to say what has happened to Adrian is not just as likely to happen to smokers as non-smokers were:

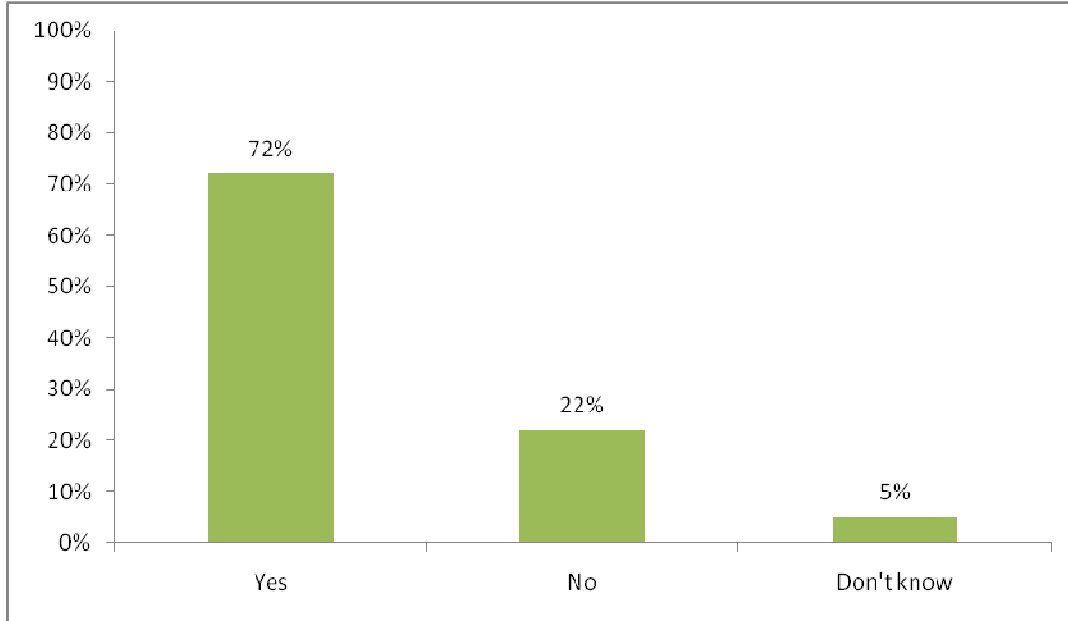
- NZ European/Other (47%)
- Those that said the dangers of smoking have not been exaggerated (50%).

6.4 What Has Happened to Adrian Is As Likely To Happen To Heavy Smokers as Light Smokers

Respondents who recalled the Adrian ad were asked: *to answer yes or no to the following question about the Adrian ad: I think what has happened to Adrian is just as likely to happen to heavy smokers as to light smokers.*

Findings: Seventy-two percent of respondents said what has happened to Adrian is as likely to happen to heavy smokers as light smokers, 22 percent said the likelihood is not the same.

Figure 9: What has happened to Adrian is as likely to happen to heavy smokers as light smokers



Base: Respondents who recalled the Adrian ad n=436

The respondents who were significantly more likely than the rest of the population to say what has happened to Adrian is just as likely to happen to heavy smokers as light smokers were:

- Māori (78%)
- Female (76%).

The respondents who were significantly more likely than the rest of the population to say what has happened to Adrian is not just as likely to happen to heavy smokers as light smokers were:

- Male (27%).

7.0 Message Acceptance

Objective: To determine the extent to which the intended audience have changed their level of acceptance of the messages from the Adrian ad (i.e. extent to which they agree that smoking can cause mouth/oral cancer).

Conclusion: The research found that the Adrian ad has raised levels of awareness that smoking can cause oral cancer. Unprompted, a third of respondents now identify oral cancer as being a disease caused by smoking (up from 22% in the pre survey to 33% in the post survey). Oral cancer has risen in prominence, up from the seventh most likely to be identified as an effect of smoking on the body to third most likely to be identified. There has also been a significant increase in the proportion of respondents that agree to a 'large extent' that smoking causes oral cancer (up from 41% to 54%).

7.1 Unprompted Awareness of Effects on the Body Caused By Smoking

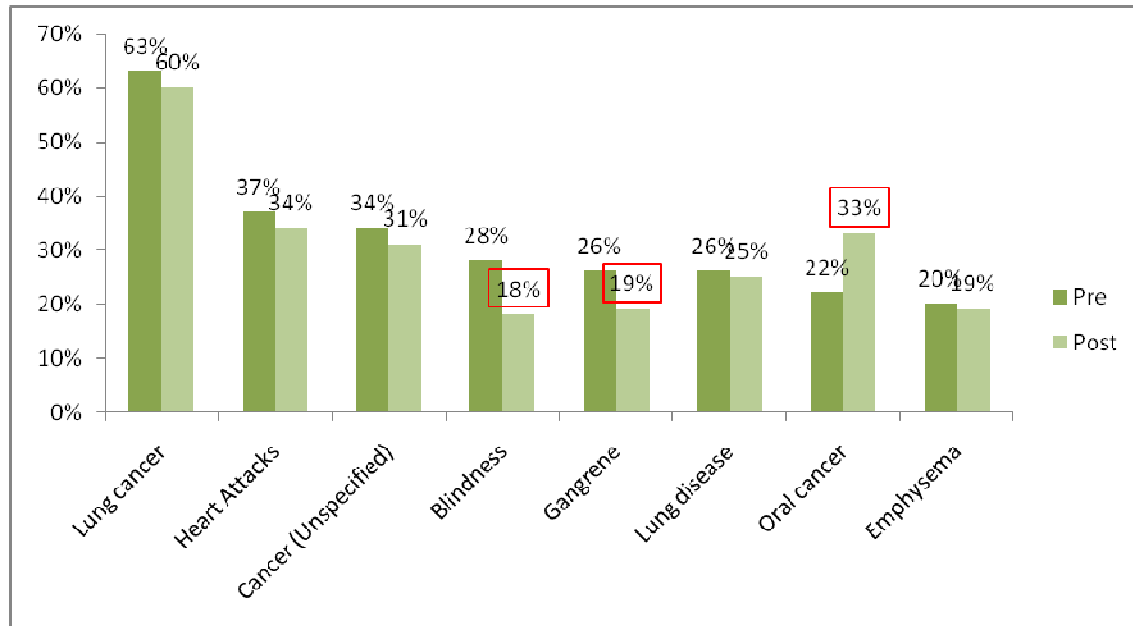
Respondents were asked: *Please can you tell me all of the effects to the body, including diseases, you are aware of that can be caused by smoking? Please list as many as you can remember.*

Findings: There has been a significant increase in the proportion of respondents that spontaneously mention oral cancer as being an effect of smoking on the body (up from 22% in the pre survey to 33% in the post survey). Oral cancer has risen in prominence, up from the seventh most likely to be identified as an effect of smoking on the body to third most likely to be identified.

The most common dangers of smoking spontaneously mentioned by respondents continue to be lung cancer (63% in the pre survey and 60% in the post survey) and heart attacks (37% in the pre survey and 34% in the post survey).

There have been significant decreases between the pre and the post survey in the proportion of respondents that identify blindness and gangrene as being an effect of smoking on the body.

Figure 10: Dangers of smoking



Base: All respondents n=468/462

There has been an apparent increase in likelihood to mention oral cancer could be caused by smoking across all demographic groups.

For the pre survey there were no demographic groups that were significantly more likely than the rest of the population to mention oral cancer. In the post survey 20-49 years olds show evidence of a greater awareness of oral cancer than the rest of the sample (37%).

Looking across the demographic groups, those showing the largest increase in awareness of oral cancer (where the sample size is large enough to identify a statistically significant change) are:

- 20-49 years (awareness up from 24% to 37%)
- Living in a household with an income of between \$30,001 and \$50,000 per annum (awareness up from 23% to 40%)
- NZ European/Other (awareness up from 23% to 34%)
- In a household with two adults plus one or more children (awareness up from 25% to 39%).

7.2 Perception of the Extent to Which Smoking Contributes to Key Illnesses

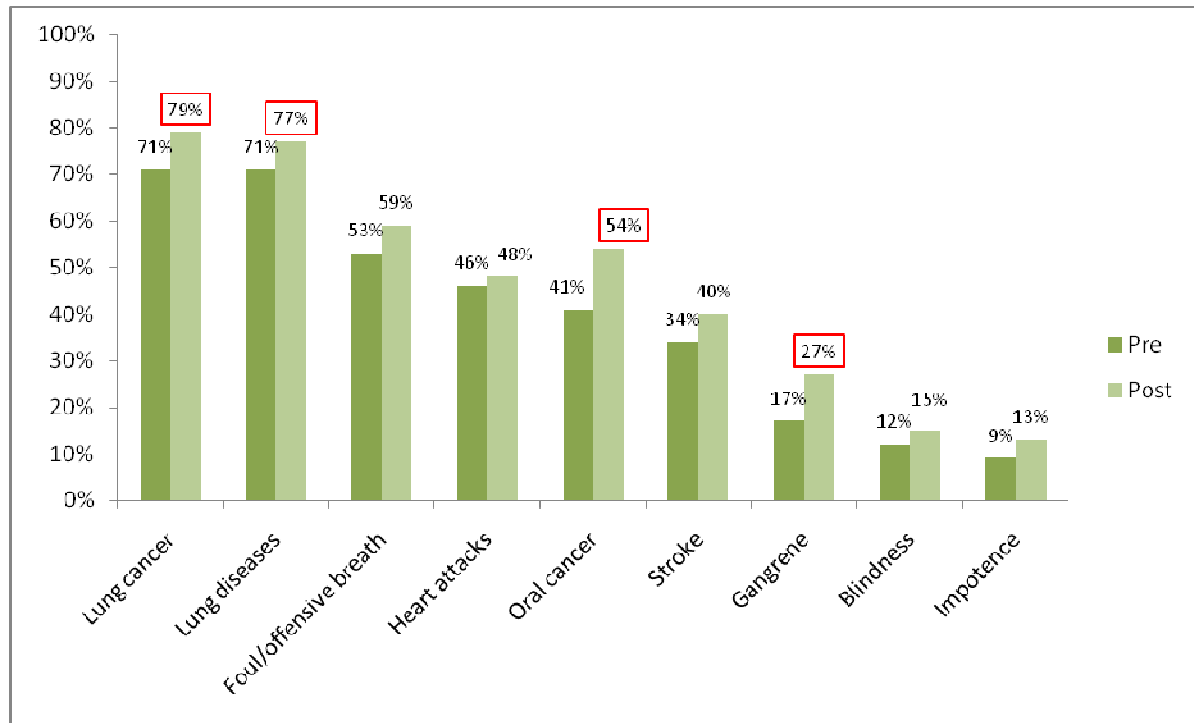
Respondents were asked: *I am going to read out a list of health conditions. From what you have read, heard or known, please indicate the extent to which you think smoking tobacco contributes to each of the following conditions...(list) Is that...large extent, some extent, small extent, no extent:*

The graph below compares the extent to which respondents believed smoking contributed to key health conditions to a **large** extent for both the pre and the post survey.

Findings: Between the pre and post surveys there has been a significant increase in the proportion of respondents that believe smoking contributes to the following key illnesses to a large extent:

- Oral cancer (up from 41% to 54%)
- Gangrene (up 17% to 27%)
- Lung cancer (up from 71% to 79%)
- Lung diseases (up from 71% to 77%).

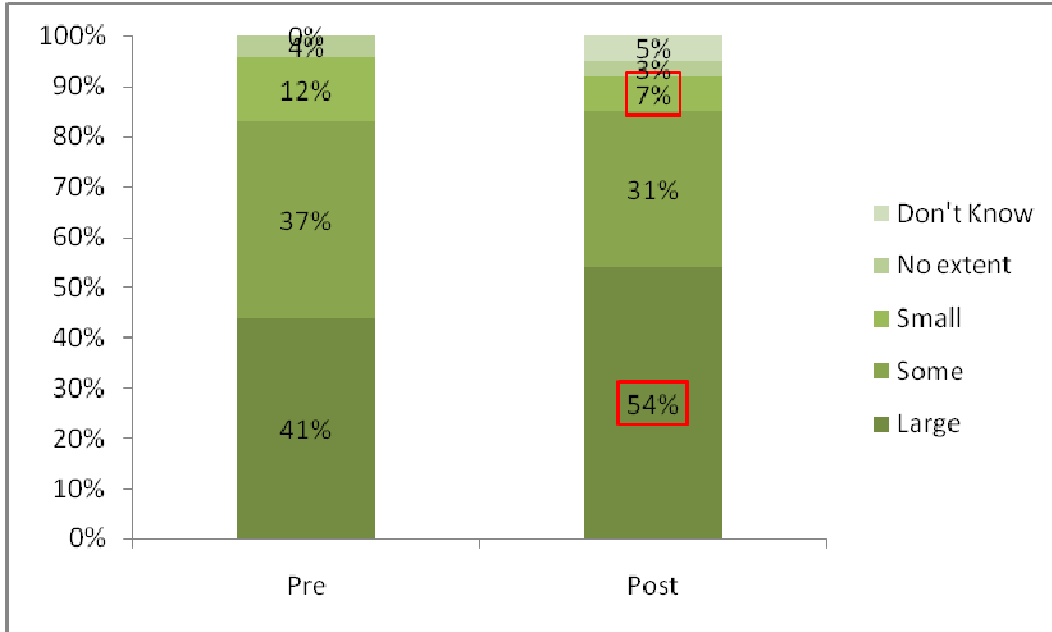
Figure 11: Smoking contributes to the following health conditions to a 'large extent'



Base: All respondents n=468/462

The graph that follows shows the full responses (large extent, some extent, small extent, no extent and don't know) for oral cancer for the both the pre and post surveys.

Figure 12: Smoking contributes to oral cancer



Base: All respondents n=468/462

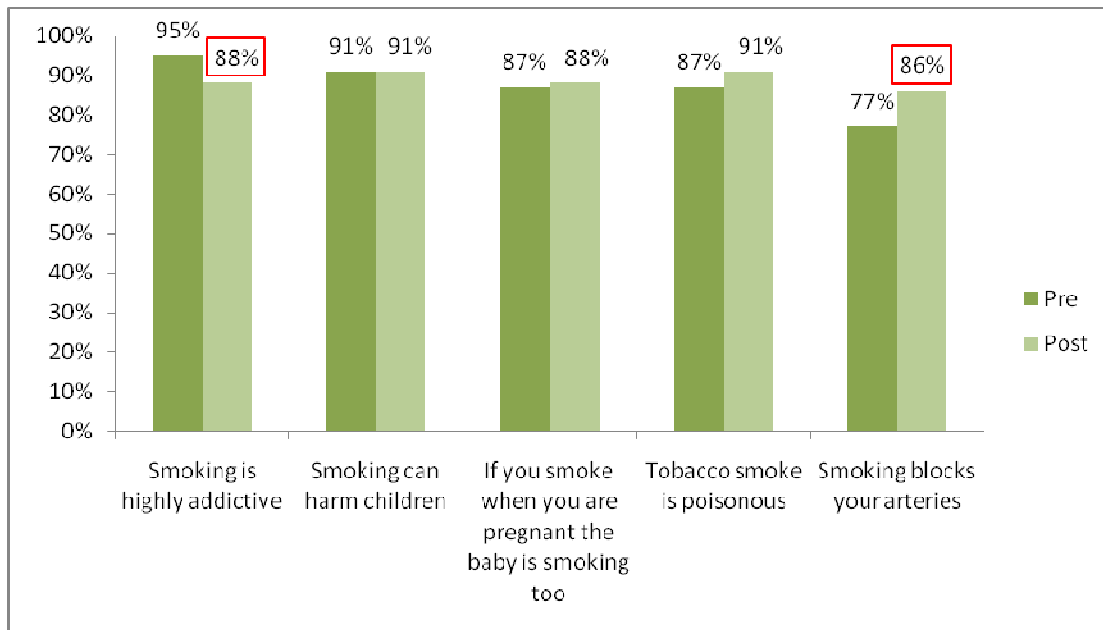
7.3 Understanding of Smoking Harms

Respondents were asked: *From what you have read, heard or known, please indicate how much you agree or disagree with each of the following statements on a scale of one to four where one is strongly disagree and four is strongly agree:*

- Smoking is highly addictive
- Smoking can harm children
- If you smoke when you are pregnant the baby is smoking too
- Tobacco smoke is poisonous
- Smoking blocks your arteries.

Findings: Agreement (agree or strongly agree) with these statements continues to be high – ranging between 86 and 88 percent. Between the pre and post surveys there has been a significant increase in the proportion of respondents that agree smoking blocks your arteries (up 9%) and a significant decrease in the proportion that agree smoking is highly addictive (down 7%).

Figure 13: Understanding of smoking harms: strongly agree or agree



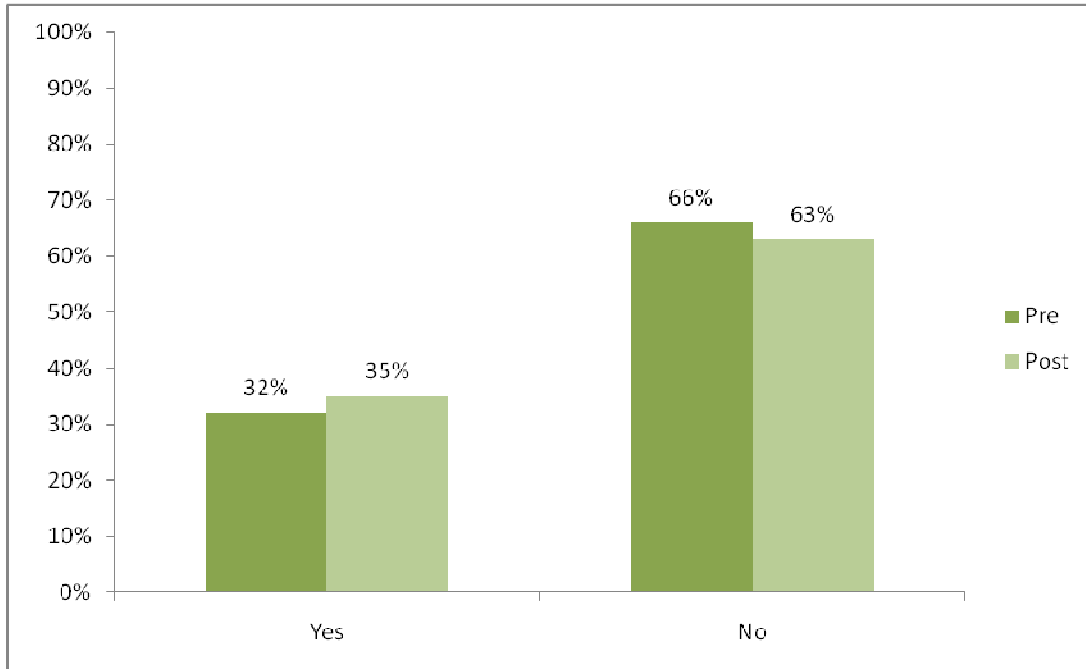
Base: All respondents n=468/462

7.4 Dangers of Smoking

Respondents were asked: *Do you believe the dangers of smoking have been exaggerated?*

Findings: There has not been a significant change in the proportion of respondent that believe the dangers of smoking have been exaggerated between the pre and post surveys. Around a third of respondents (35%) continue to believe that the dangers of smoking have been exaggerated.

Figure 14: Dangers of smoking exaggerated



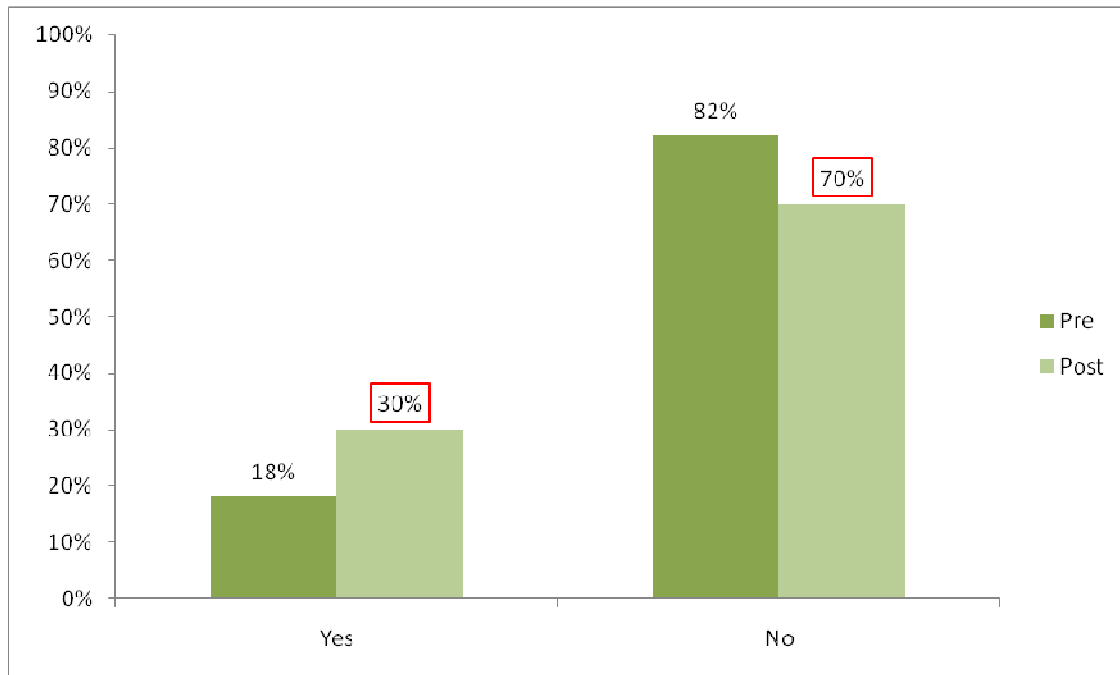
Base: All respondents n=468/462

7.5 Learning About the Harmful Effects of Smoking

Respondents were asked: *Have you learnt anything new about the harmful effects of smoking in the last three months?*

Findings: There has been a significant increase between the pre and post surveys in the proportion of respondents that agree they have recently learnt something new about the harmful effects of smoking (up from 18% to 30%).

Figure 15: Recently learnt anything new about the harmful effects of smoking?



Base: All respondents n=468/462

Respondents who did recall recently learning new information about the harmful effects of smoking were asked: *What was it that you learnt?*

Findings: The most common new learnings about the harmful effects of smoking mentioned by five percent or more of the respondents in the post survey were: smoking causes damage to the body (24%), smoking can cause oral cancer (21%), diseases from smoking don't just affect old people (15%), smoking is harmful (14%), quit smoking (8%), smoking can cause gangrene (7%), second hand smoke is poisonous (6%), smoking is expensive (5%) and second hand smoke harms children (5%).

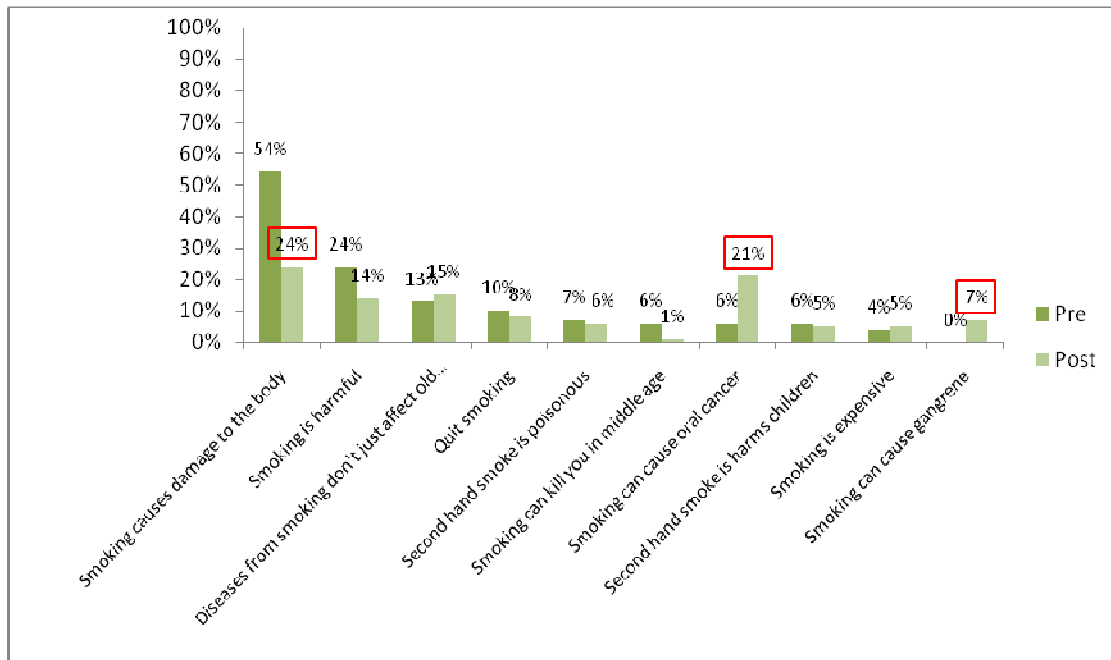
Findings: Between the pre and post surveys there has been a significant increase in the proportion of respondents that have newly learnt:

- Smoking can cause oral cancer (up from 6% to 21%)
- Smoking can cause gangrene (up from 0% to 7%).

There has been a corresponding significant decrease in respondents saying they have recently learnt:

- Smoking causes damage to the body (down from 54% to 24%)
- Smoking is harmful (down from 24% to 14%).

Figure 16: Type of recent learning about the harmful effects of smoking



Base: Respondents who have learnt something in the last three months n=83/139

Respondents who did recall recently learning new information about the harmful effects of smoking were asked: *Where did you learn it from?*

Findings: TV advertising was the main source of new information about the harmful effects of smoking in the post survey (63%). The other key sources were cigarette and tobacco packets (53%).

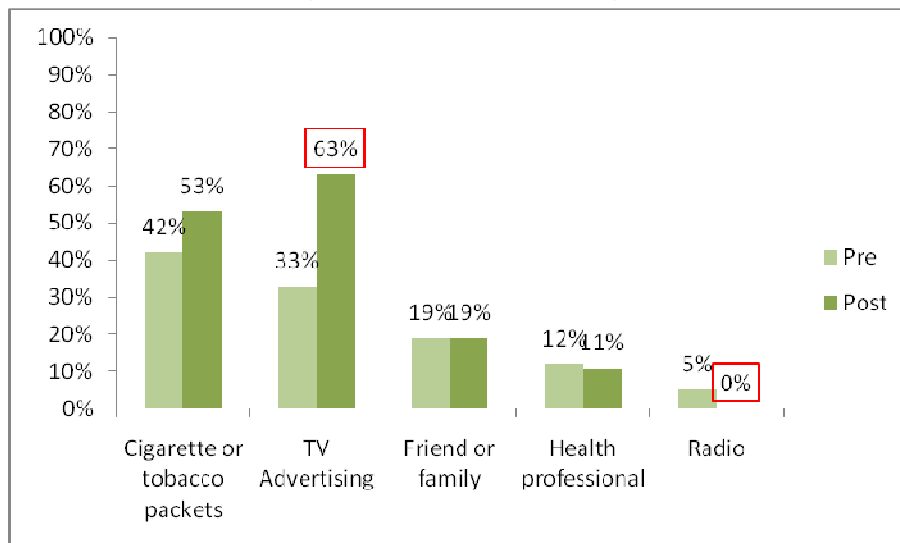
Between the pre and post surveys there has been a significant increase in the proportion of respondents that have newly learnt information from:

- TV advertising (up from 33% to 63%)

Between the pre and post surveys there has been a significant decrease in the proportion of respondents that have newly learnt information from:

- Radio (down from 5% to 0%).

Figure 17: Location of learnings



Base: Respondents who have learnt something in the last three months n=84/139

8.0 Self Reported Response to the Adrian Ad

Objective: To determine the audience's personal reaction to the TVC.

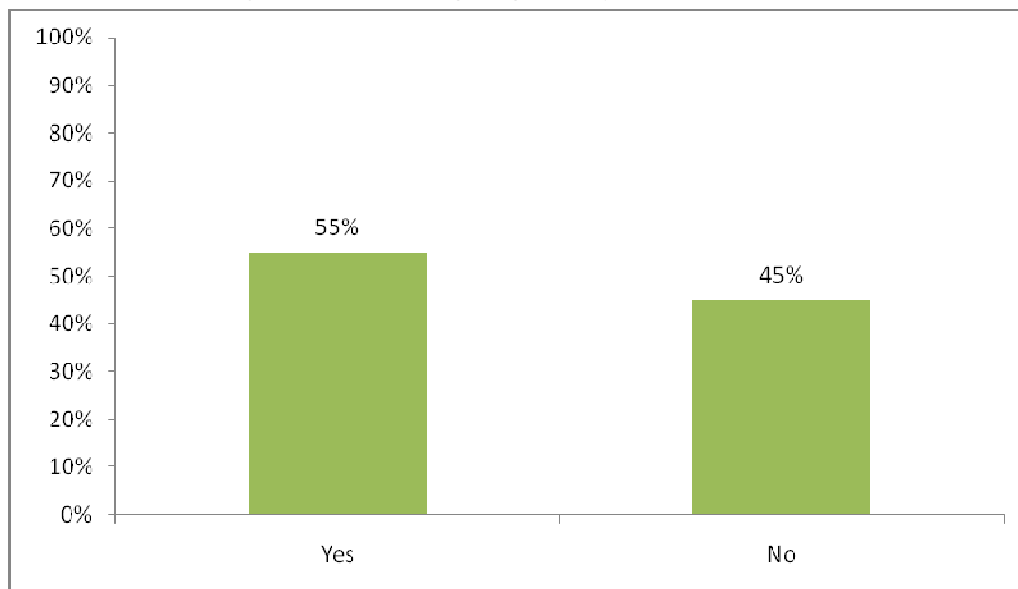
Conclusion: The Adrian ad is causing serious concern among around half of the sample population. Just over half of the respondents (including both current smokers and recent quitters) said the Adrian ad had caused them to be concerned about their own health. Likewise, around half of the current smokers said the Adrian ad had made them consider quitting smoking. Respondents aged 20-49 years and those with a low nicotine dependency are more likely to be concerned or considering quitting smoking as a result of seeing the Adrian ad.

8.1 Adrian Ad Prompts Worry About Own Health

Respondents who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: I feel worried about my own health when I see the Adrian ad.*

Findings: Just over half of respondents who could recall the Adrian ad (55%) said they felt worried about their own health when they saw the Adrian ad.

Figure 18: Adrian ad prompts worry about own health



Base: Could recall Adrian ad n=436

The respondents who were significantly more likely than the rest of the population to say yes were:

- Māori (66%)
- Aged 20-49 years (60%)
- Current smokers (57%)
- Those with a low nicotine dependency (62%)
- Intending to quit within the next 6 months but not within the next 30 days (67%)
- Intending to quit within the next 30 days (80%)
- Those who had noticed pack warnings on cigarette and tobacco packets (57%)
- Those that said the dangers of smoking had not been exaggerated (61%).

The respondents who were significantly more likely than the rest of the population to say *no* were:

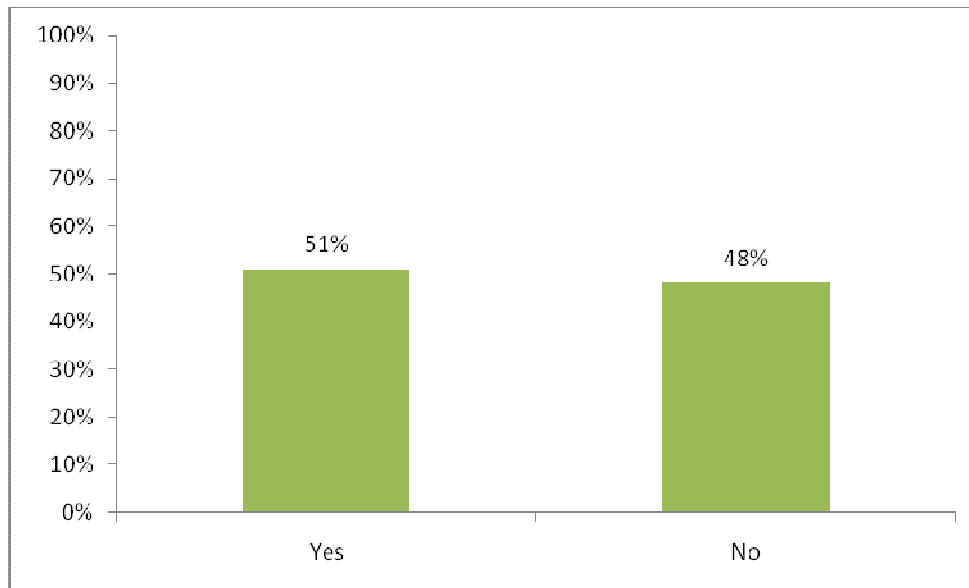
- NZ/European other (51%)
- Aged 50 years plus (61%)
- Recent quitters (63%)
- Not intending to quit (66%)
- Those that said the dangers of smoking had been exaggerated (57%).

8.2 Encouraged to Quit Smoking By the Adrian Ad

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: I feel encouraged to quit smoking when I see the Adrian ad.*

Findings: Just over half of the current smokers who could recall the Adrian ad (51%) said the Adrian ad encouraged them to quit smoking.

Figure 19: Encouraged to quit smoking by the Adrian ad



Base: Current smokers who could recall Adrian ad n=380

The respondents who were significantly more likely than the rest of the population to say *yes* were:

- Māori (57%)
- Aged 15-19 years (77%)
- Intending to quit within the next 6 months but not within the next 30 days (63%)
- Intending to quit within the next 30 days (80%)
- Those who were caregivers (56%)
- Those that said the dangers of smoking had not been exaggerated (60%).

The respondents who were significantly more likely than the rest of the population to say *no* were:

- Aged 50 years plus (61%)
- Not intending to quit (81%)
- Living in a household with adults only (55%)
- Those that said the dangers of smoking had been exaggerated (64%).

9.0 Consideration of Taking Action

Objective: To determine the extent to which the intended audience considered taking action as a result of seeing the Adrian ad.

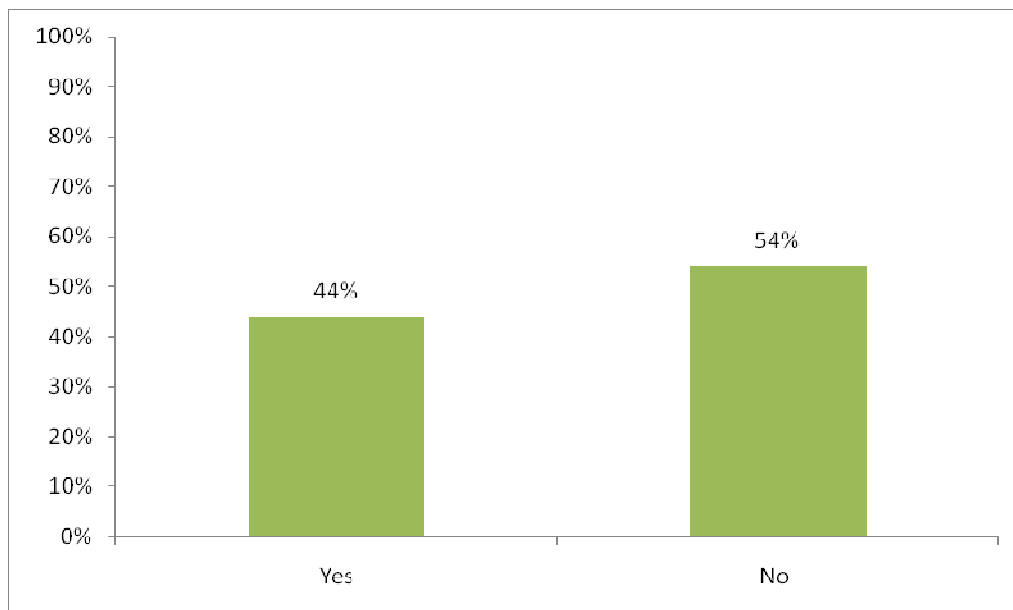
Conclusion: Forty percent of the current smokers, who have seen the Adrian ad, say seeing the ad has made them more likely to quit smoking. There has, however, not been a significant increase between the pre and post surveys in the proportion of smokers who are actively considering quitting. Twenty-nine percent of respondents said seeing the Adrian ad made them more likely to call the Quitline. There has, however, not been a significant increase in the proportion of respondents that said they will call the Quitline between the pre and post surveys.

9.1 Current Smokers: Seeing the Adrian Ad Has Made Me More Likely to Quit Smoking

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Seeing the Adrian ad has made me more likely to quit smoking.*

Findings: Forty-four percent of the current smokers who can recall the Adrian ad say this ad has made them more likely to quit smoking.

Figure 20: Seeing the Adrian ad has made me more likely to quit smoking



Base: Current smokers who could recall Adrian ad n=380

The respondents who were significantly more likely than the rest of the population to say yes were:

- Māori (52%)
- Aged 15-19 years (73%)
- Those with a low nicotine dependency (50%)
- Intending to quit within the next 6 months but not within the next 30 days (57%)
- Intending to quit within the next 30 days (75%)
- Male (50%)
- Those that said the dangers of smoking had not been exaggerated (51%).

The respondents who were significantly more likely than the rest of the population to say *no* were:

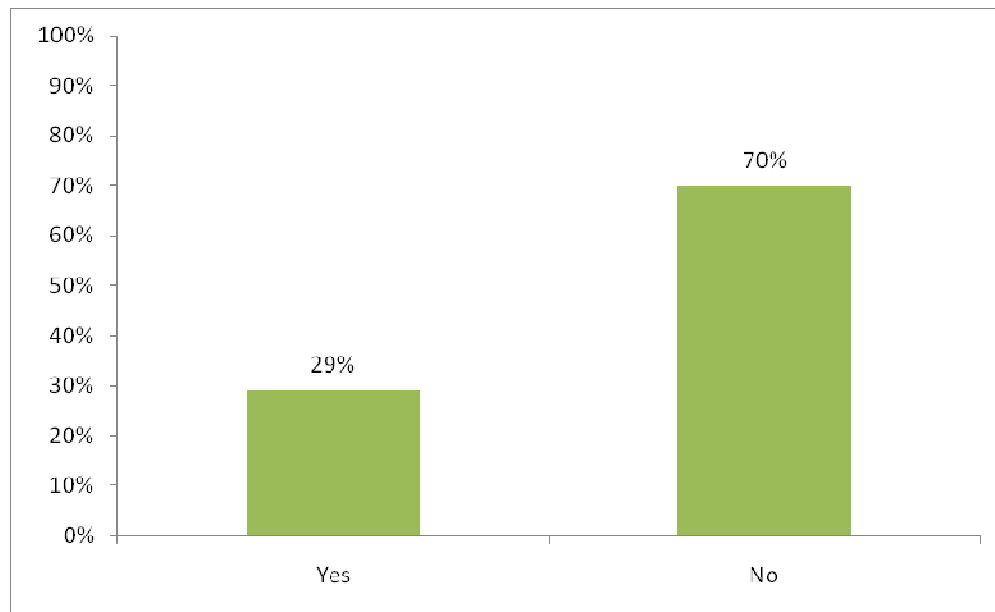
- NZ European/other (58%)
- Aged 50 years plus (67%)
- Daily smokers (56%)
- Those with a high nicotine dependency (64%)
- Not intending to quit (88%)
- Female (59%)
- Those that said the dangers of smoking had been exaggerated (65%).

9.2 Current Smokers: Seeing the Adrian Ad Has Made Me More Likely to Call the Quitline

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Seeing the Adrian ad has made me more likely to call the Quitline.*

Findings: Twenty-nine percent of the current smokers who can recall the Adrian ad say this ad has made them more likely to call the Quitline.

Figure 21: Seeing the Adrian ad has made me more likely to call the Quitline



Base: Current smokers who could recall Adrian ad n=380

The respondents who were significantly more likely than the rest of the population to say *yes* were:

- Māori (38%)
- Intending to quit within the next 6 months but not within the next 30 days (37%)
- Intending to quit within the next 30 days (51%)
- Those that said the dangers of smoking had not been exaggerated (34%).

The respondents who were significantly more likely than the rest of the population to say *no* were:

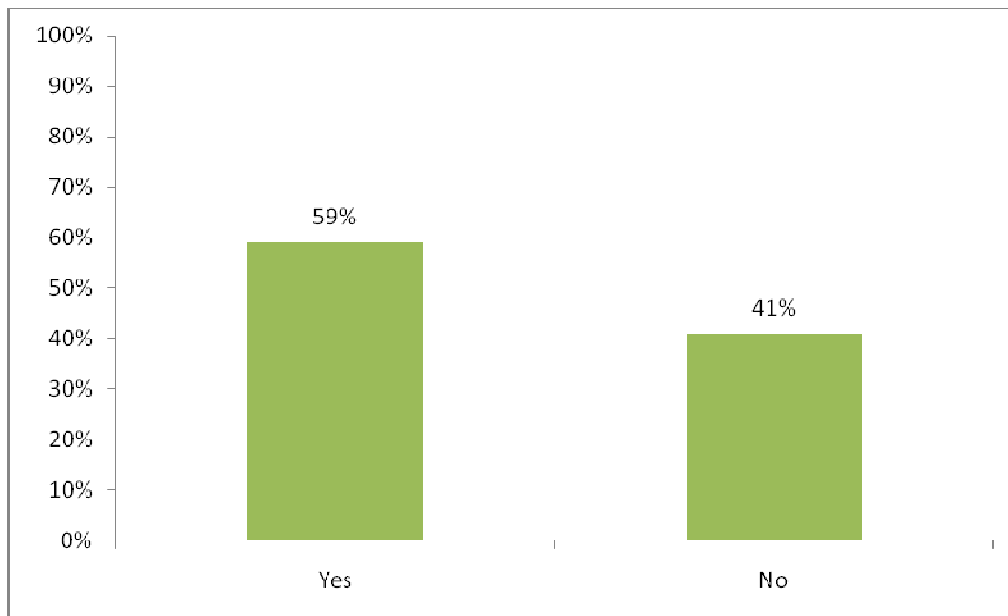
- NZ European/other (75%)
- Not intending to quit (93%)
- Those that said the dangers of smoking had been exaggerated (78%).

9.3 Recent Quitters: Seeing the Adrian Ad Has Made Me More Likely to Stay Quit

Recent quitters who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Seeing the Adrian ad has made me more likely to stay quit.*

Findings: Fifty-nine percent of the recent quitters who can recall the Adrian ad say this ad has made them more likely to stay quit.

Figure 22: Seeing the Adrian ad has made me more likely to stay quit



Base: Recent quitters who could recall Adrian ad n=56

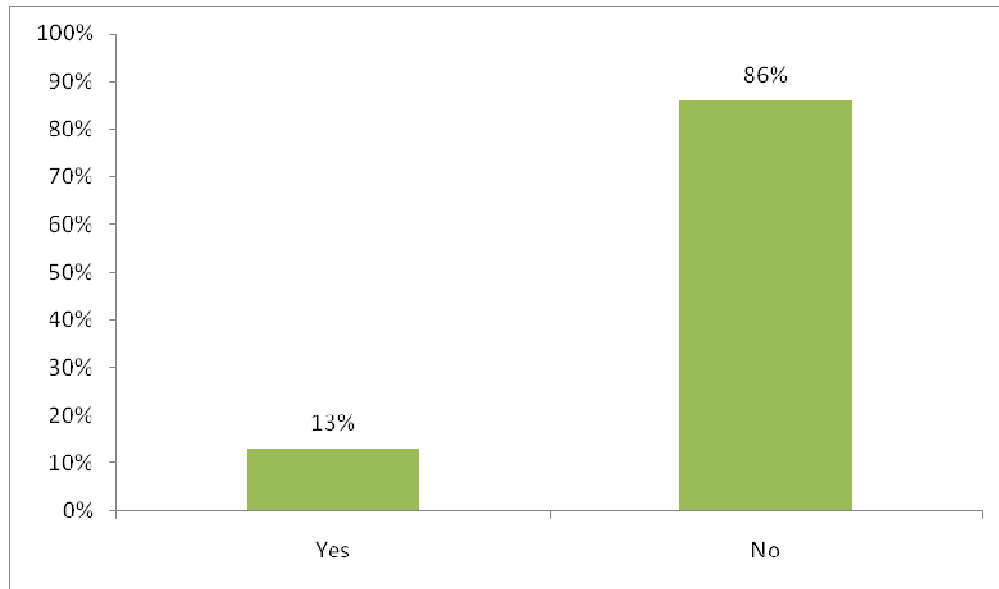
There were no significant differences in the responses to this question.

9.4 Recent Quitters: Seeing the Adrian Ads is an Important Reason Why I Have Quit Smoking

Recent quitters who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Seeing the Adrian ad is an important reason why I have quit smoking.*

Findings: Thirteen percent of the recent quitters who can recall the Adrian ad say this ad say seeing the ad was an important reason why they quit smoking.

Figure 23: Seeing the Adrian ad is an important reason why I have quit smoking



Base: Recent quitters who could recall Adrian ad n=56

There were no significant differences in the responses to this question.

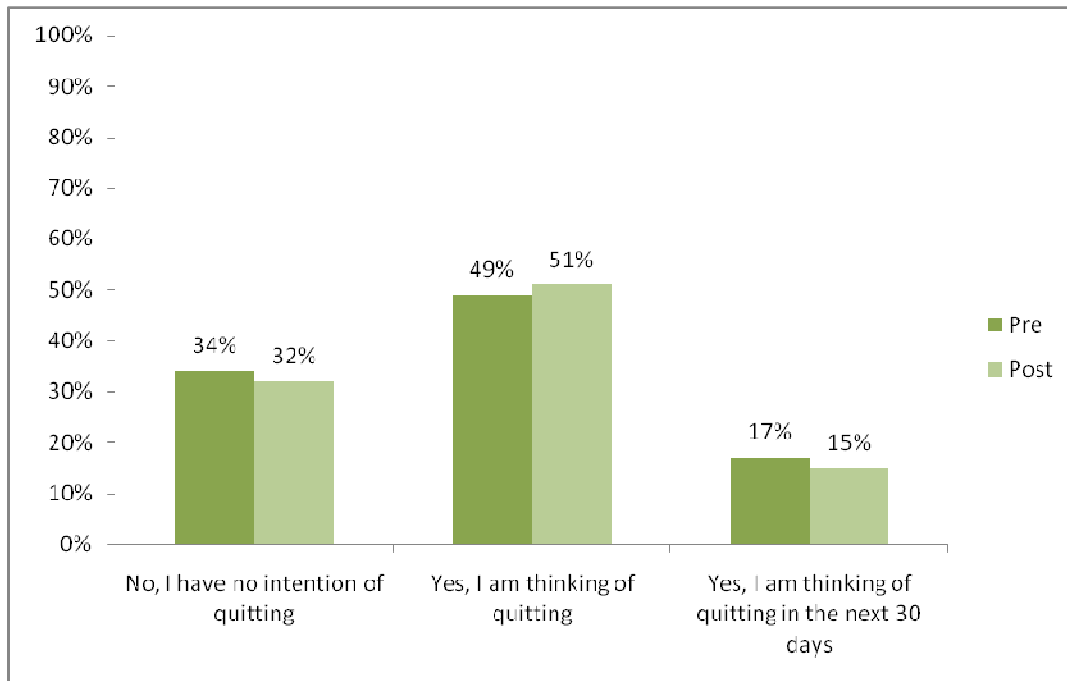
9.5 Intention to Quit

Current smokers were asked: *Are you seriously considering quitting within the next **six months**? Would you say: 'No, I have no intention of quitting', 'Yes, I am thinking of quitting', or 'Yes, I am thinking of quitting in the next 30 days'.*

Respondents: There has not been a significant change in the intention to quit for current smokers between the pre and post surveys.

Similar to the post survey, a third of respondents (32%) said they had no intention of quitting smoking, just over half said they are thinking about quitting (51%) and 15 percent said they are thinking of quitting in the next 30 days.

Figure 24: Intention to quit



Base: Current smokers n=411/404

Differences

across

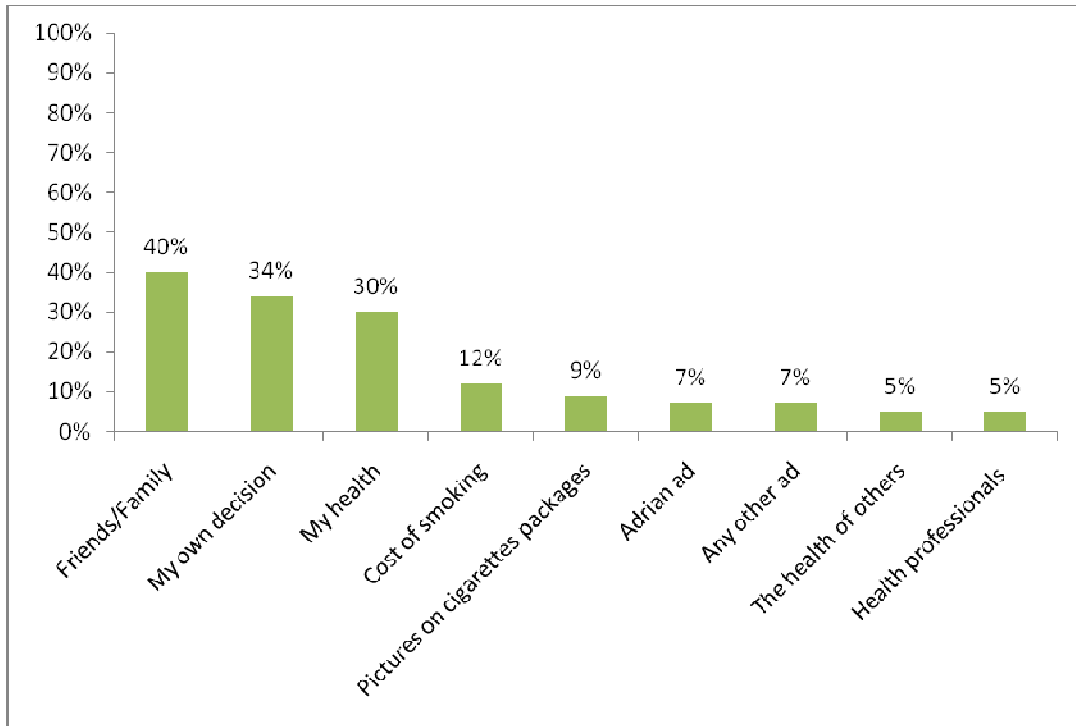
groups?

Current smokers who said they were considering quitting were asked: *Who or what prompted you to consider this?*

Findings: As in the pre survey, the key reasons for considering quitting smoking continue to be friends and family (40%), my own decision (34%) and my health (30%).

Seven percent of respondents say the Adrian ad is a key reason why they are considering quitting smoking.

Figure 25: Reasons to quit



Base: Current smokers considering quitting n=276

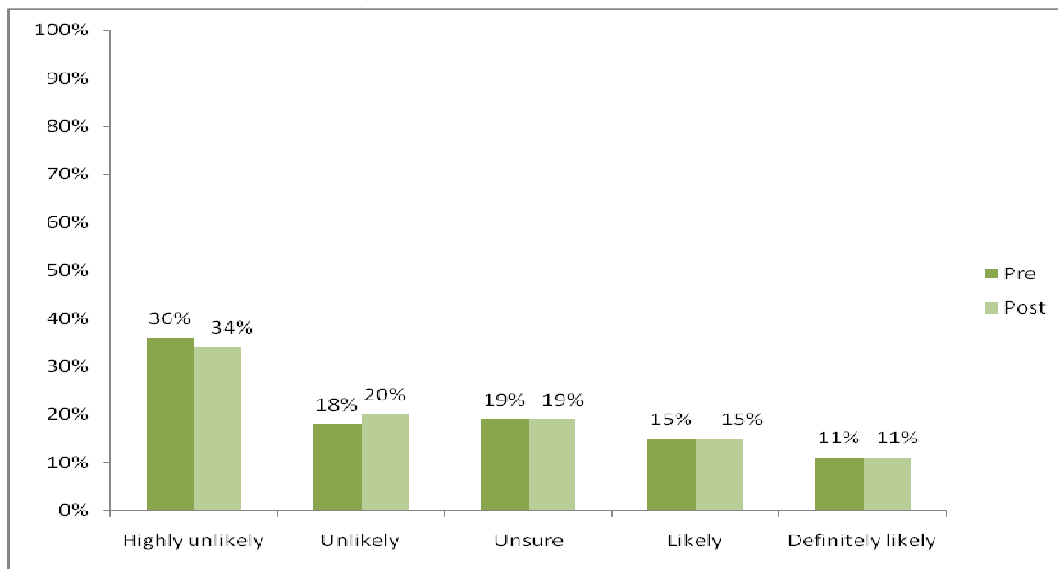
9.6 Intention to Call the Quitline

Current smokers were asked: *You may have already mentioned the Quitline, an advice and support service for people who would like to quit smoking. How likely is it that you would ring the Quitline in the future?*

Findings: Between the pre and post surveys there has not been a significant change in the proportion of respondents that are likely to call the Quitline in the future.

Similar to the pre survey, in the post survey a quarter of current smokers (26%) said they were likely to call the Quitline in the future. A fifth (20%) said they were unlikely to call the Quitline in the future and a third (34%) said they were highly unlikely to call the Quitline in the future.

Figure 26: Likelihood to call Quitline



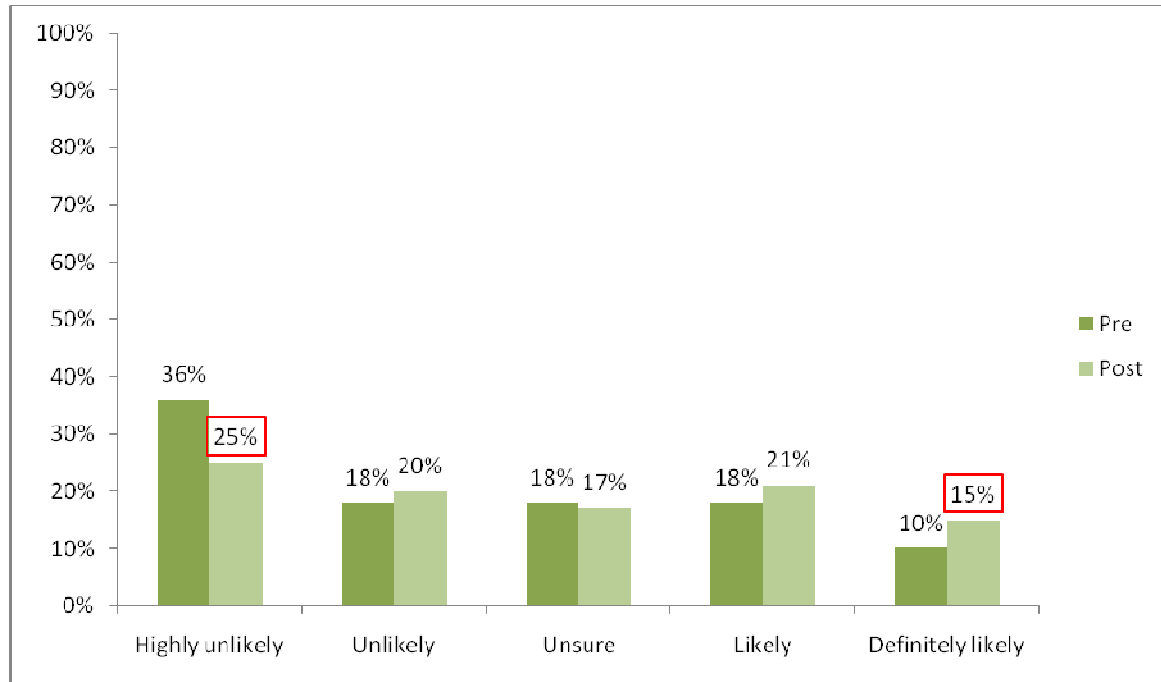
Base: Current smokers n=411/404

Intention to Speak to a Health Professional About Quitting Smoking

Current smokers were asked: *In the future, how likely are you to speak to a doctor, nurse or other health professional about quitting smoking?*

Findings: Between the pre and post surveys there has been a significant increase in the proportion of smokers that say they are definitely likely to speak to a health professional about smoking (up from 10% to 15%). There has been a significant decrease in the proportion of respondents that say they are highly unlikely to speak to a health professional about quitting smoking (down from 36% to 25%).

Figure 27: Likeliness of speaking to health professional about quitting smoking



Base: Current smokers n=411/404

10.0 Action Taken

Objective: To determine the extent to which the intended audience took action as a result of seeing the Adrian ad

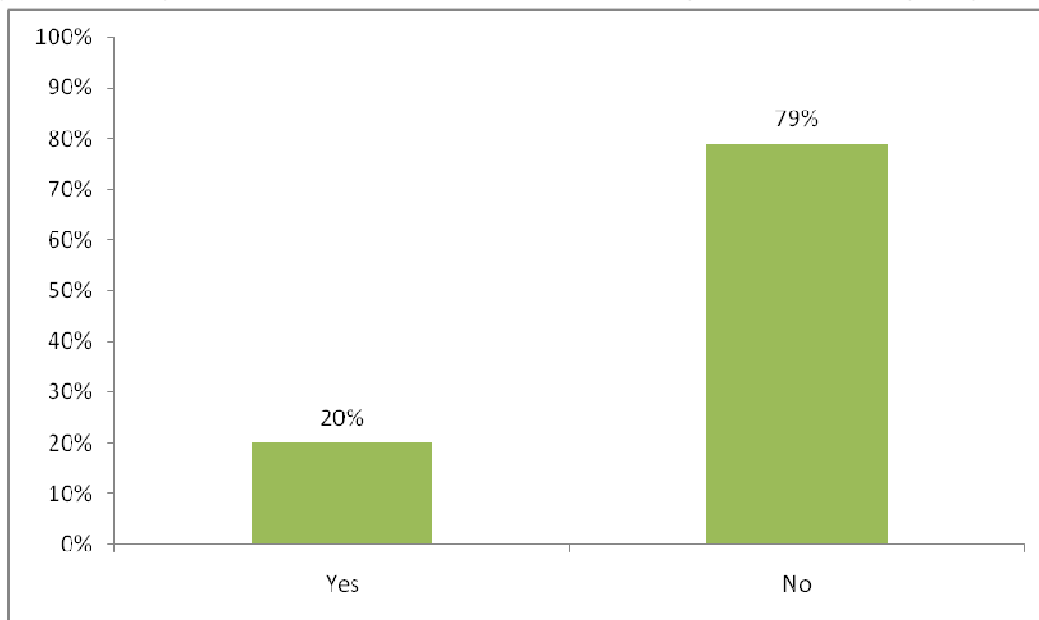
Conclusion: Some respondents report taking action because of seeing the Adrian ad: a fifth of current smokers have spoken to a health professional, six percent have called the Quitline and eighteen percent have had a go at quitting smoking. Between the pre and post surveys there has not been a significant change in the proportion of current smokers that have deliberately quit smoking for at least 24 hours.

10.1 Current Smokers: Seeing the Adrian Ad Has Made Me Talk About Quitting with a Health Professional

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Seeing the Adrian ad has made me talk about quitting smoking with a health professional.*

Findings: A fifth of current smokers who recall seeing the Adrian ad say they have talked with a health professional about quitting smoking as a result of seeing this ad (20%).

Figure 28: Seeing the Adrian ad has made me talk with a health professional about quitting smoking



Base: Current smokers who could recall the Adrian ad n=380

The respondents who were significantly more likely than the rest of the population to say yes were:

- Intending to quit within the next 30 days (39%)
- Those that said the dangers of smoking had not been exaggerated (24%)
- Living in Tairāwhiti DHB (30%).

The respondents who were significantly more likely than the rest of the population to say *no* were:

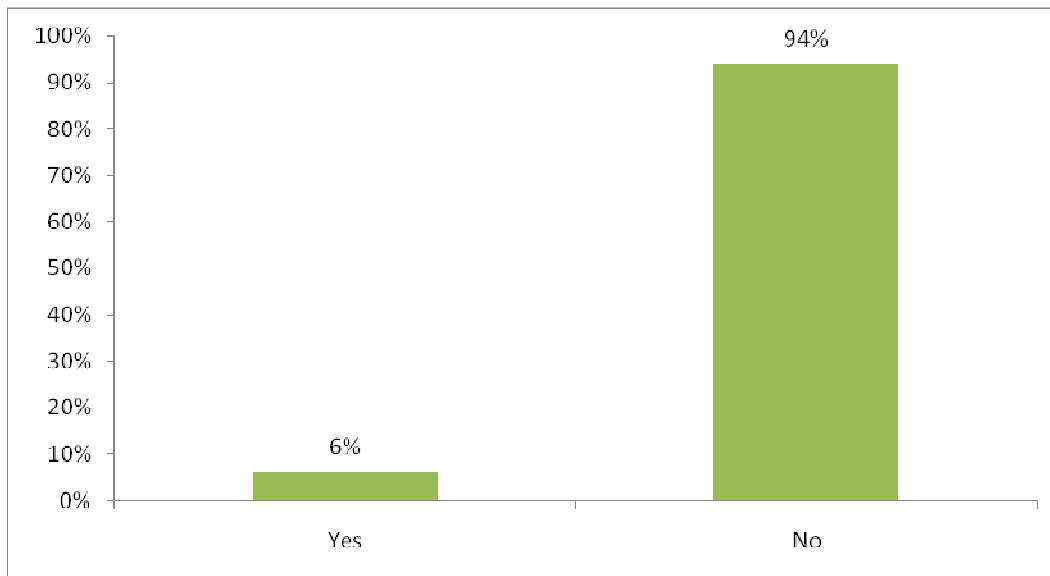
- NZ European/Other (83%)
- Not intending to quit (92%)
- Female (83%)
- Living in a household with an income of \$50,000 or more per annum (85%)
- Those that said the dangers of smoking had been exaggerated (86%).

10.2 Current Smokers: I Have Called the Quitline Because Of Seeing the Adrian Ads

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: I have called the Quitline because of seeing the Adrian ad.*

Findings: Six percent of current smokers who recall seeing the Adrian ad have called the Quitline because of seeing the Adrian ad.

Figure 29: I have called the Quitline because of seeing the Adrian ad



Base: Current smokers who could recall the Adrian ad n=380

The respondents who were significantly more likely than the rest of the population to say *no* were:

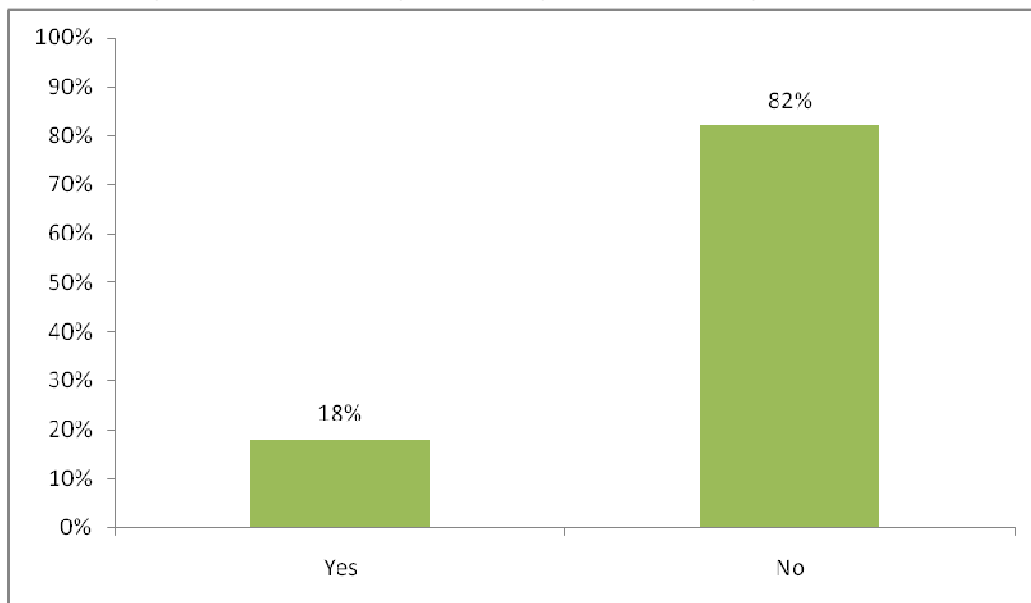
- NZ European/Other (96%)
- Not intending to quit (98%).

10.3 Current Smokers: I Have Had A Go at Quitting Smoking Because of Seeing the Adrian Ads

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: I have had a go at quitting smoking because of seeing the Adrian ad.*

Findings: Eighteen percent of current smokers who recall seeing the Adrian ad say they have had a go at quitting smoking because of seeing the ads.

Figure 30: I have had a go at smoking because of seeing the Adrian ad



Base: Current smokers who could recall the Adrian ad n=380

The respondents who were significantly more likely than the rest of the population to say *yes* were:

- Māori (26%)
- Those with a low nicotine dependence (21%)
- Intending to quit in the next 6 months but not in the next 30 days (23%).

The respondents who were significantly more likely than the rest of the population to say *no* were:

- NZ European/Other (86%)
- Not intending to quit smoking (97%)
- Living in Lakes DHB (89%).

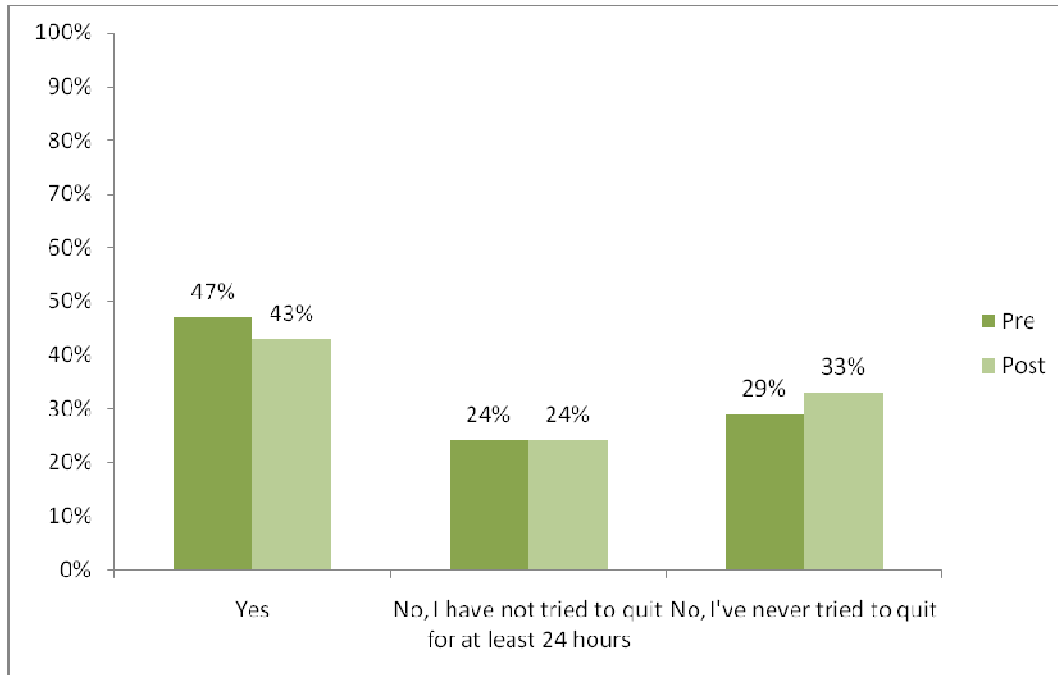
10.4 Deliberately Quit Smoking

Current smokers were asked: *In the last three months have you ever deliberately quit smoking for at least 24 hours?*

Findings: Between the pre and post surveys there has not been a significant change in the proportion of current smokers that have deliberately quit smoking for at least 24 hours.

Similar to the pre survey, forty-three percent said they had attempted to quit smoking for at least 24 hours. Twenty-four percent said they had not tried to quit for at least 24 hours and 33 percent said they had never tried to quit at all.

Figure 31: Attempted to quit smoking in the last 3 months?

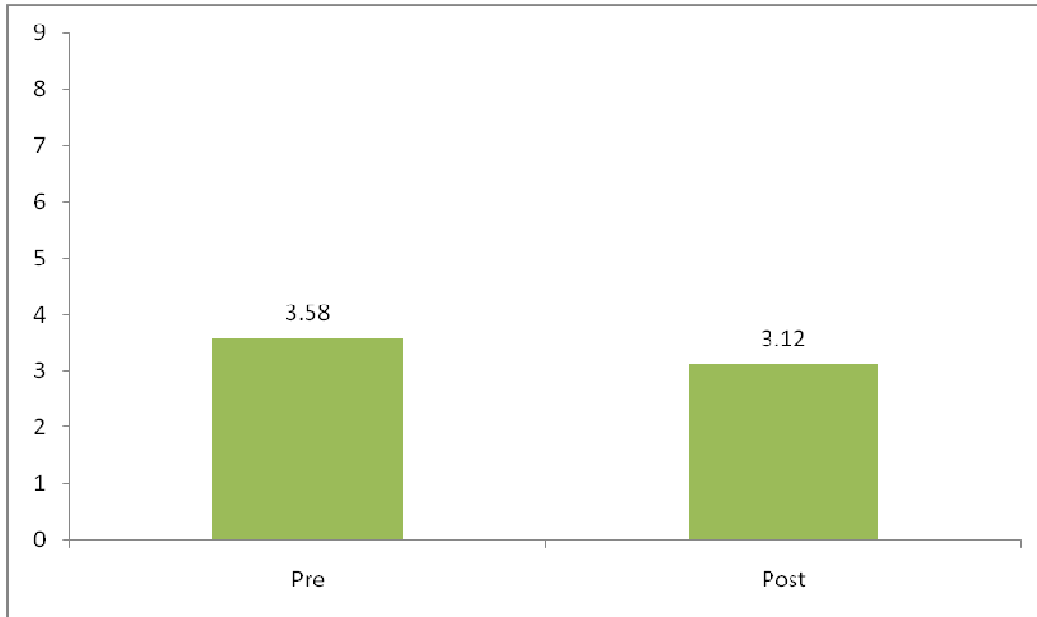


Base: Current smokers n=411/404

Current smokers who had tried to quit smoking in the last 3 months were asked: *How many times did you quit smoking for more than 24 hours in the last three months?*

Findings: In both the pre and post survey the mean number of times the current smokers that had tried to quit in the last three months was between three and four times.

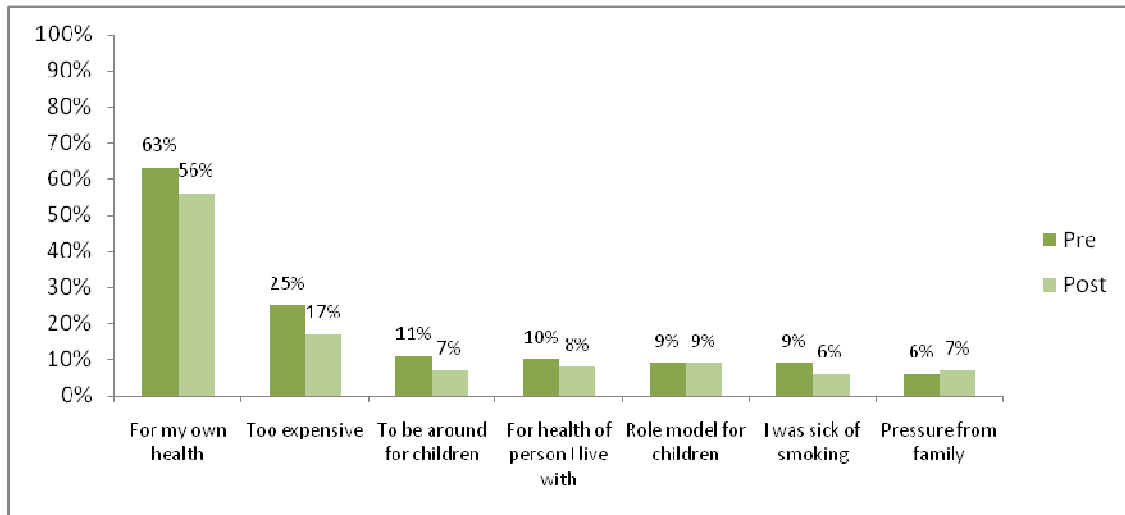
Figure 32: Mean number of quit attempts



Base: Current smokers who have tried to quit n=191/175

Findings: Similar to the pre survey, in the post survey the main reason those who had tried to quit smoking gave for trying to quit was their personal health (56%). Other reasons given by five percent or more of respondents were smoking is too expensive (17%), as a role model for children/grandchildren (9%), the health of someone I live with (8%), to be around for children/grandchildren (7%), pressure from family (7%) and I was sick of smoking (6%).

Figure 33: Reasons for quit attempts



Base: Current smokers who have tried to quit n=191/233

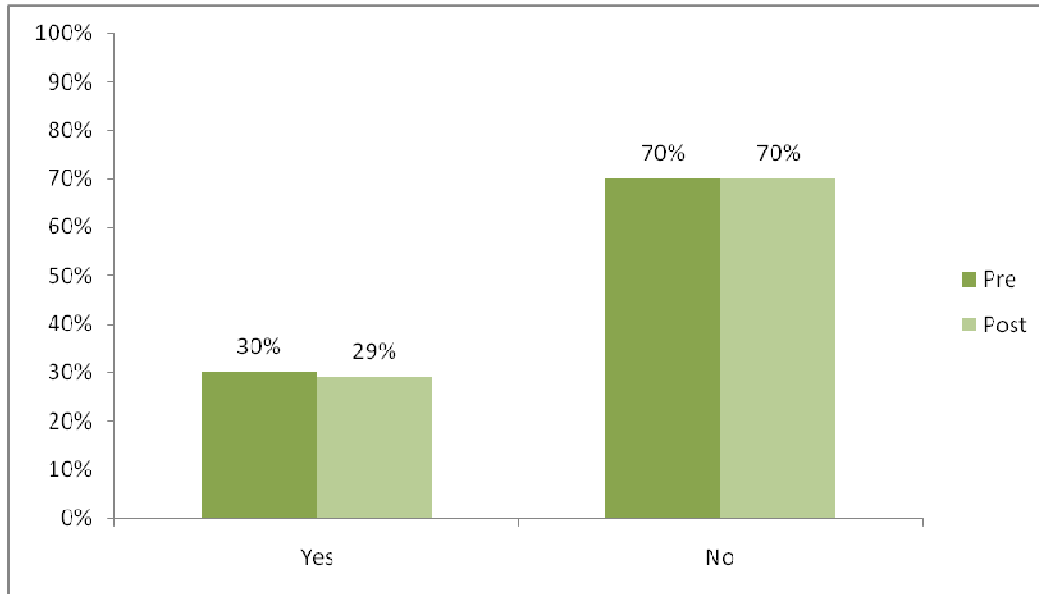
10.5 Receiving Help with Quitting

Current smokers who have tried to quit smoking in the last 3 months and recent quitters were asked: *When you stopped smoking did you receive any advice or use any products to help you quit smoking?*

Findings: Between the pre and post surveys there has not been a significant change in the proportion of respondents who have received help when they have tried to quit smoking.

Similar to the pre survey, in the post survey, less than a third (29%) of those who had recently quit smoking or tried to quit smoking had had advice or used any products to help quit smoking.

Figure 34: Help received with quitting



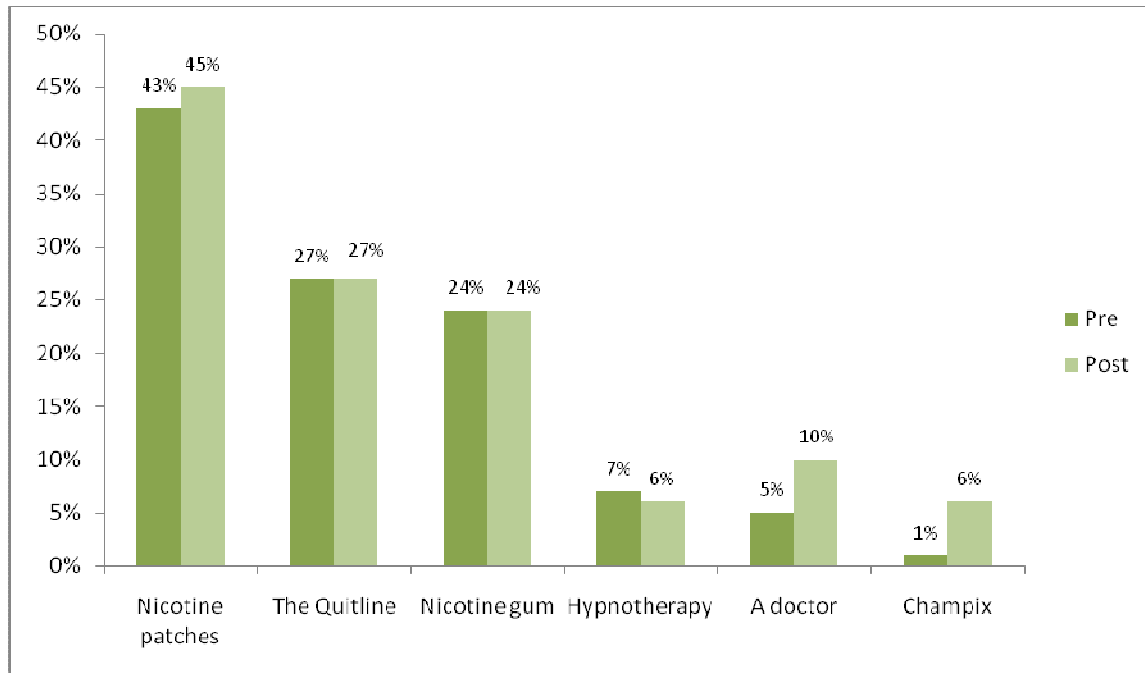
Base: Current smokers who have tried to quit and recent quitters n=248

Those who had used assistance to help them to quit smoking were asked: *Please identify any help, advice, programmes and products used to help you quit during your last quit attempt. Please say as many as apply.*

Findings: Between the pre and post survey there was no significant change in the type of assistance used to help quit smoking.

Similar to the pre survey, in the post survey, those who had had help to quit smoking were most likely to have used nicotine patches (45%), the Quitline (27%) or nicotine gum (24%). Other sources of help used by five percent or more were hypnotherapy (6%), a doctor (10%) or Champix (6%).

Figure 35: Type of help received with quitting



Base: Current smokers who have tried to quit or recent quitters who received help with quitting n=74/67

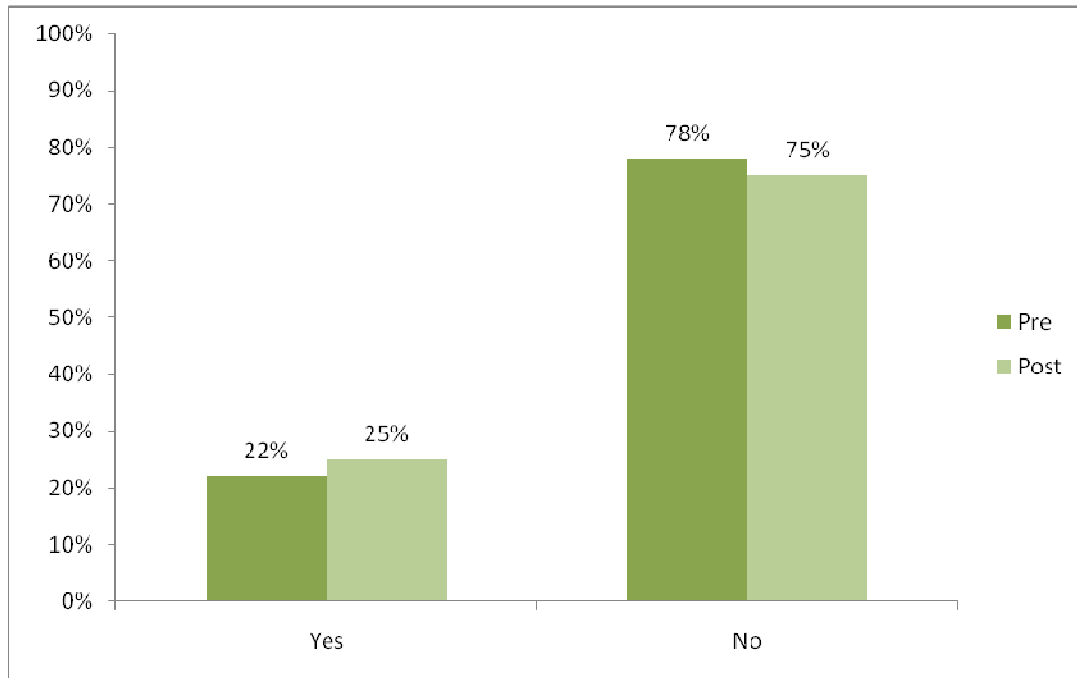
10.6 Health Professionals

Respondents were asked: *Within the last 3 months, have you ever talked about smoking or quitting smoking with a doctor, nurse or other health professional?*

Findings: Between the pre and post surveys there has not been a significant change in the proportion of respondents who have recently spoken with a health professional about smoking.

Similar to the pre survey, in the post survey twenty-five percent of respondents said they had spoken to a health professional about smoking or trying to quit smoking.

Figure 36: Spoken to health professional about quitting



Base: All respondents n=468/462

11.0 Combination of Adrian Ad and Cigarette and Tobacco Packet Pictorial Warnings

Objective: To determine the extent to which the combination of the TVCs and cigarette and tobacco packet pictorial warnings are working together to encourage intended audiences to take steps to quit smoking.

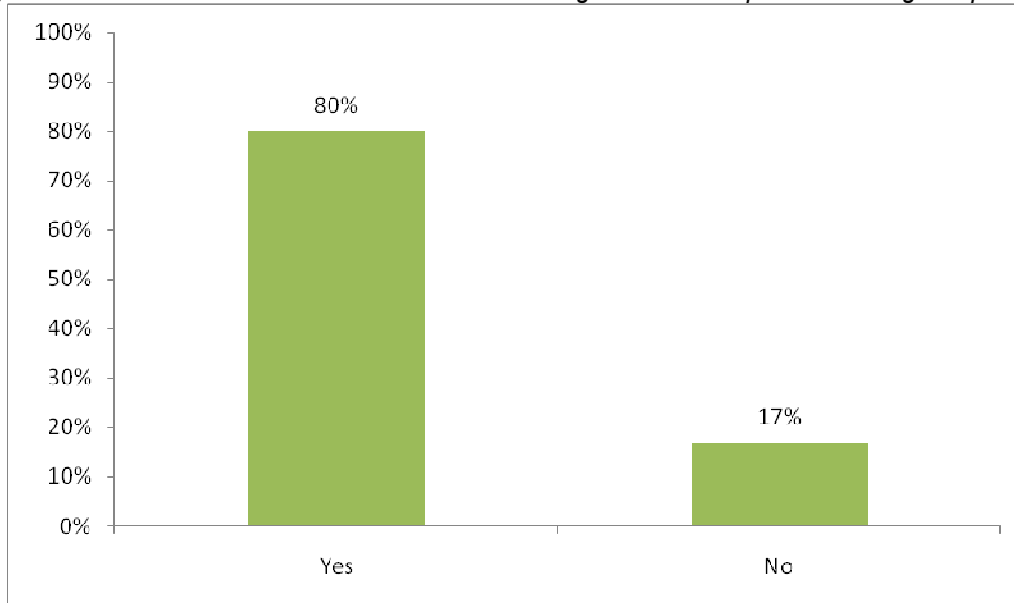
Conclusion: Most respondents can see the links between the Adrian ad and the pictorial warnings on packets. Nearly half of the current smokers perceive that the combination of the ad and the warnings on packets increases the likelihood that they will quit smoking. There has been a significant increase between the pre and post surveys in the proportion of respondents who say the pictorial warnings on packets have stopped them having a cigarette when they were just about to have one (from 12% to 17%).

11.1 Current smokers: Perception that the Adrian Ad and Pictorial Warnings on Packets Have Similar Messages

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: The Adrian ad seems to have similar messages to the new picture warnings on packets.*

Findings: Eighty percent of current smokers say that the Adrian ad seems to have *similar messages to the new picture warnings on packets.*

Figure 37: The Adrian ad seems to have similar messages to the new picture warnings on packets.



Base: Current smokers who could recall the Adrian ad n=380

The respondents who were significantly more likely than the rest of the population to say yes were:

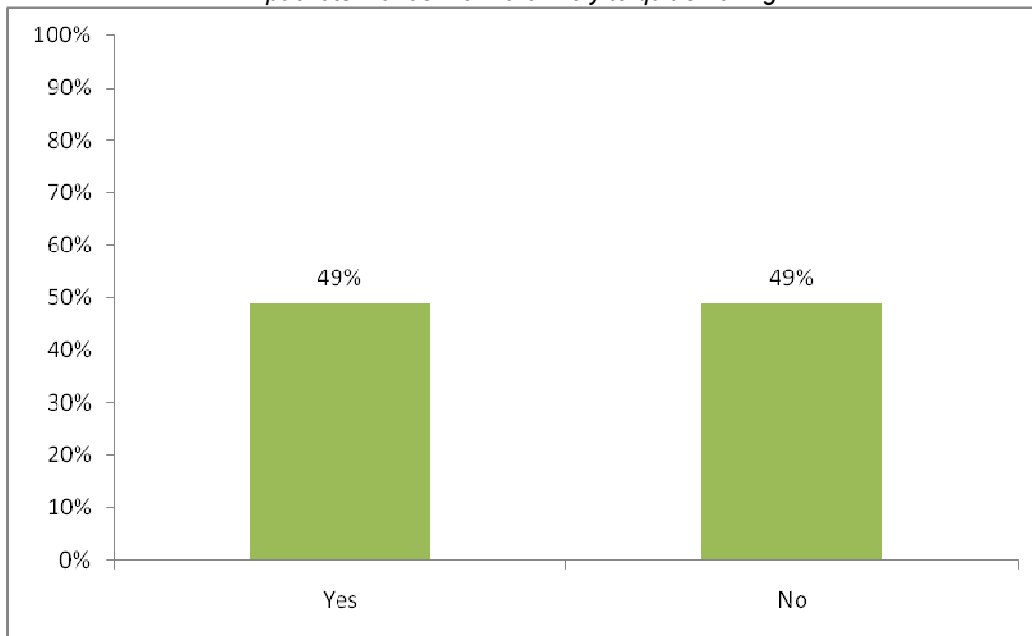
- Intending to quit within the next 30 days (90%)
- Able to recall smoking advertising (81%)
- Those who had noticed picture warnings on cigarette and tobacco packages (82%)
- Those that said the dangers of smoking had not been exaggerated (85%).

11.2 Current Smokers: Perception that the Combination of the Adrian Ad and the New Picture Warnings Increases Likelihood of Quitting

Current smokers who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Having both the Adrian ad on TV and the new picture warnings on packets makes me more likely to quit smoking.*

Findings: Forty-nine percent of current smokers agree that *having both the Adrian ad on TV and the new picture warnings on TV makes them more likely to quit smoking.*

Figure 38: Having both the Adrian ad on TV and the new picture warnings on packets makes me more likely to quit smoking.



Base: Current smokers who could recall the Adrian ad n=380

The respondents who were significantly more likely than the rest of the population to say yes were:

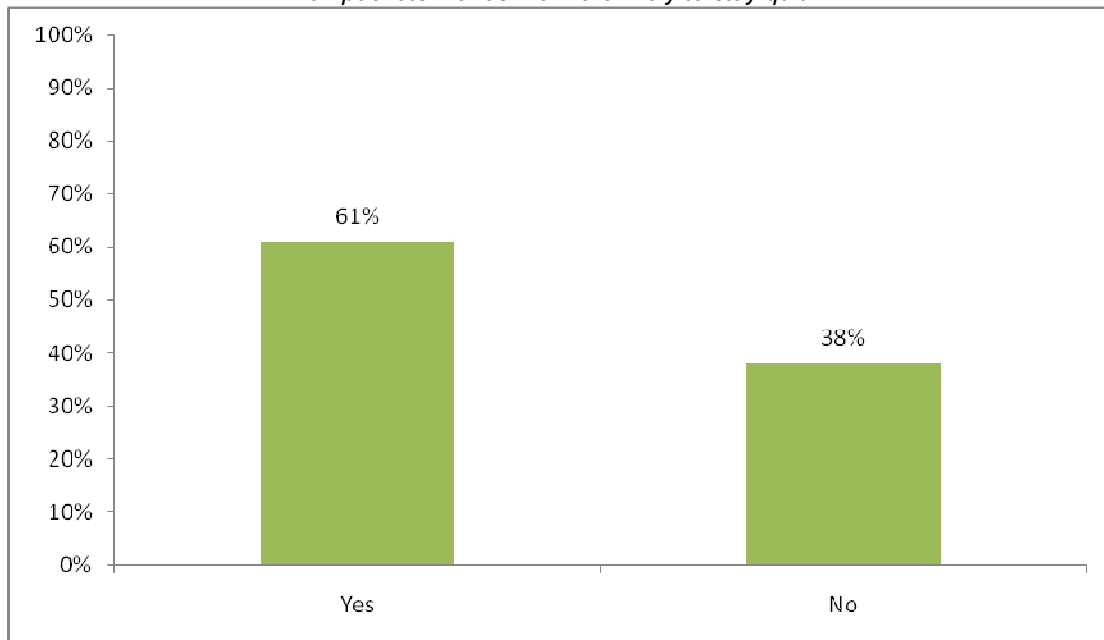
- Māori (49%)
- Aged 15-19 years (77%)
- Those with a low nicotine dependency (55%)
- Intending to quit in the next 6 months but not in the next 30 days (62%)
- Intending to quit within the next 30 days (90%)
- Those that said the dangers of smoking had not been exaggerated (57%).

11.3 Recent Quitters: Perception that the Combination of the Adrian Ad and the New Picture Warnings Increases Likelihood of Staying Quit

Recent quitters who could recall the Adrian ad were asked: *Can you please answer yes or no to the following questions: Having both the Adrian ad on TV and the new picture warnings on packets makes me more likely to stay quit.*

Findings: Sixty-one percent of recent quitters agree that having both the Adrian ad on TV and the new picture warnings on TV makes them more likely to stay quit.

Figure 39: Having both the Adrian ad on TV and the new picture warnings on packets makes me more likely to stay quit.



Base: Recent quitters who could recall the Adrian ad n=56

There were no significant differences in the responses to this question.

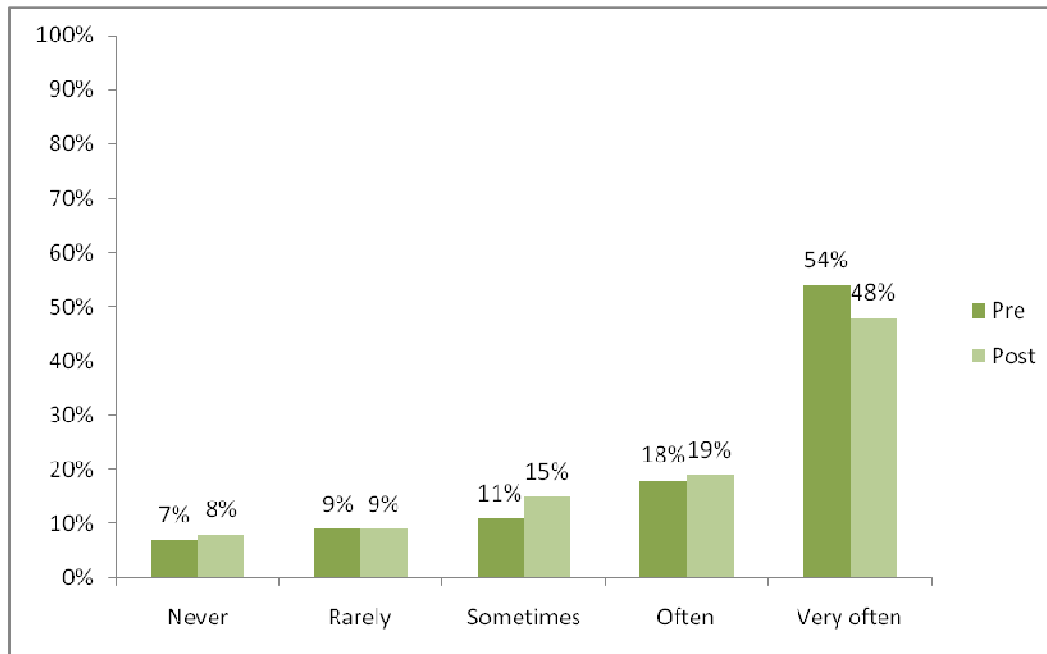
11.4 Awareness of Pack Warning Labels

Respondents were asked: *In the last month, how often, if at all, have you noticed the picture warning labels on cigarette and tobacco packages?*

Findings: Between the pre and post surveys there has not been a significant change in the level of awareness of picture warning labels on cigarette and tobacco packages.

Similar to the pre survey, in the post survey, around half of respondents (48%) said they had 'very often' noticed the pictorial warning labels in the last month. A further 19 percent said they had often noticed the labels, 15 percent said they had sometimes noticed the labels and nine percent said they had rarely noticed the labels. Just eight percent of respondents said they had never noticed the labels.

Figure 40: Awareness of pictorial warning labels



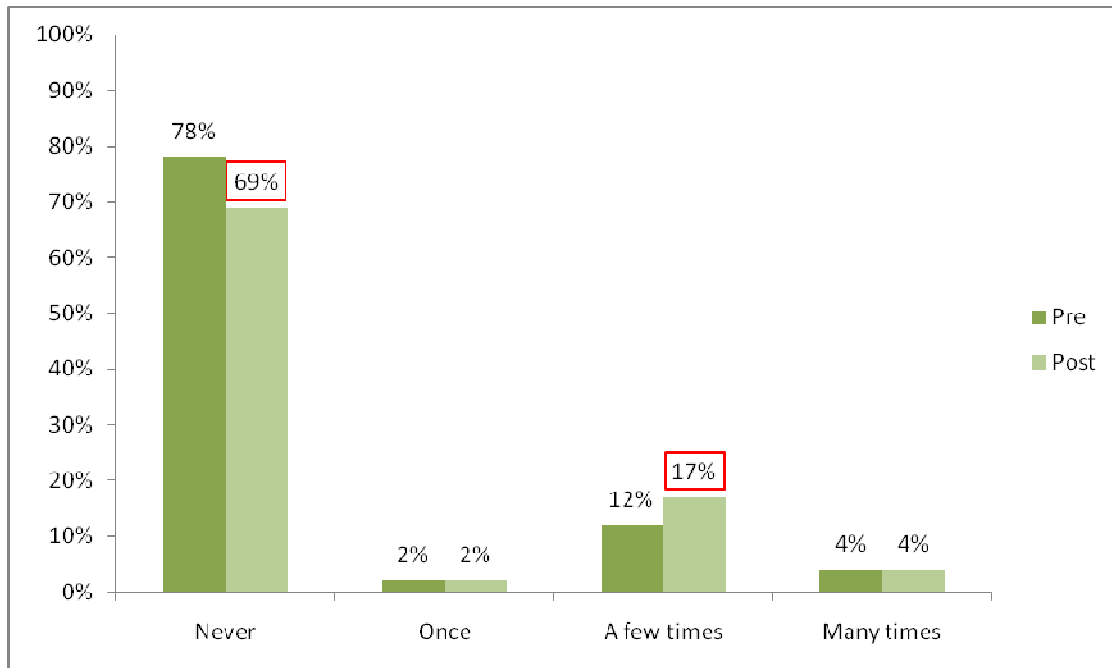
Base: All respondents n=468/462

11.5 Impact of Pack Warning Labels

Respondents were asked: *In the last month, have the picture warning labels stopped you from having a cigarette when you were about to smoke one?*

Findings: Between the pre and post surveys there has been a significant decrease in the proportion of respondents that say pack warnings have never stopped them from having a cigarette (down from 78% to 69%). There has been a corresponding increase in the proportion of respondents that say pack warnings have stopped them from having a cigarette when they were just about to smoke one (up from 12% to 17%).

Figure 41: Impact of pictorial warning labels



Base: All respondents n=468/462

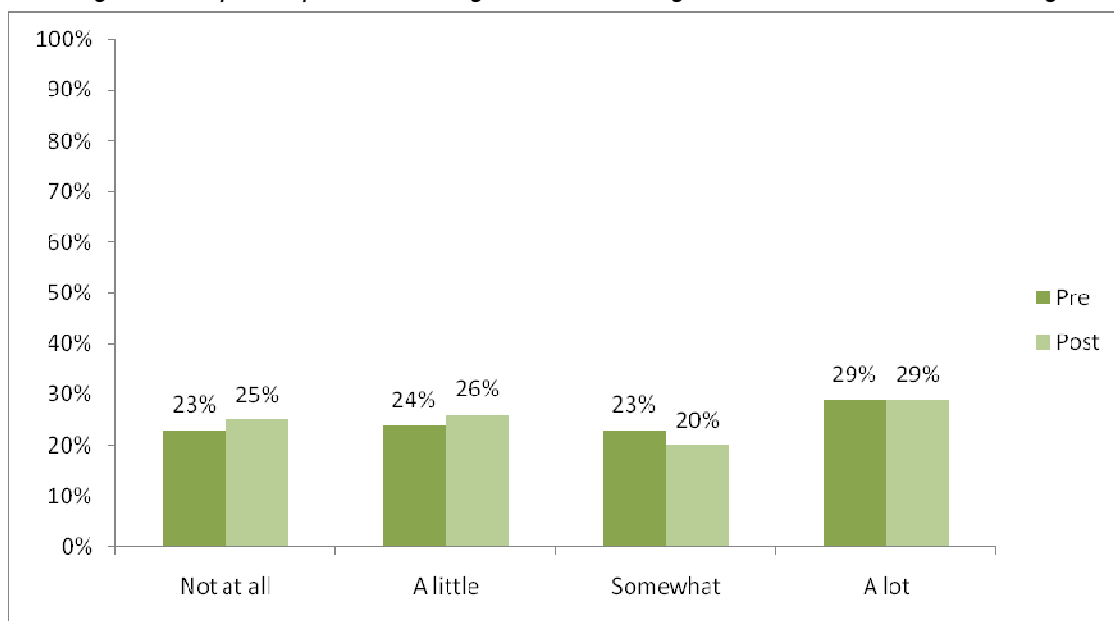
11.6 Impact of the Pack Warnings on Thinking About the Health Risks of Smoking

Respondents were asked: *To what extent, if at all, do the picture warning labels make you think about the health risks of smoking?*

Findings: Between the pre and post surveys there has not been a significant change in the proportion of respondents that said the picture warning labels had made them think about the health risks of smoking.

Similar to the pre survey, in the post survey, respondents were quite evenly spread on the extent to which they felt the labels had made them think about the health risks of smoking. Twenty-nine percent said the warning labels had made them think a lot about the health risks of smoking. Twenty percent said the labels had made them think about the health risks of smoking somewhat, 26 percent said a little and 25 percent said not at all.

Figure 42: Impact of pictorial warning labels on thinking about the health risks of smoking



Base: All respondents n=468/462

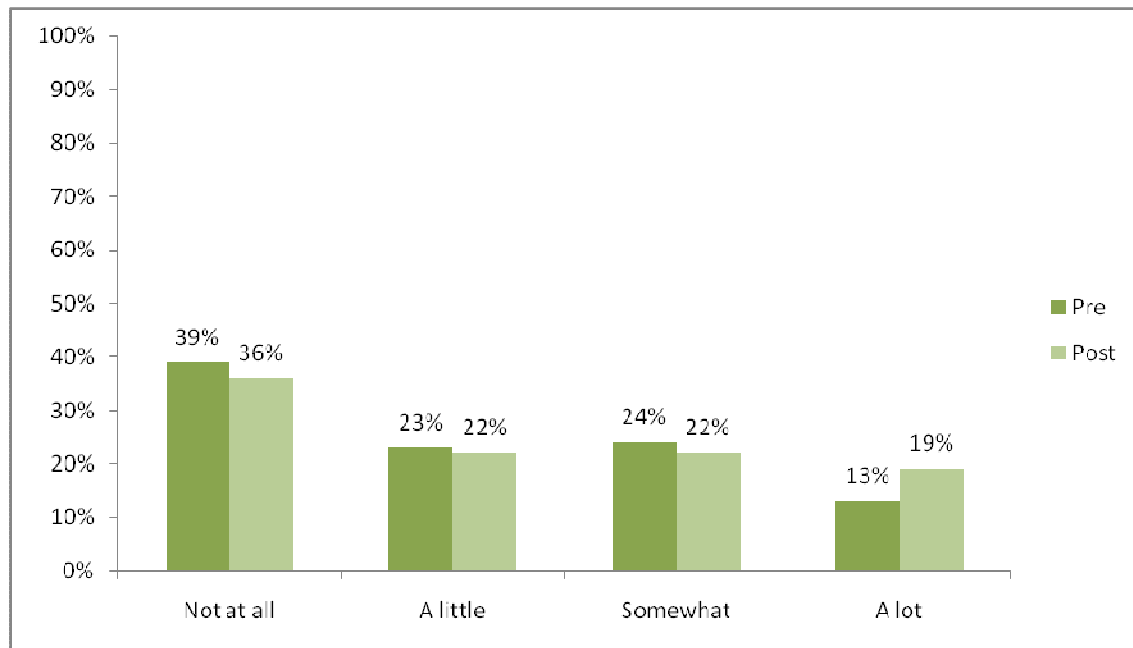
11.7 Impact of the Pack Warnings on Intention to Quit Smoking

Current smokers were asked: *To what extent, if at all, do the picture warning labels on cigarette and tobacco packs make you more likely to quit smoking?*

Findings: Between the pre and post surveys there has not been a significant change in the impact of picture warning labels on intention to quit smoking.

Similar to the pre survey, in the post survey, more than half of respondents (63%) said the warning labels had made them more likely to quit smoking (19% said it made them more likely to quit smoking, 22% somewhat and 22% a little). Thirty-six percent of respondents said the pack warnings had not made them more likely to quit smoking at all.

Figure 43: Impact of pictorial warning labels on intention to quit smoking



Base: Current smokers n=411/404

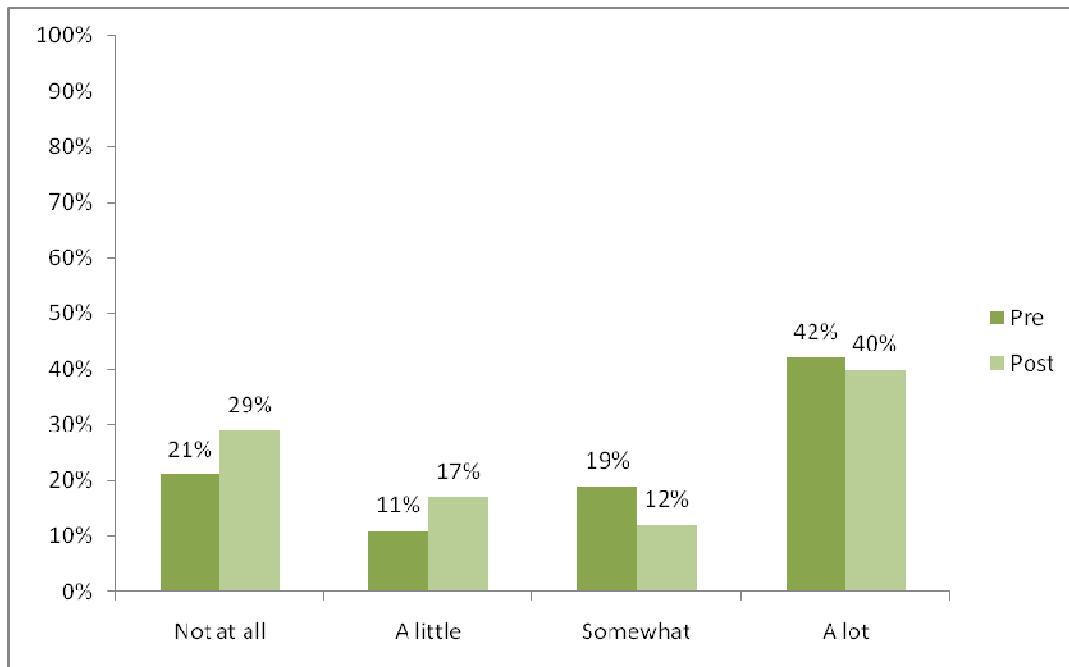
11.8 Impact of the Pack Warnings on Staying Quit

Recent quitters were asked: *To what extent, if at all, do the picture warning labels on cigarette and tobacco packs make you more likely to stay quit?*

Findings: Between the pre and post surveys there has not been a significant change in the proportion of quitters that say the picture warning labels make them more likely to stay quit (the small sample size of recent quitters mean that the change between the pre and post surveys would have to be very large to be statistically significant).

Similar to the pre survey, in the post survey, more than two-thirds of respondents (69%) said the warning labels had made them more likely to stay quit (40% said it made it a lot more likely, 12% somewhat and 17% a little). Twenty-nine percent of respondents said the pack warnings had not made them more likely to stay quit.

Figure 44: Impact of labels on staying quit



Base: Recent quitters n=57/56

There were no significant differences for any of the response options.

Appendix A: Questionnaires

Graphic Warnings Follow On Questionnaire September 2008

Client: The Quit Group
Research Company: Premium Research
Fieldwork Company: Reid Research

Research Objectives

The objectives of the Graphic Warnings Ad Impact Evaluation are to determine:

- The extent to which the TVCs reach the intended audiences
- The extent to which the intended audiences understand the messages from the TVCs
- The extent to which the intended audiences perceive the TVC messages as credible
- The extent to which the intended audience have changed their level of acceptance of the messages from the TVCs (i.e. extent to which they agree that smoking can cause mouth/oral cancer)
- The intended audiences' personal reaction to the TVCs (e.g. fear, encouragement, motivation, denial)
- The extent to which the intended audiences consider taking action as a result of seeing the TVCs (e.g. calling Quitline, quitting smoking, discussing quitting smoking)
- The extent to which the intended audiences took action as a result of seeing the TVCs (e.g. calling Quitline, quitting smoking, discussing quitting smoking)
- The extent to which the TVCs motivate the intended audience to quit smoking
- The extent to which the combination of the TVCs and cigarette and tobacco packet warnings are working together to encourage intended audiences to take steps to quit smoking.

The follow up survey needs to assess the following:

- The extent to which the Adrian TVC reached the intended audiences
 - Unprompted and prompted awareness of the Adrian TVC
- The extent to which the intended audience understood the messages from the Adrian TVC
 - Unprompted message outtake from the Adrian TVC
- The extent to which the intended audience perceived the messages from the Adrian TVC as credible
 - Self reported level of belief in the ads
- The extent to which the intended audience have changed their level of acceptance of the messages from the Adrian TVC (i.e. extent to which they agree that smoking can cause mouth/oral cancer)
 - Comparison of self reported acceptance of messages from the Adrian TVC (smoking can cause oral cancer) between the benchmark and the follow on survey
- The intended audiences' personal reaction to the TVC (e.g. fear, encouragement, motivation, denial)
 - Self reported response to the Adrian TVC
- The extent to which the intended audiences considered taking action as a result of seeing the TVC (e.g. calling Quitline, quitting smoking, discussing quitting smoking with a health professional)
 - Self reported consideration of taking action **because of the Adrian TVC**
 - Comparing self reported consideration of quitting between the benchmark and the follow on survey
- The extent to which the intended audiences took action as a result of seeing the TVC (e.g. calling Quitline, quitting smoking, discussing quitting smoking with a health professional)
 - Self reported action taken **because of the Adrian TVC**
 - Comparing self reported action taken between the benchmark and the follow on survey
- The extent to which the TVC motivated the intended audience to quit smoking
 - Self reported increase in motivation to quit smoking

- Comparing self reported consideration of quitting smoking between the benchmark and the follow on survey
- The extent to which the combination of the TVCs and cigarette and tobacco packet pictorial warnings are working together to encourage intended audiences to take steps to quit smoking.
 - Self reported perception
 - Comparing consideration of and quitting behaviour between the benchmark and follow on surveys.

Introduction

Kia Ora, my name is ... from Reid Research. We are undertaking some social research for the Ministry of Health. Could I please speak to the person in your household who has the next birthday, the person I speak with needs to be aged 15 years of age or older.

REINTRODCE IF NECESSARY. Kia Ora, my name is ... from Reid Research. We are undertaking some social research for the Ministry of Health.

The survey will take about 15 minutes. All of your responses will be grouped with other people's responses and will remain confidential.

Could I please ask you a few questions just to make sure you are eligible to undertake this survey?

- S1 Have you ever smoked cigarettes or tobacco at all, even just a few puffs? Please include cigars and pipes.

DO NOT READ.

Yes	CONTINUE	01
No	THANK AND SEE IF THERE IS ANYONE ELSE IN THE HOUSEHOLD ELIGIBLE	02

- S2 Have you smoked a total of more than 100 cigarettes in your whole life?

DO NOT READ.

Yes	CONTINUE	01
No	THANK AND SEE IF THERE IS ANYONE ELSE IN THE HOUSEHOLD ELIGIBLE	02

- S3 How often do you currently smoke?

READ OUT.

You don't smoke now	CONTINUE TO S4	01	Current Smokers – referred to as CS
At least once a day	RESPONDENT IS ELIGIBLE TO COMPLETE THIS SURVEY GO TO S5	02	
At least once a week		03	
At least once a month		04	
Less than once a month	THANK AND SEE IF THERE IS ANYONE ELSE IN THE HOUSEHOLD ELIGIBLE	05	

S4 How long ago did you quit smoking?

READ OUT.

Less than 3 months ago	RESPONDENT IS ELIGIBLE TO COMPLETE THIS SURVEY. CONTINUE	01	Recently quit smokers. Referred to as RQS
3 - less than 6 months ago		02	
6-12 months ago		03	
More than 12 months ago	THANK AND SEE IF THERE IS ANYONE ELSE IN THE HOUSEHOLD ELIGIBLE	04	

S5 Could I please check that you are aged 15 years or older?

DO NOT READ.

Yes	CONTINUE
No	THANK AND SEE IF THERE IS ANYONE ELSE IN THE HOUSEHOLD ELIGIBLE

S6 Which region of New Zealand do you live in?

DO NOT READ.

Northland (if necessary: this includes Kaitaia, Whangarei, Dargaville and Kerikeri)	QUOTA OF 201	01
Tairāwhiti (if necessary: this includes Tairāwhiti, East Cape and Gisborne)	QUOTA OF 68	02
Lakes (if necessary: this includes Lakes, Taupo and Rotorua District)	QUOTA OF 142	03
Whanganui (if necessary: this includes Whanganui, Marton, Taihape and Ohakune)	QUOTA OF 90	04
None of the Above	Thank and Close	09

IF QUOTA FULL THANK AND CLOSE

S7 Which of the following ethnic groups do you belong to?

**READ OUT. MULTIPLE RESPONSE POSSIBLE. PROBE TO NO.
PLEASE CODE ALL ETHNICITIES MENTIONED**

Note to Analyst: FULL QUOTAS SHOWN IN CELLS BELOW, note: if Māori is mentioned along with other ethnicities this counts towards Māori quota. Full quotas are shown in cells below.

		Northland	Tairawhiti	Lakes	Whanganui
Māori	01	88	41	67	31
New Zealand European	02	113	27	75	59
Samoan	03				
Cook Island Māori	04				
Tongan	05				
Niuean	06				
Chinese	07				
Indian	08				
Other (please specify)	09				
Other European e.g. English, Australian	11				
DON'T READ: Kiwi/New Zealander	10				
DON'T READ: Refused	97	THANK AND CLOSE			

IF QUOTA FULL THANK AND CLOSE

S8 Could you please tell which of the following age groups you are in?

READ OUT.

Note to Analyst: FULL QUOTAS SHOWN IN CELLS BELOW

		Northland	Tairawhiti	Lakes	Whanganui
15-19 years	01	18	7	14	9
20-24 years	01	34	13	31	17
25-29 years	03				
30-39 years	04	93	31	64	39
40-49 years	05				
50-64 years	06				
65 years plus	07	56	17	33	25
Refused [DO NOT READ]	97	THANK AND CLOSE			

IF QUOTA FULL THANK AND CLOSE

S9 This is a standard question I need to ask, are you male or female?

DO NOT READ.

Note to Analyst: FULL QUOTAS SHOWN IN CELLS BELOW

		Northland	Tairawhiti	Lakes	Whanganui
Male	01	97	31	66	44
Female	02	104	37	76	46
Refused	97	THANK AND CLOSE			

IF QUOTA FULL THANK AND CLOSE

Question 1: Ask CS and RQS

We are now in the main part of the survey.

- Q1 Please can you tell me all of the effects to the body, including diseases, you are aware of that can be caused by smoking? Please list as many as you can remember.

DO NOT READ OUT. MULTIPLE RESPONSE POSSIBLE. PROBE TO NO

Arthritis	01
Asthma	02
Blindness	03
Coronary heart disease	04
Diabetes	05
Emphysema	06
Foul and offensive breath	07
Gangrene	08
Heart attacks	10
High blood pressure	11
If you smoke when you are pregnant the baby is smoking too	18
Impotence	12
Lung cancer	13
Lung disease	14
Oral cancer (such as mouth or tongue cancer)	15
Smoking blocks your arteries/affects blood circulation	16
Smoking can harm children	17
Smoking is highly addictive	18
Stroke	19
Tobacco smoke is poisonous	20
Wrinkling of the skin	21
Cancer (unspecified)	22
Rotten teeth/gums	23
Shortness of breath	24
Other (please specify)	98
Don't know	99
Refused	97

Q2 I am going to read out a list of health conditions. From what you have read, heard or know, please indicate the extent to which you think smoking tobacco contributes to each of the following conditions.....(list) Is that....large extent, some extent, small extent, no extent:

READ OUT LIST. ROTATE. FREQUENTLY REMIND RESPONDENTS OF RESPONSE OPTIONS.

NOTE TO SPEC WRITER: ROTATE SCALE ORDER (1-4 AND 4-1)

	Large extent	Some extent	Small extent	No extent	Don't know (DO NOT READ)	Refused (DO NOT READ)
Stroke	01	02	03	04	99	97
Lung cancer	01	02	03	04	99	97
Oral cancer (such as mouth or tongue cancer)	01	02	03	04	99	97
Gangrene	01	02	03	04	99	97
Blindness	01	02	03	04	99	97
Heart attacks	01	02	03	04	99	97
Lung diseases	01	02	03	04	99	97
Foul and offensive breath	01	02	03	04	99	97
Impotence	01	02	03	04	99	97

Q3 From what you have read, heard or know, please indicate how much you agree or disagree with each of the following statements on a scale of one to four where one is strongly disagree and four is strongly agree.

READ OUT LIST. ROTATE. FREQUENTLY REMIND RESPONDENTS OF RESPONSE OPTIONS.

NOTE TO SPEC WRITER: ROTATE SCALE ORDER (1-4 AND 4-1)

	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't know (DO NOT READ)	Refused (DO NOT READ)
If you smoke when you are pregnant the baby is smoking too	01	02	03	04	99	97
Tobacco smoke is poisonous	01	02	03	04	99	97
Smoking is highly addictive	01	02	03	04	99	97
Smoking can harm children	01	02	03	04	99	97
Smoking blocks your arteries	01	02	03	04	99	97

Q4 Do you believe the dangers of smoking have been exaggerated?

DO NOT READ. RESPONSES THAT DO NOT FIT INTO A CLEAR 'YES' OR 'NO' SHOULD BE CODED AS 'DON'T KNOW'.

Yes	01
No	03
Don't know	99
Refused	97

Q5 Have you learnt anything new about the harmful effects of smoking in the last three months?

DO NOT READ

Yes	01	CONTINUE
No	02	
Don't know	99	GO TO Q8

Q6 What was it that you learnt?

DO NOT READ OUT. MULTIPLE RESPONSE POSSIBLE. PROBE TO NO.

Smoking can cause oral cancer (such as mouth or tongue cancer)	08
Quit smoking	01
Quit smoking for your whānau/ to be with your whānau for longer	02
Call the Quitline for support	03
Smoking is harmful	04
Smoking causes damage to the body	05
Diseases/poor health from smoking don't just affect old people	06
Second hand smoke is poisonous	09
Second hand smoke is harmful to children	10
Smoke outside your home or car (OR do not smoke inside)	11
Smoking is expensive	12
Use nicotine patches and gum to help quitting	13
A slip up and a relapse is a normal part of quitting	14
Smoking can kill you in middle age	15
Other (please specify)	99
Don't know	99

Q7 Where did you learn it from?

DO NOT READ OUT. MULTIPLE RESPONSE POSSIBLE. PROBE TO NO.

TV Advertising	01
Cigarette or tobacco packets	02
Health professional	03
Friend or family	04
Quitline	05
Other (please specify)	98
Don't know	99

Advertising Recall questions: ASK CS and RQS all questions in this section

The next set of questions I am going to ask you are about recent advertising

- Q8 Do you recall seeing and/or hearing any advertising in the **last three months** about the harmful effects of smoking?

DO NOT READ

Yes	01	CONTINUE
No	02	GO TO Q10
Don't know	99	

- Q9 Please describe all of the advertisements you have seen or heard in the last three months about the harmful effects of smoking.

DO NOT READ OUT. MULTIPLE RESPONSE. PROBE TO NO.

RECORD FIRST MENTIONED AND OTHER MENTIONS

NOTE TO INTERVIEWER: IF YOU THINK THE RESPONDENT IS MENTIONING ONE OF THESE ADS BUT YOU ARE NOT SURE, READ THE DESCRIPTION OF THE AD TO THE RESPONDENT, TO CHECK YOU ARE CODING IT CORRECTLY.

	FIRST	OTHER
A man in his 50s, that speaks through a hole in his throat (trachy). He has oral cancer and has had radiotherapy and an operation to remove his tongue and can't eat.	01	01
A Pacific couple, quitting smoking. They have 10 kids and the Mum is pregnant with their 11 th baby.	02	02
A Pakeha couple quitting smoking. They have a daughter and they talk about her Mum needing an operation and about getting patches from the chemist.	03	03
A Pakeha man in his 40s, quitting smoking. He buries his ash tray, cleans out his car and goes to the gym.	04	04
A 30-year-old Maori mum, quitting smoking with her partner Joe. They go to the gym, she goes out with her friends and wants to quit for her family.	05	05
A Māori man in his mid-30s who relapsed and is giving quitting another go. His partner Tash appeared in a previous TV ad and successfully quit smoking.	14	14
Tobacco/cigarette pack warnings	06	06
An ad showing a mum smoking inside her car with a baby sitting in the back, while waiting to pick up another two kids from sport. The coach gives her a filthy look.	07	07
Ads showing parents smoking at home when their children are there. You can see the kid breathing in the poison from the smoke.	08	08
Ads showing celebrities talking about smoking and how it is not cool. Like that guy off Shortland Street and some bands.	09	09
A lung being cut in half and some tar being poured on to it.	10	10
A Samoan man smoking, you see the smoke being inhaled and a picture of the man's heart and what the smoke does to it.	11	11
A series of ads involving stories about Maori and their families/whānau giving up smoking.	12	12
An ad showing a man trying to quit smoking by calling the Quitline. The Quitline Adviser says well done.	13	13
Other (please specify)	98	98
None	97	97
Don't know [DO NOT READ]	99	99

Adrian Ad: ASK CS and RQS all questions in this section

Q10 You may have already mentioned this, but just to be sure, do you recall the following advertisement? A series of ads showing Adrian, a man in his 50s, he speaks through a hole in his throat (trachy). He has oral cancer and has had radiotherapy and an operation to remove his tongue and can't eat.

MULTIPLE RESPONSE POSSIBLE.

Yes	01	CONTINUE GO TO Q13
No	02	
Don't know	99	

Q11 And what were the messages from these ads about Adrian?

MULTIPLE RESPONSE. PROBE TO NO. OPEN ENDED.

Q12a Can you please answer yes or no to each of the following questions about the Adrian ad?

ROTATE. READ.

	Yes	No	Don't know (DO NOT READ)
I think Adrian is an actor	01	02	03
I have learnt new information about the risks of smoking from the Adrian ad	01	02	03
I think what has happened to Adrian is just as likely to happen to smokers as non-smokers	01	02	03
I think what has happened to Adrian is just as likely to happen to heavy smokers as light smokers	01	02	03

Q12b Can you please answer yes or no to each of the following questions about the Adrian ad?

ROTATE. READ.

	Yes	No	Don't know (DO NOT READ)
I feel worried about my own health when I see the Adrian ad	01	02	03
CS: I feel encouraged to quit smoking when I see the Adrian ad	01	02	03

Q12c Can you please answer yes or no to each of the following questions about the Adrian ad?

ROTATE. READ.

	Yes	No	Don't know
CS: Seeing the Adrian ad has made me more likely to quit smoking	01	02	03
RQS: Seeing the Adrian ad has made me more likely to stay quit	01	02	03
CS: Seeing the Adrian ad has made me more likely to call the Quitline (If needed: a free telephone service that help people quitting smoking)	01	02	03
RQS: Seeing the Adrian ad is an important reason why I have quit smoking	01	02	03

Q12d CS only: Can you please answer yes or no to each of the following questions about the Adrian ad?

ROTATE. READ.

	Yes	No	Don't know (DO NOT READ)
CS: Seeing the Adrian ad has made me talk about quitting smoking with a health professional	01	02	03
CS: I have called the Quitline because of seeing the Adrian ad (If need: a free telephone service that help people quitting smoking)	01	02	03
CS: I have had a go at quitting smoking because of seeing the Adrian ad	01	02	03

Q12e Can you please answer yes or no to each of the following questions about the Adrian ad and the new picture warnings on cigarette and tobacco packets?

ROTATE. READ.

	Yes	No	Don't know (DO NOT READ)
The Adrian ad seems to have similar messages to the new picture warnings on packets	01	02	03
CS: Having both the Adrian ad on TV and the new picture warnings on packets makes me more likely to quit smoking	01	02	03
RQS: Having both the Adrian ad on TV and the new picture warnings on packets makes me more likely to stay quit	01	02	03

Warning label questions:

Now I am going to ask you a few questions about the new picture warning labels on cigarette and tobacco packages. They are the ones that have both a photo and writing on them.

Q13 In the last month, that is, since [MONTH] [DATE], how often, if at all, have you noticed the picture warning labels on cigarette and tobacco packages?

READ OUT. NOTE TO SPEC WRITER: ROTATE SCALE ORDER (1-5 AND 5-1)

Never	01	CONTINUE
Rarely	02	
Sometimes	03	
Often	04	
Very often	05	
Don't know [DO NOT READ]	99	CONTINUE
Refused [DO NOT READ]	98	

Q14 In the last month, have the picture warning labels stopped you from having a cigarette when you were about to smoke one?

READ OUT. NOTE TO SPEC WRITER: ROTATE SCALE ORDER (1-4 AND 4-1)

Never	01
Once	02
A few times	03
Many times	04
Not Applicable/I didn't think about smoking [DO NOT READ]	05
Don't know [DO NOT READ]	99
Refused [DO NOT READ]	98

- Q15 To what extent, if at all, do the picture warning labels on cigarette and tobacco packs make you think about the health risks of smoking?

READ OUT. NOTE TO SPEC WRITER: ROTATE SCALE ORDER (1-4 AND 4-1)

Not at all	01
A little	02
Somewhat	03
A lot	04
Don't know [DO NOT READ]	99
Refused [DO NOT READ]	98

- Q16 CS: To what extent, if at all, do the picture warning labels on cigarette and tobacco packs make you MORE likely to quit smoking?

READ OUT. NOTE TO SPEC WRITER: ROTATE SCALE ORDER (1-4 AND 4-1)

Not at all	01
A little	02
Somewhat	03
A lot	04
Don't know [DO NOT READ]	99
Refused [DO NOT READ]	98

- Q17 RQS: To what extent, if at all, do the picture warning labels on cigarette and tobacco packs make you MORE likely to stay quit?

READ OUT. NOTE TO SPEC WRITER: ROTATE SCALE ORDER (1-4 AND 4-1)

Not at all	01
A little	02
Somewhat	03
A lot	04
Don't know [DO NOT READ]	99
Refused [DO NOT READ]	98

Smoking Behaviour

The next set of questions I am going to ask you are about your smoking and quitting smoking.

- Q18 CS: How soon after you wake up do you have your first smoke?

READ IF NECESSARY. SINGLE RESPONSE.

Less than 30 minutes after waking	01
30 minutes or more after waking	02
Don't know [DO NOT READ]	99
Refused [DO NOT READ]	97

- Q19 CS: Are you seriously considering quitting within the next **six months**? Would you say:

READ OUT. SINGLE RESPONSE. NOTE TO SPEC WRITER: ROTATE SCALE ORDER (1-3 AND 3-1)

No, I have no intention of quitting	01	GO TO Q21 CONTINUE
Yes, I am thinking of quitting	02	
Yes, I am thinking of quitting in the next 30 days	03	
Don't know [DO NOT READ]	99	
Refused [DO NOT READ]	97	

Q20 CS: Who or what prompted you to consider this?
DO NOT READ. MULTIPLE RESPONSE. PROBE: Was there anything else?

"Adrian" ad	01
Pictures on cigarette packets	02
Any other ad	03
Friends/Family	04
Health professionals (doctor, nurse, midwife and so on)	05
My health	06
The health of others	07
My own decision	08
Nothing in particular	09
Other (please specify)	98
Don't know	99
Refused	97

Q21 CS: In the last three months have you ever deliberately quit smoking for at least 24 hours?
READ OUT. SINGLE RESPONSE.

Yes	01	CONTINUE
No, I have not tried to quit for at least 24 hours	02	
No, I've never tried to quit	03	GO TO Q26
Don't know/unsure [DO NOT READ]	99	
Refused [DO NOT READ]	97	

Q22 CS: How many times did you quit smoking for more than 24 hours in the last three months?
DO NOT READ. SINGLE RESPONSE.

1	01
2	02
3	03
4	04
5	05
6	06
7	07
8	08
9+	09
Don't know/unsure [DO NOT READ]	99
Refused [DO NOT READ]	97

Q23 CS and RQS: Thinking about when you most recently quit, what were your reasons for trying to quit? Please mention all that apply.

MULTIPLE RESPONSE. DO NOT READ.

For my own health	01
For the health of someone who lives with me	02
It's too expensive to smoke/monetary reasons	03
I was sick of smoking	04
I/my partner was pregnant	05
To be a good role model for my children/grandchildren	06
Get fitter for sport	07
To be around with children/grandchildren for longer	08
Advice from doctors or other health professional	09
Don't want children/others harmed by second-hand smoke	10
Pressure from family	11
Had to because I was sick/ in hospital	12

The smell	13
Adrian ad	14
Picture warnings on cigarette packets	15
Other (please specify)	98
Don't know/unsure	99
Refused	97

Q24 CS and RQS: When you stopped smoking did you receive any advice or use any products to help you quit smoking?

DO NOT READ.

Yes	01	CONTINUE
No	02	SKIP TO Q26
Don't know/unsure [DO NOT READ]	99	IF CS OR
Refused [DO NOT READ]	97	Q27 IF RQS

Q25 CS and RQS: Please identify any help, advice, programmes and products used to help you quit during your last quit attempt. Please say as many as apply.

MULTIPLE RESPONSE. DO NOT READ.

The Quitline (national freephone service 0800 778 778)	01
Another stop smoking programme (please specify)	02
A doctor from a hospital	04
A doctor, GP	05
A dentist	06
A nurse	07
A pharmacist	08
A midwife	09
A Māori community healthworker	10
A friend or family member (please specify)	11
A school counsellor	12
Some other advisor not mentioned here (please specify)	13
Nicotine patches	14
Nicotine gum	15
Nicotine Microtab	16
Nicotine Lozenges	17
Nicotine inhalers	18
Zyban	19
Champix	20
The internet (please specify)	21
A texting service	22
A self help book (please specify)	23
Other (please specify)	24
Don't know	99
Refused	97

Q26 CS: You may have already mentioned the Quitline, an advice and support service for people who would like to quit smoking.

How likely is it that you would ring the Quitline in the future?

READ OUT. SINGLE RESPONSE. NOTE TO SPEC WRITER: ROTATE SCALE ORDER (1-5 AND 5-1)

Highly unlikely	01
Unlikely	02
Unsure	03
Likely	04
Definitely likely	05
Don't know [DO NOT READ]	99

Q27 CS and RQS: Within the last 3 months, have you ever talked about smoking or quitting smoking with a doctor, nurse or other health professional?

Yes	01
No	02
Don't know [DO NOT READ]	99
Refused [DO NOT READ]	97

Q28 CS: In the future, how likely are you to speak to a doctor, nurse or other health professional about quitting smoking?

READ OUT. SINGLE RESPONSE. NOTE TO SPEC WRITER: ROTATE SCALE ORDER (1-5 AND 5-1)

Highly unlikely	01
Unlikely	02
Unsure	03
Likely	04
Definitely likely	05
Don't know [DO NOT READ]	99

Demographics : Ask CS and RQS all questions in this section

Finally, I would like to ask you a few questions about you and your household.

Q29 Which of the following best describes the structure of your household?

SINGLE RESPONSE. READ OUT.

One adult and one or more children	01	CONTINUE
Two adults and one or more children	02	
Three or more adults and one or more children	03	
Adult/s only	04	GO TO Q31
Other (please specify) [DO NOT READ]	98	
Refused [DO NOT READ]	97	

Q30 Are you a parent or regular caregiver of any of the children in your household aged 14 years or under?

SINGLE RESPONSE. DO NOT READ.

Yes	01
No	02
Don't know	99
Refused	97

Q31 Finally, I would like to ask you a question about income. Your response is confidential.
Which of the following best describes your total household income, for the last year, before tax?

READ OUT. SINGLE RESPONSE ONLY

\$20,000 or less	01
\$20,001-\$30,000	02
\$30,001-\$50,000	03
\$50,001-\$70,000	04
\$70,001-\$100,000	05
\$100,001 or more	06
Don't know [DO NOT READ]	99
Refused [DO NOT READ]	97

THANK AND CLOSE

Appendix B: Data Tables

Table B1: Unprompted advertising recall - recall any advertising about the harmful effects of smoking

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Yes	415 90%	394 90%	18 82%	172 90%	6 75%	287 91%	29 85%	268 90%	118 90%	48 83%	367 91%
No	44 10%	39 9%	4 18%	19 10%	2 25%	24 8%	5 15%	28 9%	11 8%	8 14%	36 9%
Don't Know	3 1%	3 1%				3 1%		1 0%	2 2%	2 3%	1 0%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B2: Unprompted advertising recall: first mentioned advertisement

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: SEEN ADVERTISING	415 100%	394 100%	18 100%	172 100%	6 100%	287 100%	29 100%	268 100%	118 100%	48 100%	367 100%
A man in his 50's. He speaks through a hole in his throat (trachy). he has oral cancer and has had radiotherapy and an operation to remove his tongue and can't eat.	123 30%	123 31%		53 31%	2 33%	83 29%	12 41%	85 32%	26 22%	18 38%	105 29%
Tobacco/cigarette pack warnings	111 27%	105 27%	5 28%	44 26%	1 17%	80 28%	2 7%	71 26%	38 32%	11 23%	100 27%
An ad showing a mother smoking inside her car with a baby sitting at the back, while waiting to pick up another two kids from sport. The coach gives her a filthy look.	78 19%	74 19%	4 22%	24 14%	1 17%	61 21%	4 14%	47 18%	27 23%	10 21%	68 19%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B3: Unprompted advertising recall: total recall

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Māori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: SEEN ADVERTISING	415 100%	394 100%	18 100%	172 100%	6 100%	287 100%	29 100%	268 100%	118 100%	48 100%	367 100%
A man in his 50's. He speaks through a hole in his throat (trachy). he has oral cancer and has had radiotherapy and an operation to remove his tongue and can't eat.	172 41%	170 43%	2 11%	73 42%	2 33%	118 41%	14 48%	123 46% +	35 30%	22 46%	150 41%
Tobacco/cigarette pack warnings	171 41%	162 41%	8 44%	71 41%	3 50%	121 42%	7 24%	111 41%	53 45%	17 35%	154 42%
An ad showing a mother smoking inside her car with a baby sitting at the back, while waiting to pick up another two kids from sport. The coach gives her a filthy look.	160 39%	154 39%	6 33%	63 37%	2 33%	111 39%	7 24%	104 39%	49 42%	20 42%	140 38%
Ads showing celebrities talking about smoking and how it is not cool. Like that guy off Shortland Street and some bands.	45 11%	42 11%	3 17%	17 10%	1 17%	34 12%	4 14%	38 14% ++	3 3%	3 6%	42 11%
An ad showing parents smoking at home when their children are there. You can see the children breathing in the poison from the smoke.	39 9%	39 10%		15 9%		28 10%		29 11%	10 8%	2 4%	37 10%
A Pacific couple, quitting smoking. They have 10 kids and the mum is pregnant with their 11th baby.	29 7%	28 7%	1 6%	14 8%	1 17%	18 6%		20 7%	9 8%	3 6%	26 7%

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Māori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
A 30-year-old Maori mum, quitting smoking with her partner Joe. They go to the gym, and she goes out with her friends and wants to quit for her family.	26 6%	23 6%	3 17%	13 8%	1 17%	15 5%	2 7%	16 6%	8 7%	2 4%	24 7%
A lung being cut in half and some tar being poured on to it.	25 6%	25 6%		12 7%		16 6%	4 14%	17 6%	4 3%	1 2%	24 7%
An ad Showing a young man trying to quit smoking by calling the Quitline. The Quitline Adviser says 'well done'	20 5%	20 5%		9 5%		12 4%	1 3%	13 5%	6 5%	7 15%	13 4%
A Maori man in his mid-30's who relapsed and is giving quitting another go. His partner Tash appeared in a previous ad and successfully quit smoking	19 5%	18 5%	1 6%	12 7%		13 5%	1 3%	13 5%	5 4%	3 6%	16 4%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B4: Prompted (total) advertising recall: Adrian

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Q10											
Yes	436 94%	436 100%		184 96%	7 88%	293 93%	33 97%	283 95%	120 92%	56 97%	380 94%
No	22 5%		22 100%	7 4%	1 13%	17 5%	1 3%	12 4%	9 7%	2 3%	20 5%
Don't know	4 1%					4 1%		2 1%	2 2%		4 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B5: Adrian: unprompted message uptake

	Total	RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS	
		Yes	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: RECALLED ADRIAN ADS	436 100%	436 100%	184 100%	7 100%	293 100%	33 100%	283 100%	120 100%	56 100%	380 100%
Do not start smoking/Don't smoke	100 23%	100 23%	29 16%	1 14%	80 27%	5 15%	60 21%	35 29%	13 23%	87 23%
Smoking is bad for you	71 16%	71 16%	33 18%	3 43%	44 15%	7 21%	49 17%	15 13%	12 21%	59 16%
It's not worth it	62 14%	62 14%	37 20%		35 12%	11 33%	44 16%	7 6%	6 11%	56 15%
Smoking causes oral or throat cancer	54 12%	54 12%	20 11%		38 13%	1 3%	36 13%	17 14%	6 11%	48 13%
Stop smoking/Give up/Quit	40 9%	40 9%	18 10%	2 29%	25 9%	5 15%	25 9%	10 8%	5 9%	35 9%
Adrian regrets smoking	35 8%	35 8%	8 4%		30 10%		27 10%	8 7%	4 7%	31 8%
Adrian's life has had major changes due to cancer	26 6%	26 6%	11 6%		17 6%		21 7%	5 4%	3 5%	23 6%
He says cancer can happen to you/to anyone	20 5%	20 5%	6 3%	2 29%	14 5%		15 5%	5 4%	3 5%	17 4%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B6: Adrian is an actor

	Total	RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS	
		Yes	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: RECALLED ADRIAN AD	436 100%	436 100%	184 100%	7 100%	293 100%	33 100%	283 100%	120 100%	56 100%	380 100%
Yes	97 22%	97 22%	42 23%	2 29%	62 21%	7 21%	52 18%	38 32%	15 27%	82 22%
No	305 70%	305 70%	132 72%	4 57%	205 70%	26 79%	214 76%	65 54%	34 61%	271 71%
Don't know	34 8%	34 8%	10 5%	1 14%	26 9%		17 6%	17 14%	7 13%	27 7%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B7: Learnt new information from the Adrian ad

	Total	RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS	
		Yes	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: RECALLED ADRIAN AD	436 100%	436 100%	184 100%	7 100%	293 100%	33 100%	283 100%	120 100%	56 100%	380 100%
Yes	231 53%	231 53%	125 68% +++	5 71%	131 45%	31 94% +++	153 54%	47 39%	29 52%	202 53%
No	203 47%	203 47%	58 32%	2 29%	161 55% +++	2 6%	129 46%	72 60% +++	27 48%	176 46%
Don't know	2 0%	2 0%	1 1%		1 0%		1 0%	1 1%		2 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B8: What has happened to Adrian is as likely to happen to smokers as non smokers

	Total	RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS	
		Yes	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: RECALLED ADRIAN AD	436 100%	436 100%	184 100%	7 100%	293 100%	33 100%	283 100%	120 100%	56 100%	380 100%
Q12a Yes	238 55%	238 55%	116 63%	6 86%	146 50%	15 45%	151 53%	72 60%	32 57%	206 54%
No	188 43%	188 43%	65 35%	1 14%	139 47%	18 55%	127 45%	43 36%	22 39%	166 44%
Don't know	10 2%	10 2%	3 2%		8 3%		5 2%	5 4%	2 4%	8 2%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B9: What has happened to Adrian is as likely to happen to heavy smokers as light smokers

	Total	RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS	
		Yes	Māori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: RECALLED ADRIAN AD	436 100%	436 100%	184 100%	7 100%	293 100%	33 100%	283 100%	120 100%	56 100%	380 100%
Q12a										
Yes	315 72%	315 72%	144 78%	6 86%	202 69%	25 76%	205 72%	85 71%	43 77%	272 72%
No	98 22%	98 22%	35 19%	1 14%	71 24%	7 21%	64 23%	27 23%	11 20%	87 23%
Don't know	23 5%	23 5%	5 3%		20 7%	1 3%	14 5%	8 7%	2 4%	21 6%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B10: Unprompted awareness of effects on the body caused by smoking

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Māori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462	436	22	191	8	314	34	297	131	58	404
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
TOTAL FREE AWARENESS											
Lung cancer	276	260	14	114	4	189	25	180	71	39	237
	60%	60%	64%	60%	50%	60%	74%	61%	54%	67%	59%
Heart Attacks	158	149	7	61	2	116	8	105	45	18	140
	34%	34%	32%	32%	25%	37%	24%	35%	34%	31%	35%
Oral cancer (such as mouth or tongue cancer)	151	142	8	61	5	107	11	111	29	23	128
	33%	33%	36%	32%	63%	34%	32%	37%	22%	40%	32%
Cancer (Unspecified)	143	135	6	63	2	90	11	99	33	21	122
	31%	31%	27%	33%	25%	29%	32%	33%	25%	36%	30%
Lung disease	114	108	5	48	2	83	5	79	30	15	99
	25%	25%	23%	25%	25%	26%	15%	27%	23%	26%	25%
Gangrene	89	85	3	33	5	68	9	68	12	13	76
	19%	19%	14%	17%	63%	22%	26%	23%	9%	22%	19%
Emphysema	88	87	1	23		73		61	27	12	76
	19%	20%	5%	12%		23%		21%	21%	21%	19%
Blindness	84	80	3	32	2	65	7	60	17	11	73
	18%	18%	14%	17%	25%	21%	21%	20%	13%	19%	18%
Coronary heart disease	43	42		20	1	30	3	35	5	2	41
	9%	10%		10%	13%	10%	9%	12%	4%	3%	10%
Smoking blocks your arteries/affects blood circulation	43	40	3	14		37	1	27	15	4	39
	9%	9%	14%	7%		12%	3%	9%	11%	7%	10%

		RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
	Total	Yes	No	Māori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Asthma	33 7%	33 8%		18 9%	2 25%	15 5%	1 3%	23 8%	9 7%	3 5%	30 7%
High blood pressure	31 7%	30 7%	1 5%	10 5%		23 7%		17 6%	14 11%	5 9%	26 6%
If you smoke when you are pregnant the baby is smoking too	26 6%	26 6%		10 5%	1 13%	19 6%	3 9%	22 7%	1 1%	4 7%	22 5%
Rotten teeth/gums	24 5%	23 5%	1 5%	10 5%	1 13%	19 6%	4 12%	16 5%	4 3%	3 5%	21 5%
Stroke	23 5%	23 5%		11 6%		17 5%	1 3%	19 6%	3 2%	3 5%	20 5%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B11: Perception of the extent to which smoking contributes to key illnesses- overview table

	BASE	Large extent	Some extent	Small extent	No extent	Refused	Don't Know
Stroke	462 100%	185 40%	182 39%	49 11%	23 5%		23 5%
Lung cancer	462 100%	364 79%	75 16%	12 3%	9 2%		2 0%
Oral cancer (such as mouth or tongue cancer)	462 100%	248 54%	143 31%	34 7%	12 3%	2 0%	23 5%
Gangrene	462 100%	124 27%	172 37%	79 17%	40 9%		47 10%
Blindness	462 100%	70 15%	179 39%	110 24%	58 13%		45 10%
Heart attacks	462 100%	222 48%	174 38%	36 8%	15 3%		15 3%
Lung diseases	462 100%	357 77%	79 17%	9 2%	8 2%		9 2%
Foul and offensive breath	462 100%	271 59%	121 26%	52 11%	10 2%		8 2%
Impotence	462 100%	61 13%	112 24%	97 21%	81 18%		111 24%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B11a: Perception of the extent to which smoking contributes to key illnesses – stroke

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Large extent	185 40%	179 41%	6 27%	85 45%	3 38%	117 37%	14 41%	117 39%	54 41%	28 48%	157 39%
Some extent	182 39%	169 39%	13 59%	76 40%	2 25%	128 41%	12 35%	124 42%	46 35%	22 38%	160 40%
Small extent	49 11%	45 10%	2 9%	13 7%	1 13%	36 11%	3 9%	34 11%	12 9%	4 7%	45 11%
No extent	23 5%	22 5%	1 5%	12 6%	1 13%	15 5%	4 12%	12 4%	7 5%	2 3%	21 5%
Don't Know	23 5%	21 5%		5 3%	1 13%	18 6%	1 3%	10 3%	12 9%	2 3%	21 5%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B11b: Perception of the extent to which smoking contributes to key illnesses – lung cancer

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Large extent	364 79%	344 79%	17 77%	155 81%	8 100%	242 77%	28 82%	243 82%	93 71%	49 84%	315 78%
Some extent	75 16%	70 16%	4 18%	24 13%		56 18%	4 12%	44 15%	27 21%	8 14%	67 17%
Small extent	12 3%	11 3%	1 5%	5 3%		9 3%	1 3%	6 2%	5 4%		12 3%
No extent	9 2%	9 2%		7 4%		5 2%	1 3%	3 1%	5 4%	1 2%	8 2%
Don't Know	2 0%	2 0%				2 1%		1 0%	1 1%		2 0%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B11c: Perception of the extent to which smoking contributes to key illnesses – oral cancer

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Large extent	248 54%	239 55%	9 41%	111 58%	5 63%	162 52%	16 47%	176 59%	56 43%	35 60%	213 53%
Some extent	143 31%	136 31%	5 23%	51 27%	1 13%	102 32%	12 35%	90 30%	41 31%	19 33%	124 31%
Small extent	34 7%	30 7%	2 9%	14 7%	1 13%	25 8%	3 9%	16 5%	15 11%	2 3%	32 8%
No extent	12 3%	11 3%	1 5%	7 4%	1 13%	7 2%	2 6%	6 2%	4 3%	1 2%	11 3%
Refused	2 0%	1 0%	1 5%	2 1%		1 0%			2 2%		2 0%
Don't Know	23 5%	19 4%	4 18%	6 3%		17 5%	1 3%	9 3%	13 10%	1 2%	22 5%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B11d: Perception of the extent to which smoking contributes to key illnesses – gangrene

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Māori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Large extent	124 27%	122 28%	2 9%	60 31%	3 38%	81 26%	9 26%	92 31%	23 18%	10 17%	114 28%
Some extent	172 37%	162 37%	9 41%	68 36%	1 13%	116 37%	8 24%	113 38%	51 39%	25 43%	147 36%
Small extent	79 17%	73 17%	4 18%	31 16%	4 50%	56 18%	10 29%	47 16%	22 17%	8 14%	71 18%
No extent	40 9%	37 8%	3 14%	18 9%		27 9%	5 15%	20 7%	15 11%	4 7%	36 9%
Don't Know	47 10%	42 10%	4 18%	14 7%		34 11%	2 6%	25 8%	20 15%	11 19%	36 9%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B11e: Perception of the extent to which smoking contributes to key illnesses – blindness

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Large extent	70 15%	69 16%	1 5%	43 23% +++	4 50%	34 11%	8 24%	51 17%	11 8%	6 10%	64 16%
Some extent	179 39%	169 39%	8 36%	67 35%	1 13%	126 40%	10 29%	120 40%	49 37%	24 41%	155 38%
Small extent	110 24%	104 24%	5 23%	39 20%	2 25%	85 27% +	10 29%	66 22%	34 26%	13 22%	97 24%
No extent	58 13%	54 12%	4 18%	29 15%	1 13%	35 11%	5 15%	37 12%	16 12%	7 12%	51 13%
Don't Know	45 10%	40 9%	4 18%	13 7%		34 11%	1 3%	23 8%	21 16%	8 14%	37 9%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B11f: Perception of the extent to which smoking contributes to key illnesses – heart attacks

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Māori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Large extent	222 48%	210 48%	12 55%	104 54% +	6 75%	136 43%	21 62%	144 48%	57 44%	28 48%	194 48%
Some extent	174 38%	165 38%	7 32%	65 34% +	1 13%	128 41%	9 26%	108 36%	57 44%	27 47%	147 36%
Small extent	36 8%	33 8%	1 5%	12 6%		28 9%	2 6%	26 9%	8 6%		36 9%
No extent	15 3%	14 3%	1 5%	6 3%		10 3%	2 6%	9 3%	4 3%	1 2%	14 3%
Don't Know	15 3%	14 3%	1 5%	4 2%	1 13%	12 4%		10 3%	5 4%	2 3%	13 3%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B11g: Perception of the extent to which smoking contributes to key illnesses – lung diseases

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Māori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Large extent	357 77%	336 77%	19 86%	151 79%	8 100%	236 75%	27 79%	238 80%	92 70%	46 79%	311 77%
Some extent	79 17%	76 17%	1 5%	29 15%		58 18%	5 15%	49 16%	25 19%	12 21%	67 17%
Small extent	9 2%	9 2%		4 2%		7 2%	1 3%	4 1%	4 3%		9 2%
No extent	8 2%	7 2%	1 5%	4 2%		5 2%		3 1%	5 4%		8 2%
Don't Know	9 2%	8 2%	1 5%	3 2%		8 3%	1 3%	3 1%	5 4%		9 2%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B11h: Perception of the extent to which smoking contributes to key illnesses – foul and offensive breath

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Large extent	271 59%	257 59%	14 64%	116 61%	3 38%	178 57%	19 56%	181 61%	71 54%	34 59%	237 59%
Some extent	121 26%	114 26%	5 23%	51 27%	2 25%	83 26%	9 26%	78 26%	34 26%	17 29%	104 26%
Small extent	52 11%	48 11%	2 9%	18 9%	3 38%	38 12%	5 15%	31 10%	16 12%	7 12%	45 11%
No extent	10 2%	10 2%		3 2%		8 3%		4 1%	6 5%		10 2%
Don't Know	8 2%	7 2%	1 5%	3 2%		7 2%	1 3%	3 1%	4 3%		8 2%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B11i: Perception of the extent to which smoking contributes to key illnesses – impotence

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Large extent	61 13%	57 13%	4 18%	34 18%	1 13%	32 10%	6 18%	40 13%	15 11%	10 17%	51 13%
Some extent	112 24%	106 24%	6 27%	53 28%	+ 28%	71 23%	7 21%	74 25%	31 24%	15 26%	97 24%
Small extent	97 21%	91 21%	5 23%	39 20%	3 38%	71 23%	9 26%	68 23%	20 15%	11 19%	86 21%
No extent	81 18%	77 18%	2 9%	23 12%	3 38%	62 20%	4 12%	51 17%	26 20%	6 10%	75 19%
Don't Know	111 24%	105 24%	5 23%	42 22%	1 13%	78 25%	8 24%	64 22%	39 30%	16 28%	95 24%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B12: Understanding of smoking harms- overview

	BASE	Strongly disagree	Disagree	Agree	Strongly agree	TOTAL DISAGREE	TOTAL AGREE	Don't Know	Refused
If you smoke when you are pregnant the baby is smoking too	462 100%	17 4%	25 5%	90 19%	318 69%	42 9%	408 88%	11 2%	1 0%
Tobacco smoke is poisonous	462 100%	14 3%	22 5%	113 24%	306 66%	36 8%	419 91%	7 2%	
Smoking is highly addictive	462 100%	18 4%	13 3%	73 16%	357 77%	31 7%	430 93%		1 0%
Smoking can harm children	462 100%	13 3%	22 5%	107 23%	315 68%	35 8%	422 91%	4 1%	1 0%
Smoking blocks your arteries	462 100%	8 2%	39 8%	165 36%	234 51%	47 10%	399 86%	12 3%	4 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B12a: Understanding of smoking harms - if you smoke when you are pregnant the baby is smoking too

	RECALL ADRIAN			ETHNICITY			AGE			SMOKING STATUS	
	Total	Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Strongly disagree	17 4%	16 4%	1 5%	7 4%	1 13%	10 3%	2 6%	9 3%	6 5%	3 5%	14 3%
Disagree	25 5%	24 6%	1 5%	12 6%		17 5%		14 5%	11 8%	3 5%	22 5%
Agree	90 19%	87 20%	3 14%	33 17%	2 25%	68 22%	6 18%	50 17%	34 26%	6 10%	84 21%
Strongly agree	318 69%	298 68%	16 73%	137 72%	4 50%	209 67%	26 76%	219 74%	73 56%	44 76%	274 68%
TOTAL DISAGREE	42 9%	40 9%	2 9%	19 10%	1 13%	27 9%	2 6%	23 8%	17 13%	6 10%	36 9%
TOTAL AGREE	408 88%	385 88%	19 86%	170 89%	6 75%	277 88%	32 94%	269 91%	107 82%	50 86%	358 89%
Don't Know	11 2%	11 3%		2 1%	1 13%	9 3%		5 2%	6 5%	2 3%	9 2%
Refused	1 0%		1 5%			1 0%			1 1%		1 0%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B12b: Understanding of smoking harms - tobacco smoke is poisonous

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Strongly disagree	14 3%	12 3%	2 9%	5 3%		10 3%	2 6%	9 3%	3 2%	2 3%	12 3%
Disagree	22 5%	21 5%		9 5%		15 5%	2 6%	7 2%	13 10%	1 2%	21 5%
Agree	113 24%	106 24%	6 27%	39 20%	3 38%	87 28% +	6 18%	70 24%	37 28%	8 14%	105 26% +
Strongly agree	306 66%	291 67%	14 64%	136 71%	5 63%	197 63%	24 71%	208 70%	74 56%	47 81%	259 64%
TOTAL DISAGREE	36 8%	33 8%	2 9%	14 7%		25 8%	4 12%	16 5%	16 12%	3 5%	33 8%
TOTAL AGREE	419 91%	397 91%	20 91%	175 92%	8 100%	284 90%	30 88%	278 94%	111 85%	55 95%	364 90%
Don't Know	7 2%	6 1%		2 1%		5 2%		3 1%	4 3%		7 2%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B12c: Understanding of smoking harms - smoking is highly addictive

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Strongly disagree	18 4%	18 4%		6 3%	1 13%	14 4%	1 3%	12 4%	5 4%	2 3%	16 4%
Disagree	13 3%	13 3%		5 3%		10 3%	2 6%	8 3%	3 2%	2 3%	11 3%
Agree	73 16%	67 15%	6 27%	33 17%	1 13%	48 15%	8 24%	42 14%	23 18%	10 17%	63 16%
Strongly agree	357 77%	337 77%	16 73%	147 77%	6 75%	241 77%	23 68%	235 79%	99 76%	44 76%	313 77%
TOTAL DISAGREE	31 7%	31 7%		11 6%	1 13%	24 8%	3 9%	20 7%	8 6%	4 7%	27 7%
TOTAL AGREE	430 93%	404 93%	22 100%	180 94%	7 88%	289 92%	31 91%	277 93%	122 93%	54 93%	376 93%
Refused	1 0%	1 0%				1 0%			1 1%		1 0%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B12d: Understanding of smoking harms - smoking can harm children

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Strongly disagree	13 3%	13 3%		8 4%		8 3%		7 2%	6 5%	1 2%	12 3%
Disagree	22 5%	22 5%		7 4%		17 5%	1 3%	12 4%	9 7%	1 2%	21 5%
Agree	107 23%	98 22%	8 36%	37 19%	1 13%	79 25%	12 35%	55 19%	40 31%	7 12%	100 25%
Strongly agree	315 68%	298 68%	14 64%	139 73%	7 88%	205 65%	21 62%	223 75%	71 54%	48 83%	267 66%
TOTAL DISAGREE	35 8%	35 8%		15 8%		25 8%	1 3%	19 6%	15 11%	2 3%	33 8%
TOTAL AGREE	422 91%	396 91%	22 100%	176 92%	8 100%	284 90%	33 97%	278 94%	111 85%	55 95%	367 91%
Don't Know	4 1%	4 1%				4 1%			4 3%	1 2%	3 1%
Refused	1 0%	1 0%				1 0%			1 1%		1 0%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B12e: Understanding of smoking harms - smoking blocks your arteries

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Strongly disagree	8 2%	8 2%		5 3%		5 2%		6 2%	2 2%		8 2%
Disagree	39 8%	32 7%	5 23%	8 4%	1 13%	31 10%	2 6%	23 8%	14 11%	4 7%	35 9%
Agree	165 36%	156 36%	8 36%	62 32%	2 25%	119 38%	13 38%	106 36%	46 35%	19 33%	146 36%
Strongly agree	234 51%	224 51%	9 41%	108 57%	5 63%	148 47%	18 53%	154 52%	62 47%	35 60%	199 49%
TOTAL DISAGREE	47 10%	40 9%	5 23%	13 7%	1 13%	36 11%	2 6%	29 10%	16 12%	4 7%	43 11%
TOTAL AGREE	399 86%	380 87%	17 77%	170 89%	7 88%	267 85%	31 91%	260 88%	108 82%	54 93%	345 85%
Don't Know	12 3%	12 3%		6 3%		8 3%	1 3%	6 2%	5 4%		12 3%
Refused	4 1%	4 1%		2 1%		3 1%		2 1%	2 2%		4 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B13: Dangers of smoking have been exaggerated

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Yes	162 35%	149 34%	10 45%	62 32%	1 13%	114 36%	19 56%	97 33%	46 35%	16 28%	146 36%
No	291 63%	280 64%	10 45%	126 66%	7 88%	194 62%	15 44%	196 66%	80 61%	41 71%	250 62%
Refused	1 0%	1 0%				1 0%			1 1%	1 2%	
Don't Know	8 2%	6 1%	2 9%	3 2%		5 2%		4 1%	4 3%		8 2%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B14: Learnt anything new about the harmful effects of smoking recently

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Yes	139 30%	136 31%	2 9%	76 40%	2 25%	80 25%	12 35%	99 33%	28 21%	20 34%	119 29%
No	322 70%	299 69%	20 91%	115 60%	6 75%	233 74%	22 65%	198 67%	102 78%	38 66%	284 70%
Don't Know	1 0%	1 0%				1 0%			1 1%		1 0%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B15: Adrian ad prompts worry about own health

	Total	RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS	
		Yes	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: RECALLED ADRIAN AD	436 100%	436 100%	184 100%	7 100%	293 100%	33 100%	283 100%	120 100%	56 100%	380 100%
Yes	238 55%	238 55%	122 66% +++	5 71%	143 49%	22 67%	169 60%	47 39%	21 38%	217 57%
No	196 45%	196 45%	62 34%	1 14%	149 51% +++	11 33%	112 40%	73 61%	35 63%	161 42%
Don't know	2 0%	2 0%		1 14%	1 0%		2 1%			2 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B16: Encouraged to quit smoking by the Adrian Ad

		RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS
	Total	Yes	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: CURRENT SMOKERS WHO RECALLED ADRIAN AD	380 100%	380 100%	167 100%	7 100%	251 100%	30 100%	253 100%	97 100%	380 100%
Yes	194 51%	194 51%	96 57% +	5 71%	119 47%	23 77%	134 53%	37 38%	194 51%
No	183 48%	183 48%	71 43%	2 29%	129 51%	7 23%	117 46%	59 61% ++	183 48%
Don't know	3 1%	3 1%			3 1%		2 1%	1 1%	3 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B17: Current smokers: seeing the Adrian ad has made me more likely to quit smoking

		RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS
	Total	Yes	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: CURRENT SMOKERS WHO RECALLED ADRIAN AD	380 100%	380 100%	167 100%	7 100%	251 100%	30 100%	253 100%	97 100%	380 100%
Yes	169 44%	169 44%	87 52% ++	5 71%	103 41%	22 73%	117 46%	30 31%	169 44%
No	207 54%	207 54%	78 47%	2 29%	146 58%	8 27%	134 53%	65 67%	207 54%
Don't know	4 1%	4 1%	2 1%		2 1%		2 1%	2 2%	4 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B18: Current smokers: seeing the Adrian ad has made me more likely to call the Quitline

		RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS
	Total	Yes	Māori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: CURRENT SMOKERS WHO RECALLED ADRIAN AD	380 100%	380 100%	167 100%	7 100%	251 100%	30 100%	253 100%	97 100%	380 100%
Yes	110 29%	110 29%	63 38% +++	5 71%	58 23%	13 43%	77 30%	20 21%	110 29%
No	266 70%	266 70%	104 62%	2 29%	189 75%	17 57%	174 69%	75 77%	266 70%
Don't know	4 1%	4 1%			4 2% ++		2 1%	2 2%	4 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B19: Recent quitters: seeing the Adrian ad has made me more likely to stay quit

		RECALL ADRIAN	ETHNICITY		AGE			SMOKING STATUS
	Total	Yes	Maori	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter
BASE: RECENTLY QUIT SMOKERS WHO RECALLED ADRIAN AD	56 100%	56 100%	17 100%	42 100%	3 100%	30 100%	23 100%	56 100%
Yes	33 59%	33 59%	11 65%	23 55%	2 67%	19 63%	12 52%	33 59%
No	23 41%	23 41%	6 35%	19 45%	1 33%	11 37%	11 48%	23 41%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B20: Recent quitters: seeing the Adrian ads is an important reason why I have quit smoking

	Total	RECALL ADRIAN	ETHNICITY		AGE			SMOKING STATUS
		Yes	Maori	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter
BASE: RECENTLY QUIT SMOKERS WHO RECALLED ADRIAN AD	56 100%	56 100%	17 100%	42 100%	3 100%	30 100%	23 100%	56 100%
Yes	7 13%	7 13%	2 12%	5 12%	1 33%	2 7%	4 17%	7 13%
No	48 86%	48 86%	15 88%	36 86%	2 67%	28 93%	18 78%	48 86%
Don't know	1 2%	1 2%		1 2%			1 4%	1 2%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B21a: Intention to quit

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: TYPE CURRENT SMOKERS	404 100%	380 100%	20 100%	174 100%	8 100%	270 100%	31 100%	266 100%	107 100%	404 100%
No, I have no intention of quitting	128 32%	121 32%	6 30%	49 28%	1 13%	88 33%	5 16%	88 33%	35 33%	128 32%
Yes, I am thinking of quitting	205 51%	191 50%	11 55%	90 52%	6 75%	136 50%	20 65%	138 52%	47 44%	205 51%
Yes, I am thinking of quitting in the next 30 days	62 15%	59 16%	3 15%	33 19%	1 13%	38 14%	5 16%	37 14%	20 19%	62 15%
Refused	1 0%	1 0%				1 0%			1 1%	1 0%
Don't know	8 2%	8 2%		2 1%		7 3%	1 3%	3 1%	4 4%	8 2%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B21b: Reasons for intending to quit

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: SERIOUSLY CONSIDERING QUITTING	276 100%	259 100%	14 100%	125 100%	7 100%	182 100%	26 100%	178 100%	72 100%	276 100%
Friends/Family	110 40%	107 41%	3 21%	60 48%	1 14%	63 35%	12 46%	72 40%	26 36%	110 40%
My own decision	95 34%	87 34%	6 43%	37 30%	4 57%	65 36%	10 38%	57 32%	28 39%	95 34%
My health	84 30%	77 30%	5 36%	32 26%	2 29%	61 34%	3 12%	59 33%	22 31%	84 30%
Cost of smoking/Saving money	32 12%	28 11%	2 14%	13 10%		22 12%	2 8%	23 13%	7 10%	32 12%
Pictures on cigarettes packages	25 9%	24 9%	1 7%	16 13%		13 7%	3 12%	17 10%	5 7%	25 9%
Adrian ad	20 7%	20 8%		14 11%	1 14%	9 5%	3 12%	15 8%	2 3%	20 7%
Any other ad	18 7%	18 7%		13 10%	1 14%	6 3%	2 8%	14 8%	2 3%	18 7%
The health of others	14 5%	13 5%		3 2%	1 14%	12 7%		9 5%	5 7%	14 5%
Health professionals (doctor, nurse, midwife and so on)	13 5%	12 5%	1 7%	6 5%		11 6%	1 4%	7 4%	5 7%	13 5%

Table B22: Intention to call the Quitline

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: TYPE CURRENT SMOKERS	404 100%	380 100%	20 100%	174 100%	8 100%	270 100%	31 100%	266 100%	107 100%	404 100%
Highly unlikely	137 34%	128 34%	9 45%	45 26%	3 38%	103 38%	6 19%	82 31%	49 46%	137 34%
Unlikely	82 20%	80 21%	2 10%	31 18%	2 25%	61 23%	9 29%	48 18%	25 23%	82 20%
Unsure	75 19%	71 19%	4 20%	37 21%	2 25%	45 17%	6 19%	57 21%	12 11%	75 19%
Likely	59 15%	54 14%	1 5%	31 18%		32 12%	7 23%	42 16%	10 9%	59 15%
Definitely likely	45 11%	43 11%	2 10%	26 15%	1 13%	26 10%	2 6%	34 13%	9 8%	45 11%
TOTAL UNLIKELY	219 54%	208 55%	11 55%	76 44%	5 63%	164 61%	15 48%	130 49%	74 69%	219 54%
TOTAL LIKELY	104 26%	97 26%	3 15%	57 33%	1 13%	58 21%	9 29%	76 29%	19 18%	104 26%
Don't know	6 1%	4 1%	2 10%	4 2%		3 1%	1 3%	3 1%	2 2%	6 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B23: Intention to speak to a health professional about quitting smoking

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: TYPE CURRENT SMOKERS	404 100%	380 100%	20 100%	174 100%	8 100%	270 100%	31 100%	266 100%	107 100%	404 100%
Highly unlikely	102 25%	98 26%	4 20%	32 18%	2 25%	76 28%	7 23%	65 24%	30 28%	102 25%
Unlikely	79 20%	78 21%	1 5%	38 22%		56 21%	6 19%	58 22%	15 14%	79 20%
Unsure	68 17%	64 17%	3 15%	37 21%	3 38%	43 16%	11 35%	45 17%	12 11%	68 17%
Likely	86 21%	82 22%	4 20%	44 25%	+	47 17%	6 19%	57 21%	23 21%	86 21%
Definitely likely	60 15%	57 15%	2 10%	21 12%	3 38%	41 15%	1 3%	36 14%	23 21%	60 15%
TOTAL UNLIKELY	181 45%	176 46%	5 25%	70 40%	2 25%	132 49%	13 42%	123 46%	45 42%	181 45%
TOTAL LIKELY	146 36%	139 37%	6 30%	65 37%	3 38%	88 33%	7 23%	93 35%	46 43%	146 36%
Don't know	9 2%	1 0%	6 30%	2 1%		7 3%		5 2%	4 4%	9 2%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B24: Current smokers: seeing the Adrian ad has made me talk about quitting with a health professional

		RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS
	Total	Yes	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: CURRENT SMOKERS WHO RECALLED ADRIAN AD	380 100%	380 100%	167 100%	7 100%	251 100%	30 100%	253 100%	97 100%	380 100%
Yes	75 20%	75 20%	40 24%	4 57%	39 16%	7 23%	47 19%	21 22%	75 20%
No	302 79%	302 79%	127 76%	3 43%	209 83%	23 77%	204 81%	75 77%	302 79%
Don't know	3 1%	3 1%			+ 3 1%		2 1%	1 1%	3 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B25: Current smokers: I have called the Quiltine because of seeing the Adrian ad

	Total	RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS
		Yes	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: CURRENT SMOKERS WHO RECALLED ADRIAN AD	380 100%	380 100%	167 100%	7 100%	251 100%	30 100%	253 100%	97 100%	380 100%
Yes	21 6%	21 6%	12 7%	2 29%	9 4%	3 10%	15 6%	3 3%	21 6%
No	358 94%	358 94%	155 93%	5 71%	241 96%	27 90%	237 94%	94 97%	358 94%
Don't know	1 0%	1 0%			+ 1 0%		1 0%		1 0%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B26: Current smokers: I have had a go at quitting smoking because of seeing the Adrian ad

		RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS
	Total	Yes	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: CURRENT SMOKERS WHO RECALLED ADRIAN AD	380 100%	380 100%	167 100%	7 100%	251 100%	30 100%	253 100%	97 100%	380 100%
Yes	68 18%	68 18%	44 26% +++	2 29%	34 14%	11 37%	45 18%	12 12%	68 18%
No	310 82%	310 82%	122 73%	5 71%	216 86%	19 63%	206 81%	85 88%	310 82%
Don't know	2 1%	2 1%	1 1%		1 0% ++		2 1%		2 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B27a: Deliberately quit smoking in the last three months

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: TYPE CURRENT SMOKERS	404 100%	380 100%	20 100%	174 100%	8 100%	270 100%	31 100%	266 100%	107 100%	404 100%
Yes	175 43%	161 42%	12 60%	87 50% +	7 88%	111 41%	17 55%	120 45%	38 36%	175 43%
No, I have not tried to quit for at least 24 hours	95 24%	93 24%	2 10%	36 21%	1 13%	67 25%	4 13%	63 24%	28 26%	95 24%
No, I've never tried to quit	132 33%	124 33%	6 30%	51 29%		90 33%	10 32%	82 31%	40 37%	132 33%
Refused	1 0%	1 0%				1 0%			1 1%	1 0%
Don't know/unsure	1 0%	1 0%				1 0%		1 0%		1 0%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B27b: Number of times deliberately quit smoking in the last three months

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: QUIT SMOKING FOR 24 HOURS L3M	175 100%	161 100%	12 100%	87 100%	7 100%	111 100%	17 100%	120 100%	38 100%	175 100%
1	49 28%	43 27%	4 33%	23 26%	1 14%	30 27%	7 41%	31 26%	11 29%	49 28%
2	35 20%	34 21%	1 8%	19 22%	2 29%	22 20%	2 12%	26 22%	7 18%	35 20%
3	24 14%	22 14%	2 17%	19 22%	1 14%	9 8%	3 18%	18 15%	3 8%	24 14%
4	15 9%	14 9%	1 8%	7 8%	++	11 10%		10 8%	5 13%	15 9%
5	11 6%	11 7%		5 6%		7 6%	1 6%	7 6%	3 8%	11 6%
6	1 1%		1 8%			1 1%		1 1%		1 1%
7	2 1%	2 1%		1 1%		1 1%		1 1%	1 3%	2 1%
8	3 2%	3 2%		2 2%	1 14%	2 2%		3 3%		3 2%
9 or more	28 16%	25 16%	3 25%	9 10%	2 29%	23 21%	4 24%	18 15%	6 16%	28 16%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B27c: Reasons for quitting

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: QUIT SMOKING FOR 24 HOURS L3M	233 100%	217 100%	14 100%	104 100%	7 100%	155 100%	20 100%	151 100%	62 100%	58 100%	175 100%
For my own health	131 56%	123 57%	6 43%	52 50%	4 57%	94 61%	7 35%	87 58%	37 60%	37 64%	94 54%
It's too expensive to smoke/monetary reasons	40 17%	39 18%	1 7%	19 18%	1 14%	27 17%	4 20%	24 16%	12 19%	11 19%	29 17%
To be a good role model for my children/grandchildren	20 9%	18 8%	2 14%	12 12%		10 6%	1 5%	13 9%	6 10%	6 10%	14 8%
For the health of someone who lives with me	18 8%	18 8%		11 11%		12 8%	1 5%	15 10%	2 3%	6 10%	12 7%
Pressure from family	17 7%	16 7%	1 7%	11 11%	1 14%	10 6%	2 10%	12 8%	3 5%	3 5%	14 8%
To be around with children/grandchildren for longer	17 7%	17 8%		11 11%		8 5%		13 9%	4 6%	6 10%	11 6%
I was sick of smoking	15 6%	13 6%	2 14%	5 5%	1 14%	11 7%	2 10%	9 6%	4 6%	4 7%	11 6%
Time to stop/Personal decision to give up	12 5%	11 5%	1 7%	4 4%		8 5%	2 10%	6 4%	4 6%	6 10%	6 3%
Don't want children/others harmed by second-hand smoke	11 5%	11 5%		6 6%		5 3%		9 6%	2 3%	3 5%	8 5%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B27d: Used any advice or products to help quit smoking?

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: QUIT SMOKING FOR 24 HOURS	233 100%	217 100%	14 100%	104 100%	7 100%	155 100%	20 100%	151 100%	62 100%	58 100%	175 100%
Yes	67 29%	63 29%	4 29%	31 30%	3 43%	46 30%	3 15%	39 26%	25 40%	22 38%	45 26%
No	164 70%	152 70%	10 71%	72 69%	4 57%	107 69%	17 85%	110 73%	37 60%	36 62%	128 73%
Don't know/unsure	2 1%	2 1%		1 1%		2 1%		2 1%			2 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B27e: Type of advice or products used to help quit smoking?

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: USED PRODUCTS TO HELP QUIT SMOKING	67 100%	63 100%	4 100%	31 100%	3 100%	46 100%	3 100%	39 100%	25 100%	22 100%	45 100%
Q25. Nicotine patches	30 45%	30 48%		14 45%		19 41%	1 33%	16 41%	13 52%	9 41%	21 47%
The Quitline (national freephone service 0800 778 778)	18 27%	16 25%	2 50%	8 26%	1 33%	13 28%		10 26%	8 32%	4 18%	14 31%
Nicotine gum	16 24%	15 24%	1 25%	8 26%		11 24%		9 23%	7 28%	7 32%	9 20%
A doctor, GP	7 10%	7 11%		1 3%		6 13%	1 33%	2 5%	4 16%	2 9%	5 11%
Champix	4 6%	4 6%				4 9%		2 5%	2 8%	2 9%	2 4%
Hypnotism	4 6%	4 6%		2 6%		3 7%		2 5%	2 8%	2 9%	2 4%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B28: Talked with health professionals about quitting smoking in the last three months

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: TYPE CURRENT SMOKERS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Yes	115 25%	107 25%	5 23%	44 23%	2 25%	83 26%	6 18%	64 22%	45 34%	7 12%	108 27%
No	346 75%	328 75%	17 77%	147 77%	6 75%	230 73%	28 82%	233 78%	85 65%	51 88%	295 73%
Refused	1 0%	1 0%				1 0%			1 1%		1 0%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B29: Current smokers: perception that the Adrian ad and pictorial warnings on packets have similar messages

	Total	RECALL	ETHNICITY			AGE			SMOKING STATUS	
		ADRIAN	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: RECALLED ADRIAN AD	436 100%	436 100%	184 100%	7 100%	293 100%	33 100%	283 100%	120 100%	56 100%	380 100%
Yes	349 80%	349 80%	154 84%	5 71%	231 79%	28 85%	234 83%	87 73%	46 82%	303 80%
No	76 17%	76 17%	29 16%	2 29%	51 17%	5 15%	44 16%	27 23%	7 13%	69 18%
Don't know	11 3%	11 3%	1 1%		11 4%		5 2%	6 5%	3 5%	8 2%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B30: Current smokers: perception that the combination of the Adrian ad and the new picture warnings increases likelihood of quitting

		RECALL ADRIAN	ETHNICITY			AGE			SMOKING STATUS
	Total	Yes	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: CURRENT SMOKERS WHO RECALLED ADRIAN AD	380 100%	380 100%	167 100%	7 100%	251 100%	30 100%	253 100%	97 100%	380 100%
Yes	187 49%	187 49%	99 59%	7 100%	109 43%	23 77%	127 50%	37 38%	187 49%
No	188 49%	188 49%	68 41%		137 55%	7 23%	123 49%	58 60%	188 49%
Don't know	5 1%	5 1%			5 2%		3 1%	2 2%	5 1%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B31: Recent quitters: perception that the combination of the Adrian ad and the new picture warnings increases likelihood of staying quit

		RECALL ADRIAN	ETHNICITY		AGE			SMOKING STATUS
	Total	Yes	Maori	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter
BASE: RECENTLY QUIT SMOKERS WHO RECALLED ADRIAN AD	56 100%	56 100%	17 100%	42 100%	3 100%	30 100%	23 100%	56 100%
Yes	34 61%	34 61%	11 65%	25 60%	2 67%	19 63%	13 57%	34 61%
No	21 38%	21 38%	5 29%	16 38%	1 33%	10 33%	10 43%	21 38%
Don't know	1 2%	1 2%	1 6%	1 2%		1 3%		1 2%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B32: Awareness of pack warning labels

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Never	38 8%	38 9%		8 4%		33 11%	1 3%	15 5%	22 17%	19 33%	19 5%
Rarely	42 9%	42 10%		19 10%		30 10%	3 9%	25 8%	14 11%	8 14%	34 8%
Sometimes	70 15%	63 14%	7 32%	25 13%		48 15%	3 9%	51 17%	16 12%	12 21%	58 14%
Often	88 19%	85 19%	2 9%	38 20%	1 13%	58 18%	6 18%	55 19%	27 21%	12 21%	76 19%
Very often	221 48%	206 47%	13 59%	101 53%	7 88%	142 45%	21 62%	150 51%	50 38%	5 9%	216 53%
TOTAL SOMETIMES	112 24%	105 24%	7 32%	44 23%		78 25%	6 18%	76 26%	30 23%	20 34%	92 23%
TOTAL OFTEN	309 67%	291 67%	15 68%	139 73%	8 100%	200 64%	27 79%	205 69%	77 59%	17 29%	292 72%
Don't know	3 1%	2 0%		+		3 1%		1 0%	2 2%	2 3%	1 0%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B33: Impact of pack warning labels

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Never	321 69%	302 69%	15 68%	117 61%	3 38%	236 75%	21 62%	205 69%	95 73%	32 55%	289 72%
Once	8 2%	8 2%		5 3%		4 1%	1 3%	6 2%	1 1%		8 2%
A few times	77 17%	73 17%	4 18%	49 26%	3 38%	38 12%	10 29%	45 15%	22 17%	7 12%	70 17%
Many times	17 4%	17 4%		9 5%	2 25%	7 2%	1 3%	13 4%	3 2%	2 3%	15 4%
Not applicable/I didn't think about smoking	39 8%	36 8%	3 14%	11 6%		29 9%	1 3%	28 9%	10 8%	17 29%	22 5%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B34: Impact of the pack warnings on thinking about the health risks of smoking

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS	
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter	Current Smoker
BASE: ALL RESPONDENTS	462 100%	436 100%	22 100%	191 100%	8 100%	314 100%	34 100%	297 100%	131 100%	58 100%	404 100%
Not at all	117 25%	112 26%	4 18%	33 17%	1 13%	92 29%	4 12%	65 22%	48 37%	15 26%	102 25%
A little	118 26%	109 25%	7 32%	50 26%	2 25%	77 25%	13 38%	75 25%	30 23%	12 21%	106 26%
Somewhat	91 20%	86 20%	4 18%	41 21%		63 20%	2 6%	72 24%	17 13%	8 14%	83 21%
A lot	135 29%	128 29%	7 32%	67 35%	5 63%	81 26%	15 44%	85 29%	35 27%	22 38%	113 28%
Don't know	1 0%	1 0%			+	1 0%			1 1%	1 2%	

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B35: Impact of the pack warnings on intention to quit smoking

	Total	RECALL ADRIAN		ETHNICITY			AGE			SMOKING STATUS
		Yes	No	Maori	Pacific	NZ Euro/Other	15-19	20-49	50 Plus	Current Smoker
BASE: TYPE CURRENT SMOKERS	404 100%	380 100%	20 100%	174 100%	8 100%	270 100%	31 100%	266 100%	107 100%	404 100%
Not at all	147 36%	137 36%	8 40%	45 26%	1 13%	114 42%	4 13%	92 35%	51 48%	147 36%
A little	88 22%	82 22%	4 20%	39 22%		56 21%	12 39%	56 21%	20 19%	88 22%
Somewhat	90 22%	84 22%	6 30%	48 28%	2 25%	58 21%	6 19%	64 24%	20 19%	90 22%
A lot	77 19%	75 20%	2 10%	42 24%	5 63%	40 15%	9 29%	53 20%	15 14%	77 19%
Don't know	2 0%	2 1%				2 1%		1 0%	1 1%	2 0%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Table B36: Impact of the pack warnings on staying quit

	Total	RECALL ADRIAN		ETHNICITY		AGE			SMOKING STATUS
		Yes	No	Maori	NZ Euro/Other	15-19	20-49	50 Plus	Recent Quitter
BASE: RECENTLY QUIT SMOKING	58 100%	56 100%	2 100%	17 100%	44 100%	3 100%	31 100%	24 100%	58 100%
Not at all	17 29%	17 30%		2 12%	15 34%	1 33%	8 26%	8 33%	17 29%
A little	10 17%	10 18%		5 29%	7 16%		9 29%	1 4%	10 17%
Somewhat	7 12%	6 11%	1 50%		7 16%		5 16%	2 8%	7 12%
A lot	23 40%	22 39%	1 50%	9 53%	15 34%	2 67%	9 29%	12 50%	23 40%
Don't know	1 2%	1 2%		1 6%				1 4%	1 2%

Significantly different from the rest of the sample at the: + 95%, ++ 99%, +++ 99.9% confidence level

Appendix C: Variable Explanation Table

Table C1: Variable explanation table

Variable name (heading used in tables)	Variable categories	Comments/description	How the variable is referred to in text
Recall Adrian	Yes	This refers to whether the respondent recalled the Adrian ad (prompted).	Recalled Adrian ad
	No		Did not recall Adrian ad
Ethnicity	Māori	This refers to the ethnicity of the respondent, using prioritised ethnicity.	Māori
	Pacific		Pacific
	NZ European/Other		NZ European/Other
Age	15-19 years	This refers to the age of the respondent.	15-19 years
	20-49 years		20-49 years
	50 plus years		50 years plus
Smoking Status	Recent quitter	Recent quitters were defined as people who have smoked more than 100 cigarettes in their life but have quit smoking in the last 12 months.	Recent quitters
	Current smoker	Smokers were defined as people who have smoked more than 100 cigarettes in their life and currently smoke at least one cigarette per month.	Current smokers
Smoking Status long form	Recent Quitter	Recent quitters were defined as people who have smoked more than 100 cigarettes in their life but have quit smoking in the last 12 months.	Recent quitters
	Daily smoker	Smokers were defined as people who have smoked more than 100 cigarettes in their life and currently smoke at least one cigarette per day.	Daily smokers
	Weekly smoker	Smokers were defined as people who have smoked more than 100 cigarettes in their life and currently smoke at least one cigarette per week.	Weekly smokers
	Monthly smoker	Smokers were defined as people who have smoked more than 100 cigarettes in their life and currently smoke at least one cigarette per month.	Monthly smokers
Nicotine dependency	High	Respondents with a high nicotine dependency were defined as those who smoke the first cigarette with 30 minutes after waking.	With a high nicotine dependency
	Low	Respondents with a high nicotine dependency were defined as those who smoke the first cigarette at 30 minutes or longer after waking.	With a low nicotine dependency
Intention to quit	No	This refers to whether the respondents have an intention to quit in the next 6 months.	Not intending to quit
	Yes		Intending to quit in the next 6 months but not the next 30 days
	Yes, within 30 days		Intending to quit in the next 30 days
Gender	Male	This refers to the gender of the respondent.	Male
	Female		Female
Recall advertising	Yes	This refers to the ability to recall advertising in the last 3 months about the harmful effects of smoking.	Able to recall advertising
	No		Not able to recall advertising

Learnt anything new	Yes	This refers to whether the respondents have learnt anything new about the harmful effects of smoking in the last 3 months.	Those who had learnt something new
	No		Those who had not learnt something new
Noticed picture warnings	Yes	This refers to those who have noticed picture warnings on cigarette and tobacco packets in the last month.	Those who had noticed picture warnings
	No		Those who had not noticed picture warnings
Household Structure	One adult plus one or more children	Household structure	In a household with one adult plus one or more children
	Two adults plus one or more children		In a household with two adults plus one or more children
	Three adults plus one or more children		In a household with three adults plus one or more children
	Adults only		In a household with adults only
Caregiver	Yes	A caregiver is defined as being a parent or regular caregiver of any children in the household aged 14 years or under.	A caregiver
	No		Not a caregiver
Income	Less than \$30,000	Household income	Living in a household with an income of less than \$30,000 per annum
	\$30,001-\$50,000		Living in a household with an income of between \$30,001 and \$50,000 per annum
	\$50,001 or more		Living in a household with an income of more than \$50,000 per annum
The dangers of smoking have been exaggerated	Yes	This refers to whether the respondents believe the dangers of smoking have been exaggerated.	Those that said the dangers of smoking had been exaggerated
	No		Those that said the dangers of smoking had not been exaggerated
DHB	Tairāwhiti DHB	This refers to the DHB the respondent lived in.	Living in Tairāwhiti DHB
	Northland DHB		Living in Northland DHB
	Lakes DHB		Living in Lakes DHB
	Whanganui DHB		Living in Whanganui DHB