

**Effects of Anti- and Pro-Smoking Campaigns on the
Prevalence of Smoking in College Students**

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This study sought to show relationships between anti- and pro-smoking advertisement campaigns and the prevalence of smoking among college students. A total of 102 undergraduate students from Lindenwood University participated in the survey, which contained questions regarding family, friends, personal non-smoking and smoking habits, and the number and type of anti- and pro-smoking ads viewed. The researchers obtained informed consent, distributed the survey, and debriefed each participant after completion of the survey. The statistical analysis of the data did not show any relationships between exposure to ads and the prevalence of smoking. However, exposure to pro-smoking advertisements did affect brand preference. More research is needed to indicate any other relationships.

The American public has been exposed to pro-smoking advertisements—ads in magazines and newspapers or ads that used to run on billboards, the radio, and on television, and show advertisements that are meant to persuade the viewer to smoke—for many years. The pro-smoking advertisements worked well for the ‘big’ tobacco companies (i.e. R.J. Reynolds, Phillip Morris), increasing both sales and product recognition. However, due to the medical advances of the late 20th century and pure statistical data dealing with deaths due to smoking, tobacco is now seen as unhealthy. According to a 2002 report by the American Public Health Association (APHA), pro-

smoking advertisements have been completely removed from television and radio since 1992. The ‘big’ tobacco companies countered this by running anti-smoking advertisements—ads in magazines and newspapers or ads that run on billboards, the radio, and on television, and show advertisements that are meant to persuade the viewer not to smoke. These advertisements were designed to keep people, especially the young, away from tobacco. However, recently ‘big’ tobacco companies have been challenged on whether their anti-smoking ads actually decrease the prevalence of people who smoke. As a matter of fact, these anti-smoking ads have been blamed for the increase in the number of youths (18 to 25 years old) smoking today (APHA, 2002). Many studies have been done to show that smoking prevalence does not vary systematically with viewing these anti-smoking ads.

In an article by Nancy Zuckerbrod (2002), a study done by an anti-smoking foundation said tobacco giant Phillip Morris’ campaign to discourage teenagers from smoking was having the opposite effect. In this study, 12 to 17 year olds were surveyed after the ‘truth’ campaign began in 1998. Most of the results were associated with an increase in the chance that adolescents intended to smoke in the next year. The study found that 28.5% of high school students surveyed reported smoking a cigarette in the previous month; this number has increased from 16.4% surveyed 5 years prior to this study. This study intended to show a decrease in adolescent’s intention to smoke after seeing the anti-smoking ads. Instead, the results showed that many of the adolescents did intend to smoke and many were currently smoking. When Phillip Morris was confronted on the potential opposite effect of their campaigns, they were encouraged to reconstruct their campaigns and air less dramatic examples (Zuckerbrod, 2002).

According to a study done by Schooler and Feighery (1996), the rate of young people beginning to smoke was increasing in 1994. The researchers surveyed a representative sample of eighth graders and found that after exposure to anti-smoking ads, there was an 11% increase in the number of youths smoking. In this study, 41% of the participants admitted to experimentation with cigarettes, which was defined as having ever tried cigarette smoking. The participants were surveyed on their exposure to smoking advertisements, whether anti- or pro-smoking, in magazines, billboards, stores, events, mail distribution, and anywhere else the participants may have encountered an smoking advertisement of any type. The results indicated that the participants were more likely to smoke after seeing any type of smoking advertisement whether anti- or pro-smoking. In addition, participants with peers or family members who smoked were more likely to smoke. The advertisements did not have a significant effect in the subjects' intention to smoke (Schooler & Feighery, 1994).

The APHA (2002) article stated that Phillip Morris' anti-smoking ads, 'Think Don't Smoke,' decreased anti-tobacco sentiments amongst 12 to 17 year olds. The research found that non-smoking 12 to 17 year olds exposed to Phillip Morris's ads were also more likely to state that they intended to smoke in the future. The study showed that only 10 months after being exposed to the campaigns, the teens' anti-smoking attitudes were weakened; this in turn increased the likelihood of their smoking in the future. The percent of teens that agreed to take a stand against tobacco decreased 11% and the percent of teens that wanted to be involved in anti-smoking campaigns decreased 17% (APHA, 2002).

Russ Kirk, a reporter for the LA Weekly Times (2003), researched some of the anti-smoking ads, particularly the 'lie detector' ad produced by the 'truth' campaign (2005). Phillip Morris forced this ad off the air because it portrayed the individual attitudes of their own corporate employees. The 'lie detector' campaign featured teens going inside a major tobacco company and asking to administer a lie detector test to personnel in the advertisement department in order to clear up any confusion over whether smoking was addictive. The commercial was not constructed in a way that portrayed a clear anti-smoking message and was pulled off the air due to the fear that teenage smoking would increase (Kirk, 2003).

An elaborate study completed by Ellen R. Gritz (2002) showed that experimentation with cigarette smoking and the development of regular smoking activity typically occurred during adolescence. The 1994 Surgeon General's report, mentioned by Gritz, summarized a wide range of factors associated with adolescent smoking initiation. These factors were later investigated further in several subsequent studies. Psychological risk factors within this study were observed when the subjects were exposed to anti- and pro-smoking ads. In this study, 23% of the participants that smoked were not influenced after seeing anti-smoking ads and continued to smoke. Another 19% were influenced after seeing anti-smoking ads, but they disregarded the ads and continued smoking (Gritz, 2002).

All of this can seem a little confusing. 'Big' tobacco companies have done studies that show the effect they expect, while anti-tobacco industries have done studies that are complimentary to their expected results. This survey allowed the researchers to make inferences about a relationship between anti-and pro-smoking campaigns and the

prevalence of smoking among college students. The researchers hypothesized that anti-smoking campaigns do not have a significant impact on smoking in college students. However pro-smoking campaigns do have a significant impact on smoking in college students. In this study participants were surveyed on their personal, peer, and family history of smoking; brand preference; type and frequency of exposure to any kind of smoking campaign. The participants' answers were statistically calculated to see if any significant findings could be determined.

Method

Participants

The experimenters recruited 102 participants from Lindenwood University's Human Subject Pool (HSP) and from undergraduate psychology classes for this study. The HSP consists of undergraduate students at Lindenwood University who are participating in experiments in order to earn bonus points for their participating classes. If the students do not want to participate in or decline to finish an experiment, they are offered alternate ways to earn bonus points. When the HSP did not yield enough participants, the experimenters recruited participants from 100-level psychology courses with the permission of the instructors. The participants were 18 years of age or older and received bonus points from their instructors.

Materials

Using a computer, the experimenters created a survey based upon the experiment's hypothesis (See Appendix A). The researchers brainstormed for survey question ideas that could yield results that either supported or disproved their hypothesis. The questions looked at family, friends, and personal non-smoking and smoking habits of

the participants, and the viewing of anti- and pro-smoking campaign ads. The survey questions selected were formatted in alternate choices and rating scale responses, such as:

Have you ever seen (check all that apply):

Pro-smoking campaigns are ads in magazines and newspapers or ads that used to run on billboards, on the radio, and on television, and show advertisements that are meant to persuade the viewer to smoke.

- a pro-smoking advertisement on TV?
- a pro-smoking advertisement in a magazine?
- a pro-smoking advertisement on a billboard?
- a pro-smoking advertisement anywhere else?
- Have never seen a pro-smoking advertisement

Does your father know you smoke?

- No
- Yes

To what extent does your father approve?

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Does Not Approve	Somewhat Does Not Approve	Neutral	Somewhat Approves
		Does	Approve

The experimenters used a computer to prepare two informed consent forms. They also prepared and distributed two feedback forms to each participant. A sheet with information to stop smoking was printed off a computer (See Appendix B). The experimenters supplied participants with black pens to mark their responses on the survey. Lindenwood University's HSP supplied the experimenters with participant receipt forms, sign up sheets, and a HSP participant list form.

The experiment took place at Butler Library on Lindenwood University's campus in one of the large conference rooms on the second floor of the library, and in three

classrooms. The room in Butler Library had gray walls with one large rectangular table and four chairs. On the wall to the right of the door was a chalkboard on which the experimenters wrote “Smoking Survey” and two windows were located on the back wall. The classrooms were located in the basement of the library and in Young Hall on the first and fourth floors. The classroom in the basement of the library had rows of tables with chairs behind them facing a dry erase board and overhead projection screen. It had white walls and the door was centered at the back of the classroom. The classroom in Young Hall on the first floor had stadium-style seating with desks. The front of the classroom had a chalkboard and an overhead projection screen. It had white walls and the door was located in the front of the classroom to the right of the blackboard, there were no windows in this room. The classroom in Young Hall on the fourth floor and had desks facing a dry erase board and an overhead projection screen; the opposite wall contained windows. It had white walls and the door was located in the front of the classroom to the left of the dry erase board, the opposite wall contained windows.

Procedure

Sign up sheets were posted on the fourth floor of Young Hall. HSP subjects were required to sign up, two at a time, in 15 minute intervals in order to take the survey. When the experimenters could not obtain enough participants from the HSP, they administered the survey to three 100-level psychology courses with the permission of the instructors.

Upon entering the library conference room, the experimenters wrote “Smoking Survey” on the chalkboard. They sat behind the table, in front of the windows, and placed the following papers across table in the corresponding fashion: HSP participant

list form, informed consent forms, surveys, feedback letters, and the information sheet to quit smoking closest to the participants; pens, participant receipt forms, completed surveys, completed informed consent forms, and completed feedback forms closest to experimenters.

Each participant filled out the HSP participants list form as well as two informed consent forms, one of which was kept by the experimenters. Prior to the experiment, the experimenters explained to each participant that he or she would be answering questions about his or her smoking or non-smoking habits, the smoking or non-smoking habits of his or her friends and family, and his or her views of anti- and pro-smoking campaign ads. The participants were told that their answers would not be looked at individually, but instead would be combined and compared with the answers of other participants.

Pens were made available to the participants to be used on the survey. If the participants had any questions about the survey items, the researcher instructed the participant to answer the question to the best of his or her ability. The participants were each given at least ten minutes to complete the survey and were asked to place their survey face down on a pile next to the experimenter.

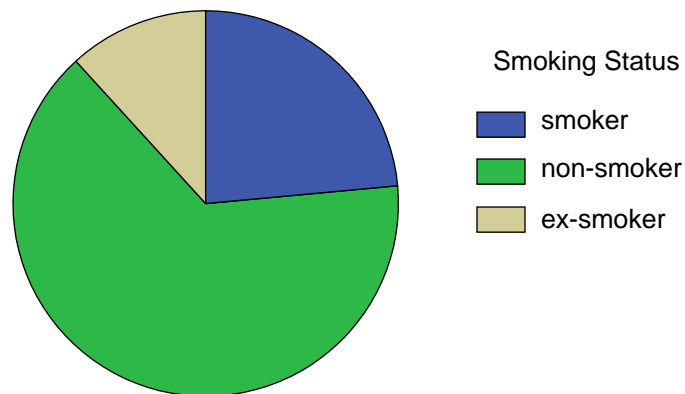
After the participants had completed the surveys, the experimenter had them fill out their information the participant receipt forms, which the participants would turn in to Young 407 for their bonus points. The experimenter thanked each participant and gave him or her two feedback forms indicating that, should the participant wish to view the results of the study, they could contact any of the experimenters involved in the study. The experimenter informed each participant of the hypothesis and method of the study

and had him or her fill out both copies of the feedback form and return one copy to the researcher.

Results

The researchers conducted chi-square analyses to see if there was a relationship between viewing anti- and pro- smoking ads and the prevalence of smoking. The effect of pro-smoking ads on the prevalence of smoking was not significant, $\chi^2_{(12)} = 5.276, p = .948$. The significance of anti-smoking ads and the effect on prevalence of smoking did not support the hypothesis, $\chi^2_{(12)} = 10.319, p = .588$.

Figure 1. Distribution of smoking status of subjects



The smoking status and gender items on the survey tabulated on a nominal scale resulted in 23.5% reported smokers, 64.7% non-smokers and 11.8% ex-smokers (see Figure 1). The gender breakdown of the respondents was 46.1% male and 53.9% female. Out of the 23.5% reported smokers, the male to female ratio was 1:3. Within the combined total of non- and ex-smokers (76.5% of respondents), the male to female ratio was an equal distribution, 50% female and 50% male (see Figure 2). The smokers

reported 83.3% smoked less than one pack of cigarettes a day, 8.3% smoked one pack of cigarettes a day, and 8.3% smoked more than one pack of cigarettes a day.

Figure 2. Gender distribution of subjects in regards to smoking status

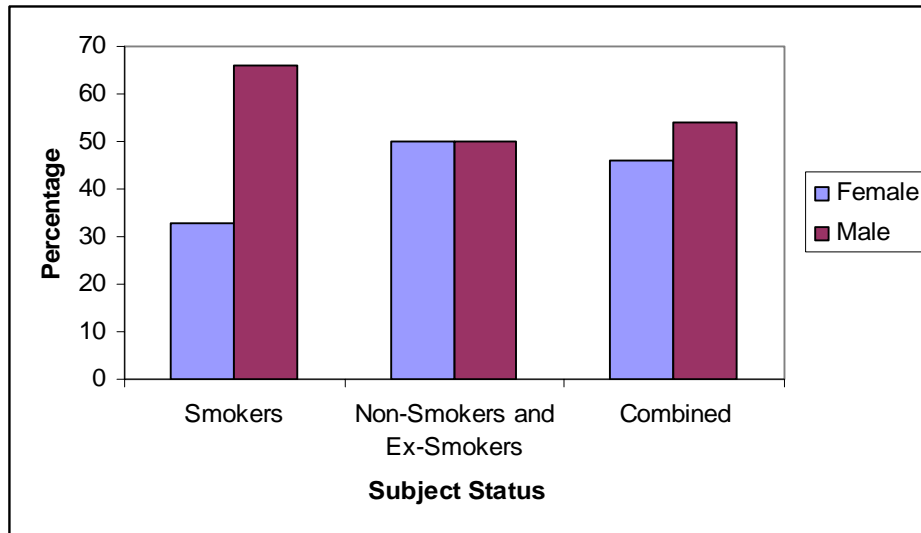
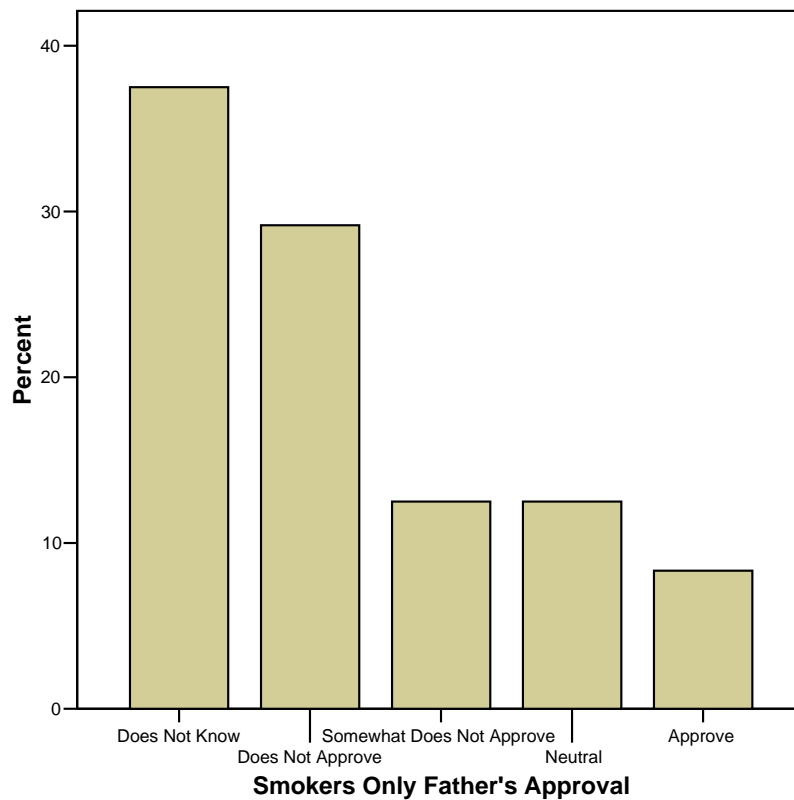
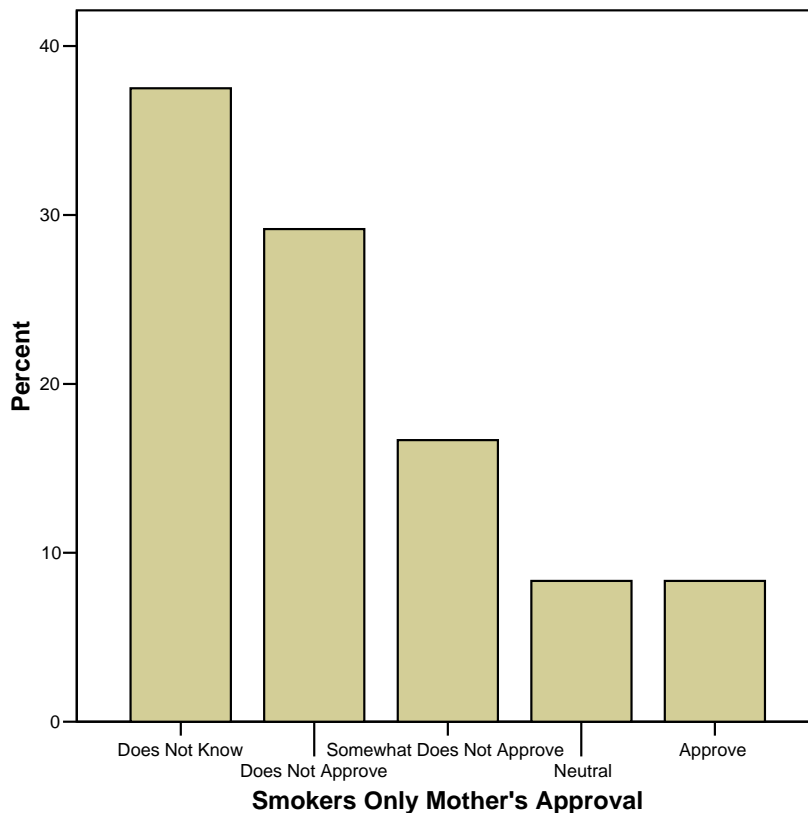


Figure 3. Smoker's father's approval ratings



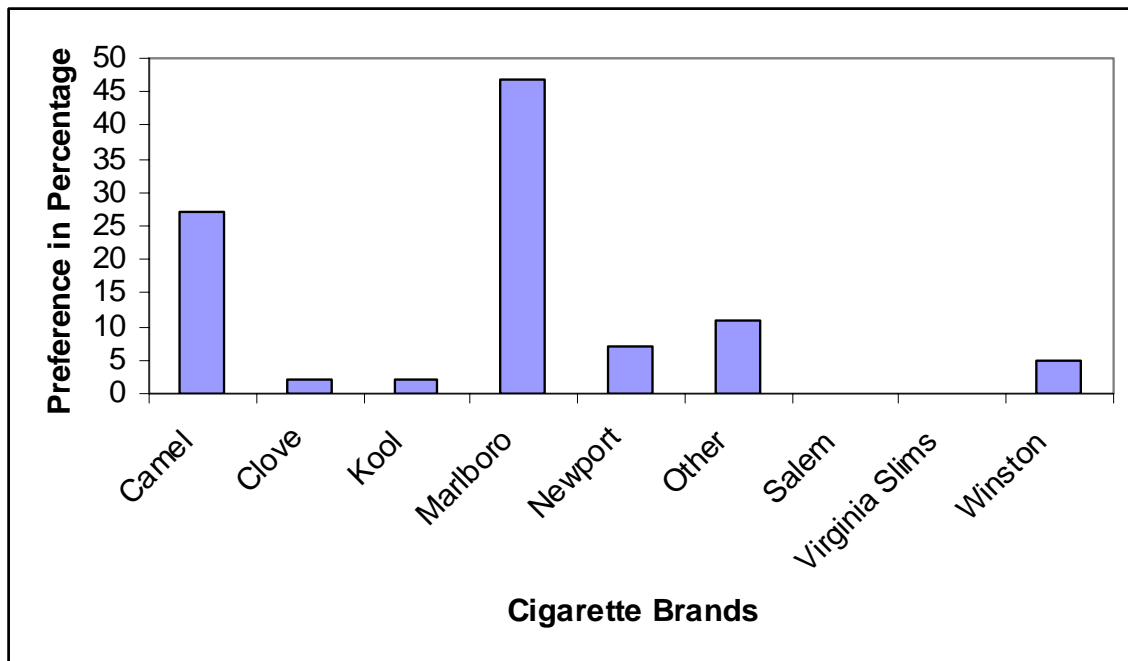
The survey asked smokers to rate their parent's approval (both father's and mother's) on a 5-point Likert scale ranging from 'does not know' to 'approves' (See Figures 3 and 4). The frequencies of mother's and father's approval ratings were identical, with 8.3% reporting approval, 12.5% neutral, 12.5% somewhat does not approve, 29.2% does not approve. The remaining 37.5% reported their parents had no knowledge of their smoking habits. This could be due to the traditional family relationship in which both parents are aware of their children's behavior and do not keep the information from each other.

Figure 4. Smoker's mother's approval ratings



Preferences among brands used by the smokers was examined with 47% naming Marlboro®, 27% Camel®, 7% Newport®, 5% Winston®, 2% Kool®, and 2% Clove. The remaining 10.9% reported using a brand not listed (see Figure 5). When smokers were asked to rate the influence of their preferred brand’s advertisements on their choice of brand, 87.5% said they were not influenced, 2% were somewhat influenced, and 1% was neutral. Data was missing for this variable therefore the percentages do not add up to 100%.

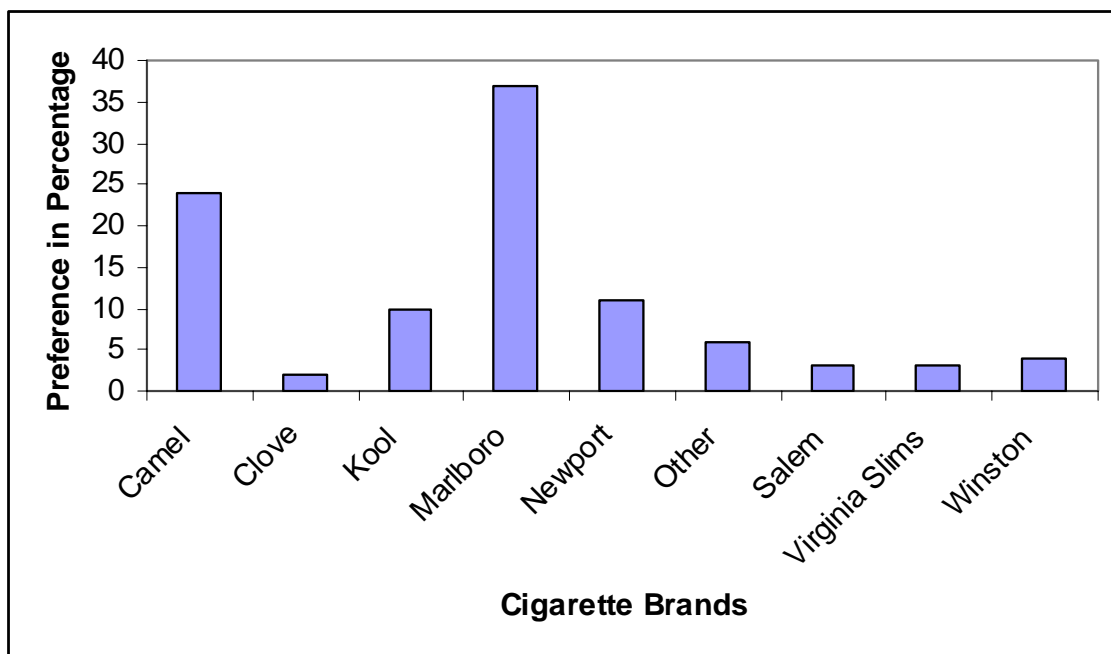
Figure 5. Smoker’s brand preferences



The study asked the respondents to indicate the number of their friends who smoked and their friends’ brand preferences. Of the smokers, 21.6% reported knowing more than three friends who smoked, and 1% knew only one person. Among the non- and ex-smokers, 38.2% knew more than three friends who smoked and 4.9% knew only

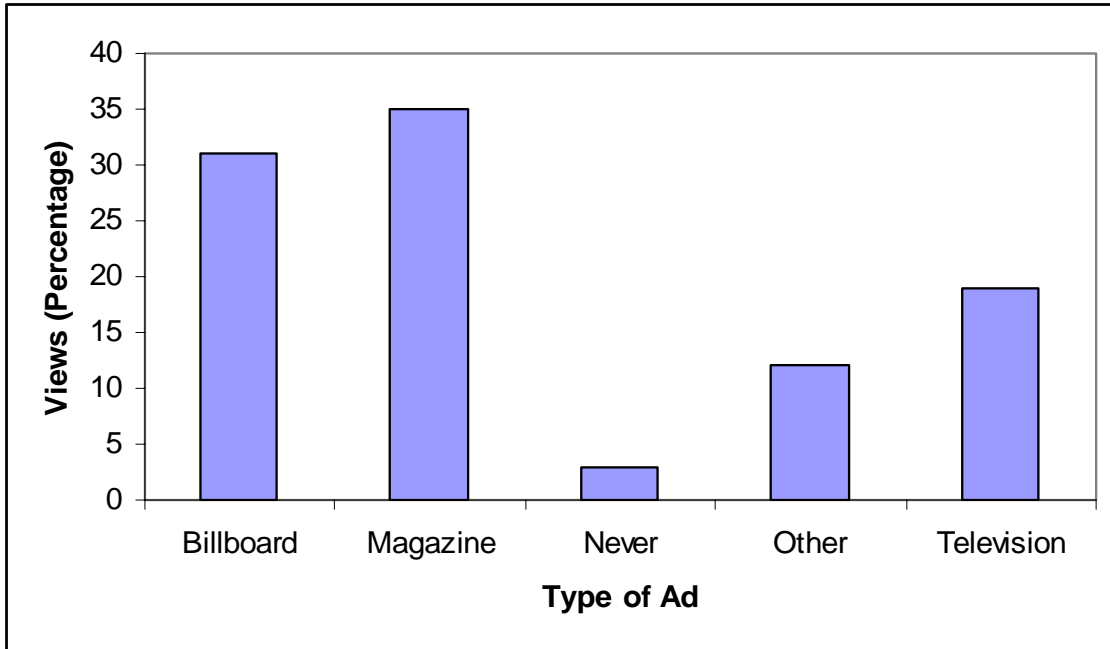
one person. Of all respondents combined, only 15.7% indicated they knew no one who smoked. An examination of the friends' brand preferences resulted in 37% naming Marlboro®, 24% Camel®, 11% Newport®, 10% Kool®, 4% Winston®, 3% Virginia Slims®, 3% Salem®, 2% Clove, and 6% Other (see Figure 6).

Figure 6. Friend's brand preferences



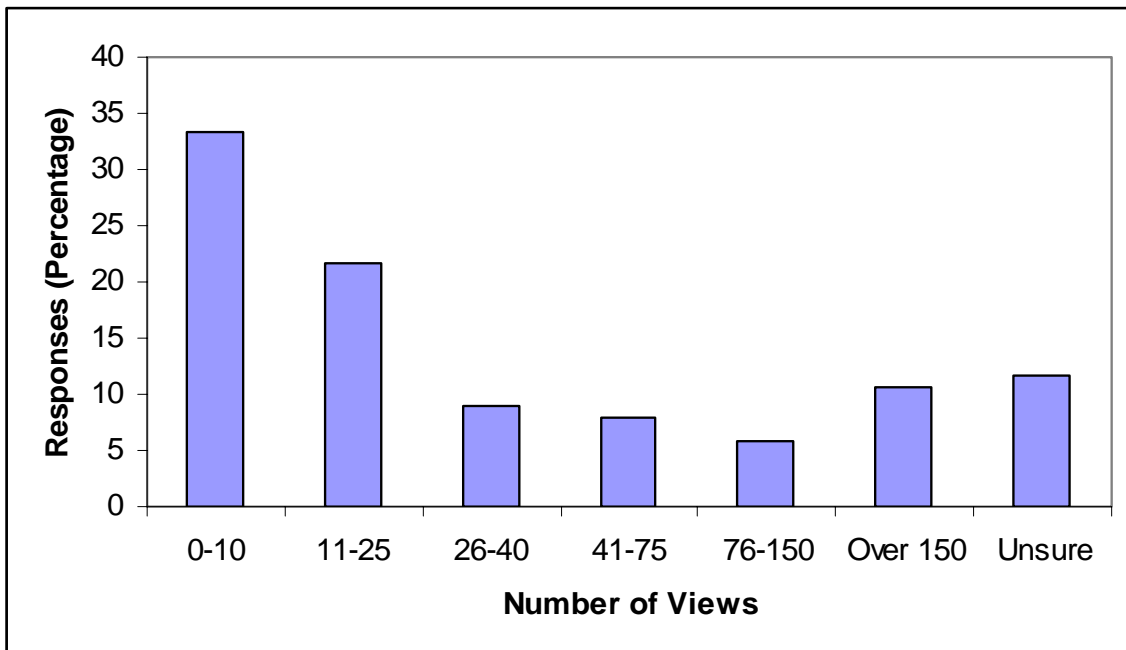
The study also examined where the pro- and anti- smoking advertisements were viewed and the frequency of exposure to such ads. Participants were able to select multiple responses and of the 257 responses, 35% had seen a pro-smoking ad in a magazine, 31% on a billboard, 19% on television, 12% anywhere else, and 3% reported never seeing a pro-smoking ad (see Figure 7).

Figure 7. Types of pro-smoking ads viewed



The frequency of viewing pro-smoking ads broke down as follows: 33.4% had seen a pro-smoking ad 0-10 times, 21.6% 11-25 times, 8.9% 26-40 times, 7.9% 41-75 times, 5.9% 76-150 times, and 10.6% over 150 times, with 11.7% unsure (see Figure 8).

Figure 8. Frequency of pro-smoking ad views.



The data revealed 93.1% of the respondents viewed an anti-smoking ad on television, 65.7% in a magazine, 46.1% on a billboard, 55.9% in a location not listed, and only 4.9% had never seen an anti-smoking ad (see Figure 9).

Figure 9. Types of anti-smoking ads viewed

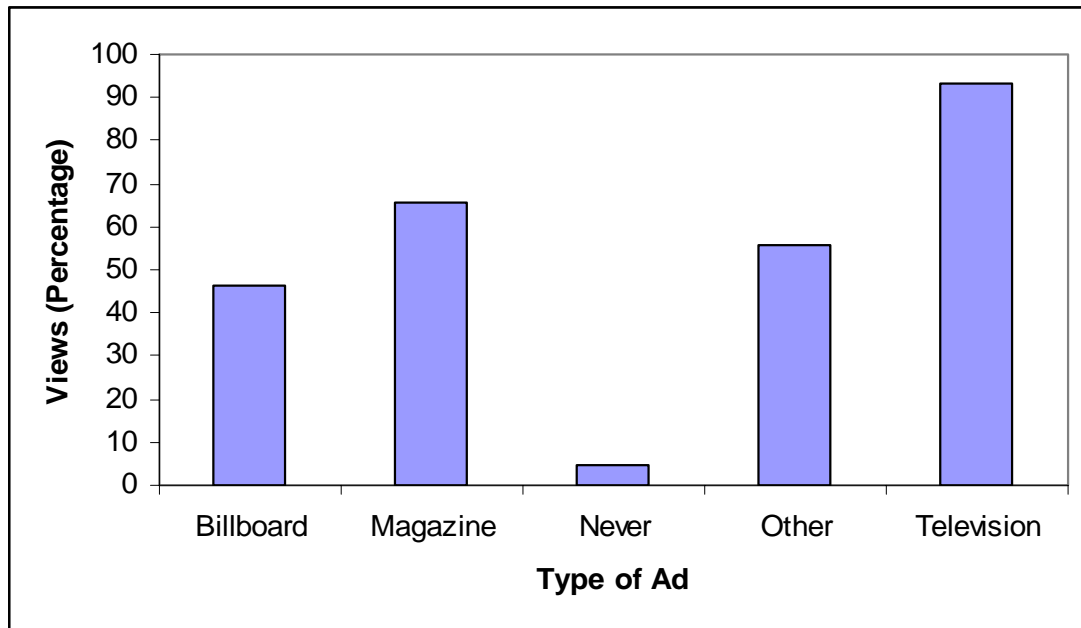
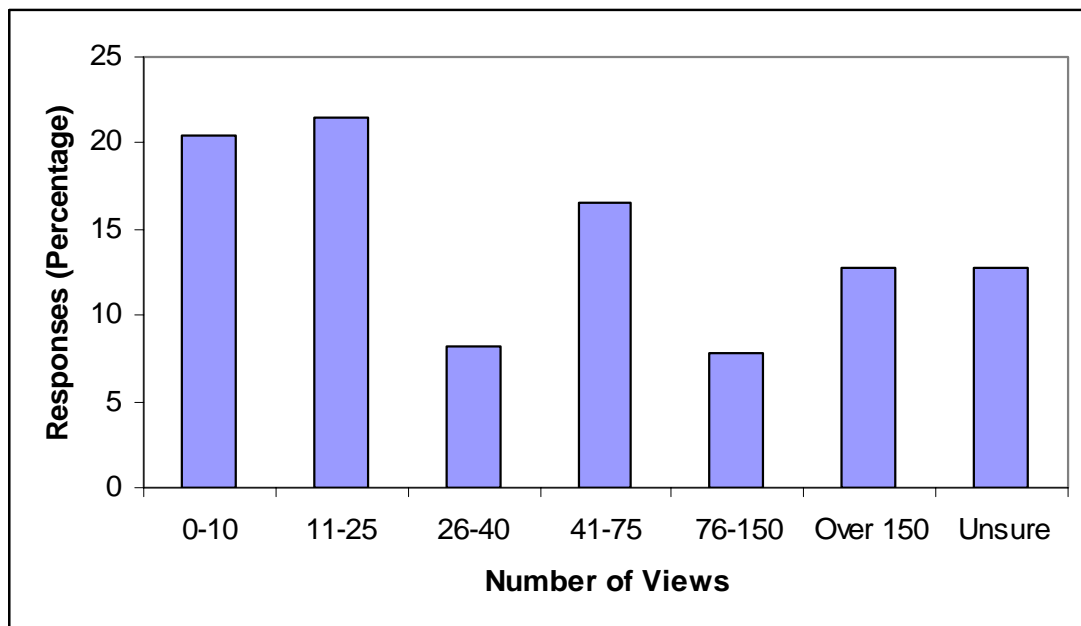


Figure 10. Frequency of anti-smoking ad views



When asked the number of times they had viewed an anti-smoking ad, 20.5% reported 0-10 times, 21.5% 11-25 times, 8.2% 26-40 times, 16.6% 41-75 times, 7.8% 76-150 times, 12.7% over 150 times, and 12.7% were unsure (see Figure 10).

Discussion

Analysis of the data did not yield a significant effect of anti-smoking advertisements on the prevalence of smoking among college students. Two Center for Disease Control (CDC) fact sheets from 1990 and 2000 reported a decrease of adult smokers between the years 1985 and 1995. The CDC study conducted in 1985 showed 30.1% of the young adults in the United States were currently smoking (CDC, 1990). In 1995, the CDC repeated the study and showed a decrease of 7.6% in the number of young adults smoking (CDC, 2000). The data collected for this research project showed 23.5% of the respondents to be young adult smokers. This slight variance in prevalence can be attributed to the small sample represented in this study and is not statistically significant. As the percentages did not change significantly, the researchers must conclude anti-smoking advertisement campaigns have had little to no effect on the actual prevalence of smoking. The expected decrease in the prevalence of smoking due to exposure to anti-smoking ads hypothesized was not observed.

The CDC (2000) reported cigarette smoking as more common among men (25.2%) than women (20.0%). This study did not support this finding. Conversely, the data obtained showed 66.6% of the smokers surveyed were female. This is surprising due to the medical advances made in the last decade. More, now than ever, women are told of the health risks associated with smoking especially with regards to the effects on unborn children. The participants in this study were all within the child-bearing age.

As predicted, pro-smoking advertisements had an effect on the prevalence of smoking among college students. The effect was not as expected, directly influencing the prevalence of smoking; however data showed an effect on brand preference that the researchers expected. Analysis of these data revealed 77.4% preferred the Marlboro® and the Camel® brands of cigarettes (37% and 24% respectively). Phillip-Morris and R.J. Reynolds are the two major tobacco companies who produce and advertise these two brands of cigarettes, correspondingly. These ‘big’ tobacco companies equally spend more money, on both anti- and pro-smoking ads, than all of the other tobacco companies combined spend (truth, 2005). With such big advertising budgets at their disposal, it is a small wonder their brands are the most popular. Pro-smoking advertising has been banned from radio and television since 1992. Most of the participants in this study were between 5 and 12 years of age the last time they could have been exposed to such an ad, even though 19% reported seeing such an ad on television. Obviously, the pro-smoking ads in magazines and on billboards are working just fine for the tobacco companies.

The study sought to find relationships between anti- and pro-smoking ads and the prevalence of smoking. The lack of significance found can be attributed to both the lack of participants and the experimental error. With the number of variables in this study, more than 102 surveys would have to be collected and analyzed in order to get a representative sample; a survey of this size should have thousands of participants. Error in this study came from many different directions. The rooms used for the survey were not held constant; room assignments changed twice, used classrooms instead of assigned rooms, lack of information for participants to find the rooms, etc. Using participants from the HSP only provided 36% of the data; the rest was collected in classroom

situations, quite different from the HSP settings. The survey itself needs revision. If more time had been available for planning, the researchers would have found a standardized survey. There were errors in the survey itself; not all possible answers were made available, typographical errors, participants did not follow directions, etc. Experimenter error was apparent in the differing ways the survey was presented and collected; some participants were alone, some took the survey with another person in the room, others in large classrooms of over 24 people; the survey could not and was not presented the exact same way every time.

These data indicated clearly that the tobacco industry has been successful over the past decade in recruiting new smokers among young people. The increased smoking prevalence among young adults has partially offset the successes of smoking cessation programs and anti-smoking programs. Further reductions in adult smoking prevalence will require increased efforts to prevent smoking initiation among adolescents and young adults, as well as smoking cessation efforts to help heavier smokers quit.

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Appendix A

Questionnaire

Smoking and Non-Smoking Habits Among College Students

Please answer the following questions to the best of your ability.

1. Are you:
 Male Female
 Smoker: *I am currently smoking.*
 (Smokers, please turn to Part I and answer only the questions in this section)
 Non-smoker: *I have never smoked.*
 (Non-smokers, please turn to Part II and answer only the questions in this section)
 Ex-Smoker: *I have smoked before but am not currently smoking.*
 (Ex-Smokers, please turn to Part II and answer only the questions in this section)

Part I: Smokers Only

Family

1. Does your father know you smoke?
 No
 Yes
 To what extent does your father approve?

Does Not Approve	Somewhat Not Approve	Does Neutral	Somewhat Approves	Does Approve

2. Does your mother know you smoke?
 No
 Yes
 To what extent does your mother approve?

Does Not Approve	Somewhat Not Approve	Does Neutral	Somewhat Approves	Does Approve

3. Does anyone in your family smoke?
 No
 Yes
 If yes, who (check all that apply):
 Father: What Brand(s): _____
 Mother: What Brand(s): _____
 Sibling(s): How Many? _____ What Brand(s): _____
 Other: How Many? _____ What Brand(s): _____

Friends

4. Do any of your friends smoke?

No

Yes

If yes, How many?

One

Less than 3

More than 3

5. What Brand(s) do your friends smoke (check all that apply)?

Camel

Clove

Kool

Marlboro

Newport

Salem

Virginia Slims

Winston

Other: Please list: _____

Personal

6. Have you ever seen (check all that apply):

Pro-smoking campaigns are ads in magazines and newspapers or ads that used to run on billboards, on the radio, and on television, and show advertisements that are meant to persuade the viewer to smoke.

a pro-smoking advertisement on TV?

a pro-smoking advertisement in a magazine?

a pro-smoking advertisement on a billboard?

a pro-smoking advertisement anywhere else?

Have never seen a pro-smoking advertisement

7. Please estimate how many times have you seen any form of pro-smoking ad in the last two years?

0-10

11-25

26-40

41-75

76-150

Over 150 times

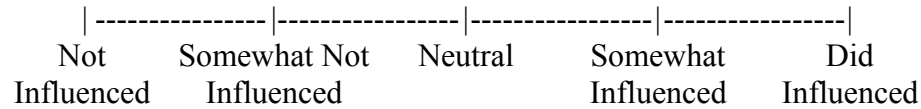
Unsure

8. Did the pro-smoking advertisement(s) influence your decision to smoke?

No

Yes

To what extent?



9. Have you ever seen (check all that apply):

Anti-smoking campaigns are ads on billboards, in magazines and newspapers, on the radio, and on television, and show advertisements that are meant to persuade the viewer not to smoke.

an anti-smoking advertisement on TV?

an anti-smoking advertisement in a magazine?

an anti-smoking advertisement on a billboard?

an anti-smoking advertisement anywhere else?

have never seen an anti-smoking advertisement

10. Please estimate how many times have you seen any form of anti-smoking ads in the last two years?

0-10

11-25

26-40

41-75

76-150

Over 150 times

Unsure

11. What Brand(s) name of cigarettes do you smoke (check all that apply)?

Camel

Clove

Kool

Marlboro

Newport

Salem

Virginia Slims

Winston

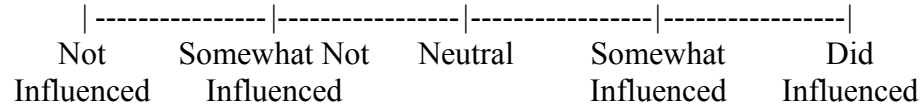
Other: Please list: _____

12. Do you smoke your brand based on the Brand's advertisements?

No

Yes

To what extent?



13. How much do you smoke per day?

Less than one pack

One pack

More than one pack

More than two packs

14. Would you like information about how to stop smoking?

No

Yes (Please talk with experimenter for resources to stop smoking)

Part II: Non-Smokers and Ex-Smokers Only

Family

1. Does anyone in your family smoke?

No

Yes

If yes, who (check all that apply):

Father: What Brand(s): _____

Mother: What Brand(s): _____

Sibling(s): How Many? _____ What Brand(s): _____

Other: How Many? _____ What Brand(s): _____

Friends

2. Do any of your friends smoke?

No

Yes

If yes, how many friend(s)?

One

Less than 3

More than 3

3. What Brand(s) do your friends smoke (check all that apply)?

Camel

Clove

Kool

Marlboro

Newport

Salem

Virginia Slims

Winston

Other: Please list: _____

Personal

4. Have you ever seen (check all that apply):

Pro-smoking campaigns are ads in magazines and newspapers or ads that used to run on billboards, on the radio, and on television, and show advertisements that are meant to persuade the viewer to smoke.

a pro-smoking advertisement on TV?

a pro-smoking advertisement in a magazine?

a pro-smoking advertisement on a billboard?

a pro-smoking advertisement anywhere else?

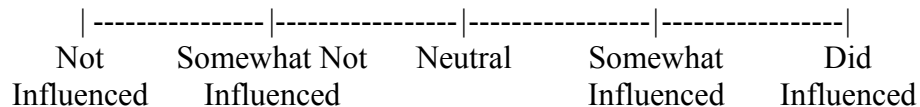
Have never seen a pro-smoking advertisement

5. Please estimate how many times have you seen any form of pro-smoking ad in the last two years?
- 0-10
 - 11-25
 - 26-40
 - 41-75
 - 76-150
 - Over 150 times
 - Unsure

6. Have you ever seen (check all that apply):
Anti-smoking campaigns are ads on billboards, in magazines and newspapers, on the radio, and on television, and show advertisements that are meant to persuade the viewer not to smoke.
- an anti-smoking advertisement on TV?
 - an anti-smoking advertisement in a magazine?
 - an anti-smoking advertisement on a billboard?
 - an anti-smoking advertisement anywhere else?
 - have never seen an anti-smoking advertisement

7. Please estimate how many times have you seen any form of anti-smoking ads in the last two years?
- 0-10
 - 11-25
 - 26-40
 - 41-75
 - 76-150
 - Over 150 times
 - Unsure

8. Did the anti-smoking advertisement(s) influence your decision to smoke?
- No
 - Yes
- To what extent?



9. Why are you currently a nonsmoker?
- I think it is unhealthy.
 - I think it is gross.
 - I have watched others suffer due to smoking
 - I have never been exposed to smoking
 - Other: Please describe: _____

10. Have you ever tried smoking and then quit?

No

Yes

If yes, Please tell us when, and if possible, why:

11. Have you ever quit smoking and then started again?

No

Yes

If yes, please tell us how long you quit, and if possible why you started again:

Appendix B

Resources to Quit Smoking

Need Help to Stop Smoking?

Here are a couple of websites to get you started:

www.sheffield-ha.nhs.uk/stopsmoking/links.html

www.tobaccofree.org/quitting.htm

www.tobaccofree.org/

[www.medic8.com/healthguide/ articles/stoppingsmoking.html/](http://www.medic8.com/healthguide/articles/stoppingsmoking.html/)

www.helpself.com/directory/stopsmoking.htm

www.quit4good.com/quit_smoking_products.html

www.mc3.edu/sa/health/tips/stopsmoking.html

www.supportpath.com/sl_s/smoking_cessation.htm

[www.torbay-pct.nhs.uk/publicInfo/ infoAdvice/smoking/furtherSupport.htm/](http://www.torbay-pct.nhs.uk/publicInfo/infoAdvice/smoking/furtherSupport.htm/)

www.givingupsmoking.co.uk/

www.sunderland.nhs.uk/smoking/

If you need other access to smoking cessation information, please contact R.J. Reynolds, Inc. or Phillip Morris, Inc. Both companies have wonderful programs to help people quit smoking.