

# Challenging key assumptions embedded in Health Canada's cigarette packaging legislation: Findings from in situ interviews with smokers in Vancouver

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## ABSTRACT

**OBJECTIVES:** The main objective of this study was to utilize qualitative research methods in order to explore variations in how smokers respond to the government-mandated graphic health warnings and messages on their cigarette packets.

**METHODS:** Sixty in situ interviews were carried out with people while they were smoking in public settings across the city of Vancouver, British Columbia. During the interviews, participants were asked to recall the warning label on their cigarette packet, and general questions about the effects the imagery and text have had on their smoking.

**RESULTS:** The analysis of findings pointed to several ways that participants overlooked, dismissed or otherwise failed to accurately recall health messages and images on their cigarette packaging. In particular, a significant minority questioned the veracity of the content of the labels and highlighted their exaggerated nature. With regard to the health information inserts, participants identified them as rubbish to be discarded rather than messages to be read. Few smokers could remember the warning label on their packet and some described warning labels that do not currently exist. Finally, a substantial proportion of participants were not smoking cigarettes from a standard packet, raising questions about how universal exposure to the labels actually is.

**CONCLUSION:** Prevailing assumptions about how cigarette packaging legislation works as a population-level tobacco control intervention appear to be based on flawed assumptions about how people interact with cigarette packets as they are used in their everyday lives. As such, continued efforts on the part of tobacco control to redevelop "bolder" or more "graphic" labels on tobacco packaging may require consideration.

**KEY WORDS:** Cigarette smoking; tobacco use cessation; qualitative research

La traduction du résumé se trouve à la fin de l'article.

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Tobacco product warning labels are a cornerstone of population-level tobacco control. The World Health Organization's Framework Convention on Tobacco Control recommends that: "warning messages should cover at least 50% of the principal display areas of the package," based on the assumption that the labels counteract smokers' tendency to "underestimate the full extent of the risk [of smoking] to themselves and others"<sup>1(p. 18)</sup> and disrupt "the marketing value of the packages".<sup>1(p. 22)</sup>

In Canada, text-based warnings came into effect in 1989, with graphic warning labels mandated for use in 2000. Initially, 16 graphic warning labels were launched, along with 16 package inserts containing health information. In 2012, the Canadian government implemented an updated set of 16 labels for cigarette packaging.\* The new labels are more visually graphic than their predecessors and their size has increased from 50% to 75% of the front and back of the pack, based on the premise that "bolder" labels are more effective. According to a 2012 press release by Health Canada: "Recent research has reminded us that young people are still very vulnerable to the attractions of tobacco use... We welcome

the new, stronger warning labels for tobacco products as a critical step to deter Canada's youth from taking up smoking."<sup>2</sup>

Other additions included four text-based warnings on cigarettes and toxic emissions placed on the side panels of the packages, and an updated set of eight different health information inserts that include graphics and images, which legislators suggest "enhance" health messages and are easier to understand.<sup>2</sup> In this framework, the labels and inserts are seen as providing distinct but complementary information that smokers will engage equally with. For example, Thrasher et al.<sup>3</sup> state that: "inserts contrast with the loss-framed pictorial warnings on the pack exteriors in Canada, providing messages that are consistent with communication recommendations that suggest that fear-arousing messages

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\* The Graphic Health Warnings and Health Information Messages from 2012 referenced in this paper are available at: <http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/legislation/label-etiquette/index-eng.php>. Archived versions of past warnings from Canada (2001) can be found at: <http://www.tobaccolabels.ca/>.

should be followed by behavioral recommendations to help escape the source of the fear.<sup>3(p. 871)</sup>

A final core assumption guiding cigarette packaging legislation is that warning labels provide universal exposure and continual reinforcement. To quote a Canadian report:

*“Package warnings reach every smoker... every day. Warnings are always working — 24 hours per day, 7 days per week. A pack a day smoker would take his or her pack out 20 times per day, 7300 times per year. Warnings are also seen by those around the consumers, such as family, friends and co-workers.”<sup>4(p. 7)</sup>*

Although these assumptions are integral to the legislation, little is known about potential variations in how smokers engage with labels on a daily basis. In addition to the predominance of quasi-experimental and cross-sectional survey research on warning labels, studies have explored how smokers interact with cigarette packets in “naturalistic” settings by giving them rebranded packets to use for a short period and soliciting their responses at various points via surveys and interviews.<sup>5–8</sup> However, such results are relatively artificial insofar as pre-selected smokers are given different packets from those they typically use, and the study contexts require them to be attuned to the packets as a marked (rather than everyday) object. Moreover, most of this evidence is indirect, focusing on intentions rather than actions and outcomes;<sup>9</sup> a recent review thus suggests that the evidence on the effectiveness of warning labels in reducing smoking is weak.<sup>10</sup>

Through our research, we have asked different questions about how smokers interact with warning labels. Our approach has been influenced by our positioning as social scientists (in sociology and anthropology respectively) with a critically-engaged interest in public health. Informed by post-structuralist and phenomenological perspectives, and with lived experience of smoking,<sup>11</sup> we have emphasized the need for reflexivity within tobacco control about the reasons people smoke, and the barriers they face with regard to cessation.<sup>12–14</sup>

Through a content analysis of the labels mandated for use in Australia, Canada and the United Kingdom, as well as those proposed for the United States, we have found considerable “discursive ambiguity” in terms of how a viewer might interpret messages about the physical effects of smoking, the social identities of smokers, the need to protect others from smoke, and smoking as an addiction.<sup>15</sup> In addition to analyzing the labels, we conducted in situ interviews with 245 smokers in Vancouver, Canada; Canberra, Australia; Liverpool, England and San Francisco, USA in conjunction with colleagues in these countries. Our study aimed to speak back to the methodology of the International Tobacco Control Four Country Survey, which is the leading study of tobacco warning labels and has employed telephone survey methods to solicit responses of smokers.<sup>16,17</sup>

In the course of the larger study, data from Vancouver generated a number of findings that challenged assumptions embedded in the Canadian legislation about how cigarette packaging works to change smoking behaviours. Drawing from these interviews, our aim is to unpack core assumptions driving research and policy measures, namely: 1) that stronger labels are more powerful; 2) that smokers engage with the health information inserts in the same way as with the labels themselves; 3) that smokers peruse the label

each time they reach for a cigarette; and 4) that all smokers are exposed to the labels.

## METHODS

Between October 2013 and March 2015, we carried out in situ interviews with 60 smokers in Vancouver, BC (KB interviewed 54; RHS, 6). Although not an ethnographic study per se, our approach was informed by the “ethnographic imperative”<sup>18(p. 81)</sup> and its insistence that knowledge is acquired by direct empirical engagement with the phenomena in question in their everyday setting. Thus, data collection aimed at producing a “thick description” of how smokers engage with their cigarette packages.<sup>19</sup> While most tobacco research takes place outside of the context of usual smoking practice, by interviewing people in everyday, outdoor environs where they typically smoked, our goal was to access perspectives from smokers less wedded to the dominant tobacco control narrative of smoking as unhealthy and “bad”. We were successful to the extent that some interviewees initially assumed we worked for the tobacco industry, a perspective we were quick to disabuse them of, although we also made it clear that the study was operating at arm’s length from the Canadian government. Although a number of interviewees assumed that we smoked or saw us as “sympathizers”, we were up front about our own smoking history and status when asked.

Participants were not recruited in advance – interviews instead took the form of spontaneous encounters with people smoking in public settings. A number of sites were visited in an attempt to engage with smokers from different backgrounds, including the downtown core and business district, universities and colleges, hospitals, pubs, parks and shopping centres. Not everyone smoking in public was approached – we used our discretion, focusing on people who might be open to talking (e.g., people who were not intensively engaged in another activity).

After briefly explaining the study, we asked people if they were willing to chat and the conversation proceeded on the spot if they affirmed their interest; only 10% of those approached declined to be interviewed. The interview commenced with basic demographic questions (e.g., age, ethnicity, gender, occupation). The sample included 24 women and 36 men, and ranged in age from 19 to 81 years. The majority of participants self-identified as white, although one third were of other ethnic backgrounds; a sizeable minority of our interviewees (one sixth) were unemployed. We also asked questions about participants’ engagement with cigarette packets (e.g., “Can you recall the label on the cigarette packet you are currently smoking?” and “How much attention do you pay to the warning label?”). But, as is typical in ethnographic interview contexts, interviews were shaped by participants themselves. Some interviews lasted for the time it took for the participant to smoke a single cigarette; others lasted for the course of two cigarettes chain-smoked in rapid succession.

With approval from the UBC Behavioural Research Ethics Board, verbal rather than written consent was obtained, in order not to undermine the informal and contextual nature of the interviews. The majority of interviews ( $n = 50$ ) were not recorded. Discretion was used when asking permission to record interviews based on a sense of whether this might inhibit conversation; interviewees also regularly declined to be recorded, preferring to keep things informal. In all such instances, jottings were fleshed out into

typed fieldnotes immediately following the interview. Each recorded interview was transcribed by the person who conducted it. Manual coding of the transcripts and field notes and the creation of coding memos was carried out by the second author.

Although the study findings across the four field sites have been reported elsewhere,<sup>19</sup> once it became apparent that the data from Vancouver challenged assumptions embedded in the Canadian legislation about how smokers engage with cigarette packets, we re-examined our data with an eye to prioritizing findings that might be novel for tobacco control. Through repeated, albeit strategic, readings of our field notes and transcripts, we identified four areas where core assumptions about tobacco warning labels appear to be challenged.

## RESULTS

### Assumption 1. Stronger messages are more powerful

A core assumption underpinning the labels introduced in 2012 was that bigger and more “graphic” messages are more effective. Indeed, some labels are clearly memorable: beyond interviewees’ recollection of labels that had been out of circulation for several years, they consistently singled out current labels such as “tongue one” (Health Effects – Mouth, 2012) and the “eyeball with the needle through it” as “disgusting” and “gross”. Nonetheless, for a substantial minority of informants, the strength of the messages undermined their *credibility*.

In 7 of 60 interviews, informants challenged the accuracy of the messages on the labels, although they used different bases for questioning their veracity. For example, the following exchange occurred with Bill, a white 60-year-old, while he was on a break from his “how to look for work” class:

*KB: So you said before that you don't like looking at the packs –*

*Bill: No. For one thing, it's an exaggeration. And the other thing is it's ugly ... Don't even look at 'em. I have looked at them and I think they're gross.*

*KB: Okay.*

*Bill: So I don't look at them. It's like looking at the blood and guts thing on NC[IS] – CSI.*

*KB: Okay.*

*Bill: Yah.*

*KB: You said before – you mentioned the word “exaggeration”. So do you think –*

*Bill: Yah, I think that they're showing worst-case scenarios.”*

Bill was not the only interviewee to compare the labels to the popular American television franchise “CSI” (*Crime Scene Investigation*), as several others ( $n = 3$ ) referenced the series and other “blood and guts” shows. Bill’s view of the labels as “exaggerated” was also repeated almost verbatim by Joe, a 26-year-old Korean-Canadian college student. Condemning the “moral crap” he saw as underwriting the messages, he asserted that the warnings “over-exaggerate” and the messages are “extreme”. He specifically pointed to the tongue label as an example of their inaccuracy, arguing that oral cancer is more common among people who smoke cigars than among cigarette smokers.

Likewise, Susan, a 33-year-old white graduate student specializing in heart health, singled out the heart disease label (Health Effects – Heart, 2012) as “stupid” and exaggerated. Observing that “I deal with hearts all the time”, she argued that the heart looked reasonably healthy, although she acknowledged that only someone with specialist knowledge would be aware of this. Nonetheless, it was clear that this label made her question the veracity of the others, many of which she stressed were “not telling the complete story”.

One interviewee did not dispute the messages on the labels, but argued that they *looked* fake. KB met David, a white man in his mid-40s, at a bus stop on the city’s east side as she was writing up notes. After he initiated conversation by asking if she was writing a diary, she explained the study and he immediately responded that: “the problem with the images is that they look fake”. A smoker himself (although not smoking at the time of the interview), he argued that the only label that looked realistic was the one with “the mother and the daughter” (Cigarette Addiction Affects Generations, 2012). He singled out the stroke label (Health Effects – Stroke, 2012) as looking staged, noting that this was ironic because the relationship between smoking and stroke was not as widely known as the relationship between smoking and cancer and so this information might be more important to convey. “I’d rather get cancer than a stroke”, he concluded.

### Assumption 2. People read the health information messages inserted into cigarette packages

Canadian cigarette packages are required to contain health information messages that provide information on the health benefits of cessation and assistance with quitting smoking. There are currently eight different inserts, addressing: the general benefits of quitting, the benefits of cessation that are specific to lung health, smoking and pregnancy, services offered by Canada’s national quitline, and the quitting process. The inserts are placed on the inside of the package in such a way that a smoker must pull them out (and theoretically read and engage with them) before they are able to access the foil layer that encases the cigarettes.

In Vancouver, these inserts frequently littered the streets and our anecdotal observations suggest that a number of smokers purchasing cigarette packets immediately discard the insert – a practice confirmed by the interviews. Although we did not specifically ask about inserts, the unsolicited instances where informants commented on them ( $n = 4$ ), and the consistency of the informants’ statements, affirmed what we had previously observed and added further insight into how inserts are typically viewed.

For example, Bill mostly rolled his own cigarettes from loose tobacco, which is what he was smoking at the time of the interview, but occasionally purchased cigarettes. Like other participants, Bill asserted that the labels had no impact on his smoking, stating that he also made active efforts to avoid them:

*KB: Okay, so you said though that it didn't have an effect on your smoking but nevertheless you've chosen not to – not to – [buy cigarettes]*

*Bill: I don't want that. Even if I buy a pack I don't want to look at that.*

*KB: Right.*

Bill: *I take the little label out and I throw it away. I don't even read it."*

Telling in this account is the way that Bill treats the insert as synonymous with the warning label itself. This was observed in other interviews, where informants occasionally responded to questions about the labels with information about the inserts instead. For example, Maya and Andrea were two 23-year-old Aboriginal women interviewed at a transit station on Vancouver's east side. Maya, who at the time was looking for work, had bought the pack they were both sharing; Andrea was a stay-at-home mother (her two young children hung off her legs for the duration of the interview). When KB asked to have a look at the warning on the packet exterior, Maya instead pulled out the insert and handed it to her. The same confusion about the label versus the insert was evident in the following exchange:

KB: *So, would you say the warning labels have any impact at all on your smoking?*

Maya and Andrea: *[look at each other] No! [in unison; everyone laughs]*

KB: *[Laughing] Well, that's nice and straightforward. What about other people's smoking? Do you think in general they have an impact on smoking – the warning labels?*

Maya: *No, I was always taking it out and throwing it away."*

This suggests that smokers recognize that the insert contains information they are expected to read, but they actively avoid doing so. This was explicit in an interview with Jim, a white 56-year-old manager interviewed downtown. At the end of the interview, when KB asked if he had any further comments, he stated that he wanted it on the record that he was "disappointed with all the extra packaging", observing that there were now "layers and layers of packaging" that smokers had to remove. While acknowledging that smoking itself was not, in his words, "environmentally friendly", he asserted that the extra packaging just created "more waste". As a clincher he pointed out that "nobody is looking at it" so it's a waste. Telling here is his recognition that the "packaging" contained information that was *intended* to be read; however, he ignored this and treated it as rubbish.

### **Assumption 3. Smokers engage with the warning label every time they smoke**

A core assumption embedded in cigarette packaging legislation is that smokers will be exposed to the label every time they reach for a cigarette. Still, when participants were asked if they could recall the specific warning on their package, most could not. Typically they responded with a variant of "no idea" or "I don't pay any attention". Those who hazarded a guess were almost always wrong. Even more tellingly, they occasionally described warnings that are not part of the current series of 16 labels – a phenomenon that also occurred when they were asked to recall *other* labels beyond the one on their package.

Consider the following exchange with Imran, a 21-year-old British-Indian student who had been studying in Canada for a year when he was approached at an outdoor seating area in downtown Vancouver:

KB: *Do you recall which specific [label is on the packet] – ?*

Imran: *Right now?*

KB: *Yeah, right now.*

Imran: *It's the guy with the hole.*

KB: *Oh, the guy with the hole. Okay. Do you mind if we have a look at the pack?*

Imran: *[laughing] It's a test! [Imran pulls his packet out of his trench coat pocket and scrutinizes it with KB]*

KB: *So it's not the guy with the [hole] –*

Imran: *[sheepish expression] It's too creepy to look at! So I don't look at it at all.*

KB: *So, it's the heart disease one. Okay.*

Imran: *I thought it was the lungs, though. They always show the lungs."*

Although none of the current Canadian labels depict a pair of lungs, one of the British labels does carry this image, and it is tempting to assume that Imran was merely recalling the labels from his own country. However, a few Canadians ( $n = 2$ ) also made similar errors. For example, Sam, a 46-year-old Chinese-Canadian, was interviewed in front of his hairdressing salon as he was taking a short smoke break. Sam did not have his pack of cigarettes on him, given that he had brought only his cigarette and lighter outside. When KB asked if he paid attention to the pack, he was one of the few interviewees who immediately responded: "I do pay attention", indicating that he generally noted which label is on the packet. She then asked if he could recall the label on his cigarette packet and he responded: "it has a picture with a person's lung". If he was smoking a regular packet of Canadian cigarettes, as he claimed, this could not have been the case.

Another instance of mistaken recall occurred with Aaron, a 40-year-old New Zealand-born professional interviewed at a community garden. Aaron was one of the few interviewees to correctly identify the label on his cigarette packet, immediately responding "the sick woman – [Barb] Tarbox" (The Power of the Cigarette, 2012). Once KB confirmed that he was correct, she asked if he could recall any of the other labels and Aaron answered: "the limp dick, the eyeball with the needle in it, the kid in the car" (Health Effects – Sex, 2001; Health Effects – Eye, 2012; ETS – Child, 2012). None of the current Canadian warnings feature an image of a wilted cigarette (symbolizing male sexual dysfunction), so he was describing a label that had been discontinued several years ago.

### **Assumption 4. All people who smoke will have a standard cigarette packet**

Although cigarette packaging legislation assumes that all smokers will be exposed to a standard Canadian packet, a sizeable minority of participants ( $n = 14$ ) were not carrying one. We have already discussed one such instance: Bill, the out-of-work machinist who rolled his own cigarettes – these he kept in a plain black case. One other interviewee, Anna, a 19-year-old student born in the Philippines, also kept her cigarettes in a personalized case, and two others told us that they frequently transferred their smokes to such containers.

A further five interviewees – all white and most unemployed – were smoking contraband cigarettes at the time of interview; a sixth woman admitted to regularly purchasing them. Contraband cigarette packets circulate widely in Vancouver and are distinguished by a variety of non-standard features, such as the old Canadian warning labels, or cheap-looking packaging that bears a warning label from another country (if at all). While conducting fieldwork, KB witnessed contraband packs being sold on several occasions and interviewed a number of people smoking them. Indeed, she interviewed one seller, “Rodney” (himself a smoker), while he sold contraband cigarettes to passersby for \$5 a packet; he sold five packets during the conversation.

A further four interviewees were smoking imported cigarettes when interviewed and several others told us that they had friends and family purchase cartons when travelling overseas. In most cases, the interviewee was a first-generation migrant to Canada, or a foreign student, and the cigarettes were purchased in their country of origin. “Dominic”, a 26-year-old Chinese-Canadian engineer interviewed in Chinatown, indicated that he smoked Taiwanese cigarettes “about 20% of the time”. He said that he had friends bring back cartons for him when they travel because they are “much cheaper than in Canada”. While such packets typically carry warning labels – Dominic’s packet had a picture of a withered apple and a message in Chinese stating that smoking is “bad for your skin” – these are significantly smaller than the Canadian ones.

In a final twist, one person did not have a cigarette packet of any kind at the time of interview, because he was smoking a pre-used cigarette. According to Jeff, a middle-aged homeless smoker interviewed at a downtown park, “I can’t afford to smoke anything else”. In Vancouver, it is quite common to see street-involved people collecting cigarette butts others have disposed of, and “bumming” cigarettes from smokers is also widespread.

## DISCUSSION

In this paper, we are not intending to address whether warning labels on cigarette packets are effective for reducing smoking; however, our findings suggest that prevailing assumptions about *how* they work and for *whom* require reconsideration. Based on our research, it is clear that if warnings impact smokers, this is not because smokers straightforwardly read them every time they reach for a cigarette. If smokers cannot correctly recall the warning on their packet, this suggests that the information is not being assimilated in any direct way. The fact that some smokers recalled labels that are not currently circulating raises further doubts about the degree of attention they are paying to the warnings.

Arguably, this lack of recall does not mean that the label is failing to convey its intended message. If a label makes a smoker immediately think of a pair of damaged lungs, even if no label bears such an image, then we might conclude that it is working as intended. This is certainly the view taken by social marketers, who assert that the efficacy of warnings does not depend on conscious assimilation of their messages. To quote one review: “failure to recall a warning or its content does not necessarily imply that the warning failed to communicate its message”.<sup>20(p.5)</sup> Indeed, warning label legislation relies on “nudging” strategies to some degree.<sup>21</sup> By focusing on environmental stimuli, such strategies aim to trigger an “automatic, affective system that requires little or

no cognitive engagement”.<sup>22(p. 263)</sup> Yet the growing interest in nudging “is not driven by compelling evidence that it works”<sup>23(p. 6)</sup> and such strategies are essentially a reincarnation of behaviourism, a rather simplistic and decontextualized model of cognition and action.

We do not believe the issue is merely one of “desensitization”, which is the main lens through which smokers’ negative responses to confronting imagery have been conceptualized to date.<sup>24</sup> For instance, there are two sets of labels in Australia that rotate on an annual basis, the assumption being that changing the warnings regularly will ensure they retain their potency. While reduced efficacy through over-exposure may be likely, our research speaks to a more active refusal to accede to the labels’ messaging about an inevitable future of death and debility. Diprose<sup>25</sup> and Dennis,<sup>26</sup> among others, have observed that smokers often reject anti-smoking messaging in its attempt to close down the future of the body – choosing to highlight instead the unpredictable elements of human agency and material life.

In contrast to the labels in other countries, the Canadian warnings focus exclusively on the negative impacts of smoking; “positive” messages, including motivational support, are relegated to the inserts.<sup>15</sup> However, our findings suggest that a number of people treat these inserts as “rubbish” to be discarded. If this is happening on a regular basis, then it is unlikely that fear-arousing warnings are being followed up by messages about how to accomplish cessation.

A final assumption our research challenges is that smokers are universally exposed to the labels. As noted at the outset, one of the reasons why public health agencies have endorsed warnings is that messages presented in this medium are seen to reach all smokers. For example, Hammond et al.<sup>27(p. 224)</sup> speculate that labels “may be particularly important in reaching low-income or low-literacy individuals who may not have access to other mediums of health information.” Our research suggests that policy-makers have not considered the potential of an income dimension to exposure, as some of the lower income smokers we interviewed were less likely to access “standard” cigarette packets. Likewise, interviews with smokers with ties to countries outside of Canada demonstrated that they frequently smoked cigarettes imported from these other countries, so there may also be a cultural dimension to who sees the Canadian labels.

Clearly, our research was conducted with a small number of smokers in a single Canadian city and our results require “ethnographic testing”<sup>28(p. 286)</sup> in other parts of the country. Yet, a strength of our study is that participants were not preselected – we approached a diverse array of people we saw smoking on the street and only 10% declined to be interviewed. The interviews also occurred in the context of people’s usual engagements with smoking and their cigarette packets, which constitutes another marked contrast from existing studies. We highlight these points not to suggest that our data are somehow “purer” than those derived from other forms of social inquiry, but to highlight that different epistemological and methodological approaches to this topic produce very different findings. Consequently, there are dangers in assuming too much about people’s engagements with warning labels on the basis of existing research, which we argue need to be supplemented with other kinds of studies.

## CONCLUSION

Our research suggests that we still know relatively little about how smokers interact with the warning labels on their cigarette packets in everyday contexts. While our qualitative study may be seen as contentious from the perspective of the implications for tobacco control, our intent is not to argue that health warnings should be abandoned. Instead, we suggest that the circumstances and identities of particular smokers may render these warnings less effective than legislators currently assume and that these assumptions require some reconsideration.

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## RÉSUMÉ

**OBJECTIFS :** Le principal objectif de notre étude était d'utiliser des méthodes de recherche qualitative pour explorer les variations dans les réponses des fumeurs aux mises en garde illustrées et aux messages sur la santé imposés par le gouvernement figurant sur leurs paquets de cigarettes.

**MÉTHODE :** Nous avons mené 60 entretiens sur place avec des personnes en train de fumer dans des lieux publics de la ville de Vancouver (Colombie-Britannique). Durant ces entretiens, nous avons demandé aux participants de se rappeler l'étiquette de mise en garde sur leur paquet de cigarettes et nous leur avons posé des questions générales sur les effets des illustrations et du texte sur leur consommation.

**RÉSULTATS :** L'analyse des constatations a permis de repérer plusieurs façons dont les participants négligent, rejettent ou omettent autrement de se rappeler avec précision les messages et les illustrations sur la santé figurant sur l'emballage de leurs cigarettes. En particulier, une importante minorité de répondants a mis en doute la véracité du contenu des étiquettes et en a souligné la nature exagérée. Pour ce qui est des prospectus d'information sur la santé, les participants les considéraient comme des déchets à jeter et non comme des messages à lire. Peu de fumeurs pouvaient se rappeler l'étiquette de mise en garde de leur paquet, et certains ont décrit des étiquettes qui n'existent pas actuellement. Enfin, une importante proportion de participants ne fumait pas de cigarettes venant d'un paquet standard, ce qui soulève des questions quant à l'universalité réelle de l'exposition aux étiquettes.

**CONCLUSION :** Les hypothèses courantes sur l'efficacité des lois sur l'emballage des cigarettes en tant que mesure de lutte antitabac à l'échelle de la population semblent fondées sur des hypothèses erronées quant à la façon dont les gens interagissent avec les paquets de cigarettes dans la vie quotidienne.

**MOTS CLÉS :** consommation de cigarettes; arrêt du tabac; recherche qualitative