

Evaluation of Concepts for a Tobacco Cessation In-Person Event - Experiential Marketing Campaign

Health Canada

Final Report

March 2026

Prepared for:

Health Canada

Supplier name: Quorus Consulting Group Inc.

Contract award date: October 23, 2025

Delivery date: March 2026

Contract amount (incl. HST): \$124,948.90

Contract #: CW2424489

POR number: 044-25

For more information, please contact:

cpab_por-rop_dgcap@hc-sc.gc.ca

Ce rapport est aussi disponible en français.

**Evaluation of Concepts for a Tobacco Cessation In-Person Event - Experiential Marketing Campaign
Final Report**

Prepared for Health Canada
Supplier name: Quorus Consulting Group Inc.
March 2026

This public opinion research report is based on 20 online focus groups that Quorus completed between January 21 and February 5, 2026. Focus groups spanned the country and were conducted with individuals who smokes cigarettes daily and individuals who want to support someone they care about in quitting smoking cigarettes. The sessions lasted approximately 2 hours. All participants were informed the research was for the Government of Canada. A total of 177 individuals participated in this study.

Cette publication est aussi disponible en français sous le titre : Évaluation de concepts pour une campagne marketing d'un événement expérientiel en personne sur la cessation du tabac

This publication may be reproduced for non-commercial purposes only. Prior written permission must be obtained from Health Canada. For more information on this report, please contact Health Canada at: cpab_por-rop_dgcap@hc-sc.gc.ca

Department of Health
200 Eglantine Driveway
A.L. 1915C
Ottawa, Ontario
K1A 0K9

Catalogue Number:
H14-679/2026E-PDF

International Standard Book Number (ISBN):
978-0-660-98885-6

Related publications (registration number: POR 044-25):
Catalogue Number H14-679/2026F-PDF (Final Report, French)
ISBN 978-0-660-98886-3

© His Majesty the King in Right of Canada, as represented by the Minister of Health, 2026




Political Neutrality Statement

I hereby certify as Senior Officer of Quorus Consulting Group Inc. that the deliverables fully comply with the Government of Canada political neutrality requirements outlined in the [Policy on Communications and Federal Identity](#) and the [Directive on the Management of Communications - Appendix C](#).

Specifically, the deliverables do not include information on electoral voting intentions, political party preferences, standings with the electorate or ratings of the performance of a political party or its leaders.

Signed:

A handwritten signature in black ink, appearing to read "Rick Nadeau", is written over a light gray, textured rectangular background.

February, 2026
Rick Nadeau, President
Quorus Consulting Group Inc.

Table of Contents

Executive summary	5
Detailed results	13
Research purpose and objectives	14
Background	14
Research objectives	14
Research results.....	16
How concepts were shown to participants	16
Initial reactions that apply to both concepts.....	17
Feedback on “Ready to (Re)Start Your Smoke-Free Life?”	19
Feedback on “Do you have the Tools to Quit?”	23
Preferred concept	28
Resources of interest	28
Engagement	31
Ambassadors.....	35
Pledge wall and digital counter.....	35
Location preferences	38
Taglines	40
Methodology	43
Target audience and sample frame	43
Description of data collection procedures.....	44
Appendices	47
Appendix A: Recruitment screener	48
Appendix B: Moderation guide for people who smoke.....	58
Appendix C: Moderation guide for supporters.....	70

Executive summary

Background

As part of Canada's Tobacco Strategy (CTS), Health Canada continues to promote a quit smoking campaign to help improve the efficacy of quit attempts among adults in Canada aged 35-64 who smoke. Helping Canadians make healthy choices in their day-to-day lives is also a vital part of Health Canada's health protection and promotion core responsibility, including reducing tobacco use.

In 2023, 11.2 % (approx. 3.5 million) of people aged 18 years of age and older smoked cigarettes daily. Strong efforts must continue to be made to meet Canada Tobacco Strategy's goal of less than 5% by 2035.

Health Canada is developing a national in-person experiential marketing exhibit. The goal is to reach adults aged 35-64 who smoke and provide them with resources and support to help quit smoking and vaping. The in-person experiential marketing exhibit will help support these efforts. Testing the concepts through POR will help to ensure that the events will attract and resonate with and be impactful for the target audience and support Health Canada's efforts to encourage people to quit smoking.

The POR will be used to assess how well two tobacco cessation concepts resonate with Canadian adults aged 35 to 64 who smoke and those who want to support others in quitting, and to evaluate their likelihood of engaging with the booths if encountered in person. The findings will help determine which concept most effectively supports Health Canada's tobacco cessation goals and will inform the development of the in-person events, as well as future campaign initiatives.

The insights gained will inform more targeted, emotionally resonant health campaigns for Canadians aged 35 to 64 who smoke, encouraging healthier choices and reducing long-term smoking-related illness in Canada. Ultimately, these findings will guide the development of a tobacco cessation in-person experiential marketing exhibit, as well as future marketing efforts, delivering messaging that feels relevant, motivating, and supportive for the target audience. The ultimate goal is to encourage people to quit smoking and reduce the harms of nicotine addiction.

Research objectives

The objective of the research was to evaluate, and gather feedback on, concepts for the in-person experiential marketing exhibit, potential creatives approaches, key messages as well as event logistical details to determine what directions best resonate with the target audience.

Specifically, the goal was to:

- Determine if the creative concepts and messaging are:
 - clearly understood by the audiences;
 - credible, relevant and of value to the audiences;
 - appealing and appropriate to the audiences;
 - memorable in the minds of the audiences; and,
 - able to motivate the audiences to take intended actions.
- Gather information about what type of information the audience would like to receive at this type of event.
- Gather information to help inform the logistical details of the in-person experiential marketing exhibit (i.e. how long would you spend at an experience like this, how would you like to get the information, what kind of venues would they like to see an experience like this at).
- Gather feedback about specific elements that could be included in the concepts (i.e. pledge wall, participation counter).
- Compare content options to select the best language and presentation of key messages to the target audiences
- Elicit suggestions for potential changes to ensure the messages and products resonate with the target audiences.
- Get direct feedback on what type of approach would be most effective in encouraging people who smoke to make a quit plan.
- Identify desired information the target audience would like to receive, how they would like to be engaged and the type of locations that would work best.
- Gather insights from the target audience about other marketing approaches that could complement the experiential marketing campaign.

Methodology

The research methodology consisted of 20 online focus groups with individuals in Canada (“participants”). The focus groups were held between January 21 and February 5, 2026, and included individuals from across the country. Fifteen of these groups were with adults across Canada who smoke cigarettes daily. These sessions were segmented by region (five regions) and by age (35-44 years old, 45-54 years old and 55-64 years old). The remaining five sessions, again divided across five regions, were with “supporters” (individuals who want to support someone they care about in quitting smoking cigarettes). All sessions with participants outside Quebec (16 groups) were conducted in English and all those with individuals living in Quebec (4 groups) were conducted in French. Each focus group lasted approximately 2 hours. All participants were informed the research was for the Government of Canada and each received \$125 for participating. A total of 177 individuals participated in this research.

Research results

Participants were presented with images of two in-person exhibit concepts and provided a general overview of the layout and potential guest flow for each concept. The concepts were presented separately and the order of presentation alternated from one session to the next by the moderator.

It is worth noting that, overall, some people who smoke and some supporters would explore each exhibit mainly out of curiosity rather than due to a specific feature noticed about the exhibit concepts. Conversely, a small contingent of people who smoke showed no interest in visiting either concept. The more common sentiments among these individuals were that they have no interest in quitting smoking cigarettes, they don’t see themselves stopping at this type of exhibit no matter what it looks like, or the fact that they smoke cigarettes is not something they would want to publicize by visiting such an exhibit.

Feedback on “Ready to (Re)Start Your Smoke-Free Life?”

Initial reactions from people who smoke

Many people who smoke showed interest in exploring this exhibit. Some of the more common features or aspects that participants appreciated included:

- The exhibit is colourful and would catch their attention;
- The experience appears interactive and game-like; and,
- It would provide targeted information based on where guests are in their quit journey – this was seen as a tailored and efficient way to provide information.

Conversely, the more common aspects that participants did not like included:

- The layout, especially the interconnecting paths, seemed overwhelming or chaotic;
- It forces the person who smokes to make a decision on the spot regarding where they are in their quit journey; and,
- The experience felt childish - participants felt that the designers were not taking smoking cessation seriously.

Initial reactions from supporters

Interest in exploring this exhibit was higher among supporters. That said, feedback from this audience largely reflected the feedback from people who smoke. Feedback that was unique to supporters included:

- There was interest in visiting the exhibit with the person they want to support so that they could each go down their respective paths and meet-up at the end to “compare notes”;
- Wanting to familiarize themselves with as much information as possible, they would probably end up visiting multiple zones; and,
- Most liked that there was a path entirely dedicated to supporters.

Very little if anything needed to change in the exhibit design to help supporters understand that they can find supporter-specific resources there.

Feedback on specific aspects of this concept

Paths: Two new path suggestions were proposed to better capture where people who smoke are in their quit journey: one for those who have tried quitting in the past, and one for those who are in the process of quitting and need additional support. Many also supported the idea of removing the path for those who are not currently trying to quit.

Exhibit title: Reactions to the exhibit title were mixed. Some liked that the title asked a question and made them think, that it was aspirational and future-focused, and that it normalizes how trying to quit can be a repetitive process. It was less appealing to some because it was too long, it reminded those who smoke of their failed attempts to quit, the question it asks is too demanding or forceful, and it did not speak to supporters.

Feedback on “Do you have the Tools to Quit”

Initial reactions from people who smoke

Many people who smoke showed interest in exploring this exhibit as well. Some of the more

common features or aspects that participants appreciated included:

- It conveys a more welcoming and relaxed experience, providing the opportunity to leisurely browse at their own pace and maybe discover resources they were not aware of; and,
- The title suggests that they might discover actual tools, not just information;

Conversely, some of the more common aspects that participants did not like included:

- The general appearance of the exhibit lacked colour or any other visual hook such as posters;
- They feel it might take them time to find what they need; and,
- The exhibit feels very information-heavy and lacking actual “tools” – it looks like a bookstore or a library.

Initial reactions from supporters

Interest in exploring this exhibit was higher among supporters. That said, feedback from supporters largely reflected the feedback from people who smoke. Feedback that was unique to supporters included:

- There is nothing that would suggest that there are resources available for supporters; and,
- It might be more of a challenge convincing the person they support to visit this exhibit because the information is less targeted.

Many seemed to feel changes were needed to the exhibit design to help supporters understand that they can find supporter-specific resources there. A few suggestions included making the exhibit title less specific to those who smoke, putting up signs that invite supporters to visit or having a pledge wall specifically for supporters.

Feedback on specific aspects of this concept

Hardware store appearance: The hardware store look and feel was not central to the success of the concept.

Exhibit title: Reactions to the exhibit title were mixed. It was liked because it was direct, it suggested the availability of “tools” and it did not force those who smoke to figure out where they were on their quit journey. It was less appealing to some because it did not speak to supporters, and it only referred to “tools”, when in fact quitting smoking requires much more than that. In the English sessions, the title was sometimes criticized because it did not specify “quit smoking”.

Preferred concept

When specifically asked which exhibit they would be more motivated to explore, the two concepts performed similarly with the path concept coming out as the preferred concept. The voting was narrowly in favour of the path concept among those who smoke whereas this concept was roughly twice as popular among supporters as the tool concept.

Resources of interest

A wide variety of information resources were spontaneously suggested by participants. Some of the common themes surrounding these suggestions included:

- A list of all the various types of smoking cessation aid tools, products and techniques, including costs, how and where to get them, and what the success rates have been.
- Lists of support groups, plans and programs available in their region.
- Information or statistics on the benefits to quitting smoking in terms of personal finances and in terms of their health.
- Information on the health impacts of smoking cigarettes over time.
- Testimonials from individuals who have successfully quit.
- Specific strategies that supporters can use to maximize support.

There was modest to strong interest in most of the resources proposed to participants in the sessions. Participants were the least interested in information on the Quit Line.

Engagement

Interest in interactive experiences appeared strong across most groups. Some of the common themes surrounding suggestions included:

- Being able to witness through replicas, videos, AI, simulations, virtual reality or onsite fitness tests how someone's physical health improves or deteriorates based on whether they continue smoking cigarettes.
- Accessing simulators or calculators to measure the impact of smoking cigarettes on someone's financial situation, and how that changes over time if they quit.
- Accessing quizzes and questionnaires.
- Accessing resources to build a personalized quit plan.
- Accessing an app.
- Watching videos of testimonials of success stories.
- Having conversations with people who successfully quit and/or who can provide advice and support.

A small incentive or reward for completing certain tasks or for visiting different zones/booths was interesting to many participants, especially NRT samples and branded items.

Ambassadors

Even though not all participants would want to speak to someone during their visit to the exhibit, there remained notable interest in having staff on hand. A multidisciplinary approach was broadly appealing, consisting most importantly of individuals with lived experience. There was also some interest in speaking with healthcare providers and someone with expertise in mental health and addiction.

Pledge wall and digital counter

The pledge wall had limited appeal among those who smoke. Many would not want to make a commitment, they had concerns about setting themselves up for failure, and they felt that quitting is a very personal experience and one that they would not want to showcase in a public space.

In a similar way, the digital counter also had limited appeal. Only a few felt they would be motivated knowing they are sharing the same experience with many other Canadians.

Location preferences

From a list presented during their focus group, the most popular locations were outdoor events and shopping malls, followed by trade shows. Other popular suggestions included healthcare settings, libraries, community centres, parks, and academic settings such as high schools and university campuses.

Taglines

People who smoke were presented with five possible taglines for each exhibit concept.

<i>Ready to (Re)Start Your Smoke-Free Life?</i>	<i>Do you have the tools to quit?</i>
1. Step into your healthier tomorrow. Your smoke-free path starts here.	1. Tools for today. Confidence for tomorrow. Build your quit plan today.
2. Restart your smoke-free life today. Every step is a win.	2. Build your quit plan and pick the tools that work for you.
3. Quit smoking your way. Choose the path that works for you.	3. Every attempt builds strength. Build your quit toolkit today.
4. Restart your smoke-free life now. One step, one choice, one win at a time.	4. Get the tools. Build your quit smoking plan. Take charge and you can make it happen.
5. There's no wrong way to start. Choose the path that's right for you.	5. Quitting smoking isn't one-size-fits-all. Build the toolkit that fits your life.

For each concept, taglines 3 and 5 attracted the most votes. Participants liked taglines that empowered them to do things their way and that acknowledged the unique journey each person who smokes needs to take. They also liked statements that recognized that small steps and efforts matter and are valuable building blocks in the ultimate effort to quit.

Qualitative research disclaimer

Qualitative research seeks to develop insight and direction rather than quantitatively projectable measures. The purpose is not to generate “statistics” but to hear the full range of opinions on a topic, understand the language participants use, gauge degrees of passion and engagement and to leverage the power of the group to inspire ideas. Participants are encouraged to voice their opinions, irrespective of whether or not that view is shared by others.

Due to the sample size, the special recruitment methods used, and the study objectives themselves, it is clearly understood that the work under discussion is exploratory in nature. The findings are not, nor were they intended to be, projectable to a larger population.

Specifically, it is inappropriate to suggest or to infer that few (or many) real world users would behave in one way simply because few (or many) participants behaved in this way during the sessions. This kind of projection is strictly the prerogative of quantitative research.

Supplier name: Quorus Consulting Group Inc.

Contract number: CW2424489

Contract award date: October 23, 2025

Contract amount (including HST): \$124,948.90

For more information, please contact Health Canada at: hc.cpab.por-rop.dgcap.sc@canada.ca

Detailed results

Research purpose and objectives

Background

As part of Canada's Tobacco Strategy (CTS), Health Canada continues to promote a quit smoking campaign to help improve the efficacy of quit attempts among adults in Canada aged 35-64 who smoke. Helping Canadians make healthy choices in their day-to-day lives is also a vital part of Health Canada's health protection and promotion core responsibility, including reducing tobacco use.

In 2023, 11.2 % (approx. 3.5 million) of people aged 18 years of age and older smoked cigarettes daily. Strong efforts must continue to be made to meet Canada Tobacco Strategy's goal of less than 5% by 2035.

Health Canada is developing a national in-person experiential marketing exhibit. The goal is to reach adults aged 35-64 who smoke and provide them with resources and support to help quit smoking and vaping. The in-person experiential marketing exhibit will help support these efforts. Testing the concepts through POR will help to ensure that the events will attract and resonate with and be impactful for the target audience and support Health Canada's efforts to encourage people to quit smoking.

The POR will be used to assess how well two tobacco cessation concepts resonate with Canadian adults aged 35 to 64 who smoke and those who want to support others in quitting, and to evaluate their likelihood of engaging with the booths if encountered in person. The findings will help determine which concept most effectively supports Health Canada's tobacco cessation goals and will inform the development of the in-person events, as well as future campaign initiatives.

The insights gained will inform more targeted, emotionally resonant health campaigns for Canadians aged 35 to 64 who smoke, encouraging healthier choices and reducing long-term smoking-related illness in Canada. Ultimately, these findings will guide the development of a tobacco cessation in-person experiential marketing exhibit, as well as future marketing efforts, delivering messaging that feels relevant, motivating, and supportive for the target audience. The ultimate goal is to encourage people to quit smoking and reduce the harms of nicotine addiction.

Research objectives

The objective of the research was to evaluate, and gather feedback on, concepts for the in-person experiential marketing exhibit, potential creatives approaches, key messages as well as event logistical details to determine what directions best resonate with the target audience.

Specifically, the goal was to:

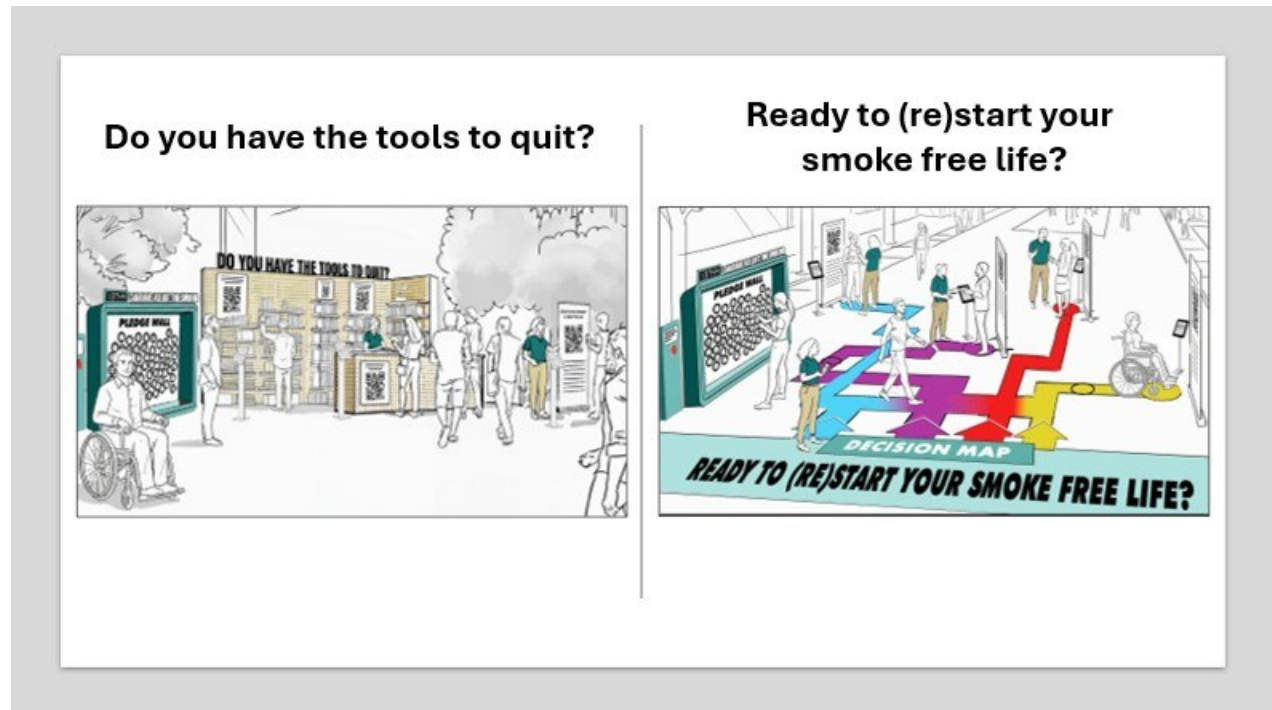
- Determine if the creative concepts and messaging are:
 - clearly understood by the audiences;
 - credible, relevant and of value to the audiences;
 - appealing and appropriate to the audiences;
 - memorable in the minds of the audiences; and,
 - able to motivate the audiences to take intended actions.
- Gather information about what type of information the audience would like to receive at this type of event.
- Gather information to help inform the logistical details of the in-person experiential marketing exhibit (i.e. how long would you spend at an experience like this, how would you like to get the information, what kind of venues would they like to see an experience like this at).
- Gather feedback about specific elements that could be included in the concepts (i.e. pledge wall, participation counter).
- Compare content options to select the best language and presentation of key messages to the target audiences
- Elicit suggestions for potential changes to ensure the messages and products resonate with the target audiences.
- Get direct feedback on what type of approach would be most effective in encouraging people who smoke to make a quit plan.
- Identify desired information the target audience would like to receive, how they would like to be engaged and the type of locations that would work best.
- Gather insights from the target audience about other marketing approaches that could complement the experiential marketing campaign.

Research results

The results from the focus groups are presented in this section. Unless otherwise indicated, the findings among those who smoke were found to be consistent across age groups and findings among supporters and those who smoke were consistent across regions.

How concepts were shown to participants

Participants were presented with images of two in-person exhibit concepts:



They were also provided with a general overview of the layout and potential guest flow for each concept. People who smoke were provided with a slightly different concept description than supporters.

Do you have the tools to quit?	Ready to (Re)Start Your Smoke-Free Life?
<p>People who smoke</p> <p>This experience will have the visual appearance of a pop-up hardware store, complete with walls that look like pegboards, but instead of hardware tools on display, you would see informational "tools", which are information resources, to help you on the path towards quitting smoking.</p>	<p>People who smoke</p> <p>Upon entering the exhibit, guests will be invited to choose their own starting point from the decision map and follow one of several pathways leading to four distinct Motivation Zones. Paths could be:</p> <ol style="list-style-type: none"> 1. Not currently trying to quit 2. I'm thinking about it

<p>Guests can browse through the experience and select resources that fit their quit journey and build their own quit plan.</p>	<ol style="list-style-type: none"> 3. I'm ready now 4. Continue supporting someone else in quitting <p>Each pathway leads to a dedicated Motivation Zone, that would feature targeted resources and inspiration based on the path chosen.</p>
<p>Supporters</p> <p>This experience will have the visual appearance of a pop-up hardware store, complete with walls that look like pegboards, but instead of hardware tools on display, you would see informational "tools", which are information resources. The overall experience can help people on the path to quitting and there will also be information available for people like you who want to support someone in quitting.</p> <p>Guests can browse the space, explore different resources, and select the ones they believe would be most helpful. From there, they can build a personalized quit-support plan.</p>	<p>Supporters</p> <p>Upon entering the exhibit, guests will be invited to choose their own starting point from the decision map and follow one of several pathways leading to four distinct Motivation Zones. Paths could be:</p> <ol style="list-style-type: none"> 1. Not currently trying to quit 2. I'm thinking about it 3. I'm ready now 4. Continue supporting someone else in quitting <p>You would be directed to follow the path for "Continue supporting someone else in quitting".</p> <p>Each pathway leads to a dedicated Motivation Zone, that would feature targeted resources and inspiration based on the path chosen.</p>

The concepts were presented separately and one at a time, allowing for a discussion of the first concept before the next one is shown. The moderator alternated the order of presentation from one session to the next.

Initial reactions that apply to both concepts

When it comes to understanding what might compel or repel someone from exploring the proposed exhibit concepts, it is worth noting that the decision for some was more likely to be anchored in some sort of core feeling or belief rather than in anything they may have noticed about either of the concepts.

Curiosity was a popular motivator - some people who smoke and some supporters would explore either exhibit mainly out of curiosity. This curiosity tended to stem from one of two views – some felt they would simply be drawn to the exhibit because it is not something they would typically

see in a crowded, busy area. This type of exhibit would stand out. Some others feel they would want to explore a smoking cessation exhibit mostly because they would be curious to know that it was about and whether there was anything new or useful they might learn from visiting it – these participants tended to generally feel that “information was power.” Although they might have a preferred concept, these curious participants would be open to exploring either exhibit.

A contingent of supporters also felt that their curiosity combined with their altruism, in other words their underlying desire to support someone they know or love, would be the driving force that would compel them to take some time to explore any exhibit. They would not want to miss out on the opportunity to help someone else.

In all fairness to the evaluation process, we did not explore with participants any threshold below which they would not be open to exploring an exhibit – it suffices to say that any exhibit adopting the scale and “look and feel” similar to what was explored in the focus groups is quite likely going to be successful at drawing them in.

Another compelling feeling among some who smoke was a keen interest in wanting to quit smoking or reduce how much they smoke cigarettes. For these participants, any exhibit focused on smoking cessation would be likely to catch their attention and entice them to explore.

Conversely, a small contingent of people who smoke showed no interest in visiting either concept. A common sentiment among these individuals, more noticeable among those 55 to 64, was that they have no interest in quitting smoking cigarettes – they have either entirely given up on trying to quit smoking, they enjoy smoking cigarettes too much to want to quit, or they don’t see why they should quit.

A small contingent of people who smoke also explained that they don’t see themselves stopping at this type, or any type of exhibit no matter what it looks like. These participants explained that they are typically too busy to casually stop at these types of experiences or they just don’t stop at them as a general rule.

Finally, for a select few who called themselves “closet smokers”, the fact that they smoke cigarettes is not something they would want to reveal to others by visiting such an exhibit. They would not want to chance being seen by someone they know and have their secret exposed.

Feedback on “Ready to (Re)Start Your Smoke-Free Life?”

Initial reactions from people who smoke

Many people who smoke showed interest in exploring this exhibit. When it came to describing what would compel them to explore this exhibit, most of the more common features or aspects that participants appreciated pertained to colour, interaction, personalization and efficiency.

Whether or not they would end up exploring the exhibit, its colourful appearance would at a minimum get their attention. For those who enjoy lively colours, the exhibit’s appearance not only catches their attention but it triggers a positive feeling and it draws them closer.

Another key strength for this concept was that, at least at first glance, it appeared interactive and fun. It reminded some of a gameboard or of a “choose your own story” book, and suggested that there would be something to do inside this exhibit – that it would be an engaging experience.

Closer consideration of the decision map led many participants to appreciate it from a variety of different perspectives. Firstly, many explained that providing information in the Motivation Zones based on the path selected made them feel like the experience was highly personalized and targeted. The experience felt purposeful and tailored.

The use of a decision map also left some participants with the impression that their information seeking quest would be efficient, or at least more efficient compared to the other exhibit concept proposed. This felt especially valuable to those who are not interested in a browsing or an exploratory experience. It was also deemed valuable to those who might be pressed for time, especially if the exhibit is in a public space or at an event and it unexpectedly intercepts them while they are on their way somewhere.

The decision map was also appreciated by some because it forced some introspection and made them think a bit about where they are on their quit journey. Having then made the decision to take one path versus another left a few feeling empowered – they are choosing their own path.

A noted strength for some participants was the opportunity to speak with individuals on each path. While they may not necessarily feel like they would want or need to speak to someone, they liked that the option was there. This seemed particularly valuable to those who were more interested in some form of support, such as smoking cessation programs or support groups, rather than just information about smoking cessation.

For this specific concept, participants who indicated they would not explore it at all tended to react this way for a few key reasons.

A common criticism was how the layout of the decision map, especially the interconnecting paths and the variety of colours used, seemed overwhelming or chaotic. For many of these participants,

the point of contention was not that there was a decision map but rather that paths in the map were not clear and straightforward.

Some would overlook this exhibit because, in their view, it looked ridiculous. While the concept was appealing to some because it looked engaging and fun, these same attributes came across as childish to others, leaving them with the impression that the designers and, for a few, the Government of Canada, were not taking smoking cessation seriously. Of the two concepts, this was the only one to draw some degree of ridicule and even frustration because it did not look serious enough.

Some people who smoke were turned off this exhibit because it forces them to make an immediate decision regarding where they are in their quit journey. This may not be something they would feel comfortable or even capable of doing on the spur of the moment.

As well, a few were left with the impression that the only way to get information in this exhibit was to either speak with someone or use tablets and QR codes. The mere thought of being forced to speak to someone about smoking cessation, and maybe even be asked to sign up for something, was an immediate deal breaker for some, while a few were discouraged by the emphasis on technology. The concept would be more appealing to these participants if there were more hardcopy versions available and if they don't need to talk to someone.

A few other concerns were raised although these were less serious in nature and would not necessarily discourage someone from exploring the exhibit. For instance, a few were concerned with how the decision map would function if the exhibit were busy. They raised the prospect of line-ups or bottlenecks along the paths, especially if people ahead of them stop to speak with staff. A few were also concerned that forcing people down one path might lead them to miss out on information that might be helpful to them in other Motivation Zones.

Finally, the decision map felt intimidating to a few participants, not so much because it forces them to decide where they are on their quit journey but, because this journey is personal, they may not want to share where they are with others. In a similar sense, if they feel they are at an earlier path in the journey, it might be discouraging seeing others on a better path – it might lead them to ask themselves: “Why them and not me?”

Initial reactions from supporters

Generally, interest in exploring this exhibit was noticeably higher among supporters compared to participants who smoke. That said, feedback from this audience largely reflected the feedback from people who smoke with a few noteworthy differences when it comes to the reasons that would compel them to explore the exhibit.

Some supporters explained that this concept lent itself nicely to exploring the exhibit along with

the person they are supporting. They outlined that they could each go down their respective paths and meet-up at the end to “compare notes.”

Along with a few people who smoke, a few supporters also felt that the dedicated paths and zones were too limiting and that they would probably end up visiting multiple zones. Supporters would want to do this in the spirit of wanting to familiarize themselves with as much information or resources as possible.

Finally, most supporters liked that there was a path entirely dedicated to them and concluded that little else needed to be changed to the exhibit design to help them understand that they can find supporter-specific resources there. A few suggestions included making the exhibit title more general (and less specific to those who smoke) and putting up signs or banners that specifically invite supporters to visit.

Reactions to the paths

Participants were asked to specifically comment on the four paths proposed:

- Not currently trying to quit
- I’m thinking about it
- I’m ready now
- Continue supporting someone else in quitting

For the most part, participants liked the proposed paths. The multiple paths proposed were applauded for meeting people who smoke where they are in their quit journey. And although there were some suggestions for new or different paths, some liked that the overall concept recognized that the decision to quit smoking cigarettes is not binary – the paths give options without forcing the guest in any way. Finally, the range of paths proposed left a few feeling that most people probably fall into one of the four paths, contributing to a sentiment of inclusiveness.

When asked if a path should be added to better reflect where people who smoke are in their quit journey, two of the more common suggestions included:

- A path for those who have tried quitting in the past, and,
- A path for those who are in the process of quitting and need additional support.

Many also supported the idea of removing the path for those who are not currently trying to quit, questioning whether those individuals would even bother stopping to explore the exhibit. Some believed that removing that part of the decision map could help reduce the amount of chaos in the layout, or make room for other more relevant paths such as the ones proposed above.

Reactions to the exhibit title: Ready to (Re)Start Your Smoke-Free Life? / Êtes-vous prêt à (re)commencer une vie sans fumée?

Reactions to the exhibit title were mixed with only a few in each group seeming to think that the exhibit title was perfect and needed no changes.

On the positive side, some liked that the title asked a question and, similar to the decision map, made them think. Asking a question necessarily engages passers-by, something which is not achieved as effectively if the title is a statement.

Some also felt that the title was aspirational in a few different ways. For some, it encouraged people who smoke to think back to what life was like before they began smoking. For a few others, the title encouraged people who smoke to imagine what a smoke-free life might be – they appreciated that it was future-focused. Either way, the sentiment evoked was positive.

Some also liked that the title did not use the terms “quit” or “quitting”, which for them was either overused or it was too negative.

The use of “(re)start” was one of the more polarizing elements of the title. Those who liked it explained that it recognizes and normalizes how trying to quit can be a repetitive process requiring multiple restarts over time before finally succeeding. On the other hand, those who did not like it as much felt that this reminded them of their failed attempts to quit and that, in all likelihood, they will fail if they attempt to quit smoking again.

A common criticism of the exhibit title was that it was too long. A few others who smoke felt they were being put on the spot and that the title was too intimidating or forceful: “What if they’re not ready?”.

A few others who smoke were not interested in “restarting their life.” A few felt a little insulted that the title was suggesting that their life was not good enough and that it warranted a restart. Restarting a life also felt like a lot to ask for- a few noted that they don’t want to restart their life, they just want to quit smoking.

A common comment among supporters was that the title was entirely focused on people who smoke and did not speak to them at all.

Ultimately, most of the suggestions from participants focused on shortening the title, removing the reference to a (re)start, or making the title broader so that it spoke to both those who smoke and supporters.

Suggestions from people who smoke	Suggestions from supporters
<ul style="list-style-type: none"> • Ready to move towards a smoke-free life? • Do you have the tools to start your smoke-free 	<ul style="list-style-type: none"> • Ready for a smoke free life? • Ready to be smoke-free?

<p>life?</p> <ul style="list-style-type: none"> • Ways to start your smoke free life • Break free of the habit • Ready to begin your smoke free life? • Are you ready for your smoke-free life? • Recommencez une vie sans fumée [Restart a smoke-free life] • Êtes-vous prêt à une vie sans fumée? [Ready for a smoke-free life?] • Prêt à recommencer une vie sans fumée? [Ready to restart a smoke-free life?] 	<ul style="list-style-type: none"> • Thinking about starting your smoke-free life? • Let's start your smoke-free life • Where are you on the path to a smoke-free life? • Êtes-vous prêt à encourager une vie sans fumée? [Ready to encourage a smoke-free life?] • Encouragez une vie sans fumée [Encourage a smoke-free life]
--	--

Finally, a few were concerned about positioning the exhibit title on the floor because it would not be visible from a distance. Even up close, people might be standing on the words making it hard to read the title properly.

Importance of the decision map

The preference for keeping the decision map a part of this concept largely hinged on whether individuals felt the map was overwhelming, chaotic or confusing. It also depended on whether they preferred a browsing experience similar to what was proposed in the other concept. Those who liked the concept to begin with felt their interest in the concept would be much lower if the map were removed.

Feedback on “Do you have the Tools to Quit?”

Initial reactions from people who smoke

Many people who smoke showed interest in exploring this exhibit as well. The appeal of this concept was largely derived from the appearance of a more relaxed and browse-friendly experience and from the potential to discover and pick-up “tools.”

More specifically, participants keen on exploring this exhibit often started off by explaining how the layout seemed to convey a welcoming, casual, and relaxed experience. Words such as “accessible” and “inviting” were also used to describe this concept, mostly because it felt easy to approach and enter from anywhere and because it had a “nice clean look”. These sentiments were particularly common among those who, by comparison, felt the other concept was too overwhelming and chaotic.

In addition, participants liked that the exhibit was self-guided and provided the opportunity to leisurely browse at their own pace to maybe discover resources or tools they were not aware of. Unlike pre-determined paths, this experience felt like shopping, with the freedom to investigate things that maybe they had not thought of which, in the end, opens up their quest for tools to more possibilities.

The potential for discovering or maybe even walking away with “tools” was also compelling. To many, this suggested that they might walk away with something tangible and practical, which for most meant nicotine replacement therapy products or similar types of “tools.” It especially implied that they would walk away with something other than just information. Although information, especially new information, could be valuable, many participants seemed hopeful that this exhibit was more than just a large brochure stand.

Although not mentioned as often as the elements above, something that also seemed appealing to some participants was the opportunity to create a personalized quit plan. A reference to building their own quit plan was included in the concept description that was read by the moderator. Furthermore, some did notice the poster on the right-hand side of the image that promoted steps to create a quit plan. For a number of participants, this all hinted at something they had not encountered before and at a possible “tool” that could be tailored to fit their quit journey. Anything that felt personalized tended to be very attractive to people who smoke, among whom there was widespread agreement that everyone’s quit journey was both personal and unique.

Overall, some participants felt that this exhibit looked like it would feature many different types of tools and resources. This left participants optimistic about being able to build a toolkit with many tools in it. It was also welcomed news for participants who lived in parts of the country, such as remote areas and the Territories, where the quantity and variety of tools, such as nicotine replacement therapies, are more limited.

Most of the remaining positive feedback was focused on what participants considered a good balance (or at least a better balance compared to the other concept) of technology, hardcopies and human interaction. The image shown to participants featured fewer staff, with none of them located at the exhibit entrance. This alleviated any concerns that certain participants had about having to speak to someone the moment they either approached or entered the exhibit. Participants also liked that the exhibit seemed to cater as much to those who prefer technology as it does to those who like to pick up a brochure.

Similar to the first exhibit concept, this concept also attracted its fair share of detractors and concerns. The most important weaknesses tended to pertain to the dull appearance of the exhibit, its perceived focus on informational resources and the potential for an inefficient information

searching experience.

Unlike the other concept, this exhibit concept was considered by many as drab in appearance. It was often criticized for lacking colour or any other type of visual element. This hindered the exhibit's ability to not only initially catch someone's attention but it also limits how interesting the exhibit appears even if it is noticed. To alleviate this, participants often suggested making the walls more colourful, adding large posters with images on them, large screens, and/or adding oversized and colourful hardware tools to the décor.

Another concern related to the appearance of the exhibit was how it seemed very information-heavy. This represented a deterrent for some participants in two different ways. Firstly, it gave the exhibit the appearance of a bookstore or a library, which was not particularly appealing to some participants who felt like there would be "too much reading." It also suggested that the exhibit would only focus on information and lack what participants considered actual "tools" such as nicotine replacement therapy products: "Where are the tools?" A few went so far as to say that unless there was anything other than just information, then perhaps the title should not refer to "tools" since it would be misleading.

As well, feedback on this concept made it quite clear that a casual browsing experience is not for everyone. Unless there were signs or banners on the walls guiding the guest to specific types of information and tools, some felt it might take them time to either find what they need or uncover information they did not already know. Some did admit that their openness to casually browsing did depend on where the exhibit was located and if they were already on their way somewhere. By and large though, participants voicing a concern of this nature were mostly preoccupied about wasting time.

Only a few other concerns were voiced, and these quite sparingly. A few felt there might be too many people in one area and that they might feel "boxed in". The experience also seemed less appealing to those who might want to speak with someone since there were fewer staff in the image shown.

Initial reactions from supporters

Just as interest in exploring the first concept was higher among supporters, interest in the second concept was also higher among supporters. As well, feedback from supporters regarding the strengths and weaknesses of this concept largely reflected the feedback from people who smoke.

Feedback from supporters only differed in a few ways. Firstly, there is nothing in the appearance of the exhibit that would suggest that there are resources available for supporters, which was clearly seen as a weakness in the concept for this audience. As a consequence, many seemed to feel changes were needed to the exhibit design to help supporters understand that they can find

supporter-specific resources there. A few suggestions included making the exhibit title more general (and less specific to those who smoke), putting up signs or banners that specifically invite supporters to visit, or having a pledge wall specifically for supporters.

In contrast to the first concept, supporters felt that it might be more of a challenge convincing the person they support to visit this exhibit because the information is less targeted. Although they might personally be comfortable with and open to browsing for information, they were less convinced that the person they support would feel the same way. As well, one participant did not like that some “tools” are behind the counter making it more difficult to access them or requiring a conversation with staff.

Feedback on the hardware store appearance

The idea of having the exhibit appear like a hardware store had its supporters. A few participants voiced how a visual of a hardware store in an unexpected location might catch their attention. Some also admitted that the concept was appealing to them because they like tools, they or the person they are supporting work in the trades, or they just like shopping in general so anything that looks like a storefront is appealing.

That said, some women were less enthused by the idea specifically because they felt the concept was very masculine, it seemed to cater to men (or men working in the trades) or they simply do not enjoy going to the hardware store.

Ultimately, the hardware store “look and feel” was not central to the success of the concept. Although many participants liked the reference to tools, they did not feel it was necessary to push the overall concept to the point of needing to show those tools in a hardware store.

Feedback on the exhibit title: Do you have the tools to quit? / Avez-vous les outils nécessaires pour arrêter de fumer?

Reactions to the exhibit title were mixed. Those who liked the title often felt it was direct and straightforward – it says what it has to say. Title proponents also liked the use of the word “tools” (as much in English as in French, “outils”) given how it can signify different things to different people. It also insinuated that if the guest did not know if they had the tools to quit or if they know they don’t have them, then this exhibit might have some solutions.

Another positive aspect of the title was that it did not force those who smoke to figure out where they were on their quit journey. Unlike the other concept, it does not question their readiness to quit but rather whether they have the tools which comes across as milder and less daunting.

The title also led many participants to raise concerns. One of the more contentious points in the English sessions was whether the title should specify what people might be quitting. Some felt it

should specify “quit smoking”, especially if no other large visual is used to suggest that the exhibit is about smoking cessation. Seen from a distance, both people who smoke and supporters argued that it would be difficult to know that this exhibit is relevant to them based on just the title and they might ignore it entirely. On the other hand, there were a number of arguments in favour of the status quo. These participants tended to feel that leaving it unspecified would pique their curiosity and draw them in wondering what people might be quitting. Others liked how it keeps the title shorter. As well, some felt that there were other elements to the exhibit, such as the pledge wall, that would quickly make it obvious that it was about smoking cessation.

As much as some liked the use of the term “tools”, it also attracted some concerns. More specifically, some people who smoke felt that only referring to “tools” was too limiting since quitting smoking requires much more than that – it requires willpower, it requires support, etc. If anything, these participants felt that the path to quitting was oversimplified by only referring to tools. Another concern raised was that if the exhibit only featured information, then this title is misleading since, in the minds of many, “tools” is not synonymous with information but rather tangible products one can use to help them in their journey.

Another element that a few people who smoke disliked was the use of the word “quit”. As noted earlier, this is a term that is considered both overused and also quite negative and they would prefer it not be used anymore.

Finally, supporters generally agreed that this title does not speak to them, especially if the word “smoking” is added at the end of the title.

Some of the suggestions proposed by participants included the following:

Suggestions from people who smoke	Suggestions from supporters
<ul style="list-style-type: none"> • Do you have the tools to quit smoking? • Support/Support tools for your smoke-free life. • Tools for a smoke-free life • Make it a statement instead of a question – “Nous avons les outils...” [Nous avons les outils...] • Avez-vous les outils pour arrêter de fumer? [Do you have the tools to quit?] • Découvrez les nouveaux outils pour cesser de fumer [Discover the new tools to quit] • Pensez-vous avoir l'aide et les outils nécessaires pour arrêter de fumer? [Do you think you have the support and the tools to 	<ul style="list-style-type: none"> • Do you need the tools to quit? / Do you need the tools to quit smoking? • What does it take to quit addiction to nicotine / addiction to smoking? • Can we help you to quit? • How can we help you quit? • Tools to quit smoking

quit?]	
--------	--

Preferred concept

When specifically asked which exhibit they would be more motivated to explore, the two concepts performed similarly with the path concept coming out as the preferred concept. The voting was narrowly in favour of the path concept among those who smoke whereas this concept was roughly twice as popular among supporters as the tool concept.

Quick participant reactions after this vote did not reveal anything new about what participants particularly liked or disliked about the concepts that had not already been discussed in detail when the concepts were first presented.

Vaping was sometimes discussed. A few participants spontaneously asked whether the proposed exhibits would also have information on vaping and sometimes the moderator actively prompted participants to understand whether they felt they would also seek information on vaping in this type of exhibit. Irrespective of how the topic of vaping was raised, there was strong support for seeing information on vaping, with many participants explaining that “smoking” is a continuum and vaping is part of it. There was interest in information on vaping not only because it is used by some people who smoke to help them reduce or quit their use of cigarettes, but also because they have concerns and questions about vaping in general such as: general impacts on health, how to quit vaping, what kinds of studies have explored the effects of vaping on those who vape, and if vaping an effective way to quit smoking cigarettes.

Resources of interest

Participants were asked to propose the types of resources, tools and information they would hope to find in this type of exhibit. This often required some thinking on behalf of many participants since many were curious themselves about the types of information they would find. Generally, participants were keen on wanting to walk away with new information – in other words, information they have not already heard of time and again related to smoking cessation. They are also hoping to walk away with information that is not easily found elsewhere such as in a doctor’s office or online. One thing for sure, some participants were excited at the prospect of a one-stop-shop. These participants tended to feel that resources and information on smoking cessation has typically been made available piecemeal from a wide range of sources over the years and they were keen on having access to the full complement of resources through this exhibit.

After some thinking, participants almost always ended up suggesting many types of information they would find valuable. One of the more popular topics was smoking cessation tools, products and techniques. Here it was noticed that those who smoke who are 35 to 44 years of age tended to be more interested in getting a comprehensive list of aids whereas interest in hearing about new aids was most common among those who were at least 45 years of age. What was consistent across age groups though was interest in all forms of medicinal and non-medicinal (or natural) tools, products and techniques, including traditional NRTs (such as gum, patches, sprays, etc.), prescription medication, hypnosis, therapy, etc. By getting access to such a list, it was thought that they can become more familiar with the full range of options at their disposal and either discover something they had not heard of before or confirm that they have not been missing out on anything. In addition to this list, participants were also quite keen on getting more detailed information on each aid such as:

- costs,
- insurance coverage,
- how or where they can procure or access each one, and,
- success rates.

Appreciating that smoking cessation is not just about having access to products like NRTs, many were also interested in obtaining information on support groups, plans and programs, including therapy, available in their region or maybe online. Interest in this form of support was especially strong among those who feel they have tried quitting many times in the past using aids such as NRTs and “cold turkey” and they believe that a strategy involving some form of support might be warranted. Some of these participants went on to argue that an addiction to nicotine is possibly one of the most difficult forms of addiction to quit – that it is more difficult than quitting alcohol and drugs. However, they were not aware of any sort of program for those who smoke equivalent to Alcoholics Anonymous and that this is sorely missing. A few seemed aware of provincially-funded smoking cessation programs, which is the sort of program on which they would like to find information via the exhibit.

Always with a desire to understand what strategies have worked with others and how that information can help them in their journey, many participants were interested in reading or hearing testimonials from individuals who have successfully quit.

Some were also interested in obtaining information on the health impacts of smoking cigarettes over time. Similarly, there was interest in better understanding how someone’s health could improve over time if they stop smoking cigarettes.

A number of participants were also interested in understanding the financial implications of smoking cigarettes, or conversely, how their financial situation could improve if they quit. For instance, they were curious to understand how much money could be saved over a given period of time and how that money could then be used (such as a downpayment on a house or an investment that then increases in value over time). This type of information seemed to be of particular interest to younger people who smoke.

Some supporters were interested in accessing resources that could help them in their efforts as supporters. Examples included the types of motivation strategies they can use to support, what to do when the person they are supporting starts smoking again, empathy strategies, and how to manage or cope with the psychological and emotional challenges encountered while someone is trying to quit.

Once participants had finished proposing resources, the moderator showed the following list of possible resources being considered for the exhibit:

- What you can gain from quitting smoking
- Mindfulness and stress management techniques
- Building a personalized quit plan
- Support needed to help you quit
- Information on the Quit Line that offers free and confidential support

There was modest to strong interest in most of these resources. Among people who smoke, “Support needed to help you quit” attracted the most votes. The first three resources listed, each equally interesting to this audience, were tied for second place. These participants were the least interested in information on the Quit Line. Among supporters, interest was the highest for “Support needed to help you quit”, “Building a personalized quit plan”, and “What you can gain from quitting smoking”, each attracting similar amounts of votes. Interest then dropped off somewhat for the remaining two resources: “Mindfulness and stress management techniques” and “Information on the Quit Line.”

Hardcopy versus digital versions of resources

Helpful discussions were held regarding whether participants would prefer hardcopies or digital versions of resources available through the exhibit. The general consensus seemed to be that both versions should be available. Feedback would also suggest that some degree of balance should be considered – in other words, the exhibit should not focus too much on one format over another. Reactions to each concept revealed that a meaningful number of participants would be

uninterested in an exhibit that only featured touchscreens/tablets and QR codes and a number of others would be turned away if the exhibit exclusively offered brochures.

Participants could see benefits to each format beyond catering to different levels of comfort with technology. For instance, many participants considered themselves “old school” and explained they would be much more likely to pick up, read and even keep a brochure than scan a QR code. As well, having a hardcopy lying around is more likely to remind them to refer to the material whereas something on their phone is more likely to be ignored or forgotten. Some supporters also liked the idea of hardcopies since that is something that would be easy for them to pick up and give to the person they are supporting. Some also explained that, based on what they know about the person they are supporting, they would be more likely to read a brochure than open a document on their computer or smartphone. A few also pointed out that not everyone has access to a smartphone or a data plan.

That said, many participants preferred digital versions. Some of these participants explained that they had, since the pandemic, become accustomed to QR codes. Some also considered digital versions more practical since they would not have to carry documents around, and they could read the content anywhere and anytime. A few also felt that digital versions were more environmentally friendly.

Just as some supporters felt that passing along a hardcopy would be easy, proponents of digital versions also felt that this format would be easy to send to the person they are supporting. On that note, a few supporters would like to be able to forward on digital information in a format that is also appealing to and considerate of the recipient – rather than just forwarding on a link to the person they are supporting, they are hoping that the link could be embedded into a nice message or format that shows that the supporter is thinking of them and is trying to help.

Finally, a few participants took the digital approach even further and suggested that all these resources could be housed in an app. This idea is also discussed in the next section related to engagement.

There was no clear-cut trend on this matter when considering the age groups of those who smoke. Many 35 to 44 were keen on hardcopies and conversely some in the oldest age bracket would use QR codes if they were available. It could be said though that the likelihood of using QR codes was weakest among those 55 to 64 years old.

Engagement

The moderator explained to participants that the exhibits would not only provide information but could also provide engaging experiences – in other words, things to touch, watch, listen, engage

with, and play. Participants were asked to think of engaging interactive experiences that might encourage them to not only visit the exhibit but also spend a bit more time in the event.

Interest in interactive experiences appeared strong across most groups and many suggestions were proposed in each group. Some interactive experiences were even proposed by participants in earlier parts of the discussion. While most seemed open to engaging with various interactive experiences, some were reticent to believe that they would see themselves spending a lot of time in a smoking cessation exhibit even if it featured these types of experiences.

Across all the suggestions proposed, it is worth noting that experiences involved a wide range of technologies and tactile experiences. Stimuli included the use of touchscreens, replicas, video content, artificial intelligence (AI), virtual reality, apps, and physical activities.

Some of the more popular themes and related experiences focused on understanding how someone's physical health improves or deteriorates based on whether they continue smoking cigarettes. There seemed to be just as many suggestions that focused on the harms of smoking cigarettes as there were that focused on the benefits of quitting smoking. That said, many people who smoke were not interested in seeing more images focused on the harms of smoking – they believe they have seen enough of those on the packages of cigarettes and the net result is they are still smoking cigarettes.

When it comes to showcasing the impact of smoking cigarettes on someone's health, suggestions included:

- Using life-size, or even larger than life, replicas of a lung (or a cross-section of a lung) and showing what it looks like after so many years of smoking cigarettes, or conversely how the lung of someone who has smoked for many years starts to improve with each passing week or month after they have quit smoking.
- Similarly, some suggested showing videos of how someone's health changes the more or the longer they smoke cigarettes and how it then improves after they quit.
- To make the experience more personal or immersive, some suggested using AI, simulations, or virtual reality to visually depict health impacts.
- A few participants also suggested onsite fitness or physical tests, such as running on a treadmill or doing a spirometry test and comparing their personal results to someone who does not smoke cigarettes.

While most of the health-related suggestions focused on lungs, some felt the interactive experiences should also showcase how someone's skin, teeth/smile, and brain change and show the path nicotine takes in the body when someone inhales. For instance, a few suggested that someone could stand in front of a screen and have AI show what they would look like after so

many years of smoking cigarettes. It was suggested that this image could even be saved or sent to the guest.

Just as participants were interested in getting information resources related to the impact of smoking cigarettes on their personal finances, this theme seemed to come to life when discussing interactive experiences. In this context, participants often suggested simulators or calculators to measure the impact of smoking cigarettes on their financial situation, and how that changes over time if they quit. There was interest in being able to plug in numbers that align with their reality, making the output all the more relevant and impactful.

Trivia, quizzes and questionnaires also attracted lots of interest. Participants saw these as an engaging way to test one's knowledge about cigarettes (what is in them, what kind of impact they have, etc.), the various smoking cessation aids, how quitting can benefit your body, or maybe to help build a personalized quit plan.

Building on the idea of testimonials proposed when discussing resources of interest, many participants would like to bring these testimonials to life through short videos. Ideas included being able to watch testimonials of people who have successfully quit smoking cigarettes from one touchscreen or perhaps even a small wall made up of multiple videos from which you could choose. Some took the idea even further and suggested having the option to engage, preferably in a comfortable sitting area, with people onsite who successfully quit and/or who can provide advice and support.

In a few sessions, the idea of designing an app focused on smoking cessation was proposed. This allowed for a personalized experience through technology that is always with them and that packages everything they might need in one spot. It was suggested that this type of app could provide information (as noted above in the section on resources), provide access to a support group/peer group, help track days someone has not been smoking, feature a virtual bank account so that someone can see how much money they have saved since they have stopped smoking, allow for journaling, provide motivational messages and rewards through notifications, flag and celebrate milestones, etc.

Other various ideas proposed included the following:

- Spin the wheel and win a prize
- Activities to help people manage cravings – a station dedicated to managing a craving
- Resources/strategies/tips to journal a quit journey
- A wall of statistics showing: deaths, cancer cases, how many have quit
- An interactive that shows all the chemicals in a cigarette

- Provide tablets to develop a personal quit plan

The moderator presented four possible types of incentive/reward that guests could receive for completing certain tasks or for visiting different zones/booths (supporters were only shown the first three items):

- Sticker with a message
- Small branded item, such as a stress ball, pocket calendar to count quit days, etc.
- Nicotine replacement therapy (NRT) sample (like gum or the patch)
- Digital certificate emailed to you to reinforce your commitment to making a plan to quit

Offering a small incentive or reward for completing certain tasks or for visiting different zones/booths was interesting to many participants. In fact, by this point in the discussion, the idea of handouts, or “freebies”, had already been suggested by a few participants, especially the idea of handing out NRT samples.

Among the ideas presented, NRT samples and branded items were by far the more popular items whereas very few showed interest in a digital certificate or a sticker. Specific feedback on each idea included:

- **Sticker with a message:** Very few felt this would be interesting or compelling. Many joked that these would likely end up on the ground, lost or thrown in the garbage. A select few participants suggested that this idea could be more interesting if they could personalize the message on the sticker. An idea that seemed much more appealing was a fridge magnet with a motivational message.
- **Small branded item, such as a stress ball, pocket calendar to count quit days, etc.:** This was one of the more attractive items. Participants liked how it was something they could take home to help remind them of their goal. Some also liked the idea of having an item that could help them manage cravings or keep track of their quit journey. Along these lines, participants suggested other items such as fidget toy or a journal.
- **Nicotine replacement therapy (NRT) sample (like gum or the patch):** This was also one of the more popular items, especially because it aligned exactly with what many participants would hope to walk away with. This is what many participants had in mind when they thought about a “tool”. It was also seen as a valuable way for someone to discover a new product that could help them on their journey or at least experiment to see if it was right for them.

- **Digital certificate emailed to you to reinforce your commitment to making a plan to quit:**
The certificate was not appealing at all. In fact, many did not even understand what this was. A few others were reluctant to share their email address.

Beyond the proposed ideas, the only other concept that seemed appealing to some people who smoke was a key chain, or something similar to what Alcoholics Anonymous participants use to remind them of their commitment and to count their days of sobriety, like some sort of clicker.

Ambassadors

Even though not all participants would want to speak to someone during their visit to the exhibit, there remained notable interest in having staff on hand. As well, one of the points on which most if not all participants seemed to agree is that some of the people in the exhibit should have lived experience. For people who smoke, this meant people who used to smoke and have successfully quit. For supporters, this also meant people who used to smoke and have successfully quit but it also meant people with experience as a supporter.

Participants would also want individuals very familiar with the various smoking cessation aids. They do not have to be company representatives however they should have a solid understanding of what the options are (medicinal and non-medicinal), how they work and where they can be obtained. Participants rarely spontaneously suggested that healthcare providers should be on hand however when it was proposed, some felt it might be a good idea. When brought up by a participant or the moderator, the idea of having someone with expertise in mental health and addiction was also considered valuable. Few seemed to think that healthcare students would be useful or appropriate.

Finally, many would hope the staff would have empathy and the ability to listen in a non-judgmental way similar to someone who works the Quit Line.

Pledge wall and digital counter

The idea of the pledge wall was explored in detail with people who smoke.

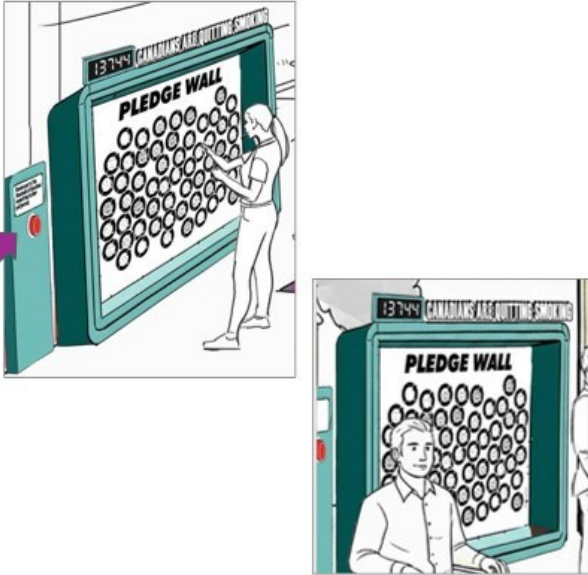
One idea being considered is a **pledge wall** at the end of the exhibit.

Guests can personalize a pledge or commitment to quitting smoking or being smoke-free or share an inspirational message to support others.

A large button will invite action: **“Become part of the thousands of Canadians committing to a smoke-free life.”**

Participants could share minimal personal information, like:

- First name
- Reason for quitting
- A short motivational message



Although the pledge wall did have some impact in terms of getting people’s attention, when it came down to participating in one way or another, the pledge wall had limited appeal among those who smoke.

Participating in the pledge wall triggered a variety of emotions among people who smoke. On the positive side of the spectrum, those who were either intrigued or willing participants were rarely very excited to participate in the wall. They mostly saw it as something interesting to do and rarely felt passionate about being one among many on the same quit journey.

On the other hand, many of those who were not interested in the wall felt quite passionate about *not* participating. These participants raised a variety of objections and concerns and in so doing, revealed a lot about how their quit journey is a very personal experience. For instance, some would not want to visit this type of exhibit and make a commitment then and there – the stakes were too high and it was too big a decision for them to take at that moment. This was the kind of decision they felt they could only make when the time was right and they felt ready, not because they were standing in a smoking cessation exhibit.

A number of participants also sensed that by making a pledge to quit smoking they would be setting themselves up for failure. A few referred to the wall as “the wall of shame.” These participants strongly suspected that after making the pledge in the exhibit they would probably “go the parking lot and light up.” They did not think they could take this type of pledge seriously. So if it cannot be taken seriously, why do it at all.

Another contingent among those who smoke felt that quitting is a very personal experience and one that they would not want to showcase in a public space.

Finally, the few who considered themselves “closet smokers” would definitely not be interested in putting their name on this kind of wall.

Some ideas related to the pledge wall seemed a bit more interesting to participants:

- Some were keen on a “motivation mountain” – this would be a wall consisting of motivational messages.
- Some were also a bit interested in reading success stories or perhaps a wall showing how long certain people have been able to stop smoking cigarettes.

The appeal of the pledge wall rarely improved when social media or Government of Canada hosted website options were presented.

Participants were also asked their reactions to the call to action: “Become part of the thousands of Canadians committing to a smoke-free life.” As noted above, many felt that quitting is a very personal experience and as such, few felt they would be more motivated knowing they were part of something bigger. They certainly were not going to quit because thousands of others are trying to quit as well. With all due respect, many appreciated that it is a nice sentiment and that some might be motivated by this. However, this did not have any impact on them or their motivation. Besides, as a few pointed out, there are always “thousands of Canadians trying to quit” so this is not necessarily news or anything special.

The digital counter, which laid atop the pledge wall, was also discussed with people who smoke.

The **counter** would show how many people in Canada have attempted to quit smoking this year. When the exhibit launches, the number would start with the latest national estimate of how many people have quit that year and would go up every time someone makes a pledge. It would have messaging like “Join the [X] Canadians who are trying to quit.”



Similar to the pledge wall, the digital counter also had limited appeal. Only a few felt they would be motivated knowing they are sharing the same experience with many other Canadians. Otherwise, participants reiterated how their journey was a personal one.

Many also questioned the accuracy or credibility of the proposed statistic. Many pointed out that it is intended to count those planning on or trying to quit and that this often fails. So are they really quitting smoking? As well, some felt that if this number only went up when someone pushed the red button, then it is not an accurate picture of the entire country. Accuracy of the number is further weakened by those, especially children, walking by and pushing the button for fun to see the number go up. A few felt that when numbers get so large, they become dehumanizing and they cannot connect to or relate to them. Finally, a few generally questioned statistics put forth by any government – they feel that those numbers are often manipulated or calculated to serve a specific agenda.

A few suggestions were proposed to make the number more relevant or motivating. Some would prefer if it counted those who have successfully quit. A few others would feel more “connected” to the number if it was more specific to the region or town where they live.

In the end though, few participants felt strongly about keeping the digital counter – by and large, the digital counter could be removed with little to no impact on the appeal of the exhibit or people’s motivations.

Location preferences

All participants were presented with following types of locations and asked to select the ones where they might be likely to explore the proposed exhibit:

- Shopping malls
- Trade shows
- Outdoor events (festivals, fairs or street fairs)
- Sporting events (e.g. onsite, in arena, etc.)
- Airport or train terminals (domestic departure terminals while you are waiting for your flight or train)

From this list, the most popular locations among people who smoke were outdoor events and shopping malls. A distant third were airport and train terminals, followed by trade shows. Sporting events were selected sparingly.

Among supporters, the most popular location by far was outdoor events. In distant second place were shopping malls, trade shows and airport and train terminals, each garnering similar amounts of votes. Similar to people who smoke, sporting events were the least popular location.

In larger cities, locations like airport and train terminals were popular.

Participants offered other types of locations that they considered ideal for the proposed type of exhibit. In making these suggestions, participants considered possibly smaller, more compact versions of the exhibit so that they could, for instance, fit in a doctor's office. They were also altruistic and suggested locations that would be beneficial to other slices of society, such as students.

Through these suggestions, the following themes emerged:

- Healthcare settings, including hospitals, hospital lobbies, in doctor's offices, in dentist's offices, in clinics/ walk-in clinics, at the pharmacy and pop-up clinics,
- Municipal buildings and settings, including libraries, community centres, water parks, pools, community halls, on the waterfront, and parks
- Academic settings, such as schools, high schools, university campuses and trade schools
- Transportation settings, such as in subway stations, a bus terminal, a ferry terminal, in a bus shelter
- At or near certain retail locations, such as grocery stores, liquor stores, coffee shops, where you purchase cigarettes, hardware store, outside thrift shops, Costco
- Certain outdoor activities, such as a food truck event, farmer's markets, flea markets, and campgrounds
- Science museums or science centers
- In or near a gym
- At the workplace / in an office building lobby
- At movie theatres
- Waiting for a concert to start
- At a kids sports tournament or a similar family event

Taglines

People who smoke were presented with five possible taglines for each exhibit concept and asked to select the two taglines they felt were the most motivating.

<p><i>Ready to (Re)Start Your Smoke-Free Life?</i></p> <ol style="list-style-type: none"> 1. Step into your healthier tomorrow. Your smoke-free path starts here. 2. Restart your smoke-free life today. Every step is a win. 3. Quit smoking your way. Choose the path that works for you. 4. Restart your smoke-free life now. One step, one choice, one win at a time. 5. There's no wrong way to start. Choose the path that's right for you. 	<p><i>Do you have the tools to quit?</i></p> <ol style="list-style-type: none"> 1. Tools for today. Confidence for tomorrow. Build your quit plan today. 2. Build your quit plan and pick the tools that work for you. 3. Every attempt builds strength. Build your quit toolkit today. 4. Get the tools. Build your quit smoking plan. Take charge and you can make it happen. 5. Quitting smoking isn't one-size-fits-all. Build the toolkit that fits your life.
<p><i>Êtes-vous prêt à (re)commencer une vie sans fumée?</i></p> <ol style="list-style-type: none"> 1. Faites un pas vers un avenir plus sain. Votre parcours sans fumée commence ici. 2. Reprenez votre vie sans fumée dès aujourd'hui. Chaque pas est une victoire. 3. Arrêter de fumer à votre façon. Choisissez le chemin qui vous convient. 4. Reprenez votre vie sans fumée dès maintenant. Un pas, un choix, une victoire à la fois. 5. Toutes les façons de commencer sont bonnes. Choisissez la voie qui vous convient. 	<p><i>Avez-vous les outils nécessaires pour arrêter de fumer?</i></p> <ol style="list-style-type: none"> 1. Des outils pour aujourd'hui. De la confiance pour demain. Créez votre plan d'arrêt tabagique ou d'arrêt du tabac dès aujourd'hui. 2. Créez votre plan pour arrêter et choisissez les outils qui vous conviennent. 3. Chaque essai vous rend plus fort. Créez votre boîte à outils d'arrêt tabagique ou d'arrêt du tabac dès aujourd'hui. 4. Obtenir les outils. Créez votre plan d'arrêt tabagique. Prenez les choses en main et vous pouvez y arriver. 5. Il n'existe pas de solution unique pour arrêter de fumer. Créez une boîte à outils qui vous correspond.

Each taglines garnered some popularity votes however some stood out more than others, in some cases a lot more.

For the path concept, as well as being equally popular, taglines 3 and 5 were by far the most popular. Tagline 1 ranked second. Taglines 2 and 4 were equally popular however they also attracted the fewest votes.

For the tool concept, tagline 5 was a clear favourite. Second place went to tagline 3, followed distantly by taglines 2 and 4 (which were equally popular). The least popular option was tagline 1.

Participants liked taglines that empowered them to do things their way and that acknowledged the unique journey each person who smokes needs to take. This was largely why tagline 5 was so appealing for each concept – they encouraged them to “Choose the path that’s right for you” and recognized that “Quitting smoking isn’t one-size-fits-all.” Tagline 3 for the path concept conveyed a very similar message: “Quit smoking your way. Choose the path that works for you.” In fact, a number of participants felt that taglines 3 and 5 for the path concept were interchangeable.

Participants also liked statements that recognized that small steps and efforts matter and are valuable building blocks in the ultimate effort to quit, hence the popularity of tagline 3 for the tool concept.

The reference to a “healthier tomorrow” (in tagline 1 for the path concept) was also aspirational – it’s what everyone wants.

Finally, participants were also drawn to positive, action-oriented language such as “build”, “take charge”, and “step into.”

As a final gut check, participants were asked if there was any term, phrase or tagline that Health Canada should avoid at all costs. Few taglines were deeply disliked by anyone however certain words or phrases were subject to either concern or dislike:

- A number of participants disliked the use of the word “quit” or “quitting” (“arrêtez”), sensing that it has been overused and has a negative connotation. This was a more common concern among English participants.
- Those who did not like the use of the term “restart” when discussing the title for the path concept repeated that concern when discussing the taglines for that same concept.
- Suggesting “confidence for tomorrow” was off putting for a few who felt this was suggesting they do not have confidence today.
- A few felt that taglines using three phrases were too long.
- A few also felt that the order to “take charge” (“prenez les choses en main”) suggests that they are not in charge of their life right now.
- A few felt that “there’s no wrong way to start” is not true.
- While some felt that “every attempt builds strength”, a few others disagreed and the impact was much the opposite.
- A few Anglophones felt that “quit toolkit” was awkward to say.

Methodology

All research work was conducted in accordance with the professional standards established by the Government of Canada Public Opinion Research Standards, as follows:

Quorus was responsible for coordinating all aspects of the research project including working with Health Canada in designing and translating the recruitment screener and the moderation guide, coordinating all aspects of data collection logistics, including participant recruitment, providing the online focus group platform and moderating all focus groups and delivering required reports at the end of data collection. The research approach is outlined in greater detail below.

Target audience and sample frame

The target audience for this research study consisted of Canadians from the following regions:

- Atlantic Canada (NL, PEI, NS, NB) (English)
- Quebec (French)
- Ontario / Nunavut (English)
- Prairies (MB, SK, AB) (English)
- British Columbia / Northwest Territories / Yukon (English)

Four groups were held in each region, with one group dedicated to each of the following segments:

- Adults aged 35-44 who smoke cigarettes daily
- Adults aged 45-54 who smoke cigarettes daily
- Adults aged 55-64 who smoke cigarettes daily
- Adults aged 18+ who want to support someone they care about in quitting smoking cigarettes

In the design of the recruitment screener, specific questions were inserted to clearly identify whether participants qualified for the research program and to ensure, where applicable, a good representation by age, region, gender and ethnicity. In groups with individuals who smoke, efforts were made to recruit a mix of those with previous quit attempts and those without.

In addition to the general participant profiling criteria noted above, additional screening measures to ensure quality respondents include the following:

- No participant (nor anyone in their immediate family or household) was recruited who worked in related government departments/agencies, nor in advertising, marketing research, public relations, or the media (radio, television, newspaper, film/video production, etc.).

- No participant (nor anyone in their immediate family or household) was recruited who worked in a company that manufactures or sells tobacco or vaping products, a company or organization that sells products to help people quit smoking or provides services to help people quit smoking or a legal or law firm that represents a tobacco or vaping company.
- No participant acquainted with another participant was knowingly recruited for the same study, unless they were recruited into separately scheduled sessions.
- No participant was recruited who had attended a qualitative research session within the past six months.
- No participant was recruited who had attended five or more qualitative research sessions in the past five years.
- No participant was recruited who had attended a qualitative research session on the same general topic as defined by the Researcher/Moderator in the past two years.

Description of data collection procedures

Data collection consisted of online focus groups with individuals in Canada. Each focus group lasted approximately 120 minutes (2 hours).

For each focus group, Quorus recruited 10 participants with the goal of achieving 8-10 participants per session. All individuals who participated in a focus group received an honorarium of \$125.

Participants invited to participate in the focus groups were recruited by telephone through random digit dialing of the general public as well as through the use of a proprietary opt-in database.

The recruitment of participants followed the screening, recruiting and privacy considerations as set out in the *Standards for the Conduct of Government of Canada Public Opinion Research—Qualitative Research*. Furthermore, recruitment respected the following requirements:

- All recruitment was conducted in the participant's official language of choice, English and French, as appropriate.
- Upon request, participants were informed on how they can access the research findings.
- Upon request, participants were provided Quorus' privacy policy.
- Recruitment confirmed each participant had the ability to speak, understand, read and write in the language in which the session was to be conducted.
- Participants were informed of their rights under the *Privacy and Access to Information Acts* and ensure that those rights were protected throughout the research process. This

included: informing participants of the purpose of the research, identifying both the sponsoring department or agency and research supplier, informing participants that the study will be made available to the public in 6 months after field completion through Library and Archives Canada, and informing participants that their participation in the study is voluntary and the information provided will be administered according to the requirements of the *Privacy Act*.

At the recruitment stage and at the beginning of each focus group, participants were informed that the research was being conducted for the Government of Canada and Health Canada. Participants were informed of the audio/video recording of their session and of the presence of Health Canada observers. Quorus ensured that prior consent was obtained at the recruitment stage and before participants began their focus group.

All sessions were conducted in the evening after regular business hours. The research team used the Zoom platform to host and record focus group sessions (through microphones and webcams connected to the moderator and participants electronic devices, such as their laptop, tablet or smartphone) enabling client remote viewing.

A total of 20 online focus groups were conducted across Canada between January 21 and February 5, 2026.

Date	Time (EST)	Region	Segment	Language	Number of participants
January 21, 2026	5:00 PM	Atlantic Canada	Adults aged 35-44 who smoke	English	10
	7:30 PM	Prairies	Adults aged 35-44 who smoke	English	8
January 22, 2026	5:00 PM	Atlantic Canada	Adults aged 45-54 who smoke	English	7
	7:30 PM	Prairies	Adults aged 45-54 who smoke	English	8
January 26, 2026	5:00 PM	Atlantic Canada	Adults aged 55-64 who smoke	English	9
	7:30 PM	Prairies	Adults aged 55-64 who smoke	English	7
January 27, 2026	5:00 PM	Ontario/Nunavut	Adults aged 35-44 who smoke	English	10
	8:00 PM	British Columbia/NWT/YK	Adults aged 35-44 who smoke	English	9
January 28, 2026	5:00 PM	Ontario/Nunavut	Adults aged 45-54 who smoke	English	9

Date	Time (EST)	Region	Segment	Language	Number of participants
	8:00 PM	British Columbia/ NWT/YK	Adults aged 45-54 who smoke	English	9
January 29, 2026	5:00 PM	Ontario/Nunavut	Adults aged 55-64 who smoke	English	9
	8:00 PM	British Columbia/ NWT/YK	Adults aged 55-64 who smoke	English	9
February 2, 2026	5:00 PM	Quebec	Adults aged 35-44 who smoke	French	8
	7:30 PM	Quebec	Adults aged 45-54 who smoke	French	8
February 3, 2026	5:00 PM	Quebec	Adults aged 55-64 who smoke	French	8
	7:30 PM	Quebec	Supporters	French	10
February 4, 2026	5:00 PM	Atlantic Canada	Supporters	English	10
	7:30 PM	Prairies	Supporters	English	10
February 5, 2026	5:00 PM	Ontario/Nunavut	Supporters	English	9
	8:00 PM	British Columbia/ NWT/YK	Supporters	English	10
TOTAL: 177					

Qualitative research disclaimer

Qualitative research seeks to develop insight and direction rather than quantitatively projectable measures. The purpose is not to generate “statistics” but to hear the full range of opinions on a topic, understand the language participants use, gauge degrees of passion and engagement and to leverage the power of the group to inspire ideas. Participants are encouraged to voice their opinions, irrespective of whether or not that view is shared by others.

Due to the sample size, the special recruitment methods used, and the study objectives themselves, it is clearly understood that the work under discussion is exploratory in nature. The findings are not, nor were they intended to be, projectable to a larger population.

Specifically, it is inappropriate to suggest or to infer that few (or many) real world users would behave in one way simply because few (or many) participants behaved in this way during the sessions. This kind of projection is strictly the prerogative of quantitative research.

Appendices

Appendix A: Recruitment screener

Specifications

- Recruit 10 participants per group, for 8 to 10 to show
- Participants to be paid \$125
- Sessions up to 2 hours in duration
- 20 online focus groups will be conducted with Canadians in the following five locations:
 - Atlantic Canada (NL, PEI, NS, NB) (English)
 - Quebec (French)
 - Ontario / Nunavut (English)
 - Prairies (MB, SK, AB) (English)
 - British Columbia / Northwest Territories / Yukon (English)
- 4 online groups will be held with participants in each region, split based on participants' age and smoking status:
 - Adults aged 35-44 who smoke
 - Adults aged 45-54 who smoke
 - Adults aged 55-64 who smoke
 - Adults aged 18+ who want to support someone they care about in quitting smoking cigarettes

All times are stated in local area time unless specified otherwise

Group 1	Group 2	Group 3	Group 4
Atlantic Canada	Prairies	Atlantic Canada	Prairies
January 21 6:00 pm AST Adults aged 35-44 who smoke	January 21 6:30 pm CST Adults aged 35-44 who smoke	January 22 6:00 pm AST Adults aged 45-54 who smoke	January 22 6:30 pm CST Adults aged 45-54 who smoke
Group 5	Group 6	Group 7	Group 8
Atlantic Canada	Prairies	Ontario / Nunavut	British Columbia / NWT / YK
January 26 6:00 pm AST Adults aged 55-64 who smoke	January 26 6:30 pm CST Adults aged 55-64 who smoke	January 27 5:00 pm EST Adults aged 35-44 who smoke	January 27 5:00 pm PST Adults aged 35-44 who smoke
Group 9	Group 10	Group 11	Group 12
Ontario / Nunavut	British Columbia / NWT / YK	Ontario / Nunavut	British Columbia / NWT / YK
January 28 5:00 pm EST Adults aged 45-54 who smoke	January 28 5:00 pm PST Adults aged 45-54 who smoke	January 29 5:00 pm EST Adults aged 55-64 who smoke	January 29 5:00 pm PST Adults aged 55-64 who smoke
Group 13	Group 14	Group 15	Group 16
Quebec	Quebec	Quebec	Quebec
February 2 5:00 pm EST Adults aged 35-44 who smoke	February 2 7:30 pm EST Adults aged 45-54 who smoke	February 3 5:00 pm EST Adults aged 55-64 who smoke	February 3 7:30 pm EST Supporters (18+)
Group 17	Group 18	Group 19	Group 20
Atlantic Canada	Prairies	Ontario / Nunavut	British Columbia / NWT / YK
February 4 6:00 pm AST Supporters (18+)	February 4 6:30 pm CST Supporters (18+)	February 5 5:00 pm EST Supporters (18+)	February 5 5:00 pm PST Supporters (18+)

Questionnaire

A. Introduction

Hello/Bonjour, my name is [NAME] and I am with Quorus Consulting Group, a national public opinion research company. We're planning a series of online discussion groups on behalf of the Government of Canada with people in your area. Would you prefer to continue in English or French? / Préférez-vous continuer en anglais ou en français?

[INTERVIEWER NOTE: FOR ENGLISH GROUPS, IF PARTICIPANT WOULD PREFER TO CONTINUE IN FRENCH, PLEASE RESPOND WITH, "Malheureusement, nous recherchons des gens qui parlent anglais pour participer à ces groupes de discussion. Nous vous remercions de votre intérêt." FOR FRENCH GROUPS, IF PARTICIPANT WOULD PREFER TO CONTINUE IN ENGLISH, PLEASE RESPOND WITH, "Unfortunately, we are looking for people who speak French to participate in this discussion group. We thank you for your interest."]

[INTERVIEWER NOTE 2: IF SOMEONE IS ASKING TO PARTICIPATE IN FRENCH/ENGLISH BUT NO GROUP IN THIS LANGUAGE IS AVAILABLE IN THIS AREA, TALK TO YOUR SUPERVISOR. EFFORTS WILL BE MADE TO INCLUDE THEM IN A GROUP IN THEIR PREFERRED LANGUAGE IN THE NEAREST TIME ZONE TO WHERE THEY LIVE. ONE-ON-ONE INTERVIEWS CAN ALSO BE ACCOMMODATED AS THE NEED ARISES.]

As I was saying – we are planning a series of online discussion groups on behalf of the Government of Canada with people in your area. The research will focus on getting your reactions to exhibit concepts and materials being considered. The groups will last up to 120 minutes (two hours) and people who take part will receive a cash gift to thank them for their time.

Participation is completely voluntary. We are interested in your opinions. No attempt will be made to sell you anything or change your point of view. The format is a group discussion held using the online web conferencing platform Zoom, led by a research professional with about eight to ten other participants invited the same way you are being invited. The use of a computer or a tablet (not a smartphone) in a quiet room is necessary for participation, as the moderator will be gauging reactions to concepts and materials. All opinions will remain anonymous and will be used for research purposes only in accordance with laws designed to protect your privacy.

[INTERVIEWER NOTE: IF ASKED ABOUT PRIVACY LAWS, SAY: "The information collected through the research is subject to the provisions of the *Privacy Act*, legislation of the Government of Canada, and to the provisions of relevant provincial privacy legislation."]

- Before we invite anyone to attend, we need to ask you a few questions to ensure that we get a good mix of people in each of the groups. This will take 5 minutes. May I continue?

Yes	1	CONTINUE
No	2	THANK/DISCONTINUE

B. Qualification

- We are looking to include people of various ages in the group discussion. May I have your age please? **RECORD AGE:** _____

AGE	THOSE WHO SMOKE	SUPPORTERS
Under 35	ADULTS WHO SMOKE GROUPS – RECRUIT A MIX OF AGES	RECRUIT A MIX 18+
35-44		
45-54		
55-64		
65+		

IF UNDER AGE 18, THANK AND TERMINATE

- Do you, or any member of your immediate family, work for...? **[READ LIST]**

...a marketing research, public relations, or advertising firm?	1
...the media (radio, television, newspapers, magazines, etc.)?	2
...the federal or provincial government?	3
...a company that manufactures or sells tobacco or vaping products?	4
...a company or organization that sells products to help people quit smoking or provides services to help people quit smoking?	5
...a legal or law firm that represents a tobacco or vaping company?	6

IF YES TO ANY, THANK AND TERMINATE

- Have you ever attended a discussion group or taken part in an interview on any topic that was arranged in advance and for which you received money for participating?

Yes	1	
No	2	GO TO Q8

5. When did you last attend one of these discussion groups or interviews?

Within the last 6 months	1	THANK & TERMINATE
Over 6 months ago	2	

6. Thinking about the groups or interviews that you have taken part in, what were the main topics discussed?

RECORD: _____

THANK/TERMINATE IF RELATED TO SMOKING / CIGARETTES / TOBACCO

7. How many discussion groups or interviews have you attended in the past 5 years?

Fewer than 5	1	
Five or more	2	THANK & TERMINATE

SKIP TO Q10 IF UNDER 35 YEARS OLD OR 65+

8. During the past 30 days, how often did you smoke cigarettes?

Daily	1
Less than daily , but at least once in the past week	2
Less than once a week, but at least once in the past month	3
Not at all	4

RECRUIT FOR GROUPS WITH ADULTS WHO SMOKE IF Q8 = 1

IF Q8 = 2,3,4, SKIP TO Q10

9. During the past 12 months, how many times have you stopped smoking cigarettes for one day or longer because you were trying to quit smoking?

0 times	1
1 time	2
2 or 3 times	3
4 or more times	4

FOR GROUPS WITH ADULTS WHO SMOKE, RECRUIT A MIX OF THOSE WITH PREVIOUS QUIT ATTEMPTS AND THOSE WITHOUT

THOSE WHO SMOKE DAILY SKIP TO Q12

10. Do you currently have a close family member, partner, or friend who currently smokes cigarettes and has shown interest in or made attempts at reducing or quitting their use of cigarettes in the past?

Yes	1	
No	2	THANK & TERMINATE

11. Given the opportunity, how involved would you want to be in supporting or further supporting this person in their efforts?

Not at all	1	THANK & TERMINATE
Not very	2	THANK & TERMINATE
Somewhat	3	
Very involved	4	

RECRUIT FOR SUPPORTER GROUPS IF Q11 = 3 OR 4

12. What is your gender identity? [If you do not feel comfortable disclosing, you do not need to do so] **[DO NOT READ LIST]**

Male	1
Female	2
Prefer to self-describe, please specify: _____	3
Prefer not to say	4

AIM FOR 50/50 SPLIT OF MALE AND FEMALE, WHILE RECRUITING OTHER GENDER IDENTITIES AS THEY FALL

13. We want to make sure we speak to a diversity of people. Do you identify as any of the following? *SELECT ONE*

An Indigenous person (First Nations, Inuit or Métis)	1
A member of a racialized community (other than an Indigenous person)	2
None of the above	3

RECRUIT MEMBERS OF INDIGENOUS AND RACIALIZED COMMUNITIES ACROSS ALL GROUPS

14. [ASK ONLY IF Q13=2] What is your ethnic background?

RECORD ETHNICITY: _____

RECRUIT A MIX OF ETHNICITIES

15. Do you currently live in... [READ LIST]

A city or metropolitan area with a population of at least 100,000	1
A city with a population of 30,000 to 100,000	2
A city or town with a population of 10,000 to 30,000	3
A town or rural area with a population under 10,000	4

FOR EACH GROUP, RECRUIT A MIX OF:

- **~6 INDIVIDUALS WHO LIVE IN A CITY OR TOWN WITH A POPULATION OF AT LEAST 30,000, AND,**
- **~4 WHO LIVE IN SMALLER TOWNS/RURAL**

16. Participants in group discussions are asked to voice their opinions and thoughts, how comfortable are you in voicing your opinions in an online group discussion with other adults
Are you... **READ OPTIONS**

Very comfortable	1	MIN 6 PER GROUP
Fairly comfortable	2	
Not very comfortable	3	THANK & TERMINATE
Very uncomfortable	4	THANK & TERMINATE

17. Do you have access to a stable internet connection, capable of sustaining a two-hour online video conference?

Yes	1	
No	2	THANK & TERMINATE

18. Participants will be asked to provide their answers through an online web conferencing platform using a computer or a tablet (**not a smartphone**) in a quiet room. It is necessary for participation, as the moderator will be gauging reactions to advertising concepts and materials. Is there any reason why you could not participate? (No access to computer or tablet, internet, etc.) If you need glasses to read or a device for hearing, please remember to wear them.

Yes	1	
No	2	SKIP TO INVITATION

19. Is there anything we could do to ensure that you can participate?

Yes	1	
No	2	THANK AND TERMINATE
DK/NR	9	THANK AND TERMINATE

20. What specifically? [OPEN END]

INTERVIEWER TO NOTE FOR POTENTIAL ONE-ON-ONE INTERVIEW

RECRUITER NOTE: WHEN TERMINATING AN INTERVIEW, SAY: *“Thank you very much for your cooperation. We are unable to invite you to participate because we have enough participants who have a similar profile to yours.”*

C. INVITATION TO PARTICIPATE

21. I would like to invite you to participate in an online focus group session where you will exchange your opinions in a moderated discussion with other Canadians in your region. The discussion will be led by a researcher from the national public opinion research firm, Quorus Consulting. The session will be recorded but your participation will be confidential. The group will be hosted using an online web conferencing platform, taking place on [DAY OF WEEK], [DATE], at [TIME]. It will last 120 minutes (two hours). People who attend will receive \$125 to thank them for their time.

Would you be interested in taking part in this study?

Yes	1	
No	2	THANK & TERMINATE

22. The discussion group will be video-recorded. These recordings are used to help with analyzing the findings and writing the report. The results from the discussions will be grouped together in the research report, which means that individuals will not be identified in anyway. Neither your name nor your specific comments will appear in the research report. Is this acceptable?

Yes	1	
No	2	THANK & TERMINATE

23. There will be some people from Health Canada and/or the Government of Canada, and other individuals involved in this project observing the session. They will not take part in the discussion and they will not know your name. Is this acceptable?

Yes	1	
No	2	THANK & TERMINATE

24. Thank you. Just to make sure, the group will take place on [DAY OF WEEK], [DATE], at [TIME] and it will last 120 minutes (two hours). Following your participation, you will receive \$125 to thank you for your time. Are you interested and available to attend?

Yes	1	
No	2	THANK & TERMINATE

To conduct the session, we will be using a screen-sharing application called **Zoom**. **We will need to send you by email the instructions to connect.** The use of a computer or tablet (**not a smartphone**) in a quiet room is necessary since the moderator will want to show material to participants to get their reactions – that will be an important part of the discussion.

We recommend that you click on the link we will send you a few days prior to your session to make sure you can access the online meeting that has been setup and repeat these steps **at least 10 to 15 minutes prior to your session.**

As we are only inviting a small number of people to attend, your participation is very important to us. If for some reason you are unable to attend, **you cannot send someone to participate on your behalf** - please call us so that we can get someone to replace you. You can reach us at **[INSERT NUMBER]** at our office. Please ask for **[INSERT NAME]**.

So that we can contact you to remind you about the focus group or in case there are any changes, can you please confirm your name and contact information for me? **[READ INFO AND CHANGE AS NECESSARY.]**

First name _____

Last Name _____

Email _____

Day time phone number _____

Night time phone number _____

Thank you!

If the respondent refuses to give his/her first or last name or phone number please assure them that this information will be kept strictly confidential in accordance with the privacy law and that it is used strictly to contact them to confirm their attendance and to inform them of any changes to the focus group. If they still refuse THANK & TERMINATE.

Appendix B: Moderation guide for people who smoke

Introduction to procedures (10 minutes)

Thank you all for joining this online focus group!

- Introduce moderator/firm and welcome participants to the focus group.
 - Thanks for attending.
 - My name is [INSERT MODERATOR NAME] and I work with Quorus Consulting, and we are conducting research on behalf of the Government of Canada.
 - Today we will focus on getting your feedback on a few in-person exhibit concepts, being considered to support individuals in their efforts to quit smoking. When we invited you to this session, you informed us that you smoke cigarettes daily. Please keep that in mind as you share your feedback with us today.
 - The discussion will last approximately 2 hours.
 - If you have a cell phone or other electronic device, please turn it off.
- Describe focus group.
 - A discussion group is a “round table” discussion, meaning we will discuss something and everyone has an equal chance to express an opinion. We will also be asking you to answer survey questions from time to time to help guide the discussion.
 - My job is to facilitate the discussion, keeping us on topic and on time.
 - Your job is to offer your opinions on the topics I’ll be presenting to you tonight/today.
 - Your honest opinion is valued. There are no right or wrong answers. This is not a knowledge test.
 - Everyone’s opinion is important and should be respected.
 - We want you to speak up even if you feel your opinion might be different from others. Your opinion may reflect that of other people.

- To participate in this session, please make sure your webcam and your microphone are on and that you can hear me clearly. If you are not speaking, I would encourage you to mute your line to keep background noise to a minimum...just remember to remove yourself from mute when you want to speak!
- We might use the chat function. **[MODERATOR EXPLAINS HOW TO ACCESS THE ZOOM CHAT FEATURE DEPENDING ON THE DEVICE THE PARTICIPANT IS USING]**. Let's do a quick test right now - please open the chat window and send the group a short message (e.g., Hello everyone). If you have an answer to a question and I don't get to ask you specifically, please type your response in there. We will be reviewing all chat comments at the completion of this project.
- Explanations.
 - Please note that anything you say during these groups will be held in the strictest confidence. We do not attribute comments to specific people. Our report summarizes the findings from the groups but does not mention anyone by name.
 - The final report for this session, and others, can be accessed through the Library of Parliament and Library and Archives Canada's website.
 - Your responses will in no way affect your dealings with the Government of Canada.
 - The session is being audio-video recorded for report writing purposes / verify feedback. These recordings are stored for up to 6 months and then destroyed.
 - Some of my colleagues from the Government of Canada who are involved in this project are watching this session and this is only so they can hear the comments first-hand.
- Please note that I am not an employee of the Government of Canada and may not be able to answer questions about what we will be discussing. If questions do come up over the course of the group, we will try to get answers for you before we wrap up the session.

Any questions?

INTRODUCTIONS: Let's go around – please tell us your name and a little bit about yourself such as where you live and what you like to do in your spare time.

- On a typical day, how many cigarettes would you say you smoke?
 - **PROBE:** Is it closer to a pack a day, a few cigarettes a day, or maybe just one or two?

- Over the past year, have you tried anything to help you cut down or quit smoking?
 - **PROBE:** For example, have you tried using nicotine patches or gum, medications, apps or online programs, vaping?

Concept Overview (2 minutes)

CONTEXT: Here is a bit of information about the exhibit concepts I was talking about a few moments ago.

The Government of Canada continues to work towards helping Canadians quit smoking cigarettes. In 2026, they plan to roll out an exhibit that individuals can experience in person at busy or high traffic events and public spaces.

Think of these exhibits as displays or stations that are meant to provide different information resources to support someone who might be interested in quitting smoking or those who might want to support someone to quit smoking.

I have two exhibit concepts for you today – for each one, I'll share a general drawing of what the exhibit could look like. Keep in mind these are just concepts so don't focus too much on the small details – the drawings are meant to help you get an overall sense of what the exhibit could look like.

We'll have a brief discussion about each concept and then I'll ask you which one you prefer. We'll then spend some time discussing specific aspects of this type of exhibit.

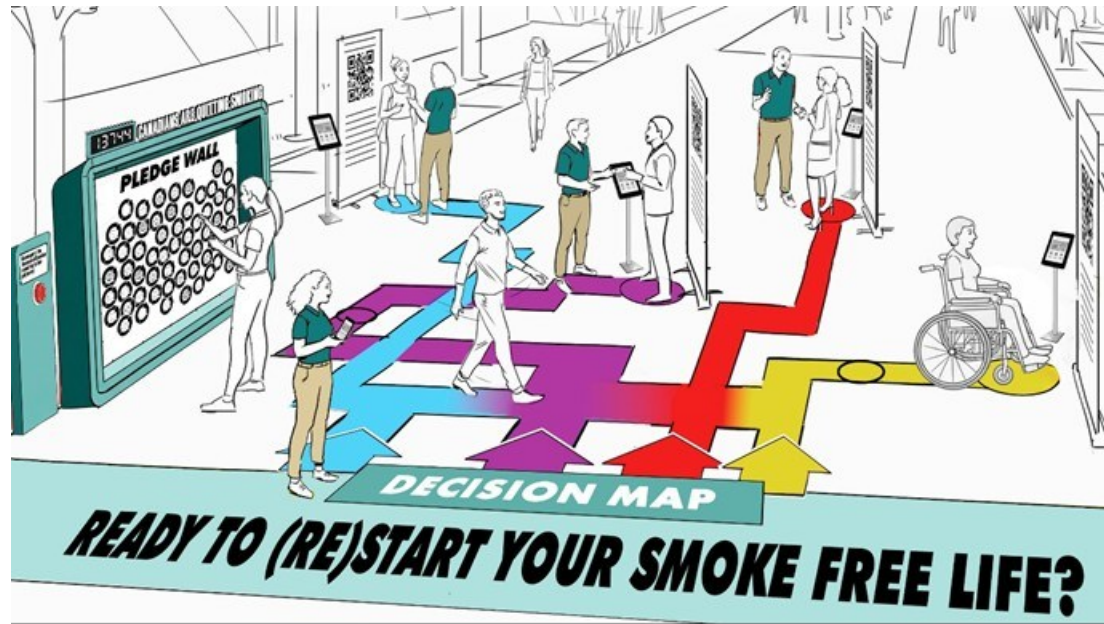
Now, let's move onto the first concept.

[MODERATOR TO ALTERNATE CONCEPT PRESENTATION ACROSS SESSIONS]

General Reactions to Concept “PATH”: Ready to (Re)Start Your Smoke-Free Life? (20 minutes)

This concept, titled “Ready to (Re)Start Your Smoke-Free Life?”, could look a bit like this:

[MODERATOR TO SHARE IMAGE ON SCREEN]



Upon entering the exhibit, guests will be invited to choose their own starting point from the decision map and follow one of several pathways leading to four distinct Motivation Zones. Paths could be:

1. Not currently trying to quit
2. I'm thinking about it
3. I'm ready now
4. Continue supporting someone else in quitting

Each pathway leads to a dedicated Motivation Zone, that would feature targeted resources and inspiration based on the path chosen.

Raise your hand if you would be motivated to stop and explore this exhibit? Why or why not?

What is your **overall impression** of this exhibit concept?

- What do you like or dislike about it?
- What are your thoughts about the exhibit's title: *Ready to (Re)Start Your Smoke-Free Life?*
 - Does it grab your attention?
 - Do you have any suggestions for improvement?

Decision Map and Pathways

- What do you think about the use of a decision map?
- If we removed the decision map, would you still be interested in visiting the exhibit?
- Is there a pathway you feel is missing or would better reflect your situation?

Motivation Zones

- The Motivation Zone is meant to have information resources and activities tailored to your mindset or stage of quitting. What are examples of information resources and activities that would be helpful for you based on the path you've chosen?

EXPLORE:

- What you can gain from quitting smoking
- Mindfulness and stress management techniques
- Building a personalized quit plan
- Support needed to help you quit
- Information on the Quit Line that offers free and confidential support

Now, we're going to look at another exhibit concept.

General Reactions to Concept “TOOL”: Do you have the Tools to Quit? (20 minutes)

This concept, titled “Do you have the tools to quit?”, could look a bit like this:

[MODERATOR TO SHARE IMAGE ON SCREEN]



This experience will have the visual appearance of a pop- up hardware store, complete with walls that look like pegboards, but instead of hardware tools on display, you would see informational "tools", which are information resources, to help you on the path towards quitting smoking.

Guests can browse through the experience and select resources that fit their quit journey and build their own quit plan. Some potential resources may include:

- What you can gain from quitting smoking
- Mindfulness and stress management techniques
- Building a personalized quit plan
- Support needed to help you quit
- Information on the Quit Line that offers free and confidential support

Raise your hand if you would be motivated to stop and explore this exhibit? Why or why not?

- What is your overall impression of this exhibit concept?
- What do you like or dislike about it?
- What are your thoughts about the exhibit title: *Do you have the TOOLS to Quit?*
 - Does it grab your attention?
 - Do you have any suggestions for improvement?

Visual Design and Theme

- How do you feel about the exhibit looking like a hardware store and the walls looking like pegboards?

Tool Kit Building

- How do you feel about being able to build a “toolkit” of quit smoking resources and supports as you explore different parts of the exhibit?
 - Tell me more about the kinds of “tools” or information resources you would like to include in your toolkit.
 - Would you prefer to collect these tools physically, like a card or handout, or would you rather receive them digitally, like on your phone? Which option would be more useful to you?

Preferred Concept (8 minutes)

- Which of the two concepts is more likely to motivate you to stop and explore – PATH or TOOL? **SHOW OF HANDS**
 - Help me understand your preference.
- If you vape, would you stop at either of the booths and ask questions about quitting vaping?

A Deep Dive into Building the Exhibit (60 minutes)

What I would like to do now is explore specific components of these exhibits. In addition to obtaining information, these exhibits might have interactive experiences.

Engagement (10 minutes)

- **What types of interactive experiences would keep you engaged in the exhibit?**
 - **IF NEEDED, PROBE WITH:** examples include quizzes, games, videos, checklists, passports, or unlocking rewards as you move through different zones.
- **Is there anything else that would make it more engaging for you?**
- The exhibit might offer a small incentive or reward for completing certain tasks or for visiting different zones/booths. Examples include: **[SHOW ON SCREEN]**
 - Sticker with a message
 - Small branded item (e.g. stress ball, pocket calendar to count quit days)
 - Nicotine replacement therapy (NRT) sample (like gum or the patch)
 - Digital certificate emailed to you to reinforce your commitment to making a plan to quit
- Would any of these rewards feel meaningful to you? What impact, if any, would they have in terms of helping you quit? How effective could they be as a reminder of your commitment to quit?

Ambassadors (5 minutes)

These exhibits will have staff on hand to guide participants through the event and answer questions.

- Are there qualities or experience that you think the staff should have? E.g., someone with lived experience, a health professional, a student in health care, someone from a smoking cessation quit line or organization. Please explain.

Pledge Wall (10 minutes)

SHARE TEXT BOX ON SCREEN:

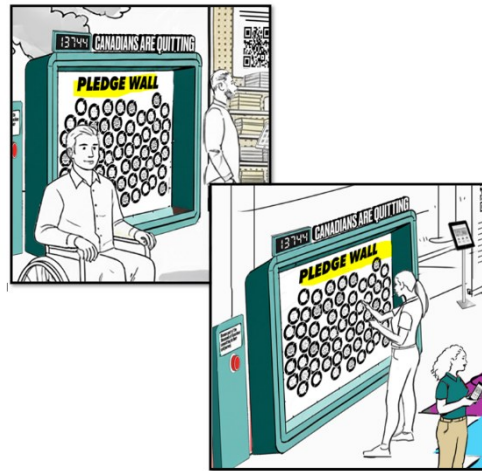
One idea being considered is a pledge wall at the end of the exhibit.

Guests can personalize a pledge or commitment to quitting smoking or being smoke-free or share an inspirational message to support others.

A large button will invite action: “Become part of the thousands of Canadians committing to a smoke-free life.”

Participants could share minimal personal information, like:

- First name
- Reason for quitting
- A short motivational message



- How do you feel about having a pledge wall in this type of exhibit?
 - Would you participate in the pledge wall?
 - Would it motivate you to read comments from others?
 - Would you find it motivating to quit smoking if you added your own pledge or message to the wall?
- How would you feel if the pledge wall was also available on a Government of Canada hosted webpage, where users can submit pledges and see others' commitments? Would this impact your decision to contribute to the pledge wall?
- What about posting your pledge on social media and seeing it appear on a display?
- How do you feel about the call to action **[SHARE ON SCREEN]**: “Become part of the thousands of Canadians committing to a smoke-free life”? Would it motivate you to quit smoking if you knew you were part of a larger group of people who are also trying to quit?

Digital Counter (10 minutes)

MODERATOR TO SHOW VISUAL OF DIGITAL COUNTER: Another idea being considered is a large digital counter that would display an estimate of how many Canadians have taken steps to quit smoking.



- The counter would show how many people in Canada have attempted to quit smoking this year. When the exhibit launches, the number would start with the latest national estimate of how many people have quit that year and would go up every time someone makes a pledge. It would have messaging like “Join the [X] Canadians who are trying to quit.”
- What are your first reactions to this digital counter? Would it grab your attention?
- Does knowing many other Canadians are trying to quit make you feel more supported or motivated to quit? Why or why not?
- Do you think the counter should be included in the exhibit?

Location Preferences (10 minutes)

- Let’s talk a little about where you might come across an exhibit like this – complete the following sentence for me using some possible locations that the exhibit team is considering: **VARIOUS TYPES OF LOCATIONS WOULD BE PRESENTED ON THE SCREEN**

“If I came across an exhibit like this at _____, I would probably check it out!”

- Shopping malls
- Trade shows
- Outdoor events (festivals, fairs or street fairs)

- Sporting events (e.g. onsite, in arena, etc.)

[MODERATOR NOTE: this refers to lower-tier or junior sports leagues (for example: leagues below the major professional level, such as junior or developmental leagues)

- Airport or train terminals (domestic departure terminals while you are waiting for your flight or train)
- Are there any other types of events or places that come to mind?

Focus on Taglines (15 minutes)

Let's imagine the events are part of a broader public education campaign with a tagline. The tagline would be seen throughout the exhibit, on materials you pick up, online and possibly in ads.

Let's start with taglines for: **[MODERATOR TO SHARE TAG LINES ON SCREEN ALONG WITH THE VISUAL OF THE CONCEPT – PRESENTATION OF TAGLINES WILL FOLLOW THE SAME CONCEPT SEQUENCE THAT WAS USED EARLIER]**

PATH: "Ready to (Re)Start Your Smoke-Free Life?"

1. Step into your healthier tomorrow. Your smoke-free path starts here.
 2. Restart your smoke-free life today. Every step is a win.
 3. Quit smoking your way. Choose the path that works for you.
 4. Restart your smoke-free life now. One step, one choice, one win at a time.
 5. There's no wrong way to start. Choose the path that's right for you.
- Which, for you, are the two most motivating tag lines – enter the numbers in the chat? Why these ones?
 - Are there any taglines you don't like or don't find clear? Which ones?

TOOLS: “Do you have the tools to quit?”

1. Tools for today. Confidence for tomorrow. Build your quit plan today.
 2. Build your quit plan and pick the tools that work for you.
 3. Every attempt builds strength. Build your quit toolkit today.
 4. Get the tools. Build your quit smoking plan. Take charge and you can make it happen.
 5. Quitting smoking isn't one-size-fits-all. Build the toolkit that fits your life.
- Which, for you, are the two most motivating tag lines – enter the numbers in the chat? Why these ones?
 - Are there any taglines you don't like or don't find clear? Which ones?

Wrap-up (2 minutes)

Do you have any additional feedback or recommendations related to the exhibit concepts?

Thanks again! The team that invited you to participate in this session will contact you regarding the manner in which you can receive the incentive we promised you.

ON BEHALF OF THE GOVERNMENT OF CANADA, THANK YOU FOR YOUR PARTICIPATION

Appendix C: Moderation guide for supporters

Introduction to procedures (10 minutes)

Thank you all for joining this online focus group!

- Introduce moderator/firm and welcome participants to the focus group.
 - Thanks for attending.
 - My name is [INSERT MODERATOR NAME] and I work with Quorus Consulting, and we are conducting research on behalf of the Government of Canada.
 - Today we will focus on getting your feedback on a few in-person exhibit concepts, being considered to support individuals in their efforts to quit smoking. When we invited you to this session, you informed us that you want to support someone you care about in quitting smoking cigarettes.
Please keep that in mind as you share your feedback with us today.
 - The discussion will last approximately 2 hours.
 - If you have a cell phone or other electronic device, please turn it off.
- Describe focus group.
 - A discussion group is a “round table” discussion, meaning we will discuss something and everyone has an equal chance to express an opinion. We will also be asking you to answer survey questions from time to time to help guide the discussion.
 - My job is to facilitate the discussion, keeping us on topic and on time.
 - Your job is to offer your opinions on the topics I’ll be presenting to you tonight/today.
 - Your honest opinion is valued. There are no right or wrong answers. This is not a knowledge test.
 - Everyone’s opinion is important and should be respected.
 - We want you to speak up even if you feel your opinion might be different from others. Your opinion may reflect that of other people.

- To participate in this session, please make sure your webcam and your microphone are on and that you can hear me clearly. If you are not speaking, I would encourage you to mute your line to keep background noise to a minimum...just remember to remove yourself from mute when you want to speak!
- We might use the chat function. **[MODERATOR EXPLAINS HOW TO ACCESS THE ZOOM CHAT FEATURE DEPENDING ON THE DEVICE THE PARTICIPANT IS USING]**. Let's do a quick test right now - please open the chat window and send the group a short message (e.g., Hello everyone). If you have an answer to a question and I don't get to ask you specifically, please type your response in there. We will be reviewing all chat comments at the completion of this project.
- Explanations.
 - Please note that anything you say during these groups will be held in the strictest confidence. We do not attribute comments to specific people. Our report summarizes the findings from the groups but does not mention anyone by name.
 - The final report for this session, and others, can be accessed through the Library of Parliament and Library and Archives Canada's website.
 - Your responses will in no way affect your dealings with the Government of Canada.
 - The session is being audio-video recorded for report writing purposes / verify feedback. These recordings are stored for up to 6 months and then destroyed.
 - Some of my colleagues from the Government of Canada who are involved in this project are watching this session and this is only so they can hear the comments first-hand.
- Please note that I am not an employee of the Government of Canada and may not be able to answer questions about what we will be discussing. If questions do come up over the course of the group, we will try to get answers for you before we wrap up the session.

Any questions?

INTRODUCTIONS: Let's go around – please tell us your name and a little bit about yourself such as where you live and what you like to do in your spare time.

- If you're comfortable sharing, who in your life are you trying to support in quitting smoking?

Concept Overview (2 minutes)

CONTEXT: Here is a bit of information about the exhibit concepts I was talking about a few moments ago.

The Government of Canada continues to work towards helping Canadians quit smoking cigarettes. In 2026, they plan to roll out an exhibit that individuals can experience in person at busy or high traffic events and public spaces.

Think of these exhibits as displays or stations that are meant to provide different information resources to support someone who might be interested in quitting smoking or those who might want to support someone to quit smoking.

I have two exhibit concepts for you today – for each one, I'll share a general drawing of what the exhibit could look like. Keep in mind these are just concepts so don't focus too much on the small details – the drawings are meant to help you get an overall sense of what the exhibit could look like.

We'll have a brief discussion about each concept and then I'll ask you which one you prefer. We'll then spend some time discussing specific aspects of this type of exhibit.

Now, let's move onto the first concept.

[MODERATOR TO ALTERNATE CONCEPT PRESENTATION ACROSS SESSIONS]

General Reactions to Concept “PATH”: Ready to (Re)Start Your Smoke-Free Life? (25 minutes)

This concept, titled “Ready to (Re)Start Your Smoke-Free Life?”, could look a bit like this:

[MODERATOR TO SHARE IMAGE ON SCREEN]



Upon entering the exhibit, guests will be invited to choose their own starting point from the decision map and follow one of several pathways leading to four distinct Motivation Zones. Paths could be:

1. Not currently trying to quit
2. I’m thinking about it
3. I’m ready now
4. Continue supporting someone else in quitting

You would be directed to follow the path for “Continue supporting someone else in quitting”.

Each pathway leads to a dedicated Motivation Zone, that would feature targeted resources and inspiration based on the path chosen.

Raise your hand if you would be motivated to stop and explore this exhibit? Why or why not?

- What is your **overall impression** of this exhibit concept?
- What do you like or dislike about it?
- What else could be added to make you stop and explore an exhibit space like this?
- Is there anything we could add to make it clearer that the exhibit includes information and resources specifically for people supporting someone who is trying to quit?
- What are your thoughts about the exhibit's title: *Ready to (Re)Start Your Smoke-Free Life*?
 - Does it grab your attention?
 - Do you have any suggestions for improvement?

Decision Map and Pathways

- What do you think about the use of a decision map?
- If we removed the decision map, would you still be interested in visiting the exhibit?
- From what you know about the people in your life who smoke, is there a pathway you feel is missing that reflects their situation? Here's a reminder of the paths:
 1. Not currently trying to quit
 2. I'm thinking about it
 3. I'm ready now
 4. Continue supporting someone else in quitting

Now, we're going to look at another exhibit concept.

General Reactions to Concept “TOOL”: Do you have the Tools to Quit? (25 minutes)

This concept, titled “Do you have the tools to quit?”, could look a bit like this:

[MODERATOR TO SHARE IMAGE ON SCREEN]



This experience will have the visual appearance of a pop-up hardware store, complete with walls that look like pegboards, but instead of hardware tools on display, you would see informational "tools", which are information resources. The overall experience can help people on the path to quitting and there will also be information available for people like you who want to support someone in quitting.

Guests can browse the space, explore different resources, and select the ones they believe would be most helpful. From there, they can build a personalized quit-support plan. Some potential resources may include:

- What you can gain from quitting smoking
- Mindfulness and stress management techniques
- Building a personalized quit plan
- Support needed to help you quit
- Information on the Quit Line that offers free and confidential support

Raise your hand if you would be motivated to stop and explore this exhibit. Why or why not?

- What is your overall impression of this exhibit concept?
- What do you like or dislike about it?
- Is there anything we could add to make it clearer that the exhibit includes information and resources specifically for people supporting someone who is trying to quit?
- What are your thoughts about the exhibit title: *Do you have the TOOLS to Quit?*
 - Does it grab your attention?
 - Does it fit with the overall exhibit concept?
 - Do you have any suggestions for improvement?

Visual Design and Theme

- How do you feel about the exhibit looking like a hardware store and the walls looking like pegboards?

Tool Kit Building

- As a supporter, what information in this toolkit would be most important for you to bring back to the person in your life who is trying to quit smoking?
- Would you prefer to collect these tools physically, like a card or handout, or would you rather receive them digitally, like on your phone? Which option would be more useful to you?

Preferred Concept (8 minutes)

- Which of the two concepts is more likely to motivate you to stop and explore – PATH or TOOL? **SHOW OF HANDS**
 - Help me understand your preference.
- If the person you are supporting vapes, would you stop at either of the booths and ask questions about quitting vaping?

A Deep Dive into Building the Exhibit (45 minutes)

What I would like to do now is explore specific components of these exhibits. In addition to obtaining information, these exhibits might have interactive experiences.

Engagement (15 minutes)

- **What types of interactive experiences would keep you engaged in the exhibit?**
 - **IF NEEDED, PROBE WITH:** examples include quizzes, games, videos, checklists, passports, or unlocking rewards as you move through different zones.
- **Is there anything else that would make it more engaging for you?**
- The exhibit might offer a small incentive or reward for completing certain tasks or for visiting different zones/booths. Examples include: **[SHOW ON SCREEN]** Examples include:
 - Sticker with a message
 - Small branded item (e.g. stress ball, pocket calendar to count quit days)
 - Nicotine replacement therapy (NRT) sample (like gum or the patch)
- Would any of these rewards feel meaningful to you? What impact, if any, would they have in terms of helping the person you want to support in quitting? How effective could they be as a reminder?

Ambassadors (15 minutes)

These exhibits will have staff on hand to guide participants through the event and answer questions.

- Are there qualities or experience that you think the staff should have to make you feel comfortable speaking about this topic? E.g., someone with lived experience, a health professional, a student in health care, someone from a smoking cessation quit line or organization. Please explain.

Location Preferences (15 minutes)

- Let's talk a little about where you might come across an exhibit like this – complete the following sentence for me using some possible locations that the exhibit team is considering: **VARIOUS TYPES OF LOCATIONS WOULD BE PRESENTED ON THE SCREEN**

“If I came across an exhibit like this at _____, I would probably check it out!”

- Shopping malls
- Trade shows
- Outdoor events (festivals, fairs or street fairs)
- Sporting events (e.g. onsite, in arena, etc.)

[MODERATOR NOTE: this refers to lower-tier or junior sports leagues (for example: leagues below the major professional level, such as junior or developmental leagues)

- Airport or train terminals (domestic departure terminals while you are waiting for your flight or train)
- Are there any other types of events or places that come to mind?

Wrap-up (5 minutes)

Thinking about your role as a supporter, what have you noticed when helping someone try to quit smoking, and what challenges have come up for you?

Do you have any additional feedback or recommendations related to the exhibit concepts?

Thanks again! The team that invited you to participate in this session will contact you regarding the manner in which you can receive the incentive we promised you.

ON BEHALF OF THE GOVERNMENT OF CANADA, THANK YOU FOR YOUR PARTICIPATION