



**Mautner Project**  
*The National Lesbian Health Organization*



# **LGBTQ Tobacco Use Research**

## **2009 Anti-Smoking Campaign Messaging**

# REPORT

Prepared By:

 **WITECK • COMBS**  
COMMUNICATIONS

## Acknowledgements

Data for this report was collected by Witeck-Combs Communications. The analysis of the findings and writing of this report were primarily prepared by Colleen Dermody, Vice President of Witeck-Combs Communications with contributions from D Magrini, Health Education Coordinator of the Mautner Project, Sara Jaye Sanford, Program Associate for the Mautner Project, Lindsay Burack, Communications Associate for Witeck-Combs Communications and Fred Lameck, Marketing and Media Services Coordinator for Witeck-Combs Communications.

In addition, this Report would not have been possible without the help and support of the DC Tobacco Free Families Campaign (DCTFF) and the wise counsel of Debra Annand, DCTFF Campaign Project Director.

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*Witeck-Combs Communications, Inc.* is the nation's premier market research communications and consulting firm, specializing in developing and implementing effective strategies reaching the gay and lesbian consumer market. With 15 years experience in this unique market, Witeck-Combs Communications not only serves as a bridge between corporate America and lesbian, gay, bisexual and transgender consumers (LGBT), but also provides counsel to non-profit organizations that aim to educate the public on gay and lesbian issues or to better reach their LGBT membership.

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## Background

Over the past decade a range of research has identified that niche marketing by tobacco companies that targets the lesbian, gay, bisexual, transgender and queer (LGBTQ) community is a major factor in the disproportionate rates of smoking among members of the LGBTQ community compared to their heterosexual counterparts. Much of the research also found that lesbian, gay, bisexual, and transgender people smoke at higher rates than the overall general population. According to the National LGBT Tobacco Control Network, LGBT people are 50 – 200% more likely to smoke than people within the general population.

Among LGBTQ people in the District of Columbia there is a gap in specific research, however, data that does exist overwhelmingly indicates that LGBT people have some of the highest smoking rates of all disproportionately affected populations in D.C.

Numerous medical studies have demonstrated a link between smoking and multiple diseases, including lung cancer and cardiovascular diseases which makes smoking one of the largest health-risk factors for the District of Columbia's LGBTQ population. Because of the health risks related to tobacco use in the LGBTQ community, the Mautner Project would like to develop salient and effective anti-tobacco messaging directed specifically at LGBTQ people in D.C. using qualitative research from the D.C. LGBTQ populations. The ultimate objective is to develop effective and compelling anti-smoking and anti-tobacco messaging geared to LGBTQ people for the Mautner Project's 2009 health-education program outreach and advertising.

Past national polling of LGBT people has shown that that 34% of gays are still smoking cigarettes despite 2001 survey results which showed 98% of LGBT smokers and tobacco chewers understand that smoking increases their risk of lung cancer and heart disease. And of those who smoked cigarettes, 47% smoked more than one pack a day<sup>1</sup>.

Past polling also underscores the fact that overall, 89% of the LGBT adults said they had not seen anti-smoking education or awareness campaigns targeted to them.

The Mautner Project recognizes the critical need for anti-smoking awareness and education campaigns developed by and targeted to the LGBT community. These education campaigns should be conducted using culturally competent messaging that is uniquely linked to the LGBTQ community.

Specific education messaging to LGBTQ tobacco users may help reverse the compelling effects of the niche marketing by tobacco companies. To improve the overall efficacy of cessation treatments and to reduce the prevalence of smoking among the LGBTQ population, innovative strategies must be developed that increase the motivations to quit as well as increasing the use of cessation treatments. Until as much effort is put into LGBT smoking cessation as the tobacco companies devote to hooking people to nicotine, LGBTQ adults will continue to needlessly die from tobacco-related diseases.

## OBJECTIVES

The Mautner LGBTQ Tobacco Use Focus Groups and Online Survey, conducted on behalf of the Mautner Project: The National Lesbian Health Organization by Witeck-Combs Communications, are intended to provide the organization's Executive Director and its staff with insights to better understand issues related to smoking among the DC LGBTQ community and which messages about quitting are most salient. Those insights include:

- **Discovery of behavioral patterns of smoking among LGBTQ people** – experience with smoking, environments where they are most likely to smoke, and history of quitting attempts.
- **Discovery of some of the barriers to quitting and “incentives” to continue smoking** – what prevents them from quitting, what are main concerns about quitting (e.g., weight gain), image and attitudes related to smoking?
- **Discovery of some of the motivating factors for quitting** – examples of effective ways to quit, “poster” LGBTQ models for quitting, strongest motivating factors to quit and to remain a non-smoker (e.g., personal or family history of illness, “being there” for your family and close ones, etc.).
- **Discovery of some of the salient messengers and channels for an education campaign targeted to LGBTQ smokers** – who would be the right “spokesperson” or messenger for anti-tobacco messages? Which media channels would be most effective? What anti-smoking messages or “themes” are most salient to the LGBTQ audience?

The data and analysis from the two Focus Groups and the Online Survey research conducted for this study will be used to create new anti-smoking advertising for the Washington, DC LGBTQ community. Utilizing the new messaging the Mautner Project will run LGBTQ targeted smoking cessation street-outreach and education programs and will link LGBTQ smokers to the Washington, DC Quitline from which nicotine replacement aids are available.

Mautner Project will also use the newly developed anti-tobacco messaging in public service advertisements that will be placed in LGBTQ community publications such as the Washington Blade, Metro Weekly, and in “alternative” mainstream publications such as the Washington City Paper. These advertisements along with ‘earned media’ will use the messages garnered from the Focus Group and survey research to educate and help move people into the DC Tobacco Free Families Quitline and cessation support groups offered through local community organizations.



## METHODOLOGY

In order to obtain opinion research on anti-smoking messages, themes and images, the Mautner Project and its research partner, Witeck-Combs Communications conducted two in-person Focus Groups consisting of generationally, racially and ethnically diverse LGBTQ Washington D.C. residents as well as an Online Survey also consisting of generationally, racially and ethnically diverse LGBTQ D.C. residents.

One Focus Group of eight women (all over 18 years of age) was conducted on Tuesday March 31, 2009 and one Focus Group of six men (all over 18) was conducted Wednesday April 1, 2009. Both groups were a mix of current smokers (with and without intentions to quit) and non-smokers who had quit within last five years.

The Focus Groups delved into a variety of messages, messaging themes, messaging media channels, and printed advertisements. The advertisements tested included several that the Mautner Project had used in the past year as well as several LGBTQ anti-smoking advertisements currently and recently used in other cities geared to LGBTQ populations. In addition, two advertisements were created and used specifically for the Mautner Focus Groups.

The Online Survey opened on Monday February 16<sup>th</sup> and closed on Thursday April 2<sup>nd</sup>, 2009. Overall, the online survey includes 136 self-identified smokers with 82 self-identifying as lesbians, 25 self-identifying as gay men, 10 self-identifying as bisexual and 9 self-identifying as transgender adults age 18 or older. The online sample included:

- 62 cigarette smokers;
- 6 cigar/little cigar or Black & Milds smokers;
- 2 pipe smokers;
- 3 Hookah smokers;
- 42 smokers who smoked to relieve stress;
- 24 social smokers;
- 13 smokers who smoked only when they drank;
- 87.8% of the online survey respondents said they had attempted quitting;
- 62.8% of the online survey respondents said that they had stopped smoking for one day or longer because they were trying to quit; and
- Less than half of respondents (45.9%) of the online respondents said they had seen or heard anti-smoking message that they thought may be aimed at people who were LGBTQ.

## EXECUTIVE SUMMARY

According to the *Guiding Principles for Lesbian, Gay, Bisexual, and Transgender Inclusion in Healthcare Reform* of the National Coalition for LGBT Health, “LGBT health disparities must be addressed across multiple communities rather than in isolation. Many members of the LGBT community are members of other communities that also face substantial health disparities and are thus vulnerable to cumulative negative outcomes.” The Guiding Principles also state that, “Historically, health data collection efforts have not included the LGBT populations or gathered information regarding the specific healthcare needs of LGBT people.”

In order to specifically obtain an understanding of District of Columbia LGBTQ smoking habits and opinions on anti-smoking messaging, The Mautner Project commissioned a set of two Focus Groups and an Online Survey to address and illuminate disparities similar to those noted in the National Coalition for LGBT Health’s *Guiding Principles*.

The following report provides a snapshot of the smoking and quitting behaviors, pressure sources, past and current quit attempts, barriers to quitting and factors that could motivate quitting by LGBTQ community members who participated in the Focus Groups and Online Survey including members of the community who may not traditionally have been included in other formal research.

### Key Insights in this Report include:

- A majority of respondents in both the Focus Groups and the Online Survey had never seen or heard anti-smoking messaging that was aimed at LGBTQ people.
- A large majority of respondents in both the Focus Groups and the Online Survey (87.8%) had attempted to quit in the past.
- Current tobacco (primarily cigarette) advertising is reaching the LGBTQ audience via magazine coupon inserts and at point of purchase locations such as liquor stores.
- Though nearly all of the anti-smoking print advertisements for the LGBTQ community presented at the Focus Groups and in the Online Survey were recognized as anti-smoking ads, the content or imagery of the ads would not influence a majority of the respondents to quit smoking.
- Most participants in the Focus Groups said they would respond better to non-celebrity messengers for anti-smoking advertising that might motivate them to consider quitting.
- A majority of respondents in the Online Survey when asked to choose the reason they currently smoke or why they smoked in the past answered that they smoke to relieve stress (60.9%).
- Respondents were interested in the provision of free aids such as “the patch,” gum, smoking cessation groups and coupons with discounts on “quit smoking” aids to help them quit smoking.

- Online respondents and Focus Group participants often mentioned bar bathrooms, bus and Metro placards, and LGBTQ publications such as the Washington Blade and Metro Weekly as good media channels through which to advertise anti-smoking messages to the LGBTQ community.
- A number of respondents to the Online Survey and in the Focus Groups mentioned concern about their how their smoking might affect the health of their pets.



## **Detailed Findings – Tobacco Use Focus Group Women**

*Participant Demographics*  
*Smoking Behaviors*  
*Quitting Behaviors – Pressures to Quit, Past/Current Quit Attempts*  
*Factors that Could Motivate Quitting*  
*LGBTQ Anti-Smoking Messages - Past*  
*LGBTQ Anti-Smoking Messengers*  
*LGBTQ Anti-Smoking Messaging Channels*  
*LGBTQ Anti-Smoking Advertising Messages*  
*Potential LGBTQ Anti-Smoking Themes*

### ***Participant Demographics***

The Focus Group conducted on Tuesday March 31, 2009 had a registered total of 10 participants with seven participants actually attending. Six of the participants self identified as female and lesbian and one participant self identified as transgender (MTF) and straight. Five participants identified as African American and one as white. One identified dually as African American and Latina.

Six participants were current cigarette smokers and two were past smokers. Six of the participants began smoking before 20 years of age and one had begun smoking at age 26. None of the participants chewed tobacco. In the Women's Focus Group two of the participants lived in Ward 1 and two lived in Ward 4 while one lived in Ward 2, one lived in Ward 5 and one lived in Ward 7.

### ***Smoking Behaviors***

Most participants in the women's group stated that they started smoking because it seemed "cool" and it also went along with drinking. After their initial introduction to smoking at a relatively young age it became a habit that they could not kick. At least one participant said she "loved" to smoke – "a cup of coffee and a cigarette in the morning. That makes my day."

### ***Quitting Behaviors – Pressure to Quit, Past/Current Quit Attempts***

Many of the women participants mentioned combined pressures to quit coming from their children, doctors and friends. One woman stated she did not feel any pressure because it is just her and her partner and they smoke together so there is no pressure to quit.

Two women felt pressure at their jobs - from their colleagues and their employers since they are relegated to smoking on the outside of the buildings. One participant felt pressure at work because she works for the health department and another had, herself, conducted research on how tobacco smoking links to breast cancer.

Another participant cited self-pressure because she will soon start medical school along with several friends and they tell her she needs to set a good example.

### ***Factors that Could Motivate Quitting***

One participant mentioned her dog and how she felt awful hearing her dog wheeze at night. This participant had often thought about quitting to protect the health of her dog. She does not smoke inside her home because her dog is small and she fears her dog's lung capacity cannot handle the second-hand smoke generated by her cigarette smoking.

Another woman spoke of how she knows "cigarettes are a substitute" for something else in her life. When she is stressed, she sits down to gorge on food. But sometimes she substitutes smoking for eating in an attempt to help control her weight - which is not working.

Several women discussed the smell of smoking and cigarettes and how it makes them and others who smoke "stink." Related to smoking odor one participant stated, "no one wants to come into the house 'cause it smells."

*Some notable quitting factors mentioned by participants, in their own words, include:*

"I do feel pressure to quit. I do a lot from my kids. For me, I have asthma. But I've been smoking for 20 something years (laughter). When I get stressed out or too bored, too happy, various reasons [I smoke]. I have kids ranging in age from 10 to 25. And um, they also have breathing disorders. And I have a daughter who is a strong willed person always asking me when I'm going to stop smoking and drinking."

"My doctor pressures me... once or twice a week I go to him. [I have] high blood pressure, diabetes, a whole bunch of other stuff. My liver is going bad. When I tell them my brother died at 34 of lung cancer (nervous laughter)... I feel pressure from my community that I live in. Nobody smokes. No one wants to come into [my] house 'cause it smells. So I feel pressure from myself too."

"About three years ago, they had this survey thing out at Maryland University. You had to taste some gum. You chew the gum for awhile, then light a cigarette, but don't smoke it, just light it. The gum had so much nicotine so you felt like you had smoked like three cigarettes. So when that gum comes out, that would be a great thing for people to try. Because when the cigarette came out, I didn't even want it because I felt content, like I had smoked two or three cigarettes."

### ***LGBTQ Anti-Smoking Messages - Past***

None of the participants in the March 31 Focus Group remembered ever seeing anti-smoking advertising directed at the LGBTQ community.

Several of the women had seen ads focused on people who have not yet started smoking. They felt that they have seen those types of ads more than they see ones directed at people who are already smokers. Several had also seen the "Truth" ads. "Some of those Truth Ads are a little bit intense. That big rat! Some of those [ads] are just really annoying...."

### ***LGBTQ Anti-Smoking Messengers***

Regarding LGBTQ anti-smoking messengers the consensus among participants was that messengers should be “someone you can identify with.” Participants posited a preference for “someone local, someone we can recognize in the community.”

When the discussion moved to President Obama and the fact that he smokes some said they thought people would like it if President Obama shared the process of quitting smoking with the public. The discussion then circled back to being able to identify with the person who was the bearing the message to stop smoking. One participant added that an ad with President Obama would be “cool,” but they would not really identify.

A consensus also developed for an ad with a woman who says she is scared of gaining weight, but she gains hypertension, diabetes, obesity etc. while smoking cigarettes. Participants were in favor of advertising “that is real” and something they can relate to.

### ***LGBTQ Anti-Smoking Messaging Channels***

For the advertising mediums, the women did not feel TV or email would work for them or for their peers. Several in the group stated “you get bombarded with so much email; you’re just not going to read it.”

Nearly all participants stated that buses and bus kiosks were great places for advertising because “you either ride the bus or you drive or walk past it...everyone sees advertising on the bus.”

Next the women talked about the smell of smoking and cigarettes and creating a “YOU STINK” ad. They also discussed how the cost of cigarettes has gone up and advertising that focuses on costs would be effective. Someone suggests rolling up dollar bills like a cigarette and smoking them for an ad.

## LGBTQ Anti-Smoking Advertising Messages

### First Ad:

The words work on this image (*Be a Strong, Sexy Nonsmoker*) but the image does not. The cherry red lips are “just not realistic.”



**Kiss that butt goodbye...**

**Be a strong, sexy nonsmoker.**

**WARNING: SMOKING IS EVEN WORSE THAN YOU THOUGHT.**

- Smoking a pack a day adds up to \$1,715.50 a year!
- More women die of lung cancer than breast cancer.
- Second-hand smoke affects your friends, your children, and your pets!
- Tobacco kills 25 times more people as AIDS every year.

**TIPS TO QUIT:**

- **Pick a Quit Date**, and stick to it!
- **Get support:** Call 1-800-QUIT-NOW, join an LGBT-friendly support program, or ask friends or family members to help by reminding you why you decided to quit.
- **If you slip, don't worry!** Use it as a learning experience, and try again.

**Next Group:**

**YOU CAN QUIT. WE CAN HELP.**

**Mautner Project**  
The National Lesbian Health Organization  
202-332-5536/mautnerproject.org/info@mautnerproject.org

**Be Tobacco Free Families**  
DOH

This program is funded in whole or in part by the government of the District of Columbia.

### Second Ad:

This ad was received with little enthusiasm. One woman liked the strong wording of “Cigarettes are my greatest enemy.” Another woman did not feel that cigarettes were her “greatest enemy” though she was comfortable that cigarettes are one of her enemies. Other participants said the top part of this ad... “...just ain’t working.”



I didn't survive rape  
so I could die from lung cancer.  
I had to stop smoking.  
— DANIELLE

**CIGARETTES ARE MY GREATEST ENEMY**  
TOBACCO CAUSES MORE DEATHS THAN AIDS, DRUGS, BREAST CANCER AND GAY BASHING COMBINED

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**enter**  
www.enter.org

**enter**  
www.enter.org

### **Third Ad:**

Some of the respondents liked this ad. The facts were compelling and shocking. A few spoke out against the question on the ad “why do we support them,” saying “we don’t choose to support the tobacco companies we’re just supporting our own smoking habit.”



### **Fourth Ad:** *(This ad was specifically created for this Focus Group testing. It has never been used publicly.)*

Most of the women liked this ad. They found it to be to the point, a good use of imagery and good wording.

One participant questioned why it was a picture of two white women, pointing out that she does not identify with that race.

Another participant mentioned that when looking at the ad from a distance, you would not even see the ashtray and thus, not realize that it's an ad against smoking. Another woman agreed with her.



### **Final Ad:**

None in the women and transgender Focus Group liked this ad. The participants agreed during the discussion that the wording would be better if it were 'When did smoking become part of *you*?' instead of 'When did smoking become part of *us*?'

Other comments about the ad were "it speaks to the younger kids who are just entering, I think they can have that perspective on it" and I understand the flag, but I think 'you' would be better."



### ***Potential LGBTQ Anti-Smoking Themes***

The Women's Focus Group discussion ended with brainstorming about potential anti-smoking themes and ads. One woman suggested having a "real person" reacting to her need to smoke, talking about how some people wake up in the morning and are "SO in need of having a cigarette." "Being controlled by the need to smoke....you know you can just wake up and be like urghhhh, I need a cigarette! It's like that monster in the morning."

The "themes" conversation then turned to the cost of cigarettes as the group started thinking about totaling up how much they spend on cigarettes. During the discussion they realized they "could take a major vacation" with that money or make a house payment. Additionally, "like if you put \$5 away everyday, I don't know, that could go toward your child's education or something like that."

They discussed and liked the idea of an anti-smoking campaign offering a cruise to five female friends who quit smoking together for a year. "Like something from Oprah."

Both themes of the benefits to your health from quitting smoking and the negative affects from smoking together in an ad would also be good. It's important to get both messages out.

They ended the discussion with the example of there being a lot of closet smokers at the gym... people think that because they exercise on a regular basis, that cancels out the negative effects of smoking. But it's important to know that the negatives of cigarettes cannot be overridden with exercise.



**Participant Evaluations: Women**

At the end of the Focus Group session an evaluation form (please see Appendix F) was given to participants who each filled it out. Please find the women's comments below in random order.

"Well organized and informative, comprehensive."

"All worked well for me – the process and pictures, ads. Some I liked."

"The balance of talking, papers, and great facilitating worked well. All worked well. There could have been more examples offered to look at and [we could have] talked about psychology behind ads."

"Interaction w/others [worked well]."

"Everything seemed to work fine. Everyone had a chance to talk + share."

"I think that open focus group worked really well."

"This was a great group."

## **Detailed Findings – Tobacco Use Focus Group**

### **Men**

*Participant Demographics*

*Smoking Behaviors*

*Quitting Behaviors – Pressure to Quit, Past/Current Quit Attempts*

*Factors that Could Motivate Quitting*

*LGBTQ Anti-Smoking Messengers*

*LGBTQ Anti-Smoking Messaging Channels*

*LGBTQ Anti-Smoking Advertising Messages*

*Potential LGBTQ Anti-Smoking Themes*

### ***Participant Demographics***

The Men's Focus Group conducted on Wednesday April 1, 2009 had a registered total of eight participants with six participants actually attending. All six participants self identified as male and gay.

Five participants were current cigarette smokers and one was a past smoker. From their recollections, two participants began smoking at age 15 or earlier and the other participant began smoking in his mid 20's. Three participants did not remember when they began smoking. Four participants were black and two were white. Three of the Men's Focus Group participants lived in Ward 5, one lived in Ward 2, one in Ward 3 and one in Ward 7.

### ***Smoking Behaviors***

The primary reason the men started smoking was to be part of the "cool crowd" at the "bar scene" or to have something "to do with my hands" while at the bar alone. After their initiation into smoking, it became something that kept them calm and a habit they did out of boredom. At least five of the six male participants today regularly buy their cigarettes at liquor stores, gas stations or local drug stores.

*Some behaviors of note – in the participant's own words:*

"I started smoking when I was 15. I smoked for about 18 years before I quit. I smoked between a pack and 2 of Marlboro a day. I used to smoke Paul Mall and Lucky Strike, not filtered."

"I've been smoking for about 40 years and I still smoke. My favorite brand is Newport. I smoke about 5 cigarettes a day. They just make me calm."

"I smoke the Black and Milds because they are much cheaper. They don't have the taxes that regular cigarettes have. I just bought a pack today and it was only like \$1.50 for a pack of 20."

"I'm a member of the Marlboro program and I have been for years. It is a special program for smokers. You call them on a special number and the first question they ask you is if you are a smoker 21 years of age or older and if you say no they will hang up on you, instantly."

If you say yes, they give you prizes. I get all sorts of prizes. They give you these coupons that come in \$5, \$4 a pop. If I use those coupons, they know...I use the code on them. And I get bigger and better prizes. And they have these contents constantly so they can renew the fact that you are a smoker and they have advertisements just for me. They send me little gifts once an awhile. I came in third one of the contests one time and won a puppet. They send me special emails now still and send me things to my house."

"Of all the guys from the 80's that I know, there are only about 3 that are still alive. So umm...we got clean and we went to Cancun, we went to Key West, Puerto Rico and [one of my friends] said, 'Why are you still smoking?' [One of them] only smoked when he was under the influence and he couldn't understand why I smoked and I was clean. Here's another analogy: some people who go to the bar, they have a drink and they have a smoke. Some don't. But [my friend] could not understand why I was having that cigarette. Because from his perspective, the only time he smoked, was when he was under the influence. It still confuses him a little bit. I think it's an interesting perspective."

### ***Quitting Behaviors – Pressure to Quit, Past/Current Quit Attempts***

One participant mentioned that he had pressure from his doctors to quit. Recently, this participant lost weight and is convinced that if he did not smoke, he would be even healthier today.

Two participants mentioned a pressure to quit is the fact that they to have to go outside in the middle of winter to smoke a cigarette.

The participant who quit smoking said he did not get pressure from other people to quit, but that he quit smoking for himself. He no longer enjoyed the taste of cigarettes and having to go outside to smoke them. He mentioned that he still has the urge to smoke, but he has thus far been able to control the urge to "light up." He said, "Everyday though, I still think about smoking and I have that urge to have one, but I still don't do it. I guess I just got tired of being put outside."

One participant brought up a recent network television show called 'The Doctors.' According to the participant a doctor compared a healthy lung to a lung from someone who had smoked for twenty years. The Focus Group participant said that the contrast between the two lungs was terrifying.

Throughout the discussion, participants also mentioned the rising cost of cigarettes and how that can be a pressure to quit, especially in this economy.

*Some comments of note include the following from participants in their own words.*

"I find there are far more many Drink Responsibly ads than there are like, Don't Smoke. In a most media, whether it's the Internet or TV, they have these huge bottles of alcohol and are like Drink Responsibly. I see that often but as far as smoking, I don't hear the 'Surgeon General says'...you know 'blah blah blah.' I don't get that."

“It’s not so much that for direct advertisements, but you see people standing outside smoking outside of their office buildings. Yeah, President Obama was interviewed and he hasn’t quit yet. It’s just this stigma now. Before, in the 40s and 50s, with the TMC movies, everyone was lighting up a cigarette. But now it’s not like that. Oh, what I wanted to say was the dangers of second hand smoke. It seems to be greatly exaggerated. I think it’s targeted towards young parents or parents with young children. It’s a scare tactic because I think it’s been inconclusive evidence that second hand smoke is all that dangerous. But it’s a really big stigma. It doesn’t have to come from the Surgeon General or doctors, it’s just there.”

“The one ad that really annoys me is the magnet that goes on the ear to quit smoking. It’s a magnet on the ear and it’s supposed to submit a signal, because it’s near a part of your head (here) that tells you to quit smoking. I think they sell it at Rite Aid, it’s like \$20. SCAM! I just keep thinking do people actually buy that thing? They keep putting the ads out there. I asked someone who tried it and it didn’t work for them. And I wasn’t surprised.”

*When prompted by the question from the Focus Group moderators “Have you seen any advertising that has encouraged you to quit smoking?” one respondent said:*

“Sure, oh yeah. Over the Internet...I’m on there all the time ‘cause I’m home and TV bores me. And a lot of the shows I want to see on TV I can watch on the Internet. But there are all kinds of advertisements for how to quit smoking. The thing is, not only on the Internet but in real life, you have to watch out for scams. You know, like weight loss products. I’d love to lose 20 more pounds, but all that stuff is just like placebos. I can fathom or I think it’s been banned that tobacco products have been banned from TV advertisements. Billboards are scarce here in DC. Where I come from originally, from Pittsburgh, we have billboards everywhere. But in DC there are very few billboards and I don’t know some people talk about the subliminal effects of advertising. But it’s not that predominant to affect me. It’s my own addiction that drives me.”

### **LGBTQ Anti-Smoking Messages**

None of the Focus Group participants had seen anti-smoking advertising specifically directed toward LGBTQ smokers.

### **LGBTQ Anti-Smoking Messengers**

The participants had some different views on LGBTQ Messengers but they all agreed that a sensory message would be strong. They discussed the awful smell of cigarettes and how the aroma could be used in advertising.

One participant said it would be effective to use a strong communicator, like a medical professional, who could show you the negative effects of smoking, such as how it affects your lungs.

Some participants mentioned using celebrities such as Angelina Jolie and Brad Pitt or Elton John as messengers. In response to using celebrities, another participant said he thought many celebrities chain smoke but they try to hide it from the press and thus, they did not think celebrities would make strong messengers.

## ***LGBTQ Anti-Smoking Messaging Channels***

For the advertising mediums, the men reported that they somewhat regularly read LGBTQ newspapers and magazines such as The Washington Blade, The Advocate and Metro Weekly. They all felt these would be good and appropriate advertising mediums.

Participants stated that other venues for anti-smoking messages geared to LGBTQ smokers that might catch their attention would be buses, above urinals in men's bathrooms at local gay bars and at liquor stores. Several participants commented that people who go to bars are more likely to smoke and advertising in the bathrooms could be successful.

One participant mentioned the idea of using an aggressive set of outreach tactics similar to what was used with the AIDS epidemic in the 1980s.

It was also suggested that part of an anti-smoking campaign include passing out coupons for nicotine patches or anti-smoking drugs since a number of the tobacco companies offer coupons for discounts on cigarettes and tobacco products. One participant said he thought this might be expensive but it would be helpful to allow smokers to try these stop-smoking methods and see if they work for them.

## ***LGBTQ Anti-Smoking Advertising Messages***

### **First Ad:**

The lips are over the top and too “draggish.” The wording on the back, about the money, is shocking and good: “If you added it up over a month, you’d probably be really shocked at what you spend. And with everyone counting their pennies with the recession...money would be a big issue.”



**Be a strong, sexy nonsmoker.**

WARNING: SMOKING IS EVEN WORSE THAN YOU THOUGHT.

- Smoking a pack a day adds up to \$1,715.50 a year!
- More women die of lung cancer than breast cancer.
- Second-hand smoke affects your friends, your children, and your pets!
- Tobacco kills 25 times more people as AIDS every year.

TIPS TO QUIT:

- **Pick a Quit Date**, and stick to it!
- **Get support:** Call 1-800-QUIT-NOW, join an LGBT-friendly support program, or ask friends or family members to help by reminding you why you decided to quit.
- **If you slip, don't worry!** Use it as a learning experience, and try again.

**Next Group:**

**YOU CAN QUIT. WE CAN HELP.**

 **Mautner Project**  
The National Lesbian Health Organization  
202-332-5536/mautnerproject.org/info@mautnerproject.org

 **D&G Tobacco Free Families**  
 **DOH**

This program is funded in whole or in part by the government of the District of Columbia.



## **Second Ad:**

The text of this ad was received with some shock by the male Focus Group participants. Two of the participants commented on how they could not believe the statistics and how the wording was very strong. One participant said he thought the ad looked “nice, with how they had put her image to the side.”

One white participant said he believed black men and women smoked more than white men and women. He liked that this ad was a black woman speaking to her people, but some other participants got upset over his racial generalizations.

“Well, what I’m saying is this whole thing is a negative against smoking and what I was saying was that the black lady is speaking to her people, more or less, her culture saying what this is saying against it. If they don’t support me, and why should I be doing this and this is wrong and so forth. I’m saying this is a positive thing that she is speaking directly to her own culture, more or less. So you asked about the black lady and I think that’s a good thing.”



**Third Ad:** *(This ad was created specifically for this Focus Group testing. It has never been used publicly.)*



The image on this ad was enthusiastically received, but some of the men found the message to be a bit demeaning.

Participants commented that while the man in the ad is incredibly attractive, they did not like the implication that “all gay guys go around blowing strangers instead of cigarettes or ‘blowing’ cigarettes.” They commented that you “smoke” cigarettes; you do not “blow” them.

One participant summarized



that sentiment by offering, "If it would say 'which' would you rather put in your mouth... you know?...This is trying to say that in a way but it doesn't have the balls to actually say it."

Another participant thought this would be a good ad to put in the bathroom at a gay bar, but not in any kind of mainstream paper.

#### **Fourth Ad:**

This ad was received with little enthusiasm. Only one participant said he liked the ad because Crystal Meth has been a big problem in the city and particularly for gay men for years.

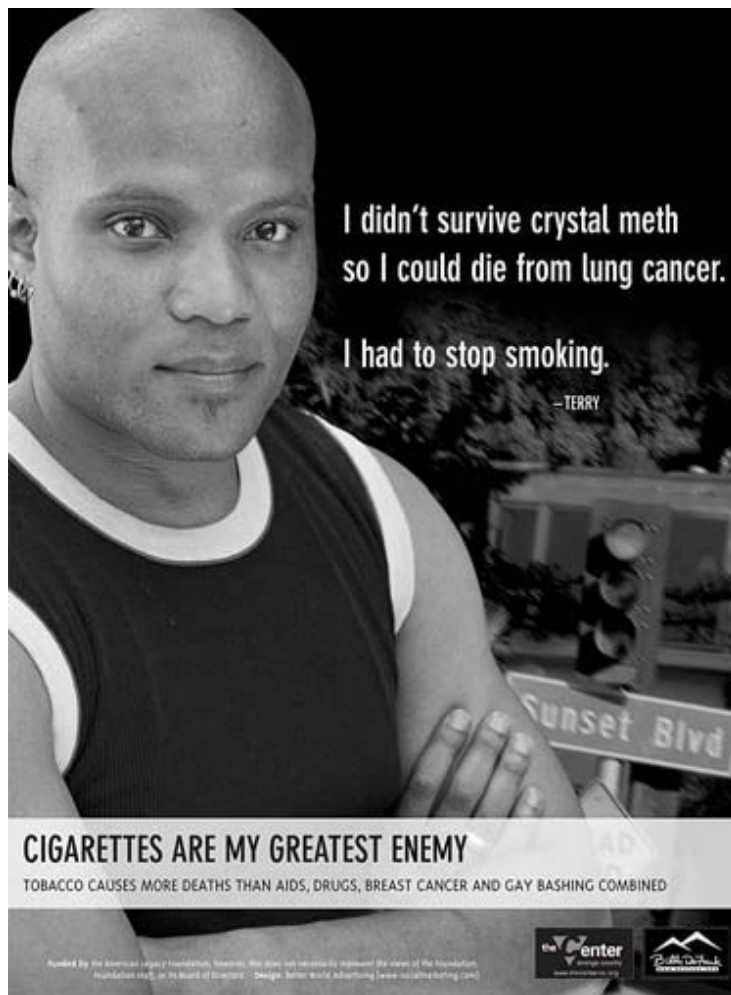
Other participants mentioned that the wording was too strong and the ad was not focused well, "This seems like it's all over the place. Crystal Meth, cigarettes, breast cancer, gay bashing."

The participant continued, "Also, I would have a white guy for an ad with Crystal Meth. Black guys smoke crack and white guys smoke Crystal Meth. And he looks all 'Queeny.' It's bad."

Another participant commented, "I don't know why but it does seem to be Crystal Meth, is a big drug

for gay men. To say 'I survived that, why am I still doing something that is going to kill me just as quickly' is a good message. I don't know if the tag line at the end, "Cigarettes are my greatest enemy" is good because it's a little strong."

Another participant concluded, "The gay bashing in the end of the ad is kind of odd. I don't think that needed to be included."



#### **Final Ad:**

The overall reaction to this ad was mixed. Some participants commented that the ad was great because the rainbow flag is a symbol recognized worldwide. Another participant said the ad was powerful and straight to the point with no distracters. Two men were conflicted about the

ad saying they said they did not know how effective it would be. They thought many people would only see the gay flag and not even realize what the ad was about.



### ***Potential LGBTQ Anti-Smoking Themes***

The discussion in the Men's Focus Group ended with suggestions for themes for anti-smoking campaigns. One participant touched on the sensory aspect of smoking, with the suggestion of a scratch-and-sniff ashtray advertisement.

Another participant suggested a before and after comparison. His idea was to have an ad with a healthy guy compared to another guy who looked emaciated and unhealthy and was stamping out a cigarette.

The conversation also focused on the cost of cigarettes and how that could be persuasive in an ad. The participants talked about adding up how much a smoker spends on cigarettes each month and how much could be saved if you stopped smoking.

Participants discussed the smoking and pets theme. One participant, after reading the suggestion list, commented that "I never thought about that but I guess if it affects humans, it would affect a pet. They have no control but to sit there and just inhale the smoke."

Two more participants joined one citing that "...it's the weirdest thing, [my boyfriend's] cat will come around when people start smoking."

Another said, "My cat would do that too, sit in my lap when I would start smoking. It's very weird."

*The discussion of the effects of smoking on pets ended with the following comment in the participants own words:*

"When my cocker spaniel died, I called work and told them a member of my family had

died. And he was a member of my family. But it had never crossed my mind the impact that smoking could have on 'man's best friend.' And they have no choice! They can't get up and open the door and say, I don't like this, get me out! The other is your children, also, but that's definitely pretty much always in someone's mind. It's proven that smoking on the fetal aspect is bad and can cause birth defects so we all kind of know that one. But the whole pet thing never crossed my mind."

At the very end of the discussion, it appeared that some of the men would like to quit for their health and to become healthier, but a few could not wait for the Focus Group to end so they could go outside and have a cigarette. The discussion ended with the following exchange.

"The thing about the health part of it, it's really kind of hard to really think of anything health wise. Smoking isn't something like sticking your hand in a fan blade where you immediately see the blood fly. Smoking is something that affects you over a long period of time. With smoking, you don't really see it day to day to day. The effects are somewhere down the road, [but then] all of a sudden it hits you where you can't breathe after two steps."

"Just sitting here makes me want to quit, after hearing you guys."

"No, not me. I want to smoke a cigarette."

"Yeah, then I'll quit after that."

**Participant Evaluations: Men**

At the end of each Focus Group session an evaluation form (please see Appendix F) was given to participants who each filled it out. Please find the men's comments below in random order.

"Making me aware of issues [and consequences] more. [I'll] focus stronger on the effects of [cigarettes]."

"Should've used the plasmas [sic] more interactive!"

"Smoke is bad for health."

"Everything was nice thank you."

"I think everything went well. I think the ad discussion went well. We had mixed opinions + it was fun."

"Open conversation with their thoughts and feelings."

## Detailed Findings - Online Survey

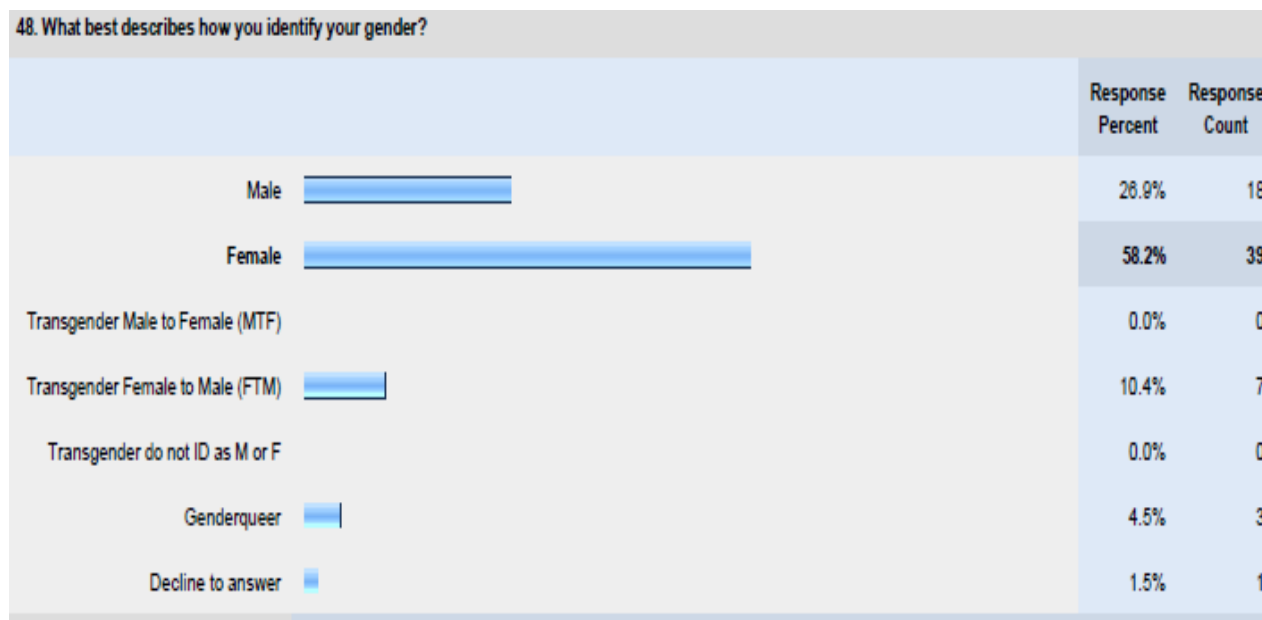
*Respondent Demographics*  
*Smoking Behaviors*  
*Quit Attempts*  
*Factors that Would Motivate Quitting*  
*Anti-Smoking Messaging Channels*  
*Anti-Smoking Themes and Messages - Online Testing*

### About the Online Survey

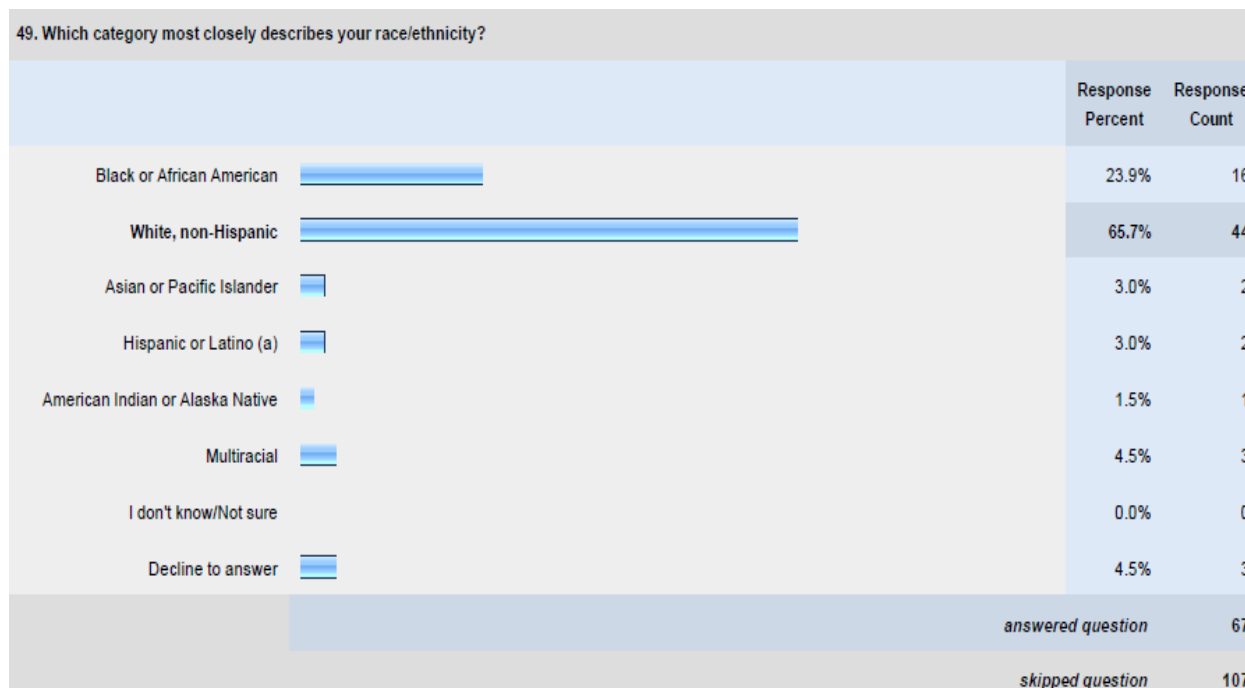
The Online Survey went live on Monday February 16<sup>th</sup> and closed on Thursday April 2<sup>nd</sup>, 2009. Overall, the online survey included 136 self-identified smokers with 82 self-identifying as lesbians, 25 self-identifying as gay men, 10 self-identifying as bisexual and 9 self-identifying as transgender adults age 18 or older. Responses for three criteria questions required answers to continue access to the online questionnaire – “Do you currently smoke or have you smoked in the past,” “Do you consider yourself...?[respondents could choose L,G,B,T,Q,H, Other, Not Sure and Decline to answer or a combination of these],” and “Do you currently live in the District of Columbia.” All other questions could be answered or skipped. Though a majority of respondents who completed the survey gave answers to all the questions on the survey, not all respondents answered every question making percentages for each question self contained.

### Respondent Demographics

The majority of respondents identified as a lesbian (61.2%). The second largest group of respondents identified as gay (18.7%). Transgender FTM respondents in the online survey were 10.4% of all those who answered what best described how they identified their gender, 4.5% identified as Genderqueer and 1.5% declined to answer.



When asked which category most closely described their race/ethnicity 65.7% of respondents checked White, non-Hispanic, 23.9% responded Black or African American, 4.5% checked Multiracial, 3% responded Hispanic or Latino(a), 3% responded Asian or Pacific Islander, 1.5% responded American Indian or Alaska Native and 4/5% check declined to answer and 107 survey respondents skipped this question.



**Respondent Ward Information:** Eighty Online survey respondents completed a request for Zip Codes. Matching Zips with corresponding Ward information, survey analysts found that a total of 23 of respondents were from Ward 1, in Ward 2 there were a total of 16 respondents, 10 listed Ward 3, there were 3 respondents from Ward 4, 18 respondents form Ward 5, no respondents listing Ward 6, a total of 8 respondents listed Ward 7 and 2 respondents listed Zip Code numbers corresponding to Ward 8.

## Smoking Behaviors

The majority of respondents in the online survey said they *currently* smoke, 78.2% versus 21.8% who said they had *smoked in the past*.

Of respondents who indicated how many cigarettes they smoked 88.9% said they smoked 16-20 cigarettes daily, followed by 87.5% who said they smoked 2-5 cigarettes daily and 75% who responded they smoked between one and two packs daily. Another 50% said they smoked 6-10 cigarettes weekly and 50% said they smoked more than two packs weekly.



Of respondents who answered the question on how many cigarettes, on average, they smoked in the past thirty days, 100% said they smoked 11-15 cigarettes daily.

8. If you smoke cigarettes, in the past 30 days, on average, how many cigarettes did you smoke? (If you do not smoke cigarettes, please skip to the next question.)

	Daily	Weekly	Monthly	Response Count
Less than one cigarette	66.7% (2)	0.0% (0)	33.3% (1)	3
1 cigarette	50.0% (2)	0.0% (0)	50.0% (2)	4
2 to 5 cigarettes	87.5% (7)	0.0% (0)	12.5% (1)	8
6 to 10 cigarettes	37.5% (3)	50.0% (4)	12.5% (1)	8
11 to 15 cigarettes	100.0% (6)	0.0% (0)	0.0% (0)	6
16 to 20 cigarettes	88.9% (8)	0.0% (0)	11.1% (1)	9
Between 1 and two packs	75.0% (6)	12.5% (1)	12.5% (1)	8
More than two packs	0.0% (0)	50.0% (1)	50.0% (1)	2

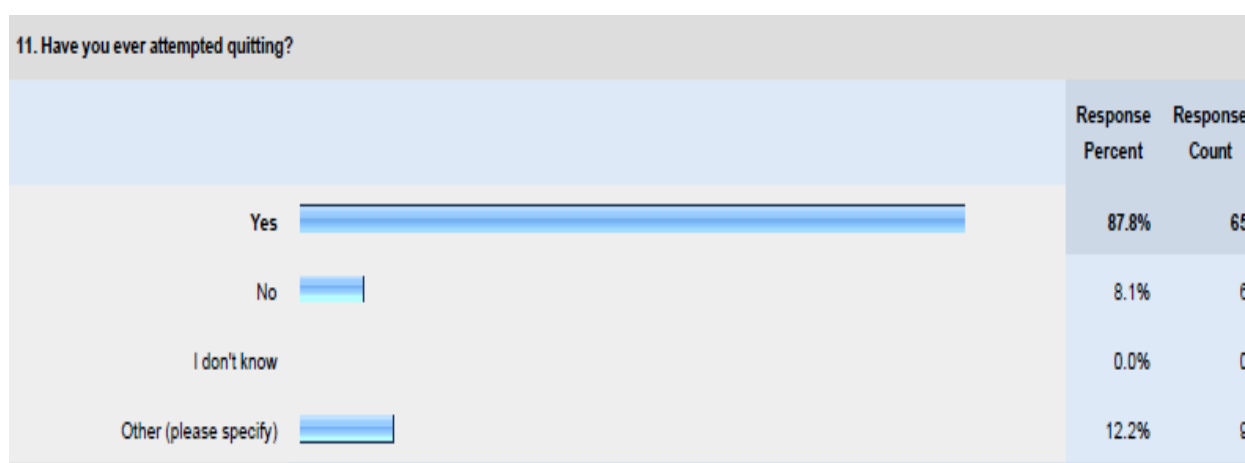
Only 4 people responded that they used cigars/little cigars or Black and Milds. Of those respondents who said they smoked cigars/little cigars or Black and Milds, three respondents said they used them daily. One respondent smoked Black and Milds monthly.

When asked why they currently smoke or why they smoked in the past, the majority of respondents (42 respondents, 60.9%) answered "I smoke to relive stress." 36 respondents (52.2%) answered that they were addicted to nicotine.

Additionally, most online respondents (67.6%) began smoking before they came out as LGBTQ. Only 10 respondents (13.5%) started smoking after they came out as LGBTQ.

### Quit Attempts - History

The majority of respondents (87.8%) have attempted quitting. Only 8.1% of respondents answered that they have not attempted to quit smoking.





When asked if it was clear what message the ad tends to convey, the majority of respondents answered “yes” for each of the ads presented in the Online Survey.

When looking at the “Baby, it’s cold outside” ad, respondents reactions were somewhat mixed.

When asked “Does the headline draw you in?” respondents were nearly evenly split, with 48.6% answering “yes” and 47.2% answering “no.”

The imagery of the ad drew in 57.5% of respondents but did not draw in 37%.

The ad was only somewhat appealing to 30.1% in the ranking on the appeal scale. Appeal was limited to 26% of respondents and there was no appeal to 19.2% of respondents. Only 9.6% thought it was a great ad.

When asked how the ad made them feel about quitting smoking, many said that it made them want to **CONTINUE** to smoke with the “sexy girl” who looks “cool” smoking.



Only a few people commented on the connection between quitting smoking not being outside in the cold.

The majority of respondents (57.5%) said the ad would NOT influence their decision to quit smoking or to encourage a loved one to quit smoking.

**Ad: “Kiss that butt goodbye...”**



Online respondents were more drawn into this ad than to some of the others.

When asked if the headline drew them in 70.8% answered “yes” while only 25% said “no.”

On the question about the imagery, 69.4% of respondents said the imagery drew them in, while only 27.8% said the imagery did not draw them in. The majority of respondents found this ad to be somewhat appealing (37.5%).

When asked how this ad made them feel about quitting smoking, many respondents commented on race. Someone noted that as a woman of color, this ad did not appeal to her. A few respondents commented on how this ad, like the one before it, glamorized smoking.

A few more commented on how she looks healthy and that quitting smoking (“kissing that butt goodbye”) would lead to a healthier looking lifestyle.

The majority of respondents (54.2%) said this ad would NOT influence their decision to quit smoking or encourage a loved one to quit smoking. Only 27.8% answered yes it would influence their decision to quit.

**Ad: “Be a strong, sexy nonsmoker”**

Only a slight majority of respondents (55.6%) were drawn into this headline whereas 33.3% were not.

**Be a strong, sexy nonsmoker.**

WARNING: SMOKING IS EVEN WORSE THAN YOU THOUGHT.

- Smoking a pack a day adds up to \$1,715.50 a year!
- More women die of lung cancer than breast cancer.
- Second-hand smoke affects your friends, your children, and your pets!
- Tobacco kills 25 times more people as AIDS every year.

**TIPS TO QUIT:**

- **Pick a Quit Date**, and stick to it!
- **Get support:** Call 1-800-QUIT-NOW, join an LGBT-friendly support program, or ask friends or family members to help by reminding you why you decided to quit.
- **If you slip, don't worry!** Use it as a learning experience, and try again.

**Next Group:**

**YOU CAN QUIT. WE CAN HELP.**



**Mautner Project**

The National Lesbian Health Organization  
202-332-5536/mautnerproject.org/info@mautnerproject.org



**D&G Tobacco Free Families**

DOH

This program is funded in whole or in part by the governments of the District of Columbia

The imagery did not draw in 56.9% of respondents and 25.4% of respondents said the ad was somewhat appealing while 22.5% of respondents said the ad was great and 19.7% said they felt neutral about it.

Most of the respondents felt the messages about quitting smoking were positive. Most said the facts in the ad were good and eye-opening; everyone got the message.

The only negative comments about the “Strong, sexy nonsmoker” ad were that it was too much reading and the design was ugly. The facts were good and relevant but someone might overlook it because it’s too boring and just too much writing. While it wasn’t a majority, more respondents (compared to the other ads) said that this ad would influence their decision to quit smoking or encourage a loved one to quit smoking while only 32.9% answered “no.”

#### **Ad: “Time to Quit. No Foolin.”**

This ad did not appeal to the majority respondents who viewed it in the Online Survey.

A little over half (50.7%) said the headline did not draw them in while about 40% had a positive response.

With regard to the imagery, 59.4% said the imagery did not draw them while 34.8% said it did.



Most respondents (36.8%) said the ad did not appeal to them or they responded that the appeal is limited (23.5%).

A few people commented that the ad was unclear. One respondent reported that the ad would be better if cigarettes were more “identifiable.” Another respondent commented on how it made them think of Mardi Gras and another said it was a “joke”.

A few respondents mentioned that it conveyed the message of quitting, but overall it seems that this ad is not well received for helping someone to stop smoking. 67.2% of respondents said that this ad would NOT influence their decision to quit smoking or encourage a loved one to quit smoking. Only 17.9% answered “yes” to this question.

#### **Ad: “Numbers Don’t Lie”**

This ad was most well received of all the ads presented. A majority of respondents (64.7%) were drawn in by the headline, as opposed to 29.4% who were not.




Most respondents had positive things to say about this ad. Those who liked it said it was a good, clean ad and the message was strong. Some who liked it commented on the writing and that it was too small in relation to the rest of the ad. One person said that it “speaks” to her as a “queer woman of color.”

On the question of imagery use, 61.2% are drawn into the ad by the imagery, whereas 28.4% were not. A total of 32.4% of respondents said this was a great ad, followed by 27.9% saying it was somewhat appealing.

A few respondents did not like the message and thought it was a bit exaggerated. One respondent said that it was a good ad but that they “wouldn’t quit smoking just to get the tobacco companies back for not supporting GLBT causes” saying that it kind of implies that if Marlboro started sponsoring Gay Pride, then we wouldn’t have a problem with smoking.

The largest number of respondents (50%), answered “yes” when asked if the ad would influence their decision to quit smoking or to encourage a loved one to quit smoking. Only 36.4% answered “no.”



**NUMBERS DON'T LIE**

TOBACCO COMPANIES SPEND BILLIONS TO ENSNARE AND KEEP HOLD OF QUEER SMOKERS.

OVER 45% OF LESBIANS AND BISEXUAL WOMEN SMOKE, A RATE MORE THAN TWICE AS HIGH AS OTHER WOMEN.\*

\*1996 DATA FROM BROWNING-KOPELSON SUPPLEMENTARY SURVEY

**WHY DO WE SUPPORT THEM WHEN THEY DON'T SUPPORT US?**

A SAN FRANCISCO HEALTH PROMOTION CAMPAIGN, 2005

**gay city**  
WWW.GAYCITY.ORG

THE LGBT COMMUNITY CENTER  
WWW.GAYCITY.ORG

WWW.KIDNEYHEALTH.ORG

## Recommendations

- Since the advertising presented for this study only moderately succeeded in communicating to key LGBTQ constituents, our findings demonstrate a need to more creatively and humorously communicate the “quit” statement in print advertising.
- Reinforce messaging via email, through friends of smokers and via online social networking sites such as Facebook.
- Since findings in this study consistently show that more and better outreach is needed to communicate “quit smoking” messages and to provide aids such as “the patch,” gum, smoking cessation groups and coupons with discounts on “quit smoking” aids, more resources should be found to facilitate access to these “quit smoking” tools.
- Provide direct person-to-person smoking cessation education at large LGBTQ events such as Capital Pride, Black Pride, Youth Pride, at bars frequented by members of the LGBTQ community and a series of “street actions” possibly at major Metro stops in zip codes heavily populated by LGBTQ residents.
- Specifically use images of pets in some of a series of ads to link the harm that the smoking can cause to pets.
- In addition to advertising in LGBTQ publications such as the Washington Blade and Metro Weekly, research results indicate that Metro bus and Metro bus kiosks could be effective mediums for advertisements featuring LGBTQ anti-smoking messages for the LGBTQ audience.

## Next Steps

This Report has provided some specific information to help inform future decisions with regard to communications and marketing of “quit” messaging for the LGBTQ community. The Mautner Project can leverage the organization’s reputation as a key LBT health resource and smoking cessation service provider in the LGBTQ community as it moves forward with its LGBTQ targeted anti-smoking campaign.

The marketing and communications about the upcoming campaign will require careful planning and more creative ways of connecting health and anti-smoking messages to the community.

The next phase for the campaign should be to develop a strategic marketing communications plan that closely matches the objectives stated for this project. By moving forward with the objectives and by establishing goals, timetables and measures of success, the Mautner Project can use communications and marketing tools to promote smoking cessation in the Metro D.C. LGBTQ community.



## Endnotes

1. Witeck-Combs Communications/Harris Interactive, Inc. – News Release “*Gay and Lesbian E-Commerce Activity Beats That of Non-Gay Web Users*” February 19, 2001.

## Appendix A: Ad Image Concepts Tested In Focus Groups

A.



**Be a strong, sexy nonsmoker.**

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- **If you slip, don't worry!** Use it as a learning experience, and try again.

**Next Group:**

**YOU CAN QUIT. WE CAN HELP.**

**Mautner Project**  
The National Lesbian Health Organization  
202-332-5536; [mautnerproject.org/info@mautnerproject.org](mailto:mautnerproject.org/info@mautnerproject.org)

**DC Tobacco Free Families**  
DOH

This program is funded in whole or in part by the government of the District of Columbia.

B.



I didn't survive rape  
so I could die from lung cancer.  
I had to stop smoking.

—DANIELLE

**CIGARETTES ARE MY GREATEST ENEMY**

TOBACCO CAUSES MORE DEATHS THAN AIDS, DRUGS, BREAST CANCER AND GAY BASHING COMBINED

Sponsored by the American Cancer Society. However, this does not necessarily represent the views of the National Cancer Institute, or its Board of Directors. For more information, please visit [www.aacr.org](http://www.aacr.org).

**enter**  
The National Cancer Institute

**Quality of Life**  
The National Cancer Institute

C.



**NUMBERS DON'T LIE**

TOBACCO COMPANIES SPEND BILLIONS  
TO ENSNARE AND KEEP HOLD OF QUEER SMOKERS.

OVER 45% OF LESBIANS AND BISEXUAL WOMEN SMOKE,  
A RATE MORE THAN TWICE AS HIGH AS OTHER WOMEN.\*

\*1992-2002 BROADBENT, HENRY & CO. SURVEILLANCE SURVEY

**WHY DO WE SUPPORT THEM WHEN THEY DON'T SUPPORT US?**


A 101 CITY HEALTH PROJECT MEDIA CAMPAIGN, 2010



D.

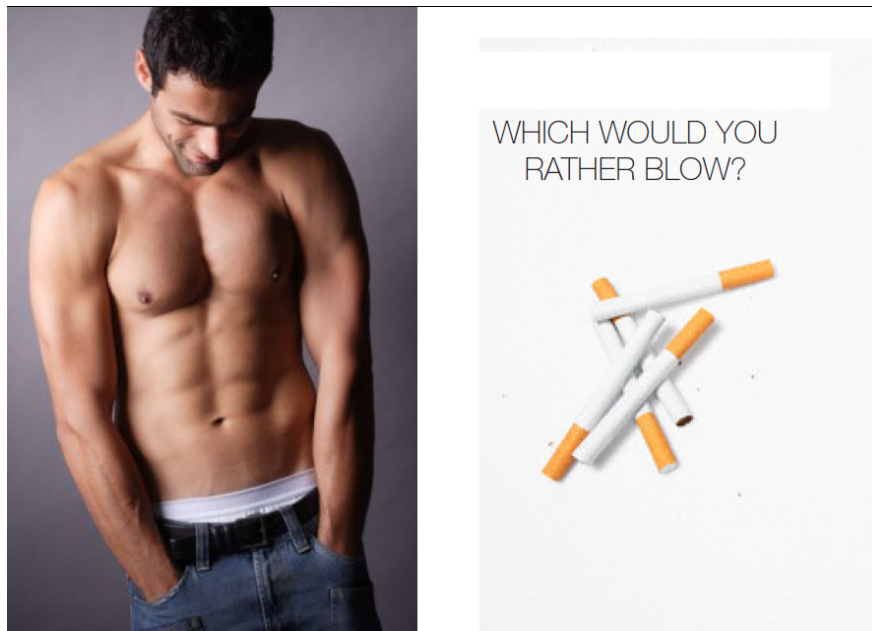


It's a matter of taste.  
Let's put our lips to better use.

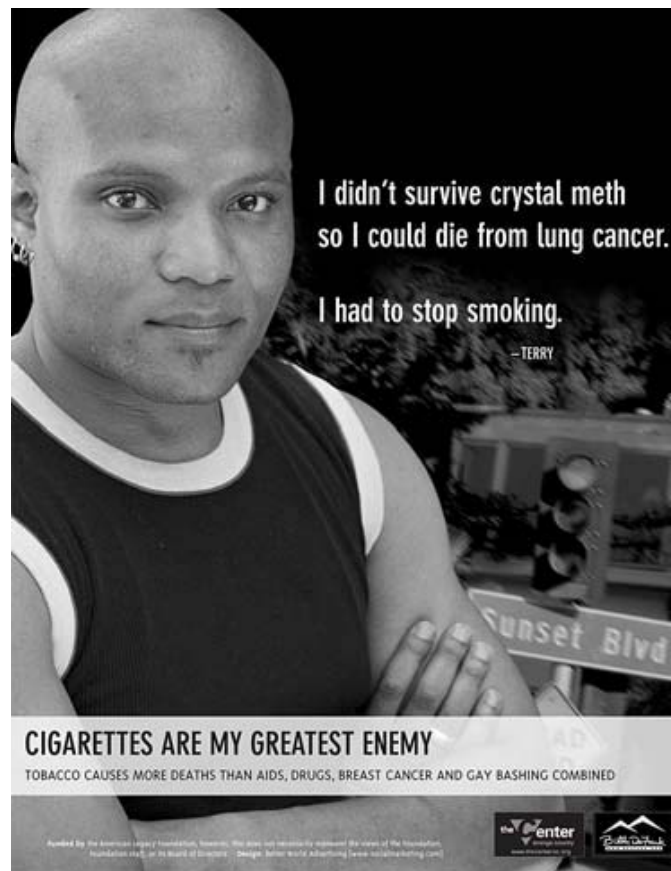


**Mautner Project**  
The National Lesbian Health Organization

E.



F.



G.



## Appendix B: Tobacco Use Focus Groups Discussion Guide

### 1: WELCOME, INSTRUCTIONS, CONFIDENTIALITY, EXPECTATIONS, SESSION RECORDED, GROUND RULES (10 minutes)

#### **Welcome!**

We would like to welcome to all of you to the Mautner Project's tobacco use Focus Group. My name is D, and I will be moderating our discussion along with my colleague Colleen. Tonight there are no wrong answers – your opinions will not have an effect on what we think of smokers or non-smokers. We really want to hear what you think about the topics and images we show you.

#### **Confidentiality for our session**

We are very glad you could join us and are looking forward to hearing your opinions during our session this evening! First, we would like each of you to read and sign, if you are okay with it, our confidentiality agreement (pass out printed agreement).

As we mentioned in our confirmation of your participation, your specific contact information will NOT be used in ANY report of this discussion – we're interested in WHAT you have to say, not necessarily WHO says it.

#### **Session will be Digitally Recorded**

We will be recording tonight's session for the purpose of writing our report. It will help us to be able to re-listen to your opinions while we write the final report and will help us be accurate.

#### **Rules of the Road**

Also, we would like to ask that you speak one at a time and as clearly as possible with respect for your fellow participants and the moderators. We only have two hours so we will make sure that everyone has an opportunity to speak their opinions.

Our topics tonight are centered on smoking and tobacco use among members of the LGBTQ community and advertising messages about smoking and smoking cessation.

This Focus Group includes both current smokers, as well as people who used to smoke – so needless to say please show courtesy “across the aisle.” For our session please feel free to comment on the answers of others and to build off their ideas – the goal here is a respectful and free flowing discussion.

Again, there are no wrong answers – your opinions will not have an effect on what we think of smokers or non-smokers. Please speak freely about what you think or feel during our discussions.

Does anyone have any questions so far?



## **2: WARM UP / CURRENT / PAST SMOKING OR TOBACCO USE BEHAVIOR (10 minutes)**

### **Name & description of Tobacco Use**

To begin our discussion, please tell us your first name and give a quick description of your smoking or tobacco use.

For example, describe your current or past smoking such as what brand, type of cigarette or other tobacco product you use/used most often, or describe where you most often smoked, or when and for what reasons? Just whatever comes to mind about your tobacco use. What do or did you like the most about smoking? What do or did you like the least?

## **3: SMOKING AND TOBACCO ADVERTISING IN THE LGBTQ COMMUNITY (10 minutes)**

### **Advertising Images – Gay and Heterosexual**

Next let's focus on how smoking and tobacco use ads you may have seen aimed at the LGBTQ community.

What ads for smoking or tobacco have you seen that you thought were directed specifically to you? Can you recall if the ads were different from ads for smoking or tobacco use by heterosexuals, and if so, why?

**Moderator Probes:** Are there gender ID differences (femme, butch, gay, less masculine, more muscular body types, etc.)? Are there specific brands or companies that participants recall?

## **4: QUITTING BEHAVIOR / PRESSURES (15 minutes)**

Next let's talk about the "quitting" process – again, please remember that we have both current and former smokers here.

### **Quit Motivations - Past**

If you have quit in the past please describe what motivated you to quit, how you went about it, and how successful you were in not starting again.

### **Quit Motivations - Current**

For those of you who are current smokers, from who or what (if at all) do you get the "you should quit" message, and how often, when / where do you get this most often? How do these messages make you feel, and how do you usually react to the "you should quit" messages?

### **Annoying or Counterproductive "Quit" Themes**

What advertising "quit" themes annoy you or do you feel might be counterproductive?

### **Motivating Advertisements**

Can you recall seeing any advertising targeted to members of the LGBTQ community - TV, print, radio, online – any medium - that you thought were pretty good or motivating?

What do you like the best about those ads?

If you have not seen any of these types of ads, why do you think that is?

## **5: LGBTQ MESSENGERS (10 minutes)**

If you could pick someone to deliver a “quit smoking” message to you, who would you pick?

Maybe a person you know or an “every person” such as someone you might see in your neighborhood or around work? How about President Obama? Or would it be a celebrity entertainer, sports figure, medical person, political leader, or a gay icon or leader?

Please tell us any idea you have, there are no limits, choose anyone who would be most appealing to YOU.

You can think of them in any advertisement that would make you consider quitting.

## **6: LGBTQ ADVERTISING MEDIUMS – EVALUATIONS (15 minutes)**

Next let’s focus on the question of what “mediums” would be most appropriate for health campaigns geared to members of the LGBTQ community.

Here is a list of potential places you could see or hear ads about quitting.

Which ones do you think are the “best” or most effective to talk to LGBTQ people about health information? Which ones are the “worst” or least effective.

Please talk about your reasons and any examples you can think of where you recall seeing a “quit smoking” ad.

Also, please tell us if there are additional places that you would find effective that we haven’t listed.

### **List:**

- Posters / Billboards
- Online Social Networks
- Email from friends, colleagues or groups you belong to
- Community-group gatherings
- Pride Guide
- Postcards at bars
- TV
- Church
- LGBTQ Magazines
- Brochures / Tear-Offs
- Radio
- Tee-shirts at Pride
- LGBTQ Newspapers
- Mainstream magazines or newspapers

## 7: PRINT ADS DISCUSSION (30 minutes)

- Does the imagery draw you in any of these ads?
- How about the words, for instance does the headline draw you in?
- Is it clear to you what message of each ad is trying to say?
- How do the ads make you feel about quitting smoking?
- Would any of these ads influence your decision to quit smoking?

## 8: POTENTIAL ANTI-SMOKING THEMES / BRAINSTORMING (15 minutes)

For our last question this evening, please put on your “thinking caps.” Here are some potential themes for an anti-smoking campaign that would “speak to” LGBTQ persons.

First, please tell us which of these themes are most appealing to you and why.

Which ones are least appealing and why.

If you had to choose one theme, either from this list or a different theme that appeals to you, what theme would you choose?

Can you give an example of your message, or an image and a messenger? Where would you like to see that ad (in a magazine or newspaper, on TV, on the radio, etc.)?

### List:

- Smoking’s impact on personal medical health
- Smoking’s impact on others (e.g. partner, family members, friends, etc.)
- Second hand smoke’ impact on pets
- Smoking’s impact on attractiveness
- Being controlled by the need to smoke / addiction or dependence/controlled by addiction
- Smoking and tobacco are expensive
- Money from smoking and tobacco products supports anti-gay causes

**Moderator Probes:** Compare themes, details on execution, etc.

## CLOSING (10 minutes)

### Thank You

We want to thank you again for all great feedback on these topics!

### Research Process Evaluation

It will help us do our best if you can please fill out our evaluation form. It’s a quick one! (*Hand out Evaluation Form*)

### Envelope Address Check

In order for your honorarium to be mailed to you please check your envelope to make sure we have your address correct. You should receive your honorarium check in about two weeks.

## Appendix C – Online Survey Instrument

### LGBTQ Tobacco Use Survey

Thank you for coming to the Mautner Project's LGBTQ Tobacco Use Survey. Your responses can help us improve the health of our LGBTQ community.

Mautner Project improves the lives of lesbians, bisexual and transgender women who partner with women, and their families, through advocacy, education, research and direct service. We envision a healthcare system that is guided by social justice and responsive to the needs of all people.

**\* Do you currently smoke or have you smoked in the past?**

- ☐ Yes
- ☐ No
- ☐ I don't know

**Do you currently smoke or use:**

- ☐ Cigarettes
- ☐ Cigars/Little Cigars or Black & Milds
- ☐ Pipe
- ☐ Hookah
- ☐ Chewing tobacco
- ☐ Other
- ☐ None of the above

**\* Do you consider yourself...? (Please check all that apply.)**

- ☐ Lesbian
- ☐ Gay
- ☐ Bisexual
- ☐ Heterosexual
- ☐ Transgender
- ☐ Questioning
- ☐ Other
- ☐ Not Sure
- ☐ Decline to answer

Page 1

## LGBTQ Tobacco Use Survey

**Are you currently living with an adult partner?**

☐ Yes

☐ No

☐ Decline to answer

**If yes, is your partner...?**

☐ Same sex as you

☐ Different sex than you

☐ Decline to answer

---

**\* Do you currently live in the District of Columbia?**

☐ Yes

☐ No

☐ I don't know

**If yes, what is your zip code?**

---

**If you smoke cigarettes, in the past 30 days, on average, how many cigarettes did you smoke? (If you do not smoke cigarettes, please skip to the next question.)**

	Daily	Weekly	Monthly
Less than one cigarette	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
1 cigarette	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 to 5 cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6 to 10 cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11 to 15 cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16 to 20 cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Between 1 and two packs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
More than two packs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

---

## LGBTQ Tobacco Use Survey

**Are you currently living with an adult partner?**

☐ Yes

☐ No

☐ Decline to answer

**If yes, is your partner...?**

☐ Same sex as you

☐ Different sex than you

☐ Decline to answer

---

**\* Do you currently live in the District of Columbia?**

☐ Yes

☐ No

☐ I don't know

**If yes, what is your zip code?**

---

**If you smoke cigarettes, in the past 30 days, on average, how many cigarettes did you smoke? (If you do not smoke cigarettes, please skip to the next question.)**

	Daily	Weekly	Monthly
Less than one cigarette	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
1 cigarette	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 to 5 cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6 to 10 cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11 to 15 cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16 to 20 cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Between 1 and two packs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
More than two packs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

---



### LGBTQ Tobacco Use Survey

**If you smoke or use one of the products below how often do you use them? (If you do not use one of the products below please skip to the next question.)**

	Daily	Weekly	Monthly
Cigar/Little Cigars or Black & Milds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pipe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hookah	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chewing tobacco	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

---

**Please choose the answer below that best describes your general feelings about why you currently smoke or why you smoked in the past. (Choose all that apply)**

- ☐ I am a social smoker.
- ☐ I smoke only while I drink alcohol.
- ☐ I smoke to relieve stress.
- ☐ I smoke to be part of the "scene" with my friends.
- ☐ I am addicted to nicotine.
- ☐ I smoke because my parents or siblings smoked.
- ☐ I smoke because my partner smokes.
- ☐ I don't know
- ☐ Decline to answer

**Have you ever attempted quitting?**

- ☐ Yes
- ☐ No
- ☐ I don't know
- ☐ Other (please specify)

**During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?**

- ☐ Yes
- ☐ No
- ☐ I don't know

## LGBTQ Tobacco Use Survey

Did you begin smoking...? (Lesbian, Gay, Bisexual, Transgender or Questioning = LGBTQ)

- ☐ Before you came out as LGBTQ?
- ☐ While you were coming out as LGBTQ?
- ☐ After you came out as LGBTQ?
- ☐ I have not come out as LGBTQ.
- ☐ I don't know.
- ☐ Decline to answer.

Have you ever seen or heard any anti-smoking messages that you thought may be aimed at people who are LGBTQ?

- ☐ Yes
- ☐ No
- ☐ I don't know

Please review this stop smoking ad. We would like your opinion about it below.



Is it clear to you what message the ad intends to convey?

- ☐ Yes
- ☐ No
- ☐ I don't know

## LGBTQ Tobacco Use Survey

Does the headline draw you in?

- ☐ Yes  
☐ No  
☐ I don't know

Does the imagery draw you in?

- ☐ Yes  
☐ No  
☐ I don't know

On a scale from 1 to 5 with five being "this is a great ad that really appeals to me" and one being "this does not appeal to me at all," please rank this ad.

	Does not appeal to me	Appeal is limited	I feel neutral about this ad	Is somewhat appealing	A great ad!
"The ad..."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How does this ad make you feel about quitting smoking?

Would this ad influence your decision to quit smoking or to encourage a loved one to quit smoking?

- ☐ Yes  
☐ No  
☐ I don't know

Please review this stop smoking ad. We would like your opinion about it below.



## LGBTQ Tobacco Use Survey

**Is it clear to you what message the ad intends to convey?**

☐ Yes

☐ No

☐ I don't know

**Does the headline draw you in?**

☐ Yes

☐ No

☐ I don't know

**Does the imagery draw you in?**

☐ Yes

☐ No

☐ I don't know

**On a scale from 1 to 5 with five being "this is a great ad that really appeals to me" and one being "this does not appeal to me at all," please rank this ad.**

	Does not appeal to me	Appeal is limited	I feel neutral about this ad	Is somewhat appealing	A great ad!
"The ad..."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**How does this ad make you feel about quitting smoking?**

**Would this ad influence your decision to quit smoking or to encourage a loved one to quit smoking?**

☐ Yes

☐ No

☐ I don't know

**LGBTQ Tobacco Use Survey**

Please review this stop smoking ad. We would like your opinion about it below.

**Be a strong, sexy nonsmoker.**

**WARNING: SMOKING IS EVEN WORSE THAN YOU THOUGHT.**

- Smoking a pack a day adds up to \$1,715.10 a year
- More women die of lung cancer than breast cancer
- Second-hand smoke affects your friends, your children, and your pet!
- Tobacco kills 25 times more people as AIDS every year.

**TIPS TO QUIT:**

- Pick a quit date, and stick to it!
- Get support: Call 1-800-QUIT-NOW, join an LGBT-friendly support program, or ask friends or family members to help by reminding you why you decided to quit.
- If you slip, don't worry! Use it as a learning experience, and try again.

Next  
Group:

**YOU CAN QUIT. WE CAN HELP.**

Is it clear to you what message the ad intends to convey?

☐ Yes

☐ No

☐ I don't know

Does the headline draw you in?

☐ Yes

☐ No

☐ I don't know

Does the imagery draw you in?

☐ Yes

☐ No

☐ I don't know

On a scale from 1 to 5 with five being "this is a great ad that really appeals to me" and one being "this does not appeal to me at all," please rank this ad.

	Does not appeal to me	Appeal is limited	I feel neutral about this ad	Is somewhat appealing	A great ad!
"The ad..."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How does this ad make you feel about quitting smoking?

## LGBTQ Tobacco Use Survey

**Would this ad influence your decision to quit smoking or to encourage a loved one to quit smoking?**


☐ Yes

☐ No

☐ I don't know

---

**Please review this stop smoking ad. We would like your opinion about it below.**



**Is it clear to you what message the ad intends to convey?**

☐ Yes

☐ No

☐ I don't know

**Does the headline draw you in?**

☐ Yes

☐ No

☐ I don't know

**Does the imagery draw you in?**

☐ Yes

☐ No

☐ I don't know

**On a scale from 1 to 5 with five being "this is a great ad that really appeals to me" and one being "this does not appeal to me at all," please rank this ad.**

	Does not appeal to me	Appeal is limited	I feel neutral about this ad	Is somewhat appealing	A great ad!
"The ad..."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



## LGBTQ Tobacco Use Survey

How does this ad make you feel about quitting smoking?

Would this ad influence your decision to quit smoking or to encourage a loved one to quit smoking?

- ☐ Yes
- ☐ No
- ☐ I don't know

Please review this stop smoking ad. We would like your opinion about it below.

**NUMBERS DON'T LIE**

TOBACCO COMPANIES SPEND BILLIONS TO ENSNARE AND KEEP HOLD OF QUEER SMOKERS.

OVER 45% OF LESBIANS AND BISEXUAL WOMEN SMOKE, A RATE MORE THAN TWICE AS HIGH AS OTHER WOMEN.\*

\*U.S. DEPT. OF HEALTH, CENTER FOR DISEASE CONTROL

**WHY DO WE SUPPORT THEM WHEN THEY DON'T SUPPORT US?**

WITH THE SUPPORT OF THE CITY OF CHICAGO

**LGBT CITY**  
CHICAGO

ILLINOIS DEPARTMENT OF PUBLIC HEALTH

AMERICAN LUNG ASSOCIATION

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**LGBTQ Tobacco Use Survey**

Is it clear to you what message the ad intends to convey?

☐ Yes

☐ No

☐ I don't know

Does the headline draw you in?

☐ Yes

☐ No

☐ I don't know

Does the imagery draw you in?

☐ Yes

☐ No

☐ I don't know

On a scale from 1 to 5 with five being "this is a great ad that really appeals to me" and one being "this does not appeal to me at all," please rank this ad.

	Does not appeal to me	Appeal is limited	I feel neutral about this ad	Is somewhat appealing	A great ad!
"The ad..."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How does this ad make you feel about quitting smoking?

Would this ad influence your decision to quit smoking or to encourage a loved one to quit smoking?

☐ Yes

☐ No

☐ I don't know

May we contact you regarding your opinions? If so, please provide the following information. Thanks!

**Name:**

**ZIP/Postal Code:**

**Email Address:**

Next we have a few demographic questions.

In what year were you born? (Ex. - 1978)

## LGBTQ Tobacco Use Survey

How did you hear about this LGBTQ Smoking Survey?

- ☐ "Big Love" Dinner
- ☐ From a friend
- ☐ Someone sent me an email
- ☐ An ad in the Washington Blade
- ☐ An ad in Metro Weekly
- ☐ From a postcard
- ☐ From a poster I saw in my neighborhood
- ☐ Facebook
- ☐ MySpace
- ☐ LinkedIn
- ☐ Other, please describe below

Other (please specify)

What best describes how you identify your gender?

- ☐ Male
- ☐ Female
- ☐ Transgender Male to Female (MTF)
- ☐ Transgender Female to Male (FTM)
- ☐ Transgender do not ID as M or F
- ☐ Genderqueer
- ☐ Decline to answer

Which category most closely describes your race/ethnicity?

- ☐ Black or African American
- ☐ White, non-Hispanic
- ☐ Asian or Pacific Islander
- ☐ Hispanic or Latino (a)
- ☐ American Indian or Alaska Native
- ☐ Multiracial
- ☐ I don't know/Not sure
- ☐ Decline to answer

## LGBTQ Tobacco Use Survey

### THANK YOU FOR VISITING.

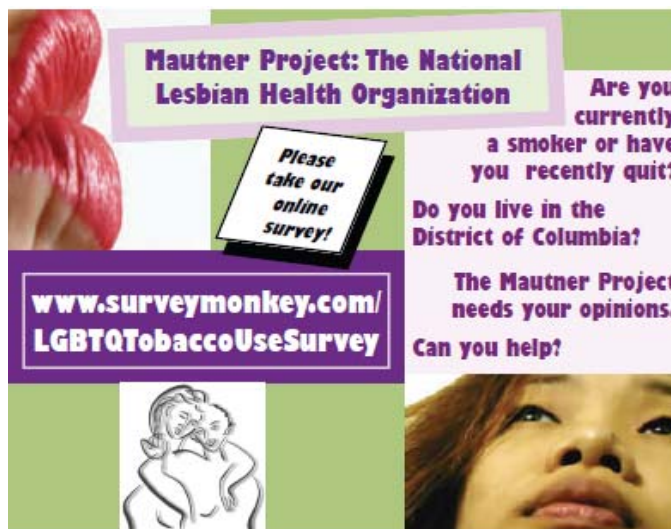
Thank you for stopping by our survey. Your response does not convey a vital component that we need for our survey sample. We appreciate your time.

### THANK YOU FOR YOUR TIME.

Thank you for taking our survey. Your responses will help us work to improve the health of our LGBTQ community.

## Appendix D – Focus Group / Online Survey Recruitment Ads

Postcard handed out at the Mautner Project Annual Gala Event February 14, 2009.



Metro Weekly "Sneak Peek" E-Blast sent February 18, March 4, March 11 and March 18.



Metro Weekly Sixth Page Print Ad – ran March 19, March 26, and April 2.

## **LGBTQ TOBACCO USE STUDY**

**The Mautner Project is seeking volunteers to participate in a tobacco-use focus group study.**

**Eligible participants must:**

- be current or past smokers;
- be residents of the District of Columbia; and
- self-identify as L,G,B,T or Q.

Focus group participants will be compensated up to \$50. Focus group slots are limited and eligibility must be determined. To find out more about this study or to check your eligibility, please contact:

**[LGBTQTobaccoUse@witeckcombs.com](mailto:LGBTQTobaccoUse@witeckcombs.com)**  
**or call: SJ Sanford at 202-332-5536**

Washington Blade Quarter Page Print Ad – ran March 20, and March 27.

## **LGBTQ TOBACCO USE STUDY**

The Mautner Project seeks volunteers to participate in tobacco-use focus groups for discussions regarding smoking and smoking cessation.

**Eligible participants must:**

- be current or past smokers;
- be residents of the District of Columbia; and
- self-identify as L,G,B,T or Q.

Focus group participants will be compensated up to \$50. There are a limited number of focus group slots and eligibility must be determined. To find out more about this study or to check your eligibility, please email:

**[LGBTQTobaccoUse@witeckcombs.com](mailto:LGBTQTobaccoUse@witeckcombs.com)**  
or call  
SJ Sanford at 202-332-5536

Washington Blade “This Week” E-Blast sent February 19, February 26, March 5, March 12, and March 19.



### **MAUTNER LGBTQ TOBACCO USE SURVEY**

The Mautner Project needs your opinion! If you are a current or former smoker, identify as LGBTQ, and are a DC resident please take a few moments to complete the survey.





## Appendix E – Focus Group Confidentiality Agreement

### Confidentiality Agreement

**Study Title: LGBTQ Tobacco Use Study**

**Principal Investigator: The Mautner Project**

Thank you on behalf of the Mautner Project for participating in this Focus Group on LGBTQ tobacco use habits and opinions.

Your participation in this Focus Group is confidential for you and for your fellow participants. By signing this confidentiality form you are agreeing not to repeat what other participants or group leaders share with you in confidence during this two hour Focus Group.

Please sign and date below if you wish to proceed with participating this evening.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

## Appendix F – Focus Group Evaluation Form

### EVALUATION FORM

Please tell us how you would like to rank this Focus Group process on a scale of one to ten with ten being great! *(please circle one)*

<i>Poor</i>				<i>Okay</i>		<i>Great</i>			
1	2	3	4	5	6	7	8	9	10

What worked well and what didn't work as well? *(please write your opinion in the space below)*

On a scale of one to ten, with ten being "I liked the ads discussion," how would you rank the discussions of the ads? *(please circle one)*

<i>Poor</i>				<i>Okay</i>		<i>Great</i>			
1	2	3	4	5	6	7	8	9	10