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Knowledge of Alternative Tobacco Products in Unaccompanied Homeless Youth

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Abstract

Objectives: This study examined perceptions of factors that influence use and non-use of Alternative Tobacco Products (ATPs) among unaccompanied youth experiencing homelessness.

Methods: Focus groups were conducted with 30 homeless 18–24 year olds (80% men, 50% Hispanic, 30% Black, 17% White, 20% multi-racial/other) recruited from drop-in centers in Los Angeles. Discussion focused on several ATPs (hookah, electronic cigarettes/vaping devices, cigarillos/little cigars, smokeless tobacco, snus, natural cigarettes, clove cigarettes), soliciting participants' experiences using each ATP and motivations for using or not using each ATP.

Results: Focus group transcripts were subjected to a rigorous coding procedure and 8 themes relating to the reasons that participants may or may not use ATPs emerged. Each ATP was associated with distinctive characteristics that motivated use and non-use. For example, hookah use was viewed positively with positive sensory and social features dominating the discussion, whereas electronic cigarettes were viewed largely negatively (i.e., that they were expensive and harmful to health). Homelessness characterized participants' responses to the extent that cost was a factor in their choice of ATP.

Conclusions: These data provide important, first look insights into factors that may influence the use and non-use of ATPs among unaccompanied youth experiencing homelessness.

Keywords

youth; low income; vulnerable population; homeless; polytobacco

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Human Subjects Statement

This research was approved and monitored by the Human Subjects Protection Committee at the RAND Corporation.

Conflict of Interest Statement

None of the authors has any disclosures or conflicts of interest to report.

INTRODUCTION

Approximately 70% of unaccompanied homeless youth under age 25 are current cigarette smokers.¹⁻³ Of current smokers, 72% are current users of alternative tobacco products (ATPs), such as electronic (e-) cigarettes/vaping devices (vape mods), hookah, cigarillos/little cigars, and smokeless tobacco.⁴ Rates of cigarette smoking and ATP use among unaccompanied youth experiencing homelessness are higher than national estimates for young adults in general.⁵ Cigarette smoking harms physical health⁶ and concurrent use of cigarettes and ATPs likely potentiates these health risks,⁷ increases nicotine dependence,⁸ and probably does little to facilitate smoking cessation.⁹ That said, virtually nothing is known about why unaccompanied homeless youth use ATPs. These reasons are important to understand and document because it could have implications for reaching this underserved, high ATP using population to ensure that regulations and policies effectively limit their access to and use of cigarettes and other forms of tobacco. Downstream, preventing ATP use in homeless youth could help to improve their overall health and well-being, which is already compromised by harsh living conditions, substance use, and poor physical and mental health.¹⁻⁴

The goal of this qualitative study was to elicit information directly from unaccompanied homeless youth on their knowledge and use of different classes of ATPs, including the factors that they believe influence use and non-use of these products. Qualitative data is an important, highly informative step into areas where little information is available,^{10,11} and has become a valuable tool in tobacco regulatory research as new ATPs are introduced into the marketplace.^{12,13} As such, this study provides a first look at the factors that may influence use and non-use of ATPs in this population.

METHODS

Participants

Focus groups were conducted at 3 drop-in centers serving unaccompanied homeless youth in Los Angeles County. Participants were recruited through fliers posted at those centers instructing interested individuals to come to the center at a specific time to determine eligibility and to participate (if eligible). Individuals were eligible to participate if they: a) were ages 13–25; b) not currently living with or getting most of their support for food or housing from a parent/guardian; c) spent the previous night in a shelter, outdoor or public place, hotel or motel room rented with friends (because of no place else to go), or other place not intended as a domicile; and d) had smoked a cigarette or used an ATP in the past 30 days.

A total of 30 individuals participated across 4 focus groups. The sample was 80% men, 50% Hispanic, and 30% Black, 17% White, 20% multi-racial/other, 33% unspecified. Participants were between 18–24 years (M age = 22.1), reflecting the age range of clients typically served at these drop-in centers.

Procedures

The study was approved and monitored by the Human Subjects Protection Committee at RAND (protocol 2016–0511). Each focus group lasted approximately 60-minutes, with 7–8 participants attending each group. Two research staff were present at each focus group, one being primarily responsible for obtaining informed consent and leading the focus group discussion, and the other being primarily responsible for eligibility screening, survey administration, and participant payments.

The consent document that explained the study particulars was read out loud while participants read it to themselves. Once all questions about the research were answered, verbal informed consent was obtained from participants (no identifying information was collected). Participants then completed a brief anonymous self-report survey (assessing demographics, knowledge and use of different classes of ATPs) and engaged in the focus group discussion. A moderator guide was developed to lead participants through the discussion. The focus groups were structured around presentation of a specific ATP (eg, cigarillos, then natural cigarettes, etc.; see Table 1 for a listing of the products under consideration) and discussion of each ATP proceeded in turn. The following topic areas were discussed: 1) Participants' experiences using each ATP; 2) their motivations for using or not using each ATP; and 3) their likes and dislikes about specific ATPs. Concurrent use of ATPs was not specifically asked about. The focus group discussions were audio-recorded and transcribed verbatim by a professional firm. Participants were compensated \$20.

Coding procedures

The focus group transcripts were imported into Dedoose™, a software program for analyzing qualitative data.¹⁴ As a first step, JST and WGS broadly reviewed the transcripts and independently identified themes related to factors that influence the use/non-use of ATP products. After discussion of these themes and consideration of concepts from the literature that have been identified as associated with tobacco use more generally,^{15–26} an initial version of a codebook was built that explicitly defined 8 themes related to factors that influence ATP use and non-use (see below and Table 2). JST and MMA then independently coded excerpts from one transcript based on the 8 themes defined in the codebook and reconvened to compare their codes; coding discrepancies were resolved through discussion with WGS. After making minor adjustments to the codebook (eg, refining definitions and inclusions and exclusion criteria for coding excerpts into specific themes), JST then coded one additional transcript and MMA coded the final 2 transcripts using these 8 themes. Inter-rater reliability testing was conducted on 25 randomly selected excerpts taken from these transcripts. Pooled Kappa scores were 0.91 and 0.93 indicating strong shared knowledge of the codes.^{27,28}

In total, 239 individual excerpts were identified and coded into one of the 8 themes. Of the 239 excerpts, 65 were given multiple codes (i.e. Sensory and Emotion); this meant that there were 304 theme codes applied to the 239 excerpts.

RESULTS

Survey results: Knowledge and use of ATPs

As shown in Table 1, participants reported widespread knowledge and lifetime use of most of the ATPs that we examined. In the past 30 days, most participants had used natural cigarettes, e-cigarettes, vape mods, and little cigars, cigars, and cigarillos; over one-third had recently used a hookah. Relatively few reported current use of clove cigarettes or snus. Nearly all participants (97%) had smoked a regular cigarette (eg, Marlboro, Camel) in the past 30 days.

Focus group results: Themes associated with use/non-use of ATPs

Eight themes emerged from the analysis of the focus group transcript data (see Table 2 for definitions and details): Cost; Emotional States; Marijuana; Nicotine Effects; Physical Health; Quitting; Sensory Experience; and Social Factors. For purposes of coding, we combined e-cigarettes and vape mods into a single ATP class, and cigarillos and little cigars into another single ATP class. Table 3 presents the counts for the number of times a specific theme was mentioned for a given ATP (eg, of the 73 excerpts related to hookah use, 2 referred to Cost and 17 referred to Emotional States). Hookah, cigarillos/little cigars, and e-cigarettes/vape mods generated the most discussion during the focus groups. Roll-your-own cigarettes were introduced as a topic of discussion, but generated only 2 codable excerpts; as such, this ATP class is not discussed further. Table 4 presents an index of the degree to which the discussion of a specific ATP was dominated by a specific theme (row percentages). In the results below, only dominant themes for each ATP are discussed. Quotes from the focus group discussions are provided below to highlight the tone and content of each theme pertaining to the use/non-use of specific ATPs.

Hookah.—The most common theme for hookah was Emotional States (i.e., 23% of all hookah excerpts focused on the extent to which emotional states were associated with use/non-use). The identified excerpts related to this theme were overwhelmingly positive:

“Like, it doesn’t knock me out, but it’s just more of like chills me down to where I won’t get hyper or anything, I’ll just be like chill”;

“They’re more relaxing for me and they’re more satisfying”.

Social characteristics also dominated the conversation about hookah (22% of excerpts) and referred mostly to the belief that hookah is best used with other people:

“It’s very fun as a social aspect”;

“If you ever smoke a hookah by yourself it’s the most lonely experience you’ll ever have.”;

Nicotine Effects was the next most common theme discussed (19% of excerpts), with comments that mostly concerned the strength of nicotine-induced pharmacological effects experienced with hookah use:

“It’s stupid potent. It’s like taking like 3 drags off the hookah is like a full pack of cigarettes”;

“I just like the rush. But it’s really harsh”;

The third most common theme was Sensory Experience (15% of excerpts), with most comments being positive:

“It smells good and it tastes good”;

“I like flavored tobacco, I like the fruit flavor. I like the hint of fruit”;

In summary, hookah use was viewed as a positive emotional and sensory experience and it was clearly viewed as a social activity. The pharmacological effects of hookah, though, were perceived as quite strong compared to cigarettes.

E-cigarettes/vape mods.—The most common theme associated with e-cigarettes/vape mods was Physical Health (25% of all e-cigarette/vape mod excerpts) and these were split evenly between perceptions of (1) negative health effects by themselves:

“I heard on the news that they can like mushroom your lungs”;

“It hurts the lungs”;

(2) perceptions of e-cigarettes/vape mods as being as harmful as cigarettes:

“Honestly, it’s just as bad if you ask me”;

“People mistaken vape for a healthier option”;

and finally (3) as healthier compared to cigarettes:

“I switched to vapes, and after 2 months into the vape I got most of the [singing] range I lost [from smoking cigarettes] back”;

“They’re not as harsh on your throat, or as bad on your lungs”;

Cost and Nicotine Effects (12% of excerpts each) were 2 themes that were mentioned next most often. Comments related to Cost mostly concerned the high financial cost of e-cigarettes/vape mods relative to cigarettes:

“A vape mod, is so much more expensive than a pack of cigarettes”;

“Because the box—you pay for the box, the battery, the coil, the canister, everything individually”;

Comments about Nicotine Effects were mostly negative:

“Sometimes the vape will spit up in your mouth and the fluid will almost instantly mix with your spit and make you want to throw up”;

“[Vaping] too much of it in one sitting will make you feel queasy”.

In summary, most of the comments about e-cigarettes/vape mods were negative: they were perceived as at least as harmful as cigarettes, as costing more than cigarettes, and as having particularly potent (negative) nicotine effects. However, within this overall negative context, some participants considered e-cigarettes/vape mods as a healthier alternative to cigarettes.

Cigarillos/little cigars.—The most common theme that emerged from the discussions of cigarillos/little cigars was Marijuana (32% of all cigarillo/little cigar excerpts); these comments mostly pertained to using cigarillos as a convenient, discrete, or routine way of smoking marijuana:

“I use those when I roll up or smoke weed”;

“I used to roll joints out of them”;

Cost (27% of excerpts) was the second most common theme used to describe cigarillos/little cigars, and most of these comments related to the belief that cigarillos/little cigars were less expensive than other ATPs:

“If you don’t have money for a pack of cigarettes...50 cents, a dollar, for a Black & Mild”;

“89 cents for a Black & Mild...it’ll last you all day”;

Finally, Social Factors was the third most common theme (15% of excerpts), with comments mostly reflecting perceptions that cigarillo use conveyed positive social status:

“Plus you look like a bad motherfucker with it; no one’s going to mess with you”;

“You’re classy [if you use them]”;

In summary, cigarillos/little cigars were believed to be cost-effective and as a way to discreetly smoke marijuana. Additional positive attributes included the perception that use of these products conveys positive social standing.

Smokeless tobacco.—The most common theme that emerged for smokeless tobacco was Nicotine Effects (35% of all smokeless tobacco excerpts). Most of these comments were negative:

“I know people who put very little in their lip and they forget it’s there and they swallow it and it makes them horribly sick”;

“Oh man, that light head, I fell down the steps and everything, I was tripping”;

Physical Health was the next most frequently mentioned theme (28% of excerpts) and these comments were mostly negative:

“Causes mouth cancer”;

“I’ve seen people with like holes in their face because of chewing tobacco”;

Finally, Social was the third most commonly mentioned theme (16% of excerpts), with comments mostly related to perceived stigma associated with use of smokeless tobacco:

“It’s kind of rude if you just spit in front of somebody”;

“Nobody really does that [uses smokeless tobacco] in LA”;

In summary, the conversation surrounding smokeless tobacco was mostly negative; these products were perceived as stigmatizing, as having potent negative nicotine-related pharmacological effects, and as unhealthy.

Natural cigarettes.—The most common themes used to describe natural cigarettes were Cost and Physical Health (each accounting for 28% of all natural cigarette excerpts). Cost comments mostly related to concerns about the high price of natural cigarettes:

“Yeah, it was like not worth it for me”;

“If I have a pack of American Spirits, they’re like \$12 now”;

Physical Health comments were evenly split between concerns that natural cigarettes are as unhealthy as regular cigarettes:

“They say American Spirits are good for you but no they’re still bad for you”;

“I honestly don’t think any of these options are healthy”;

and opinions that natural cigarettes are less harmful than cigarettes:

“American Spirit is all natural and it’s 100% organic, there’s no extra chemicals, there’s no extra anything. And normal cigarettes use a fiberglass filter, while American Spirits use cotton.”;

“You feel healthier when you smoke [American Spirits]”;

Nicotine Effects was the third most commonly mentioned theme (24% of excerpts) and comments mostly related to beliefs that these products were not as strong as regular cigarettes:

“It felt like almost I was smoking air with American Spirits”;

“You don’t feel it like a regular cigarette”;

In summary, natural cigarettes were mostly perceived negatively due to their high financial cost and lack of potency. Although some believed that these products were as dangerous as regular (not natural) cigarettes, others felt that they were a more healthful option.

Snus.—Sensory Experiences was the most common theme that emerged from the discussions of snus (56% of all snus excerpts). These excerpts were split between positive sensory perceptions:

“The taste, they come flavored. So you can get fruit punch, you can get strawberry, you can get bubble gum, you can get original nicotine flavor”;

“The smell because you don’t have to have the tobacco smell in your hands”;

and negative sensory perceptions:

“It’s like drinking bong water”;

“Your breath smells like ass for a while”;

Physical Health was the theme mentioned next most often (37%), with the excerpts split between comments that viewed snus as having negative health effects:

“I feel like that’s way more intense and it kills you faster”;

“I personally know the side effects a little too well”;

and the perception that snus is safer than cigarettes:

“Instead of fucking up your teeth, it just leaves your lip numb”;

“These are just better because you’re not going to swallow it, don’t cut your lip open”;

In summary, perceptions of snus were mixed: they were perceived as having both positive and negative sensory characteristics and as being both healthier and less healthy than cigarettes.

Clove cigarettes.—The most common theme that emerged from discussions of clove cigarettes was Sensory Experiences (56% of excerpts). Some of these comments dealt with positive perceptions of taste:

“It’s cloves the spice but it’s got tobacco mixed with it. It tastes really good”;

“I personally liked the taste of the cloves more than the cigarettes themselves”;

but most reflected negative beliefs about taste:

“They taste nasty”;

“It’s kind of soapy”;

The second most common theme (19% of excerpts) involved Nicotine Effects, with excerpts related to the perception that clove cigarettes are not as strong as regular cigarettes:

“I had to smoke more of them to get the same nicotine fix”;

“It’s different, it’s not a cigarette”;

In summary, although some participants felt that clove cigarettes yielded a positive sensory experience, on balance this type of ATP was viewed negatively both in terms of unpleasant sensory characteristics and because it was perceived as weaker pharmacologically than regular cigarettes.

Focus group results: Homelessness as a characterizing feature of ATP use

Homelessness in relation to ATP use was not an explicit, dominant theme of the focus group discussions. The following quote was the only one to explicitly mention homelessness:

“When I first started smoking I started off with cigarillos, that was me personally, and then I moved on to cigars, I like cigars, I’m a cigar person. Once you become more homeless and unavailable to those products, you know, you just stick with whatever the heck you can get your hands on”;

However, many excerpts that were coded as having a Cost or Nicotine Effects theme could also be characterized by the perception that participants needed to satisfy a nicotine craving with as cost effective an ATP product as possible (relating to their need to obtain nicotine even with their low income):

“For like the situations that most of us come here and we don’t always have the money to buy Newports, Marlboros, American Spirits. But we smoke and we’ve been smoking for a long time, so we might say, okay, I have enough to buy cigars”;

“When I leave here I’m probably going to go buy a pack of American Spirits. But I’m probably only going to smoke a Spirit maybe once a day, and the rest of the time I’m going to be vaping because I’m not spending 12 dollars per pack”;

In summary, even though homelessness did not emerge as a separate codable theme per se, it did emerge occasionally and implicitly as participants’ considered ATP cost and weighed it against their perceived need to obtain nicotine.

DISCUSSION

This study identified factors associated with ATP use and non-use among unaccompanied homeless youth using a qualitative approach. There is almost nothing known about ATP use in young people experiencing homelessness, yet their use and co-use of multiple tobacco products, in the context of already compromised health and well-being, makes it an important public health priority.¹⁻⁴ Seven different classes of ATP were investigated and almost every one of the focus group participants had knowledge of most of these 7 ATPs (the exceptions being snus and clove cigarettes). Moreover, most participants had experimented with or were current users of natural cigarettes, e-cigarettes/vape mods, and little cigars/ cigarillos; neither smokeless tobacco, snus, nor clove cigarettes were the object of much experimentation or current use. These data are consistent with survey data from a previous study that found high rates of lifetime and current use of most ATPs⁴ and suggest that most unaccompanied homeless youth are poly tobacco users, and use a variety of products.

The qualitative data provided insights into factors that may influence the use and non-use of individual classes of ATPs. Homelessness colored their opinions to the extent that they felt as though they needed nicotine and wanted to find a cost effective means to obtain it. Beyond this general observation, participants were decidedly mixed in the characteristics they associated with specific ATPs. For example, our homeless sample attributed no negative characteristics to cigarillos/little cigars; rather these products were mostly viewed positively (eg, low cost, high perceived social status). Despite having clear health dangers,²⁹ negative health effects were almost never discussed. Similarly, negative health effects were not mentioned much with hookah, despite evidence to the contrary.³⁰

In contrast, e-cigarette/vape mods were viewed mostly negatively – in terms of perceived health risks, high financial cost, and nicotine effects - with only very limited discussion of the (correct) perception that these products are generally safer than combustible cigarettes.³¹ This finding is consistent with qualitative data from non-homeless young adults, many of whom perceived e-cigarettes and vaping devices as both more and as less harmful than regular cigarettes.¹² Yet almost no discussion centered on the use of e-cigarettes as a cigarette smoking cessation tool. Although some cigarette smokers have used them as cigarette smoking cessation devices,³² evidence is currently mixed or negative on their utility in this regard.³¹

Finally, consistent with other studies,^{13,33,34} we found that ATPs (i.e., little cigars/cigarillos) are often used as a marijuana delivery devices. Dual use could pose additional health problems³⁵ and needs greater research attention more generally, not just in homeless populations.²⁴

Limitations to this research should be noted. First, the sample size was small and reactively recruited from one area of the country; as such, the results may not be representative of younger or older homeless populations in other areas of the country. In addition, different results may emerge with individual interviews instead of focus groups. Second, survey responses were not linked to focus group responses, so it is impossible to study how individual differences (eg, in homelessness severity; gender; LGBT status) affect beliefs about ATPs. Third, although the qualitative procedures that we used to collect, code, and analyze the data were standard,¹¹ some of the insights gained in this study need to be investigated further using larger, representative samples and quantitative methods. Moreover, we discussed only the most pertinent themes that emerged for each ATP; however, it is possible that low frequency themes identified in this study (themes that were mentioned only one or 2 times for a given ATP) could have more relevance for a given ATP and with a larger sample or longer focus group, those themes could have gained prominence. Finally, even though many of our results on ATP use are consistent with studies of non-homeless populations, potential differences between homeless and non-homeless populations need to be systematically explored in order to ensure that all populations are receiving optimal or targeted levels of prevention and treatment.

IMPLICATIONS FOR TOBACCO REGULATIONS

The FDA now has regulatory authority over the ATPs studied in this paper, making our results particularly timely. Our results highlight the need for policies and programs targeting this vulnerable, understudied population that address all tobacco products, including their co-use with marijuana, and are feasible to deliver in the settings where unaccompanied homeless youth typically seek services (eg, drop-in centers). For example, our results suggested that many of these young people are not well-educated about the health harms of some ATPs (eg, cigars/little cigarillos; natural cigarettes) whereas they are misinformed about the relative safety of others (i.e., vaping products; electronic cigarettes). This presents an opportunity for public health education campaigns to ensure that accurate messages find creative ways to reach this typically underserved population of tobacco users (eg, through campaigns that are delivered in channels easily accessible to them; eg, drop-in centers; local hang-outs). Our results also suggest that cost is an important consideration in the selection of specific ATPs in this population (eg, cigarillos are often selected because they deliver adequate levels nicotine and are relatively inexpensive compared to regular cigarettes and vape mods). This could suggest that price discounts or other incentives and their promotion/advertising need to be scrutinized and possibly eliminated as has been done in some communities (eg, as in Providence, RI) to reduce access and use in this price sensitive population. Overall, this research and other studies with this population⁴ indicate a clear need for policies and regulations to address dual and poly-tobacco use among young people experiencing homelessness.

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Table 1.

Knowledge and Use (Lifetime and Past Month) of Regular cigarettes and ATPs

Product	% Heard of Product	% Lifetime Use	% Past Month Use
Regular cigarette (eg, Marlboro, Camel)	100%	96%	97%
Natural cigarette (eg, American Spirit)	96%	77%	81%
Hookah	100%	84%	39%
E-cigarette	100%	76%	76%
Vape mod	80%	72%	61%
Cigarillo	100%	73%	71%
Cigar	96%	68%	54%
Smokeless tobacco	96%	36%	17%
Snus	67%	20%	7%
Clove cigarettes	55%	12%	13%
Using e-cigarette/vape mod to smoke marijuana	100%	92%	72%

Table 2.

Themes Emerging from Focus Groups Related to Reasons Participants May or May Not Use ATPs

ATP Characteristic	Definition
Cost	Includes statements about financial costs associated with ATP use. Cost has been cited in myriad previous studies as important for determining tobacco use in young people. ¹⁶
Emotional States	Includes statements about how emotional states are associated with ATP use. Tobacco use has been explicitly related to both positive and negative mood states. ^{18,19}
Marijuana	Includes statements that associate smoking marijuana with ATPs use. Marijuana and tobacco use often co-occur in young people. ²⁴
Nicotine Effects	Includes statements about the acute effects of nicotine that accompany ATP use. Acute pharmacological effects of nicotine (eg, nausea, lightheadedness) are associated with tobacco product use. ²⁰
Physical Health	Includes statements about physical health effects associated with ATP use. Beliefs about the negative health effects of tobacco are important for determining use. ^{17,23}
Quitting	Includes statements about how ATPs are related to quitting tobacco. Use of ATPs have been cited by users as a method for quitting cigarette smoking. ²²
Sensory Experiences	Includes statements about sensory factors (taste, smell) are associated with ATP use. Sensory experience when using tobacco products is an important feature associated with use. ¹⁵
Social Factors	Includes statements about social factors associated with ATP use. Tobacco use often occurs in social settings or is perceived as a social activity. ^{21,23}

Table 3.

Response counts per theme by type of ATP

	Characteristic								
	Cost	Emotional	Marijuana	Nicotine	Physical health	Quitting	Sensory	Social	Row Total
Hookah	2	17	4	14	9	0	11	16	73
e-cigarette/vape mods	8	3	2	9	17	7	8	15	69
Cigarillos/little cigars	15	1	19	3	3	2	5	9	57
Smokeless tobacco	3	1	0	15	12	0	5	7	43
Natural cigarettes	7	2	0	6	7	0	0	3	25
Snus	0	0	0	2	7	0	9	1	19
Clove cigarettes	1	0	0	3	2	1	9	0	16
Roll-your-own	1	0	1	0	0	0	0	0	2
Column Total	37	24	26	52	57	10	47	51	304

Table 4.

For each type of ATP, % of excerpts related to each theme (row percentages)

		Characteristics								Row Total
		Cost	Emotional	Marijuana	Nicotine	Physical health	Quitting	Sensory	Social	
ATP	Hookah	3%	23%	5%	19%	12%	0%	15%	22%	100%
	E-Cigarettes/vape mods	12%	4%	3%	13%	25%	10%	12%	22%	100%
	Cigarillos/little cigars	26%	2%	33%	5%	5%	4%	9%	16%	100%
	Smokeless tobacco	7%	2%	0%	35%	28%	0%	12%	16%	100%
	Natural cigarettes	28%	8%	0%	24%	28%	0%	0%	12%	100%
	Snus	0%	0%	0%	11%	37%	0%	47%	5%	100%
	Clove cigarettes	6%	0%	0%	19%	13%	6%	56%	0%	100%
	Roll-your-own	50%	0%	50%	0%	0%	0%	0%	0%	100%