Tobacco Module

SUPPLEMENT 1

This section contains questions about tobacco use and your experiences with tobacco education at school.

1. Have you ever vaped tobacco or nicotine?

A) No
B) Yes

IF 1=A, GO TO 13; ELSE GO TO 2

2. How old were you when you first tried vaping?

A) 10 years old or younger
B) 11 years old
C) 12 years old
D) 13 years old
E) 14 years old
F) 15 years old
G) 16 years old
H) 17 years old
I) 18 years old or older

3. Why did you first use vapes? ***(Mark all that apply.)***

A) To fit in/peer pressure
B) A family member used them
C) To try to quit using other tobacco products, such as cigarettes
D) They cost less than other tobacco products, such as cigarettes
E) They were easier to get than other tobacco products, such as cigarettes
F) They are less harmful than other forms of tobacco, such as cigarettes
G) They were available in flavors I like
H) I could use them unnoticed at home or at school
I) It looks cool
J) I was curious about them
K) To relax or relieve stress or anxiety
L) For the nicotine buzz
M) To control my weight
N) For some other reason

4. Have you vaped tobacco or nicotine in the past **30 days**?

A) No
B) Yes

IF 4=A, GO TO 13; ELSE GO TO 5

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5. Why do you currently use vapes? ***(Mark all that apply.)***

- **A)** To fit in/peer pressure
- **B)** A family member uses them
- **C)** To try to quit using other tobacco products, such as cigarettes
- **D)** They cost less than other tobacco products, such as cigarettes
- **E)** They are easier to get than other tobacco products, such as cigarettes
- **F)** They are less harmful than other forms of tobacco, such as cigarettes
- **G)** They are available in flavors I like
- **H)** I can use them unnoticed at home or at school
- **I)** It looks cool
- **J)** To relax or relieve stress or anxiety
- **K)** To focus or concentrate
- **L)** For the nicotine buzz
- **M)** Because I am "hooked"
- **N)** To control my weight
- **O)** For some other reason

6. How do you **usually** get your vapes (or pods or e-liquid)?

- **A)** I buy them myself
- **B)** I ask someone else to buy them for me
- **C)** Someone gives them to me
- **D)** I take them from someone
- **E)** I get them some other way

IF 6=A, GO TO 7; ELSE GO TO 8

7. Where do you **usually** buy your vapes (or pods or e-liquid)?

- **A)** From someone I know
- **B)** A store such as a convenience store, supermarket, gas station, or liquor store
- **C)** A vape shop or tobacco shop
- **D)** A mall or shopping center kiosk/stand
- **E)** On the internet (including apps)
- **F)** Through a delivery service (such as DoorDash or Postmates)
- **G)** Other

8. Have you ever purchased a vaping device (including disposable devices), pod, cartridge, single hit, or e-liquid refill **at school or on school property**?

- **A)** No
- **B)** Yes

9. Compared to one year ago, are you now vaping more, about the same, or less than before?

- **A)** More
- **B)** About the same
- **C)** Less

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10. Would you like to quit vaping?

- **A)** No
- **B)** Yes

11. How likely are you to try to quit vaping?

- **A)** Definitely will
- **B)** Probably will
- **C)** May or may not
- **D)** Probably will not
- **E)** Definitely will not

12. How much control do you have over whether you quit vaping?

- **A)** No control at all
- **B)** A little control
- **C)** Medium control
- **D)** A lot of control
- **E)** Total control

IF 12=A, GO TO 15; ELSE GO TO 13

13. How hard would it be for you to refuse or say "no" to a friend who offered you a vape?

- **A)** Very hard
- **B)** Hard
- **C)** Easy
- **D)** Very easy

14. How likely do you think it is that you will vape at least one time in the next year?

- **A)** I am sure it will not happen
- **B)** It probably will not happen
- **C)** There is an even chance (50–50) that it will happen
- **D)** It probably will happen
- **E)** It will happen for sure

15. Think about a group of 100 students (about three classrooms) in your grade. About how many students do you think vape tobacco or nicotine at least **once a month**?

- **A)** 0
- **B)** 10
- **C)** 20
- **D)** 30
- **E)** 40
- **F)** 50
- **G)** 60
- **H)** 70
- **I)** 80
- **J)** 90
- **K)** 100

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16. How do you feel about someone your age vaping nicotine or tobacco multiple times every day?

A) Neither approve nor disapprove
B) Somewhat disapprove
C) Strongly disapprove

17. How do you think your close friends would feel about you vaping nicotine or tobacco multiple times every day?

A) Neither approve nor disapprove
B) Somewhat disapprove
C) Strongly disapprove

18. Have you ever smoked cigarettes?

A) No
B) Yes

IF 18=A, GO TO 29; ELSE GO TO 19

19. How old were you when you first tried cigarettes?

A) 10 years old or younger
B) 11 years old
C) 12 years old
D) 13 years old
E) 14 years old
F) 15 years old
G) 16 years old
H) 17 years old
I) 18 years old or older

20. Have you smoked cigarettes in the past **30 days**?

A) No
B) Yes

IF 20=A, GO TO 29; ELSE GO TO 21

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21. Why do you currently smoke cigarettes? ***(Mark all that apply.)***

- **A)** To fit in/peer pressure
- **B)** A family member smokes them
- **C)** They are easier to get than other tobacco products, such as vapes
- **D)** They cost less than other tobacco products, such as vapes
- **E)** They are less harmful than other forms of tobacco, such as vapes
- **F)** They are available in flavors I like
- **G)** It looks cool
- **H)** To relax or relieve stress or anxiety
- **I)** To focus or concentrate
- **J)** For the nicotine buzz
- **K)** Because I am "hooked"
- **L)** To control my weight
- **M)** For some other reason

22. How do you **usually** get your cigarettes?

- **A)** I buy them myself
- **B)** I ask someone else to buy them for me
- **C)** Someone gives them to me
- **D)** I take them from someone
- **E)** I get them some other way

IF 22=A, GO TO 23; ELSE GO TO 24

23. Where do you **usually** buy your cigarettes?

- **A)** From someone I know
- **B)** A store such as a convenience store, supermarket, gas station, or liquor store
- **C)** A vape shop or tobacco shop
- **D)** A mall or shopping center kiosk/stand
- **E)** On the internet (including apps)
- **F)** Through a delivery service (such as DoorDash or Postmates)
- **G)** Other

24. Have you ever purchased cigarettes (or one cigarette) from someone **at school or on school property**?

- **A)** No
- **B)** Yes

25. Compared to one year ago, are you now smoking cigarettes more, about the same, or less than before?

- **A)** More
- **B)** About the same
- **C)** Less

26. Would you like to quit smoking cigarettes?

- **A)** No
- **B)** Yes

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27. How likely are you to try to quit smoking cigarettes?

- **A)** Definitely will
- **B)** Probably will
- **C)** May or may not
- **D)** Probably will not
- **E)** Definitely will not

28. How much control do you have over whether you quit smoking cigarettes?

- **A)** No control at all
- **B)** A little control
- **C)** Medium control
- **D)** A lot of control
- **E)** Total control

IF 28=A, GO TO 31; ELSE GO TO 29

29. How hard would it be for you to refuse or say "no" to a friend who offered you a cigarette to smoke?

- **A)** Very hard
- **B)** Hard
- **C)** Easy
- **D)** Very easy

30. How likely do you think it is that you will smoke one or more cigarettes in the next year?

- **A)** I am sure it will not happen
- **B)** It probably will not happen
- **C)** There is an even chance (50–50) that it will happen
- **D)** It probably will happen
- **E)** It will happen for sure

31. Think about a group of 100 students (about three classrooms) in your grade. About how many students do you think smoke cigarettes at least **once a month**?

- **A)** 0
- **B)** 10
- **C)** 20
- **D)** 30
- **E)** 40
- **F)** 50
- **G)** 60
- **H)** 70
- **I)** 80
- **J)** 90
- **K)** 100

32. How do you feel about someone your age smoking one or more packs of cigarettes a day?

- **A)** Neither approve nor disapprove
- **B)** Somewhat disapprove
- **C)** Strongly disapprove

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33. How do you think your close friends would feel about you smoking one or more packs of cigarettes a day?

A) Neither approve nor disapprove
B) Somewhat disapprove
C) Strongly disapprove

*During the past **12 months**, did you do any of these things **at school**?*

		No	Yes	Not Sure
34.	Have lessons about tobacco and its effects on the body	A	B	C
35.	Practice different ways to refuse or say "no" to tobacco offers	A	B	C

36. During the past **12 months**, have you talked with at least one of your parents or guardians about the dangers of tobacco use?

A) No
B) Yes

IF 1=B OR 18=B, GO TO 37; ELSE FINISH SURVEY

*In the **past 12 months**, did you do any of the following things at school to get help to quit vaping or smoking cigarettes?*

		No	Yes
37.	Go to a special group or class	A	B
38.	Talk to an adult at your school about how to quit	A	B
39.	Talk to a peer helper about how to quit	A	B