

# ***Tobacco Control 2008***

---

## *2008 Vermont Adult Tobacco Survey Report*

May 14, 2009



**DEPARTMENT OF HEALTH**  
Agency of Human Services

108 Cherry Street, PO Box 70  
Burlington, VT 05402  
1.802.863.7341  
healthvermont.gov

# Table of Contents

	Page
Introduction . . . . .	3
Methods . . . . .	5
Smoking in Vermont. . . . .	9
Smoking Cessation . . . . .	11
Quit Attempts . . . . .	12
Reasons for Quitting Smoking . . . . .	16
Cessation Methods. . . . .	18
Access to Cessation Assistance . . . . .	20
Program Awareness and Utilization . . . . .	24
Awareness and Use of VDH Smoking Cessation Programs . . . . .	26
Second Hand Smoke . . . . .	32
Health Care Providers and Smoking Interventions . .	44
Attitudes Toward Smoking . . . . .	48
Workplace Smoking . . . . .	52
Media Campaign Awareness . . . . .	57
Appendix A . . . . .	A-1
Appendix B . . . . .	B-1

# Introduction

## **Introduction**

This report updates the previous Vermont Adult Tobacco Survey (VTATS) report completed by the Vermont Department of Health (VDH), by incorporating 2008 VTATS data. Survey methodology is discussed in the next section. This section provides a brief overview of the Vermont Tobacco Control Program and the VTATS survey itself.

The Vermont Tobacco Control Program (VTCP) has a comprehensive structure and includes seven components recommended by the Centers for Disease Control (CDC). These are: community-based coalitions, school prevention curricula and policies, quit-smoking services, statewide training, mass media and public education, enforcement of youth access laws, and evaluation.

The VTCP set the goal of reducing the adult smoking rate from 20% in 2000 to 11% by 2010. Reducing youth smoking rates has also been a priority for the VTCP. Progress has been made in attaining both of these milestones. However, achieving the adult goal still remains ambitious as the 2008 adult smoking rate was 17%. The youth smoking rate has declined sharply in recent years from 31% in 1999 to 16% in 2007. (Note: Adult smoking prevalence is measured by the Behavioral Risk Factor Surveillance System (BRFSS), while youth smoking prevalence is measured by the Youth Risk Behavior Survey (YRBS)).

As part of its efforts to help Vermonters stop smoking, the VTCP has implemented cessation programs including the Vermont Smoker's Quit Line and the hospital-based Quit in Person program. The former is a telephone-based intervention while the latter is an in-person, face-to-face program. Each provides service to more than 1,500 Vermonters in a given year.

The VTATS is a telephone survey used to help evaluate the effectiveness of VTCP efforts to reduce smoking and increase awareness and knowledge of smoking related issues among Vermont adults. This evaluation tool has been implemented each year since 2001. However, the VTATS is not part of a national survey and data should not be directly compared to that from other states.

# Methodology

## Methodology

The VTATS is a telephone-based survey of non-institutionalized Vermont adult (18+) residents over an eight week period during the fall of each calendar year. The VTATS includes over-sampling of both smokers and 18-24 year olds.

In 2002, the VTATS was redesigned and as a result many questions asked in 2002 were not comparable to those asked in 2001. Following consultation with external partners and the VTCP independent evaluator, Research Triangle Institute (RTI), the VTATS was revised again in 2003 to be more comparable to the instrument used in 2001.

In 2008, the VTATS included cell phones for the first time and a target of 1600 completed surveys was set: 700 among current smokers and recent quitters, 700 non-smokers and former smokers who stopped smoking more than one year ago and 200 cell phone. Prior to 2008, the sample included 2,000 respondents each year: 1,000 in each category.

Due to space limitations on the cell phone component of the survey, several questions were asked only on the landline version and these are noted throughout the report.

It should also be noted that, due to the addition of cell phones to the survey sample, the 2008 sample weight was calculated by RTI. Prior to 2008, VDH created the weight. Differences in weighting methodology, along with the addition of the cell phone sample may affect survey results.

The following table includes various definitions used throughout the 2007 VTATS report:

<b>Smoking Status</b>	
Current smoker	Smoked at least 100 cigarettes in life and now smoke every/some days
Former smoker	Smoked at least 100 cigarettes in life and now do not smoke at all (includes recent quitters)
Recent quitter	Former smoker who quit within past 12 months
Smoker	Either current smoker or recent quitter
Nonsmoker	Did not smoke 100 cigarettes in life or former smoker who quit for more than 12 months
<b>Income</b>	
Low	Vermonters with annual household income less than \$25,000
Middle	Vermonters with annual household income \$25,000 to \$74,999
High	Vermonters with annual household income \$75,000 or higher

VTATS 2008 data were compared to data from the year directly preceding (2007) and the earliest year the data were collected. Unless otherwise noted, the first time a data point was included on the VTATS was 2001. Results for 2008 generally were significantly better in 2008 than those in the earliest years of the survey. Cases where the difference from 2001 to 2008 is significantly better or worse in 2008 are always noted<sup>1</sup>. Differences were considered statistically significant when p-values were less than 0.05.

<sup>1</sup>Statistical differences between proportions were assessed using Rao-Scott adjusted F statistics; those between means were assessed using general linear modeling and Wald chi statistics adjusted for the complex design.

## **Methodology (Continued)**

Trend data are included in this report. Overall, many of the measures followed a pattern of a large reported increase in the first years of the survey (e.g., 2002 to 2003 or 2003 to 2004) followed by small increases or a leveling off. In the report, trends are only discussed if there has been a more recent change or the data is different from this general pattern.

VTATS 2008 data were analyzed by demographic subgroup for this report. These analyses utilized the following variables: age, gender, and household income. Smoking among Vermonters with low socio economic status is a focus of the VTCP and is included in its plan to address health disparities. Mental health status, another component of the health disparities plan, was not assessed in 2008. The VTCP plans to assess mental health status again in the future.

On the following page, **Table 2** presents the sample characteristics for 2008 VTATS data. The table breaks out the sample by smoking status, gender, age group, education level, income level and mental health status.

Also included in Table 2 is the CASRO response rate for the 2008 VTATS (33% for landline), an increase from 22% in 2007. The CASRO response rate for cell phone calls was 27%, however it is important to note that there is not yet a standard formula for cell phone response rates. The contractor calculated a rate based on the information available currently. Trend data for this information can be found in Appendix A, page A-2.

Table 2: Sample Characteristics		2008				
		Landline Number (N)	Cell Phone Number (N)	Total Number (N)	Un-weighted %*	Weighted %
Overall		1624	256	1880	100%	100%
Gender	Female	957	121	1078	57%	51%
	Male	667	135	802	43%	49%
Age Group	18 to 24 years	150	54	204	11%	12%
	25 to 44 years	378	93	471	25%	32%
	45 years and older	1070	102	1172	62%	54%
Education	Less than high school	102	7	109	6%	4%
	High school	480	78	558	30%	31%
	Some college	375	57	432	23%	20%
	College or higher	657	108	765	41%	45%
Income*	Low (< \$25,000/ year)	348	42	390	21%	19%
	Middle (\$25,000 - \$74,999)	707	106	813	53%	43%
	High (\$75,000+ / year)	340	72	412	22%	25%
Smoking Status						
	Current smoker	467	57	524	28%	19%
	Recent quitter (quit ≤ last year)	42	12	54	3%	4%
	Former smoker (quit > year ago)	383	50	433	23%	24%
	Never smoker	726	136	862	46%	53%
	Smoker (current smokers/recent quitters)	509	69	578	31%	22%
	Non-Smoker (former/never smokers)	1109	186	1295	69%	78%
Overall Response Rate**		33%	27%	--	--	--

\*Note that in 2008 the income variable does not include imputed data for missing values. Though not presented, missing values are included in denominator of all percents.

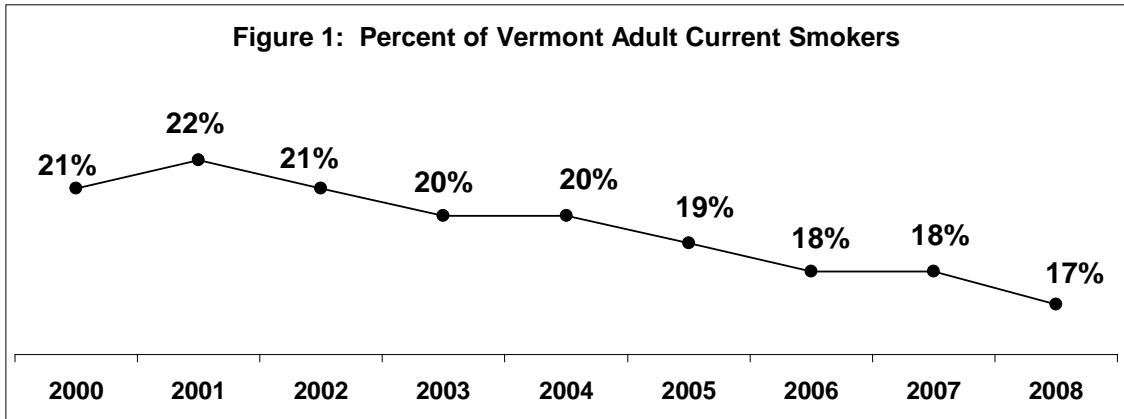
\*\*Based on Behavioral Risk Factor Surveillance System (BRFSS) Council of American Survey Research Organizations (CASRO) response rate.



# Smoking in Vermont

# Smoking in Vermont, 2008

Since 2000, smoking has decreased from 21% to 17% in 2008. In Vermont, smoking prevalence is measured by the Behavioral Risk Factor Surveillance System (BRFSS), not the VTATS. (Figure 1.)



For the first time since 1991, smokeless tobacco prevalence was also measured on the BRFSS in 2008; 3% of adults said they currently use smokeless tobacco. This is higher than the 2% in 1991, but not significantly so.

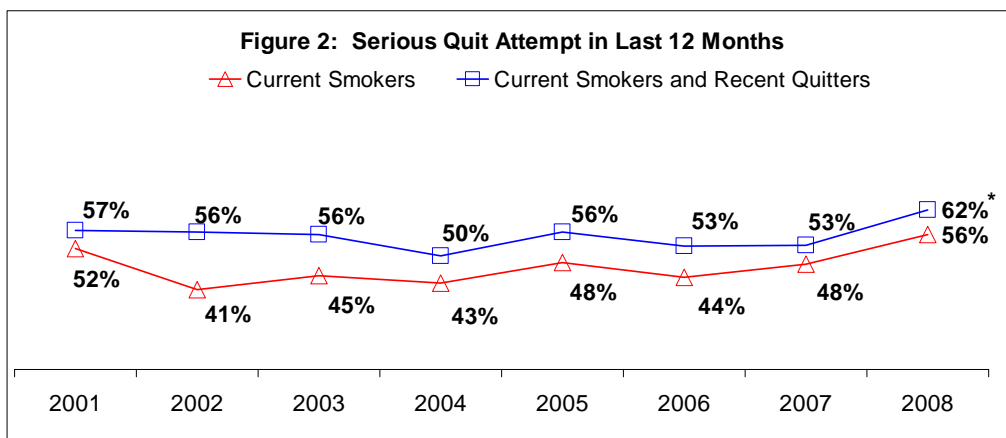
# Smoking Cessation

# Smoking Cessation

## Quit Attempts

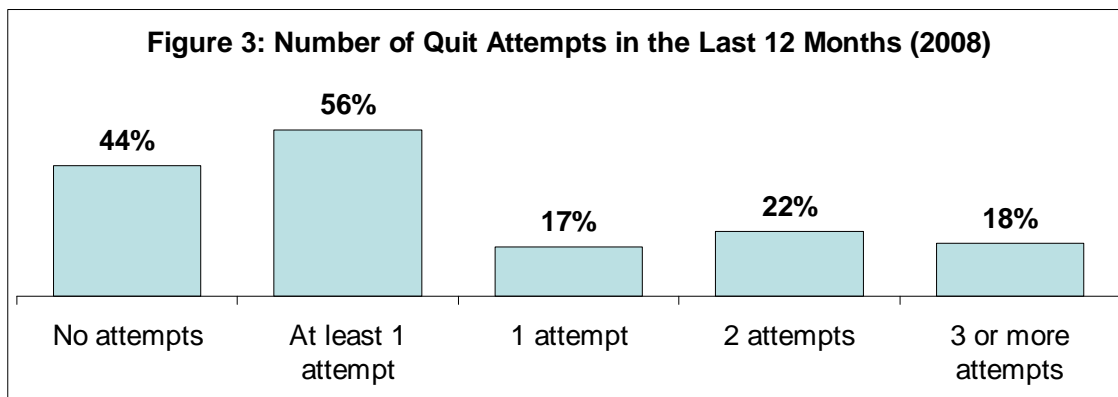
In 2008, more than half of current smokers reported making a serious quit attempt in the last year (56%). If those who succeeded in quitting in the past year are included, that number increases to 62%. (**Figure 2**)

Quit attempts among smokers in 2008 are significantly increased over those in 2007. Current smoker quit attempts were also up, but not significantly. There have been no significant changes in quit attempts among current smokers or current smokers and recent quitters since 2001.

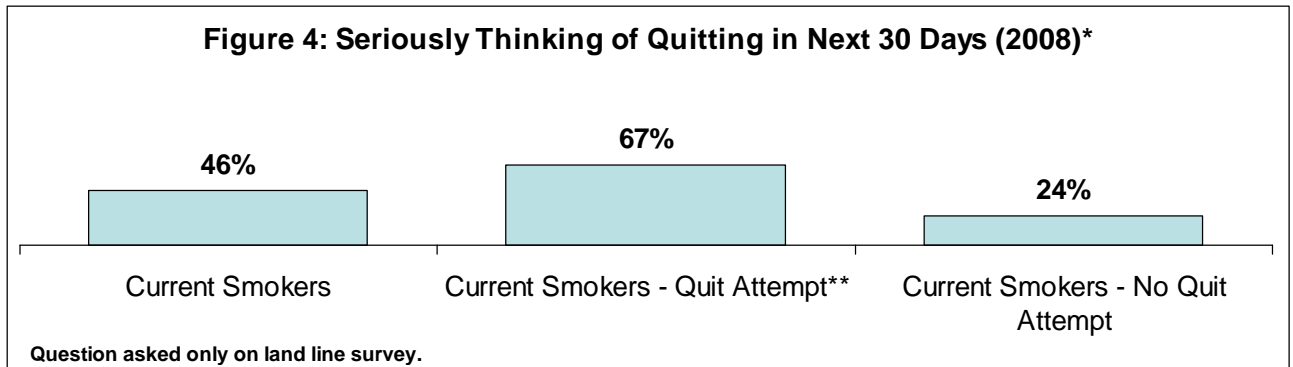


\*Significantly higher in 2008 than in 2007.

**Figure 3** shows how many serious quit attempts current smokers made in the past year. Less than one-fifth made one attempt. Twenty-two percent made two attempts and 18% made three or more attempts to quit smoking. In 2008, those reporting one quit attempt in the last year was significantly lower than in 2001. No other changes in the distribution of quit attempts since 2001 are statistically significant (see page A-3 of Appendix A).



Overall, nearly half (46%) of Vermont's current smokers were seriously thinking of quitting in the next 30 days. Among those with a recent quit attempt, two-thirds reported seriously thinking of quitting in the next month. About a quarter (24%) of those without a quit attempt in the last year said the same. The difference between those with a without a recent quit attempt was statistically significant (**Figure 4**).



\*Question sequence was different in 2008; respondents were only asked about thinking of quitting in next 30 days. In years prior this was preceded by a question about quit intentions for next six months.

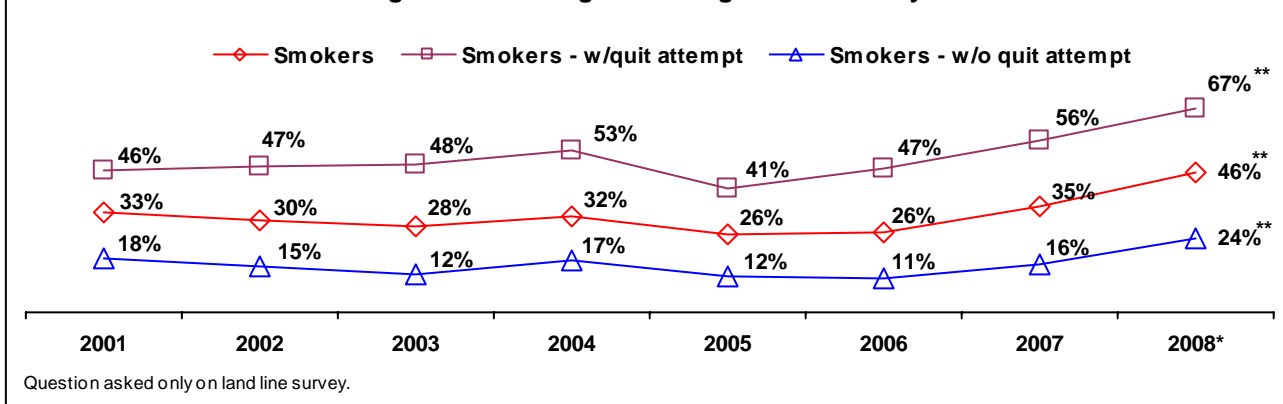
\*\*With a serious quit attempt significantly more likely to report thinking of quitting in the 30 days than those without a serious quit attempt.

In 2008, the proportion of current smokers thinking of quitting in the next 30 days was higher than that in 2007 (46% vs. 35%). This difference was not statistically significant. As compared to 2001, significantly more smokers said they were thinking of quitting in the next 30 days (33% in 2001). Smokers with and without a quit attempt in the last year more often said they were thinking of quitting soon in 2008 than in 2007 and 2001. The only statistically significant difference was among smokers who made a quit attempt during the past year thinking of quitting more in the next 30 days in 2008 compared to 2001 (**Figure 5**).

It should be noted that in 2008 the question sequence was different than in 2007. In 2007, the 30 day question was preceded by a six month one. The six month question was not asked in 2008. It is likely that at least some of the increase from 2007 to 2008 in those reporting thinking of quitting in the next 30 days is from respondents who in years past would have said 'yes' to thinking of quitting in the next six months, but no to the 30 day question.

In 2008, the only significant difference by demographic group regarding thinking of quitting smoking soon was for income level. Those with high incomes were less likely to be thinking of quitting in the next 30 days than those of middle incomes (29% vs. 52%). Smokers in high income households were also less like than those in low income ones to be thinking of quitting smoking soon (29% vs. 43%), however, this difference was not statistically significant.

**Figure 5: Thinking of Quitting in Next 30 Days**



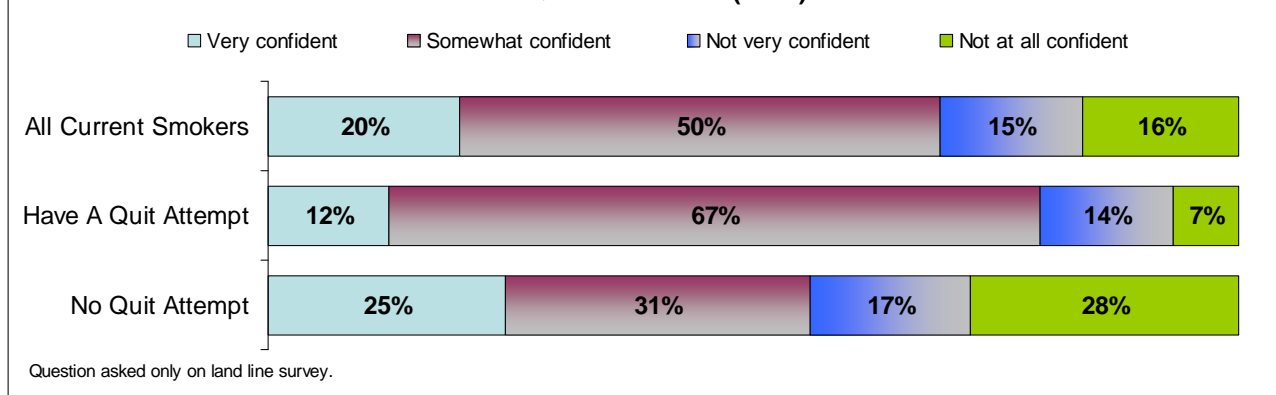
\*Question sequence was different in 2008; respondents were only asked about thinking in quitting in next 30 days. In years prior this was preceded by a question about quit intentions for next six months.

\*\*Significantly higher in 2008 than in 2001.

Despite the large proportion of current smokers who were thinking about quitting, only one-fifth reported they were *very confident* in their ability to quit in the next month (**Figure 6**).

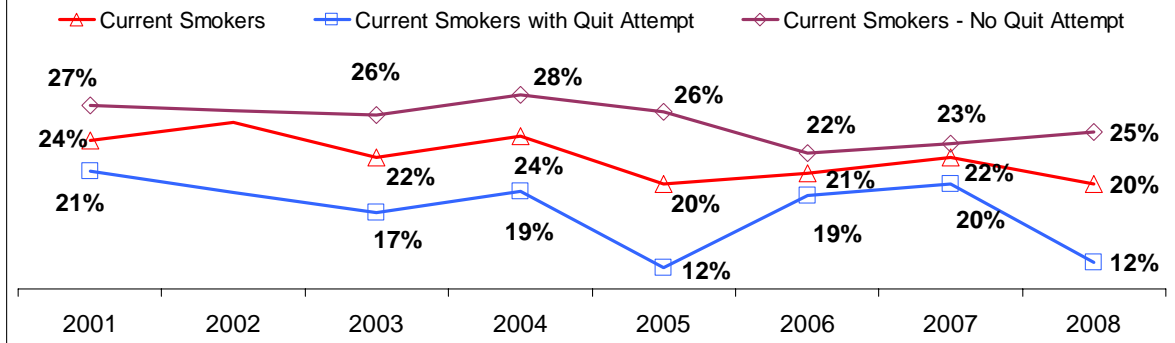
Those who recently tried to quit were more likely to express being at least somewhat confident in their future ability to quit than those who have not tried to quit (79% vs. 56%).

**Figure 6: Current Smoker Confidence in Ability to Quit Next Month (2008)**



There has been little change in the proportion of all current smokers who were *very confident* in their ability to quit (**Figure 7**). Similarly, the percentage of current smokers *very* and *somewhat* confident decreased slightly from 71% in 2007 to 69% in 2008. The 2008 value is also similar to the 64% reported in 2001.

**Figure 7: Current Smokers Who Are Very Confident They Can Quit Smoking in Next Month**

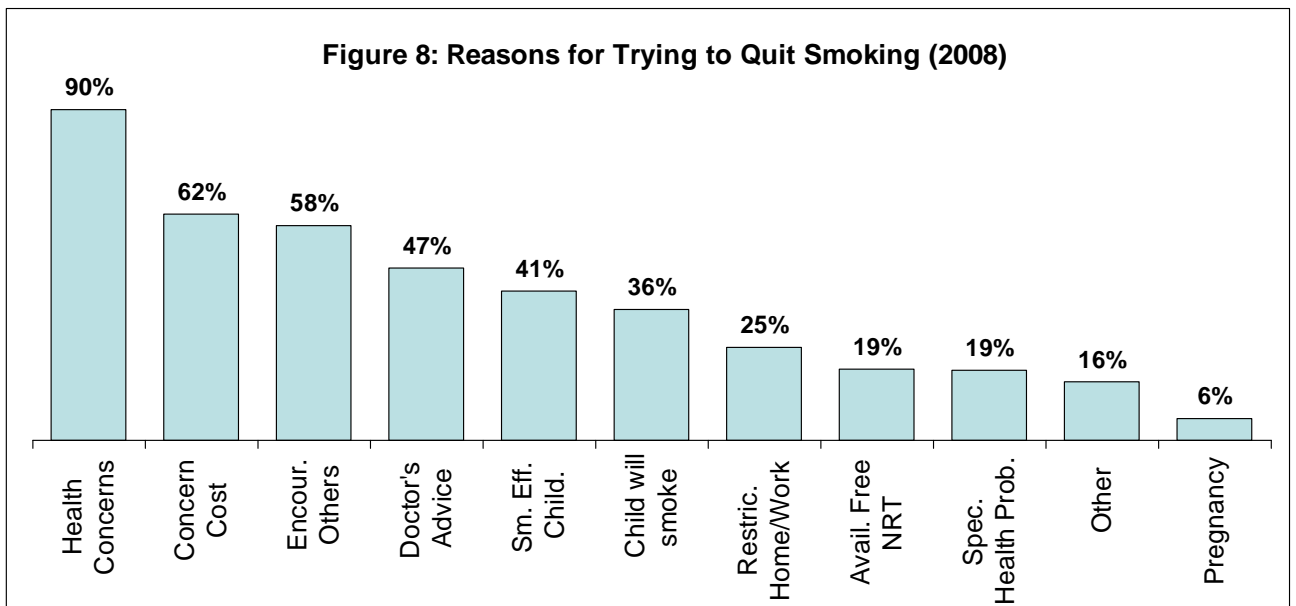


### Reasons for Quitting Smoking

Current smokers indicated many reasons for trying to stop smoking. Concern over the health effects of smoking has consistently been the top reason given for trying to stop smoking (90% in 2008). This was followed by concerns over the cost of smoking and encouragement from others (62% and 58% respectively). Other reasons include: **(Figure 8)**.

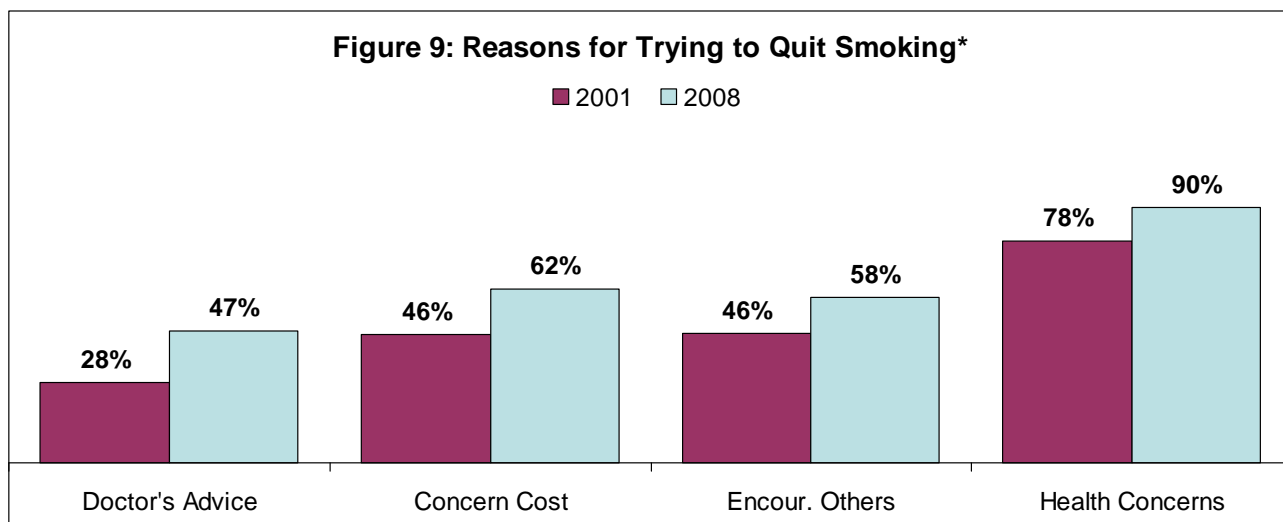
- Nearly half tried to quit on their doctor's advice (47%).
- About two-fifths quit due to concerns over how their smoking may directly effect children (41%) or may encourage children to smoke (36%).
- A quarter cited restrictions on smoking either at home or the workplace (25%).
- About one-fifth listed a specific health problem (19%), the availability of free or reduced cost nicotine replacement therapy (19%) or another reason (16%).
- Less than one in ten cited pregnancy or a partner's pregnancy (6%).

**Figure 8: Reasons for Trying to Quit Smoking (2008)**



Smokers cited nearly all reasons more often in 2008 than in 2001, but the increases were only significant for four reasons: a doctor’s advice, cost, encouragement from others, and concerns about health (**Figure 9**). Pregnancy or a partner’s pregnancy was the lone reason not reported as a reason for quitting more often in 2008 than in 2001 (6% vs. 10%). This change was not statistically significant.

As compared with 2007, only specific health problems was cited significantly less often in 2008. The proportion giving this reason significantly decreased from 32% in 2007 to 19% in 2008 (see page A-4 of Appendix A).



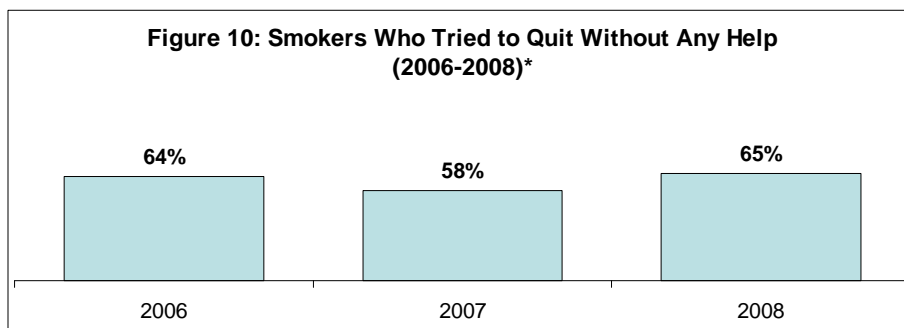
\*Reasons in this figure were reported significantly more often in 2008 than in 2001; no other reasons were cited significantly more often in 2008.

## Cessation Methods

In 2008, 65% tried to quit without help in their most recent quit attempt (**Figure 10**). Questions regarding the most recent quit attempts were first added to the survey in 2006, when 64% reported quitting on their own. The two-thirds reporting the same in 2008 was not statistically different than either 2006 or 2007.

It should be noted that the question sequence in 2008 was different than in 2007. In 2007, the “cessation methods used during most recent quit attempt” question was preceded by a “cessation methods ever used” question. The “ever” question was not asked in 2008. This change may have some effect on responses given by smokers regarding the quit methods used during their most recent quit attempt.



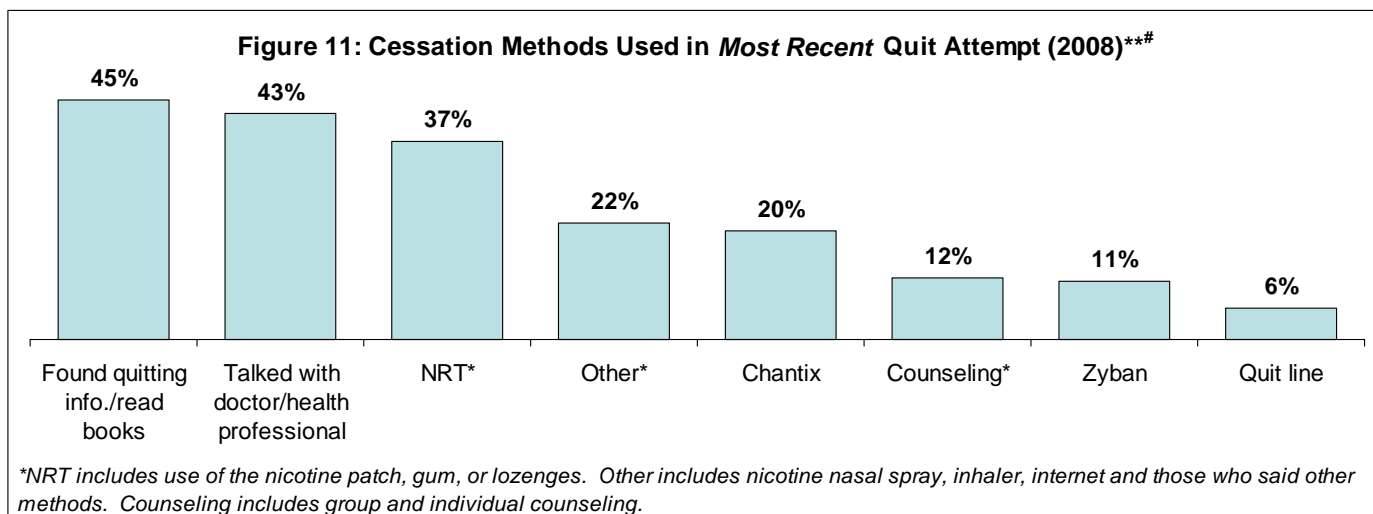


\*Question sequence was different in 2008; respondents were only asked about methods used in most recent quit attempt. In years prior this was preceded by a question about methods ever used to try and stop smoking.

During their most recent quit attempt, more than two-fifths of current smokers reported they found information and read books about quitting (45%) and talked with a doctor or other health professional (43%) (**Figure 11**). Slightly less said they used NRT (37%). A fifth used “other” methods in their most recent quit attempt (22%) and 10% or fewer reported using the remaining cessation methods.

Use of Chantix and books/information during the most recent quit attempt both significantly changed from 2007 to 2008 (2% to 11%). Chantix use increased from 11% to 20% while utilization of information and books increased from 29% to 45%.

VTATS 2006 and 2007 data for cessation methods used in most recent quit attempt are on page A-5 of Appendix A.



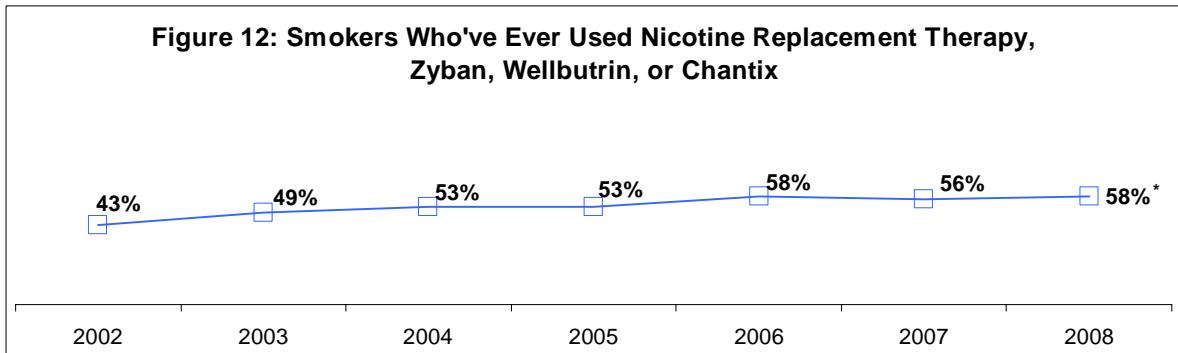
\*NRT includes use of the nicotine patch, gum, or lozenges. Other includes nicotine nasal spray, inhaler, internet and those who said other methods. Counseling includes group and individual counseling.

\*\*Use of Chantix and found quitting information or read books increased significantly from 2007 to 2008. No other changes were statistically significant.

#Question sequence was different in 2008; respondents were only asked about methods used in most recent quit attempt. In years prior this was preceded by a question about methods ever used to try and stop smoking.

For Vermont adults who try to quit smoking, the use of NRT or other medications is suggested. A majority of current smokers (58%) had 'ever' used NRT, Zyban, Wellbutrin or Chantix in an attempt to stop smoking (**Figure 12**).

This proportion did not change from 2007 to 2008, however, it has significantly increased from 2002 to 2008. Note that Zyban and Wellbutrin were added to this question in 2003 and Chantix in 2006.



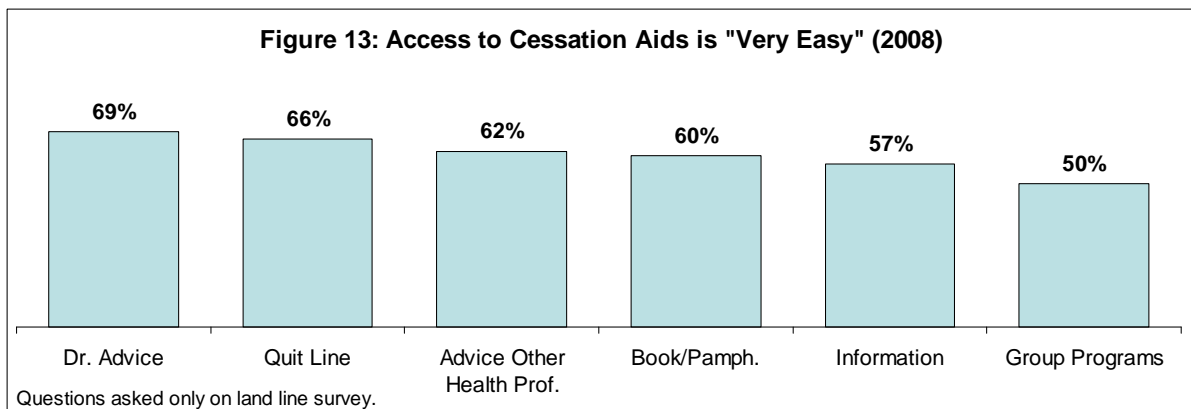
\*Significantly higher in 2008 than in 2002; change from 2007 to 2008 was not statistically significant.

## Access to Cessation Assistance

In 2008, at least half of smokers reported ease of access to each cessation aid as "very easy." Two-thirds said access to a doctor's advice and a smoker's Quit Line is "very easy" (69% and 66% respectively). Slightly less reported the same about advice from other health professionals (62%), access to booklets/pamphlets (60%) and information (57%) about quitting.

Half of smokers said they thought it was "very easy" to access group programs for people who want to quit (50%) (**Figure 13**).

From 2007 to 2008, none of the changes in smokers' perceived access to cessation methods were statistically significant.



In general, female smokers were as or more likely to find access to cessation aids *very easy* than male smokers and younger smokers. However, none of the differences were statistically significant.

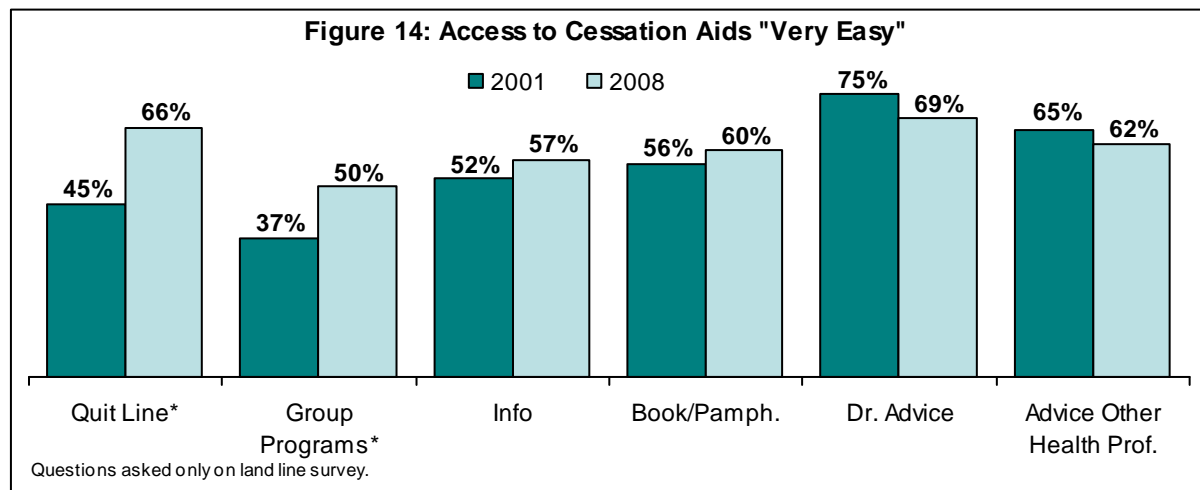
Those with middle household incomes were significantly more likely than those with low incomes to report access to information about quitting and getting in touch with group programs as *very easy*. No other differences by income level were statistically significant.

Due to small numbers, analysis by age group was not conducted.

Since 2001, the perception of the Quit Line as easy to access increased 21% (from 45% to 66%). In the same time frame, perception of access to group programs increased by 13% (from 37% to 50%). These are both statistically significant increases. (**Figure 14**).

The proportion who feel it is very easy to access information and booklets or pamphlets about quitting both increased from 2001 to 2008. These changes are not statistically significant. Perception of access to doctors and other health care providers for cessation advice has declined over time, but not significantly.

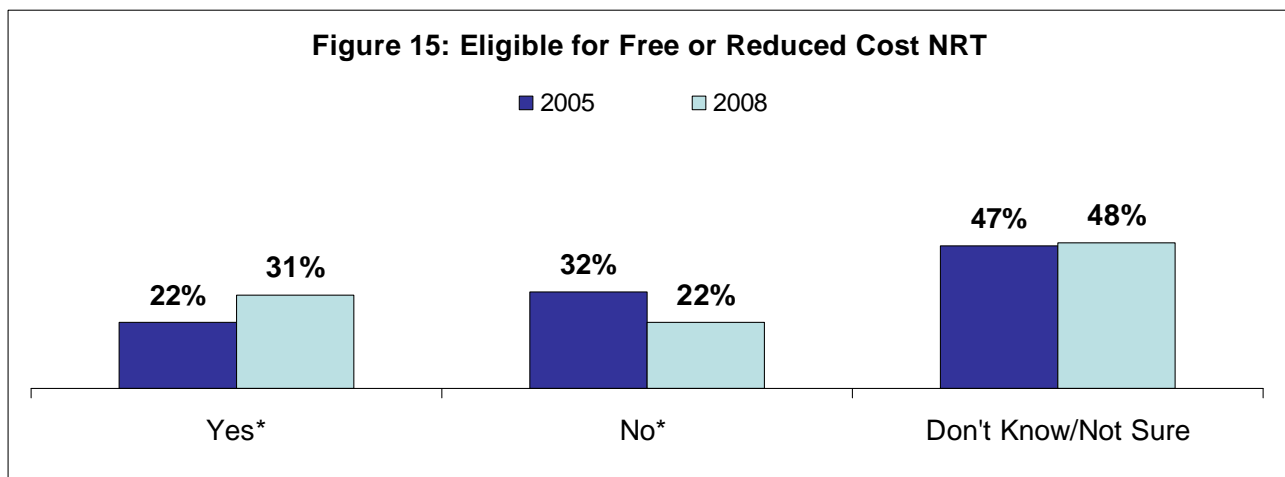
Trend data for access to each cessation aid are included on page A-6,7 of Appendix A.



\*Perceived access as "very easy" was significantly higher in 2008 than 2001 for Quit Line and Group Programs; no others changed significantly.

Less than one-third of current smokers thought they were eligible for free or reduced cost NRT (31%) and about half did not know their eligibility status (48%). (**Figure 15**). Those who *knew* they were eligible has significantly increased since 2005, but the proportion who *did not* believe they were eligible has significantly decreased over the same time period. The proportion who do not know their status remains about the same, suggesting that current smokers who once thought they were not eligible now know they are.

None of the changes from 2007 to 2008 were statistically significant.



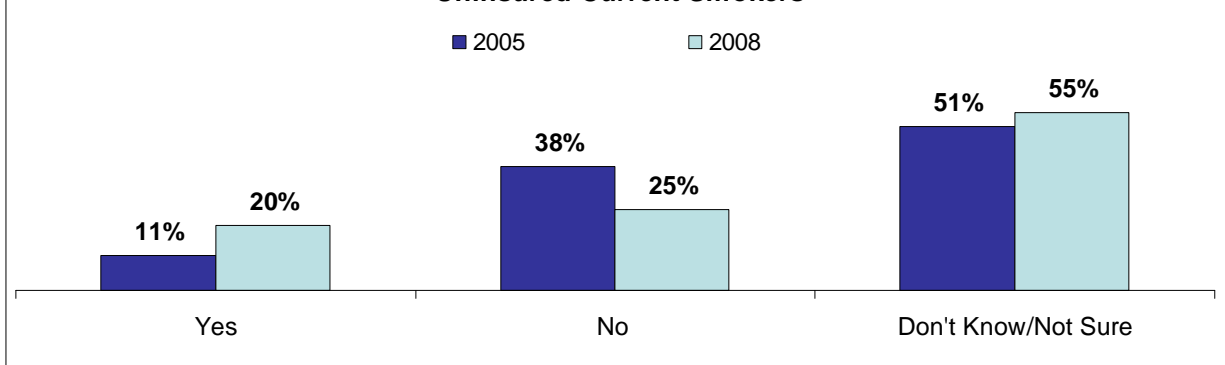
\*From 2005 to 2008, the proportion saying they are eligible for free or reduced cost NRT significantly increased; the proportion who said they are not eligible significantly decreased during this same time frame.

In 2008, there were no significant differences by gender or income. Due to small numbers, analysis by age group was not conducted.

Among current smokers in 2008 who did *not* have health insurance, one-fifth thought they were eligible for free or reduced cost NRT. More than half did not know their eligibility status (55%) (**Figure 16**).

While changes since 2005 and 2007 are not statistically significant, it is worth noting that the proportion who think they are eligible has increased each year since the question was added to the survey.

**Figure 16: Perceived Eligibility for Free/Reduced Cost NRT, Uninsured Current Smokers**

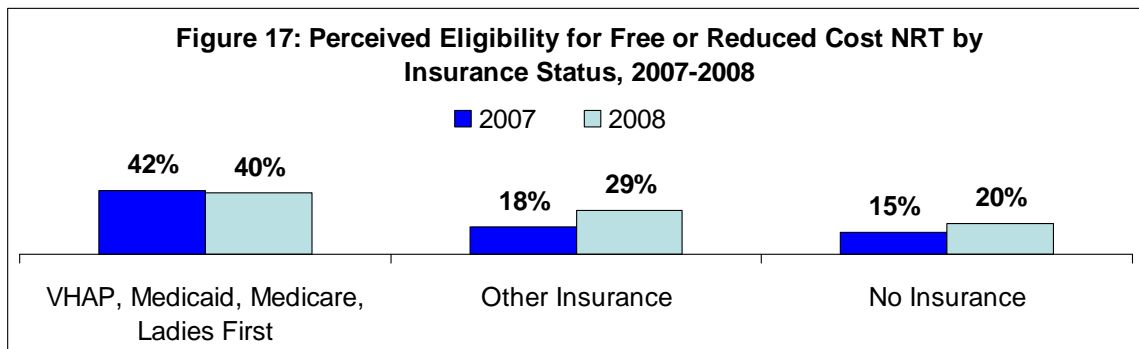


The data in **Figure 17** looks at perceived eligibility by type of insurance – with Medicaid/Medicare/Vermont Health Access Plan (VHAP)/Ladies First all combined (due to the medication subsidies each provides), and Veteran’s Administration, private insurance and those with supplemental plans to government coverage.

In 2008, current smokers with subsidized insurance were more likely than smokers with other or no insurance to believe they were eligible for free or reduced cost NRT (40% compared to 29% of those with private/VA and 20% of those who are uninsured). These differences were not statistically significant, however, those with subsidized insurance were significantly less likely than either other group to say they were not eligible for free or reduced cost NRT.

Between 2007 and 2008, the proportion of those with private/VA insurance who thought they were eligible increased significantly and the proportion who did not know their status significantly decreased. No other changes were statistically significant.

**Figure 17: Perceived Eligibility for Free or Reduced Cost NRT by Insurance Status, 2007-2008**



# Program Awareness & Utilization

## Program Awareness and Utilization

Since its inception, the VTATS has included three pairs of questions assessing awareness of tobacco control program efforts to:

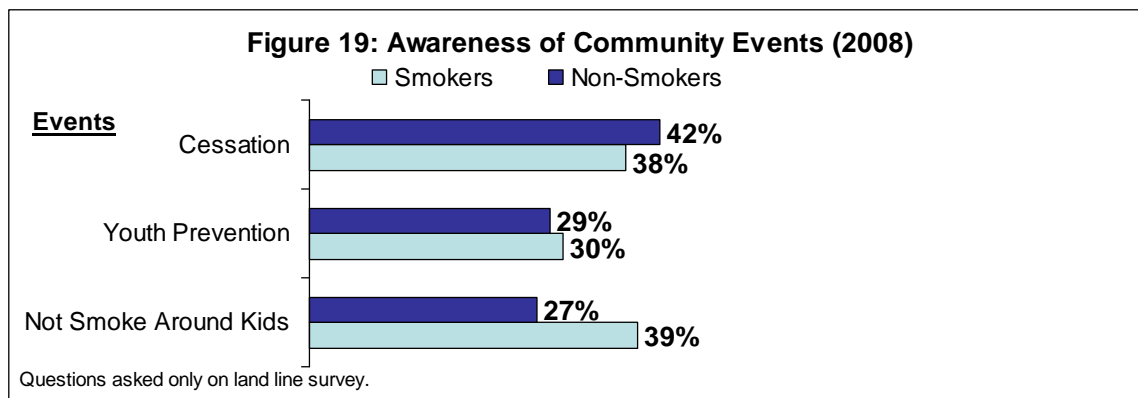
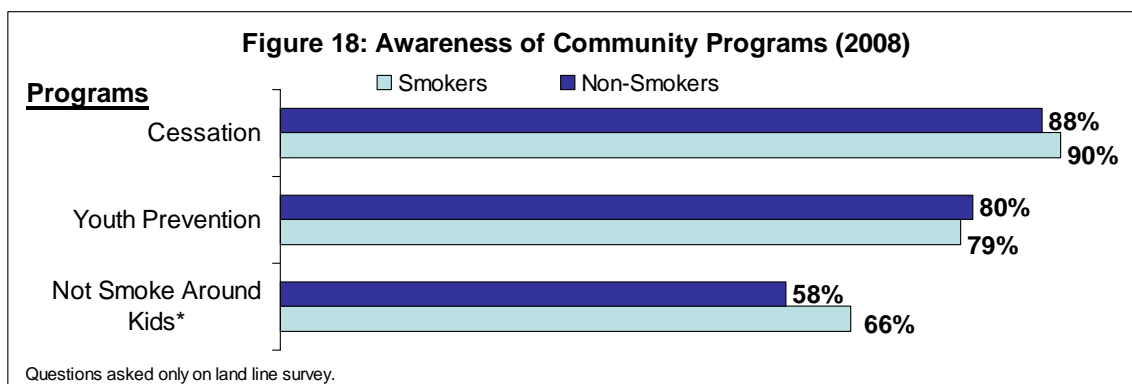
- reduce smoking among adults
- prevent youth from starting to smoke
- encourage people not to smoke around children.

Each pair includes a question about awareness of programs and awareness of events.

In 2008, respondents consistently reported higher recognition of programs than events. Awareness among Vermonters was highest for programs that help adults quit smoking (89%). More than three-quarters were aware of programs that help prevent youth smoking (80%) and less than two-thirds were aware of programs that encourage people not to smoke around children (60%).

The knowledge of events was substantially lower (about half), but followed a similar pattern; 41% knew of events related to smoking cessation, 29% knew of youth prevention activities and 29% had heard of events to encourage people not to smoke around children.

**Figures 18 and 19** look at differences in awareness of programs and events among smokers and non-smokers. In 2008, smoker awareness of events around encouraging people not to smoke around children was significantly higher than that among non-smokers.



\*Awareness significantly higher among smokers than non-smokers.

In addition to differences by smoking status, awareness also differed significantly within some demographic groups:

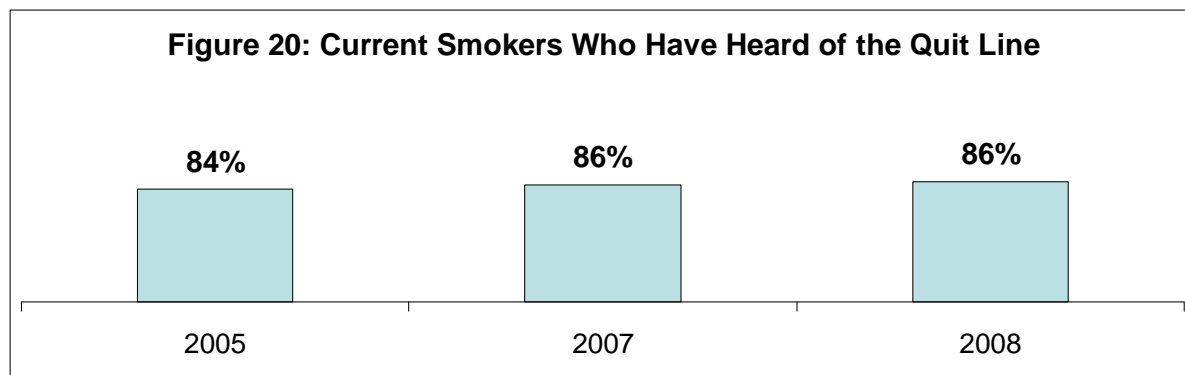
- Young adults were less likely to be aware of events to help adults quit smoking than those ages 45 and older.
- Low income respondents were less likely to be aware of programs to help adults quit and prevent youth smoking.
- Females were more likely to be aware of programs to help prevent youth smoking.
- Females were less aware of programs encouraging people not to smoke around children.

Following a sharp increase in awareness from 2001 to 2002, knowledge of all programs and events has changed relatively little. Specifically looking at changes from 2007 to 2008, all Vermonters showed a significant decrease in awareness of events related to youth prevention and not smoking around children. Awareness among non-smokers also significantly decreased for these events, and for programs targeted to reducing smoking around children. Trend data for community program and event awareness can be found on page A-7, 8 of Appendix A.

### *Awareness and Use of VDH Smoking Cessation Programs*

More than four out of five current smokers have heard of the Quit Line (86%). This matches the level in 2007, and is higher than that in 2005, though not significantly (**Figure 20**).

Female current smokers were significantly more aware of the Quit Line than their male counterparts (86% vs. 68%). There were no significant differences by income level. Due to small numbers, analysis by age group was not conducted.

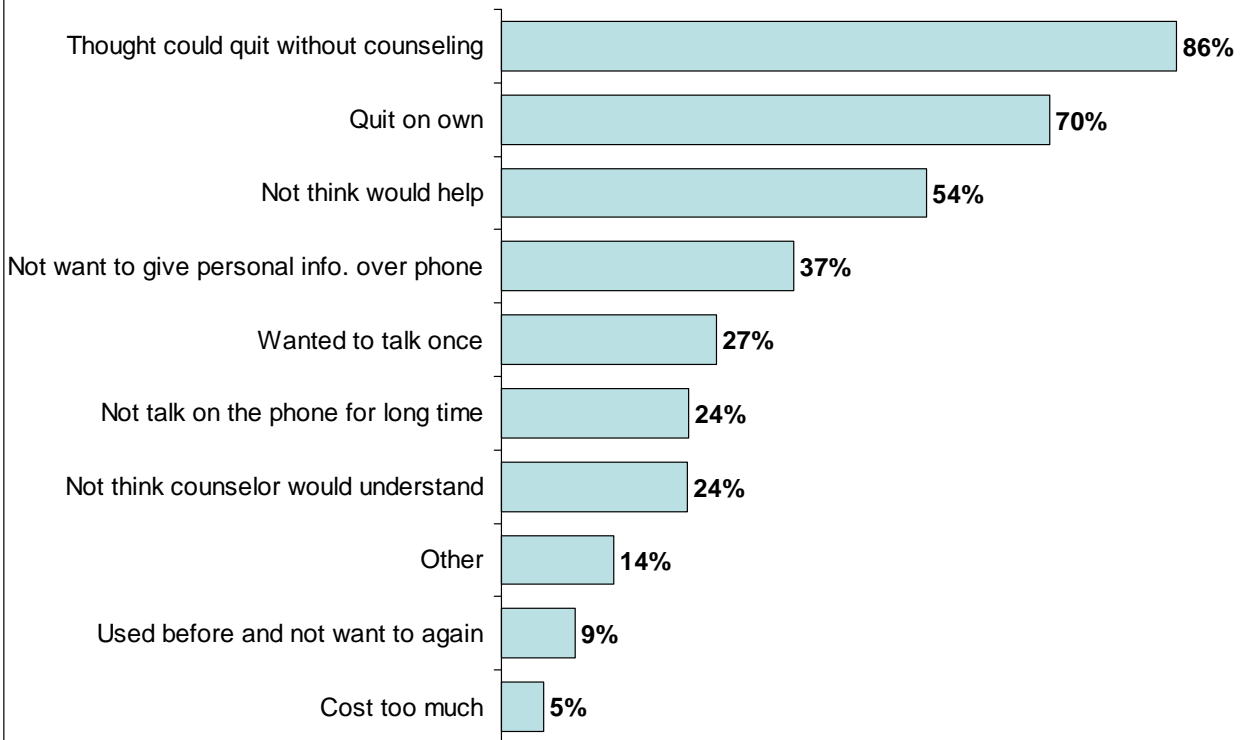


Current smokers who made a quit attempt in the last year and had heard of the Quit Line were asked if they used the Quit Line in their last quit attempt. In 2008, 6% had used Quit Line and there has been no change in the proportion who report using the Quit Line since 2005 (8%).



Current smokers who've made a quit attempt in the last year and have heard of the Quit Line but *did not* use it were asked why they didn't use the program. In 2008, the most common reasons for not using the Quit Line were "thought could quit on own, without telephone counseling" (86%) and "wanted to quit on own, without help" (70%). More than half (54%) said they "did not think telephone counseling would help" (**Figure 21**).

**Figure 21: Reasons Given for Not Using Quit Line During Most Recent Quit Attempt (2008)**



Question asked only on land line survey.

There was little significant change from 2007 to 2008 in the reasons for not using the Quit Line. The only change was in the percentage who said they didn't use the Quit Line because they didn't want to give personal information over the telephone, which increased from 21% in 2007 to 37% in 2008.

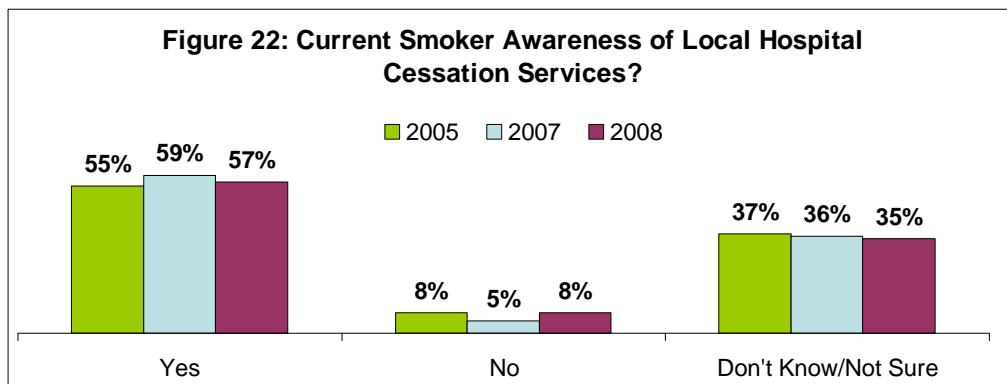
Trend data since 2005 can be found on page A-9 of Appendix A.

The VTATS also asks current smokers about their awareness and use of local hospital cessation programs. The percentage aware of the Quit in Person program has not changed significantly since 2005 (57% in 2008). (**Figure 22**)

- Eight percent said their local hospital does not offer a cessation program.
- More than a third of current smokers do not know whether their local hospital offers a cessation program (35%).

In 2008, there were no differences by gender. Age and income level differences were not evaluated due to limited numbers of respondents in some categories.

(Note: When analysis is limited to people who said either 'yes' or 'no' when asked about local hospital programs, 88% of those indicated they were aware their local hospital offers cessation services.)

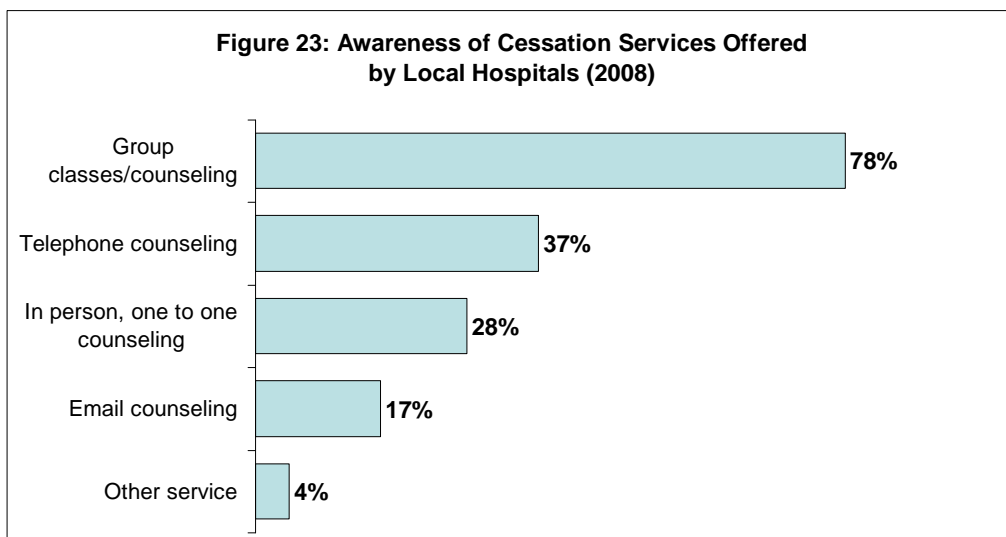


Current smokers who said they knew of cessation programs at their local hospital were asked about specific types of services offered at their hospital.

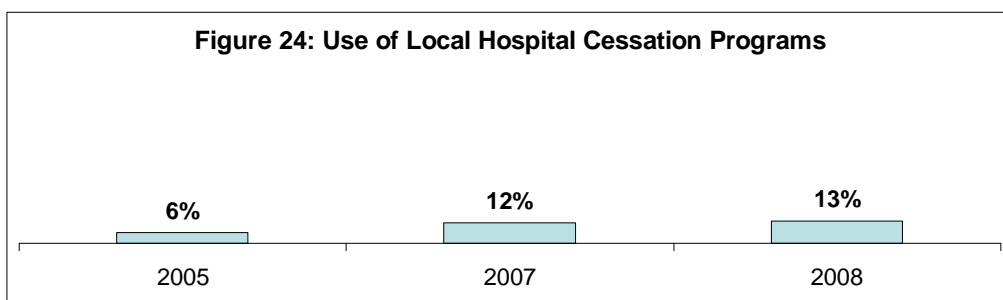
In 2008, more than three-quarters of current smokers who knew of a cessation program at their local hospital, said the program offered group classes or counseling (78%). (**Figure 23**).

- 37% said their local hospital offered telephone counseling.
- 28% reported one-to-one, in-person counseling.

There has been no significant change over time in recognition of individual program components by current smokers who knew their hospital offered cessation activities. Trend data for knowledge of specific cessation programs are included on page A-10 of Appendix A.



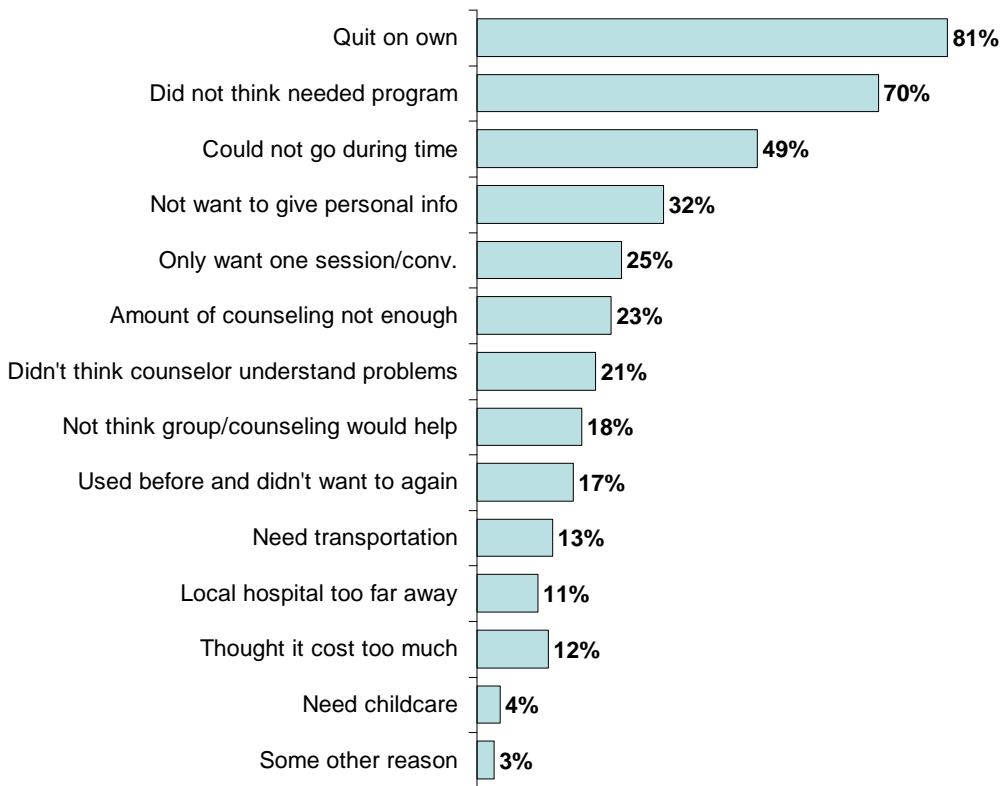
In 2008, 13% of current smokers who made a quit attempt and who knew their local hospital offered cessation services used those services (**Figure 24**). This number is similar to the 12% reported in 2007 and has not changed significantly since 2005.



Those who had heard of local hospital cessation programs, but had not used them were asked why not (**Figure 25**).

- The reason given most often was wanting to quit on their own (81%).
- More than two-thirds (70%) said they did not think this kind of program was what they needed to quit.
- Nearly half (49%) said they couldn't go during the time classes were offered.
- About a third (32%) did not want to give personal information to a counselor or group.
- A quarter or fewer said that they wanted one session (25%), the amount of counseling offered was not enough (23%), or that they did not think the counselor would understand their problems with quitting (21%).

**Figure 25: Reasons Given for Not Using Local Hospital Cessation Program During Most Recent Quit Attempt**

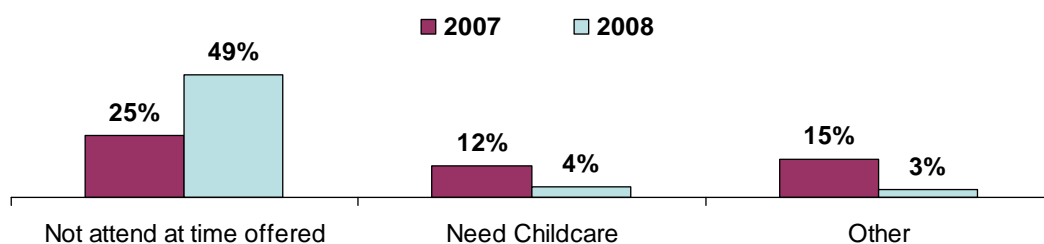


Question asked only on land line survey.

From 2007 to 2008, the proportion citing a need for child care, that they could not attend classes during the time offered, and other reasons all changed significantly (**Figure 26**):

- Need child care significantly decreased from 12% in 2007 to 4% in 2008.
- Other reasons significantly decreased from 15% to 3%.
- Could not attend during the time classes are offered significantly increased from 25% to 49%.

**Figure 26: Reasons Not Used Hospital Cessation Program\***



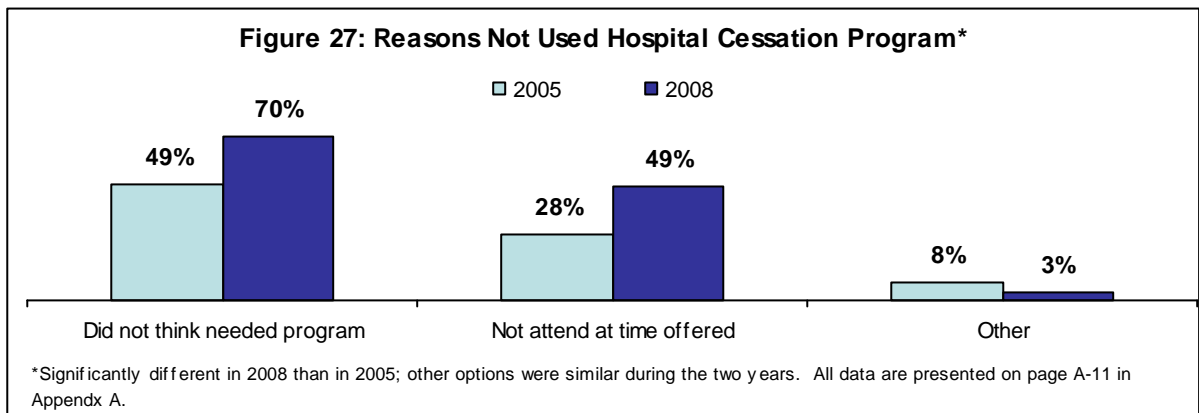
Question asked only on land line survey.

\*Significantly different in 2008 than in 2007; other options were similar during the two years. All data are presented on page A-11 in Appendix A.

Similarly, since 2005, reports of other reasons for not using local cessation services significantly decreased. Those of not being able to attend during the times offered and that the program is not what they need to quit significantly increased (**Figure 27**).

- Other reasons significantly decreased from 8% in 2005 to 3% in 2008
- Not able to attend during the times offered significantly increased from 28% to 49%.
- Program is not what they need to quit significantly increased from 49% to 70%.

All responses from 2005, 2007 and 2008 can be found on page A-11 of Appendix A.



# Second Hand Smoke

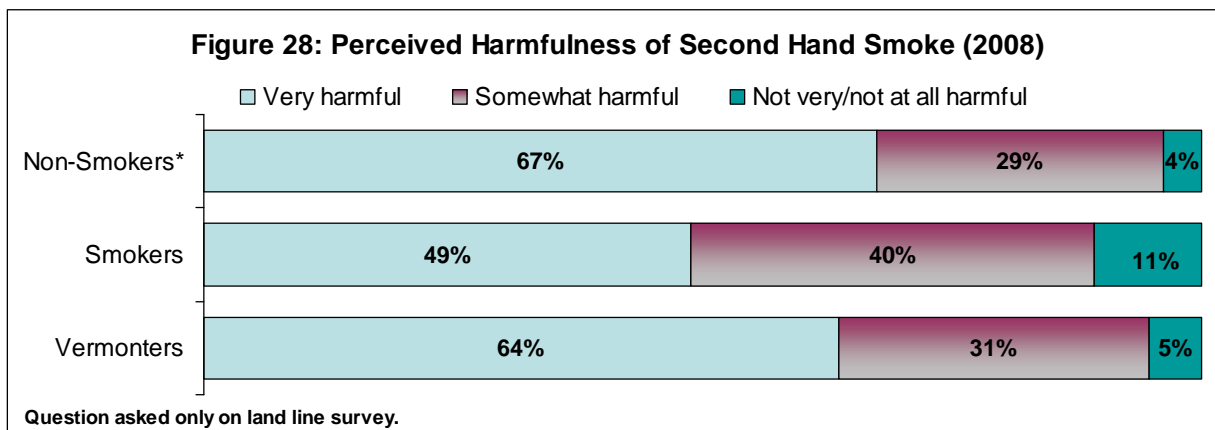
## Second Hand Smoke

The Vermont Department of Health (VDH), Tobacco Control Program (TCP), has consistently placed an emphasis on encouraging attitudes and behaviors that would reduce second hand smoke exposure. Progress has been made in recent years to increase awareness of second hand smoke dangers and reduce exposure to second hand smoke. This is particularly true for the allowance of smoking in the home or in vehicles when children are present.

In 2008, about two-thirds of Vermont adults said they thought breathing smoke from other people's cigarettes is *very harmful* to one's health (64%).

- Nearly seven out of ten non-smokers said the same (67%).
- About half of smokers believed this to be true (49%).

While at least nine out of ten smokers and non-smokers believe second hand smoke is *very* or *somewhat harmful*, non-smokers were significantly more likely than smokers to say it is (96% versus 89%). (**Figure 28.**)



\*Non-smokers said second hand smoke is very harmful significantly more often than smokers; same is true for responses of very or somewhat harmful.

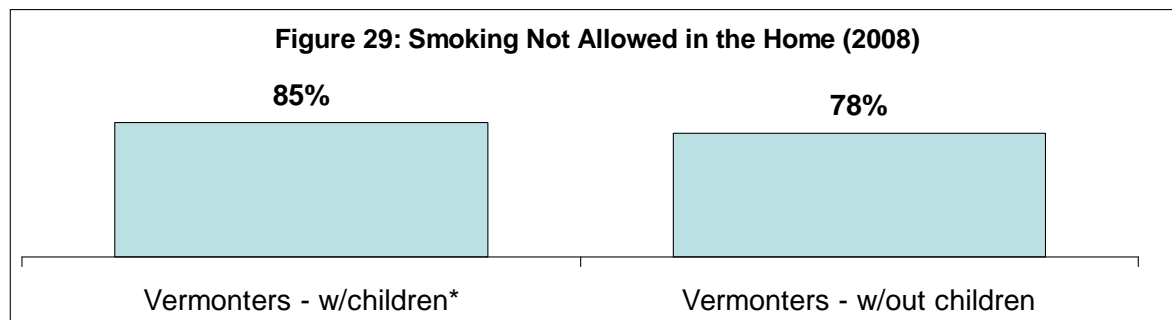
When looking at 2008 VTATS perceptions of second hand smoke by demographic category, the only significant difference was by gender. Males were significantly *less* likely than females to think smoke from another's cigarette is "very harmful" (50% vs. 74%).

Since 2002, there has been no significant change in the proportion of Vermonters or smokers who believe that breathing smoke from another's cigarette is *very harmful*.

Among non-smokers, significantly fewer in 2008, as compared with 2002, said smoke from another's cigarette is very harmful. However, the proportion of non-smokers saying second hand smoke is very or somewhat harmful is not significantly different.

Trends for perception of harmfulness of second hand smoke data can be found on page A-12 of Appendix A.

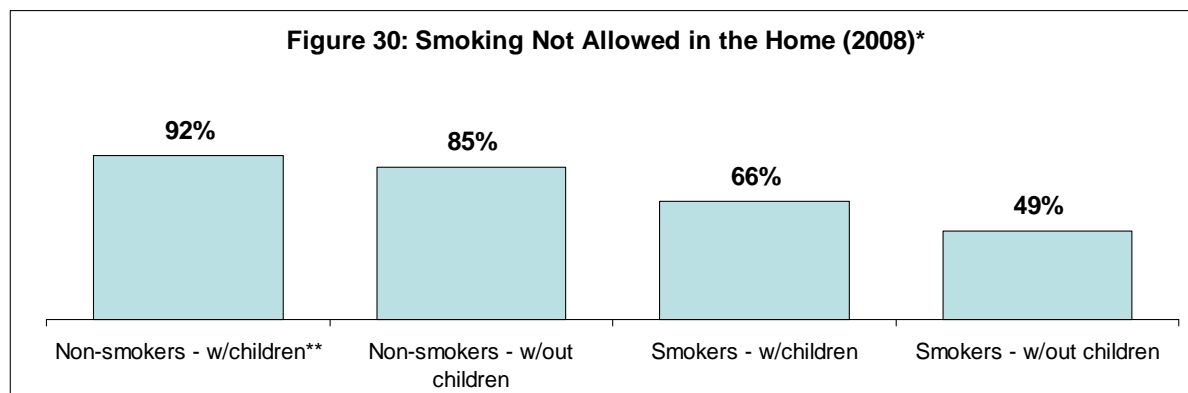
VDH promotes smoke-free zones, specifically at home or in the car. Eighty-five percent of Vermonters with children said they do not allow smoking anywhere inside their home. In households without children, three out of four do not allow smoking in the home (78%). (Figure 29.)



\*Significantly higher proportion of Vermonters with children than those without reported not allowing smoking in their home.

Non-smokers were significantly more likely to ban smoking in the home than smokers, regardless of the presence of children.

Non-smokers with children were statistically more likely to ban smoking than those without children. Smokers with children were also more likely than those without children to ban smoking in their home, however this difference was not statistically significant. (Figure 30.)



\*Non-smokers with children ban smoking in their home significantly more often than smokers with children. The same is true when comparing non-smokers and smokers without children.

\*\*Non-smokers with children prohibit smoking in their home significantly more often than non-smokers without children.



Vermonters in higher income households were more likely to ban smoking in their home. This is the case overall and for those without children. Overall:

- Significantly more Vermonters with high incomes do not allow smoking (92%) as compared with middle income (79%) and low income (69%) households.
- Middle income homes ban smoking significantly more than low income ones.

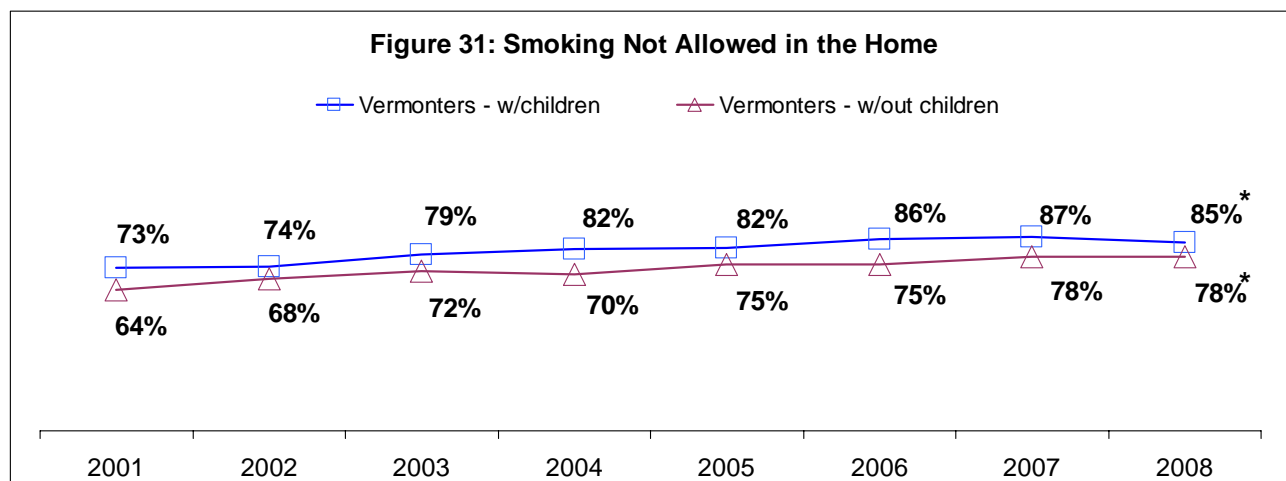
Households without children:

- Significantly more households without children and high incomes banned smoking in their home in 2008 (91%), compared to those with middle and low household incomes (75% and 66%, respectively).

The only other significant demographic difference was by gender. Among all Vermonters, females more often report banning smoking in the home than men (84% vs. 77%). There were no statistical differences among households with children.

Over time, there have been significant increases in household smoking bans among Vermonters. **Figure 31** shows the proportion of Vermont adults, with and without children, who do not allow smoking anywhere inside their home from 2001 through 2008.

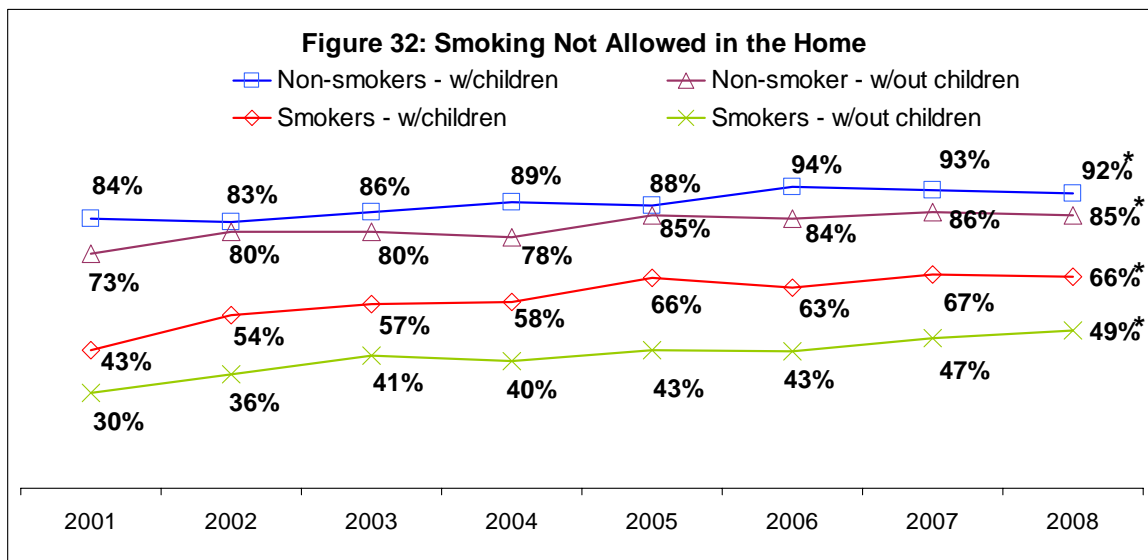
Values either remained level or decreased slightly from 2007 to 2008. Neither change over this time period was statistically significant. The proportions of Vermonters with and without children who do not allow smoking in their home were significantly higher in 2008 than in 2001.



\*Significantly higher in 2008 than 2001.

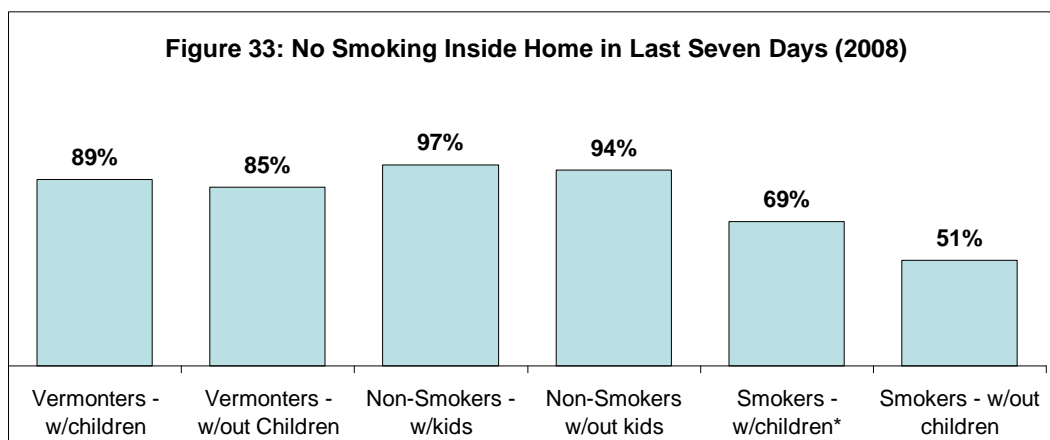
**Figure 32** shows home smoking ban data broken out by smoking status. As with all Vermont adults, the proportions that report not allowing smoking in their home increased significantly from 2001 to 2008.

Non-smokers with and without children were significantly more likely to ban smoking in their home than smokers with and without children, respectively.



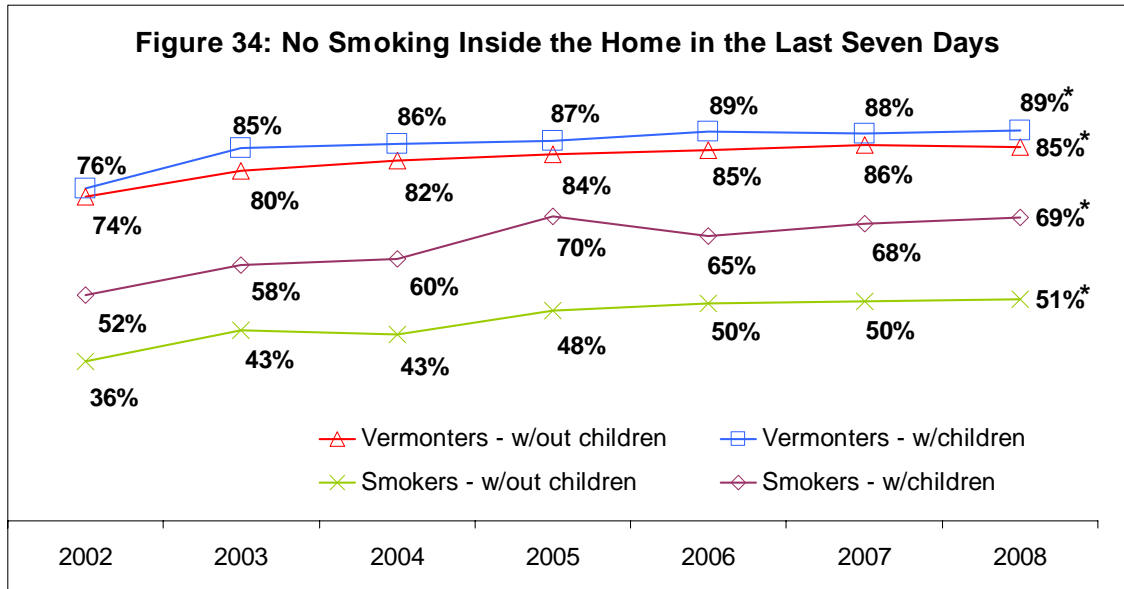
\*Significantly higher in 2008 than 2001.

In addition to home smoking bans, the VTATS also asks respondents the number of days, out of the last seven, that anyone smoked cigarettes, cigars, or pipes anywhere inside their home. In 2008, nearly 90% of adults in households with and without children said no one had smoked in their home in the last seven days (89% and 85% respectively). Among smokers, those with children were significantly more likely than those without children to report no smoking in their home in the last week (**Figure 33**).



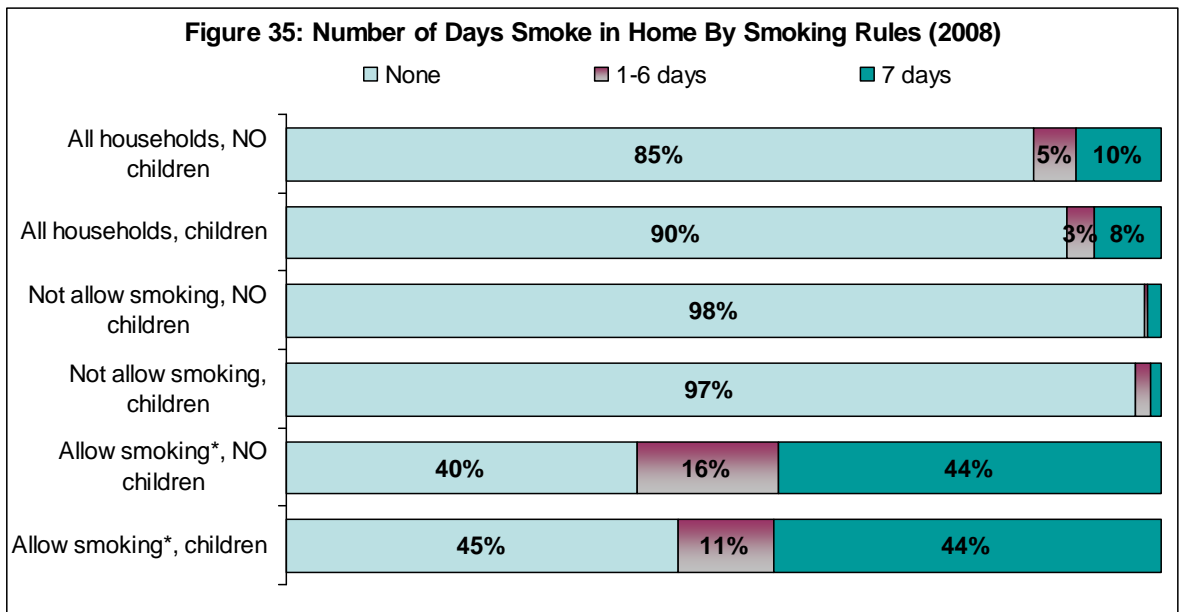
\*Rate among smokers with children significantly higher than that among smokers without children.

**Figure 34** shows a significant increase in no smoking in the home during the last week between 2002 and 2008. The increase was largest in smokers with children, which saw a change of 17 percent during that time. Smokers without children increased 15 percent. Both of these increases are larger than those seen among Vermonters overall, where the increase was 13 percent for those with and 11 percent for those without children.



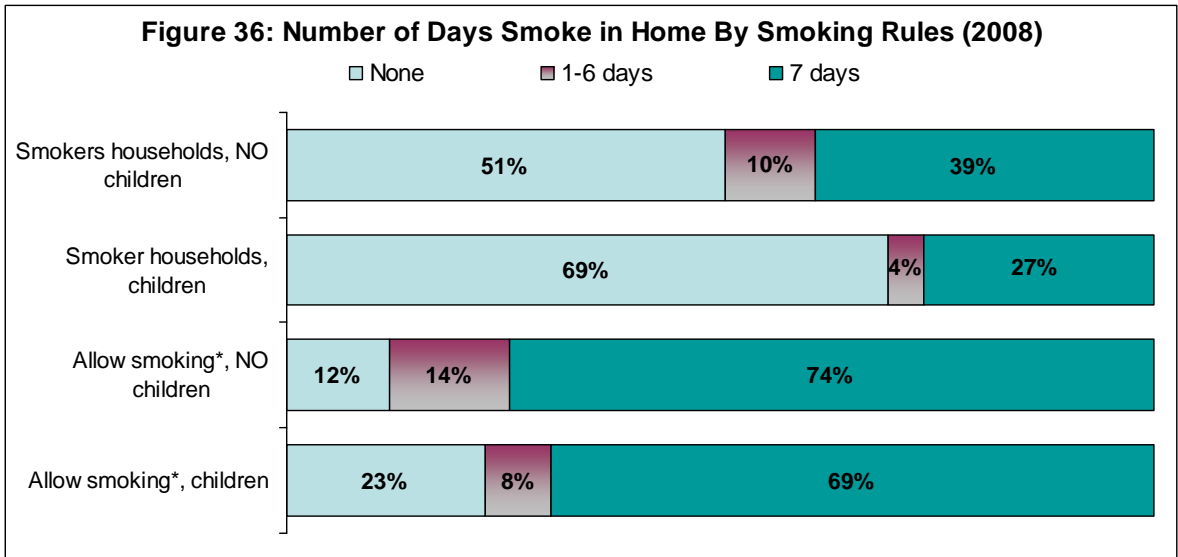
\*Significantly higher in 2008 than 2002.

Overall, more than 85% of households in Vermont reported that no one has smoked inside their home in the past seven days (**Figure 35**). As expected, nearly all households that reported a ban on smoking in their home did not experience smoking in their home in the last week, regardless of the presence of children. Also note that the 45% of households with children that *allow* smoking but reported *none* during the last week, is significantly higher than the 19% seen in 2007.



**Figure 36** reports data similar to that in **Figure 35**, except it is limited to households with smokers. As with Vermont adult data combined, in households that reported a smoking ban, few said anyone smoked in their home in the last week (less than 10%).

Among smokers that allow smoking in their home, those with children were less likely than those without children to report smoke in their home everyday and more likely to report no smoking during the last week. However, please note that neither of these differences are statistically significant.

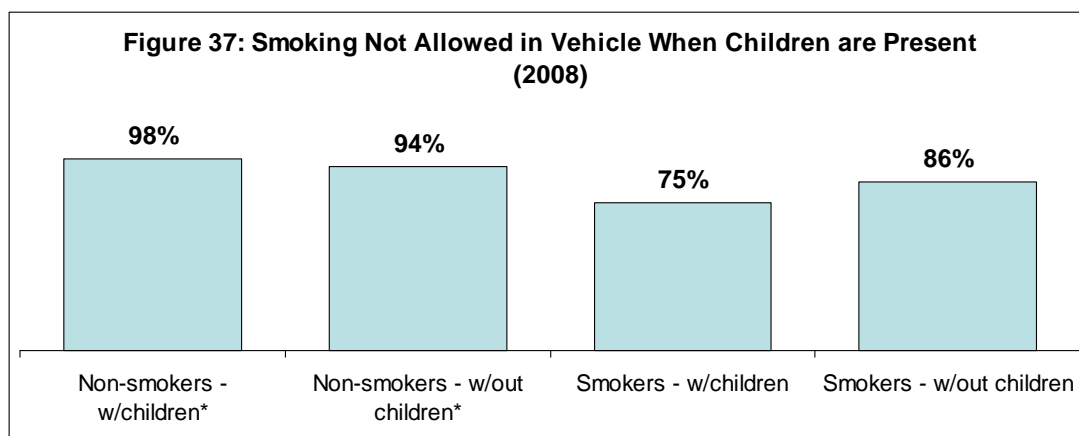


*\*Note: Respondents were considered to allow smoking if they said they allow smoking in their home in some places or at some times, anywhere in their home or there are no rules about smoking in their home.*

In 2008, 92% of Vermonters with and without children said they do not allow smoking in their car or truck when children are present. **Figure 37** shows the proportions of non-smokers and smokers, with and without children that do not allow smoking in their vehicle:

- Virtually all non-smokers with and without children ban smoking in their car when children are present, 98% and 94%, respectively.
- More than eight in 10 smokers without children do not allow smoking in their car or truck when children are present (86%).
- For smokers with children the proportion was about three-quarters (75%).

The difference in vehicle smoking bans between smokers with and without children was not statistically significant. However, non-smokers were significantly more likely than smokers to ban smoking in their vehicle when children were present, regardless of the presence of children in the home.



\*Rate is significantly higher among non-smokers with children as compared with smokers with children; the same is true when comparing non-smokers without children and smokers without children.

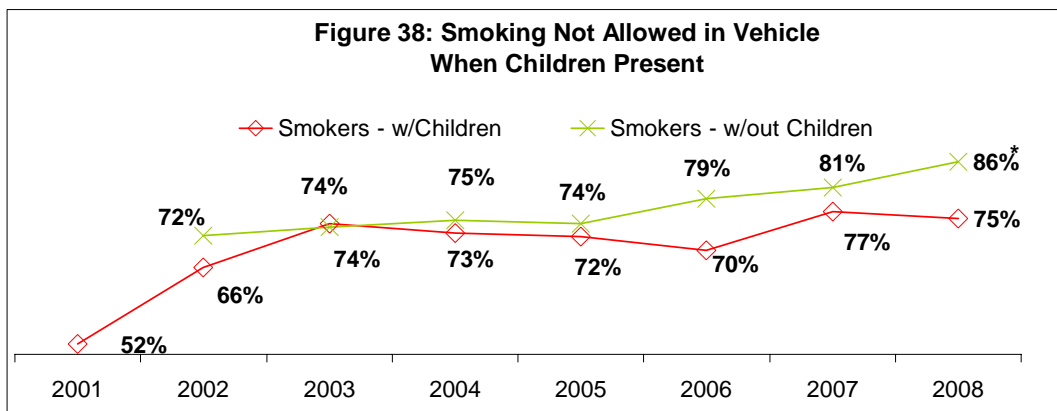
Among Vermonters with children, smoking was prohibited in their vehicle more often by:

- Those 45 and older (97%), as compared to 18-24 (79%) and 25-44 (92%) year olds.
- Persons with high annual household incomes (100%) versus those with lower incomes (90% middle and 85% low).
- Females as compared to males (96% vs. 87%).

Among Vermonters without children, the only significant demographic difference was by age: 25-44 year olds (98%) banned smoking more often than those 18-24 (87%) and 45 and older (91%).

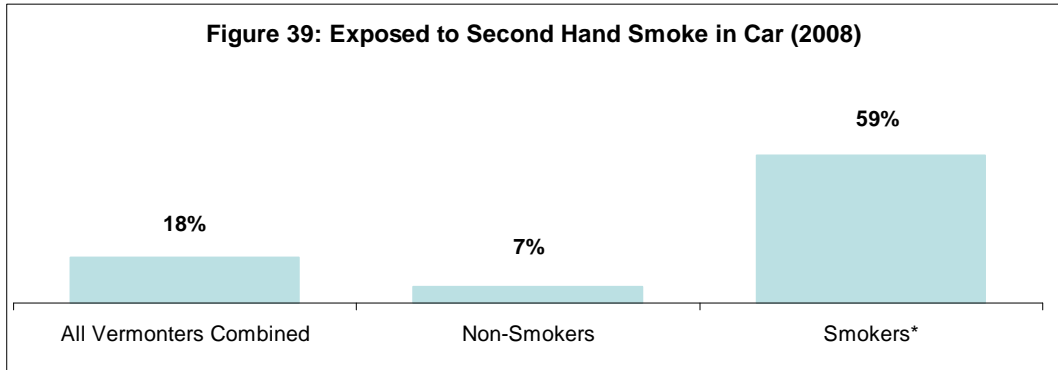
Trend data related to prohibiting smoking in the car for all Vermont adults can be found on page A-12 of Appendix A.

**Figure 38** shows the increasing proportion of smokers who have smoking bans in vehicles when children are present. Between 2002 and 2008, the increase was statistically significant among those without children.



\*Significantly higher in 2008 than in 2002.

Less than one-fifth of Vermonters have been in a car with someone who was smoking in the last week. Smokers were much more likely to have reported being in a car with someone who was smoking in the last week (59% vs. 7% of non-smokers). (**Figure 39**)

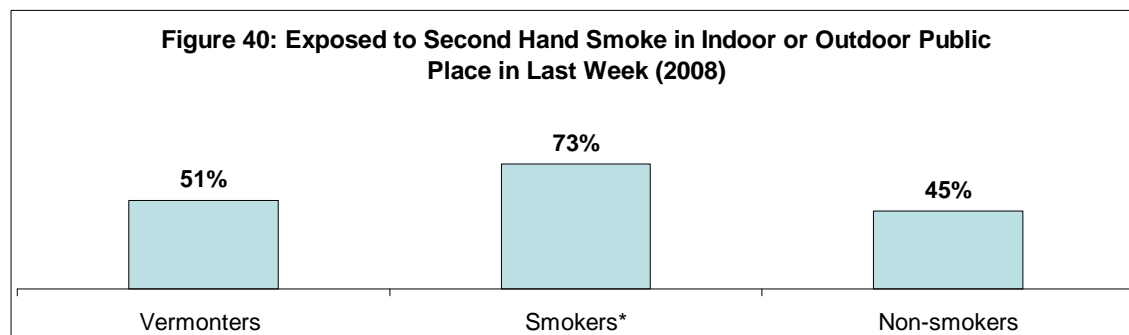


\*Significantly higher among smokers than non-smokers.

Over time, there has been some progress in reducing the percentage of Vermont adults who reported exposure to second hand smoke in a car. The proportion significantly decreased from 26% in 2002 to 18% in 2008. Non-smoker exposure significantly decreased from 2007 (10%) to 2008 (7%), as well as from 2002 (12%). Trend data related to car exposure can be found on page A-12 of Appendix A.

In 2008, new questions around the topic of second hand smoke were added to the VTATS. One asked on how many days in the last week respondents breathed smoke from someone else's cigarette in a public place (indoors or outdoors). On average, Vermonters were exposed to second hand smoke on about two days in the last week (1.7). More than half said they were exposed at least one day in the last week (51%). (**Figure 40**)

Smokers were significantly more likely than non-smokers to report breathing smoke from someone else's cigarette in a public place (73% vs. 45%) (**Figure 40**). Smokers reported, on average, being exposed to second hand smoke 3.7 days in the last week while non-smokers reported the same on 1.1 days.



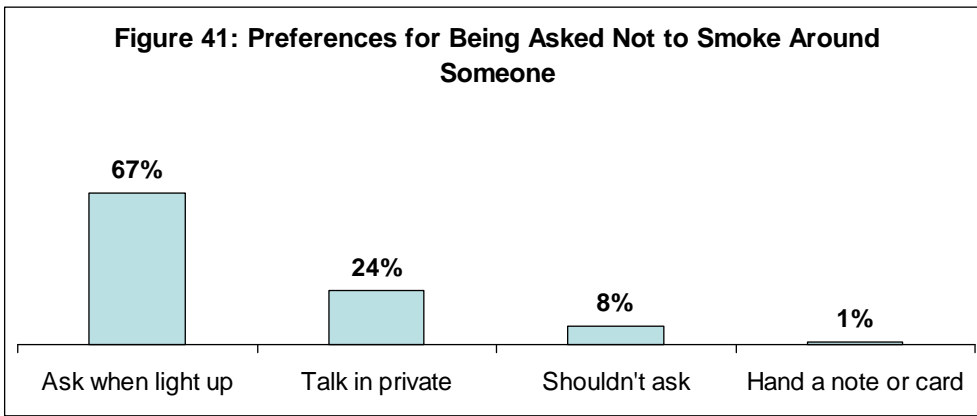
\*Significantly higher than non-smokers in 2008.

There were significant demographic differences as well:

- Younger Vermonters (18-24) were more likely than those 25-44 and 45 and older to report second hand smoke exposure in a public place (81% vs. 60% and 39%).
- 25-44 year olds were also significantly more likely than those 45 and older to report the same (60% vs. 39%).
- Lower income households (66%) were significantly more likely than other incomes to report breathing smoke from another's cigarette (66% vs. 53% middle and 41% high).
- Middle income households were significantly more likely than high income ones to say the same (53% vs. 41%).
- Men were significantly more like to report public second hand smoke exposure (57% vs. 46%).

The other new second hand smoke question added in 2008 asked smokers how they would prefer to be asked not to smoke around someone (**Figure 41**).

- Two-thirds said they wanted people to ask when they light up, even if they're in a group.
- Less than a quarter said to talk to them in private.
- Eight percent said they did not think anyone should ask them not to smoke near them.
- One percent said to hand them a note or card with information about the dangers of second hand smoke.



In looking at demographics, the only statistically significant difference was by age. Those 25-44 were significantly more likely than those 45 and older to say they prefer to be asked to not smoke when they light their cigarette, even if they are in a group (72% vs. 56%).

Due to small numbers, differences for those that said to hand them a note or card and that did not think anyone should ask them not to smoke were not conducted.



# Health Care Providers & Smoking Interventions

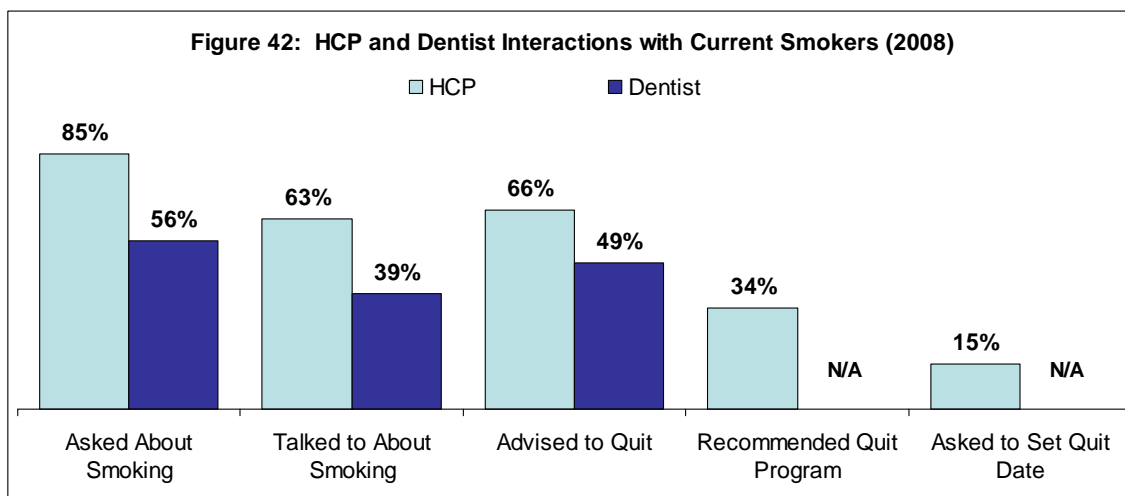
## Health Care Providers and Smoking Interventions

An important point of intervention for smoking cessation is via health care providers. Eight out of ten current smokers had seen a health care professional in the last year (81%), a significant increase over the 71% in 2007. About half had been to the dentist in the previous 12 months (44%), a significant decrease from the 55% in 2007.

Of current smokers that reported seeing a health care provider in the last year (**Figure 42**):

- More than four out of five said they were asked whether they smoke (85%).
- Approximately two-thirds reported their health care professional talked with them about smoking (63%) and/or advised them to quit (66%).
- A third (34%) were recommended a specific quit program by their doctor.
- 15% were asked to set a quit date by their health care provider.

**Figure 42** also includes dental visit data. In general, fewer current smokers reported conversations about smoking with a dentist. However, the responses follow a similar pattern to those of the health care provider. Note that in 2008, respondents were not asked about dentist recommending a quit program or setting a quit date.



Since 2001, the proportions of current smokers who reported conversations with health care providers and dentists about smoking and cessation have increased. Those reporting being advised to quit smoking, among both those that saw a health care provider (51% to 66%) or a dentist (27% to 49%) were significantly higher in 2008.

As compared to 2003, the first year the question was asked, the proportion that saw a health care provider who reported being asked if they smoke was also significantly higher in 2008 (75% in 2003 vs. 85% in 2008).

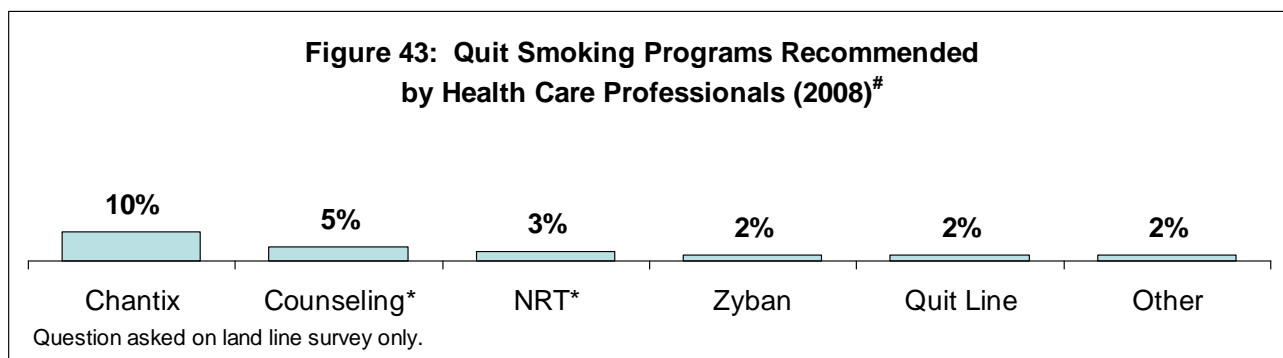
From 2007 to 2008, there were no significant differences in current smokers who reported being asked if they smoke, talked to about smoking, advised to quit smoking, recommended specific quit smoking programs, or asked to set a quit date by their health care provider or dentist.

In 2008, current smokers with a high annual household income reported being advised to quit smoking significantly less often than those with low incomes (45% vs. 73%). Females also reported being advised significantly less often than males (55% vs. 75%).

Due to the small number of 18 to 24 year old current smokers, subgroup analysis by age could not be performed.

Trend data for conversations with health care providers and/or dentists is on page A-13 of Appendix A.

Overall, two-thirds of all current smokers were not given a recommendation by their health care provider for a specific cessation program (68%). Those who were given a recommendation were asked what those suggestions were. The most frequently suggested program in 2008 was Chantix (10%). All other programs were reported by five percent or fewer respondents. **(Figure 43).**

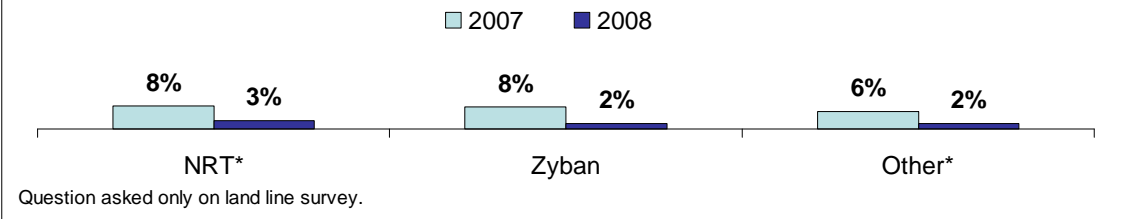


*\*NRT includes nicotine patches, gum and lozenges. Other includes nicotine nasal spray, nicotine inhaler, and other reported quitting methods. Counseling includes both individual and group counseling.*

The significant decline in NRT recommendations from 8% in 2007 to 3% in 2008 continues the slide that began after 2006, when health care providers suggested NRT to 14% of current smokers. Referrals to Zyban, and other programs also significantly decreased in 2008 (from 8% to 2% for Zyban and from 6% to 2% for other programs). **(Figure 44)**

One other important point to note, is that although not statistically significant, the percentage of current smokers who reported doctors made cessation counseling referrals increased to five percent in 2008 after dropping to two percent in 2007.

**Figure 44: Quit Smoking Programs Recommended by Health Care Professionals (2008)<sup>#</sup>**



\*NRT includes nicotine patches, gum and lozenges. Other includes nicotine nasal spray, nicotine inhaler, and other reported quitting methods. Counseling includes both individual and group counseling.

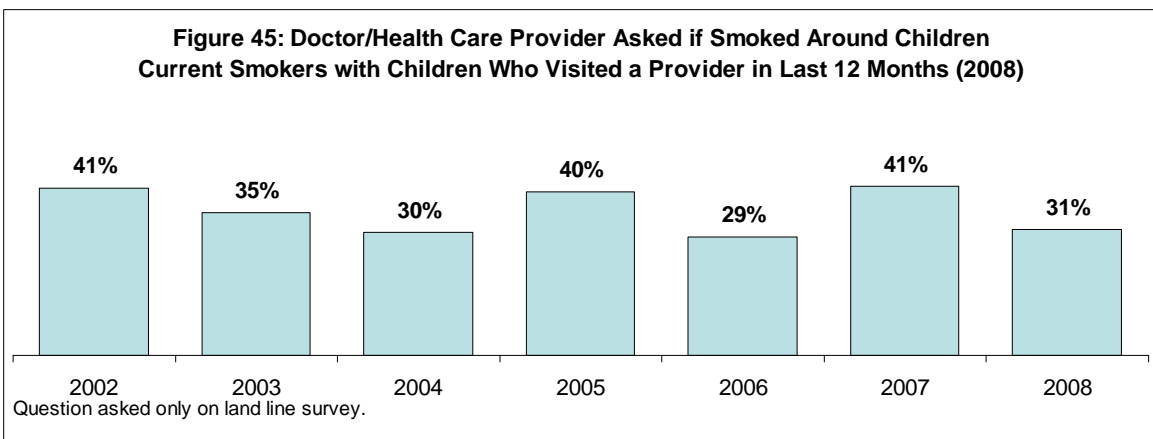
<sup>#</sup>Recommendations for Zyban, NRT and "other" methods significantly decreased from 2007 to 2008. From 2001 to 2008, reported recommendations for NRT and Zyban also significantly decreased while those for the quit line significantly increased. All other changes were not statistically significant.

Trend data on health care provider and/or dentist cessation recommendations are on page A-13, 14 of Appendix A.

Thirty-one percent of current smokers, in 2008, said their health care provider asked if they smoke around their children. From 2007 to 2008, there was a non-statistically significant decrease in those who reported being asked if they smoked around their children (from 41% to 31%). (Figure 45.)

There were no differences by gender in the proportion of current smokers who reported their doctor asked if they smoke around their children. Due to small numbers, analysis by income level and age group were not conducted.

**Figure 45: Doctor/Health Care Provider Asked if Smoked Around Children Current Smokers with Children Who Visited a Provider in Last 12 Months (2008)**

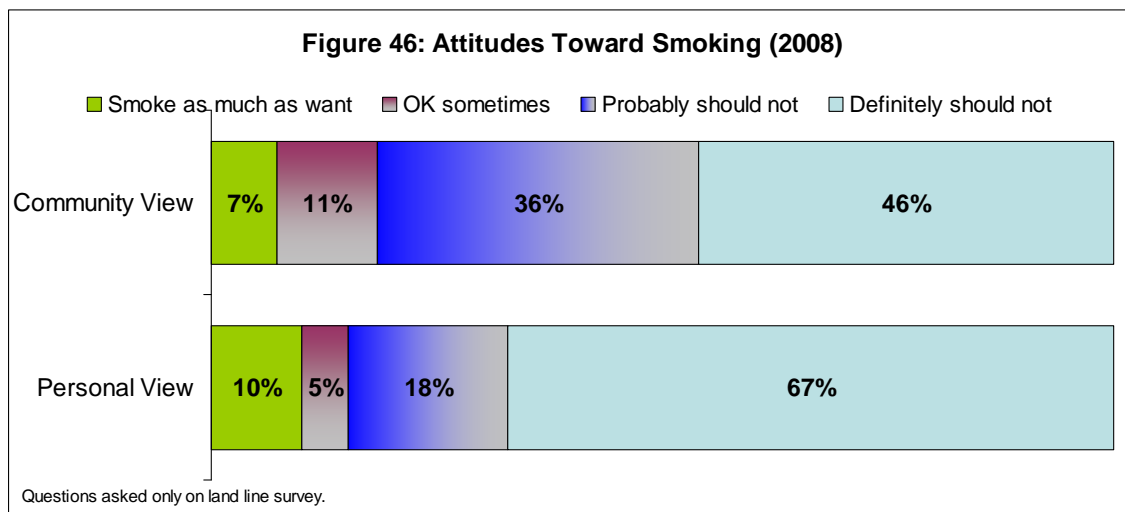


# Attitudes Towards Smoking

## Attitudes Toward Smoking

Very few Vermonters think it is OK for adults to smoke. Two-thirds believed that adults *definitely should not* smoke (67%), while nearly half believed that the community thinks the same (46%). (Figure 46)

- 18% said the community thinks it is OK to smoke sometimes or as much as one wants.
- 15% personally believed that it is OK to smoke sometimes or as much as one wants.



**Figures 47 and 48** show 2008 data on perceptions of smoking for smokers and non-smokers. As might be expected, smokers were more likely than non-smokers to personally think it is OK for adults to smoke as much as they want. They also were more likely to believe members of their community think it is OK for adults to smoke as much as they want. In both cases, the differences were statistically significant.

Also striking was that three-quarters of non-smokers think adults should definitely not smoke (77%), but just 27% of smokers said the same.

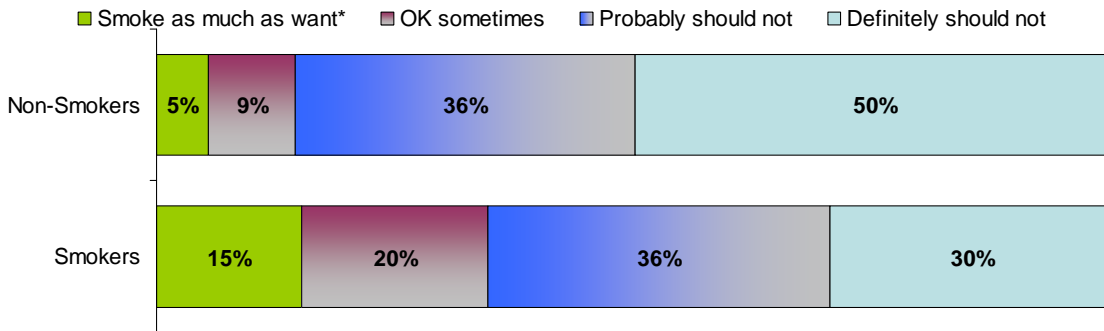
Those who were significantly more likely to think that their *community* members believe it is OK for adults to smoke as much as they want included:

- Low and middle household incomes (14% low and 8% middle) vs. high incomes (1%); and
- Men (10%) as compared with women (5%).

When it comes to *personal* views of smoking, men, and those with lower incomes also were significantly more likely to think it is OK for adults to smoke as much as they want:

- 14% of men vs. 7% of women
- 16% of low income and 8% of middle income Vermonters as compared with 4% of those in households with a high annual income
- Those with low incomes also reported it is OK to smoke as one wants more often than those with middle incomes

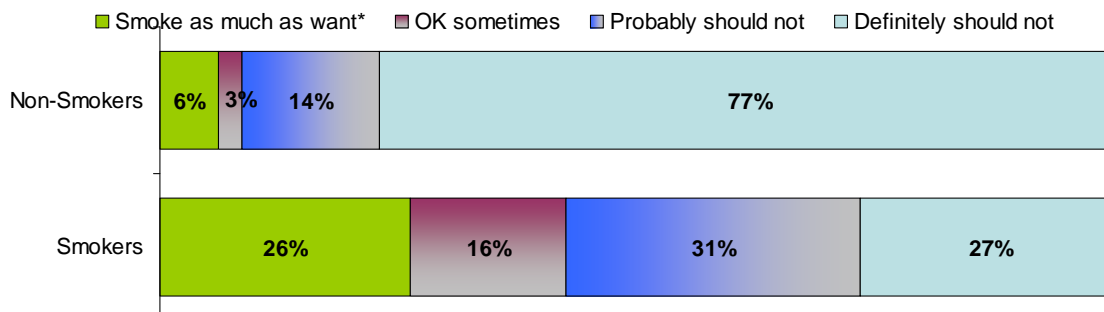
**Figure 47: Perception of Community Attitude Towards Smoking (2008)**



Question asked only on land line survey.

\*Smokers significantly more likely than non-smokers to give this response.

**Figure 48: Personal View Towards Smoking (2008)**

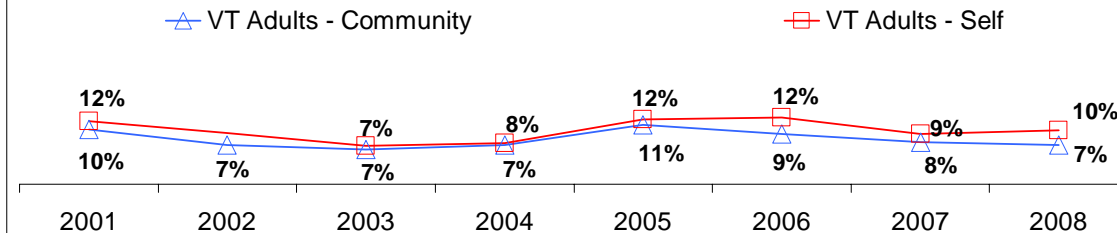


Question asked only on land line survey.

\*Smokers significantly more likely than non-smokers to give this response.

Ideally, over time the proportion of people who think it is OK for adults to smoke as much as they want would decrease. **Figure 49** shows that in 2008, the proportion declined slightly for community views and increased slightly for personal ones over those in 2007. Neither of these changes nor those between 2001 and 2008 were statistically significant.

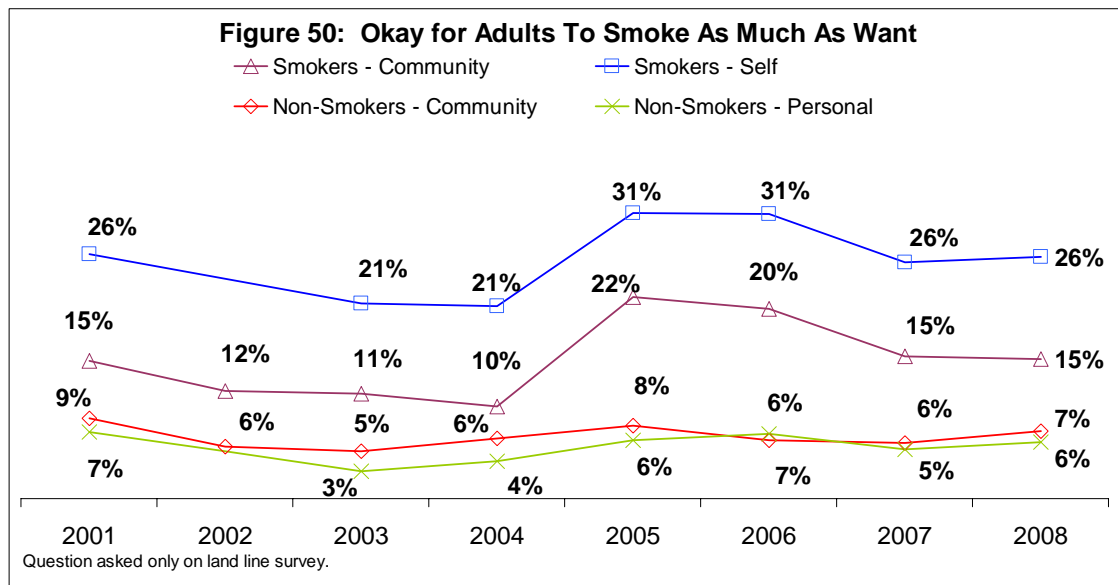
**Figure 49: Okay For Adults to Smoke as Much As Want**



Question asked only on land line survey.

**Figure 50** includes trend data on the proportion of smokers who think it is OK for adults to smoke as much as they want and who believe members of their community feel it is OK for adults to smoke as much as they want. Also included in the figure are the same data, but for non-smokers. Smokers were significantly more likely than non-smokers to personally believe and to think that the community believes it as well.

The proportion of smokers who said it is OK for adults to smoke as much as they want remained level in 2008 – both for smokers who personally felt that way and those who believed the community feels that way. The proportions among non-smokers increased slightly, though neither change was statistically significant.





# Workplace Smoking

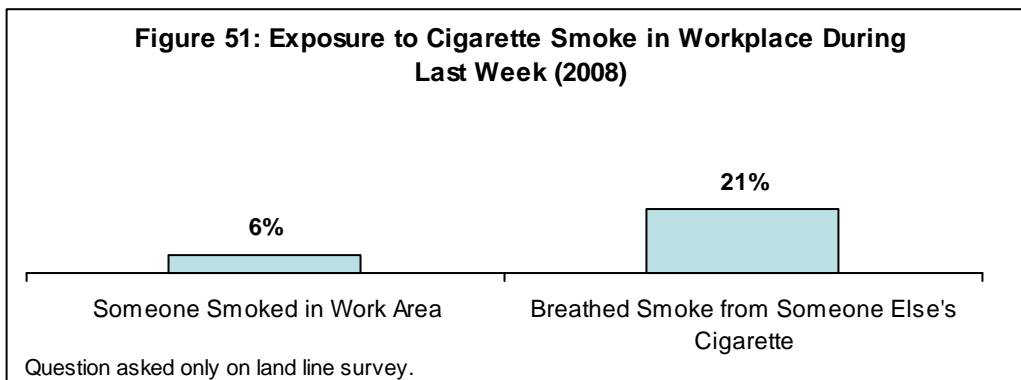
## Workplace Smoking

In 2008, the VTATS included several questions about smoking behaviors and policies in the workplace. Most questions were on the survey again after being excluded for 2005-2007 and one was asked for the first time.

More than eight in ten Vermonters that work for wages outside their home, said they spend most of their work day inside (84%). This is less than the 89% in 2004, but the change between then and 2008 is not a statistically significant one. Only land line respondents were asked if they work indoors most of the time.

In 2008, among those that work inside most of the time, 21% said they breathed smoke from someone's else's cigarette at their workplace during the past week. Additionally, 6% said someone smoked in their work area during the same time frame (**Figure 51**).

The 6% that reported someone smoked in their work area during the last week is not significantly different from the 9% reported in 2004. The question about breathing smoke from another's cigarette at work was added to the VTATS for the first time in 2008.



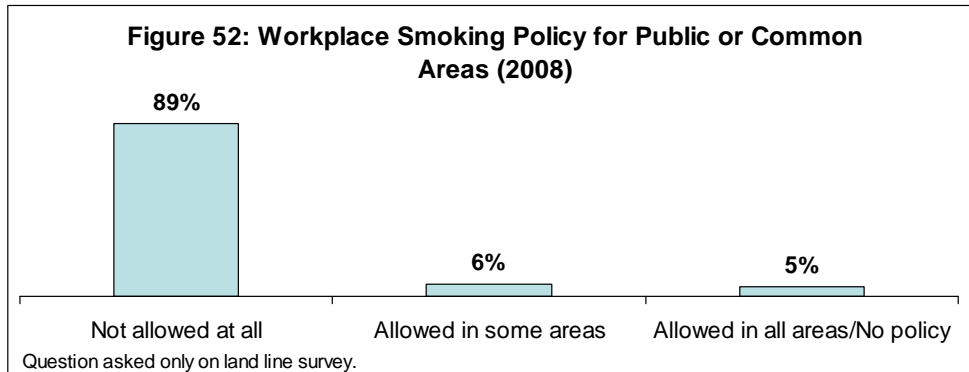
When looking at reports of someone smoking in their work area by demographic group, there were significant differences:

- Those with low annual household incomes (26%) said this more often than those with middle (4%) and high (2%) incomes.
- Vermonters 18-24 were more likely to report this than those 45 and older (11% vs. 3%).

There were also statistically significant differences in reports of breathing smoke from someone else's cigarette in their workplace:

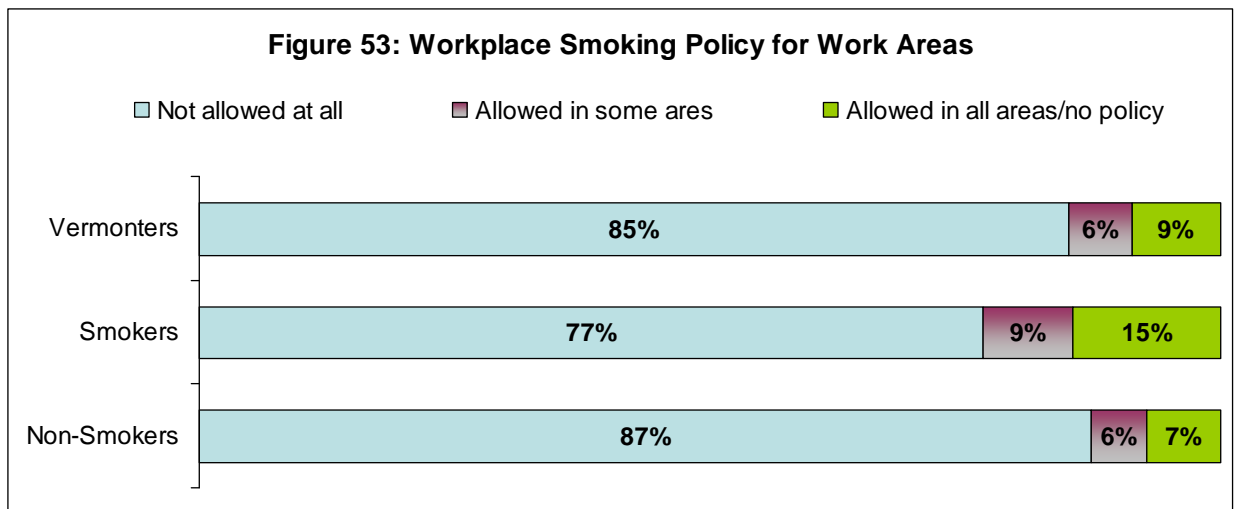
- Those with low incomes (50%) more often reported this than those of middle and high incomes (22% and 11%, respectively).
- Males were about twice as likely as females to report this (31% vs. 16%).

Also in 2008, among those who work indoors most of the time, 89% said smoking is *not* allowed in any public or common areas. This proportion is unchanged from 2004. Five percent said smoking is allowed in all common or public areas or that there is no policy (**Figure 52**).



Smokers and non-smokers were just as likely to report their workplace does not allow smoking in public or common areas (86% vs. 90%). There were also no significant differences by demographic group.

Among all Vermonters employed for wages outside their home, in 2008, 85% said their workplace does not allow smoking in work areas. This is a non-significant increase over the 84% reported in 2007. Non-smokers were more likely to say smoking is not allowed in work areas than smokers, however, this difference was also not statistically significant (**Figure 53**).

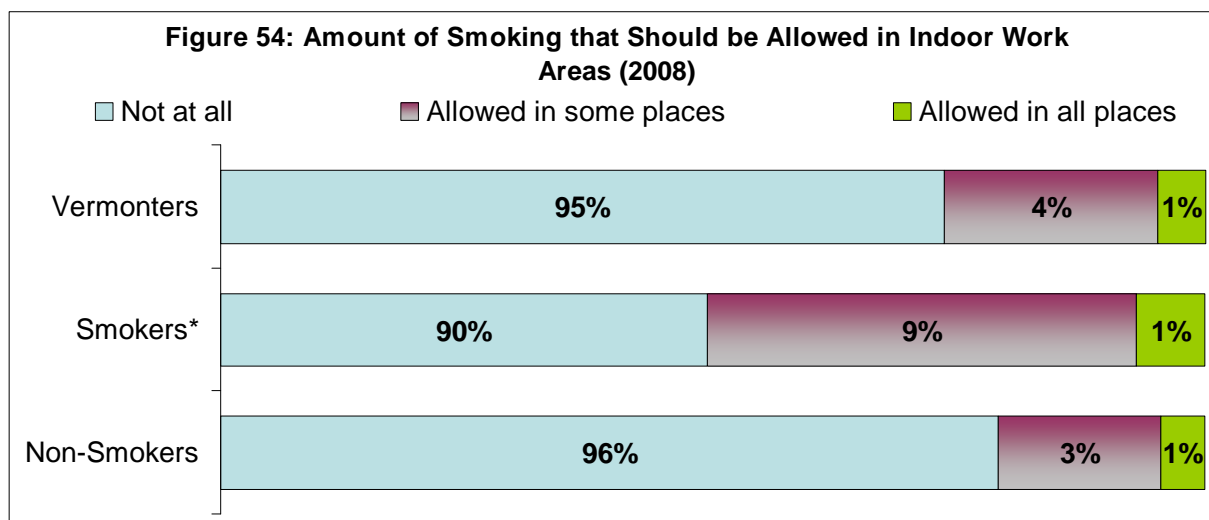


There were significant differences by demographic group in reported workplace smoking policies for work areas:

- Adults 18-24 less often said their work place does not allow smoking in work areas as compared to those 25-44 and 45 and older (61%, 86% and 89%, respectively).
- Those in low household incomes (61%) were less likely to report work area smoking bans than those with middle (88%) and high (95%) incomes.
- Middle income homes less often reported smoking bans than those with high incomes
- Females more often stated the same as compared with males (93% vs. 73%).

Vermonters employed for wages were asked whether they thought smoking should be allowed in indoor areas not at all, in some places or in all areas. Nearly all (95%) workers said smoking should not be allowed at all. This is significantly higher than the 85% who gave the same response in 2004 (**Figure 54**).

The proportion of smokers who do not think smoking should be allowed in indoor work areas was significantly lower than that for non-smokers (90% vs. 96%). However, both smokers and non-smokers said smoking should not be allowed in indoor work areas significantly more often in 2008 than in 2004.

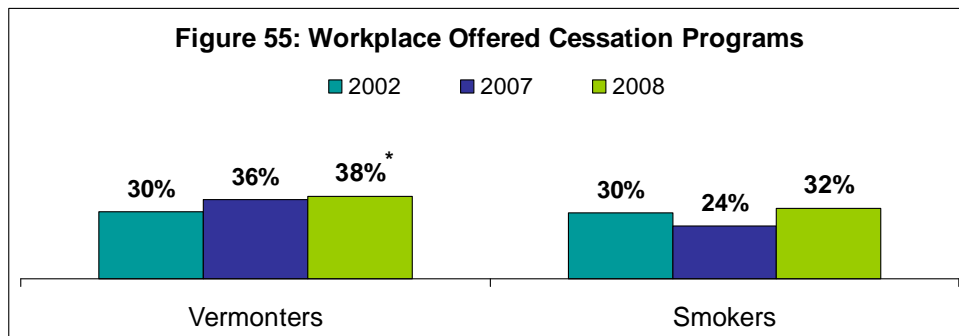


\*Significantly fewer smokers than non-smokers said smoking should not be allowed anywhere.

Workers with high household incomes were significantly more likely than those with a low income to say smoking should not be allowed anywhere in indoor work areas (97% vs. 86%). Women were more likely than men to say the same (97% vs. 92%).

In addition to smoking policies, the VTATS also included a question about whether workplaces have supported programs to help or encourage employees to stop smoking. In 2008, nearly four-in-ten of all survey respondents employed for wages said their workplace backed programs to help or encourage employees to quit smoking during the last year (38%). Slightly fewer smokers employed for wages reported workplace cessation programs (32%). (**Figure 55**)

From 2007 to 2008, the proportion of all Vermont adults employed for wages who indicated their workplace offered cessation support for employees increased from 36% to 38%. Among smokers the proportion also increased, from 24% to 32%. Neither of these shifts were statistically significant. However, when compared to 2002, significantly more Vermonters said their workplace offered smoking cessation help in 2007 (30% in 2002). These trend data are included on page A-14 of Appendix A.



\*Significantly higher in 2008 than 2002.

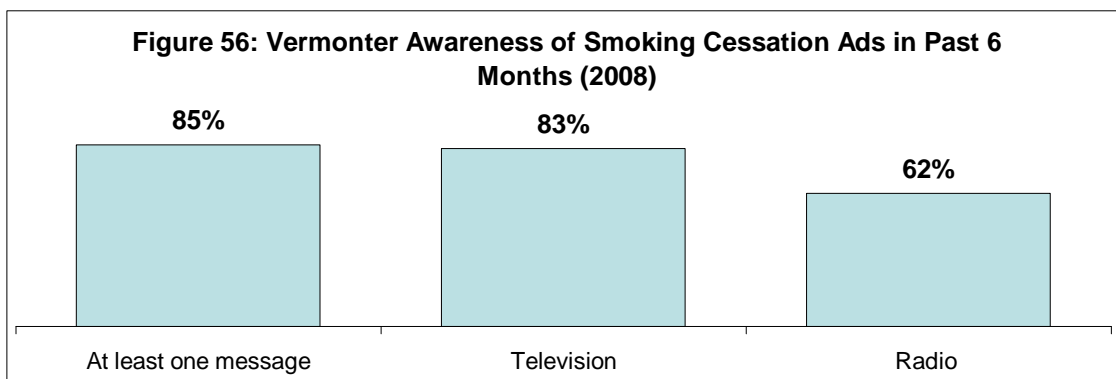
# Media Campaign Awareness

# Media Campaign Awareness

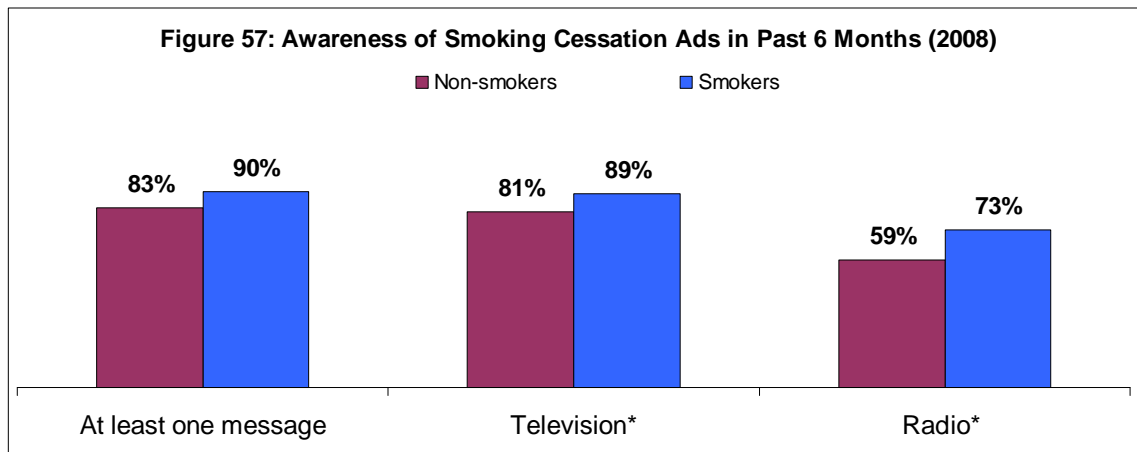
Each year the VTATS includes questions that attempt to assess Vermonter awareness of anti-tobacco and Vermont cessation program media messages. Respondents who confirm their awareness of specific television, radio, and or newspaper messages are then asked a series of questions aimed at gauging the impact of the media.

The overwhelming majority of Vermonters were aware of stop smoking media messages (85% in 2008). Awareness of messages by specific mediums was also high: television ads (83%), radio messages (62%). (**Figure 56**).

Note that in 2008 questions about newspaper ads were not included on the VTATS. All data from past years were re-calculated to be comparable to 2008, and exclude newspapers.



Awareness of media messages among non-smokers was similar to that seen among all Vermonters. Smokers generally reported higher awareness overall of media messages than non-smokers. Recall specifically of television ads (89% vs. 81%) and radio messages (73% vs. 59%) were significantly higher among smokers (**Figure 57**).



\*Awareness significantly higher among smokers than non-smokers.

There were significant differences by demographic groups in awareness of cessation media. Seen or heard at least one smoking cessation ad:

- Adults 45 and older (81%) were less likely to have seen or heard these messages than both those 18-24 and 25-44 years of age (95% and 87%, respectively).

Seen or hear at least one *radio* cessation message:

- Younger adults (18-24) were more likely than those 25-44 and 45 and older to report awareness of radio ads (84% 18-24, 70% 25-44 and 52% 45+).
- Middle income households were more likely than high income ones to have heard at least one radio message (96% vs. 56%).

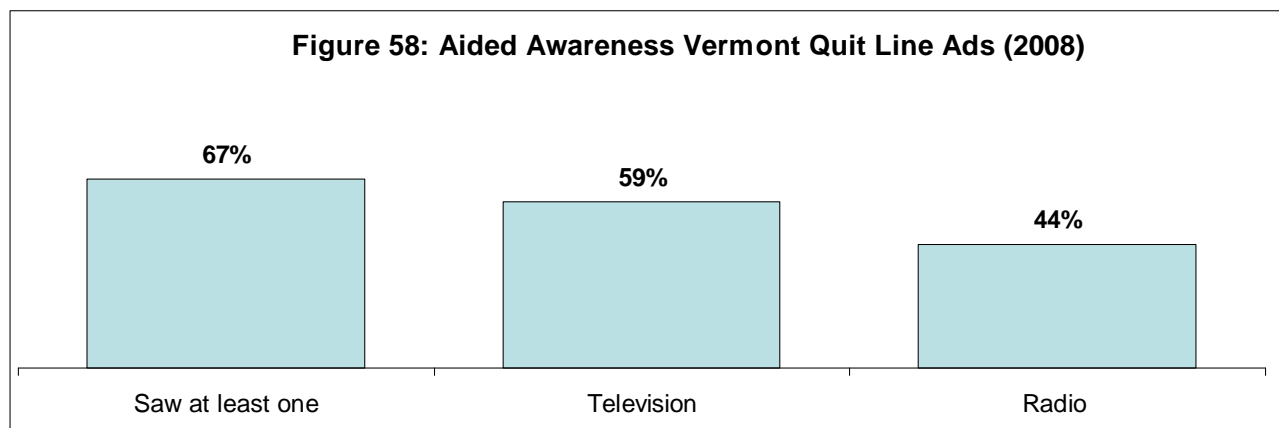
Overall, awareness of all types of media messaging among Vermonters has significantly improved since 2002. However, none of the changes from 2007 to 2008 were statistically significant.

Among smokers, there were no significant changes in awareness of media messages from 2007 to 2008. However, from 2002 to 2008, awareness of radio (42% to 73%) and television (81% to 89%) messaging both increased significantly.

Among nonsmokers, television messaging awareness significantly decreased from 86% in 2007 to 81% in 2008. All non-smoker media awareness measures were significantly higher in 2008 than in 2002.

Trend data for these measures can be found on page A-15 of Appendix A.

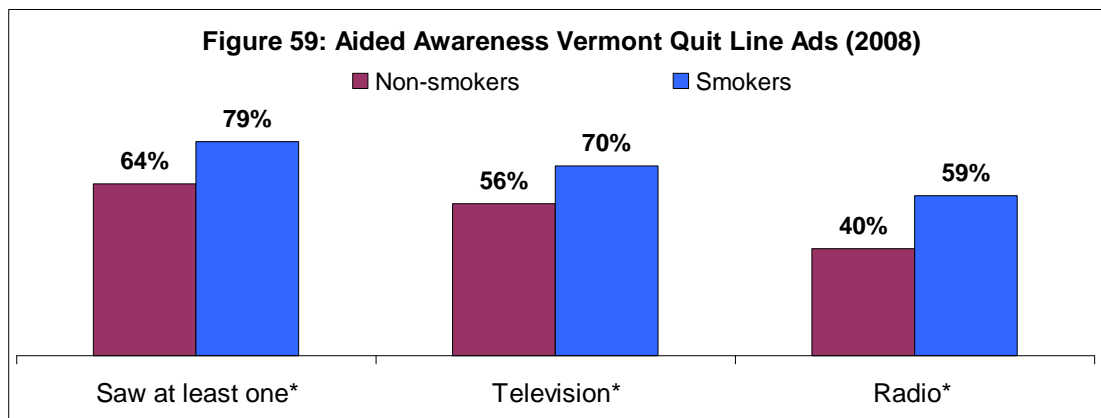
When asked specifically about Quit Line media messages, 67% of Vermonters reported seeing at least one Vermont Quit Line ad in the previous six months. A majority recalled Quit Line television ads (59%), but less than half recalled radio ads (44%). (**Figure 58**).





Smokers were significantly more aware of Quit Line ads, regardless of the medium, than non-smokers (**Figure 59**)

- 79% of smokers recalled seeing or hearing at least one ad vs. 64% of non-smokers.
- 70% of smokers and 56% of non-smokers saw an ad on television.
- 59% of smokers and 40% of non-smokers heard a Quit Line ad on the radio.



\*Awareness significantly higher among smokers than non-smokers.

There were also significant differences in awareness of Quit Line advertisements by age group. Older Vermonters were *less* likely to report having seen Quit Line advertisements:

- 60% of those 45 and older saw at least one Quit Line ad while those 75% of those 25-44 and 79% of those 18-24 said the same.
- Similar differences were also seen for awareness of radio and/or television ads.

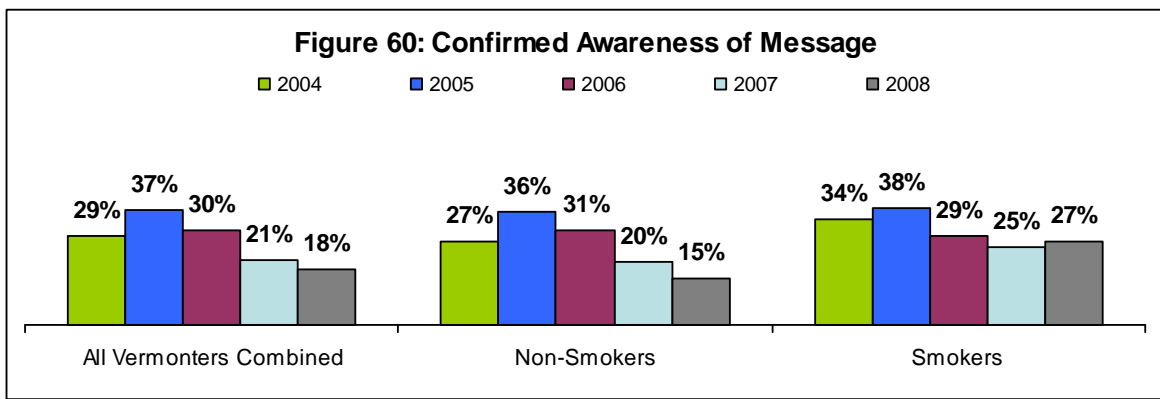
Since 2003, awareness of all Quit Line media has significantly increased among all Vermonters (including smokers and non-smokers). However, changes between 2007 to 2008 for all Vermonters, smokers, and non-smokers are not statistically significant.

These trend data are on page A-16 of Appendix A.

In 2008, there were two second hand smoke radio ads: “Babysitter” and “Buster-Woof”. Separate confirmed awareness questions were asked for each advertisement. Presented here, however, is a combined confirmed awareness measure for both ads.

Less than one-fifth of all Vermonters recalled hearing ads about second hand smoke (18%). About one-quarter of smokers recalled hearing the ads (27%), which is significantly higher than the 15% of non-smokers who remembered hearing the ads (**Figure 60**).

Confirmed recall of television ads was lower in 2008 than in previous years. This may have to do with when ads were run (time of year) versus when the survey was conducted, how often they ran, and the ads themselves, as well as the questions used to confirm respondent awareness.



In 2008, there were significant differences by demographic group. Among Vermonters:

- Older adults (45 and older) less often remembered one of the advertisements (12%) as compared with those 25-44 and 18-24 (24% and 25%, respectively).
- Those with high annual household incomes (9%) were less likely to confirm a radio ad than those with middle or low incomes (21% and 22%, respectively).

Among smokers:

- Those with high annual household incomes less often confirmed hearing a radio ad than those with middle incomes (19% vs. 35%).
- Females were more likely to confirm the radio spots than males (36% vs. 20%).

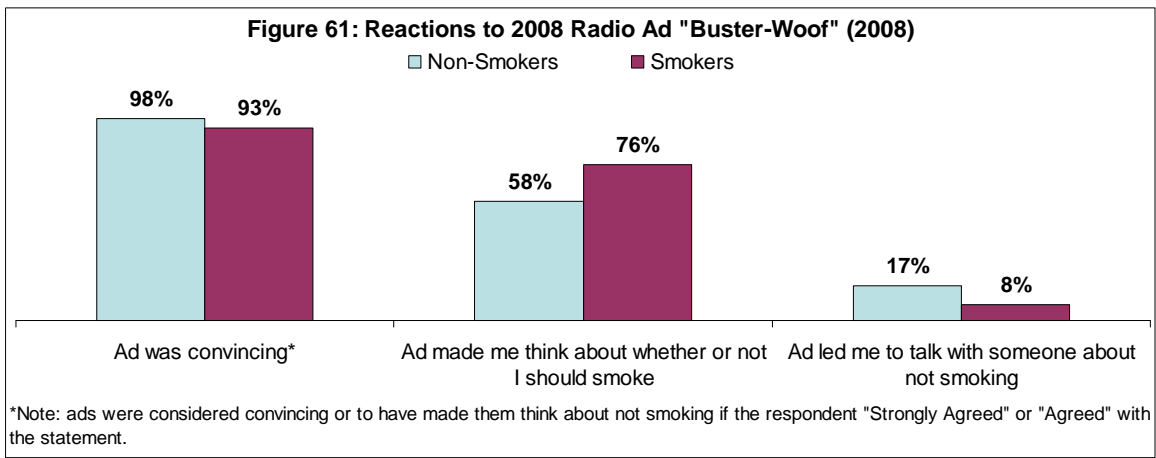
Among non-smokers:

- Ages 18-24 more often remembered an ad than those 45 and older (27% vs. 11%).
- Those with middle annual household incomes were also more likely than those with high incomes to confirm awareness of an ad (21% vs. 7%).

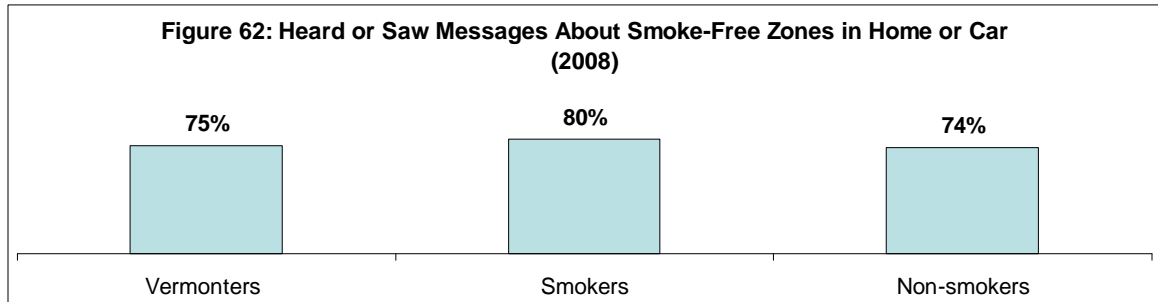
Respondents who remembered an advertisement were asked about their reaction to the ads. Nearly all found the ads to be convincing (99% “Babysitter” and 97% “Buster-Woof”). Non-smokers found the “Buster-Woof” ad slightly more convincing than smokers (98% vs. 93%).

Smokers more often reported that this ad made them think about whether they should smoke than non-smokers (76% vs. 58%), while non-smokers more often said they spoke with someone about the ad after hearing it (17% vs. 8%). However, none of these differences was statistically significant (**Figure 61**).

Due to the small number of smoker respondents who confirmed the “Babysitter”, comparisons by smoking status could not be conducted.



A new question in 2008 asked if respondents had heard or seen any messages encouraging people to keep second hand smoke away from children at home or in the car. Three-quarters of Vermonters said they had heard or seen a smoke-free zone message. Slightly more smokers said they were aware of such messages than did non-smokers (80% vs. 74%). The difference by smoking status was not statistically significant (**Figure 62**).



# Appendix A

## **Vermont Adult Tobacco Survey Trend Data**

# Sample Characteristics by Year

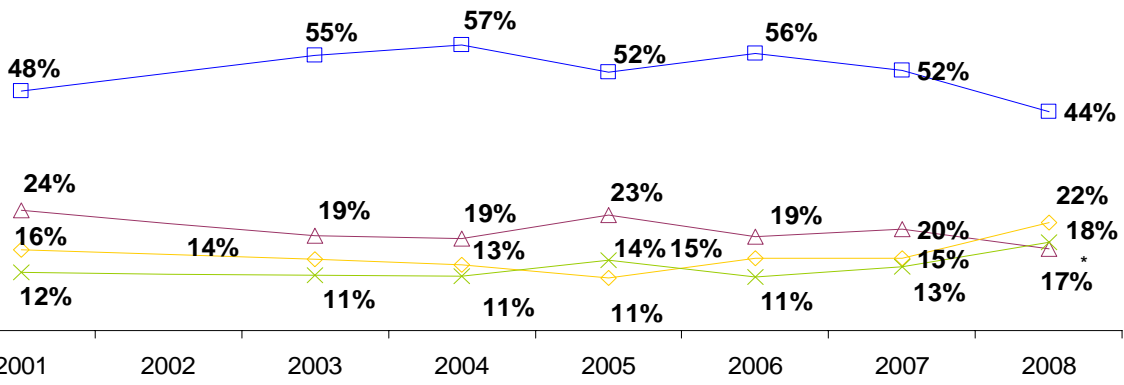
Characteristic Groups	2001		2002		2003		2004		2005		2006		2007		2008	
	N	%*	N	%*	N	%*	N	%*	N	%*	N	%*	N	%*	N	%*
Overall	2,241	100	2,059	100	2,268	100	2,027	100	2,069	100	2,057	100	2,124	100	1880	100
Gender																
Female	1,291	58	1,192	58	1,387	61	1,249	62	1,284	62	1,287	63	1,388	65	1078	57
Male	950	42	867	42	881	39	778	38	785	38	770	37	736	35	802	43
Age Group (yrs)																
18-24	336	15	141	7	309	14	338	17	288	14	291	14	279	13	204	11
25-44	769	34	807	39	738	33	625	31	589	28	555	27	536	25	471	25
45 and older	1,100	49	1,071	52	1,173	52	1,031	51	1,163	56	1,181	57	1,281	60	1172	62
Education Level																
< High school	229	10	127	6	185	8	136	7	158	8	132	6	170	8	109	6
High school	835	37	697	34	756	33	698	34	701	34	727	35	718	34	558	30
Some college	549	25	518	25	554	24	548	27	531	26	497	24	526	25	432	23
College +	594	27	693	34	750	33	632	31	668	32	691	34	702	33	765	41
Income Level*																
Low	589	26	468	23	511	23	513	25	498	24	464	23	523	25	390	21
Middle	1,042	46	1,045	51	1,120	49	932	46	961	46	877	43	885	42	813	53
High	266	12	250	12	337	15	304	15	346	17	380	18	399	19	412	22
Smoking Status																
Current smoker	1,015	45	637	31	829	37	884	44	854	41	906	44	970	46	524	28
Recent quitter	41	2	224	11	110	5	74	4	86	4	69	3	51	2	54	3
Former smoker	433	19	466	23	397	18	317	16	370	18	349	17	318	15	433	23
Never smoker	742	33	718	35	920	41	745	37	745	36	724	35	775	37	862	46
Smoker	1,056	47	861	42	939	41	958	47	940	45	975	47	1,021	48	578	31
Non-smoker	1,175	52	1,184	58	1,317	58	1,062	52	1,115	54	1,073	52	1,093	52	1295	69
Overall Response Rate**		37		33		51		44		46		36		22		34 (LL) and 27 (Cell)

\*Note that the income variable does not include imputed data for missing values. Though not presented, missing values are included in denominator of all percents.

\*\*Based on Behavioral Risk Factor Surveillance System (BRFSS) Council of American Survey Research Organizations (CASRO) response rate. Note that in 2008 two response rates are presented, one for land line telephone (LL) and another for cell phone numbers. There is not yet a standard response rate method for cell phone numbers; the contractor categorized the cell phone dispositions and developed a CASRO response rate based on the best information available at the time.

### Current Smoker Quit Attempts in Last Year

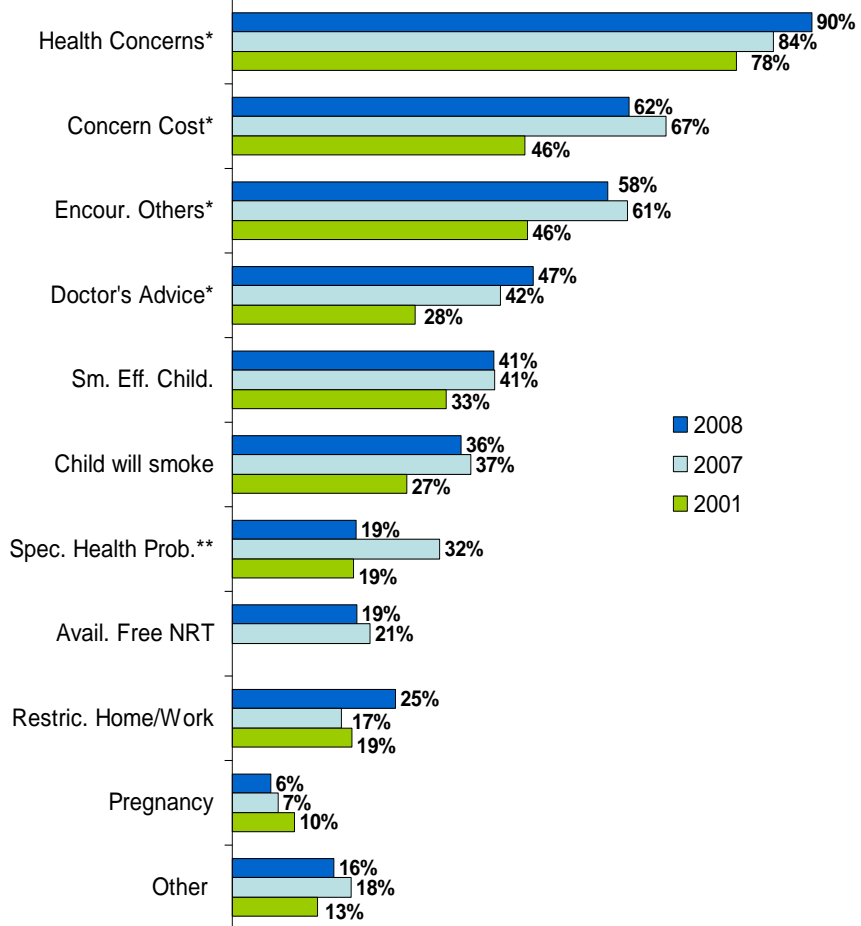
■ None     
 ▲ One     
 ◆ Two     
 ✕ Three or More



Survey Question Q2\_8

\*Significantly lower in 2008 than in 2001.

**Reasons for Trying to Quit Smoking**  
**Current Smokers Who Seriously Tried to Quit or Recently Quit**  
**Smoking in Last Year**

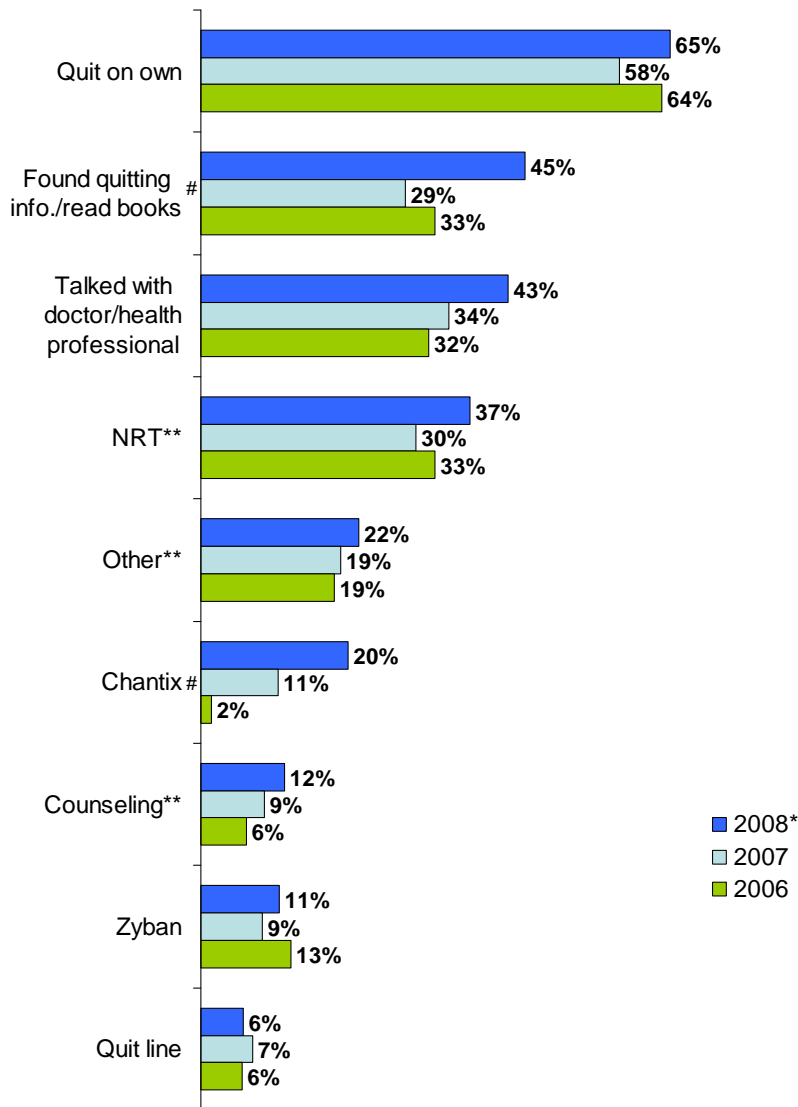


Survey Questions Q2\_10 and Q3\_32

\*Significantly different in 2008 and 2001.

\*\*Significantly different in 2008 versus survey year 2007.

### Cessation Methods Used in Most Recent Quit Attempt by Vermont Smokers Who Seriously Tried to or Recently Quit Smoking in Past Year



Survey Questions NQ20063 and NQ20064

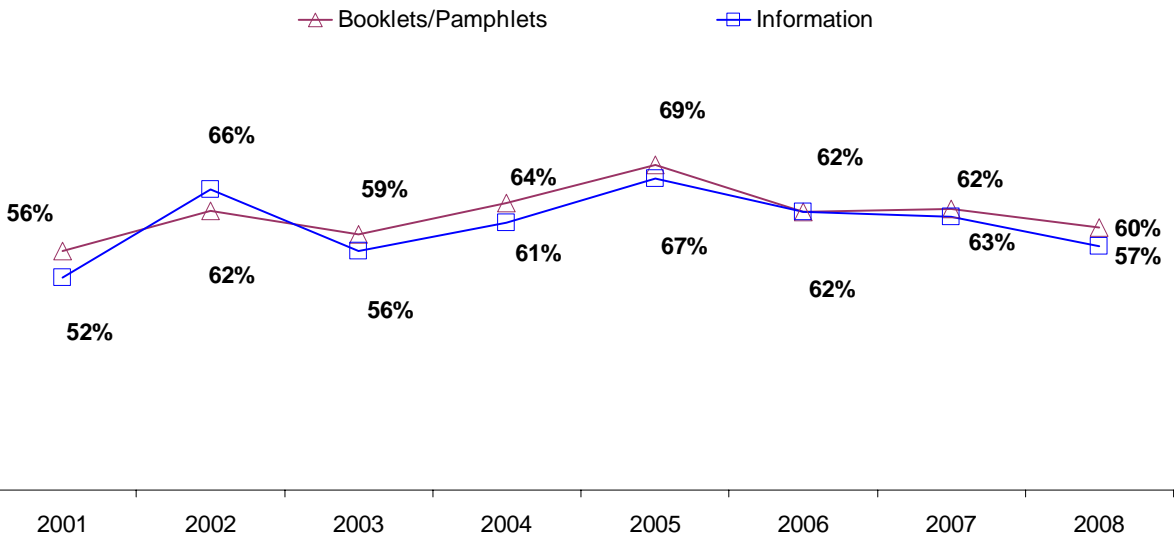
\*Prior to 2008, a question about cessation methods ever used to try and quit smoking was asked prior to that about the methods used in most recent quit attempts. This may affect comparability of the results from 2008 to years past.

\*\*NRT includes use of the nicotine patch, gum, or lozenges. Other includes nicotine nasal spray, inhaler, internet and those who said other methods. Counseling includes group and individual counseling.

#Significantly higher in 2008 than in 2007 and 2001.

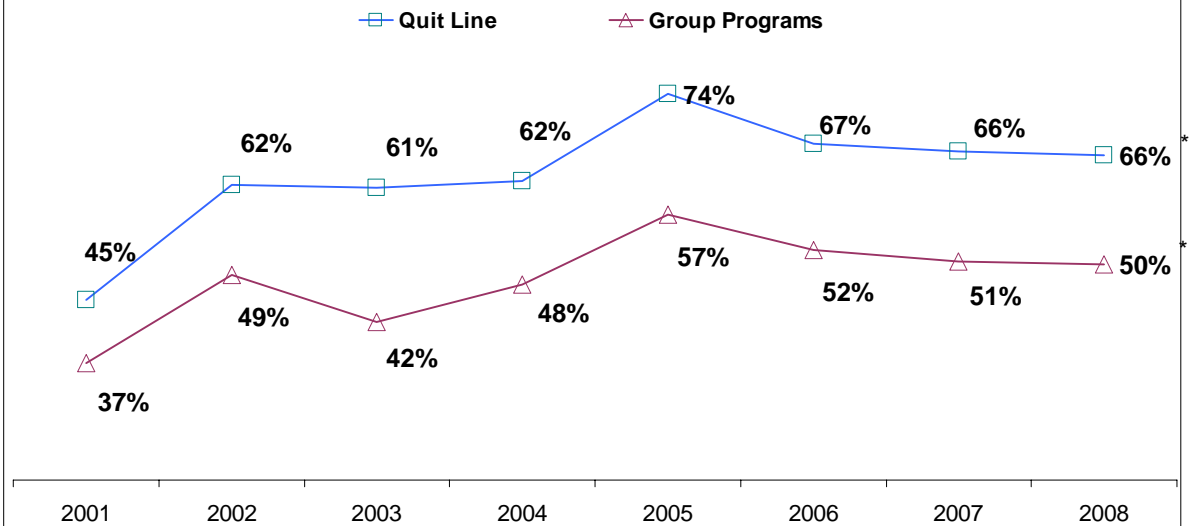


**Perceived Access to Cessation Information  
Percentage of Smokers Reported "Very Easy" Access**



Survey Questions Q5\_57A and Q5\_57B

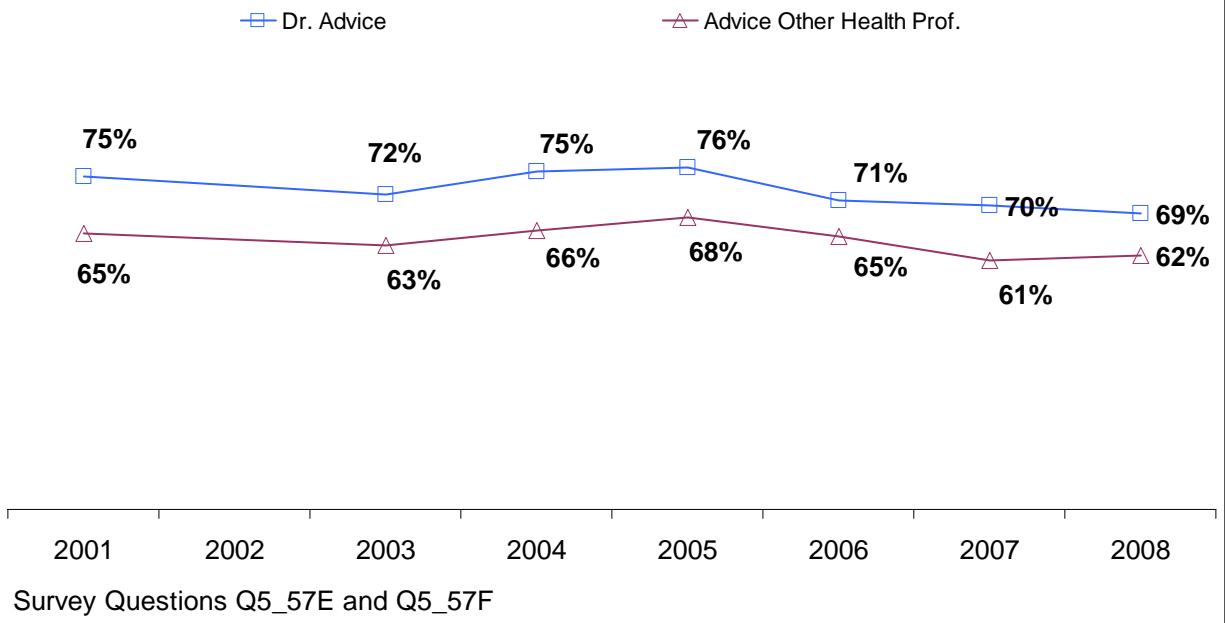
**Perceived Access to Local Cessation Services  
Percentage of Smokers Reporting "Very Easy" Access**



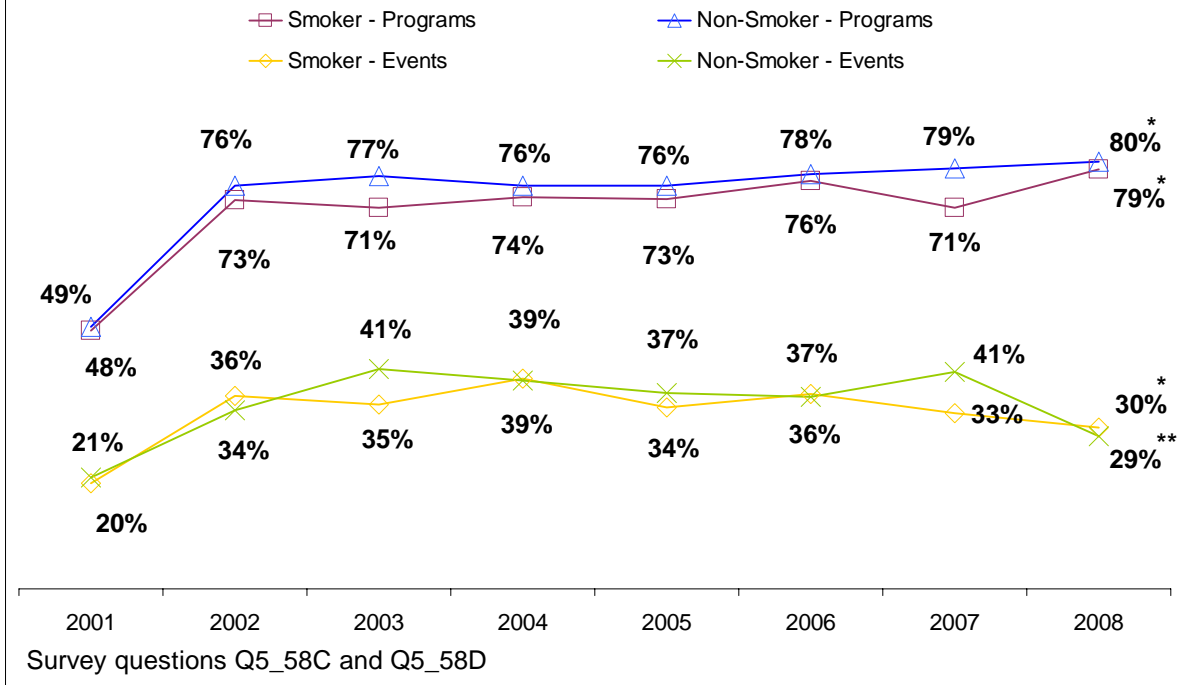
Survey Questions Q5\_57C and Q5\_57D

\*Significantly higher in 2008 than in 2001.

### Perceived Access to Advice from Health Professionals Percentage of Smokers Reporting "Very Easy" Access



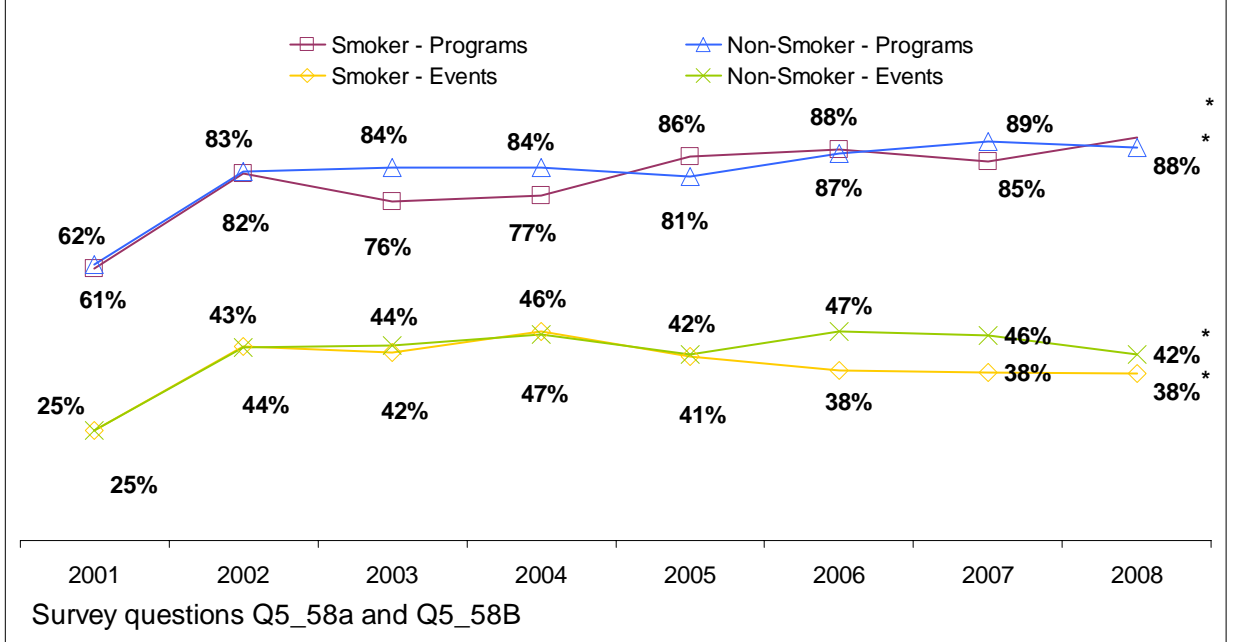
### Awareness of Programs and Events in Area to Help Young People Avoid Smoking



\*Significantly different in 2008 than in 2001.

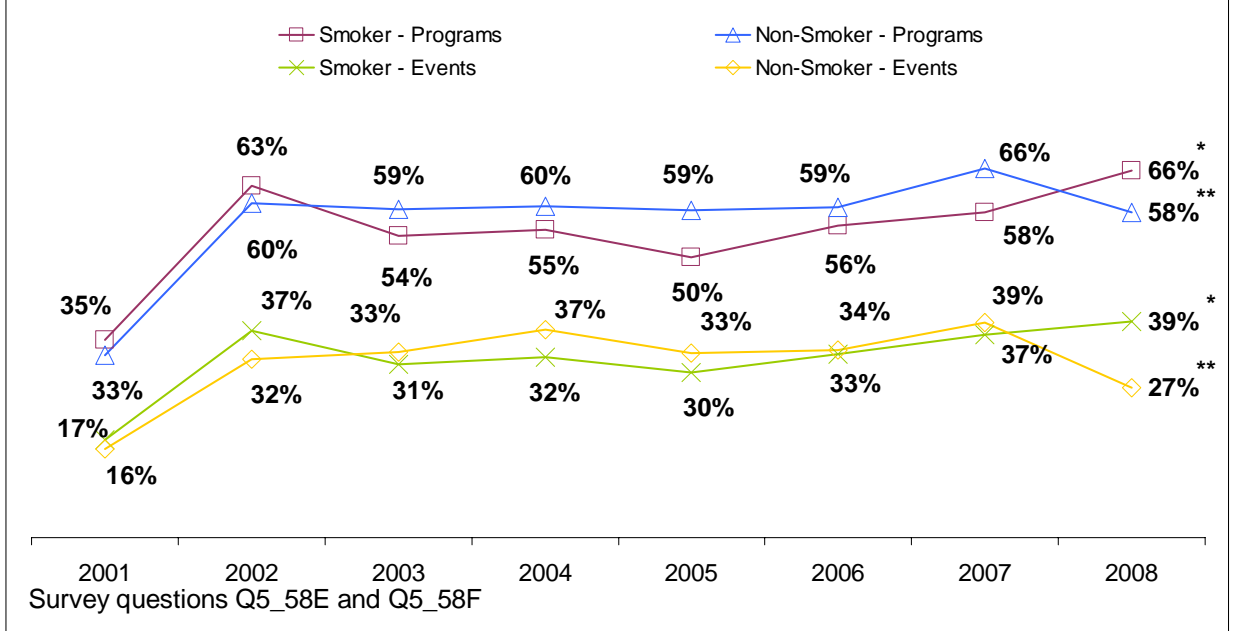
\*\*Significantly different in 2008 than in 2001 and in 2007.

### Awareness of Programs and Events in Area to Help People Quit Smoking



\*Significantly higher in 2008 than in 2001.

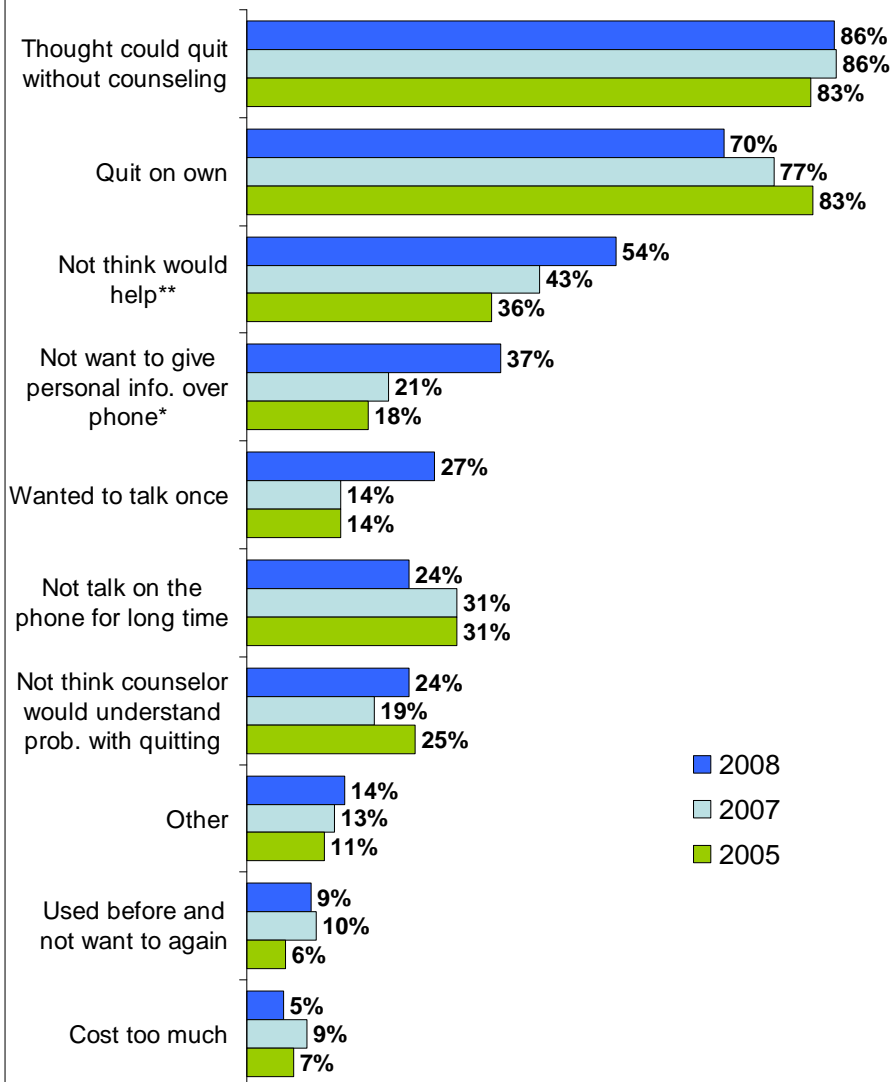
### Awareness of Programs and Events that Encourage People Not to Smoke Around Children



\*Significantly higher in 2008 than in 2001.

\*\*Significantly higher in 2008 than in 2001 and 2007.

### Reasons for Not Using Quit Line During Most Recent Quit Attempt

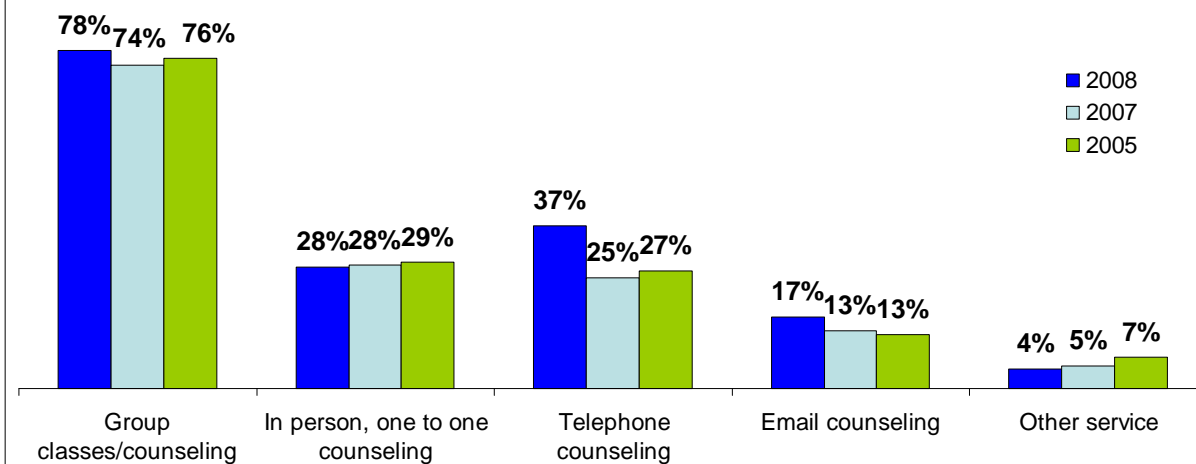


Survey Question NQ2\_10C

\*Significantly higher in 2008 than in 2005 and 2007.

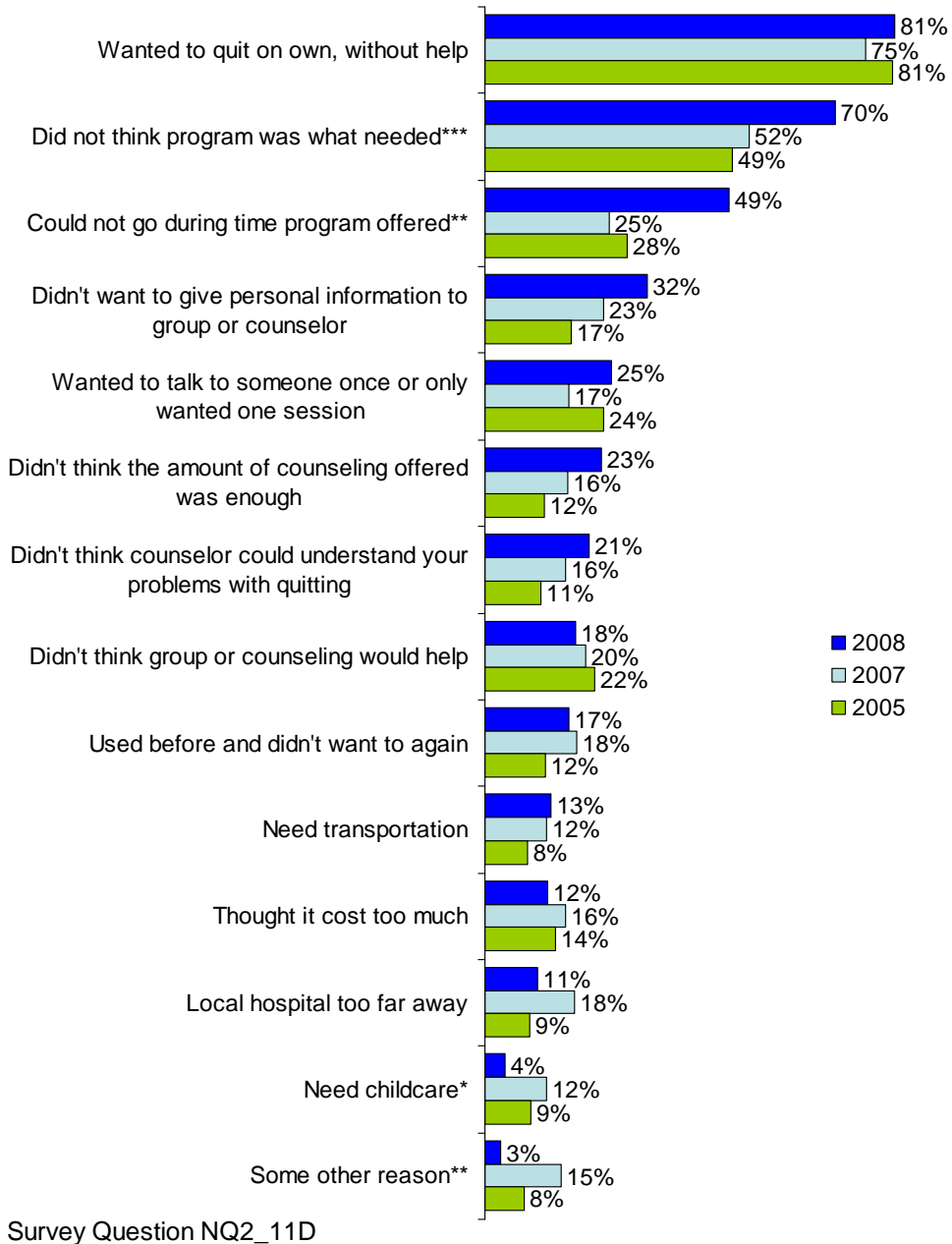
\*\*Significantly higher in 2008 than in 2005.

### Awareness of Cessation Services Offered by Local Hospitals



Survey Question NQ2\_11B

## Reasons for Not Using Local Hospital Cessation Program During Most Recent Quit Attempt

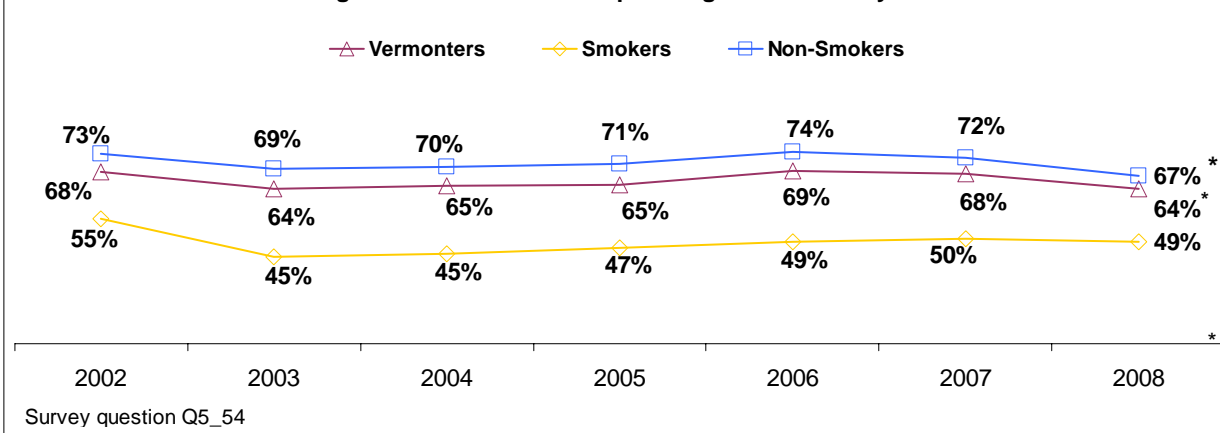


\*Significantly lower in 2008 than 2007.

\*\*Significantly different in 2008 than in 2005 and in 2007.

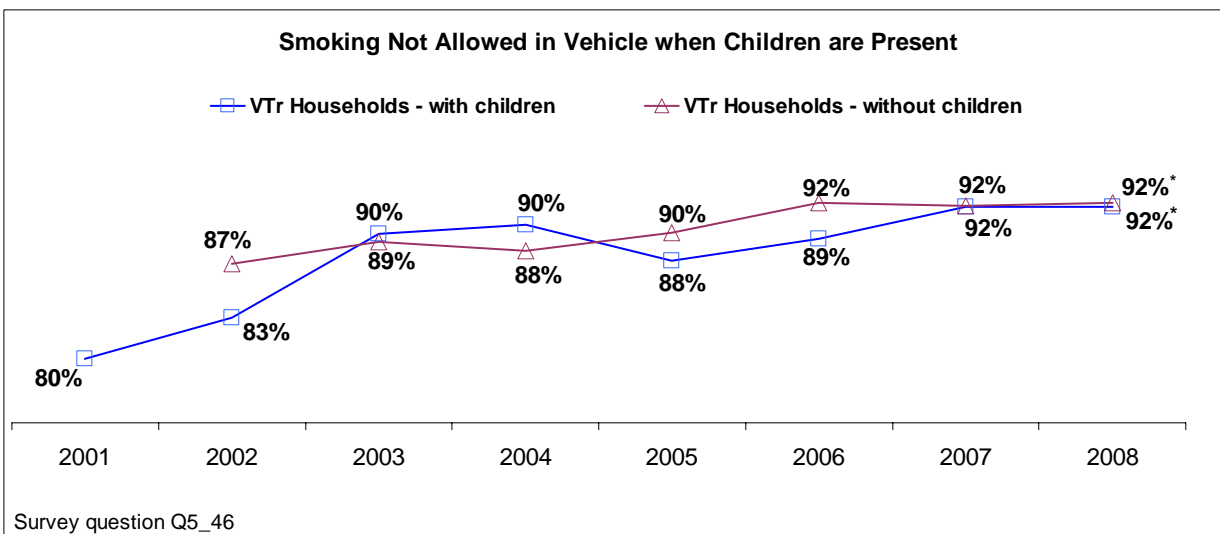
\*\*\*Significantly higher in 2008 than in 2005.

### Breathing Smoke from Other People's Cigarettes is "Very Harmful"



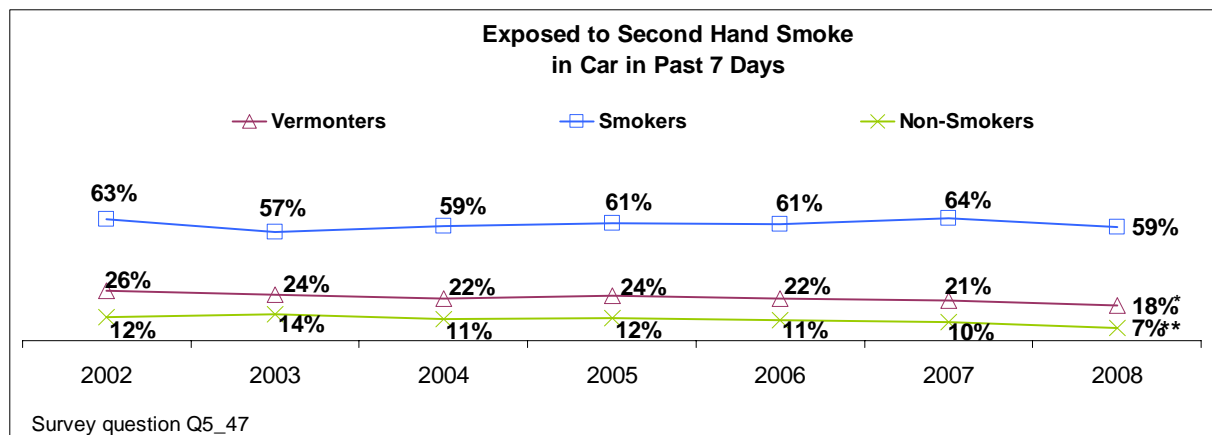
\*Significantly lower in 2008 than in 2002.

### Smoking Not Allowed in Vehicle when Children are Present



\*Significantly higher in 2008 than in 2001 (with children) and in 2002 (without children).

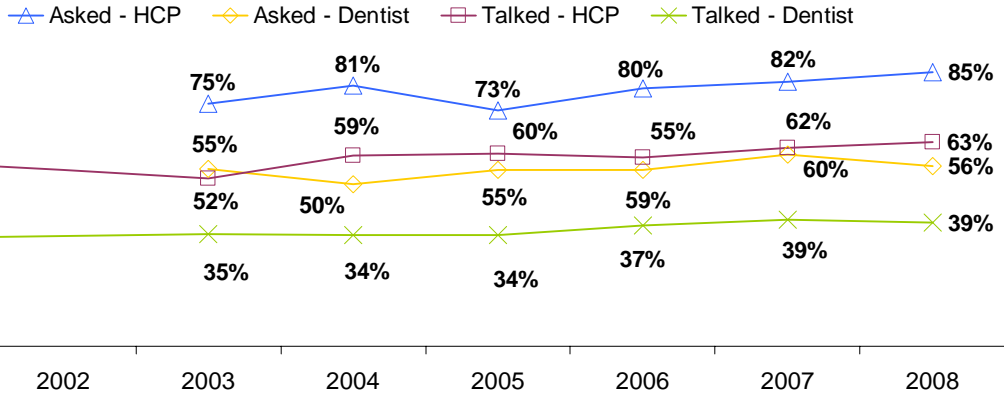
### Exposed to Second Hand Smoke in Car in Past 7 Days



\*Significantly lower in 2008 than in 2002.

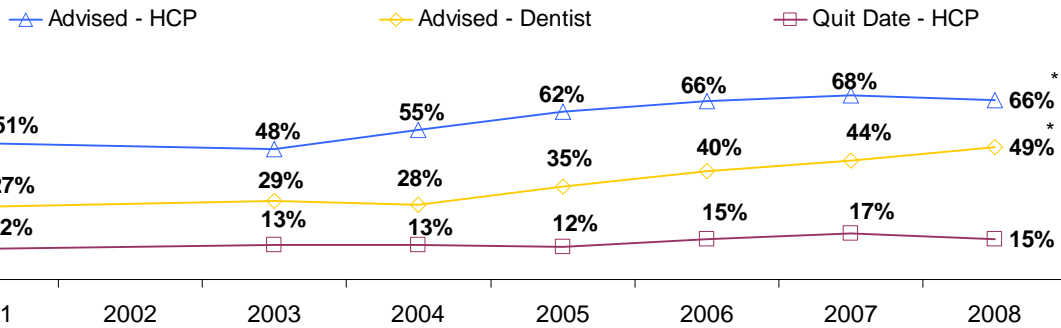
\*\*Significantly lower in 2008 than in 2002 and 2007.

### Health Care Professional (HCP)/Dentist Asked or Talked About Smoking Current Smokers Who Visited Health Care Professional in Last Year



Survey questions Q4\_39B-C and Q4\_40B-C

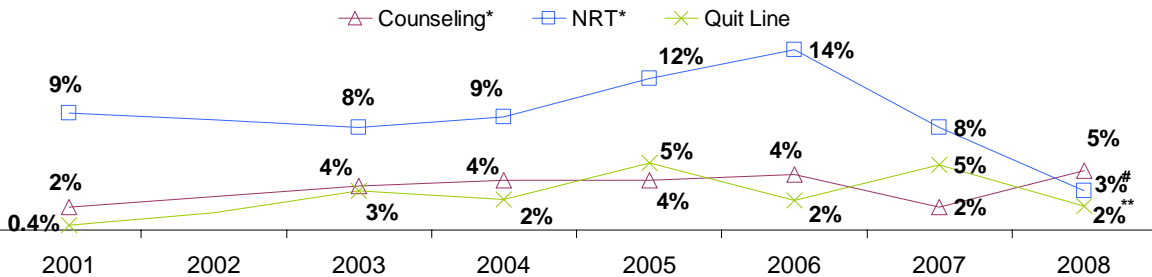
### Health Care Professional (HCP)/Dentist Advised You to Stop Smoking or Asked to Set a Quit Date Current Smokers Who Visited Health Care Professional in Last Year



Survey questions Q4\_39D, F and Q4\_40D, F

\*Significantly higher in 2008 than in 2001.

### Health Care Providers Recommending Counseling, Quit Line, or Nicotine Replacement Therapy to Patients Who Smoke Current Smokers Who Saw a Health Care Professional in Last Year



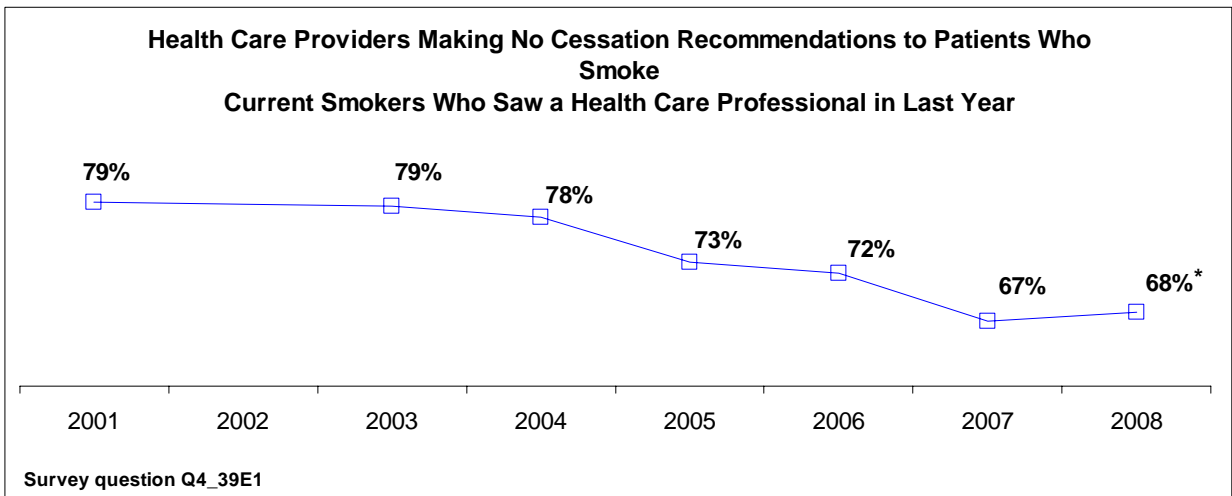
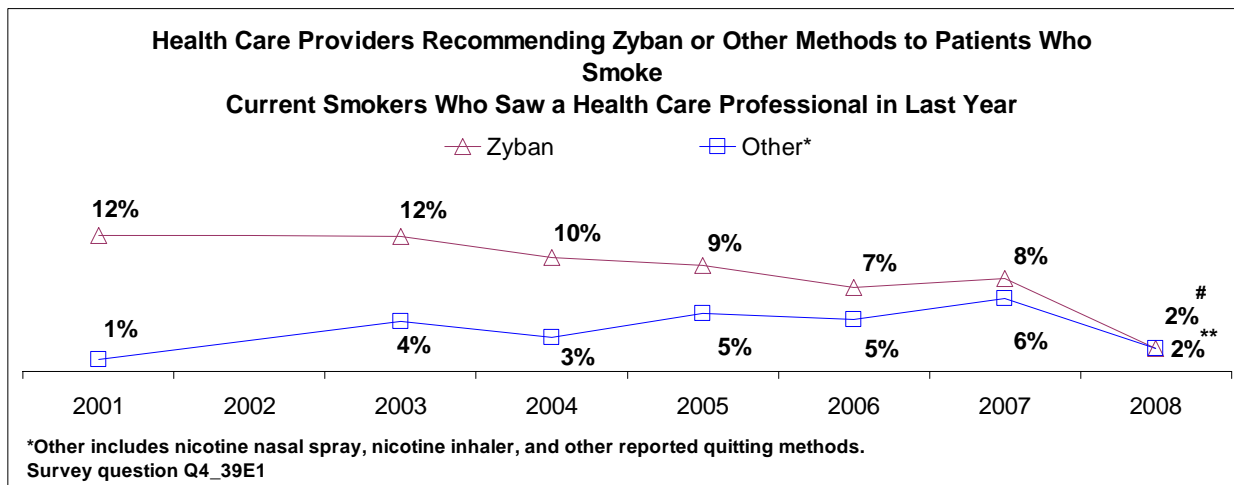
\*Counseling includes those recommended individual and group counseling. NRT includes recommendations for the nicotine patch, gum or lozenges.

Survey question Q4\_39E1

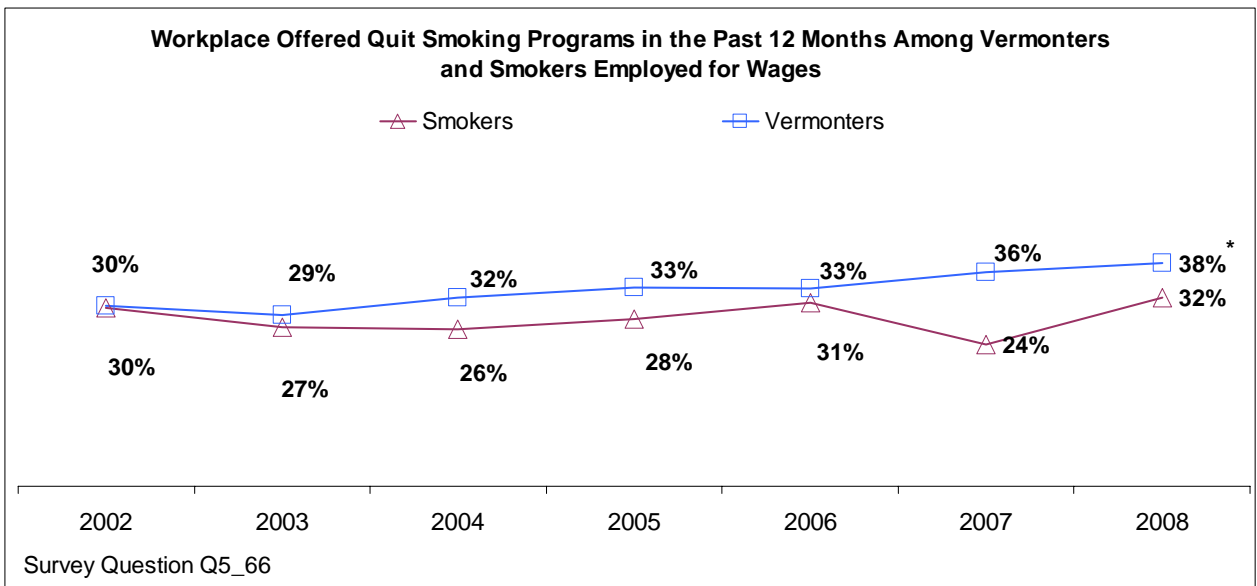
\*\*Significantly lower in 2008 than in 2007.

#Significantly lower in 2008 than in 2001 and in 2007.



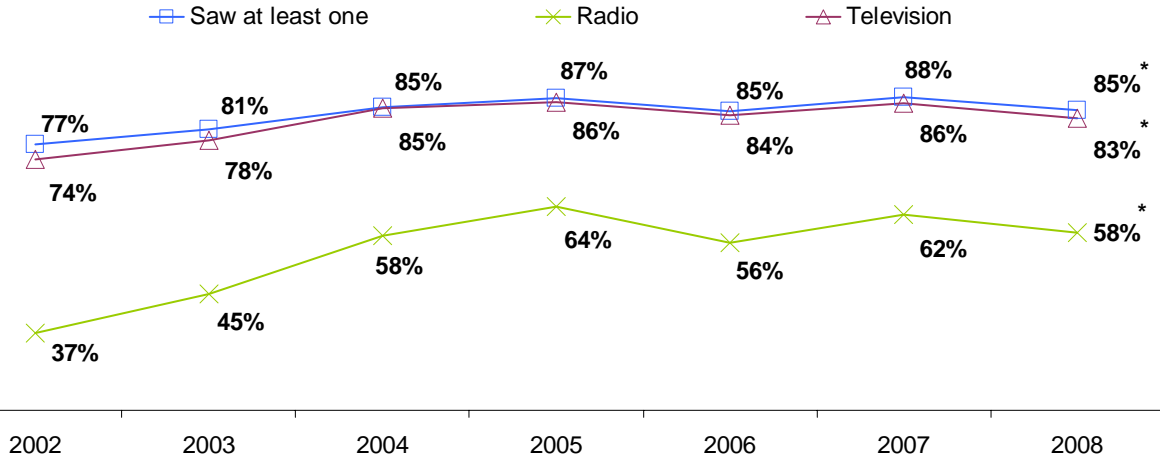


\*Significantly lower in 2008 than in 2001.



\*Significantly higher in 2008 than in 2002.

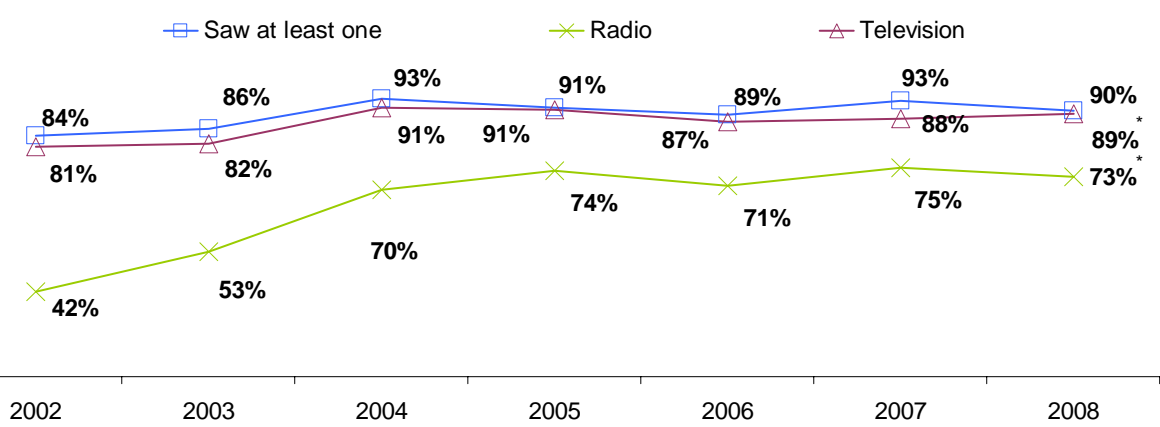
### Vermonters Awareness of At Least One Smoking Cessation Ad in Last 6 Months



Survey Questions Q5\_78 and Q5\_82

\*Significantly higher in 2008 than in 2002

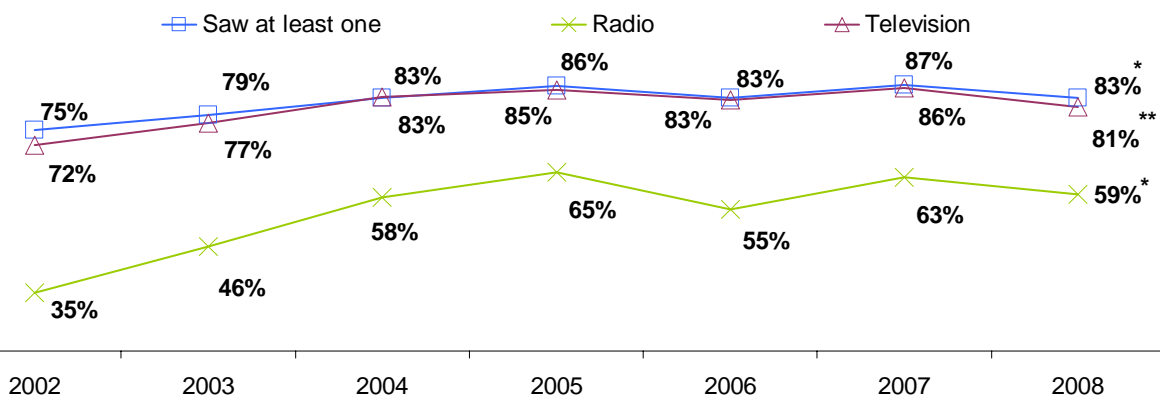
### Smoker Awareness of At Least One Smoking Cessation Ad in Last 6 Months



Survey Questions Q5\_78 and Q5\_82

\*Significantly higher in 2008 than in 2002.

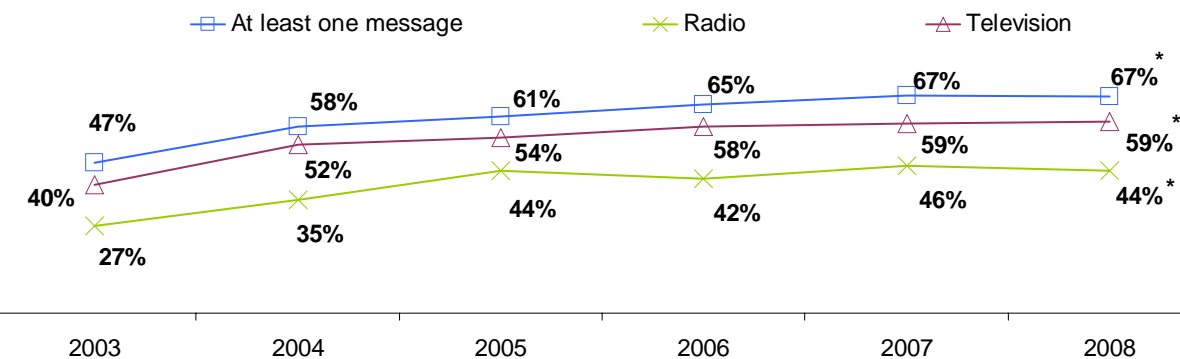
### Non-Smoker Awareness of At Least One Smoking Cessation Ad in Last 6 Months



Survey Questions Q5\_78, and Q5\_82

\*Significantly higher in 2008 than in 2002.; \*\*Significantly higher in 2008 than in both 2002 and 2007.

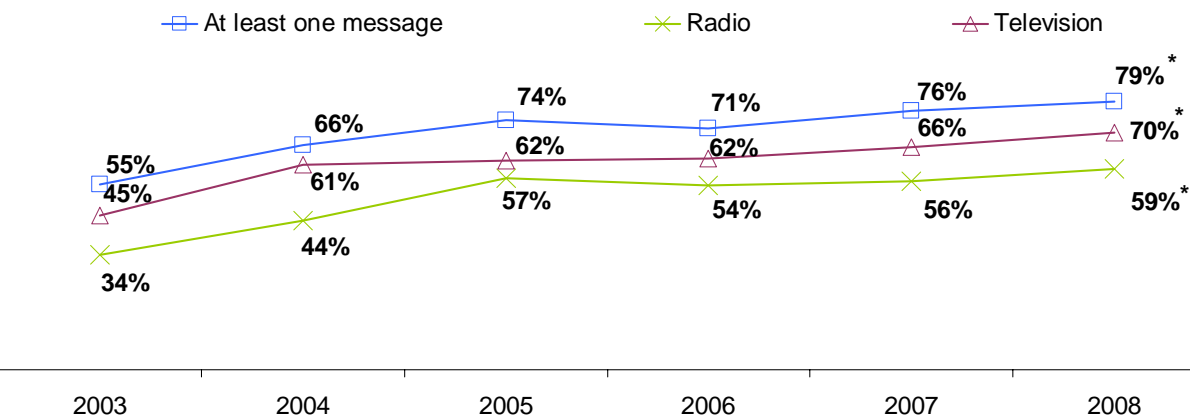
### Aided Awareness of Any Ads for the Vermont Quit Line Vermonters



Survey Questions Q5\_80 and Q5\_84.

\*Significantly higher in 2008 than in 2003.

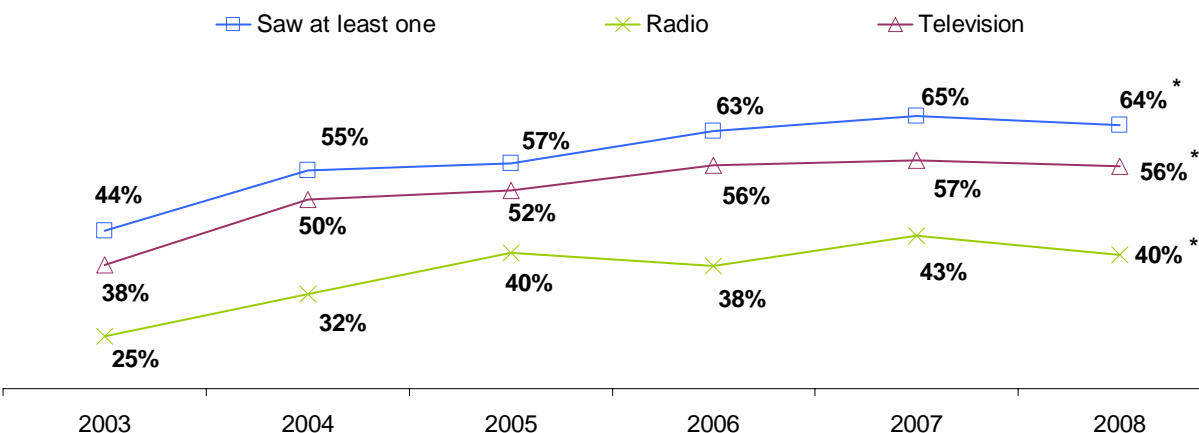
### Aided Awareness of Any Ads for the Vermont Quit Line Smokers



Survey Questions Q5\_80 and Q5\_84

\*Significantly higher in 2008 than in 2003.

### Aided Awareness of Any Ads for the Vermont Quit Line Non-Smokers



Survey Questions Q5\_80 and Q5\_84.

\*Significantly higher in 2008 than in 2003.

# Appendix B

## 2008 Adult Tobacco Survey Questionnaire

**VERMONT DEPARTMENT OF HEALTH  
ADULT TOBACCO SURVEY  
2008 Survey**

Introduction – land line and cell phones .....  
 Screener 1 – Land line .....  
 Screener 2 – Land line .....  
 Screener 3 – Land line .....  
 Section 1: SMOKING STATUS.....  
 Section 2: CIGARETTE SMOKING PRACTICES: CURRENT SMOKERS .....  
 Section 3. CIGARETTE SMOKING PRACTICES\_-FORMER SMOKERS .....  
 Section 4: HEALTH CARE VISITS IN THE PAST 12 MONTHS.....  
 Section 5: RISK PERCEPTION AND SOCIAL INFLUENCES .....  
 Section 6: DEMOGRAPHICS.....  
 CLOSING .....

## Introduction – land line and cell phones

---

INTRO: HELLO, I'm calling for the Vermont Department of Health. My name is \_\_\_\_\_. We're gathering information on the health of Vermont residents. Your phone number has been chosen randomly, and I'd like to ask some questions about health and health practices.

[IF LL STUDY CONTINUE. If CELL STUDY GO TO "CELL PHONE SCREENER"]

Is this /insert telephone number/?

01	{GO TO INTROA}	YES
02		NO

TERM1: Thank you very much, but I seem to have dialed the wrong number. It's possible that your number may be called at a later time. /TERMINATE/

### [USED LAND LINE ONLY]

INTROA: Is this a private residence?

01	{GO TO NOTE BEFORE PRES1_1}	YES
02		NO

TERM2: Thank you very much, but we are only interviewing private residences. Thank you for your time. /TERMINATE/

## Screener 1 – Land line

---

/Use until non/ex smoker quota met/

PRES1: Our study requires that we randomly select one adult who lives in your household to be interviewed.

S1\_1. In order to make this random selection, can you please tell me how many members of your household, including yourself, are 18 years of age or older?

\_\_ NUMBER OF ADULTS

/IF S1\_1=1, ask S1\_2, otherwise go to S1\_3/

S1\_2. Are you the adult?

01		YES, MALE
02		YES, FEMALE
03	{GO TO S1_2b}	NO

S1\_2a. Then you are the person I need to speak with.

/If S1\_2 = 03, ask S1\_2b, otherwise go to "you're the one"/

S1\_2b. Is the adult a man or a woman?

01 {AUTOCODE S1\_3} MAN  
02 (AUTOCODE S1\_3} WOMAN  
77 DON'T KNOW  
99 REFUSED

S1\_2c. May I speak with /fill in (him/her) from previous question/?

01 {GO TO "CORRECT RESPONDENT"} YES  
02 {GO TO CALLBACK} NO  
77 {GO TO CALLBACK} DON'T KNOW  
99 {TERMINATE} REFUSED

/IF S1\_1>1/

S1\_3A. How many of these adults are men?

0 NONE  
1 ONE  
2 TWO  
3 THREE  
4 FOUR  
5 FIVE  
6 SIX  
7 SEVEN  
8 EIGHT  
9 NINE

S1\_3B. How many of these adults are women?

0 NONE  
1 ONE  
2 TWO  
3 THREE  
4 FOUR  
5 FIVE  
6 SIX  
7 SEVEN  
8 EIGHT  
9 NINE

//need selected variable from screener saved//

S1\_4. The person in your household that I need to speak with is /insert selected respondent/. Would that be you?

01 {GO TO "You're the one"} YES  
02 NO  
77 {GO TO CALLBACK} DON'T KNOW  
99 {TERMINATE} REFUSED

S1_4a. May I speak with /insert selected respondent/?		
01	{GO TO "CORRECT RESPONDENT"}	YES
02	{GO TO CALLBACK}	NO
77	{GO TO CALLBACK}	DON'T KNOW
99	{GO TO TERMINATE}	REFUSED

## Screener 2 – Land line

/Use until current smoker quota met/

PRES2. Our study requires that we randomly select one adult who lives in your household to be interviewed.

S2\_1. In order to make this random selection, can you please tell me how many members of your household, including yourself, are 18 years of age or older?

-- {RANGE = 0-18}NUMBER OF ADULTS

/if S2\_1>1, go to S2\_4/

S2\_2. Are you the adult?

01	{GO TO S2_3}	YES
02		NO

S2\_2a. May I speak with the adult?

01		YES
02	{GO TO CALLBACK}	NO
77	{GO TO CALLBACK}	DON'T KNOW
99	{TERMINATE}	REFUSED

S2\_2b. HELLO, I'm calling for the Vermont Department of Health. We're gathering information on the health of Vermont residents. Your phone number has been chosen randomly to be interviewed and I'd like to ask some questions about health and health practices.

S2\_3. Do you smoke cigarettes every day, some days, or not at all?

01	{GO TO YOU'RE THE ONE}	EVERY DAY OR SOME DAYS, MALE
02	{GO TO YOU'RE THE ONE}	EVERY DAY OR SOME DAYS, FEMALE
03	{GO TO instructions before TERM3}	NOT AT ALL, MALE
04	{GO TO instructions before TERM3}	NOT AT ALL, FEMALE

S2\_4. Can you please tell me how many of these adults smoke cigarettes every day or some days, and how many do not smoke cigarettes at all?

-- NUMBER OF ADULTS WHO SMOKE EVERY DAY OR SOME DAYS  
 -- NUMBER OF ADULTS WHO DO NOT SMOKE AT ALL



/If S2\_4 is not equal to S2\_1, ask S2\_4CHECK, otherwise go to instructions before S2\_5/  
S2\_4CHECK. I'm sorry, I seem to have made a mistake. Earlier you said there were /fill in answer  
from S2\_1/ adults in the household, now I have that there are /fill in answer from S2\_4/ adults in the  
household. Is this correct?

01	{RESET S2_1}	NO, NUMBER OF ADULTS IN HOUSEHOLD IS WRONG
02	{RESET S2_4}	NO, NUMBER OF ADULTS IN PREVIOUS QUESTION IS WRONG
03		CORRECT, NO CHANGE
77		DON'T KNOW
99		REFUSED

/If S2\_4 Number of adults who smoke every day or some days = 1, go to S2\_5/

/If S2\_4 Number of adults who smoke every day or some days >1, go to S2\_6/

/If S2\_4 Number of adults who smoke every day or some days = 0 or S2\_3 = 03, or 04 and Quota for  
18-24 year old is full, go to TERM3, otherwise continue/

/IF S2\_3 = 03 or 04, go to S2\_13/

/If S2\_4 Number of adults who do not smoke at all > 0, go to S2\_8/

TERM3. Thank you, those are all the questions I have for you. Thank you very much for your time.  
/TERMINATE/

S2\_5. The person I need to speak with is the adult who smokes every day or some days. Are you  
the adult?

01	{GO TO YOU'RE THE ONE}	YES, FEMALE
02	{GO TO YOU'RE THE ONE}	YES, MALE
03		NO

/If S2\_5 = 03/

S2\_5a. Is the adult a man or a woman?

01	MAN
02	WOMAN
77	DON'T KNOW
99	REFUSED

S2\_5b. May I speak with /fill in "him" or "her" from previous question/?

01	{GO TO "CORRECT RESPONDENT"}	YES
02	{GO TO CALLBACK}	NO
77	{GO TO CALLBACK}	DON'T KNOW
99	{TERMINATE}	REFUSED

S2\_6. How many of the adults in your household who smoke every day or some days are men, and how many are women?

-- NUMBER OF MEN SMOKERS  
-- NUMBER OF WOMEN SMOKERS

S2\_7. The person in your household that I need to speak with is /insert selected respondent/. Would that be you?

01 {GO TO "You're the one"} YES  
02 NO  
77 {GO TO CALLBACK} DON'T KNOW  
99 {TERMINATE} REFUSED

S2\_7a. May I speak with the /insert selected respondent/?

01 {GO TO "CORRECT RESPONDENT"} YES  
02 {GO TO CALLBACK} NO  
77 {GO TO CALLBACK} DON'T KNOW  
99 {GO TO TERMINATE} REFUSED

S2\_8. Including yourself, can you please tell me how many of the non-smoking adults in your household are between the ages of 18 and 24 (*pause*),

-- NUMBER OF NON-SMOKING ADULTS 18-24 YEARS OF AGE

how many are between the ages of 25 and 49 (*pause*),

-- NUMBER OF NON-SMOKING ADULTS 25-49 YEARS OF AGE

and how many are 50 years of age or older?

-- NUMBER OF NON-SMOKING ADULTS 50 YEARS OF AGE OR OLDER

/If S2\_1 = 1 and S2\_8 does not equal 1, go to S2\_8CHECKa. If S2\_1 > 1 and total of S2\_8 does not equal S2\_4 number of adults who do not smoke at all, ask S2\_8CHECKb, otherwise go to instructions before S-10/

S2\_8CHECKa. I'm sorry, I seem to have made a mistake. Earlier you said there were /fill in answer from S2\_1/ adults in the household, now I have that there are /fill in answer from S2\_8/ adults in the household. Is this correct?

01 {RESET S2\_1} NO, NUMBER OF ADULTS IN HOUSEHOLD IS WRONG  
02 {RESET S2\_8} NO, NUMBER OF NON-SMOKING ADULTS IN HOUSEHOLD IS WRONG  
03 CORRECT, NO CHANGE  
77 DON'T KNOW  
99 REFUSED

S2\_8CHECKb. I'm sorry, I seem to have made a mistake. Earlier you said there were /fill in answer from S2\_4/ adults in the household who do not smoke at all, now I have that there are /fill in answer from S2\_8/ adults in the household that do not smoke at all. Is this correct?

- 01 {RESET S2\_4} NO, NUMBER OF ADULTS WHO DO NOT SMOKE IN THE HOUSEHOLD IS WRONG
- 02 {RESET S2\_8} NO, NUMBER OF ADULTS WHO DO NOT SMOKE IN PREVIOUS QUESTION IS WRONG
- 03 CORRECT, NO CHANGE
- 77 DON'T KNOW
- 99 REFUSED

/If S2\_8 number of 18-24 year olds= 0, go to TERM3/

/If S2\_8 number of 18-24 year olds= 1, go to S2\_10/

/If S2\_8 number of 18-24 year olds> 1, go to S2\_11/

S2\_10. Are you the 18 to 24 year old adult?

- 01 {GO TO YOU'RE THE ONE} YES, MALE
- 02 {GO TO YOU'RE THE ONE} YES, FEMALE
- 03 NO

S2\_10a. May I speak with him or her?

- 01 {GO TO "CORRECT RESPONDENT"} YES
- 02 {GO TO CALLBACK} NO
- 77 {GO TO CALLBACK} DON'T KNOW
- 99 {TERMINATE} REFUSED

S2\_11. How many of the non-smoking adults who are 18-24 years old are men, and how many are women?

- NUMBER OF 18-24 YEAR OLD MEN
- NUMBER OF 18-24 YEAR OLD WOMEN

/If total in S2\_11 is not equal to S2\_8 number non-smoking adults who are 18-24 years of age, ask S2\_11CHECK, otherwise go to S2\_12/

S2\_11CHECK. I'm sorry, I seem to have made a mistake. Earlier you said there were /fill in from S2\_8/ non-smoking adults age 18-24 in the household, now I have that there are /fill in answer from S2\_11/ non-smoking adults age 18-24 in the household. Is this correct?

- 01 {RESET S2\_8} NO, NUMBER OF NON\_SMOKING ADULTS AGE 18-24 IS WRONG
- 02 {RESET S2\_11} NO, NUMBER OF MEN OR WOMEN IS WRONG
- 03 CORRECT, NO CHANGE
- 77 DON'T KNOW
- 99 REFUSED

S2\_12. The person in your household that I need to speak with is /fill in selected respondent/. Would that be you?

- |    |                        |             |
|----|------------------------|-------------|
| 01 | {GO TO YOU'RE THE ONE} | YES, MALE   |
| 02 | {GO TO YOU'RE THE ONE} | YES, FEMALE |
| 03 |                        | NO          |

S2\_12a. May I speak with /fill in "him" or "her" from previous question/?

- |    |                              |            |
|----|------------------------------|------------|
| 01 | {GO TO "CORRECT RESPONDENT"} | YES        |
| 02 | {GO TO CALLBACK}             | NO         |
| 77 | {GO TO CALLBACK}             | DON'T KNOW |
| 99 | {TERMINATE}                  | REFUSED    |

S2\_13. Can you please tell me, are you between the ages of 18 and 24, 25 to 49, or are you 50 years of age or older?

- |    |                        |            |
|----|------------------------|------------|
| 01 | {GO TO YOU'RE THE ONE} | 18-24      |
| 02 | {GO TO TERM 3}         | 25-49      |
| 03 | {GO TO TERM 3}         | 50+        |
| 77 | {GO TO TERM 3}         | DON'T KNOW |
| 99 | {GO TO TERM 3}         | REFUSED    |

### Screener 3 – Land line

---

Our study requires that we randomly select one adult who lives in your household to be interviewed.

S3\_1. In order to make this random selection, can you please tell me how many members of your household, including yourself are 25 years of age or older?

-- NUMBER OF ADULTS 25 YEARS OF AGE OR OLDER

S3\_2. How many are 18 to 24 years of age?

-- NUMBER OF ADULTS AGE 18-24

/If S3\_2 = 0 go to TERM5, if S3\_2 = 1 go to S3\_5, if S3\_2 > 1 go to S3\_6/

TERM5. Thank you very much, but we are only interviewing persons age 18-24 at this time. Thank you for your time. /TERMINATE/

S3\_5. Are you the adult age 18-24?

- |    |                        |             |
|----|------------------------|-------------|
| 01 | {GO TO YOU'RE THE ONE} | YES, MALE   |
| 02 | {GO TO YOU'RE THE ONE} | YES, FEMALE |
| 03 |                        | NO          |

S3\_5a. May I speak with him or her?

01	{GO TO "CORRECT RESPONDENT" }	YES
02	{GO TO CALLBACK }	NO
77	{GO TO CALLBACK }	DON'T KNOW
99	{TERMINATE }	REFUSED

S3\_6. How many of these adults who are 18-24 years old are men and how many are women?

-- NUMBER OF MEN  
-- NUMBER OF WOMEN

/If S3\_6 = S3\_2, go to S3\_7, otherwise continue/

S3\_6CHECK. I'm sorry, I seem to have made a mistake. Earlier you said there were /fill in answer from S3\_2/ adults age 18-24 in the household, now I have that there are /fill in answer from S3\_6/ adults in the household. Is this correct?

01	{RESET S3_2 }	NO, NUMBER OF ADULTS AGE 18-24 IS WRONG
02	{RESET S3_6 }	NO, NUMBER OF MEN OR WOMEN IS WRONG
03		CORRECT, NO CHANGE
77		DON'T KNOW
99		REFUSED

S3\_7. The person in your household that I need to speak with is /fill in selected respondent/. Would that be you?

01	{GO TO YOU'RE THE ONE }	YES, MALE
02	{GO TO YOU'RE THE ONE }	YES, FEMALE
03		NO

S3\_7a. May I speak with /fill in him or her from previous question/?

01	{GO TO "CORRECT RESPONDENT" }	YES
02	{GO TO CALLBACK }	NO
77	{GO TO CALLBACK }	DON'T KNOW
99	{TERMINATE }	REFUSED

#### Screener 4 - Cell phone Screener

**[CATI NOTE: Please include a response option on each intro screen for: "DOES NOT LIVE IN "VT" These responses should terminate out as ineligible for the study. Please read to respondents; "I'm sorry, we're only interviewing residents of VT at this time. Thank you."]**

Sc3c. Your safety is important to me. Are you driving a car or operating another motor vehicle right now?

Yes	Thank you very much. We will contact you at a later time.
No	Continue

Sc3ac. Are you in a location where talking on the phone jeopardize your safety and/or confidentiality?

Yes

Thank you very much. We will contact you at a later time.

No

Continue

L3. Including the one you are currently using, how many cell phones do you currently use for receiving calls?

Cell phones //range1-6, 6 = 6 or more//

**Do not read:**

88 Don' t use a cell phone/this isn' t a cell phone **[go to thank you]**

98 Don' t know/Not sure

99 Refused

**THANK YOU:** Thank you but we are only interviewing cell phones at this time. Thank you."

Sc4c. In addition to your cell phone, do you also have a residential landline telephone? Do not include landline telephones that are used only for computers or fax machines.

1 Yes

2 No

Sc5c. (33) What is your age? [CODE AGE IN YEARS]

/range= 18-96/

-- [ENTER AGE]

97 97 OR OLDER

666 Under 18

777 DON' T KNOW

999 REFUSED

/if Sc5c = 777 or 999, ask Sc5ac/

Sc5ac. Are you between the ages of 18 and 24 or 25 or older?

01 18 to 24

02 25 or older

777 DON' T KNOW

999 REFUSED

**IF UNDER 18 YRS**

Thank you very much, but we are only interviewing people age 18 and older. **STOP**

Sc5d Just in case the call is dropped can I get your first name or initials, so I can make sure to ask for the right person when I call back?

01 Gave first name //GO TO ENTER NAME//

02 Gave Initials //GO TO ENTER INITIALS/

99 Refuse //GO TO Sc6c//

//ENTER NAME//

\_\_\_\_\_ [INTERVIEWER VERIFY NAME]

//GO TO Sc6c//

//ENTER INITIALS

\_\_\_\_\_ [INTERVIEWER VERIFY INITIALS]

//GO TO Sc6c//

Sc6c. As I mentioned earlier, I am calling on behalf of the Vermont Department of Health to gather information on the health of Vermont residents. Your cell phone number has been chosen randomly. The interview takes about 15 minutes to complete and you will receive a \$5 Amazon.com gift certificate. The call may be monitored for quality assurance, but all information is kept confidential. Your participation in the study is voluntary. You don't have to answer any question you don't want to, and you can end the interview at any time. I will ask you questions about your health, tobacco use and other related topics. If you have any questions about this survey, I will provide a telephone number for you to call to get more information. The call may be monitored for quality assurance purposes.

General verification: 1-800-639-2030

VT DEPT OF HEALTH (ONLY IF REQUESTED): 1-800-869-2871 (Business hours only)

**Land line:**

**Correct respondent:** HELLO, I'm calling for the Vermont Department of Health. We're gathering information on the health of Vermont residents. Your phone number has been chosen randomly to be interviewed and I'd like to ask some questions about health and health practices.

**You're the one:**

[READ IF NECESSARY: Then you are the person I need to speak with.]

Your participation in the study is voluntary. You can decline to participate. If you choose to participate, you do not have to answer any question you don't want to, and you can end the interview at any time. The information you give me will be confidential. The interview takes about 20 minutes to complete. I will ask you questions about your health, tobacco use and other related topics. If you have any questions about this survey, I will provide a telephone number for you to call to get more information. The call may be monitored for quality assurance purposes.

General verification: 1-800-639-2030

VT DEPT OF HEALTH (ONLY IF REQUESTED): 1-800-869-2871 (Business hours only)

## Section 1: SMOKING STATUS

Q1\_1. Have you smoked at least 100 cigarettes in your entire life?

01		YES
02	{GO TO NQ20081} {SET SMOKER=NO (22)}	NO
77	{GO TO NQ20081} {SET SMOKER= NO (22)}	DON'T KNOW/NOT SURE
99	{GO TO NQ20081} {SET SMOKER= NO (22)}	REFUSED

Q1\_2. Have you ever smoked cigarettes daily, that is, at least one cigarette every day for at least 30 days?

01	YES
02	NO
77	DON'T KNOW/NOT SURE
99	REFUSED

Q1\_3. Do you now smoke cigarettes every day, some days, or not at all?

01	{SET SMOKER=YES}	EVERY DAY	
02	{SET SMOKER=YES}	SOME DAYS	
03	{GO TO NQ20081} {SET SMOKER=EX (33)}	NOT AT ALL	
77	{GO TO NQ20081} {SET SMOKER=EX (33)}	DON'T KNOW	99
	{GO TO NQ20081} {SET SMOKER=EX (33)}	REFUSED	

LAND LINE ONLY Q1\_4. Now I'd like you to think about the past 30 days. On how many of the past 30 days did you smoke?

--	{RANGE 01-30}	[ENTER RESPONSE]
88	{GO TO NQ20081}	NONE
77	{GO TO NQ20081}	DON'T KNOW/NOT SURE
99	{GO TO NQ20081}	REFUSED

We are interested in the actual number of cigarettes that people smoke in a day.

LAND LINE ONLY Q1\_5. On the average, on days when you smoked during the past 30 days about how many cigarettes did you smoke a day?

[1 PACK =20 CIGARETTES]  
[ENTER '100' FOR 100 OR MORE CIGARETTES A DAY.]

---	{RANGE 000-100}	[ENTER RESPONSE]
777		DON'T KNOW/NOT SURE
999		REFUSED

**[IF Cell Survey – do not get nq20081 and should skip to pre-section 2 to get sent to appropriate section based on smoking status.]**

LAND LINE ONLY NQ20081: Have you ever used or tried any smokeless tobacco products such as chewing tobacco or snuff?

01	Yes
02	No
77	Don't know
99	Refused

//Ask NQ20082 if NQ20081 = 1//



LAND LINE ONLY NQ20082: Do you currently use chewing tobacco or snuff every day, some days, or not at all?

01 EVERY DAY  
02 SOME DAYS  
03 NOT AT ALL  
77 DON'T KNOW  
99 REFUSED

//Current smokers GO TO SECTION 2//

//Former smokers GO TO SECTION 3//

//Never smokers GO TO SECTION 4//

## Section 2: CIGARETTE SMOKING PRACTICES: CURRENT SMOKERS

LAND LINE ONLY Q2\_6. How old were you when you first started smoking cigarettes regularly?

-- {RANGE 01-96} [ENTER RESPONSE]  
97 DON'T KNOW/NOT SURE  
99 REFUSED

/If Q2\_6 is, <05 ask Q2\_6CHECK, otherwise, go to NQ2\_2/

LAND LINE ONLY Q2\_6CHECK I just want to make sure that I recorded this information correctly. You indicated you started smoking at //insert answer from Q2\_6// years of age. Is this correct?

01 YES, CORRECT  
02 {RESET Q2\_6} INCORRECT

NQ2\_2: Which cigarette would you hate most to give up?

[Interviewer: if respondent seems confused by the question, probe them by saying, "we are asking of all the cigarettes you usually smoke in a day, which is the one they would hate most to give up."]

[DO NOT READ RESPONSES – code any response other than 'the first of the day', don't know, or refused as '02']

01 THE FIRST IN THE MORNING  
02 ANY OTHER  
77 DON'T KNOW/NOT SURE  
99 REFUSED

Q2\_8. How many times in the past 12 months have you made a serious attempt to quit smoking cigarettes?

[OVER 95 =95]  
-- {RANGE 00-95} [ENTER RESPONSE]  
97 DON'T KNOW/NOT SURE [go to q2\_10]  
99 REFUSED [go to q2\_10]

/If Q2\_8 = 0, go to Q2\_14B; if Q2\_8 >= 1 ask Q2\_10/

Q2\_10. I am going to read a list of reasons some people have for quitting cigarettes. For each, tell me if it was a reason why you tried to quit.

[PLEASE READ]

- A. Concern about health effects of smoking
- b. Concern about the cost of smoking
- c. Encouragement to quit from other people
- d. Restrictions on smoking at home or at work
- e. Advice from doctor or other health professional
- f. Pregnancy or partner is pregnant
- g. Because of a specific health problem
- h. Because of smoke effects on your child/children
- i. Concern that my child will become a smoker
- j. Availability of free or reduced cost nicotine patches, gum or lozenges

01 YES

02 NO

77 DON'T KNOW

99 REFUSED

- k. Is there another reason I didn't read?

01 YES, SPECIFY: \_\_\_\_\_

02 NO

77 DON'T KNOW

99 REFUSED

//Ask if Q2\_8 > = 1, 97 or 99; all else go to Q2\_14b//

NQ20063. In your most recent attempt to quit smoking cigarettes, did you... ..

- A. Quit on your own with no help.
- B. Find information about a treatment for smoking
- C. Read books, brochures, or pamphlets to prepare for quitting
- D. Call a smokers' quit line for help
- E. Talk with a doctor or other health professional
- F. Attend group sessions or classes
- G. Receive individual counseling
- H. Use the nicotine patch
- I. Use nicotine gum
- J. Use a nicotine inhaler
- K. Use nicotine nasal spray
- L. Use nicotine lozenges or tablets
- M. Use zyban or wellbutrin
- N. Use Chantix or Varenicline
- O. Use the internet

01 YES  
02 NO  
77 DON'T KNOW  
99 REFUSED

P. Did you use any methods in your most recent quit attempt that I didn't mention?

01 YES, SPECIFY: \_\_\_\_\_  
02 NO  
77 DON'T KNOW  
99 REFUSED

LAND LINE ONLY Q2\_14B. Are you seriously thinking of quitting smoking cigarettes in the next 30 days?

01 YES  
02 NO  
77 DON'T KNOW  
99 REFUSED

LAND LINE ONLY Q2\_15. If you decided to quit smoking cigarettes completely during the next month, how confident are you that you could do it?

[PLEASE READ LIST]

01 Not At All Confident  
02 Not Very Confident  
03 Somewhat Confident  
04 Very Confident

[PLEASE DO NOT READ]

77 DON'T KNOW/NOT SURE  
99 REFUSED

//Ask of current smokers who answered Q2\_14b = 1//

LAND LINE ONLY; Q2\_16. I will read you a list of methods people use to quit smoking cigarettes. If you decided to quit smoking cigarettes completely in the next month, what methods would you use? Please respond yes or no to each one.

[PLEASE READ]

- A. Quit on your own, with no help
- B. Find information about a treatment for smoking
- C. Read books, brochures, or pamphlets to prepare for quitting
- D. Call a smokers' quit line for help
- E. Talk with a doctor or other health professional
- F. Attend group sessions or classes
- G. Receive individual counseling
- H. Use nicotine patch
- I. Use nicotine gum
- J. Use a nicotine inhaler
- K. Use nicotine nasal spray
- L. Use nicotine lozenges or tablets
- M. Use zyban or wellbutrin
- N. Use Chantix or Varenicline [PRONOUNCED: (ver EN e kleen) and (SHAN tix)]
- O. Use the internet
  - 01 YES
  - 02 NO
  - 77 DON'T KNOW
  - 99 REFUSED
- P. Are there any other methods i didn't mention?
  - 01 YES, SPECIFY: \_\_\_\_\_
  - 02 NO
  - 77 DON'T KNOW
  - 99 REFUSED

Q2\_19. Have you EVER used a nicotine skin patch, gum, inhaler, nasal spray, lozenges, Zyban, Wellbutrin, Chantix, or Varenicline?

[PRONOUNCED: (ver EN e kleen) and (SHAN tix)]

- 01 YES
- 02 NO
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

NQ2\_9. Are you eligible to get free or reduced cost nicotine patches, gum or lozenges? Would you say yes, no or are you not sure?

- 01 YES
- 02 NO
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

NQ2\_10A: Have you heard of the Vermont Smoker's Quit Line?

- 01 YES --- GO TO NQ2\_10B
- 02 NO --- GO TO NQ2\_11A
- 77 DON'T KNOW/NOT SURE --- GO TO NQ2\_11A
- 99 REFUSED --- GO TO NQ2\_11A

/Ask IF NQ2\_10A = 1, AND Q2\_8 = 1-95, otherwise, skip to NQ2\_11A

NQ2\_10B: In your most recent quit attempt, did you call the Vermont Smoker's Quit Line?

- 01 YES --- GO TO NQ2\_11A
- 02 NO --- GO TO NQ2\_10C
- 77 DON'T KNOW/NOT SURE --- GO TO NQ2\_11A
- 99 REFUSED --- GO TO NQ2\_11A

/Ask if NQ2\_10B = 2/

LAND LINE ONLY; NQ2\_10C: What were the reasons you did not call the Vermont Smoker's Quit Line in your most recent quit attempt? Is it because...

[PLEASE READ RESPONSES]

[ROTATE A-I]

- A. You wanted to quit on your own, without help
- B. You didn't think telephone counseling would help
- C. You didn't think a counselor could understand your problems with quitting
- D. You didn't want to give personal information over the telephone
- E. You only wanted to talk to someone once or only wanted one session
- F. You had used quitlines before and didn't want to do it again
- G. You thought it cost too much
- H. You didn't like to or couldn't talk on the telephone for long amounts of time
- I. You thought you could quit without telephone counseling
  - 01 YES
  - 02 NO
  - 77 DON'T KNOW
  - 99 REFUSED
- J. Was there any other reason I didn't read?
  - 01 YES, Specify \_\_\_\_\_
  - 02 NO
  - 77 DON'T KNOW/NOT SURE
  - 99 REFUSED

NQ2\_11A: Does your local hospital offer services to help smokers quit?

- 01 YES --- GO TO NQ2\_11B
- 02 NO --- GO TO NQ2\_12
- 77 DON'T KNOW/NOT SURE --- GO TO NQ2\_11B
- 99 REFUSED --- GO TO NQ2\_11B

NQ2\_11B: Does the quit smoking program at your local hospital offer ....

- 01 Group classes or counseling
- 02 In person, one-to-one counseling
- 03 One-to-one counseling over the telephone
- 04 Email counseling
  - 01 YES
  - 02 NO
  - 77 DON'T KNOW/NOT SURE
- 05 Are there other quit smoking services offered by your local hospital that I didn't mention?
  - 01 YES, Specify \_\_\_\_\_
  - 02 NO
  - 77 DON'T KNOW/NOT SURE
  - 99 REFUSED

/Ask if NQ2\_11A = 1/ AND Q2\_8 =1-95

NQ2\_11C: 'In your most recent quit attempt, did you use the quit smoking program at your local hospital?

- 01 YES --- GO TO NQ2\_12
- 02 NO --- GO TO NQ2\_11D
- 77 DON'T KNOW/NOT SURE --- GO TO NQ2\_12
- 99 REFUSED --- GO TO NQ2\_12

/Ask if NQ2\_11C = 2/ AND Q2\_8 >=1

LAND LINE ONLY NQ2\_11D: During your most recent quit smoking attempt, what were the reasons you did not use the quit smoking program at your local hospital? Was it because....

[PLEASE READ RESPONSES]

[ROTATE CATEGORIES A-M]

- A. You wanted to quit on your own, without help
- B. You didn't think this kind of program is what you needed to quit
- C. You didn't think a counselor could understand your problems with quitting
- D. You didn't think group or one-to-one counseling would help
- E. You didn't want to give personal information to a group or counselor
- F. You didn't think the amount of counseling would be enough to help
- G. You only wanted to talk to someone once or only wanted one session
- H. You had used groups or counseling before and didn't want to do it again
- I. You thought it cost too much
- J. You needed child care
- K. You needed transportation
- L. You couldn't go during the time of day the program was offered
- M. Your local hospital was too far away

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

N. Was there any other reason I didn't read?

- 01 YES, Specify \_\_\_\_\_
- 02 NO
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

The next question asks about the cost of buying cigarettes.

/LANDLINE SURVEY ONLY - Ask NQ2\_12 of all current smokers/

NQ2\_12: How concerned are you about the cost of cigarettes?

[PLEASE READ LIST]

- 01 Not At All Concerned
- 02 Slightly Concerned
- 03 Moderately Concerned
- 04 Very Concerned
- 05 Extremely Concerned

[PLEASE DO NOT READ]

- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

/GO TO Section 4/

### Section 3. CIGARETTE SMOKING PRACTICES\_-FORMER SMOKERS

/If former smoker, continue, otherwise go to Section 4/

LAND LINE ONLY Q3\_29. How old were you when you first started smoking cigarettes regularly?

- {RANGE 02-95} [ENTER RESPONSE]
- 96 {GO TO Section 4, SET SMOKER=NO} NEVER SMOKED REGULARLY
- 97 DON'T KNOW/NOT SURE
- 99 REFUSED

/If Q3\_29 is, <05 ask Q3\_29CHECK, otherwise, go to Q3\_30A/

Q3\_29CHECK: I just want to make sure that I recorded this information correctly. You indicated you started smoking at //insert answer from Q3\_29/ years of age. Is this correct?

- 01 YES
- 02 {RESET Q3\_29} NO
- 97 DON'T KNOW
- 99 REFUSED

Q3\_30A. Have you had a cigarette in the last 12 months?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

Q3\_30B. About how long has it been since you last smoked cigarettes regularly?

- 1\_\_ HOURS
- 2\_\_ DAYS
- 3\_\_ WEEKS
- 4\_\_ MONTHS
- 5\_\_ YEARS
- 777 DON'T KNOW/NOT SURE [skip to section 4]
- 999 REFUSED [skip to section 4]

Q3\_30BCHK. [LABELED AS Q3\_30BCK IN PROGRAM] Just to make sure I've entered the information correctly, you said you last smoked cigarettes regularly XX minutes/hours/days/weeks/months/ years ago? [Range check if say >1 hr and less than 6 years. ]

01 YES, CORRECT  
02 {RESET Q3\_30B} INCORRECT

**[If q3\_30b = > 5 years; smoking status changes from smoker to non-smoker. These respondents skip to section 4.]**

Q3\_32. I am going to read a list of reasons some people have for quitting cigarettes. For each, tell me if it was a reason why you tried to quit.

[PLEASE READ]

- A. Concern about health effects of smoking
- B. Concern about the cost of smoking
- C. Encouragement to quit from other people
- D. Restriction on smoking at home or at work
- E. Advice from doctor or other health professional
- F. Pregnancy or partner is pregnant
- G. Because of a specific health problem
- H. Because of smoke effects on my child/children
- I. Concern that my child will become a smoker
- J. Availability of free or reduced cost nicotine patches, gum or lozenges?

01 YES  
02 NO  
77 DON'T KNOW  
99 REFUSED

- K. Is there another reason i didn't read?

01 YES, SPECIFY \_\_\_\_\_  
02 NO  
77 DON'T KNOW

99 REFUSED



NQ20065: In your most recent attempt to quit smoking cigarettes, did you.. ..

- A. Quit on your own with no help.
- B. Find information about a treatment for smoking
- C. Read books, brochures, or pamphlets to prepare for quitting
- D. Call a smokers' quit line for help
- E. Talk with a doctor or other health professional
- F. Attend group sessions or classes
- G. Receive individual counseling
- H. Use the nicotine patch
- I. Use nicotine gum
- J. Use a nicotine inhaler
- K. Use nicotine nasal spray
- L. Use nicotine lozenges or tablets
- M. Use zyban or wellbutrin
- N. Use Chantix or Varenicline
- O. Use the internet

01 YES  
02 NO  
77 DON'T KNOW  
99 REFUSED

P. Did you use any methods in your most recent quit attempt that I didn't mention?

01 YES, SPECIFY: \_\_\_\_\_  
02 NO  
77 DON'T KNOW  
99 REFUSED

/Go to Section 4/

#### **Section 4: HEALTH CARE VISITS IN THE PAST 12 MONTHS**

The next set of questions are about visits you may have had with health care professionals in the past 12 months. By health care professional I mean, doctor, nurse, physician's assistant, or nurse practitioner.

/Ask Q4\_39A of all respondents:/

Q4\_39A. Have you visited a health care professional for health care in the past 12 months?

01 YES  
02 NO -- {GO TO Q4\_40A}  
77 DON'T KNOW/NOT SURE -- {GO TO Q4\_40A}  
99 REFUSED --{GO TO Q4\_40A}

/Ask if Q4\_39A = 1, otherwise go to Q4\_40A/

Q4\_39B. Thinking about your last visit, were you asked if you currently smoke?

01 YES  
02 NO  
77 DON'T KNOW/NOT SURE  
99 REFUSED

//IF SMOKER = NO GO TO Q4\_40A; if SMOKER = YES or SMOKERS = EX continue otherwise go to Q4\_40 A/

Q4\_39C. Thinking about your last visit, did your health care professional talk with you about cigarette smoking?

- 01 {IF SMOKER=EX, GO TO Q4\_40A} YES
- 02 {IF SMOKER=EX, GO TO Q4\_40A} NO
- 77 {IF SMOKER=EX, GO TO Q4\_40A} DON'T KNOW/NOT SURE
- 99 {IF SMOKER=EX, GO TO Q4\_40A} REFUSED

//Ask q4\_39d if smoker =yes and q4\_39a not in (02,77,99)//

Q4\_39D. Did your health care professional advise you to stop smoking cigarettes?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

Q4\_39E. Did your health care professional recommend any specific program or medicine to help you quit cigarettes?

- 01 YES
- 02 {GO TO Q4\_39F} NO
- 77 {GO TO Q4\_39F} DON'T KNOW/ NOT SURE
- 99 {GO TO Q4\_39F} REFUSED

/Ask if Q4\_39E = 1/

LAND LINE ONLY Q4\_39E1. What program did your health care professional recommend to help you quit cigarettes?

- [PLEASE DO NOT READ]
- {MUL=10}
- 01 NICOTINE PATCH
- 02 NICOTINE GUM
- 03 NICOTINE INHALER
- 04 NICOTINE NASAL SPRAY
- 05 NICOTINE LOZENGES OR TABLETS
- 06 ZYBAN OR WELLBUTRIN
- 07 TOLL FREE TELEPHONE SMOKER'S QUIT LINE
- 08 INDIVIDUAL COUNSELING
- 09 GROUP SESSIONS OR CLASSES
- 10 CHANTIX or VARENICLINE
- 88 NONE OF THE ABOVE
- 77 DON'T KNOW
- 99 REFUSED

LAND LINE ONLY Q4\_39F. Did your health care professional ask you to set a date to quit smoking cigarettes?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

/Ask Q4\_40A of all respondents/

Q4\_40A. Have you visited a dentist or dental hygienist in the past 12 months?

- 01 YES
- 02 NO -- {GO TO SKIP BEFORE Q5\_42B }
- 77 DON'T KNOW/NOT SURE -- {GO TO SKIP BEFORE Q5\_42B }
- 99 REFUSED -- {GO TO SKIP BEFORE Q5\_42B }

/Ask if Q4\_40A = 1/

Q4\_40B. Thinking about your last visit, were you asked if you currently smoke?

- 01 YES
- 02 NO
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

/IF SMOKER = NO GO TO pre-NQ20083/

[Only asked of current and former smokers]

Q4\_40C. Thinking about your last visit, did your dentist or dental hygienist talk with you about cigarette smoking?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

[Only asked of current smoker [smoker = yes ]

Q4\_40D. Did your dentist or dental hygienist advise you to stop smoking cigarettes?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

Ask NQ20083 and NQ20084 of all respondents, regardless of cigarette smoking status – if they NQ20081 = 1 and nq20082= 01 or 02]

//Ask NQ20083 and NQ20084 if NQ20081 = 01 and NQ20082 = 01 or 02//

LAND LINE ONLY NQ20083. Thinking about your last visit, were you asked if you currently use smokeless tobacco products such as chewing tobacco or snuff)?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

LAND LINE ONLY NQ20084. Did you dentist or dental hygienist advise you to stop using smokeless tobacco products?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

## Section 5: RISK PERCEPTION AND SOCIAL INFLUENCES

Now I'm going to ask you some questions about people around you.

LAND LINE ONLY Q5\_42B. In your opinion, how do most people in your community feel about adults smoking cigarettes?

- 01 Definitely Should Not Smoke
  - 02 Probably Should Not Smoke
  - 03 Ok To Smoke Sometimes
  - 04 Ok To Smoke As Much As You Want
- [PLEASE DO NOT READ]
- 77 DON'T KNOW
  - 99 REFUSED

LAND LINE ONLY Q5\_42C. How do you feel about adults smoking cigarettes?

- 01 Definitely Should Not Smoke
  - 02 Probably Should Not Smoke
  - 03 Ok To Smoke Sometimes
  - 04 Ok To Smoke As Much As You Want
- [PLEASE DO NOT READ]
- 77 DON'T KNOW
  - 99 REFUSED

Q5\_44. Which statement best describes the rules about smoking cigarettes inside your home?

[READ LIST]

- 01 Smoking Is Not Allowed Anywhere Inside Your Home
- 02 Smoking Is Allowed In Some Places Or At Some Times
- 03 Smoking Is Allowed Anywhere Inside The Home
- 04 There Are No Rules About Smoking Inside The Home

[PLEASE DO NOT READ]

- 77 DON'T KNOW
- 99 REFUSED

Q5\_45. During the past 7 days, how many days did anyone smoke cigarettes, cigars, or pipes anywhere inside your home?

- {RANGE 01=07} [ENTER RESPONSE]
- 88 LESS THAN 1 DAY PER WEEK/RARELY/NONE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

Q5\_46. Which statement best describes the rules about smoking cigarettes inside your car or truck when there are children in the vehicle?

[PLEASE READ]

- 01 Smoking Is Not Allowed When Children Are In The Vehicle
- 02 Smoking Is Allowed Sometimes When Children Are In The Vehicle
- 03 Smoking Is Allowed Any Time When Children Are In The Vehicle
- 04 There Are No Rules About Smoking Inside The Vehicle

[PLEASE DON'T READ]

- 77 DON'T KNOW
- 99 REFUSED

Q5\_47. In the past seven days, have you been in a car with someone who was smoking?

- 01 YES
- 02 NO
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

/Ask of all respondents/

Q5\_49. How many children less than 18 years of age live in your household?

- {RANGE 00-12} [ENTER RESPONSE]
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

/Ask Q5\_50 if Q1\_3 = 01 or 02 and Q5\_49 = 1-12/

LAND LINE ONLY Q5\_50. During the past 12 months, did any doctor, or other health professional ask if you smoke around your children?

- 01 YES
- 02 NO
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

Now I am going to ask about the smoke from other people's cigarettes.

NQ20085. During the past 7 days, that is, since [DATE FILL], on how many days did you breathe the smoke from someone who was smoking in an indoor or outdoor public place?

- {RANGE 01=07} [ENTER RESPONSE]
- 88 NONE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

/Ask of all respondents/

LAND LINE ONLY Q5\_54. Do you think that breathing smoke from other people's cigarettes is:

[READ LIST]

- 01 Very Harmful To One's Health
- 02 Somewhat Harmful To One's Health
- 03 Not Very Harmful To One's Health
- 04 Not At All Harmful To One's Health

[PLEASE DO NOT READ]

- 77 NO OPINION/DON'T KNOW
- 99 REFUSED

LAND LINE ONLY Q5\_57A. The following questions are about the kinds of help for quitting smoking cigarettes that could be available in your area to someone interested in quitting cigarette smoking.

In your area, how hard or easy is it for a person interested in quitting cigarettes to get information about ways to quit smoking cigarettes?

- 01 Very Hard To Get
- 02 Somewhat Hard To Get
- 03 Somewhat Easy To Get
- 04 Very Easy To Get

[PLEASE DO NOT READ]

- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

LAND LINE ONLY Q5\_57B. In your area, how hard or easy is it for a person interested in quitting to get booklets or pamphlets on quitting smoking cigarettes?

- 01 Very Hard To Get
- 02 Somewhat Hard To Get
- 03 Somewhat Easy To Get
- 04 Very Easy To Get

[PLEASE DO NOT READ]

- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

LAND LINE ONLY Q5\_57C. In your area, how hard or easy is it for a person interested in quitting to get in touch with group programs for people who want to quit cigarettes?

- 01 Very Hard To Get
- 02 Somewhat Hard To Get
- 03 Somewhat Easy To Get
- 04 Very Easy To Get

[PLEASE DO NOT READ]

- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

LAND LINE ONLY Q5\_57D. In your area, how hard or easy is it for a person interested in quitting cigarettes to get in touch with a toll-free telephone help line for people who want to quit?

- 01 Very Hard To Get
- 02 Somewhat Hard To Get
- 03 Somewhat Easy To Get
- 04 Very Easy To Get
- [PLEASE DO NOT READ]
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

LAND LINE ONLY Q5\_57E. In your area, how easy is it for a person interested in quitting to get advice from doctors about quitting smoking cigarettes?

- 01 Very Hard To Get
- 02 Somewhat Hard To Get
- 03 Somewhat Easy To Get
- 04 Very Easy To Get
- [PLEASE DO NOT READ]
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

LAND LINE ONLY Q5\_57F. In your area, how hard or easy is it for a person interested in quitting cigarettes to get advice from other health care professionals about quitting smoking cigarettes?

- 01 Very Hard To Get
- 02 Somewhat Hard To Get
- 03 Somewhat Easy To Get
- 04 Very Easy To Get
- [PLEASE DO NOT READ]
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

LAND LINE ONLY Q5\_58A. Is there a program in your area to help adults quit smoking cigarettes?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

LAND LINE ONLY Q5\_58B. Have you heard of any events in your area to help adults quit smoking cigarettes?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

LAND LINE ONLY Q5\_58C. Is there a program in your area to help young people avoid smoking cigarettes?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

LAND LINE ONLY Q5\_58D. Have you heard of any events in your area to help young people avoid smoking cigarettes

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

LAND LINE ONLY Q5\_58E. Are there any programs in your area that have encouraged people not to smoke cigarettes around children?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

LAND LINE ONLY Q5\_58F. Have you heard of events in your area that have encouraged people not to smoke cigarettes around children?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

LAND LINE ONLY NQ5\_58B1. Have you seen or heard any messages that encouraged people to create a "Smoke-Free Zone" around children?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

/Ask if NQ5\_58B1 = 'YES'

LAND LINE ONLY NQ5\_58B2. Where did you see or hear the "Smoke Free Zone" message?  
[PLEASE DO NOT READ RESPONSES – MULTIPLE RESPONSE]

- 01 RADIO
- 02 NEWSPAPER
- 03 NEWSLETTER
- 04 PAMPHLET/BOOKLET
- 05 STICKERS
- 06 WATER BOTTLES
- 07 BABY BIB
- 08 SMOKE-FREE PLEDGE
- 09 CHILD CARE CENTER
- 10 SCHOOL
- 11 DOCTOR'S OFFICE
- 12 WORKPLACE
- 13 STORE, MALL, SHOPPING AREA
- 15 COMMUNITY EVENT
- 16 TOTE BAGS
- 14 OTHER: \_\_\_\_\_
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED



NQ20086: Have you seen or heard any messages that encouraged people to keep secondhand smoke away from children when at home or in the car?

- 01 Yes
- 02 No
- 77 Don't know/Not sure
- 99 Refused

NQ20087. [Ask if smoker = yes] How would you prefer for someone to ask you not to smoke near them?

**Or**

[Ask if smoker = ex] When you used to smoke, how would you have preferred for someone to ask you not to smoke near them?

**Read List**

- 01 Talk to me in private.
- 02 Ask me when I light up, even if we are in a group.
- 03 Hand me a note or card with information about the dangers of secondhand smoke
- 04 I do not think anyone should ask me not to smoke near them.
- 77 DON'T KNOW
- 99 REFUSED

Q5\_59. Are you currently..... [READ LIST]

- 01 EMPLOYED FOR WAGES
- 02 SELF-EMPLOYED
- 03 {GO TO Q5\_78} OUT OF WORK FOR MORE THAN 1 YEAR
- 04 {GO TO Q5\_78} OUT OF WORK FOR LESS THAN 1 YEAR
- 05 {GO TO Q5\_78} A HOMEMAKER
- 06 {GO TO Q5\_78} A STUDENT
- 07 {GO TO Q5\_78} RETIRED, OR
- 08 {GO TO Q5\_78} UNABLE TO WORK
- 77 {GO TO Q5\_78} DON'T KNOW
- 99 {GO TO Q5\_78} REFUSED

/Ask Q5\_60 through Q5\_66 if Q5\_59 = 01 or 02/

Q5\_60. About how many people are employed where you work?

Are there...

[IF NECESSARY: Please include employees at your location only, not the entire company]

[READ LIST]

- 01 10 Or Fewer People
- 02 Between 11 And 25
- 03 Between 26 And 100
- 04 Between 101 And 500
- 05 More Than 500

[PLEASE DO NOT READ]

- 77 DON'T KNOW
- 99 REFUSED

LAND LINE ONLY Q5\_61. While working at your job, are you indoors most of the time?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

Q5\_62. As far as you know, in the last seven days, has anyone smoked in your work area?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

NQ20088. During the past 7 days, that is, since [DATE FILL], at your workplace, on how many days did you breathe the smoke from someone who was smoking tobacco?

- {RANGE 01=07} [ENTER RESPONSE]
- 88 NONE
  - 77 DON'T KNOW/NOT SURE
  - 99 REFUSED

Q5\_63. Which of the following best describes your workplace's official smoking policy for indoor public or common areas, such as lobbies, rest rooms, and lunch rooms? Smoking is...

- 01 Not allowed in any public or common areas
  - 02 Allowed in some public or common areas
  - 03 Allowed in all public or common areas
  - 04 Not aware of official policy
- [Please don't read]
- 77 DON'T KNOW
  - 99 REFUSED

Q5\_64. Which of the following best describes your workplace's official smoking policy for work areas? Smoking is...

- 01 Not allowed in any work areas
  - 02 Allowed in some work areas
  - 03 Allowed in all work areas
  - 04 There is no official policy
- [Please don't read]
- 77 Don't know
  - 99 Refused

LAND LINE ONLY Q5\_65. In indoor work areas, do you think smoking should be allowed in all areas, some areas, or not at all?

- 01 Allowed in all areas
  - 02 Allowed in some areas
  - 03 Not allowed at all
- DO NOT READ
- 77 DON'T KNOW/NOT SURE
  - 99 REFUSED

Q5\_66. During the past twelve months, that is since /insert (today's date), 2007/ has your workplace offered any lectures, classes, materials, or other programs to help or encourage employees to quit smoking cigarettes?

- 01 YES
- 02 NO
- 77 DON'T KNOW
- 99 REFUSED

The following questions are about things you may have heard or seen about quitting or not smoking in the media.

/Ask Q5\_78 of all respondents/

Q5\_78. In the past six months, that is since [today-6 months] have you seen anything on television about quitting cigarette smoking?

- |    |                  |                |
|----|------------------|----------------|
| 01 | {GO TO Q5_80}    | YES            |
| 02 | {GO TO Q5_78CHK} | NO             |
| 03 | {GO TO Q5_80}    | DON'T WATCH TV |
| 77 | {GO TO Q5_80}    | DON'T KNOW     |
| 99 | {GO TO Q5_80}    | REFUSED        |

/Ask Q5\_78CHK if Q5\_78=02/

Q5\_78CHK. Just to clarify, do you mean you did not see anything on television about quitting cigarette smoking or that you did not watch TV in the past 6 months?

- |    |   |
|----|---|
| 01 | Did not see anything on TV about quitting cigarette smoking |
| 02 | Did not watch TV in past 6 months                           |

/If Q5\_78CHK=02 recode: Q5\_78=03/

/Ask Q5\_80 of all respondents/

Q5\_80. Have you ever seen any television ads for the Vermont Quit Line?

- |    |               |                     |
|----|---------------|---------------------|
| 01 | {GO TO Q5_82} | YES                 |
| 02 | {GO TO Q5_82} | NO                  |
| 03 | {GO TO Q5_82} | DON'T WATCH TV      |
| 77 | {GO TO Q5_82} | DON'T KNOW/NOT SURE |
| 99 | {GO TO Q5_82} | REFUSED             |

/ASK Q5\_82 of all respondents/

Q5\_82. In the past six months, that is since [insert date] have you heard anything on the radio about quitting cigarette smoking?

- |    |                  |   |
|----|------------------|---|
| 01 | {GO TO Q5_84}    | YES   |
| 02 | {GO TO Q5_82CHK} | NO  |
| 03 | {GO TO Q5_84}    | DIDN'T LISTEN TO THE RADIO IN PAST 6 MONTHS |
| 77 | {GO TO Q5_84}    | DON'T KNOW                                  |
| 99 | {GO TO Q5_84}    | REFUSED                                     |

/Ask Q5\_82CHK if Q5\_82=02/

Q5\_82CHK. Just to clarify, do you mean you did not hear anything on the radio about quitting cigarette smoking or that you did not listen to the radio in the past 6 months?

- |    |   |
|----|---|
| 01 | Did not hear anything on the radio about quitting cigarette smoking |
| 02 | Did not listen to the radio in the past 6 months                    |

/If Q5\_82CHK=02 recode: Q5\_82=03/

/Ask Q5\_84 of all respondents/

Q5\_84. Have you ever heard any radio ads for the Vermont Quit Line?

- 01 {GO TO NQ20089} YES
- 02 {GO TO NQ20089} NO
- 03 {GO TO NQ20089} DON'T LISTEN TO THE RADIO
- 77 {GO TO NQ20089} DON'T KNOW
- 99 {GO TO NQ20089} REFUSED

**Confirmed Awareness of Specific Ads:**

NQ20089. In the past six months, that is since [insert date], have you heard any ads on the radio with a young person who takes care of kids talking about keeping smoke away from children?

- 01 YES
- 02 {Skip to NQ200811}NO
- 77 {Skip to NQ200811}DON' T KNOW/ NOT SURE
  
- 99 {Skip to NQ200811}REFUSED

/Ask NQ200810 only if NQ20089 = 1/

NQ200810. [Labeled as NQ0810 in program] Please describe the radio ad(s) you heard.

[CATI: Allow multiple responses if allowed in past years]

- 01 BABYSITTER TALKS ABOUT SECONDHAND SMOKE
- 02 TALKS ABOUT MAKING SMOKE-FREE ZONE IN THE HOME AND CARE (PROBE FURTHER)
- 03 BABYSITTER TALKS ABOUT CHEMICALS FROM SMOKE GETTING ON THEIR KIDS HANDS AND INTO THEIR LUNGS
- 04 TALKS ABOUT SECOND HAND SMOKE CAUSING PERMANENT LUNG DAMAGE AND EARLY DEATH
- 05 BABYSITTER TALKS ABOUT KEEPING SMOKE FAR ENOUGH AWAY THAT THEIR KIDS CAN' T SEE OR SMELL IT
- 06 OTHER. SPECIFY \_\_\_\_\_
- 77 DON' T KNOW/NOT SURE
- 99 REFUSED

Q5\_92. Tell me how much you agree or disagree with the following statements.....

LAND LINE ONLY Q5\_92A. This ad was convincing.

[READ LIST]

- 01 Strongly agree
  - 02 Agree
  - 03 Disagree
  - 04 Strongly disagree
- [PLEASE DO NOT READ]
- 77 DON'T KNOW/NOT SURE
  - 99 REFUSED

LAND LINE ONLY Q5\_92B. This advertisement makes me think about whether or not I should smoke.

[READ LIST]

01 Strongly agree

02 Agree

03 Disagree

04 Strongly disagree

[PLEASE DO NOT READ]

77 DON'T KNOW/NOT SURE

99 REFUSED

LAND LINE ONLY NQ5\_7. After hearing this advertisement, did you talk to anyone about not smoking?

01 Yes

02 No

[PLEASE DO NOT READ]

77 DON'T KNOW/NOT SURE

99 REFUSED

NQ200811. In the past six months, that is since [insert date], have you heard any ads on the radio with a child and his dog talking to their parents about keeping smoke away from them?

01 YES

02 {Skip to Q6\_93}NO

77 {Skip to Q6\_93}DON' T KNOW/ NOT SURE

99 {Skip to Q6\_93}REFUSED

/Ask NQ200812 only if NQ200811 = 1/

NQ200812. [LABELED AS NQ0812 IN PROGRAM] Please describe the radio ad(s) you heard.

[CATI: Allow multiple responses if allowed in past years]

01 CHILD TALKS ABOUT KEEPING SMOKE FAR AWAY FROM HIM AND THEIR PET

02 CHILD TALKS ABOUT A SMOKE-FREE ZONE (PROBE FURTHER)

03 CHILD TALKS ABOUT HOW SMOKE BOTHERS HIS DOG (BUSTER)

04 TALKS ABOUT MAKING THE CAR AND HOME SMOKE-FREE ZONES

05 TALKS ABOUT SECONDHAND SMOKE CAUSING PERMANENT LUNG DAMAGE AND EARLY DEATH

06 CHILD TALKS ABOUT PROTECTING HIS DOG FROM SECOND HAND SMOKE

07 CHILD TALKS ABOUT KEEPING SMOKE FAR ENOUGH AWAY THAT HE CAN' T SEE OR SMELL IT

08 OTHER. SPECIFY \_\_\_\_\_

77 DON' T KNOW/NOT SURE

99 REFUSED

NQ200813. Tell me how much you agree or disagree with the following statements.....

LAND LINE ONLY NQ200813A. This ad was convincing.

[READ LIST]

01 Strongly agree

02 Agree

03 Disagree

04 Strongly disagree

[PLEASE DO NOT READ]

77 DON' T KNOW/NOT SURE

99 REFUSED

LAND LINE ONLY NQ200813B. This advertisement makes me think about whether or not I should smoke.

[READ LIST]

01 Strongly agree

02 Agree

03 Disagree

04 Strongly disagree

[PLEASE DO NOT READ]

77 DON' T KNOW/NOT SURE

99 REFUSED

LAND LINE ONLY NQ200813C. After hearing this advertisement, did you talk to anyone about not smoking?

01 Yes

02 No

[PLEASE DO NOT READ]

77 DON' T KNOW/NOT SURE

99 REFUSED

## Section 6: DEMOGRAPHICS

---

/Ask Q6\_93– Q6\_104 of all respondents/

Finally, I'm going to ask you for some general information about yourself.

Q6\_93. What is your age?

\_\_ \_ {RANGE 018-099}[ENTER RESPONSE] [099 = 99 AND OLDER]

777 DON'T KNOW

999 REFUSED

Q6\_94. Are you Hispanic or Latino?

01 YES

02 NO

77 DON'T KNOW

99 REFUSED

Q6\_95. Which one or more of the following would you say is your race?

{MUL=6}

[READ LIST]

- 01 White
  - 02 Black Or African American
  - 03 Asian
  - 04 Native Hawaiian Or Pacific Islander
  - 05 American Indian Or Alaska Native
  - 66 Other: [Enter Response]
- [PLEASE DO NOT READ]
- 77 DON'T KNOW
  - 99 REFUSED

/IF ONLY ONE RESPONSE IN Q6\_95, SKIP TO Q6\_97/

Q6\_96. Which one of these groups would you say best represents your race?

[CATI: recall responses from Q6\_95 only]

[READ LIST]

- 01 White
  - 02 Black Or African American
  - 03 Asian
  - 04 Native Hawaiian Or Pacific Islander
  - 05 American Indian Or Alaska Native
  - 66 Other: [Enter Response]
- [PLEASE DO NOT READ]
- 77 DON'T KNOW
  - 99 REFUSED

Q6\_97. INTERVIEWER: INDICATE SEX OF RESPONDENT. ASK ONLY IF NECESSARY.

- 11 MALE
- 22 FEMALE

Q6\_98. What is the highest grade or year of school that you have completed? (IF CURRENTLY A STUDENT, ASK: What grade are you now in?)

[READ ONLY IF NECESSARY]

- 01 Never Attended School Or Only Attended Kindergarten
  - 02 Grades 1-8 (Elementary)
  - 03 Grades 9-11 (Some High School)
  - 04 Grade 12 Or Ged (High School Graduate)
  - 05 College 1 Year To 3 Years (Some College Or Technical School)
  - 06 College 4 Years Or More (College Graduate)
- [PLEASE DO NOT READ]
- 77 DON'T KNOW
  - 99 REFUSED

I'm next going to ask you about types of health insurance. By health insurance, I mean the plan that covers the cost of some or all of your health care.

NQ6\_1. Do you have any type of health insurance that covers some or all of your health care costs?

- 01 YES
- 02 NO (GO TO Q6\_99)
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

NQ6\_2 I am going to read a list of types of health insurance. For each, please tell me if it is part of your health insurance coverage....

[PLEASE READ LIST]

- A. Medicaid Or PC Plus Medicaid
- B. Medicare
- C. VHAP (Vermont Health Access Plan) Or PC Plus VHAP
- D. Ladies First [CATI: Asked only of female respondents]
- E. Veterans Administration
- F. Blue Cross Blue Shield
- G. MVP
- H. Cigna
- K. Catamount Blue
- L. MVP Catamount Choice

I. Other Private Insurance

- 01 YES
- 02 NO
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

J. Are There Any Other Types Of Health Insurance I Didn't Mention?

- 01 YES, SPECIFY \_\_\_\_\_
- 02 NO
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

I have just a few, final questions left...

Q6\_99. Do you have more than one telephone number in your household? Do not include cell phones or numbers that are only used by a computer or fax machine.

- 01 YES
- 02 {GO TO Q6\_103} NO
- 77 {GO TO Q6\_103} DON'T KNOW/NOT SURE
- 99 {GO TO Q6\_103} REFUSED

Q6\_100. How many of these are residential numbers?

- {RANGE = 01-05} [ENTER RESPONSE]
- 06 6 OR MORE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED



Q6\_103. What town do you live in?

\_\_\_\_ TOWN CODE

88888 OTHER \_\_\_\_\_ [SPECIFY, LENGTH = 70]

77777 DON'T KNOW

99999 REFUSED

Q6\_104. How long have you lived in [/FILL IN FROM PREVIOUS QUESTION, IF 77 OR 99, FILL IN "your current town of residence"/]?

[DO NOT READ]

01 LESS THAN ONE YEAR

02 ONE TO LESS THAN TWO YEARS

03 TWO TO LESS THAN THREE YEARS

04 THREE TO LESS THAN FOUR YEARS

05 FOUR TO LESS THAN FIVE YEARS

06 FIVE OR MORE YEARS

77 DON'T KNOW

99 REFUSED

Q6\_102. Is your annual household income from all sources.....

[Read as appropriate...]

01 less than \$25,000 [IF "NO" ASK 05; IF "YES" ASK 03  
(\$20,000 to less than \$25,000)]

02 less than \$20,000 [IF "NO" ASK 04; IF "YES" ASK 02  
(\$15,000 to less than \$20,000)]

03 less than \$15,000 [IF "NO" ASK 03; IF "YES" ASK 01  
(\$10,000 to less than \$15,000)]

04 less than \$10,000 [IF "NO" CODE 02]

05 less than \$35,000 [IF "NO" ASK 06  
(\$25,000 to less than \$35,000)]

06 less than \$50,000 [IF "NO" ASK 07  
(\$35,000 to less than \$50,000)]

07 less than \$75,000 [IF "NO" CODE 08  
(\$50,000 to less than \$75,000)]

08 \$75,000 OR MORE

77 DON'T KNOW

99 REFUSED

FUP1 FUP1 -- We may want to talk to you again in the future to ask more questions about tobacco use and health. To find you then, we'll need to confirm and gather some additional locating information. I want to assure you that this information will be kept completely confidential in secure and protected data files, and will be separate from the responses you've already provided in the interview.

(( NOTE Only If asked: Interviewer, if asked about when re-contact might occur, you can state: "'If we were to contact you again, it would be within the next 6 months to a year" ))

1 CONTINUE

2 Refused – Skip to next section

FUP2. What is your full name? First Name: [ALLOW 60 CHARACTERS]  
Last Name: [ALLOW 60 CHARACTERS]

FUP3. So that we're able to reach you in the future, could you please tell your address information?  
Address: [ALLOW 60 CHARACTERS]  
City: [ALLOW 30 CHARACTERS]  
State: [ALLOW 30 CHARACTERS] ((note, Interviewer, if asking state, you can say "and just to verify, you live in Vermont, correct?")  
Zip: [ALLOW 5 CHARACTERS]  
Telephone: [ALLOW 10 CHARACTERS]  
E-mail: [ALLOW 30 CHARACTERS]

FUP4. In what city or state do you expect to be living in 12 months from now?

\_\_\_\_\_ [ALLOW 80 CHARACTERS]

### **CLOSING - LANDLINE**

That's my last question. Everyone's answers will be combined to give us information to guide state health policies. Thank you very much for your time and cooperation.

### **CLOSING - CELL PHONE**

Those are all the questions I have for you. In appreciation for the time you have spent answering our questions, we would like to give you a \$5 Amazon.com® gift certificate code. Would you like the number of the Amazon.com® gift certificate now?

[INTERVIEWER IF ASKED: THE CODE IS SOMETHING YOU CAN USE ONLINE AT AMAZON.COM. IT'S LIKE A GIFT CERTIFICATE. WE JUST GIVE YOU THE UNIQUE CODE AND YOU ENTER THE CODE IN ONLINE WHEN YOU MAKE A PURCHASE AT AMAZON.COM. THERE IS NO EXPIRATION DATE.]

- 01 Get it now (GO TO GET IT NOW)
- 02 Get it later (WILL GET DISP 062)
- 99 DECLINED INCENTIVE/REFUSED

**GET IT NOW** (IF 01 NOW) Ok. Your gift code is (XXX XXXXX—need to insert from gift code file THEN GO TO FINAL CLOSE)

(IF 02 LATER) No problem. Would you like us to text message the gift certificate or would you like to call us back at your convenience.

- 01 Text message (GO TO TEXT)
- 02 Call back when convenient

Text. We'll text you the gift certificate within 24 hours. Please let us know your carrier.

**Do not read:**

- 01 Alltel
- 02 AT&T (Cingular)
- 03 CellularOne
- 04 Centennial
- 05 Leap (Cricket)
- 06 MetroPCS
- 07 Nextel
- 08 Quest
- 09 Sprint
- 10 Suncom
- 11 T-Mobile
- 12 Unicel (Rural Cellular)
- 13 US Cellular
- 14 Verizon
- 15 None of these
- 98 Don't know
- 99 Refused

**If Text=15, 98, 99 GOTO NOTEXT**

**NOTEXT.** I'm sorry, we can't text message this provider. Would you like the number of the Amazon.com® gift certificate now or would you like to call us back at your convenience?

- 01 Get it now
- 02 Call back when convenient

**(Call back).** Please call us at 1-XXX-XXX-XXXX to get the gift certificate. It will be available for 30 days. (GO TO FINAL CLOSE)

**(FINAL CLOSE)** Thank you very much for your time and cooperation.