



Vermont Tobacco Control Program

2012 Vermont Adult Tobacco Survey

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Introduction

This report contains the 2012 Vermont Adult Tobacco Survey (VTATS) results. The VTATS provides outcome data on several key tobacco measures for Vermont's adult population. All data included in this report are from the VTATS with the exception of smoking prevalence.

Vermont Adult Tobacco Survey

The VTATS is a population-based telephone survey used to help evaluate the effectiveness of the Vermont Tobacco Control Program's (VTCP) efforts to reduce smoking and increase awareness and knowledge of smoking-related issues among Vermont adults. This evaluation tool is not part of a national survey and data should not be directly compared to that from other states.

Vermont Tobacco Control Program

The VTCP has a comprehensive structure overseen by the Vermont Tobacco Evaluation and Review Board (<http://humanservices.vermont.gov/tobacco>) and involves agencies including the Departments of Health, Education, and Liquor Control in consultation with the Attorney General's Office. The statewide tobacco control program includes the (five) components recommended by the Centers for Disease Control and Prevention (CDC) for eliminating tobacco use. These are: state and community interventions, health communications interventions, cessation interventions, surveillance and evaluation, and administration and management. VTCP set four primary goals to be reached by 2020: (1) reduce the youth smoking prevalence to 10%; (2) reduce the adult smoking prevalence to 12%; (3) reduce the prevalence of non-smokers' exposure to secondhand smoke to 30%; (4) reduce the youth prevalence of other tobacco product use to 10% and maintain adult prevalence of other tobacco use at 3%. The report is organized to reflect these four goals.

Executive Summary

The Executive Summary highlights key statistics from each of the four content areas.

Youth Smoking

In 2011, the prevalence of smoking among youth in Vermont was 13%. The statewide prevalence has continued to decline since 2009 (Data Source: Youth Risk Behavior Survey). The proportion of Vermonter's reporting a home smoking ban was high among both smokers (81%) and non-smokers (94%) with children. The proportion reporting car smoking bans was similarly high (smokers – 85%; non-smokers – 99%). The proportion of Vermonter's reporting exposure to secondhand smoke in the home and in vehicles during the last seven-days was low among non-smokers with children (3% and 6%, respectively). The proportion of smokers with children reporting home exposure was 16% while car exposure among this group was 44%.

Adult Smoking

The statewide prevalence continued its gradual decline to 17%, though this was not significantly different from 20% in 2011. (Data Sources: Behavioral Risk Factor Surveillance System). Nearly half (48%) of Vermont's current smokers attempted to quit in 2012. Independent quitters – smokers who try to quit on their own without help – continued to comprise the largest portion of Vermonters trying to quit (64%). Since 2002, there has been a significant increase in the proportion of smokers who report ever using medication to aid in their quit attempt; up from 43% in 2002 to 68% in 2012. Nearly three-quarters of current smokers had heard of the Quit by Phone service in 2012. In their most recent quit attempt, 8% of smokers used the Quit by Phone service and 8% of smokers used the Quit in Person service.

Executive Summary

Secondhand Smoke

Exposure to secondhand smoke in the home or vehicle was rare among non-smokers. The proportion of non-smokers that reported no exposure to secondhand smoke in these places was 96% and 83%, respectively. Conversely, only 64% reported no exposure in a public place. Among smokers, the proportion that reported no exposure to secondhand smoke in the home, vehicle or public was 67%, 47% and 36%, in that order. Among non-smokers, home smoking bans were very common (90%), while only 63% of smokers reported having a home smoking ban. Smokers were more likely to report a vehicle smoking ban (86%).

Other Tobacco Products

Prevalence of other tobacco product use was low among adults, ranging from 1% to 11%. Among smokers, the prevalence was higher for every type of product asked in the survey. Due to its recent emergence, a question about electronic cigarette usage was added to the survey. Overall, the prevalence of electronic cigarette use was highest among all categories of other tobacco products (11%). The prevalence of certain products like chew and cigars was somewhat higher when results were restricted to adults aged 18 – 24 years old (10% - 15%). The same pattern of usage was seen in the increasing prevalence of other tobacco product use as youth progressed from 9th grade to 12th grade (Data Source: Youth Risk Behavior Survey).

Overall, there have been significant shifts in many indicators since 2001. However, in comparing recent years, only subtle changes were noted for most outcomes and demographic associations.

Youth Smoking

VTCP Goal 1:

Reduce the prevalence of youth smoking to 10%

Youth Smoking

In Vermont, smoking prevalence in youth is measured by the Youth Risk Behavior Survey (YRBS). The Vermont Department of Health considers the YRBS to be the best source of data on youth prevalence. Prevalence is included in this report because it is the health behavior that VTCP ultimately (hopes) aims to influence.

Youth are not surveyed on the VTATS; however VTATS respondents are asked whether there is a child under 18 in the household. Several behaviors assessed by the VTATS may impact youth smoking including household smoking rules, secondhand smoke exposure and awareness of programs that encourage people not to smoke around children. The following section addresses these behaviors among VTATS respondents who reported having a child in the house younger than 18 years old.

Youth Smoking

Youth Prevalence

The prevalence of youth smoking in Vermont was 13% in 2011. This is a significant decrease from the 33% prevalence in 1999 (**Figure 1**).

Figure 1: Trend in Vermont youth smoking prevalence, VT YRBS 1999-2011



Youth Smoking

Demographic characteristics of Vermonters who reported having children under 18 years old in the household, VTATS 2012

Table 1		Household with children under 18 years old		
		All Vermonters, %	Smokers, %	Non-smokers, %
Age Group	18 to 24 years	16	15	16
	25 to 44 years	56	65	52
	45 years or older	29	20	31
Education	High school or less	32	53	26
	Some college	25	32	23
	College or higher	43	15	51
Income	Low (< \$25,000/year)	14	21	11
	Middle (\$25,000 - 74,999/year)	49	58	47
	High \$75,000+ /year	38	22	43

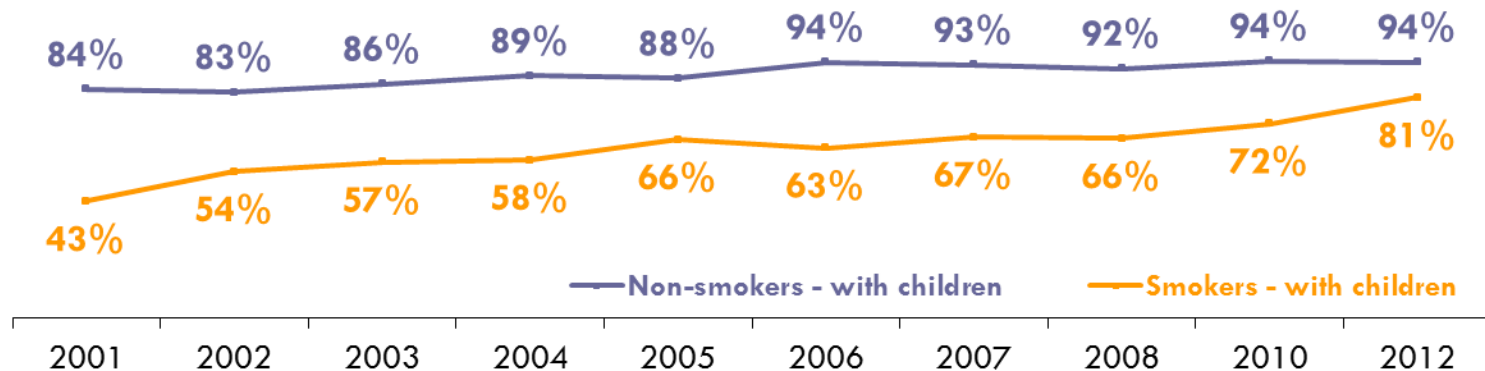
Vermonters who reported having a child under 18 years old in their household were more likely to be 25 to 44 years old, have a college education and a middle income (\$25,000 – 74,999/ year) (table 1).

- Smokers differed substantially from all Vermonters. Smokers were more likely to be 25 to 44 years old (65% vs. 56%), have a high school education or less (53% vs. 32%) and a middle income (58% vs. 49%).
- Non-smokers differed slightly from all Vermonters, particularly having a college education or higher (51% vs. 43%) and a high income (43% vs. 38%).

Smoking Bans – Trend in Home Smoking Bans

Figure 2 shows that non-smokers with children were more likely to ban smoking in their homes than smokers with children, and that this has been consistent over time. The proportion of home smoking bans increased significantly from 2001 to 2012. The percentage increase in bans was particularly large among smokers as compared to non-smokers (38% vs. 10%). Compared to non-smokers with children, smokers with children that had a household ban were more likely to be younger (67% vs. 57%), have a higher income (24% vs. 13%) and have a higher education (16% vs. 10%). These differences were not significant.

Figure 2: Trend in home smoking bans by smoking status, VTATS 2001-2012

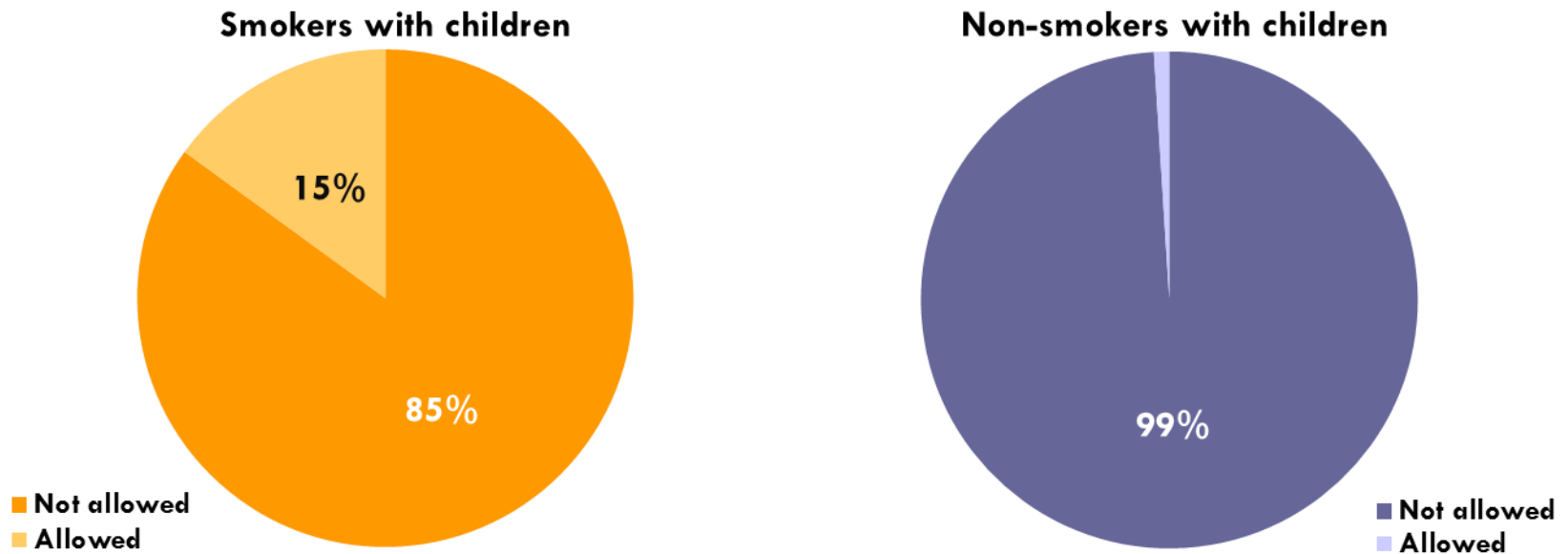


Note: Respondents were considered to have a home smoking ban if they did not allow any smoking anywhere in their home. They were considered to allow smoking if smoking was permitted in some places or at some times in their home or if there were no rules about smoking in their home.

Smoking Bans – Vehicles Smoking Bans

Figure 3 shows that non-smokers with children were more likely to ban smoking in their vehicle when children are present than smokers with children. The difference in the proportion between non-smokers and smokers with car smoking bans was similar to that for home smoking bans.

Figure 3 : Car smoking bans, VTATS 2012

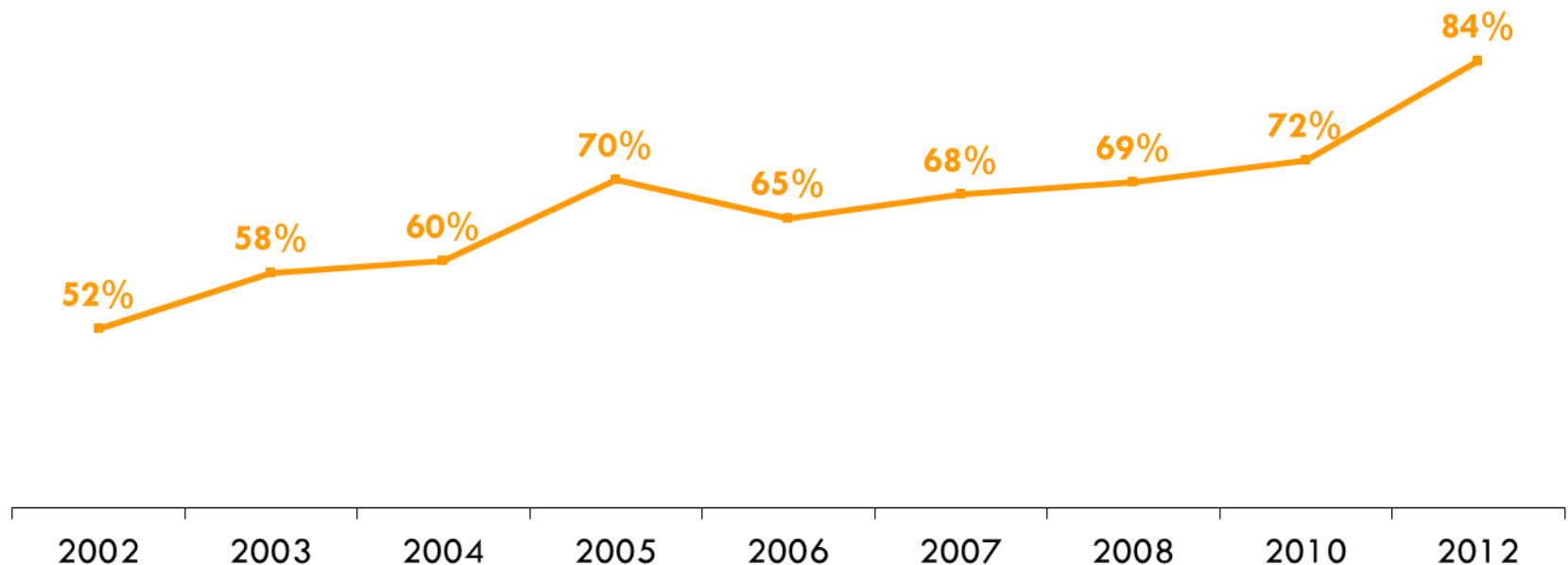


Note: Respondents were considered to have a vehicle smoking ban if they did not allow smoking in their vehicle when children were present. They were considered to allow smoking if smoking was permitted at some times in their vehicle when children were present or if there were no rules about smoking in their vehicle.

Secondhand Smoke – Trends in Smoke-free Home

Figure 4 shows a substantial increase between 2002 and 2012 in the proportion of people with a smoke-free home during the last week, among smokers with children. By comparison, the proportion of smoke-free homes during the last week among non-smokers with children was 97% in 2012.

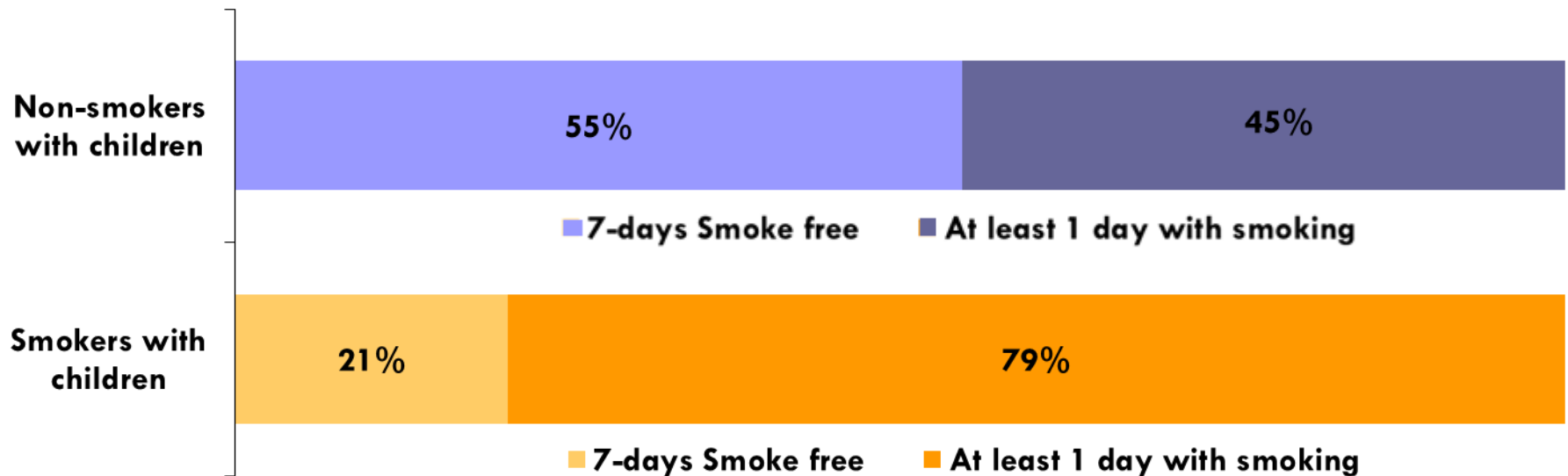
Figure 4: Trend in smoke-free homes among smokers with children, VTATS 2002-2012



Secondhand Smoke – 7-Day Smoke-free Home by Smoking Status

Figure 5 shows the proportion of Vermonters with a 7-day smoke-free home, among those that do not ban smoking in the home. The proportion of non-smokers with children who had a 7-day smoke-free home was higher than that for smokers with children (55% vs. 21%). The proportion of people with a 7-day smoke free home who do not allow smoking was over 99% for both non-smokers and smokers with children.

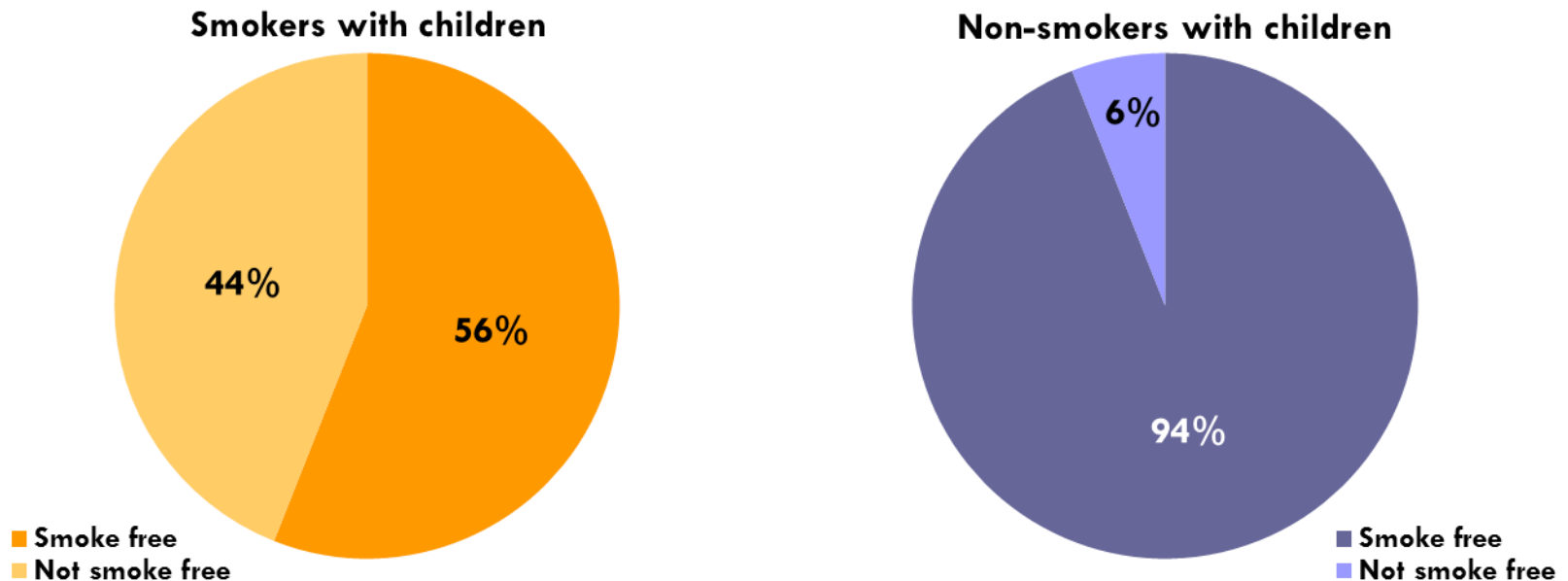
Figure 5: Smoke-free homes among Vermonters that do not ban smoking in the home, VTATS 2012



Secondhand Smoke – 7-Day Smoke-free Vehicle by Smoking Status

Figure 6 shows the proportion of people who report being in a car with someone who was smoking during the past 7-days, among non-smokers and smokers with children. The proportion of being in smoke-free cars among non-smokers was substantially higher than (the proportion) among smokers (94% vs. 56%).

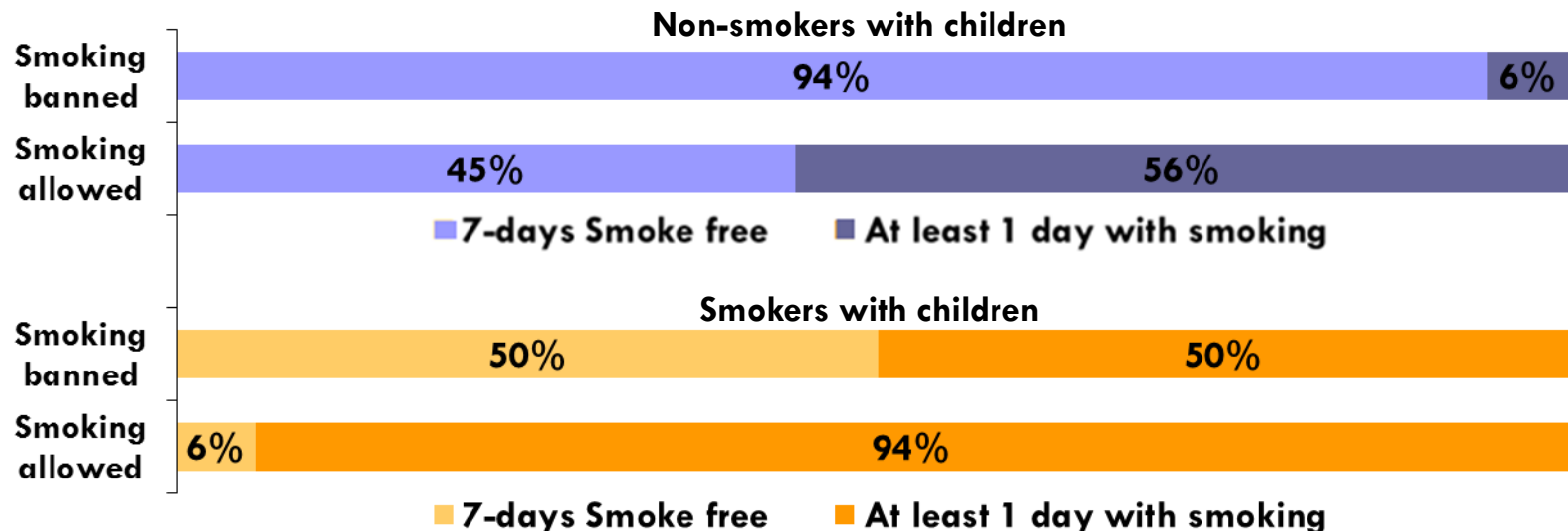
Figure 6 : Smoke –free vehicle, VTATS 2012



Secondhand Smoke: Those Who Don't Ban Smoking in Vehicles

Figure 7 shows the proportion of Vermonters who report being in a car with someone who was smoking during the past 7-days, among those that do not ban smoking in a vehicle when children are present. The proportion of non-smokers with children who report being in a car with someone who was smoking was higher than that for smokers with children (45% vs. 6%). The proportion of Vermonters that ban smoking in the vehicle and report being in a car with someone who was smoking was 94% for non-smokers with children but only 50% for smokers with children.

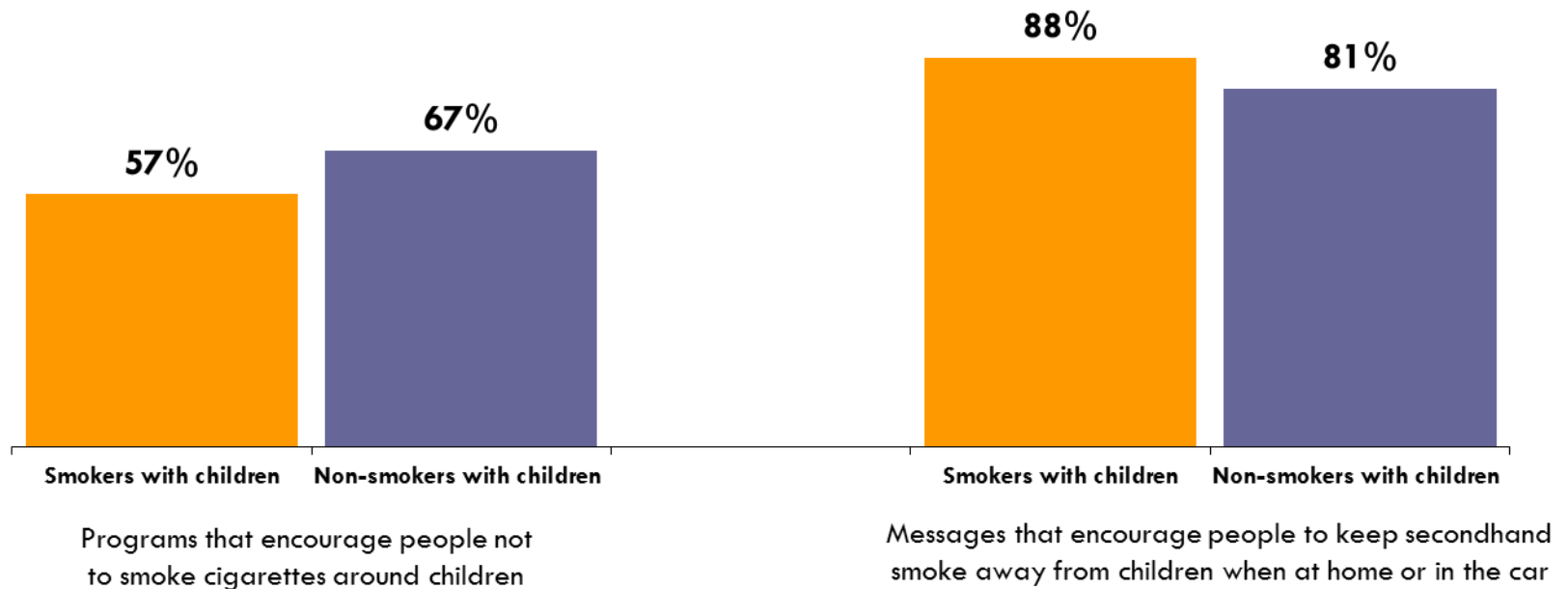
Figure 7: Smoke-free vehicles by vehicle smoking rules, VTATS 2012



Program and Message Awareness

Figure 8 shows that awareness of programs that encourage people to not smoke around children was higher among non-smokers with children than smokers with children. Conversely, awareness of messages to keep secondhand smoke away from children was higher among smokers with children. Differences between smokers and non-smokers for each question were not significant.

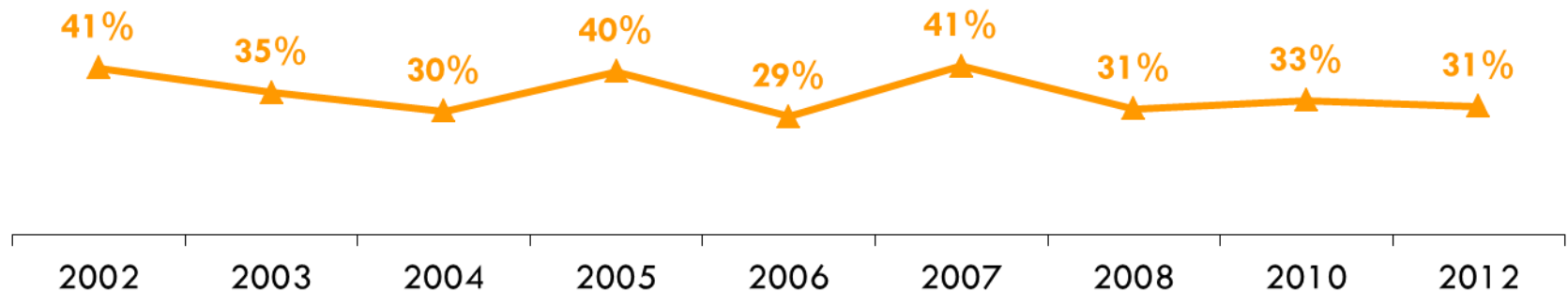
Figure 8: Awareness of programs and messages, VTATS 2012



Health Provider Interaction

In 2012, nearly a third of current smokers with children reported that their health care provider asked if they smoke around their children. **Figure 9** illustrates that there has been little change over time.

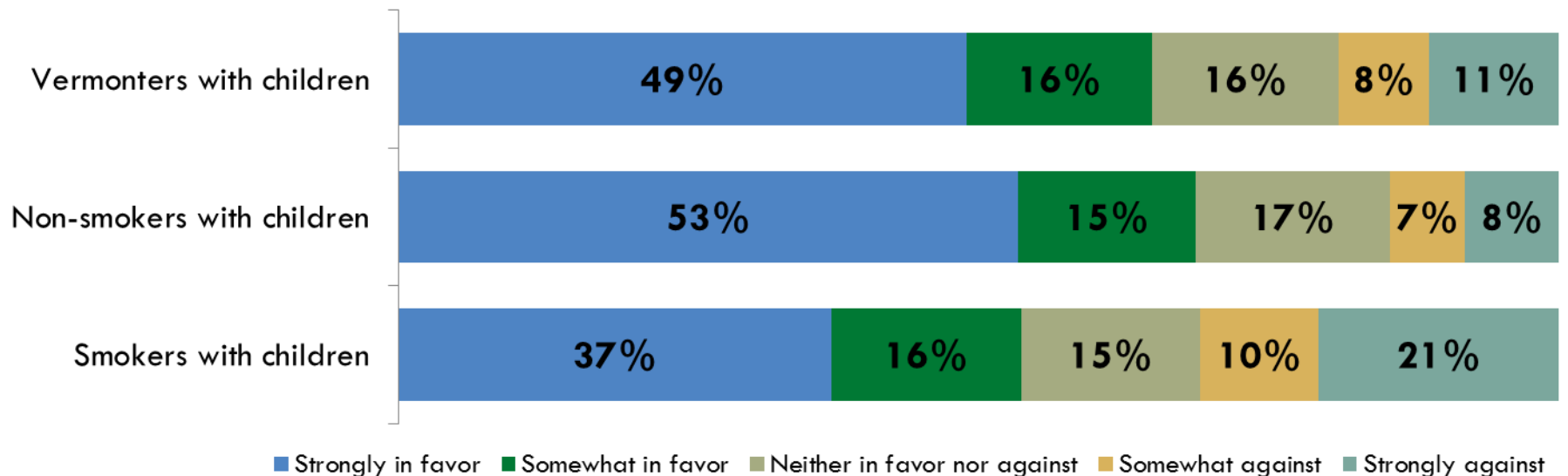
Figure 9: Trend in smokers with children reporting that, in the last year, health care professionals asked about smoking around children, VTATS 2002-2012



Tobacco Policy - Schools

Figure 10 shows that nearly half of Vermonters with children were strongly in favor of banning the sale of tobacco products in stores that are located near schools. Smokers were significantly less likely than non-smokers to strongly favor banning tobacco sales in stores near schools (37% vs. 53%).

Figure 10: Opinion on a policy to ban the sale of tobacco products in stores near schools, VTATS 2012



Adult Smoking

Reduce the prevalence of adult smoking to 12%

Adult Smoking

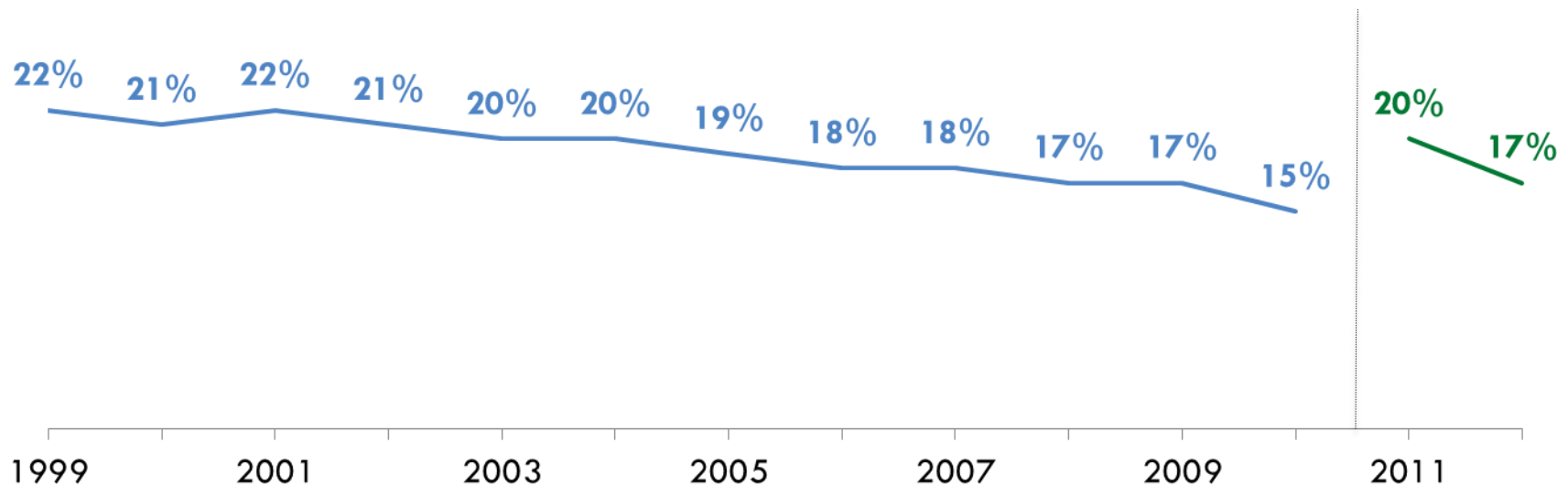
In Vermont, adult smoking prevalence is measured by the Behavioral Risk Factor Surveillance System (BRFSS), not the VTATS. The BRFSS is considered the standard measure of smoking prevalence by the Centers for Disease Control and Prevention. Unlike the ATS which is undertaken in approximately 19 states, smoking status on the BRFSS has been consistently measured in every state and the District of Columbia for over 15 years. Prevalence is included in this VTATS report because it is the health behavior that VTCP ultimately (hopes) aims to influence.

Adult Smoking

Adult Prevalence

Figure 11 shows that the prevalence of adult cigarette use in Vermont was 17% in 2012. Since 2000, smoking has decreased substantially from 21%*.

Figure 11: Trend in Vermont adult smoking prevalence, VT BRFSS 1999-2012



**Note: In 2011, the Centers for Disease Control and Prevention implemented changes to the BRFSS weighting methodology in order to more accurately represent the adult population. The changes in methodology limit the ability to compare BRFSS data prior to 2011 to subsequent years. The Vermont Department of Health's Center for Health Statistics recommends that comparisons between BRFSS data prior to 2011 and subsequent years be made with caution.*

Adult Smoking

Demographic characteristics of Vermonters, VTATS 2012

Table 2		All Vermonters, %	Smokers, %	Non-smokers, %
Age Group	18 to 24 years	13	13	13
	25 to 44 years	31	42	28
	45 years or older	56	44	59
Education	Less than high school	5	9	4
	High school	28	43	24
	Some college	25	30	24
	College or higher	41	19	47
Income	Low (< \$25,000/year)	21	33	17
	Middle (\$25,000 - 74,999/year)	47	51	47
	High \$75,000+ /year	31	15	36

Vermonters who responded to the VTATS were more likely to be 45 years old or older, have a college education or higher and a middle income (\$25,000 – 74,999/ year) (table 2).

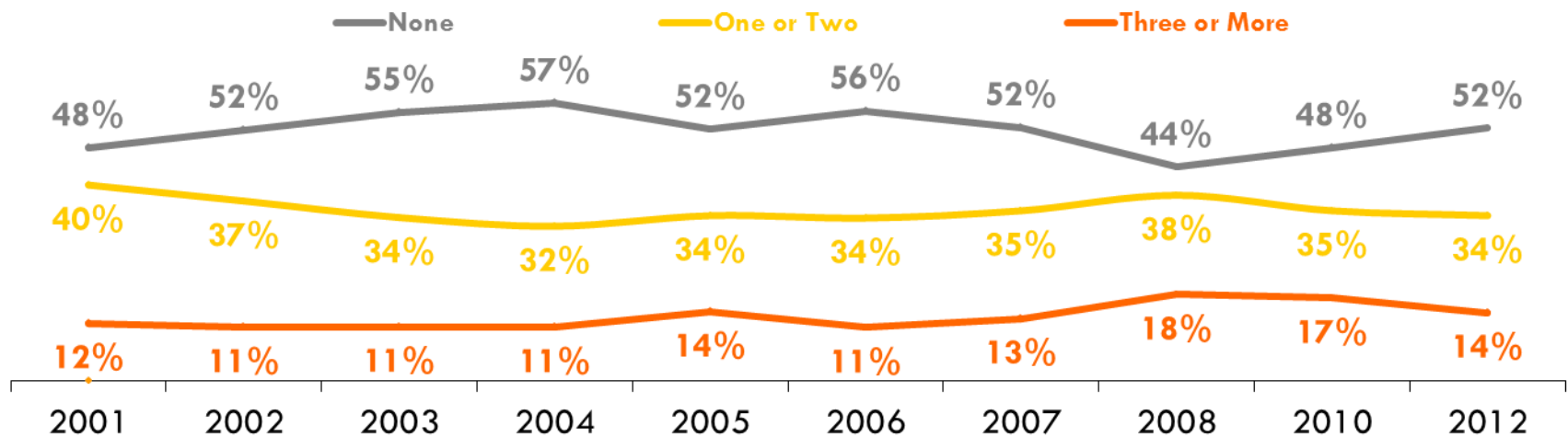
- Smokers differed substantially from all Vermonters. Smokers were more likely to be 25 to 44 years old (42% vs. 31%), have a high school education (43% vs. 28%) and a middle income (51% vs. 47%).
- Non-smokers differed slightly from all Vermonters, particularly having a college education or higher (47% vs. 41%) and a high income (36% vs. 31%).

Adult Smoking

Quit Attempts

Figure 12 shows that over half of current smokers (52%) did not attempt to quit. Of those who attempted to quit, 34% made 1 – 2 attempts. There have been no significant differences in the distribution of number of quit attempts over time. Among current smokers with quit attempts, younger smokers were less likely than older smokers to make an attempt: 12% of 18-24 year olds; 43% of 25-44 year olds; 45% of those over 45 years old. Smokers with a high school education were more likely to attempt quitting (40%) than other education levels (11-28%). Those with high incomes were less likely than those with middle or low incomes to make an attempt (15% vs. 33% and 52%). There were no significant demographic differences between those with and without quit attempts.

Figure 12: Trend in number of quit attempts in the last 12 months, VTATS 2001-2012

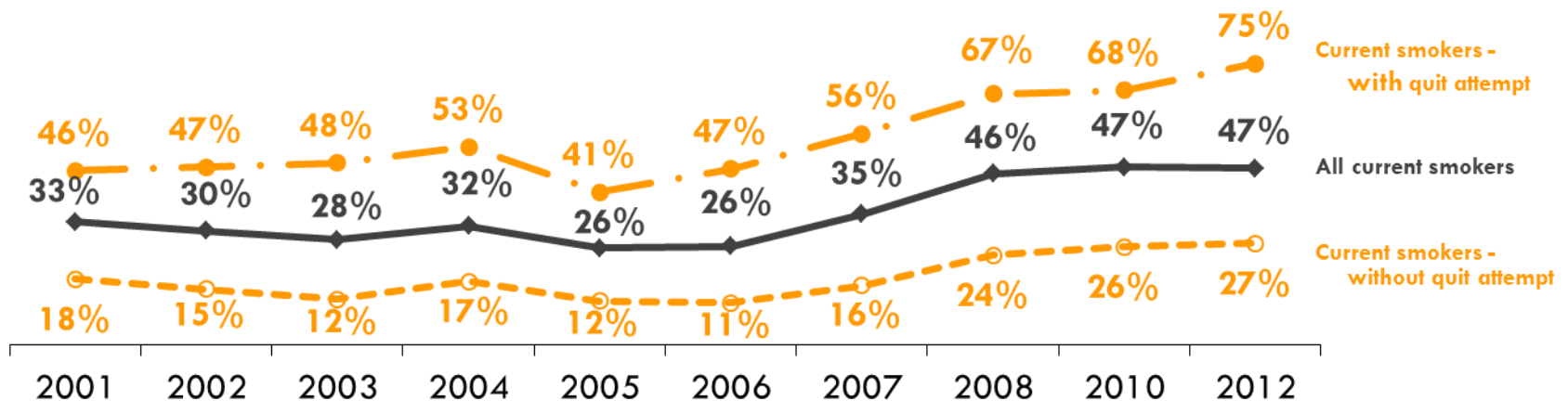


Adult Smoking

Quit Attempts

Figure 13 shows that nearly half (47%) of Vermont's current smokers were seriously thinking of quitting in the next 30 days. Significantly more smokers with a recent quit attempt were thinking about quitting in the next month than those who had not attempted to quit in the last year. The proportion of current smokers who anticipate quitting has risen significantly since 2001; this is true overall (up 14%) and for those with and without recent quit attempts (up 31% and 9%, respectively). Younger smokers were less likely than older smokers to anticipate quitting. Ten percent of 18-24 year olds anticipated quitting compared to 39% of 25-44 year olds and 51% of those over 45 years old. Those with high incomes were less likely to be thinking of quitting than those with middle or low incomes (15% vs. 35% and 50%).

Figure 13: Trend in anticipated quitting in the next 30 days, VTATS 2001-2012*



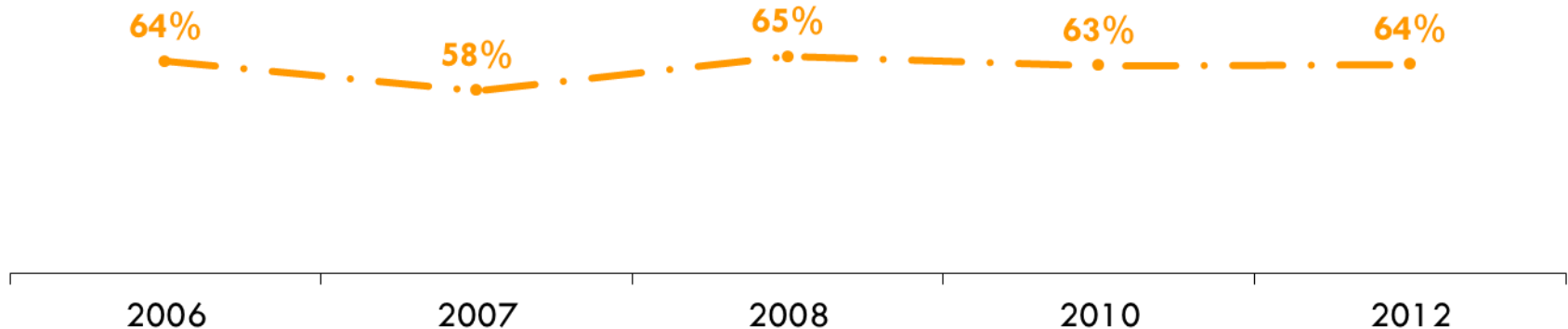
*Question sequence was changed in 2008 and continued in 2012; respondents were only asked about thinking of quitting in next 30 days. In years prior, this was preceded by a question about quit intentions for the next six months.

Adult Smoking

Quitting Without Help

Most smokers who want to quit report that they will quit in their own way, in their own time. These “Independent Quitters” don’t intend to use traditional cessation services, like NRT or counseling, despite evidence that shows the efficacy of these services toward a successful quit outcome. In 2012, 64% of smokers tried to quit without help in their most recent quit attempt (**Figure 14**). This proportion has remained consistent since 2006.

Figure 14: Trend in smokers who recently tried to quit on their own, VTATS 2006-2012*



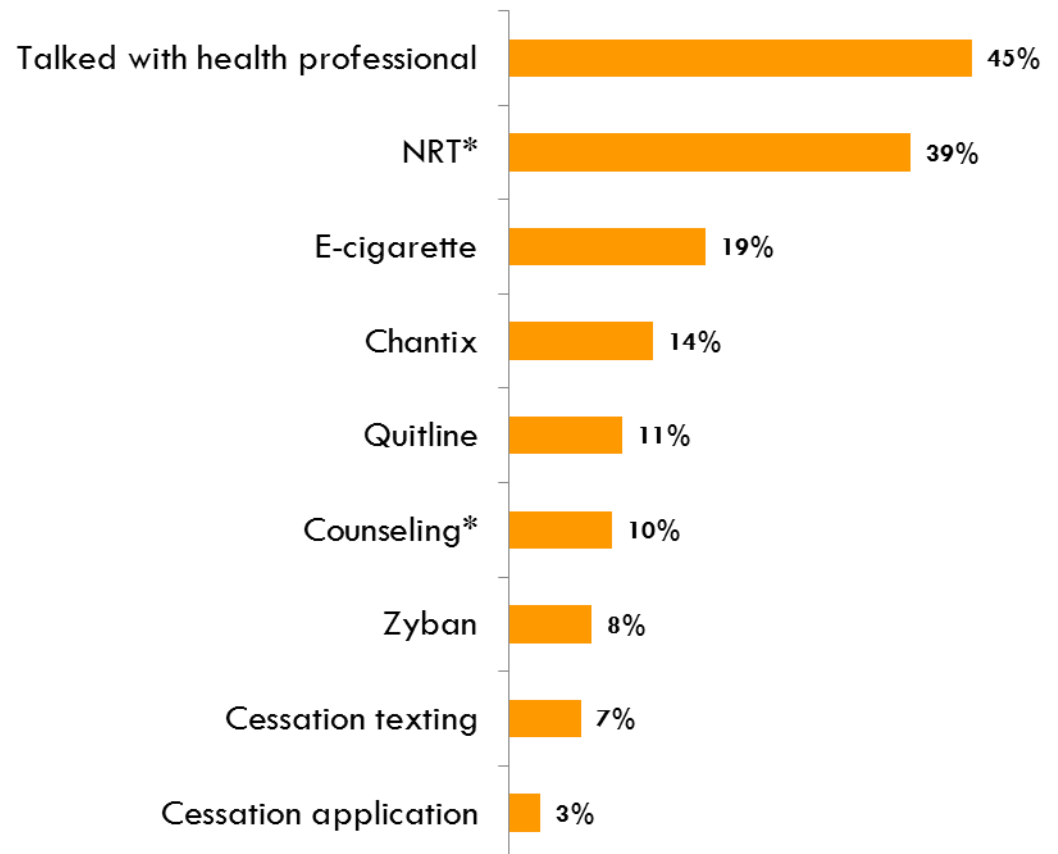
**Note: Question sequence was different in 2008 -2012 than in previous years; respondents were only asked about methods used in most recent quit attempt. In years prior this was preceded by a question about methods ever used to try and stop smoking.*

Cessation Methods Used

During their most recent quit attempt, about half of current smokers reported they talked with a health professional (45%). About 2 in 5 current smokers used NRT (39%) and about one in ten used counseling, Zyban, Chantix, and/or VQN's Quit by Phone (Quitline) service (**Figure 15**).

Three new options were added to the 2012 VTATS. About 1 in 5 current smokers used e-cigarettes, nearly 1 in 10 used cessation texting and only 3% used a cessation app.

Figure 15: Cessation methods used by current smokers in most recent quit attempts, VTATS 2012



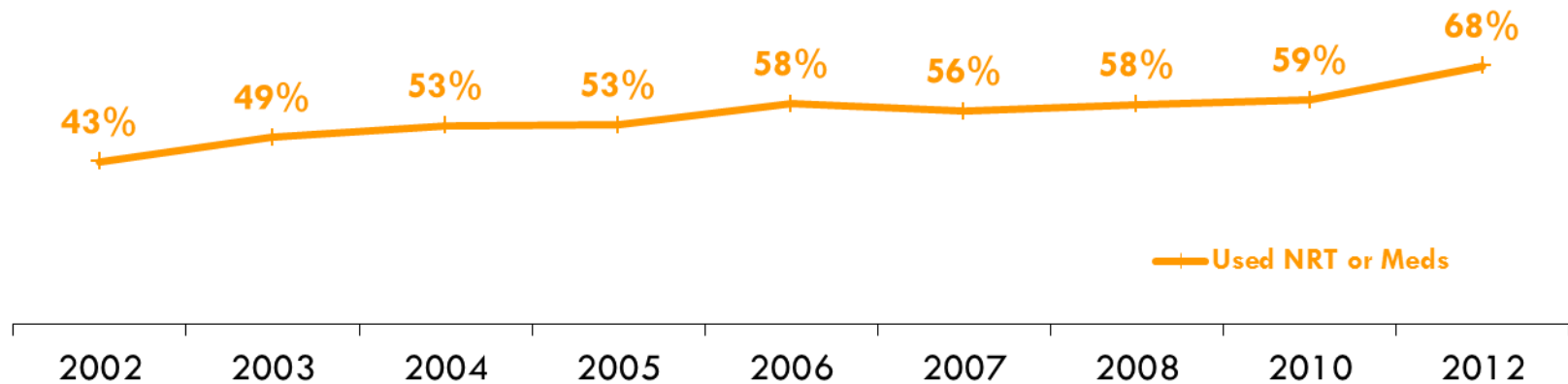
* NRT, or nicotine replacement therapy, includes use of the nicotine patch, gum, or lozenges. Counseling includes group and individual counseling.

Adult Smoking

Cessation Medications

For Vermont adults who try to quit smoking, the use of NRT or other medications is suggested. A majority of current smokers (68%) had ever used NRT, Zyban, Wellbutrin, or Chantix in an attempt to stop smoking. This proportion changed significantly from 2010 to 2012, and has significantly increased from 2002 to 2012 (up 25%) (**Figure 16**).*

Figure 16: Trend in current smokers who've ever used Nicotine Replacement Therapy, Zyban, Wellbutrin, or Chantix, VTATS 2002-2012



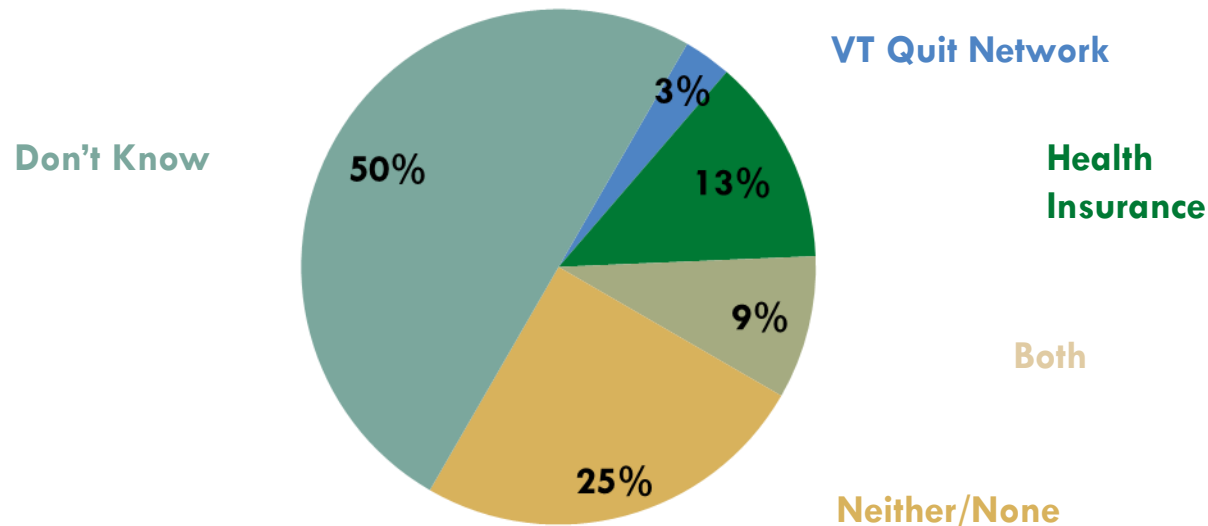
*Note: Zyban and Wellbutrin were added to this question in 2003 and Chantix in 2006.

Adult Smoking

Eligibility for Cessation Assistance*

One-quarter of current smokers thought they were eligible for free or reduced cost NRT and half did not know their eligibility status despite the fact that NRT is available to all Vermonters (**Figure 17**). There were no statistically significant changes from the 2010 results.

Figure 17: Perceived eligibility for free/reduced cost NRT by source, VTATS 2012

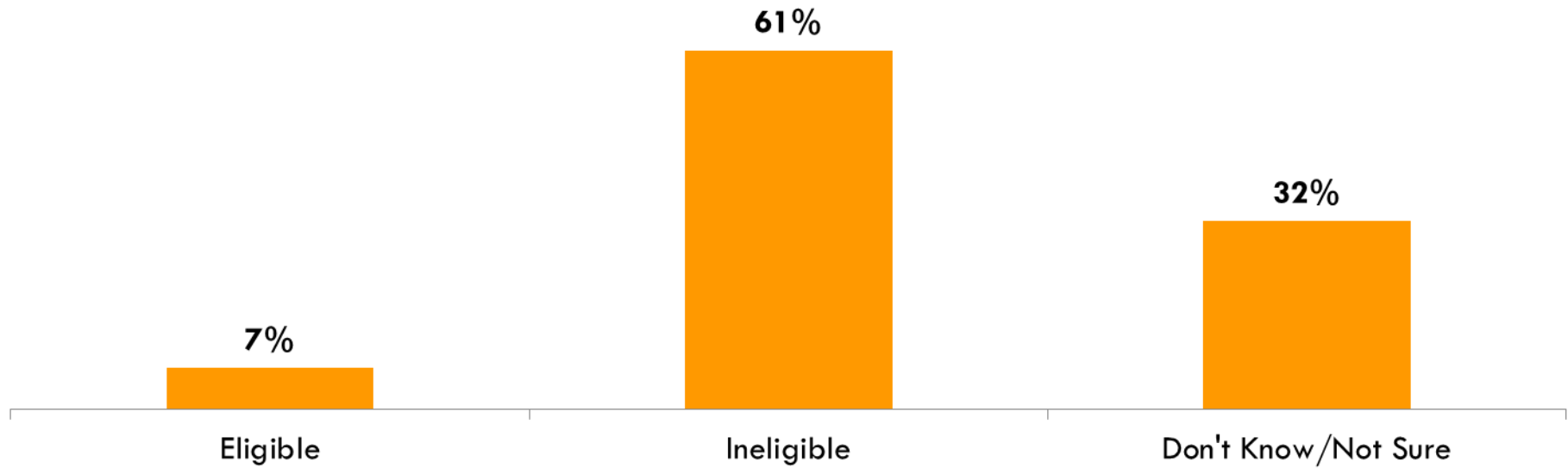


**Unless medically contraindicated, all current smokers are eligible for free or reduced cost NRT through the Vermont Quit Network or their health insurance provider. Smokers using Medicaid must obtain a prescription from their medical provider to obtain free NRT.*

Eligibility for Cessation Assistance*

Among current smokers in 2012 who did not have health insurance, only 7% thought they were eligible for free or reduced cost NRT. More than half incorrectly believed themselves to be ineligible (61%) (Figure 18).

Figure 18: Comparison of uninsured current smokers' perceived eligibility for free or reduced cost NRT, VTATS 2012

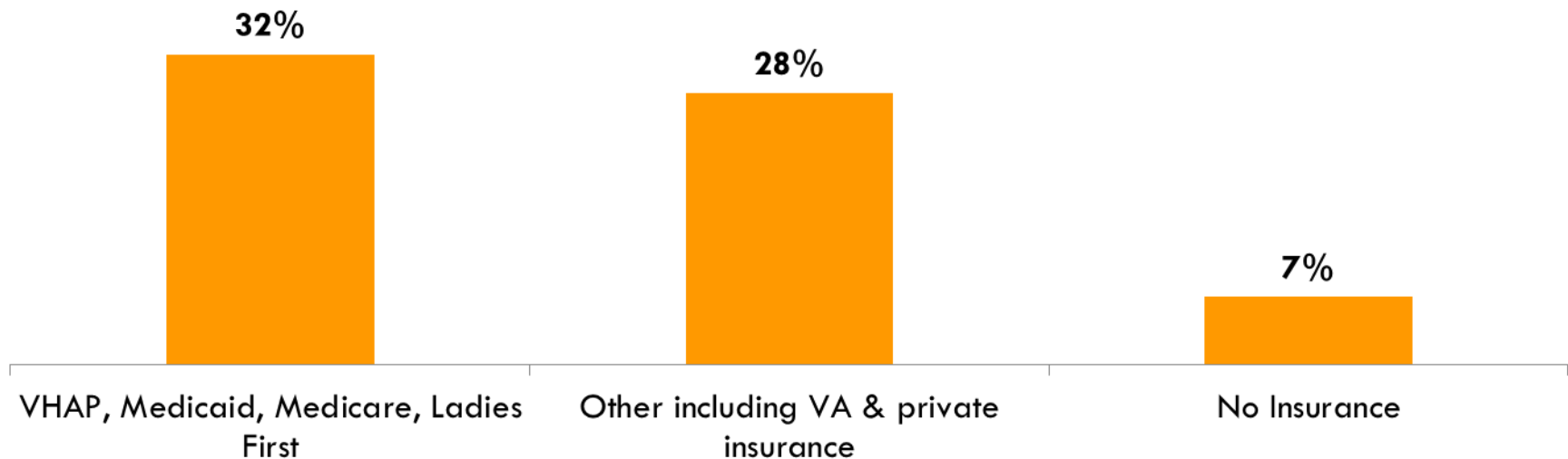


**Unless medically contraindicated, all current smokers are eligible for free or reduced cost NRT through the Vermont Quit Network or their health insurance provider. Smokers using Medicaid must obtain a prescription from their medical provider to obtain free NRT.*

Eligibility for Cessation Assistance

Current smokers with state-subsidized insurance were more likely than smokers with other insurance to believe they were eligible for free or reduced cost NRT (32% compared to 28% of those with private or Veterans' Administration (VA) insurance), though this was not significant. Those with no insurance were significantly less likely than both insured groups to perceive they were eligible (**Figure 19**).

Figure 19: Comparison of current smokers' perceived eligibility for free or reduced cost NRT by insurance type, VTATS 2012



Note: Medicaid, Medicare, Vermont Health Access Plan (VHAP), and the Ladies First Program are combined because they provide similar medication subsidies. The Veterans' Administration and those with supplemental plans to government coverage provide similar subsidies to private insurance and are therefore grouped together as well.

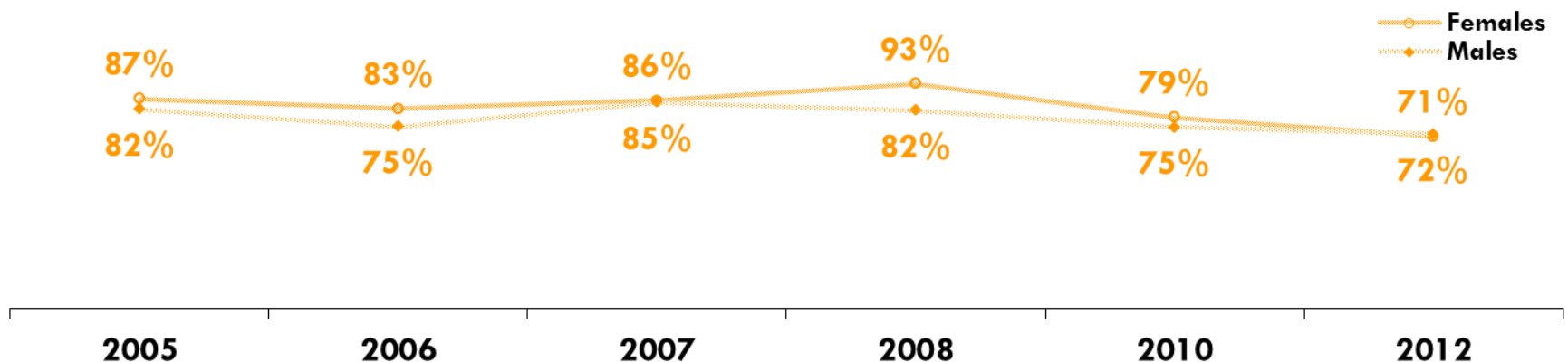
Adult Smoking

Quit by Phone Awareness

VTATS assesses the reported use of Quit by Phone (Quitline) – a VTCP-supported telephonic counselling service utilizing motivational interviewing, the stages of change theory and up to 16 weeks of free nicotine replacement therapy. Nearly three-quarters of current smokers had heard of the Quit by Phone service in 2012 (**Figure 20**). There were no significant difference between males and females.

Current smokers who made a quit attempt in the last year and had heard of the Quit by Phone service were asked if they used the service in their last quit attempt. In 2012, 8% had used Quit by Phone. There was no significant change in the proportion who reported using Quit by Phone between 2010 and 2012.

Figure 20: Trend in Quit by Phone awareness by gender, VTATS 2005-2012

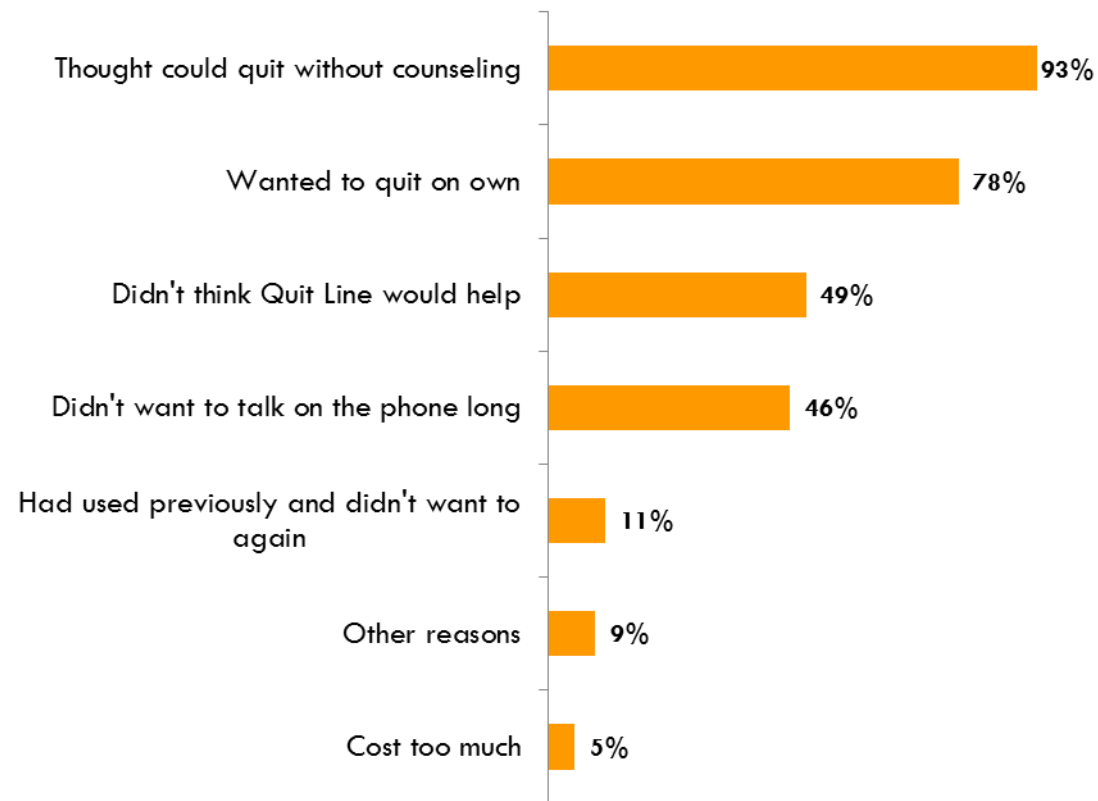


Quit by Phone (Quitline) Utilization

Current smokers who've made a quit attempt in the last year and have heard of the Quit by Phone service but did not use it were asked why they didn't use the program. Over 90% thought they could quit without counseling while 4 in 5 thought they could quit on their own. Nearly half did not think Quit by Phone would help or did not want to talk long. One in ten did not want to use it again and one in twenty thought it cost too much (**Figure 21**).

One-third said that they were not sure what Quit by Phone had to offer (data not shown).

Figure 21: Trend in reasons for not using the Quit Line during most recent quit, VTATS 2012

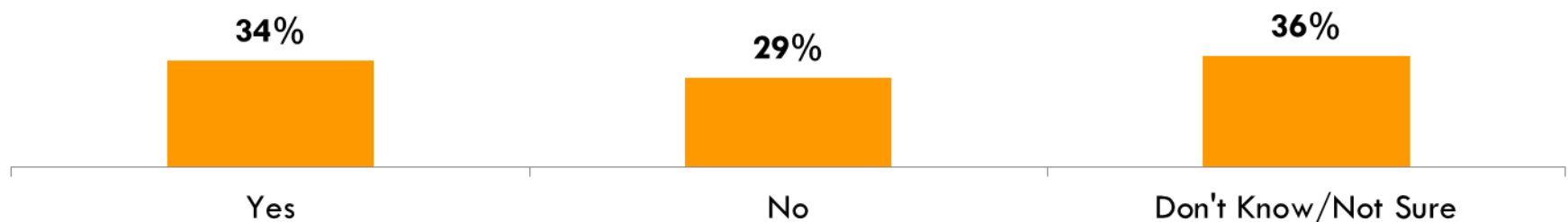


Quit in Person Awareness

VTATS assesses the reported use of Quit in Person – a VTCP-supported in-person counselling service utilizing accredited counselors offering hospital and community based cessation support and up to 16 weeks of free nicotine replacement therapy. The proportion aware of the Quit in Person program in 2012 was higher than those not aware of Quit in Person programs. The difference was not statistically significant (**Figure 22**).

Current smokers who made a quit attempt in the last year and had heard of the Quit in Person service were asked if they used the service in their last quit attempt. In 2012, 8% had used Quit in Person.

Figure 22: Comparison of current smokers' awareness of Quit in Person program, VTATS 2012

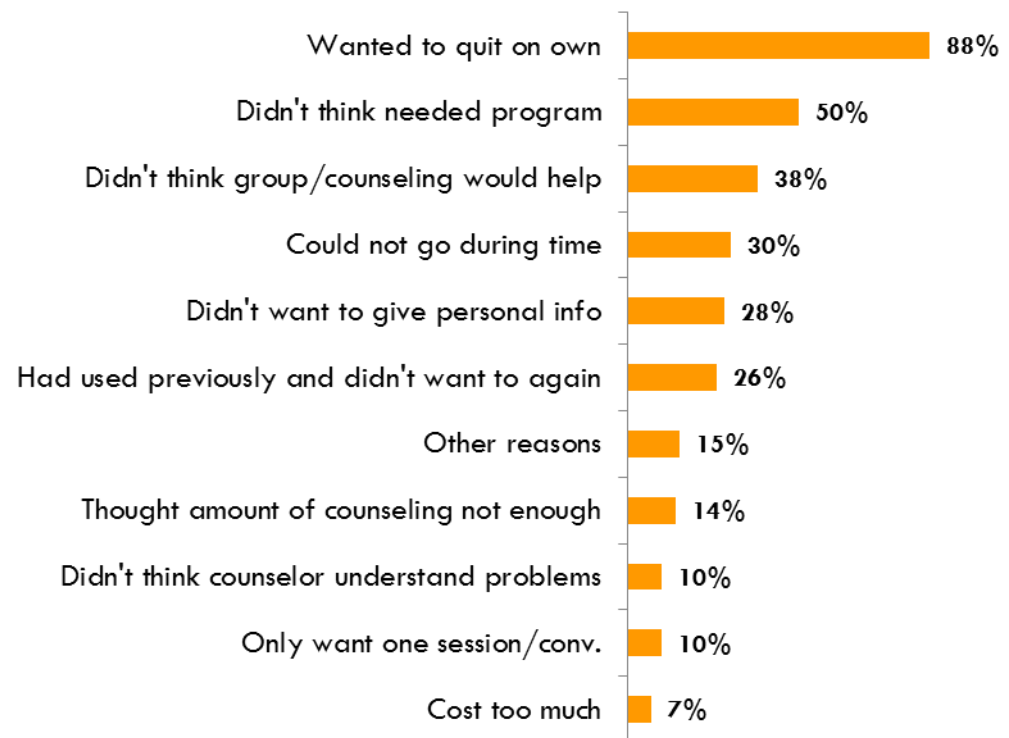


Quit in Person Utilization

Those who had heard of Quit in Person, but had not used it were asked why not (**Figure 23**). The most given reason was wanting to quit on their own (88%). Half said they did not think this kind of program was what they needed to quit and 28% mentioned not wanting to give personal information. Roughly one third said they couldn't go during the time classes were offered (30%) or that they did not think counseling would help them quit (38%). One in ten said that they wanted one session and 14% said the amount of counseling offered was not enough.

Twenty-eight percent said that they were not sure what Quit by Person had to offer (data not shown).

Figure 23: Trend in reasons for not using local community-based cessation programs during most recent quit attempt, VTATS 2012

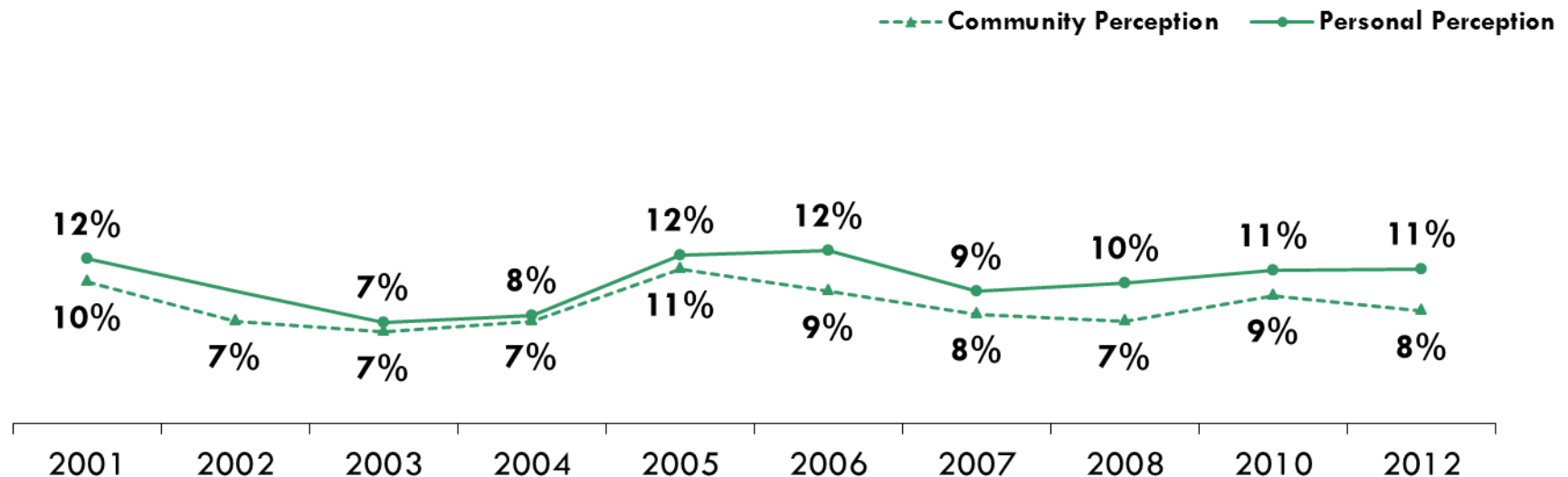


Adult Smoking

Perception – Is Smoking OK?

Three out of five Vermonters believed that adults ‘definitely should not’ smoke (63%), while only two out of five believed that the community thought the same (45%). One in ten think it is okay for adults to smoke as much as they want (**Figure 24**). The proportion changed minimally or not at all for both personal and perceived community views.

Figure 24: Trend in personal and perceived community views toward unlimited adult smoking, VTATS 2001-2012



Note: Data not available for personal perception in 2002

Perception – Is Smoking Okay: Differences among Smokers and Non-Smokers

As compared to non-smokers, smokers were nearly three times as likely to believe members of their community think it is okay for adults to smoke as much as they want (17% vs. 6%). They were four times more likely than non-smokers to personally think it is okay for adults to smoke as much as they want (28% vs. 7%). Seventy-three percent of non-smokers personally believe that adults should definitely not smoke, but just 24% of smokers said the same. All differences between smokers and non-smokers were statistically significant.

Those who were significantly more likely to think that their community members believe it is okay for adults to smoke as much as they want as compared to those think that their community members definitely should not smoke included:

- Low income households (34% vs. 16%)
- High school education (40% vs. 23%)

When it comes to personal views of smoking, Vermonters with lower education and income levels were significantly more likely to think it is okay for adults to smoke as much as they want as compared to those think that their community members definitely should not smoke:

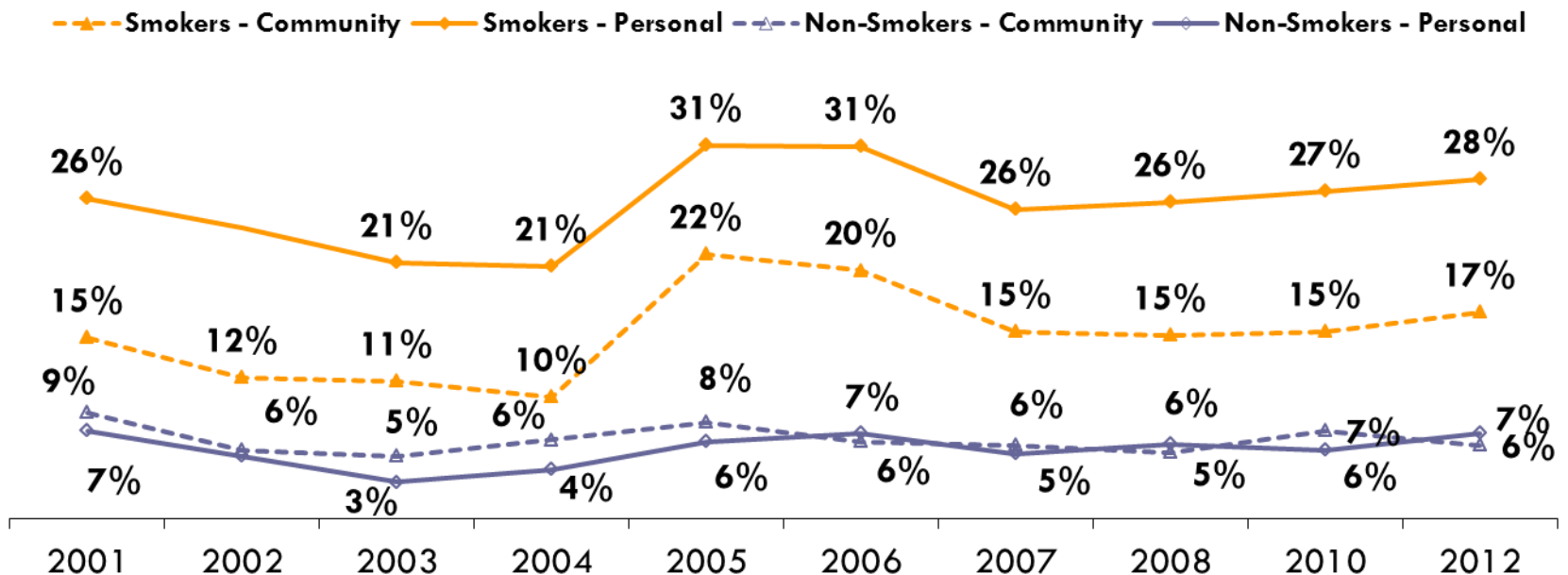
- Low income households (29% vs. 19%)
- High school education (46% vs. 23%)

Adult Smoking

Perception – Is Smoking Okay?

Figure 25 shows the trend in the proportion of smokers who said it is okay for adults to smoke as much as they want. This remained level from 2007 to 2012 – both for smokers who personally felt that way and those who believed the community feels that way.

Figure 25: Trend in perceived community and personal views toward unlimited adult smoking, VTATS 2001-2012

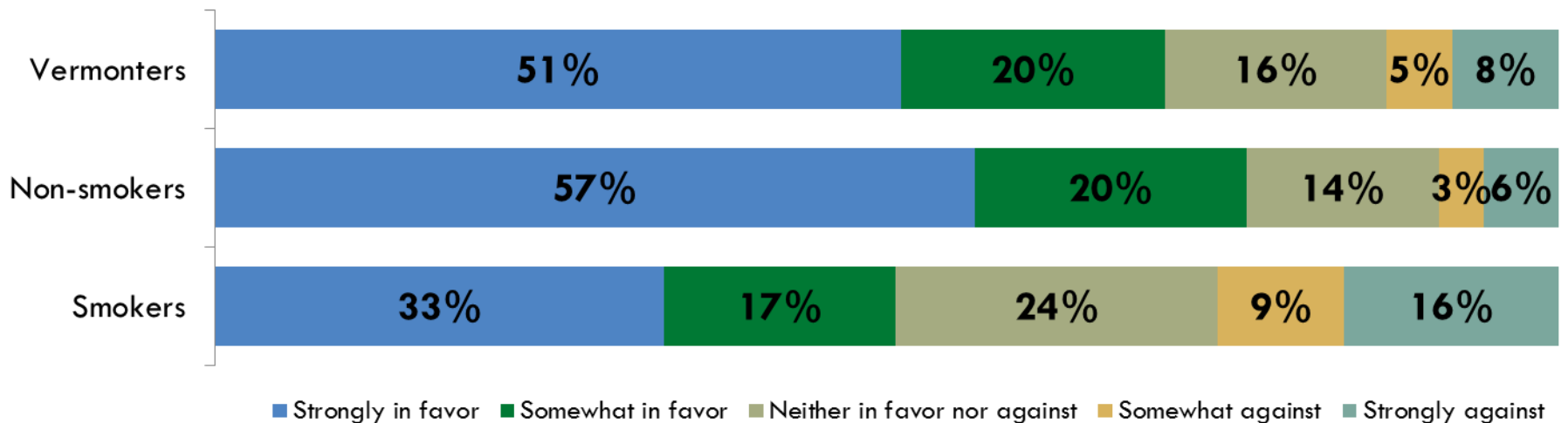


Note: Data not available for personal perception in 2002

Tobacco Policy – Warning Labels

Figure 26 shows that over half of Vermonters were strongly in favor of requiring warning labels on cigarette packs that show graphic images of damage caused by smoking. The proportion of supporters was higher among non-smokers (57%). Smokers were significantly less likely than non-smokers to strongly favor a requirement for these warning labels on cigarette packs (33% vs. 57%)

Figure 26: Opinion on a policy requiring warning labels on cigarette packs that show graphic images of damage caused by smoking, VTATS 2012



Secondhand Smoke

Reduce non-smokers' overall secondhand smoke exposure to 30%

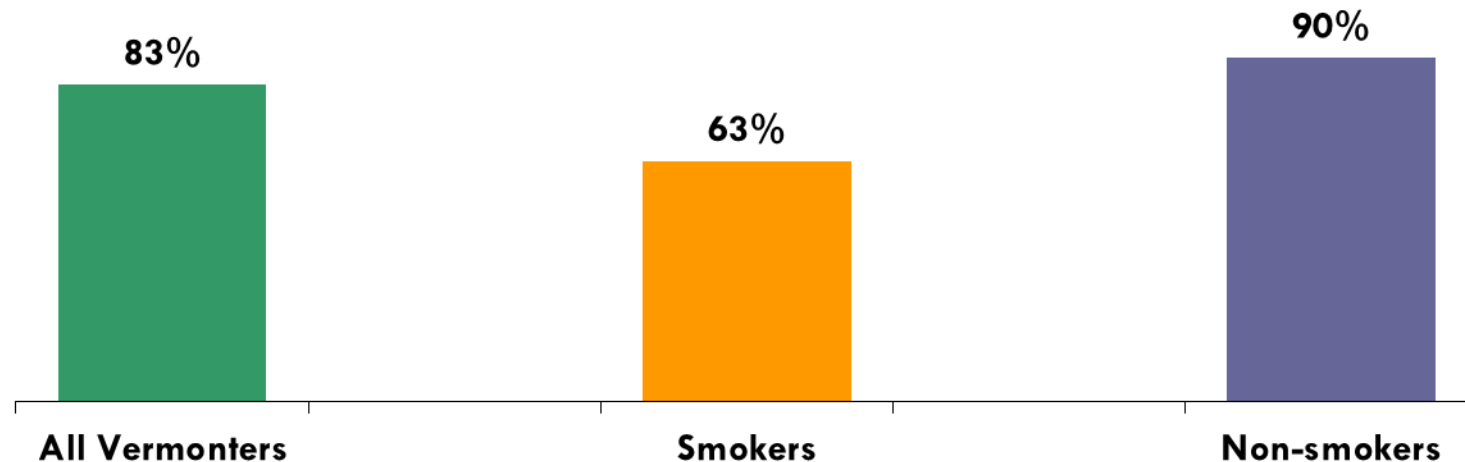
Secondhand Smoke

The VTCP has consistently placed an emphasis on encouraging attitudes and behaviors that reduce secondhand smoke exposure. VTCP promotes smoke-free zones, specifically at home and in the car when children are present. Additionally, VTCP works with community coalitions to positively influence attitudes, behaviors, and norms in Vermont towns and cities.

Smoking Bans - Home

Eighty-three percent of Vermonters did not allow smoking anywhere inside their home. Non-smokers were significantly more likely than smokers to ban smoking in the home (**Figure 27**). Compared to those without home smoking bans, Vermonters with home smoking bans were significantly more likely to be 25 – 44 years old (31% vs. 20%), have higher income (35% vs. 15%), and have higher education levels (45% vs. 25%). These differences were lessened among smokers: young age (49% vs. 31%), high income (18% vs. 11%), and high education (20% vs. 17%). The differences among smokers were not significant.

Figure 27: Home smoking bans, VTATS 2012

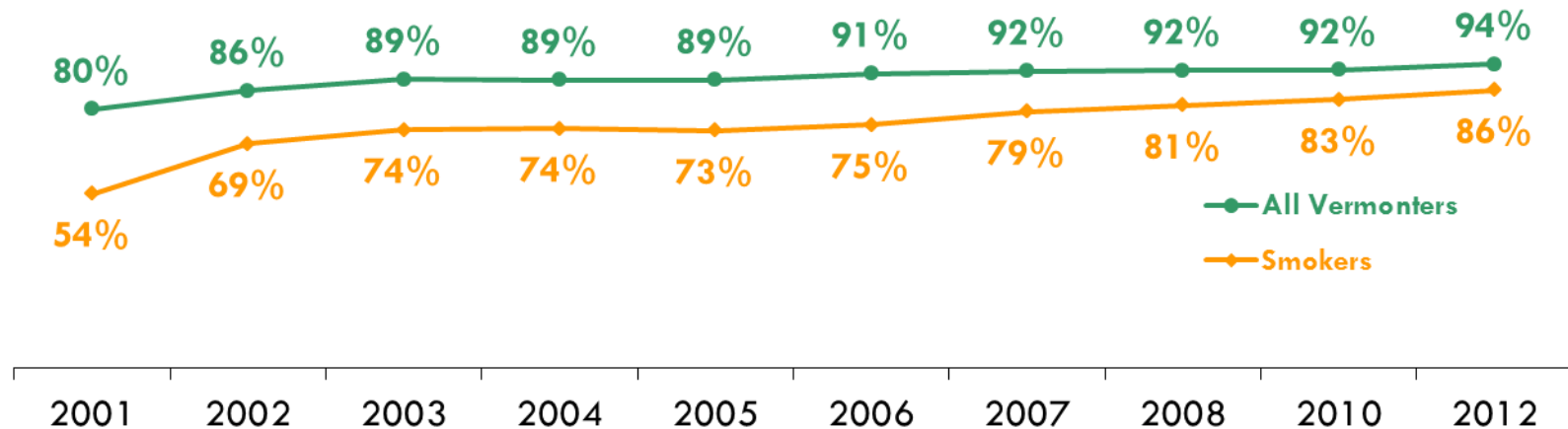


Secondhand Smoke

Smoking Bans - Vehicle

Vehicle smoking bans were common among Vermonters. In 2012, 94% of Vermonters said they did not allow smoking in their car or truck when children are present; 86% of smokers said the same. The proportion of non-smokers was 96% (data not shown). **Figure 28** shows the increasing proportion of Vermonters overall and of smokers, who have smoking bans in vehicles when children are present. Between 2001 and 2012, the increase was statistically significant for all Vermonters (up 14%), and smokers (up 32%).

Figure 28: Trend in vehicle smoking bans, VTATS 2001-2012

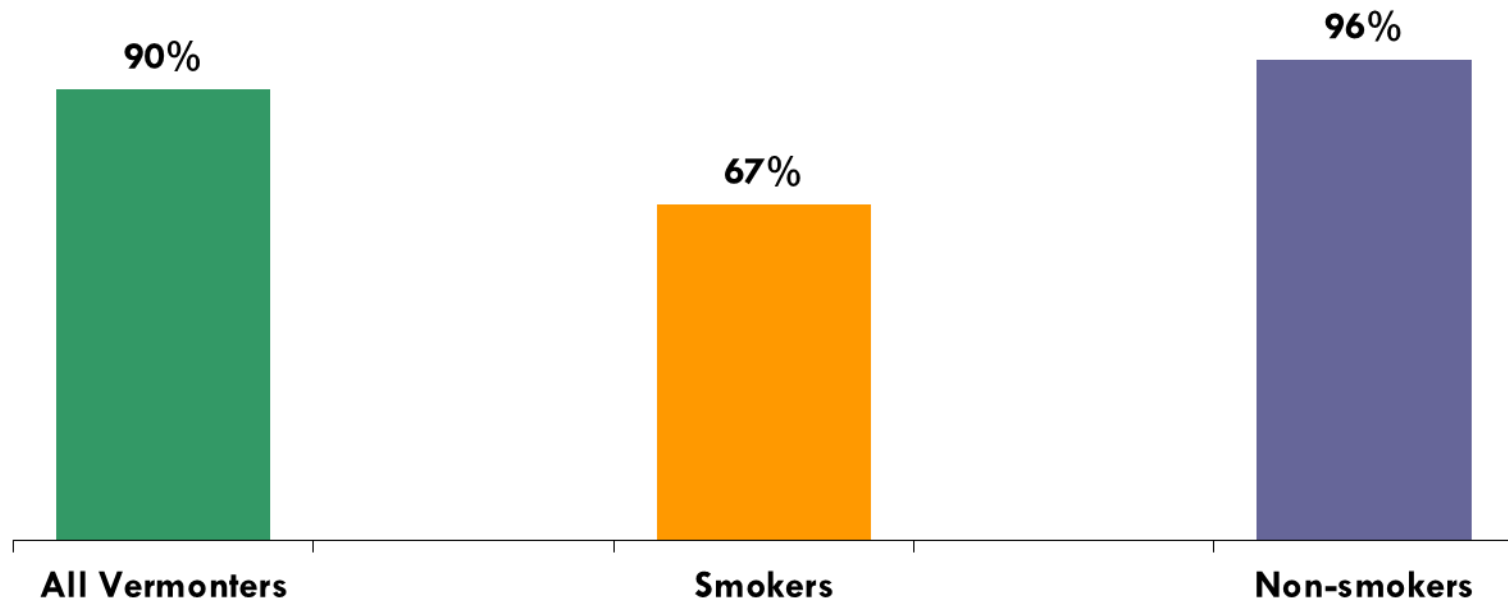


Secondhand Smoke

Secondhand Smoke - Smoke-free Homes Last 7 Days

Overall, 90% of Vermonters said no one had smoked in their home in the last seven days. Nearly all non-smokers and two-thirds of smokers reported smoke-free homes in the last week (**Figure 29**).

Figure 29: Proportion of 7-day smoke-free homes, VTATS 2012

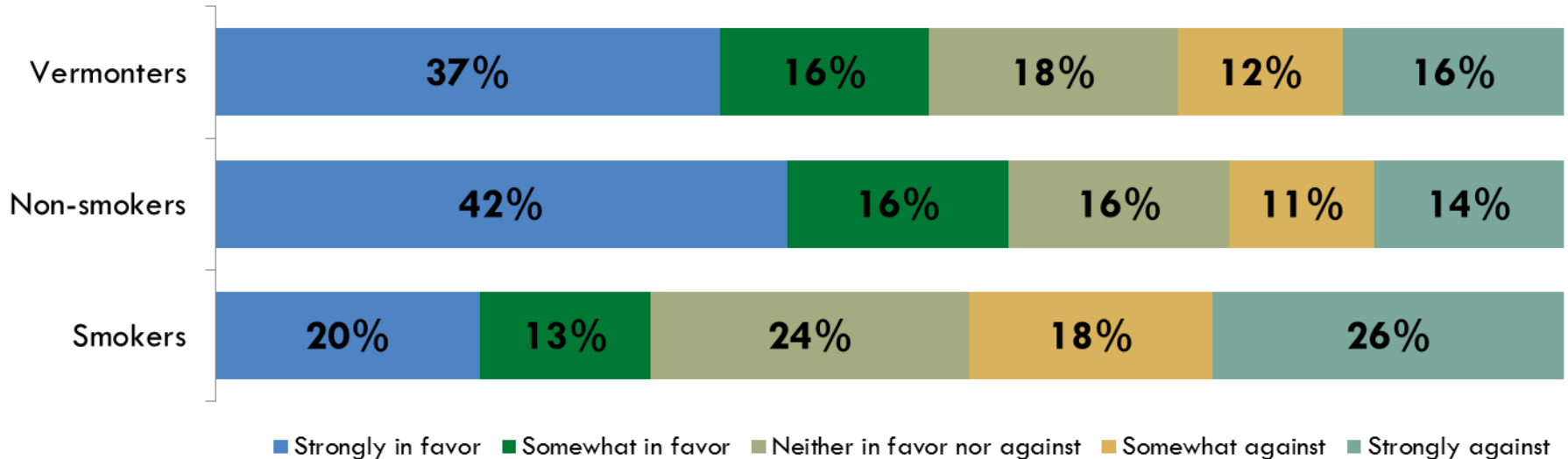


Secondhand Smoke

Tobacco Policy – Multi-unit Housing

In 2012, 17% of Vermonters reported that they live in multi-unit housing (including apartments, townhouses and condos). **Figure 30** shows that over one-third of Vermonters were strongly in favor of banning smoking in multi-unit complexes. The proportion of supporters was higher among non-smokers (42%). Conversely, only half as many smokers were strongly in favor of banning smoking multi-unit complexes (20%).

Figure 30: Opinion on a policy to ban smoking in multi-unit complexes, VTATS 2012

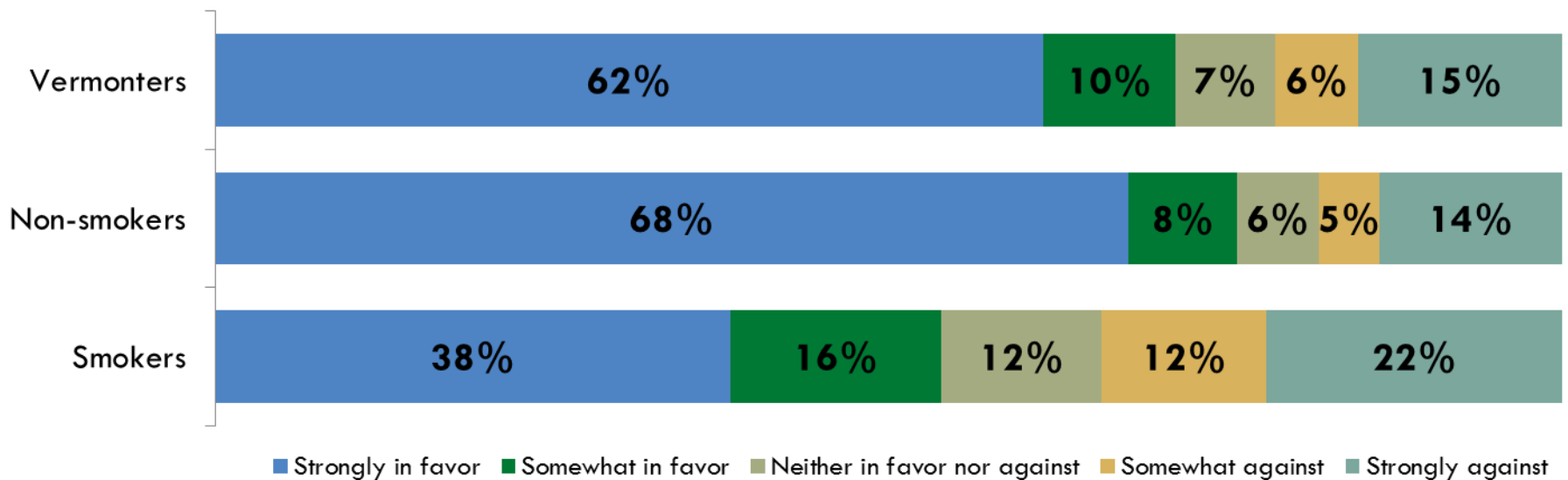


Secondhand Smoke

Tobacco Policy – Public Entryways

Figure 31 shows that over sixty percent of Vermonters were strongly in favor of banning smoking in entrance ways of public buildings. Smokers were significantly less likely than non-smokers to strongly favor banning smoking in entrance ways of public buildings (38% vs. 68%).

Figure 31: Opinion on a policy to ban smoking in entrance ways of public buildings, VTATS 2012

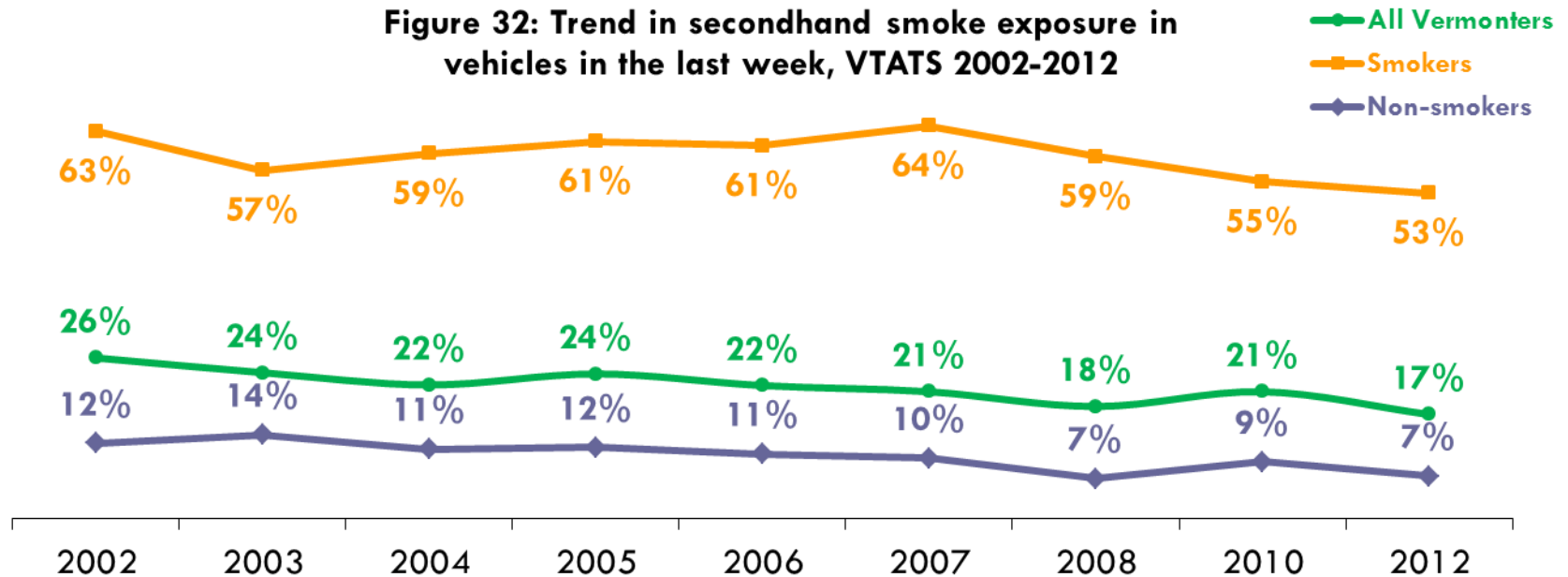


Secondhand Smoke

Reduction in Secondhand Smoke - Vehicle

Smokers were much more likely to have reported being in a car with someone who was smoking than non-smokers (53% vs. 7%). Over time, there has been some progress in reducing the percentage of Vermont adults who reported exposure to secondhand smoke in a car. The overall proportion significantly decreased from 26% in 2002 to 17% in 2012. Since 2002, there has been a statistically significant decrease in smoker or non-smoker exposure over time (**Figure 32**).

Figure 32: Trend in secondhand smoke exposure in vehicles in the last week, VTATS 2002-2012

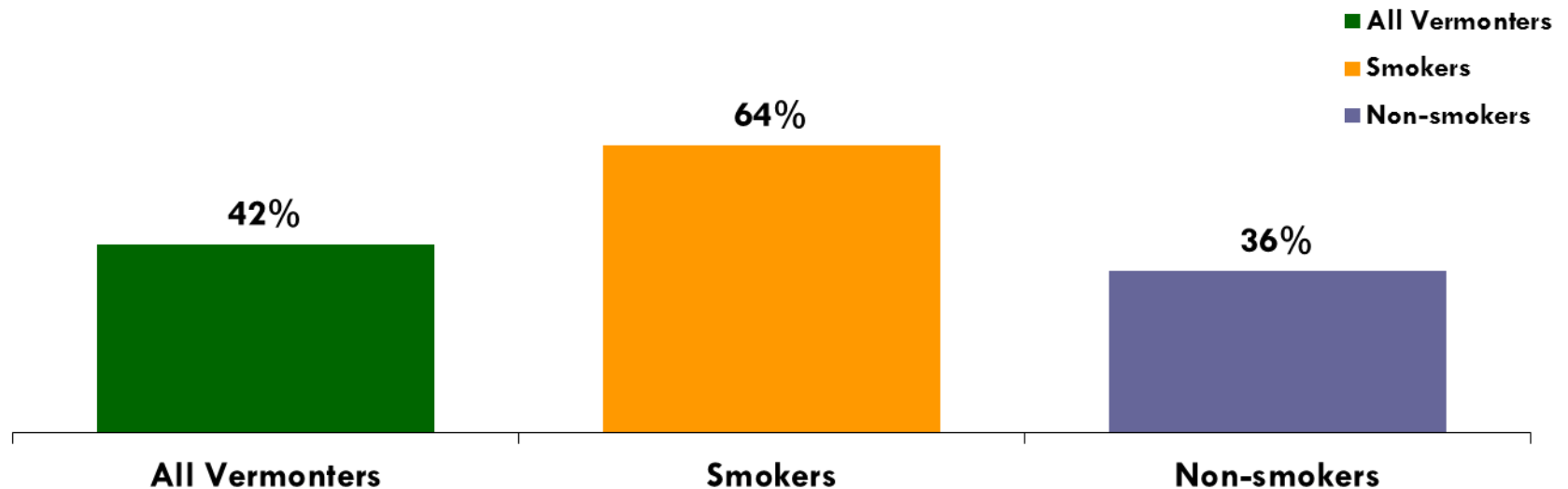


Secondhand Smoke

Secondhand Smoke – Public Place

Fewer than half of Vermonters said they were exposed to someone else's smoke while in a public place at least one day in the last week (42%). Smokers were significantly more likely than non-smokers to report breathing smoke from someone else's cigarette in a public place (64% vs. 36%) (Figure 33).

Figure 33: Comparison of public secondhand smoke exposure in the last week, VTATS 2012

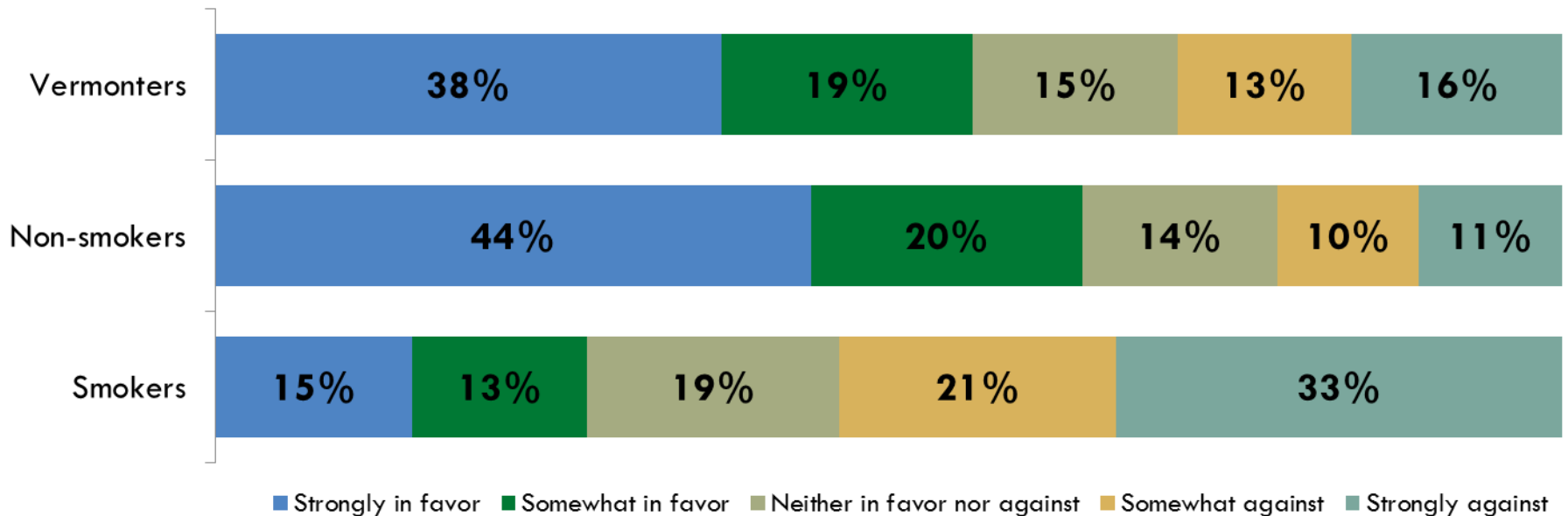


Secondhand Smoke

Tobacco Policy – Outdoor Bans

Figure 34 shows that over one-third of Vermonters were strongly in favor of banning smoking in outdoor public places. The proportion of supporters was higher among non-smokers (44%). Conversely, one-third of smokers were strongly against banning outdoor smoking in public places (33%).

Figure 34: Opinion on a policy to ban smoking in outdoor public places, VTATS 2012

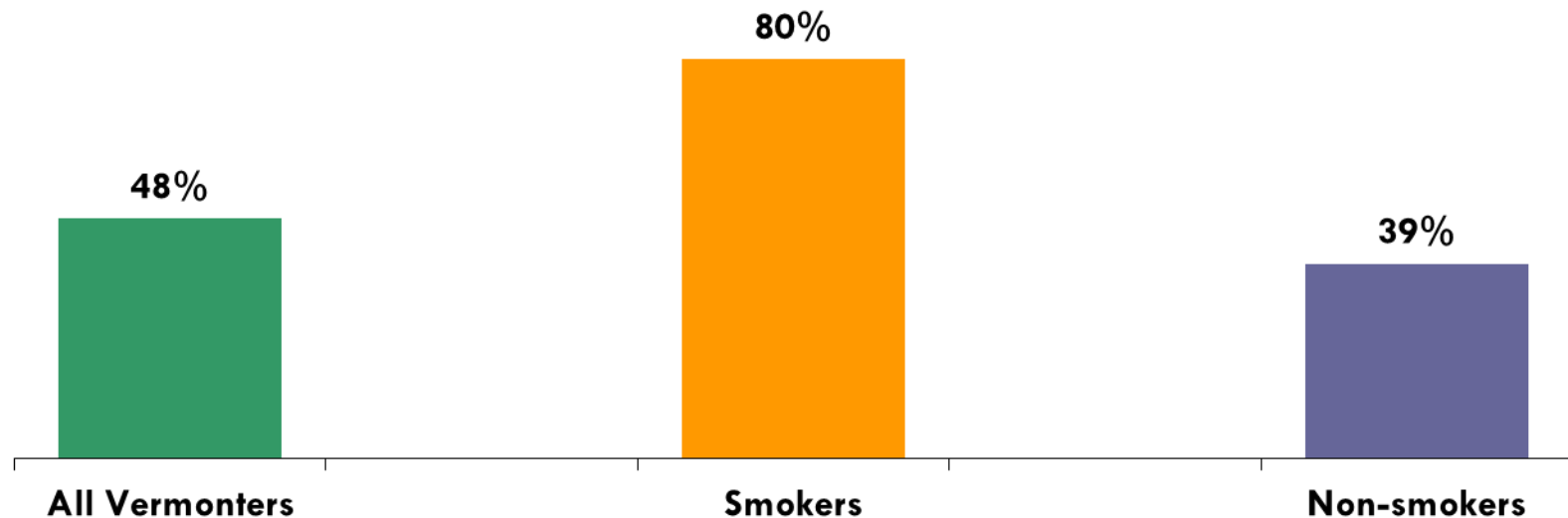


Secondhand Smoke

Overall Secondhand Smoke Exposure

Figure 35 shows that nearly half of Vermonters were exposed to other peoples' smoke at least once in the past seven days in the home, a vehicle or public places. Non-smokers were significantly less likely to be exposed to other peoples' smoke than smokers (39% vs. 80%).

Figure 35: Combined secondhand smoke exposure from homes, vehicles or outdoors, VTATS 2012

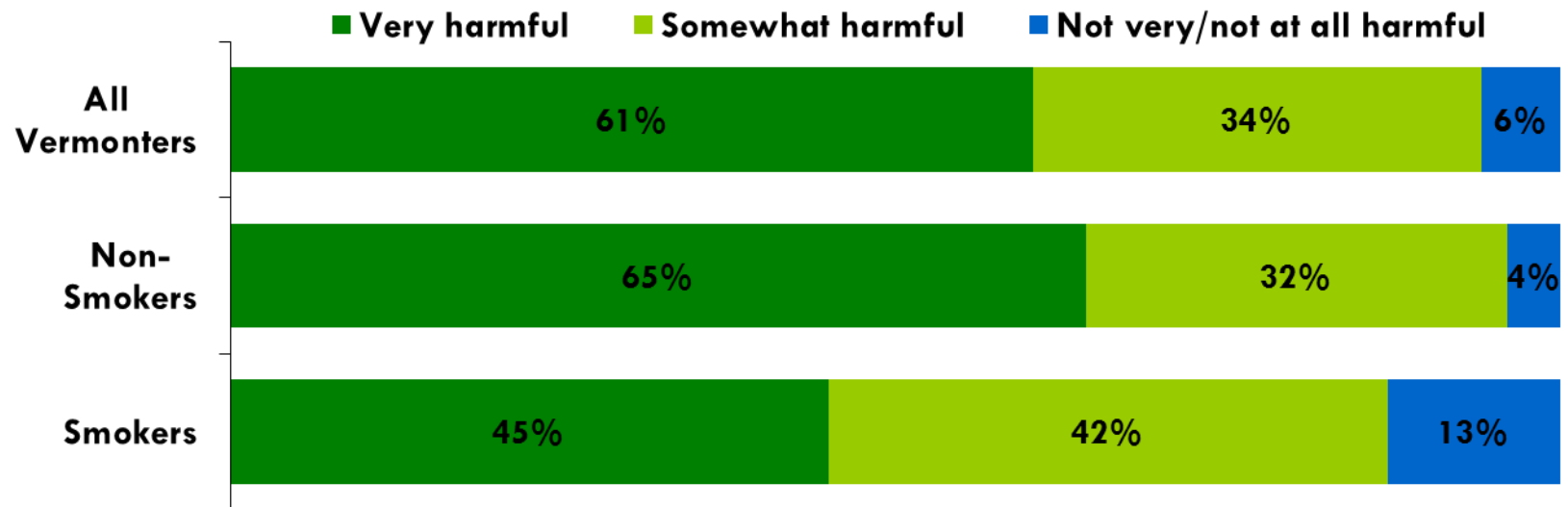


Secondhand Smoke

Secondhand Smoke – Perceived Harm

A majority of Vermont adults said they thought breathing smoke from other people's cigarettes is 'very harmful' to one's health (61%). Non-smokers said secondhand smoke is 'very harmful' significantly more often than smokers (65% vs. 45%) (**Figure 36**).

Figure 36: Perceived harmfulness of secondhand smoke, VTATS 2012

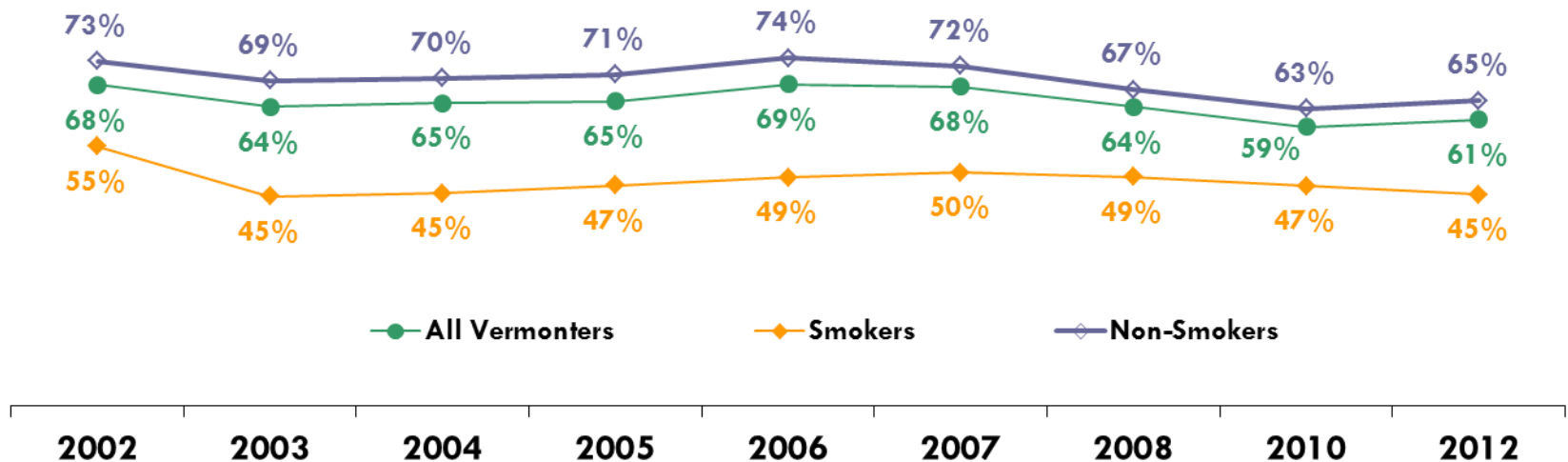


Secondhand Smoke

Reduction Seen in Perceived Harm of Secondhand Smoke

Significantly fewer Vermonters perceived secondhand smoke as 'very harmful' in 2012 compared to 2002. This trend is significant in all Vermonters (7% decline), smokers (10% decline), and non-smokers (8% decline) (**Figure 37**).

Figure 37: Trend in proportion who perceive secondhand smoke as 'very harmful', VTATS 2002-2012



Other Tobacco Products

Reduce youth prevalence of OTPs

Maintain low prevalence of adult OTPs

Other Tobacco Products

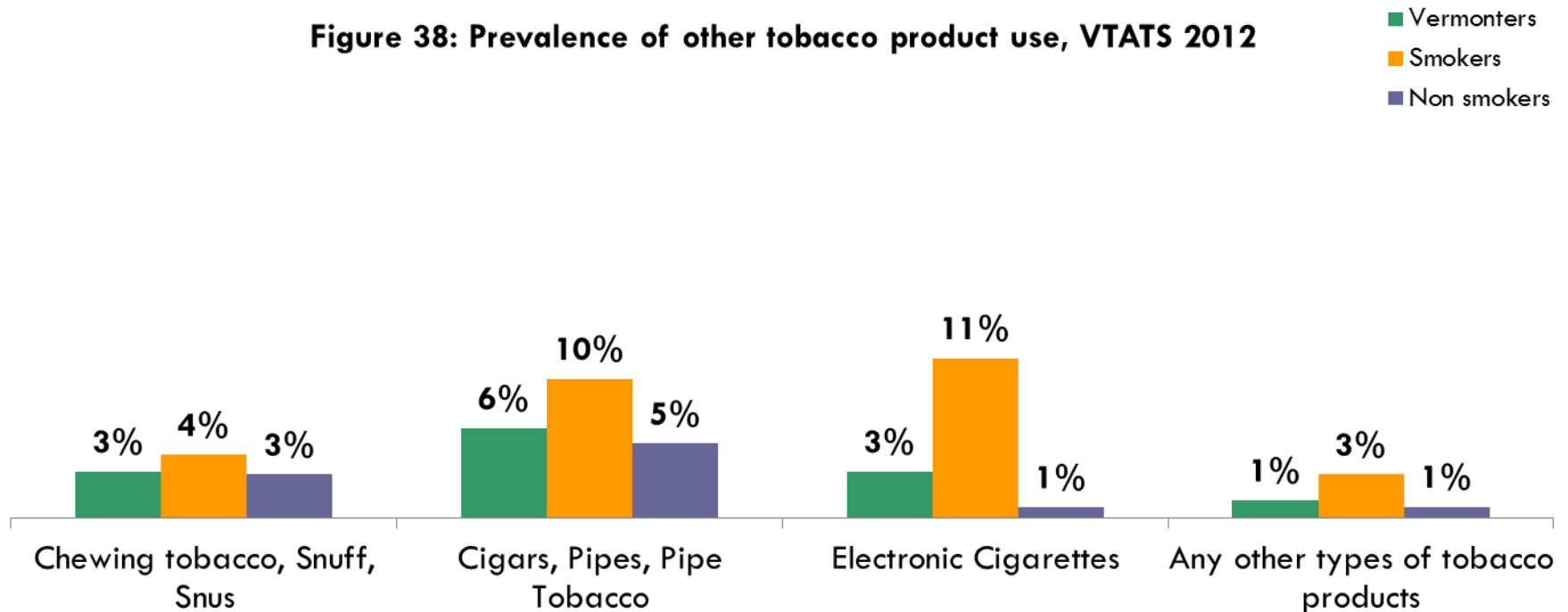
The VTCP is placing more emphasis on the use of other tobacco products (OTP) among youth and adults. The addition of this new goal for the VTCP is a response to increased tobacco industry promotion of these products and state and national data which indicate an increased in OTP use. VTCP uses statewide and local policy and works with media, partners and community coalitions to positively influence attitudes, behaviors, and norms in Vermont towns and cities for all non-cigarette tobacco products and substitutes including cigars, mouth tobacco and electronic cigarettes.

Other Tobacco Products

Prevalence

Overall, the proportion of adult Vermonters using other tobacco products some days or every day was low. The category with the highest proportion (6%) was use of cigars, pipes and pipe tobacco. For each category, smokers had a higher proportion of users, particularly for the aforementioned category (10%) and for use of electronic cigarettes (11%) (**Figure 38**).

Figure 38: Prevalence of other tobacco product use, VTATS 2012

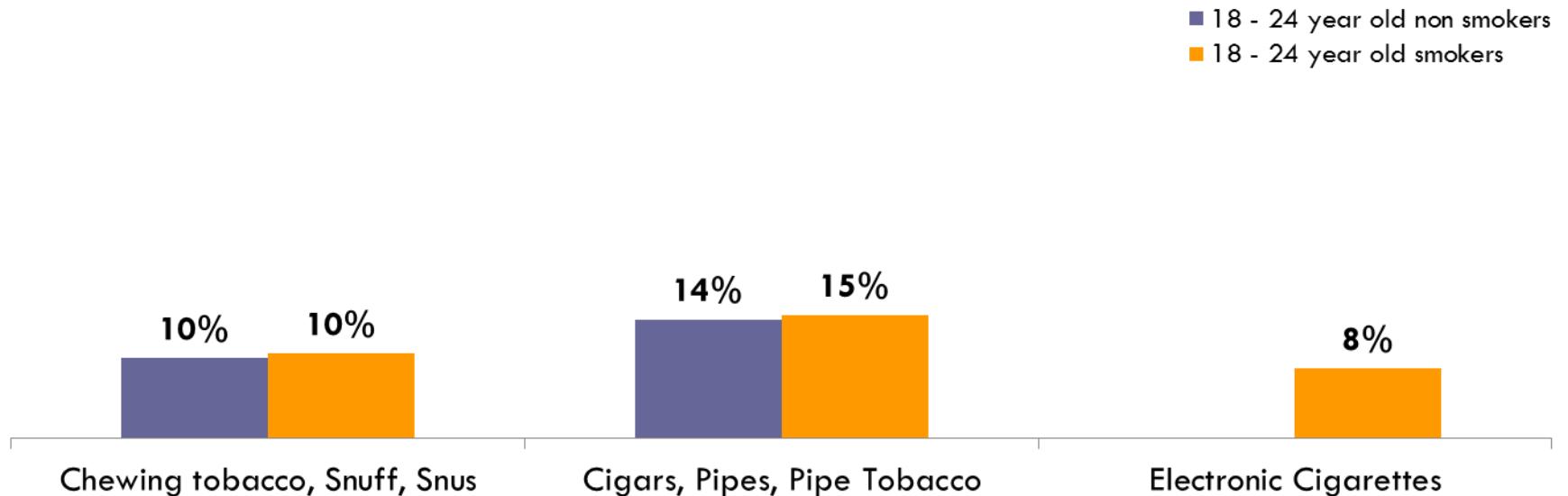


Other Tobacco Products

Young Adult Prevalence

When limiting to young adult Vermonters (18 – 24 years old), the proportion of users among both smokers and non-smokers increases for chew/snuff/snus and cigars/pipes/pipe tobacco, but not for electronic cigarettes (**Figure 39**).

Figure 39: Prevalence of other tobacco product use among young adults, VTATS 2012



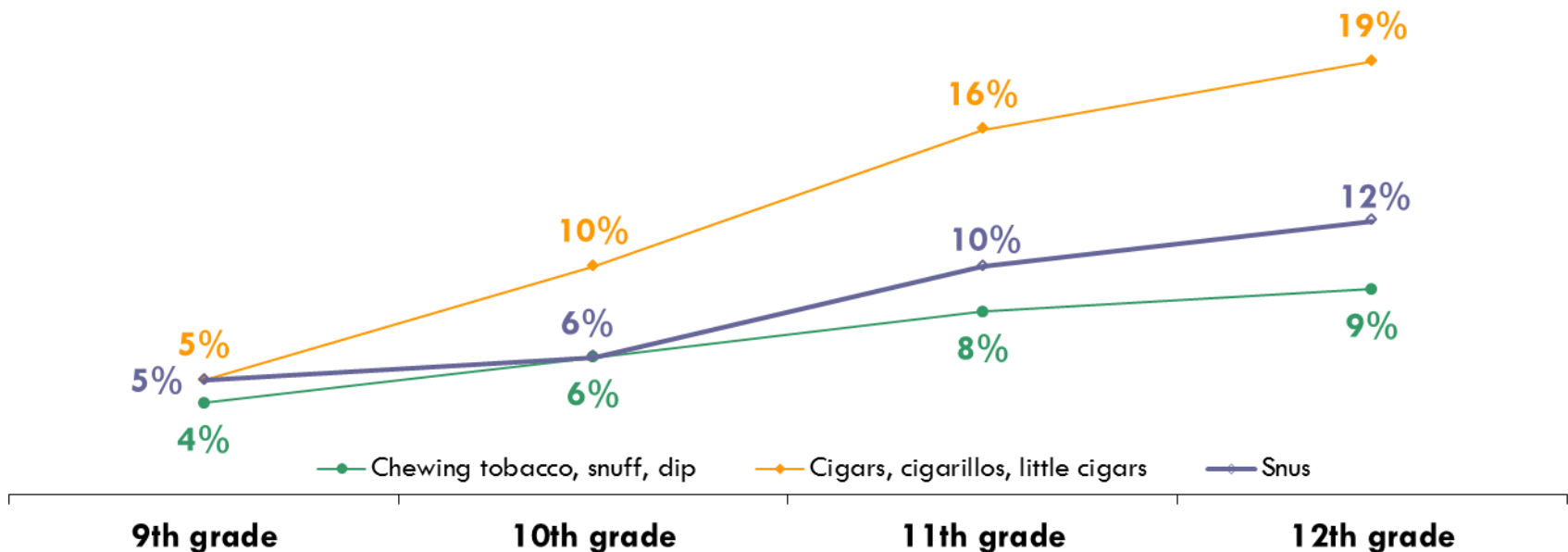
Note: The final category (other types of tobacco products) was suppressed due to a small number of respondents.

Other Tobacco Products

Youth Prevalence

The increased prevalence of use of other tobacco products among young adults as compared to older adults is consistent with the prevalence of these products in youth (**Figure 40**). The prevalence of non-cigarette tobacco products increases among high school students as they progress into higher grades.

Figure 40 : Trend in Vermont youth prevalence of other tobacco product use, YRBS 2011

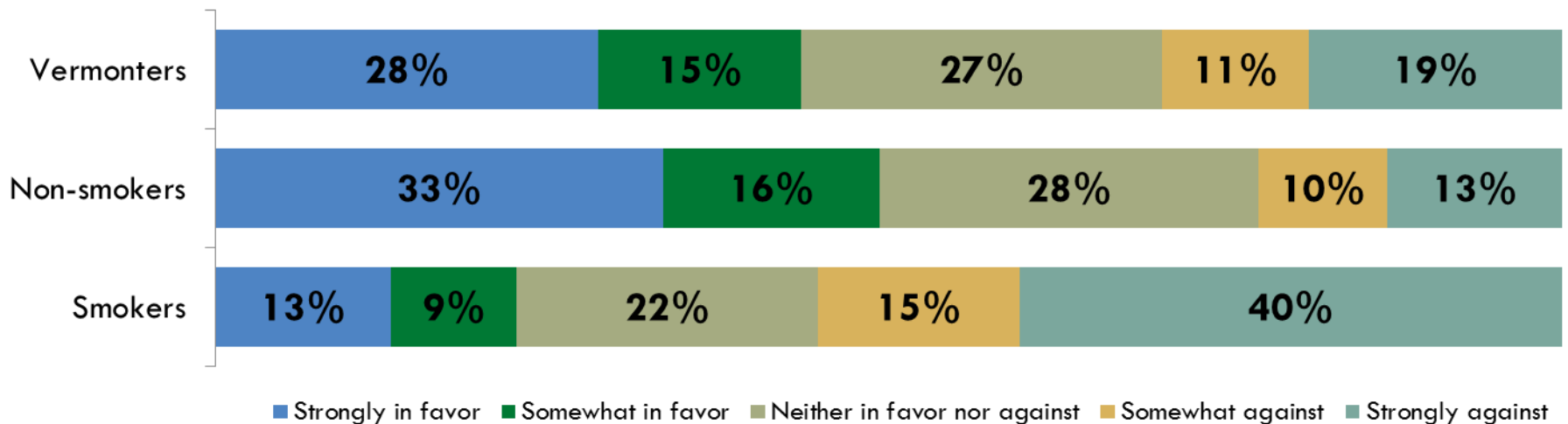


Other Tobacco Products

Tobacco Policy – Limiting Number of Stores Selling Tobacco Products

Figure 41 shows that only twenty-eight percent of Vermonters were strongly in favor of limiting the number of stores that sell any tobacco products in their community. Non-smokers were similarly in strong favor of limiting the number of stores (33%), while smokers were strongly against this policy (40%).

Figure 41: Opinion on a policy limiting the number of stores that sell any tobacco products in their community, VTATS 2012

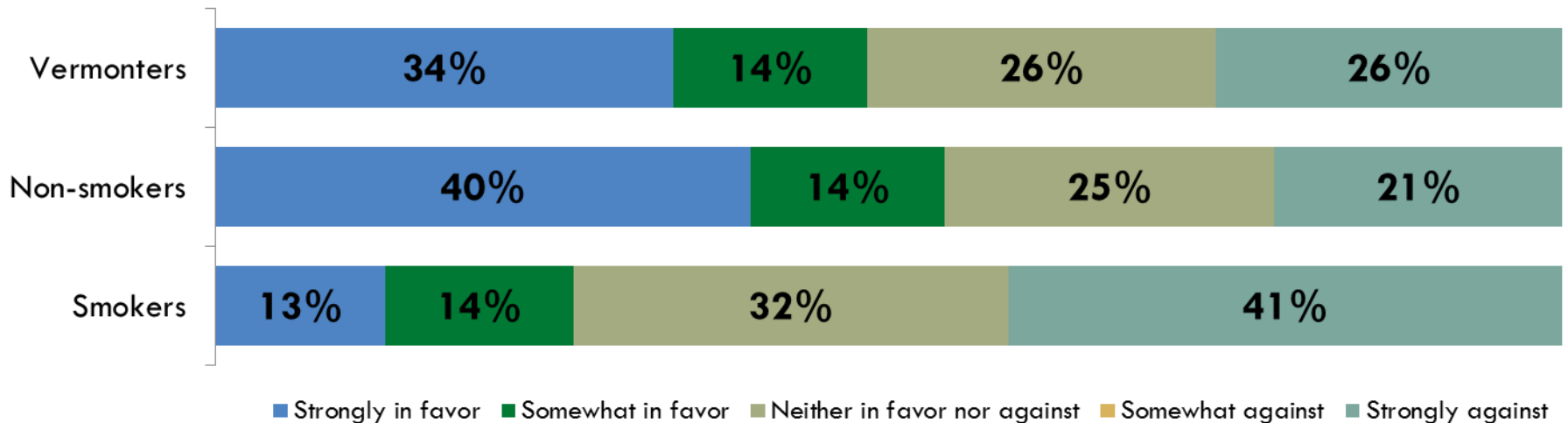


Other Tobacco Products

Tobacco Policy – Banning Tobacco Product Displays

Figure 42 shows that just over one-third of Vermonters were strongly in favor of banning the display of any tobacco products from stores. Non-smokers were similarly in strong favor of banning tobacco product displays (40%), while smokers were strongly against this policy (41%).

Figure 42: Opinion on a policy banning the display of any tobacco products from stores, VTATS 2012

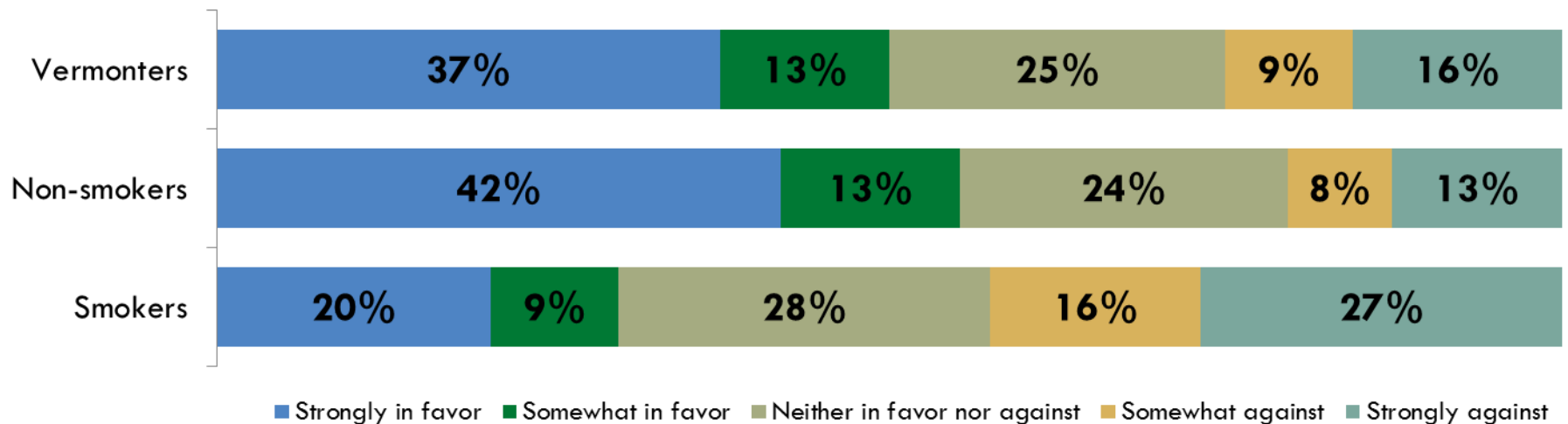


Other Tobacco Products

Tobacco Policy – Banning Tobacco Product Sale in Pharmacies

Figure 43 shows that thirty-seven percent of Vermonters were strongly in favor of banning the sale of all tobacco products in pharmacies. Non-smokers were similarly in strong favor of banning tobacco product sales in pharmacies (42%), while smokers tended to be either strongly against this policy (27%) or neither in favor nor against (28%).

Figure 43: Opinion on a policy banning the sale of all tobacco products in pharmacies, VTATS 2012



Methodology

The VTATS is a telephone-based survey of non-institutionalized Vermont adult (18 years and older) residents over an eight week period during the fall of the calendar year. Unless otherwise noted, the first time a data point was included on the VTATS was 2001. There have been various adjustments to the VTATS questionnaire and methodology since 2001. The most significant were in 2002 and were noted in previous reports. Trend data are included in this report. Past reports are available online at the Vermont Department of Health website.

Prior to 2008, the sample included 2,000 respondents each year: 1,000 each of smokers and non-smokers regardless of telephone type. In 2008, the VTATS included over 200 cell phone users for the first time. Recognizing the increased importance to representativeness of including cell phone users, the 2010 and 2012 surveys set the following targets: 2,000 respondents total, 1,400 landline, 600 cell phone, 1,000 non-smokers and 1,000 current smokers and former smokers (those who quit within the past five years). Unlike in 2008 when cell phone users were given shorter surveys, in 2010 and 2012, cell phone and landline users were given identical surveys. The survey took approximately 20 minutes to complete.

The VTATS results were “weighted” by gender, age, smoking status, household composition, telephone type, and county in order to compensate for differences between the sample and the overall Vermont adult population. The weighting procedure ensured that the sample was representative of this population and permitted us to draw inferences about the whole Vermont adult population based on the results of the sample.

Methodology

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. Differences were considered statistically significant when 95% confidence intervals did not overlap. These are noted in the text. All analyses were conducted using SAS 9.2 (Cary, NC, USA).

Select VTATS 2012 data were analyzed by demographic characteristics for this report. These analyses utilized the following variables: gender, age, educational attainment, and household income. For the purposes of this report, both lower education and lower income were used as proxies for low socioeconomic status (see **Table 2**, page 62).

Sample characteristics for 2012 VTATS data are presented (see **Table 3**, page 63). The table provides un-weighted respondent counts and proportions as well as the weighted proportion by each sample characteristic: smoking status, gender, age group, education level, and income level.

Response Rate

The CASRO response rates* for the 2012 VTATS were 38% and 30% for landline and cell phone respondents, respectively (see **Table 4**, page 64). For cell phones, this represents an increase from 27% in 2010 however, landline response rate were unchanged. It is important to note that there is not yet a standard formula for cell phone response rates. The survey contractor calculated a rate based on the information currently available.

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

Methodology

The following table includes various definitions used throughout the 2012 VTATS report:

Table 3: Definitions

Smoking Status

Current smoker	Smoked at least 100 cigarettes in life and now smokes every/some days
Recent quitter	Smoked at least 100 cigarettes in life and who quit (does not smoke at all) within the past 12 months
Former smoker	Smoked at least 100 cigarettes in life and who quit (does not smoke at all) between 1 and 5 year ago
Smoker	Current smoker or recent quitter
Non-smoker	Did not smoke 100 cigarettes in life or former smoker who quit more than 1 year ago

Education

Less than high school	Did not graduate from high school or earn a G.E.D.
High school	Obtained a high school degree or a G.E.D.
Some college	Attended some college (includes 2-year degrees)
College or more	4-year college graduates and those with post-graduate education

Income

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

Methodology

		2012				
		Total (N)	Landline (N)	Cell Phone (N)	Unweighted %	Weighted %
Overall		2,058	1,440	618	100	100
Gender	Male	958	650	308	47	49
	Female	1,100	790	310	53	51
Age Group	18 to 24 years	169	49	120	8	13
	25 to 44 years	536	293	243	26	31
	45 years or older	1,330	1,079	251	65	56
Education	Less than high school	131	109	22	6	5
	High school	661	478	183	32	28
	Some college	545	362	183	27	25
	College or higher	716	486	230	35	41
Income	Low (< \$25,000/year)	496	367	129	28	21
	Middle (\$25,000 - 74,999/year)	838	560	278	48	47
	High \$75,000+ /year	417	287	130	24	31
Lifetime Smoking Status	Never smoker	670	350	320	33	52
	Ever smoker	1,350	1,062	288	67	48
Current Smoking Status	Current smoker	925	794	131	69	36
	Former smoker	425	268	157	31	64
Quit Status	Quit within last year	44	25	19	11	13
	Quit 1 - 5 years ago	47	20	27	11	13
	Quit more than 5 years ago	318	201	110	78	75
Smoker (current smoker & quit w/in past year)		969	819	150	48	21
Non-smoker (never smoker & quit more than 1 year ago)		1,035	578	457	52	79

Methodology

Table 5: Sample Characteristics

by Survey Year

		2005		2006		2007		2008		2010		2012	
		N	%	N	%	N	%	N	%	N	%	N	%
Overall		2,069	100%	2,057	100%	2,124	100%	1,880	100%	2,044	100%	2,058	100%
Gender	Female	1,284	62%	1,287	63%	1,388	65%	1,078	57%	1,091	53%	1,100	53%
	Male	785	38%	770	37%	736	35%	802	43%	953	47%	958	47%
Age Group	18 to 24 years	288	14%	291	14%	279	13%	204	11%	468	23%	169	8%
	25 to 44 years	589	28%	555	27%	536	25%	471	25%	466	23%	536	26%
	45 years and older	1,163	56%	1,181	57%	1,281	60%	1,172	62%	1,074	53%	1,330	65%
Education	Less than high school	158	8%	132	6%	170	8%	109	6%	155	8%	131	6%
	High school	701	34%	727	35%	718	34%	558	30%	710	35%	661	32%
	Some college	531	26%	497	24%	526	25%	432	23%	601	29%	545	27%
	College or higher	668	32%	691	34%	702	33%	765	41%	570	28%	716	35%
Income	Low	498	24%	464	23%	523	25%	390	21%	529	26%	496	28%
	Middle	961	46%	877	43%	885	42%	813	53%	776	38%	838	48%
	High	346	17%	380	18%	399	19%	412	22%	356	17%	417	24%
Smoking Status	Current smoker	854	41%	906	44%	970	46%	524	28%	917	45%	925	46%
	Recent quitter	86	4%	69	3%	51	2%	54	3%	52	3%	44	2%
	Former smoker	370	18%	349	17%	318	15%	433	23%	259	13%	365	18%
	Never smoker	745	36%	724	35%	775	37%	862	46%	810	40%	670	33%
	Smoker	940	45%	975	47%	1,021	48%	578	31%	969	48%	969	48%
	Non-Smoker	1,115	54%	1,073	52%	1,093	52%	1,295	69%	1,069	52%	1,035	52%
Overall CASRO Response Rate (see page 7)	Landline	--	46%	--	36%	--	22%	--	33%	--	38%	--	38%
	Cell phone	--	--	--	--	--	--	--	27%	--	27%	--	30%

**VERMONT DEPARTMENT OF HEALTH
ADULT TOBACCO SURVEY
2012 Survey**

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2012 Update: Screener 3 will not be used – no 2012 target for 18-24 y.o.

//PROGRAMMER NOTES: A respondent's smoking status may change, depending on their response to Q3_30B (in Section 3). The Variable "XSMOKER holds the original smoking status variable". The variable SMOKER, holds the updated smoking status (based on info from Q30_B if applicable).//

<i>Logic</i>	<i>Set smoking status to</i>	<i>Set "XSMOKER" VARIABLE FLAG TO</i>
<i>Q1_3=01,02</i>	<i>Smoker</i>	<i>SMOKER=11</i>
<i>Q1_1=02,77,99</i>	<i>Non-Smoker</i>	<i>SMOKER=22</i>
<i>Q1_3=03,77,99</i>	<i>Ex-Smoker "former smoker"</i>	<i>SMOKER=33</i>

<i>Logic</i>	<i>Set smoking status to</i>	<i>Set "SMOKER" VARIABLE FLAG TO</i>
<i>Q1_3 = 01,02</i>	<i>Smoker</i>	<i>SMOKER=11</i>
<i>(Q1_1 = 02,77,99) OR (q3_30b > 5 years (this logic doesn't come until Section 3))</i>	<i>Non-Smoker</i>	<i>SMOKER=22</i>
<i>(Q1_3 = 03,77,99) OR (IF Q3_30B ≤ 5 (this logic doesn't come until Section 3))</i>	<i>Ex-Smoker "former smoker"/recent quitters</i>	<i>SMOKER=33</i>

Create variable, LANDLINE, where 1= Landline Survey. Blank = Cell Phone Survey.

LANDLINE SCREENER PERCENTS

//PROGRAMMING

11.16.10 Start fielding with the landline screeners set to the following percentages

Screener 1 set to 10%

Screener 2 set to 90%

Screener 3 set to 0%

We may adjust these percentages as we move through fielding to meet target completes, and will update the word document accordingly//

//PROGRAMMING ALLOW INTERVIEWERS TO TYPE “SPECIAL” AT ANY TIME TO ACCESS THE HELP SCREEN OPTIONS. HELP SCREEN SHOWS OPITONS 1-19. INTERVIEWERS CHOOSE THE OPTION AND IT BRINGS THEM TO THE TEXT FOR THAT OPTION. //

SP_MENU

[CHOOSE NUMBER FOR FAQ THAT APPLIES TO SEE RESPONSE]

01. Contact with Questions/Forward Complaints to:

ELP02. Why are you doing this survey?

03. How was I selected?

04. My number is unlisted, how did my number get on the call list?

05. How will my answers be used?

06. My name is on the national do-not-call list. I’m not supposed to get these calls.

07. Is there a state do-not-call list I can get my name on?

08. Why am I getting calls so late at night/calls on the weekend?

09. I said no, why are you calling again?

10. If I decline to participate, will that stop me from being called again?

11. Are my tax dollars paying for this survey?

12. Why can’t I do *69 to call back the person calling me/the number is blocked, is this where I should call to complain?

13. Can I get the survey in the mail? Why call people at home?

14. I don’t know anything about that.

15. Why should I participate?

16. Why do you need to know how many adults live in my house?

17. I don’t have anything to do with public programs. I get my health care from my private doctor/ HMO/ military.

18. I just moved to this state; I don’t qualify as a resident yet.

19. I don’t smoke/use tobacco—you don’t need to talk to me.

XX to go back to survey without selecting help option

/IF SP_MENU=01=01/

HELP01 Contact with Questions/Forward Complaints to:

Caroline Dawson

865-7783 or 800-869-2871

caroline.dawson@state.vt.us

If she is unavailable, please contact (in the following order):

Jessie Hammond – 863-7663 or 800-869-2871, jessie.hammond@state.vt.us

Jason Roberts – 863-7303 or 800-869-2871, jason.roberts@state.vt.us

Jennifer Hicks – 863-7264 or 800-869-2871, jennifer.hicks@state.vt.us

01 CONTINUE

/IF SP_MENU==02/

HELP02 Why are you doing this survey?

Tobacco is the number one cause of preventable, premature mortality. We use the adult

tobacco survey to understand how the department of health can best serve the people of Vermont and to assess the impact of Tobacco Control Program efforts in reducing smoking and increasing awareness and knowledge of smoking related issues among Vermonters.

01 CONTINUE

/IF SP_MENU=03/

HELP03 How was I selected?

The adult tobacco survey is completed among a representative sample of Vermont adults, ages 18 and older. We select, or draw, phone numbers for the study randomly through a process called “random-digit dialing”. Once phone numbers are drawn, they are loaded into our computer system for dialing and one adult in a household is randomly chosen to complete the survey. Neither we at ICF International, nor the Vermont Health Department knows to whom the phone number is registered and neither wants to. During analysis, results are aggregated and only these aggregate statistics are reported; individual responses are kept strictly confidential without linkage to telephone numbers.

01 CONTINUE

/IF SP_MENU=04/

HELP04 My number is unlisted, how did my number get on the call list?

We use a process called “Random digit dialing”—this process generates the telephone numbers called as part of the adult tobacco survey. Here’s how “Random digit dialing works”: the computer has the area code (802) and telephone prefixes (the first 3 digits) included in the survey area and it then assigns the last four digits in a random fashion. Once a number is assigned or drawn, it is loaded for dialing. All kinds of numbers are dialed as a result of this process: businesses, pay phones, non-working numbers, etc. Unlisted numbers are selected for dialing purely by chance. I assure you that this survey is confidential, your responses cannot be traced back to you, and survey results will only be reported in aggregate (group) form.

01 CONTINUE

/IF SP_MENU=05/

HELP05 How will my answers be used?

The answers from all survey participants are analyzed and reported together. Any reports generated from the results of the survey are based on aggregate statistics from all respondents. Reports including adult tobacco survey data are used by the Vermont Department of Health and others to evaluate programs and to inform policy makers. If you are interested in seeing the results, I can arrange for them to be sent to you. *(If person wants reports sent to them, record their name and address and send to Caroline Dawson at caroline.dawson@state.vt.us)*

01 CONTINUE

/IF SP_MENU=06/

HELP06 My name is on the national do-not-call list. I'm not supposed to get these calls.

The national do-not-call list was enacted to control telemarketing companies that sell services and products over the phone. The adult tobacco survey is conducted for research and does not fall under current do-not call list laws. The federal laws can be confusing, but research calls are not included in the federal regulations that apply to telemarketing calls. The health department is not selling anything; but your answers will help to evaluate and guide public health policy and programs.

Information about telephone consumer rights can be obtained from the Federal Communications Commission (FCC): phone: **1-888-225-5322** or at www.fcc.gov and the Federal Trade Commission (FTC) phone # 202-382-4357 or at www.ftc.gov. **Information is also available on the Vermont Secretary of State website – www.sec.state.vt.us/tutor/dobiz/forms/teleinfo.htm.**

01 CONTINUE

/IF SP_MENU=07/

HELP07 Is there a state do-not-call list I can get my name on?

Vermont does not maintain a do-not-call list separate from the national list. The adult tobacco survey, however, is exempt from **all** do-not-call lists. The national do-not-call list was enacted to control telemarketing companies that sell services and products over the phone. The adult tobacco survey is conducted for research and does not fall under current do-not call list laws. The federal laws can be confusing, but research calls are not included in the federal regulations that apply to telemarketing calls. The health department is not selling anything; but your answers will help to evaluate and guide public health policy and programs

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[INTERVIEWER NOTE: ICF International maintains a “do not call list” internally for this survey. If respondent requests to be removed from list, code as 009]

01 CONTINUE

/IF SP_MENU=08/

HELP08 Why am I getting calls so late at night/calls on the weekend?

The intention is not to disturb you, so I apologize if that was the case. Calls are made during the evening hours and on weekends because many people are not home, or are busy earlier in the day/during the weekday. Calling during *all* periods of the day and evening and on

every day of the week helps to ensure that a *representative* sample of Vermont adults is reached.

In general, the calling hours for the adult tobacco survey are 9 am to 9 pm on Monday through Friday, 10 am to 9 pm on Saturday and Sunday. However, if there is a more convenient time to contact you, I can arrange for the call to be made during that time (*if person says there is a more convenient time schedule a specific callback.*)

01 CONTINUE

/IF SP_MENU=09/

HELP09 I said no, why are you calling again?

I apologize; we just wanted to give you another opportunity to participate, as it is really important that we speak to as many households as possible. The validity of our research is actually improved when more of the people selected to complete the survey actually finish the interview. Also, sometimes a person doesn't want to participate because we've reached them at an inconvenient time.

01 CONTINUE

/IF SP_MENU=10//

HELP10 If I decline to participate, will that stop me from being called again?

I can remove your number from dialing for the 2012 VTATS. However, your telephone number was randomly selected for inclusion in the sample for this study. The process of selecting telephone numbers is completely random and anonymous, so there is no guarantee that your number will not be selected as part of the sample for *another* survey, or even later versions of this survey.

01 CONTINUE

/IF SP_MENU=11/

HELP11 Are my tax dollars paying for this survey?

No. The adult tobacco survey is funded through Master Settlement Agreement (MSA) funds, ***not by your tax dollars***. These funds are the result of the settlement reached with the tobacco industry in 1999—The Vermont Department of Health received approximately 1.6 million dollars in settlement funds in fiscal year 2012.

01 CONTINUE

/IF SP_MENU=12//

HELP12 Why can't I do *69 to call back the person calling me/the number is blocked, is this where I should call to complain?

The VDH contracts with my company, ICF International, to conduct interviews. “*69” doesn't work because I don't have an individual phone number to my line. However, if you

would like to reach someone directly to ask questions or voice your concerns, I can give you some direct phone numbers:

VT ATS ICF International Verification Line 1-866-784-7216

VDH 802-865-7783 or (toll-free) 800-869-2871 (ask for Caroline Dawson).

01 CONTINUE

/IF SP_MENU=13/

HELP13 Can I get the survey in the mail? Why call people at home?

This survey is only conducted over the telephone. The health department's experience with studies of this type shows that mail surveys are more costly-- and achieve lower participation-- than those done over the telephone. Also, reaching people in their homes helps to reduce the chances of bias in the results. In other words, we've found that a telephone survey is the most efficient, representative and thorough method to gather information to help guide health department and tobacco control program efforts.

01 CONTINUE

/IF SP_MENU=14/

HELP14 I don't know anything about that.

This isn't a test—we're interested in your opinions and experiences, and will ask about your health and health practices that affect your health. Many people find the survey to be interesting. If there's any question you don't feel comfortable answering or don't know the answer to, you can tell me and we'll just move on to the next question.

01 CONTINUE

/IF SP_MENU=15/

HELP15 Why should I participate?

This data will be used to improve health programs and prevent diseases. Participating is one way for you to be represented at the state and federal level. The information is used for planning purposes at all levels of government to develop more effective health programs. For example, the VT Department of health uses survey data in budget planning-- to help them prioritize areas to focus on and those that maybe don't need as much focus at the moment. They also share ATS data (aggregate form only) with local coalitions who use the information to help shape the local activities they implement re: education, cessation, etc.

For one thing, this has to do with how lawmakers spend taxpayer dollars, and putting resources into programs that benefit the most people and do the most good.

The more people who participate (the higher the response rate), the more accurate and reliable the results. Your participations will help our data be reliable.

01 CONTINUE

/IF SP_MENU=16/

HELP16 Why do you need to know how many adults live in my house?

We don't mean to intrude—asking the number of adults (and the genders) in a household allows us to randomly select an individual for participation. Random selection makes our study data more reliable, because it ensures the study represents all adults in Vermont: men, women, different age groups, etc. If we didn't randomly select someone, then we would always just speak to the person who is most likely to pick up the phone or be at home, which wouldn't necessarily be representative of everyone in the state.

01 CONTINUE

/IF SP_MENU=17/

HELP17 I don't have anything to do with public programs. I get my health care from my private doctor/ HMO/ military.

All health care providers, public or private, can use the information to improve services, give better advice, and plan better programs.

01 CONTINUE

/IF SP_MENU=18/

HELP18 I just moved to this state; I don't qualify as a resident yet.

If you are now living in this state and you plan to live here, the VDH considers you a resident.

01 CONTINUE

/IF SP_MENU=19/

HELP19 I don't smoke/use tobacco—you don't need to talk to me.

The health department wants to talk to as many people as possible to get a good representation of the opinions and health of the whole state's population—*this includes people who don't use tobacco, people who do, and people who used to use tobacco.*

01 CONTINUE

Introduction – land line and cell phones

Answering machine message:

*/ //ANSWERING MACHINE MESSAGE TEXT AND PROTOCOL
/ [TO BE LEFT ON 1ST, 4TH, AND 9TH ATTEMPT RESULTING IN AN ANSWERING MACHINE.
PLEASE HAVE CATI PROMPT THE SCRIPT TO LEAVE MESSAGES ON THE 1ST
ANSWERING MACHINE, AND ALSO THE 4TH AND 9TH ATTEMPTS RESULTING IN
ANSWERING MACHINES.]:*

[Interviewer: Leave the following message on the answer machine:]

"Hi, my name is _____. I am calling on behalf of the Vermont Department of Health to conduct an important study on the health of Vermont residents.

Please call us at 866-784-7216 at your convenience. Thanks."

Privacy Manager:

*/ //PRIVACY MANAGER TEXT AND PROTOCOL
/ PROMPT INTERVIEWERS TO GO THROUGH PRIVACY MANAGERS ON THE 1ST, 4TH,
AND 9TH ATTEMPT RESULTING IN A PRIVACY MANAGER. PLEASE HAVE CATI
PROMPT THE SCRIPT TO WITH THE FOLLOWING TEXT TO NAVIGATE PRIVACY
MANAGERS ON THE 1ST, AND ALSO THE 4TH AND 9TH ATTEMPTS RESULTING IN
PRIVACY MANAGERS]:*

IF THE MESSAGE ASKS TO IDENTIFY WHO OR WHAT COMPANY IS CALLING:

"We are calling on behalf of the Vermont Department of Health."

IF MESSAGE ASKS TO ENTER A PHONE NUMBER:

Enter: 866-784-7216

//ASK ALL//

INTRO1: 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 2 PERSON HOUSEHOLD RESUME/

HELLO, I'm calling for the Vermont Department of Health. My name is _____. We recently started an interview with an adult in your household about the health of Vermont residents. We are calling to complete the interview. Would that person be you?

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

Is this /insert telephone number/?

01 CORRECT NUMBER (PROCEED TO NEXT QUESTION)
 05 (SELECTED PERSON) ON THE PHONE (PROCEED TO NEXT QUESTION THIS IS FOR
 SUSPENDED RECORDS—BRINGS TO LAST QUESTION ASKED IN SUSPENDED
 INTERVIEW)
 06 NUMBER IS NOT THE SAME (TERM WITH DISPOSITION 21)
 07 TERMINATION SCREEN

/ *IF INTRO1 IN (06)*

X1: 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.

01 CONTINUE /TERMINATE- DISPO 21 or 132/

[USED LAND LINE ONLY]

/ *IF INTRO1 IN (01 [OR IF RECORD SUSPENDED, INTRO1 WILL=05 (BE FILLED IN FROM
 PVIOUS CALL)])*

HS1: Is this a private residence?

01 {GO TO NOTE BEFORE PRES1_1} YES
 02 NO (TERM WITH DISPOSITION 26)

/ *IF HS1 IN (02)*

X2: Thank you very much, but we are only interviewing private residences. Thank you for your time.

01 CONTINUE /TERMINATE DISPO 026/

/ *SCREENER SELECTION LOGIC:*
 / *SCREEN1 GETTING SCREEN2 HOLD THE PROBABILITY OF THE RESPONDENT*
 / *SCREENER 1 AND 2. THE FORMAT IS (X.XXX) AND THE RANGE IS 0 TO 1.000*
 /
 / *RNDS HOLDS THE RANDOM NUMBER SELECTED TO CHOOSE THE SCREENER (X.XXX)*
 /
 / *SCRTYPE HOLDS THE SELECTED SCREENER:*
 / *01 SCREENER 01*
 / *02 SCREENER 02*
 / *03 SCREENER 03*
 /
 / *IF RNDS < SCREEN1 THEN SCRTYPE = 1 ELSE,*
 / *IF RNDS < SCREEN1 + SCREEN2 THEN SCRTYPE = 2 ELSE,*
 / *SCRTYPE = 3*

Screeners 1 – Land line

//ASK IF HS1=01 and SCRTYPE=1//PRES1: Our study requires that we randomly select one adult who lives in your household to be interviewed.

01 CONTINUE

//ASK IF HS1=01 AND SCRTYPE=1//

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 [RANGE=0-18]

/ IF S1_1=0 /

ADULT0 You are saying there are NO adults 18 or over in your household. Is that correct?

1 YES, CORRECT: NO ADULTS 18 OR OVER IN HOUSEHOLD (TERM WITH DISPOSITION 27)

2 NO, INCORRECT (GOES BACK TO S1_1)

/ //IF ADULT0 =1 /

X3 Thanks very much, but we are only interviewing adults 18 or over. Thank you for your time.

01 CONTINUE (ASSIGN DISPO 027)

/ IF S1_1 > 5

NOTE2 I am sorry. I just want to make sure I recorded this correctly. You said that there are (s1_1) adults living in your household. Is that correct?

1 YES, CORRECT AS IS

2 NO, RE-ASK QUESTION (GOES BACK TO S1_1)

/ //IF S1_1 (IN 1, 2), ASK S1_2,

S1_2. **[IF S1_1=1 "Are you the adult?]**

[IF S1_1=2 "Are you one of the adults?"]

21 YES, MALE

22 YES, FEMALE

03 {GO TO S1_2b} NO

/ IF S1_1=2 AND S1_2 IN (03)

S1_2ZT. May I speak with one of the adults?

01 Yes

02 No /Terminate 105/

//IF S1_1 =2//

S1_2Z. IF 2 ADULTS IN HOUSEHOLD, THEN WE RANDOMLY SELECT "1" OR "2" (BEFORE WE ASK ABOUT WOMEN AND MEN). IF "1", THEN THE PERSON ON THE PHONE IS SELECTED. IF "2", THEN THE OTHER ADULT IS SELECTED, AND WE ASK FOR THE TRANSFER.

/ IF S1_2 IN (21,22) AND (S1_1=1 OR S1_2Z=1)/

S1_2a. Then you are the person I need to speak with.
01 CONTINUE

/ //IF S1_2 = 03 AND S1_2Z IS BLANK, ASK S1_2B,
S1_2b. Is the adult a man or a woman?

21 {AUTOCODE S1_3} MAN (MALE)
22 (AUTOCODE S1_3) WOMAN (FEMALE)

/ IF S1_2B IN (21,22)
S1_2c. May I speak with /fill in (him/her) from previous question/?
01 {GO TO "CORRECT RESPONDENT"} YES
02 {TERMINATE} NO
77 {DISPO 109} DON'T KNOW
99 {TERMINATE} REFUSED

/ //IF S1_1>2
S1_3A. How many of these adults are men?
-- NUMBER OF ADULTS [RANGE=0-18]

00 NONE
01 ONE
02 TWO
03 THREE
04 FOUR
05 FIVE
06 SIX
07 SEVEN
08 EIGHT
09 NINE

/ IF S1_3A > 5
NOTE3 I am sorry. I just want to make sure I recorded this correctly. You said that there are
(s1_3A) adult men living in your household. Is that correct?
1 YES, CORRECT AS IS
2 NO, RE-ASK QUESTION (GOES BACK TO S1_3A)

/ //IF S1_1>2/
S1_3B. How many of these adults are women?
-- NUMBER OF ADULTS [RANGE=0-18]

00 NONE
01 ONE
02 TWO
03 THREE
04 FOUR
05 FIVE
06 SIX
07 SEVEN
08 EIGHT
09 NINE

/ ***IF S1_3B > 5***

NOTE4 I am sorry. I just want to make sure I recorded this correctly. You said that there are (s1_3B) adult women living in your household. Is that correct?

1 YES, CORRECT AS IS

2 NO, RE-ASK QUESTION (GOES BACK TO S1_3B)

/ ***SEL***

/ ***RANDOMLY SELECT ADULT; ASSIGN SELECTED VALUE:***

/ ***01 OLDEST FEMALE***

/ ***02 2ND OLDEST FEMALE***

/ ***03 3RD OLDEST FEMALE***

/ ***04 4TH OLDEST FEMALE***

/ ***05 5TH OLDEST FEMALE***

/ ***06 6TH OLDEST FEMALE***

/ ***07 7TH OLDEST FEMALE***

/ ***08 8TH OLDEST FEMALE***

/ ***09 9TH OLDEST FEMALE***

/ ***11 OLDEST MALE***

/ ***12 2ND OLDEST MALE***

/ ***13 3RD OLDEST MALE***

/ ***14 4TH OLDEST MALE***

/ ***15 5TH OLDEST MALE***

/ ***16 6TH OLDEST MALE***

/ ***17 7TH OLDEST MALE***

/ ***18 8TH OLDEST MALE***

/ ***19 9TH OLDEST MALE***

/ ***20 NO RESPONDENT SELECTED***

/ ***21 ONE PERSON - MALE***

/ ***22 ONE PERSON - FEMALE***

/ ***24 PERSON (SINGLE ADULT HH)***

/ ***25 2 ADULTS--PERSON ON THE PHONE***

/ ***26 2 ADULTS—OTHER ADULT (NOT PERSON ON THE PHONE) SELECTED***

/ /ASK IF TOTAL NUMBER OF MEN PLUS WOMEN IS LESS THAN NUMBER RECORDED IN ADULTS/

/

SHOWTOT

I'm sorry, something is not right.

Number of Men - [INSERT NUMBER MEN]

Number of Women - [INSERT NUMBER WOMEN]

Number of Adults - [INSERT NUMBER OF ADULTS]

1 Correct the number of men

2 Correct the number of women

3 Correct the number of adults

/ IF S1_1 = 2-18 AND S1_2Z IS BLANK/

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	{DISPO 109}	DON'T KNOW
99	{TERMINATE}	REFUSED

/ IF S1_4 IN (02) OR IF S1_2Z=02//

S1_4a. May I speak with /*[IF S1_4 IN 02 insert "selected respondent". IF S1_2Z=02 "THE OTHER ADULT IN THE HOUSEHOLD"]*/?

01	{GO TO "CORRECT RESPONDENT"}	YES
02	{	NO
77	{DISPO 109}	DON'T KNOW
99	{TERMINATE IF TWOADLT=1}	REFUSED

/ /ASK IF ((S1_2Z=02) AND (S1_4A= 2,77,99))/

TWOADLT So I can make sure to ask for the correct person when I call back, can you tell me how to identify them...for example you can give me /their initials, or tell me to ask for the "oldest male" in the household....

01 GAVE Response

77 DON'T KNOW {GO TO TERMINATE SET AS DISPO 109/

99 REFUSE{TERMINATE}

//IF TWOADLT= 01/
TWOADLTO
ENTER RESPONSE _____

/
ASK IF (S1_4A, , S1_2C, S2_5B, S2_7A, S3_5A, S3_7A) IN (01) OR (S1_2Z=1 AND S1_2ZT=1)

CORRESP 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.

01 CONTINUE

/
/
/
ASK IF (S1_2C, S1_4, S1_4A, S1_2Z, S2_2B S2_7, S2_7A, S3_5A, S3_7A IN (01), OR S1_2, S2_3, S2_5, S3_5, S3_7 IN (1,2) OR

YOURTHE1:

[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 18 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 or recorded for quality assurance purposes.

General verification: 1-888-316-8056

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

001 Person interested, continue

002 Go back to Adults question. Warning: A new respondent may be selected. (You need Supervisor's permission to use this option.)"

Screener 2 – Land line

/
////ASK IF HS1=01 and SCRTYPE=2//

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

01 CONTINUE

//ASK IF HS1=01 and SCRTYPE=2//

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=0/

ADULT0 You are saying there are NO adults 18 or over in your household. Is that correct?

- 1 YES, CORRECT: NO ADULTS 18 OR OVER IN HOUSEHOLD (TERM WITH DISPOSITION 13)
2 NO, INCORRECT (GOES BACK TO S2_1)

/ //IF S2_1 > 5/

NOTE2 I am sorry. I just want to make sure I recorded this correctly.

You said that there are (s2_1) adults living in your household.
Is that correct?

- 1 Yes, correct as is
2 No, re-ask question

/ //IF S2_1=1/

S2_2. Are you the adult?

- 01 {GO TO S2_3} YES
02 NO

/ //IF S2_2 = 02/

S2_2N Is the adult a man or a woman?

- 21 Male
22 Female

/ *IF S2_2 IN (02)*
S2_2a. May I speak with (him/her)?

01		YES
02	{TERMINATE}	NO
77	{DISPO 109}	DON'T KNOW
99	{TERMINATE}	REFUSED

/ *IF S2_2A IN (01)*
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.

01 CONTINUE

/ *IF S2_2=1 OR S2_2B IN (01)*

S2_3. Do you smoke cigarettes every day, some days, or not at all?

21	{GO TO YOU'RE THE ONE}	EVERY DAY OR SOME DAYS, MALE
22	{GO TO YOU'RE THE ONE}	EVERY DAY OR SOME DAYS, FEMALE
03	NOT AT ALL, MALE	GO TO TERM3 /TERM ASSIGN
DISP 043/		
04	NOT AT ALL, FEMALE	GO TO TERM3 /TERM ASSIGN DISP
043/		

//IF S2_3 IN (3,4) OR S2_4A = 0//

**TERM3. Thank you very much, those are all the questions I have for you. Thank you for your time.
STOP
01 Continue**

/ *IF S2_1>1*
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?

S2_4A	__	NUMBER OF ADULTS WHO SMOKE EVERY DAY OR SOME DAYS [RANGE=0-18]
S2_4B	__	NUMBER OF ADULTS WHO DO NOT SMOKE AT ALL [RANGE=0-18]

/ *IF SUM OF S2_4A AND S2_4B IS NOT EQUAL TO S2_1, ASK S2_4CHK, OTHERWISE GO TO INSTRUCTIONS BEFORE S2_5/*

S2_4CHK. 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, TERM/

/IF S2_3 = 03 or 04, TERM/

If (S2_4a) Number of adults who smoke every day or some days = 1

S2_5. The person I need to speak with is the adult who smokes every day or some days. Are you the adult?

21	{GO TO YOU'RE THE ONE}	YES, MALE
22	{GO TO YOU'RE THE ONE}	YES, FEMALE
03		NO

/ **IF S2_5 = 03/**

S2_5a. Is the adult a man or a woman?

21	MAN
22	WOMAN
77	DON'T KNOW
99	REFUSED

/ **IF S2_5 IN (03)**

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

/ **IF S2_4A >1**

S2_6. How many of the adults in your household who smoke every day or some days are men, and how many are women?

S2_6A __ NUMBER OF MEN SMOKERS [RANGE=0 to S2_4A]

S2_6B __ NUMBER OF WOMEN SMOKERS [RANGE=0 to (S2_4A-S2_6A)]

/ //IF S2_6A > 5/

NOTE3 I am sorry. I just want to make sure I recorded this correctly.

You said that there are (s2_6a) men in your household who smoke every day.
Is that correct?

- 1 Yes, correct as is
- 2 No, re-ask question

/ //IF S2_6B > 5/

NOTE4 I am sorry. I just want to make sure I recorded this correctly.

You said that there are (s2_6b) women in your household who smoke every day.
Is that correct?

- 1 Yes, correct as is
- 2 No, re-ask question

/ //IF S2_4A <> S2_6A + Q2_6B AND S2_4A > 1/

S2_6CHK I'm sorry, I seem to have made a mistake. Earlier you said there were (S2_4a) adults who smoke cigarettes every day or some days.
Now I have that there are (S2_6a + Q2_6b) adults. Is this correct?

- 01 NO, NUMBER OF ADULTS IN PREVIOUS QUESTION IS WRONG
- 02 NO, NUMBER OF ADULTS WHO SMOKE EVERY DAY/SOME DAYS IS WRONG
- 03 CORRECT, NO CHANGE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

/ LIST1
 / RANDOMLY SELECT ADULT; ASSIGN SELECTED VALUE:
 / 01 OLDEST FEMALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 02 2ND OLDEST FEMALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 03 3RD OLDEST FEMALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 04 4TH OLDEST FEMALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 05 5TH OLDEST FEMALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 06 6TH OLDEST FEMALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 07 7TH OLDEST FEMALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 08 8TH OLDEST FEMALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 09 9TH OLDEST FEMALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 11 OLDEST MALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 12 2ND OLDEST MALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 13 3RD OLDEST MALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 14 4TH OLDEST MALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 15 5TH OLDEST MALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 16 6TH OLDEST MALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 17 7TH OLDEST MALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 18 8TH OLDEST MALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 19 9TH OLDEST MALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 20 NO RESPONDENT SELECTED WHO SMOKES EVERY DAY OR SOME DAYS.
 / 21 ONE PERSON - MALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 22 ONE PERSON - FEMALE WHO SMOKES EVERY DAY OR SOME DAYS.
 / 24 PERSON WHO SMOKES EVERY DAY OR SOME DAYS.

//IF (S2_4A) >1

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	{DISPO 109}	DON'T KNOW
99	{TERMINATE}	REFUSED

/ IF S2_7 IN (02)

S2_7a. May I speak with the /INSERT SELECTED RESPONDENT/?

01	{GO TO "CORRECT RESPONDENT"}	YES
02	{TERMINATE}	NO
77	{DISPO 109}	DON'T KNOW
99	{GO TO TERMINATE}	REFUSED

/

/ *ASK IF (S1_4A, , S1_2C, S2_5B, S2_7A, S3_5A, S3_7A) IN (01) OR (S1_2Z=1 AND S1_2ZT=1)*

/ *CORRESP 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.*

01 CONTINUE

/

/ *ASK IF (S1_2C, S1_4, S1_4A, S1_2Z, S2_2B S2_7, S2_7A, S3_5A, S3_7A IN (01), OR S1_2, S2_3, S2_5, S3_5, S3_7 IN (1,2) OR S2_5B (01) /*

YOURTHE1:

[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 18 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 or recorded for quality assurance purposes.

General verification: 1-888-316-8056

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

001 Person interested, continue

002 Go back to Adults question. Warning: A new respondent may be selected. (You need Supervisor's permission to use this option.)”

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.”]

/ ASK ALL IF SAMPLE=LANDLINE/

CINTRO 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.

1 Continue

4 DOES NOT LIVE IN VT (TERM WITH DISPOSITION 040)

9 Terminate

/ ASK IF CINTRO IN (01)/

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

1 Yes

Thank you very much. We will contact you at a later time. (TERM WITH DISPOSITION 104 IF CTERM_0 AND CTERM_B ARE BLANK)

2 No

Continue

//ASK IF Sc3c=1//

SC3C_CB

SET CALLBACK

01 CONTINUE

/ ASK IF SC3C=02/

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

1 Yes

Thank you very much. We will contact you at a later time. (TERM WITH DISPOSITION 104 IF CTERM_0 AND CTERM_B ARE BLANK)

2 No

Continue

//ASK IF Sc3ac=01//

Sc3AC_CB

SET CALLBACK

01 CONTINUE

/ */ASK IF SC3AC=02/*

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.

01 Yes

02 No

88 DON'T HAVE A CELL PHONE/THIS ISN'T A CELL PHONE

95 DOES NOT LIVE IN VT [TERM INEL.GEOGRAPHY DISPO 040]

/ *ASK IF SC4C=1*

PCTCELL

Thinking about all the phone calls that you receive on your landline or cell phone, what percent, between 0 and 100, are received on your cell phone?

(221-223)

--- Enter Percent (1 to 100)

8 8 8 Zero

7 7 7 Don't know/Not sure

9 9 9 Refused

/ *//IF SC4C=88 OR PCTCELL=1-89,888,777,999/*

NOCELL: Thank you very much for your time. Those are all the questions I have."

01 CONTINUE (DISPO 042)

/ *//IF ANY OF CINTRO=4 OR SC4C=95 OR SC6C=2//*

EX7:

"I'm sorry, we're only interviewing residents of Vermont at this time. Thank you."

01 CONTINUE

/ */ASK IF SC4C=02 OR PCTCELL=90-100/*

Sc5c. Are you 18 years of age or older?

01 YES

02 NO /TERM ASSIGN DISPO 45/

77 DON'T KNOW /TERM ASSIGN DISPO 46/

99 REFUSED /TERM ASSIGN DISPO 46/

/ */ASK IF SC5C=02,77,99*

Ex5 IF UNDER 18 YRS

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

01 CONTINUE

/ /ASK IF SC5C=01

NQ12SC6 Can you please tell me how many members of your household, including yourself, are 18 years of age or older?

__ Number of adults /RANGE=0-18/

77 DON'T KNOW/NOT SURE

99 REFUSED

/ /ASK IF SC5C=01

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//

/ /ASK IF SC5D=01/

/ NAME

//ENTER NAME//

_____ [INTERVIEWER VERIFY NAME]

//GO TO Sc6c//

/ /ASK IF SC5D=02/

INITIALS

//ENTER INITIALS

_____ [INTERVIEWER VERIFY INITIALS]

//GO TO Sc6c//

/ /ASK IF SC5D IN (01,02, 99)/

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 18 minutes to complete. The call may be monitored or recorded 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.

General verification: 1-888-316-8056

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

1 CONTINUE

2 DOES NOT LIVE IN VERMONT /TERM WITH DISPOSITION 040; GO TO EX7/

T TERMINATE

Introductory Section

/ **//ASK ALL//**

NQ20071. In general, would you say your health is:

[READ LIST]

- 01 Excellent
- 02 Very good
- 03 Good
- 04 Fair
- 05 Poor
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

/ **//ASK ALL//**

NQ20072. Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

____ Number of Days [Range: 0 – 30]

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

/ **//ASK ALL//**

NQ20073. Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

____ Number of Days [Range: 0 – 30]

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

Section 1: SMOKING STATUS

/ **//ASK ALL//**

Q1_1. Have you smoked at least 100 cigarettes in your entire life?

- 01 YES
- 02 {GO TO NQ20082} {SET XSMOKER=NO (22)} NO
- 77 {GO TO NQ20082} {SET XSMOKER= NO (22)} DON'T KNOW/NOT SURE
- 99 {GO TO NQ20082} {SET XSMOKER= NO (22)} REFUSED

/ **//ASK IF Q1_1 = 1//**

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

/ **//ASK IF Q1_1 = 1//**
 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 NQ20082} {SET XSMOKER=EX (33)} NOT AT ALL
 77 {GO TO NQ20082} {SET XSMOKER=EX (33)} DON'T KNOW
 99 {GO TO NQ20082} {SET XSMOKER=EX (33)} REFUSED

/ **//ASK IF Q1_3 IN (01,02)//**
 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 NQ20082} NONE
 77 {GO TO NQ20082} DON'T KNOW/NOT SURE
 99 {GO TO NQ20082} REFUSED

/ **//ASK IF Q1_4 (1-30) //**
 We are interested in the actual number of cigarettes that people smoke in a day.
 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

/ **ASK ALL**
 NQ201216 I'd like to ask you about your use of tobacco products other than cigarettes. Do you use any of the following products every day, some days, or not at all?

01 CONTINUE

[READ IF NECESSARY: I'd like to ask you about your use of tobacco products other than cigarettes. Do you use any of the following products every day, some days, or not at all?]

NQ1216A Chewing tobacco, snuff or snus? [IF NECESSARY: Snus is a moist, smokeless tobacco, usually sold in small pouches that are placed under the lip against the gum.]

NQ1216B Cigars, pipes, or pipe tobacco?

NQ1216C E-cigarettes or electronic cigarettes? [IF NECESSARY: Electronic cigarettes or e-cigarettes are battery-operated devices designed to look like and be used like conventional cigarettes. They typically contain a cartridge filled with nicotine, flavoring and other chemicals in a liquid or gel form.]

NQ1216D Any other type of tobacco products (i.e. hookah, bidi, etc.)?

01 EVERY DAY

02 SOME DAYS
03 NOT AT ALL
77 DON'T KNOW/NOT SURE
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

/

/ //ASK Q1_3 IN (01,02)//

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
99 REFUSED

/ //ASK IF Q1_3 IN (01,02) AND (Q2_8 >= 1 OR Q2_8 = 97 OR 99)//

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

NQ20063A. Quit on your own with no help.

NQ20063C. Read books, brochures, or pamphlets to prepare for quitting

NQ20063D. Call a smokers' quit line for help

NQ20063E. Talk with a doctor or other health professional

NQ20063F. Attend group sessions or classes

NQ20063G. Receive individual counseling

NQ20123H. Use nicotine replacement (IF NECESSARY: A patch, gum, lozenge, spray, etc.)

NQ20063M. Use zyban or wellbutrin

NQ20063N. Use Chantix or Varenicline

[PRONOUNCED: SHAN tix and ver EN e kleen]?

NQ20063O. Use the internet

NQ20123X. Use an "e-cigarette"

NQ20123Y. Use a cessation texting program

NQ20123Z. Use a cessation application or 'app'

NQ20063P. Did you use any methods in your most recent quit attempt that I didn't mention?

01 YES
02 NO
77 DON'T KNOW
99 REFUSED

/ IF NQ20063P IN (01)

NQ20063X. What other method did you use in your most recent quit attempt
SPECIFY:

/ //ASK Q1_3 IN (01,02)//

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

/ DP: IF NQ20123H=01 OR NQ20063M=01 OR NQ20063N=01 AUTOPOPULATE Q2_19=01

*/ //ASK Q1_3 IN (01,02) AND NQ20123H=02,77,99 AND NQ20063M=02,77,99 AND
NQ20063N=02,77,99//*

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

/ //ASK Q1_3 IN (01,02)//

NQ20103. Have you heard of the Vermont Quit Network?

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

/ //ASK Q1_3 IN (01,02), MULTIPUNCH {MUL=6}//

NQ20104. Have you heard of the following Vermont Quit Network services...

[READ LIST]

[Check all that apply]

[INTERVIEWER, OPTIONS 01 THROUGH 03 SHOULD BE READ TO THE RESPONDENT. DO NOT
READ OTHER RESPONSES, BUT OK TO CHOOSE MULTIPLE RESPONSES ACROSS 01-06]

- 01 Quit by Phone
- 02 Quit in Person
- 03 Quit Online
- [DO NOT READ]
- 04 QUIT LINE
- 05 QUIT NET
- 06 HOSPITAL GROUP/HOSPITAL QUIT PROGRAM
- 77 DON'T KNOW

99 REFUSED

/ //ASK Q1_3 IN (01,02)//

NQ201014. Have you ever gone to the website VTQUITNETWORK.ORG?

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

/ //ASK Q1_3 IN (01,02) AND (NQ20104 = 1 OR NQ20104 = 4) AND (Q2_8 ≥ 1)//

NQ20105. In your most recent quit attempt, did you call the Vermont Quit Network's Quit by Phone service?

[Note to interviewer: If respondent says they called the Quit Line, code this question as yes]

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

/ //ASK NQ20105 = 2//

NQ20106. I'm going to read you a list of reasons why some people don't call the Vermont Quit Network's Quit by Phone service. Please answer yes or no to each of the statements.

01 CONTINUE

/ //ASK NQ20105 = 2//

//ROTATE NQ20106A THROUGH NQ20106I//

/ //DP AND PROGRAMMING USE RQ20106A THROUGH RQ20106I WHICH WILL HOLD THE POSITION (1-9) IN THE ROTATION OF THE CORRESPONDING QUESTION/

NQ20106A. You wanted to quit on your own, without help

NQ20106B. You didn't think telephone counseling would help

NQ20106F. You had used a quit line before and didn't want to do it again

NQ20106G. You thought it cost too much

NQ20106H. You didn't like to or couldn't talk on the telephone for long amounts of time

NQ20106I. You thought you could quit without telephone counseling

NQ20126K. You are not sure what "Quit by Phone" is or what it has to offer

NQ20106J. Was there any other reason I didn't read?

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

/ IF NQ20106J IN (01)

NQ20106X. What was the other reason?

SPECIFY:

/ //ASK Q1_3 IN (01,02) AND (NQ20104 IN (02,06)) AND (Q2_8 ≥1)//

NQ20107. In your most recent quit attempt, did you use the Vermont Quit Network's Quit in Person service?

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

/ //ASK NQ20107 = 2//

NQ20108. I'm going to read you a list of reasons why some people don't use the Vermont Quit Network's Quit in Person service. Please answer yes or no to each of the statements.

01 CONTINUE

/ //ASK NQ20107 = 2//

/ //ROTATE NQ20108A THROUGH NQ2010M//

/ //DP AND PROGRAMMING USE RQ20108A THROUGH RQ20108M WHICH WILL HOLD THE POSITION (1-13) IN THE ROTATION OF THE CORRESPONDING QUESTION//

/

- NQ20108A. You wanted to quit on your own, without help
- NQ20108B. You didn't think this kind of program is what you needed to quit
- NQ20108C. You didn't think a counselor could understand your problems with quitting
- NQ20108D. You didn't think group or individual counseling would help
- NQ20108E. You didn't want to give personal information to a group or counselor
- NQ20108F. You didn't think the amount of counseling would be enough to help
- NQ20108G. You only wanted to talk to someone once or only wanted one session
- NQ20108H. You had used groups or counseling before and didn't want to do it again
- NQ20108I. You thought it cost too much
- NQ20108L. You couldn't go during the time of day the program was offered
- NQ20128O. You are not sure what "Quit in Person" is or what it has to offer
- NQ20108N. Was there any other reason I didn't read?

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

/ IF NQ20108N IN (01)

NQ20108X What was the other reason?

SPECIFY:

/ //ASK Q1_3 IN (01,02) AND (NQ20104 IN (03,05)) AND (Q2_8 ≥ 1)//

NQ20109. In your most recent quit attempt, did you use the Vermont Quit Network's Quit Online service?

- 01 YES
- 02 NO
- 77. DON'T KNOW

99. REFUSED

/ *//ASK NQ20109 = 2//*

NQ201010. I'm going to read you a list of reasons why some people don't use the Vermont Quit Network's Quit Online service. Please answer yes or no to each of the statements.

01 CONTINUE

/ *//ASK NQ20109 = 2//*

/ *//ROTATE NQ1010A THROUGH NQ1010I//*

/ *//DP AND PROGRAMMING USE RQ1010A THROUGH RQ1010I WHICH WILL HOLD THE POSITION (1-9) IN THE ROTATION OF THE CORRESPONDING QUESTION//*

- NQ1010A. You wanted to quit on your own, without help
- NQ1010B. You didn't think this kind of program is what you needed to quit
- NQ1010E. You didn't understand how the online program works.
- NQ1010F. You didn't think the amount of counseling would be enough to help
- NQ1010I. You thought it cost too much
- NQ1210K You are not sure what "Quit Online" is or what it has to offer
- NQ1010J. Was there any other reason I didn't read? [Specify: _____]

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

/ *IF NQ20100J IN (01)*

NQ1010X What was the other reason?
SPECIFY:

/ *//ASK Q1_3 IN (01,02)//*

NQ20102. Are you eligible to get free or reduced cost nicotine patches, gum or lozenges from the Vermont Quit Network, through your health insurance provider, through both **organizations**, or are you NOT eligible?

- 01. Vermont Quit Network
- 02. Health Insurance Provider
- 03. Both
- 04. Neither/Not eligible
- 77. DON'T KNOW
- 99. REFUSED

/ *//ASK Q1_3 IN (01,02)//*

The next question asks about the cost of buying cigarettes.

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

/

/ *//ASK Q1_3 IN (03,77,99)*

Q3_30B. About how long has it been since you last smoked cigarettes regularly?

1__ HOURS /RANGE=101-123/
2__ DAYS /RANGE=201-207/
3__ WEEKS /RANGE=301-304/
4__ MONTHS /RANGE=401-412/
5__ YEARS /RANGE=501-599/
777 DON'T KNOW/NOT SURE [skip to section 4]
999 REFUSED [skip to section 4]

/ *//ASK IF Q3_30B >= 1 HOUR AND <= 1 YEAR//*

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?

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.]

/ *//ASK Q3_30B ≤ 505*

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.

01 CONTINUE

/ *//ASK Q3_30B ≤ 505*

Q3_32A. Concern about health effects of smoking
Q3_32B. Concern about the cost of smoking
Q3_32D. Restriction on smoking at home or at work or other public places
Q3_32E. Advice from doctor or other health professional
Q3_32F. Pregnancy or partner is pregnant
Q3_32H. Because of smoke effects on my child/children
Q3_32I. Concern that my child will become a smoker
Q3_32J. Availability of free or reduced cost nicotine patches, gum or lozenges?
Q3_32K. Is there another reason I didn't read?

01 YES, SPECIFY _____
02 NO
77 DON'T KNOW

/ *IF Q_32K IN (01)*

Q3_32KX What was the other reason?
SPECIFY:

/ *//ASK Q3_30B ≤ 505 //*

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

/ *//ASK Q3_30B ≤ 505//*

- NQ20065A. Quit on your own with no help.
- NQ20065C. Read books, brochures, or pamphlets to prepare for quitting
- NQ20065D. Call a smokers' quit line for help
- NQ20065E. Talk with a doctor or other health professional
- NQ20065F. Attend group sessions or classes
- NQ20065G. Receive individual counseling
- NQ20125H. Use nicotine replacement [IF NECESSARY: a patch, gum, lozenge, sprays, etc.]
- NQ20065M. Use zyban or wellbutrin
- NQ20065N. Use Chantix or Varenicline
- NQ20065O. Use the internet
- NQ20125X. Use an "e-cigarette"
- NQ20125Y. Use a cessation texting program
- NQ20125Z. Use a cessation application or 'app'
- NQ20065P. Did you use any methods in your most recent quit attempt that I didn't mention?
 - 01 YES
 - 02 NO
 - 77 DON'T KNOW
 - 99 REFUSED

/ *IF NQ20065P IN (01)*

NQ20065X What other methods did you use in your most recent quit attempt?
SPECIFY:

/Go to Section 4/

Section 4: HEALTH CARE VISITS IN LAST 12 MONTHS

/ *//ASK ALL //*

Q6_97. INTERVIEWER: INDICATE SEX OF RESPONDENT. ASK ONLY IF NECESSARY.

- 11 MALE
- 22 FEMALE

/ *IF SELECTED = 21 AND Q6_97 IS FEMALE*

S13Q16A INTERVIEWER: Are you sure the respondent is FEMALE?
The respondent selected was the \:list: \:list1: \: \list3:
You need to go back and correct the mistake.
[PRESS ENTER TO CONTINUE ...]

/ *IF SELECTED = 22 AND Q6_97 IS MALE*

S13Q16B INTERVIEWER: Are you sure the respondent is MALE?
The respondent selected was the \:list: \:list1: \: \list3:
Is the previous answer correct?
You need to go back and correct the mistake.
[PRESS ENTER TO CONTINUE ...]

/ *IF SEL IS ONE PERSON - MALE AND Q6_97 IS FEMALE*

S13Q16C
INTERVIEWER: Are you sure the respondent is FEMALE?
This is a single adult household and it was
indicated earlier that the respondent was MALE.
1 Yes, respondent is a FEMALE (SKIPTO PRES4)
2 No, respondent is a MALE

/ *IF SEL IS ONE PERSON - FEMALE Q6_97 IS MALE*

S13Q16D
INTERVIEWER: Are you sure the respondent is MALE?
This is a single adult household and it was
indicated earlier that the respondent was FEMALE.
1 Yes, respondent is a MALE (SKIPTO PRES4)
2 No, respondent is a FEMALE

/ *//ASK ALL //*

PRES4 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.

01 CONTINUE

/ **//ASK ALL://**
 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 Q4_39A = 1//**
 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//

/ **//(ASK IF (Q1_3 IN (01,02) OR 101 ≤ Q3_30B ≤ 505) AND Q4_39A = 1//**
 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 Q1_3 IN (01,02) AND Q4_39A = 1//**
 Q4_39D. Did your health care professional advise you to stop smoking cigarettes?
 01 YES
 02 NO
 77 DON'T KNOW
 99 REFUSED

/ **//ASK Q1_3 IN (01,02) AND Q4_39A = 1//**
 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 Q1_3 IN (01,02) AND Q4_39A = 1 AND Q4_39E = 1//**
 / **MUL=12**
 Q4_39E1. What program did your health care professional recommend to help you quit cigarettes?
 [Note to interviewer: if respondent says they were referred to the Quit Line, code this as 09-Quit by Phone
 If respondent says they were referred to the hospital program, code this as 10-Quit in Person and if they say

they were referred to Quit Net, code this as 11-Quit in Person]

[PLEASE DO NOT READ]

[Check all that apply]

- 01 NICOTINE PATCH
- 02 NICOTINE GUM
- 03 NICOTINE INHALER
- 04 NICOTINE NASAL SPRAY
- 05 NICOTINE LOZENGES OR TABLETS
- 06 ZYBAN OR WELLBUTRIN
- 07 CHANTIX or VARENICLINE
- 08 VERMONT QUIT NETWORK
- 09 QUIT BY PHONE
- 10 QUIT IN PERSON
- 11 QUIT ONLINE
- 12 YOUR QUIT YOUR WAY
- 88 NONE OF THE ABOVE
- 77 DON'T KNOW
- 99 REFUSED

/ **//ASK ALL//**

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 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

/ **//ASK Q1_3 IN (01,02) AND Q4_40A = 1//**

Q4_40D. Thinking about your last visit, did your dentist or dental hygienist advise you to stop smoking cigarettes?

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

/ //ASK Q1_3 IN (01,02) AND Q4_40A = 1//

Q4_40E. Thinking about your last visit, did your dentist or dental hygienist recommend any specific program or medicine to help you quit cigarettes?

01 YES
02 NO
77 DON'T KNOW
99 REFUSED

/ //ASK ALL//

NQ6_1T 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.

01 CONTINUE

/ //ASK ALL//

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

/ //ASK IF NQ6_1 = 1 OR NQ6_1 = 77 OR NQ6_1 = 99//

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....

01 CONTINUE

/ //ASK IF NQ6_1 = 1 OR NQ6_1 = 77 OR NQ6_1 = 99//

NQ6_2A. Medicaid Or PC Plus Medicaid

NQ6_2B. Medicare

NQ6_2C. VHAP (Vermont Health Access Plan) Or PC Plus VHAP

NQ6_2D. Ladies First [CATI: Asked only of female respondents] *//ASK IF Q6_97=22 AND NQ6_2=01*

NQ6_2E. Veterans Administration

NQ6_2F. Blue Cross Blue Shield

NQ6_2G. MVP

NQ6_2H. Cigna

NQ6_2K. Catamount Blue

NQ6_2L. MVP Catamount Choice

NQ6_2I. Other Private Insurance

NQ6_2J. Are There Any Other Types Of Health Insurance I Didn't Mention?

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

/ ASK IF NQ6_2J IN (01)

NQ6_2X What other type of insurance?

SPECIFY:

Section 5: RISK PERCEPTION AND SOCIAL INFLUENCES_____

/ **//ASK ALL//**

Q5_41T Now I'm going to ask you some questions about people around you.
01 CONTINUE

/ **//ASK ALL//**

Q5_42B. In your opinion, how do most people in your community feel about adults smoking cigarettes?

[READ LIST]

- 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

/ **//ASK ALL//**

Q5_42C. How do you feel about adults smoking cigarettes?

[READ LIST]

- 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

/ **//ASK ALL//**

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

/ **//ASK ALL//**

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

/ **//ASK ALL//**

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

/ **//ASK ALL//**

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 ALL//**

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 Q1_3 IN (01,02) AND (Q5_49 >= 1 AND Q5_49 <=12)//**

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

/ //ASK ALL//

Q5_45T Now I am going to ask about the smoke from other people's cigarettes.
01 CONTINUE

/ //ASK ALL//

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 ALL//

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

/ //ASK ALL//

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

/ //ASK ALL//

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

/ **//ASK ALL//**

Q5_78T The following questions are about things you may have heard or seen about quitting or not smoking in the media.

01 CONTINUE

/ **//ASK ALL//**

Q5_78. In the past six months, that is since [today-6 months] have you seen anything on television about quitting cigarette smoking?

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

/ **//ASK 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 ALL//**

Q5_82. In the past six months, that is since [insert date] have you heard anything on the radio about quitting cigarette smoking?

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

/ **//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
- 99 REFUSED

/ **ASK ALL**

NQ20126 Next I would like to ask you about your support for tobacco policies. What is your opinion about policies that ban smoking in...

01 CONTINUE

[READ IF NECESSARY: What is your opinion about policies that ban smoking in...]

NQ20126A Outdoor public places such as benches or parks? Are you... [READ LIST]

NQ20126B Entrance ways of public buildings and workplaces? Are you... [READ

LIST]NQ20126C Apartment buildings, condominiums, and other multi-unit complexes, including indoor areas, private balconies, and patios? Are you... [READ LIST]

01 Strongly in favor

02 Somewhat in favor

03 Neither in favor nor against

04 Somewhat against

05 Strongly against

77 DON'T KNOW/NOT SURE

99 REFUSED

/ **ASK ALL**

NQ20127 What is your opinion about polices that...

01 CONTINUE

[READ IF NECESSARY: What is your opinion about polices that...]

NQ20127a Require warning labels on cigarette packs that show graphic images of damage caused by smoking, such as black lungs? Are you... [READ LIST]

NQ20127B Ban the sale of all tobacco products in pharmacies? Are you... [READ LIST]

NQ20127C Ban the display of tobacco products such as packs of cigarettes or cigars from stores? Are you... [READ LIST]

NQ20127D Limit the number of stores that sell tobacco in your community? Are you... [READ LIST]

NQ20127e Ban the sale of tobacco products that are located near schools? Are you... [READ LIST]

01 Strongly in favor

02 Somewhat in favor

- 03 Neither in favor nor against
- 04 Somewhat against
- 05 Strongly against
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

Section 6: DEMOGRAPHICS

/ **//ASK ALL//**

Q6_93T Finally, I'm going to ask you for some general information about yourself.
01 CONTINUE

/ **//ASK ALL//**

Q6_93. What is your age?
___ {RANGE 018-099}[ENTER RESPONSE] [099 = 99 AND OLDER]
777 DON'T KNOW
999 REFUSED

/ **//ASK ALL//**

Q6_94. Are you Hispanic or Latino?
01 YES
02 NO
77 DON'T KNOW
99 REFUSED

/ **//ASK ALL//**

/ **MUL=6**

Q6_95. Which one or more of the following would you say is your race?
{MUL=6}
[READ LIST]
[Check all that apply]

- 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 Q6_95 IN (66)**

Q6_95X [ENTER OTHER SPECIFY]

ENTER RESPONSE:

/ **//ASK IF MORE THAN ONE RESPONSE TO Q6_95//**

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 //insert text from Q6_95X//

[PLEASE DO NOT READ]

- 77 DON'T KNOW
- 99 REFUSED

/ **//ASK ALL//**

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

/ **ASK ALL**

NQ20128 Do you live in... [READ LIST]

- 01 Single-family home
- 02 Multifamily home (includes apartments, townhouses, condos)
- 03 Dormitory
- 04 Other residential living situation
- 05 I do not currently have a home
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

/ **//ASK ALL//**

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 ALL**

Q6_99T I have just a few, final questions left....
01 CONTINUE

/ **//LANDLINE ONLY ASK ALL//**

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 NO
77 DON'T KNOW/NOT SURE
99 REFUSED

/ **//IF Q6_99 IN (01)//**

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

//LANDLINE ONLY ASK IF Q6_100 >= 3 AND NOT 77 OR 99) OR (Q6_100 >= TOTL_HH)

Q6_100c -

I am sorry, just to double check, you indicated you have \:q6_100:
residential phones in your household.

IS THIS CORRECT?

1 Yes, correct as is\n /
2 No, re-ask question /REASK Q6_100/

/ **//ASK ALL//**

Q6_103. What town do you live in?

[PROGRAMMING SEE APPENDIX A AT END OF THIS DOCUMENT FOR FULL LIST OF TOWNS]

----- TOWN CODE

88888 OTHER _____ [SPECIFY, LENGTH = 70]

77777 DON'T KNOW

99999 REFUSED

/ASK IF Q6_103=88888/

Q6_103o ENTER OTHER SPECIFY [LENGTH=70]

/ASK IF Q6_103 NE 77777 OR 99999/

Q6_VER

I want to make sure that I got it right.

You said that you live in

/INSERT TOWN FROM q6_103 /

Is that correct?

11 Yes, correct as is...

22 No, re-ask question /GO BACK TO Q6_103/

/ **//ASK ALL//**

Q6_102 Is your annual household income from all sources—

(120-121)

/ **IF RESPONDENT REFUSES AT ANY INCOME LEVEL, CODE '99' (REFUSED)**

Q6_102A [04] Less than \$25,000 [If "no," ask 05; if "yes," ask 03]

(\$20,000 to less than \$25,000)

01 Yes

02 No

77 Don't Know

99 Refused

/ **//ASK IF Q6_102A = 1//**

Q6_102B [03] Less than \$20,000 [If "no," code 04; if "yes," ask 02]

(\$15,000 to less than \$20,000)

01 Yes

02 No

77 Don't Know

99 Refused

/ **//ASK IF Q6_102B = 1//**
Q6_102C [02] Less than \$15,000 [If "no," code 03; if "yes," ask 01]
(\$10,000 to less than \$15,000)
01 Yes
02 No
77 Don't Know
99 Refused

/ **//ASK IF Q6_102C=1//**
Q6_102D [01] Less than \$10,000 [If "no," code 02]
01 Yes
02 No
77 Don't Know
99 Refused

/ **//ASK IF Q6_102A = 2//**
Q6_102E [05] Less than \$35,000 [If "no," ask 06]
(\$25,000 to less than \$35,000)
01 Yes
02 No
77 Don't Know
99 Refused

/ **//ASK IF Q6_102E = 2//**
Q6_102F [06] Less than \$50,000 [If "no," ask 07]
(\$35,000 to less than \$50,000)
01 Yes
02 No
77 Don't Know
99 Refused

/ **//ASK IF Q6_102F = 2//**
Q6_102G [07] Less than \$75,000 [If "no," code 08]
(\$50,000 to less than \$75,000)
01 Yes
02 No
77 Don't Know
99 Refused

/ **//ASK IF Q6_102G=02//**
NQ12Q6_H less than \$100,000
(\$75,000 to less than \$100,000)
1 Yes
2 No
7 Don't Know
9 Refused

/ **//ASK IF NQ12Q6_H =2//**
NQ12Q6_I \$100,000 or more

- 1 Yes
- 2 No
- 7 Don't Know
- 9 Refused

/ *//ASK IF Q6_102A- Q6_102G NE 9//*

Q6_102AA Your Annual Household Income is [enter range from code in s12q10A-G /IF
NQ126_I=02 INSERT "\$75,000 TO LESS THAN \$100,000"]

Is This Correct?

- 1 No, re-ask question [GO TO Q6_102A]
- 2 Yes, correct as is. [CONTINUE]

CLOSING

/ ***ASK ALL***

CLOSE 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.

01 CONTINUE

[APPENDIX A: VERMONT TOWN LIST FOR Q6_103]

0101A	Addison	0415B	Brookside \n(near Westford)	0301B	East Barnet
1001A	Albany		Brookside \n(near	1201B	East Barre
0701A	Alburt	1312C	Williamsville)	0602B	East Berkshire
1401A	Andover	1003A	Brownington	1404B	East Bethel
0201A	Arlington	1422A	Brownsville	0902B	East Braintree
1420A	Ascutney	0503A	Brunswick	0502B	East Brighton
1301A	Athens	0604B	Buck Hollow	0302B	East Burke
0514A	Averill	0419A	Buel's Gore	1204B	East Cabot
0515A	Avery's Gore \n(Essex)	0302A	Burke	1205B	East Calais
0616A	Avery's Gore \n(Franklin)	0402A	Burlington	1004A	East Charleston
0601A	Bakersfield	1204A	Cabot	0505B	East Concord
1402A	Baltimore	1205A	Calais	0905B	East Corinth
1403A	Barnard	0802A	Cambridge	1105B	East Clarendon
0301A	Barnet	0504A	Canaan	1006B	East Craftsbury
1202A	Barre City	1103A	Castleton	0803A	Eden
1201A	Barre Town	1406A	Cavendish	0203B	East Dorset
1002B	Barton	1120B	Center Rutland	1304B	East Dover
1314A	Bellows Falls	0403A	Charlotte	1305B	East Dummerston
1007C	Beebe Plain	0904A	Chelsea	0603B	East Enosburg
1112A	Belmont	1407A	Chester	0605B	East Fairfield
0801A	Belvidere	1104A	Chittenden	0606B	East Fletcher
0202A	Bennington	1105A	Clarendon	0607B	East Franklin
1101A	Benson	0404A	Colchester	0608B	East Georgia
0602A	Berkshire	0505A	Concord	0107B	East Granville
1203A	Berlin	0905A	Corinth	0305B	East Hardwick
1404A	Bethel	0104A	Cornwall	0506A	East Haven
0501A	Bloomfield	1005A	Coventry	0609B	East Highgate
0401A	Bolton	1006A	Craftsbury	1108B	East Hubbardton
1103B	Bomoseen	0101B	Crown Point	1309B	East Jamaica
0215B	Bondville	1122B	Cuttingsville	0806B	East Johnson
0901A	Bradford	1106A	Danby	0804A	Elmore
0902A	Braintree	0303A	Danville	0307B	East Lyndon
0902C	Brookfield	1007A	Derby Line	0111B	East Middlebury
1102A	Brandon	1007B	Derby	0112B	East Monkton
1302A	Brattleboro	0203A	Dorset	1207A	East Montpelier
1405A	Bridgewater	1304A	Dover	0603A	Enosburg
0102A	Bridport	1305A	Dummerston	0908A	East Orange
0502A	Brighton	1206A	Duxbury	0309B	East Peacham
0103A	Bristol	1001B	East Albany	1116B	East Pittsford
0903A	Brookfield	0701B	East Alburg	1117B	East Poultney
1303A	Brookline	0201B	East Arlington	1313B	East Putney
		1403B	East Barnard		

0909B	East Randolph	1308A	Halifax	0511A	Maidstone
0611B	East Richford	0108A	Hancock	0404B	Mallets Bay
1215B	East Roxbury	0305A	Hardwick	0205A	Manchester
0209B	East Rupert	1408B	Hartford	1311A	Marlboro
0612B	East Sheldon	1409A	Hartland	1209A	Marshfield
0118B	East Shoreham	0609A	Highgate	0406B	Mechanicsville
0615B	East Swanton	0406A	Hinesburg	1110A	Mendon
0405A	Essex Jct.	1104B	Holden	0111A	Middlebury
0405B	Essex Center	1010A	Holland	1210A	Middlesex
0405C	Essex	1108C	Hortonia	1111A	Middletown Springs
0312B	East St. Johnsbury	1108A	Hubbardton	0914A	Mill Village
0911B	East Thetford	0407A	Huntington	0409A	Milton
0912B	East Topsham	0805A	Hyde Park	0611C	Missisquoi
1125B	East Wallingford	1103C	Hydeville	0112A	Monkton
1217B	East Warren	1109A	Ira	0610A	Montgomery
1321B	East Wilmington	1011A	Irasburg	1211A	Montpelier
1107A	Fair Haven	0502C	Island Pond	1212A	Moretown
0604A	Fairfax	0703A	Isle La Motte	1014A	Morgan
0605A	Fairfield	1309A	Jamaica	0807A	Morristown
0906A	Fairlee	1012A	Jay	0807B	Morrisville
1208A	Fayston	0802B	Jeffersonville	0808B	Moscow
0516A	Ferdinand	0408A	Jericho	1112B	Mount Holly
0105A	Ferrisburg	0119B	Jerusalem	1113A	Mount Tabor
0606A	Fletcher	0806A	Johnson	1304C	Mt. Snow
1116C	Florence	0410B	Jonesville	0308A	Newark
0615D	Fonda	1121A	Killington	1312B	Newfane
1102B	Forestdale	0105C	Kingland Bay	0113A	New Haven
0418A	Fort Ethan Allen	0306A	Kirby	1015A	Newport City
0607A	Franklin	0204A	Landgrove	1016A	Newport Town
0608A	Georgia	0804B	Lake Elmore	0202B	North Bennington
0217A	Glastenburry	0118C	Larrabees Point	1105C	North Clarendon
1008A	Glover	0109A	Leicester	0303B	North Danville
0106A	Goshen	0509A	Lemington	0105B	North Ferrisburg
1306A	Grafton	0517A	Lewis	0704A	North Hero
0507A	Granby	1411C	Lewiston	1213A	Northfield Falls
0702A	Grand Isle	0110A	Lincoln	1213B	Northfield
0107A	Granville	1310A	Londonberry	0512A	Norton
1201C	Graniteville	1013A	Lowell	1411A	Norwich
1009A	Greensboro	1410A	Ludlow	1002A	Orleans
0304A	Groton	0510A	Lunenburg	0114A	Orwell
0508A	Guildhall	0307A	Lyndon	0115A	Panton
1307A	Guilford	0307C	Lyndonville	0301C	Passumpsic

1114A	Pawlet	1121B	Sherburne	1125A	Wallingford
0309A	Peacham	0118A	Shoreham	0121A	Waltham
0206A	Peru	1122A	Shrewsbury	1318A	Wardsboro
1115A	Pittsfield	0218A	Sodom	0518A	Warner's Grant
1116A	Pittsford	1323A	Somerset	1217A	Warren
1214A	Plainfield	1201D	South Barre	0519A	Warren's Gore
1412A	Plymouth	0412A	South Burlington	0915A	Washington
1413A	Pomfret	0705A	South Hero	1218A	Waterbury
1411B	Pompanoosac	1418A	Springfield	0316A	Waterford
1117A	Poultney	0613A	St. Albans Town	0809A	Waterville
0207A	Pownal	0613B	St. Albans Bay	1126A	Wells
1118A	Proctor	0213A	Stamford	0907A	Wells River
1313A	Putney	0313A	Stannard	1127A	West Haven
1408C	Quechee	0312A	St. Johnsbury	1128A	West Rutland
0909A	Randolph	0413A	St. George	0916A	West Fairlee
1414A	Reading	0614A	St. Albans City	1018A	Westfield
0208A	Readsboro	0119A	Starksboro	0415A	Westford
0611A	Richford	1419A	Stockbridge	1319A	Westminister
0410A	Richmond	0808A	Stowe	1019A	Westmore
0116A	Ripton	0910A	Strafford	1421A	Weston
1415A	Rochester	1315A	Stratton	0122A	Weybridge
1314B	Rockingham	1123A	Sudbury	0317A	Wheelock
0119C	Rockville	0214A	Sunderland	1408A	White River Jct.
1215A	Roxbury	0314A	Sutton	0123A	Whiting
1416A	Royalton	0615A	Swanton Village	1320A	Whitingham
0209A	Rupert	0615C	Swanton	0917A	Williamstown
1120A	Rutland Town	0416B	Taft's Corners	1312A	Williamsville
1119A	Rutland City	0911A	Thetford	0416A	Williston
0310A	Ryegate	1124A	Tinmouth	1321A	Wilmington
0117A	Salisbury	0912A	Topsham	1322A	Windham
0210A	Sandgate	1316A	Townshend	1423A	Windsor
1314C	Saxton's River	1017A	Troy	0215A	Winhall
0211A	Searsburg	0913A	Tunbridge	0417A	Winooski
0212A	Shaftsbury	0414A	Underhill	0810A	Wolcott
1417A	Sharon	0120A	Vergennes	1219A	Woodbury
0311A	Sheffield	1317A	Vernon	0216A	Woodford
0411A	Shelburne	0513A	Victory	1424A	Woodstock
0612A	Sheldon	1216A	Waitsfield	1220A	Worcester
0612C	Sheldon Springs	0315A	Walden		

