

TOBACCO (TB)

*TB1. INTERVIEWER CHECKPOINT: (SEE **REFERENCE CARD, SCREENING SECTION**)

- *SC7 '1' IS CHECKED 1 **GO TO *TB5 INTRO 1**
- *SC7 '2' IS CHECKED 2 **GO TO *TB5 INTRO 2**
- ALL OTHERS.....3

*TB2. The next questions are about smoking. Have you ever smoked a cigarette, cigar, or pipe, even a single puff?

- YES.....1
- NO.....5 **GO TO *EA1, NEXT SECTION**
- DON'T KNOW8 **GO TO *EA1, NEXT SECTION**
- REFUSED9 **GO TO *EA1, NEXT SECTION**

*TB3. How old were you the very first time you ever smoked even a puff of a cigarette, cigar, or pipe?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens?
IF NO/ DK, PROBE: Was it before your twenties?

_____ YEARS OLD

- BEFORE TEENS12
- BEFORE 20s19
- AFTER 20s.....20
- DON'T KNOW998
- REFUSED999

*TB4. Was there ever a period in your life lasting at least two months when you smoked at least once per week?

- YES.....1 **GO TO *TB6**
- NO.....5 **GO TO *EA1, NEXT SECTION**
- DON'T KNOW8 **GO TO *EA1, NEXT SECTION**
- REFUSED9 **GO TO *EA1, NEXT SECTION**

<p>*TB5 INTRO 1. The next questions are about smoking. You reported earlier that you are a current smoker. How old were you the very <u>first</u> time you ever smoked even a puff of a cigarette, cigar, or pipe?</p> <p>IF “ALL MY LIFE” OR “AS LONG AS I CAN REMEMBER,” PROBE: Was it before your teens? IF NO/ DK, PROBE: Was it before your twenties?</p> <p>_____ YEARS OLD</p> <p>BEFORE TEENS12 BEFORE 20s19 AFTER 20s20 DK998 RF999</p>	<p>*TB5 INTRO 2. The next questions are about smoking. You reported earlier that you are an ex-smoker. How old were you the very <u>first</u> time you ever smoked even a puff of a cigarette, cigar, or pipe?</p> <p>IF “ALL MY LIFE” OR “AS LONG AS I CAN REMEMBER,” PROBE: Was it before your teens? IF NO/ DK, PROBE: Was it before your twenties?</p> <p>_____ YEARS OLD</p> <p>BEFORE TEENS 12 BEFORE 20s..... 19 AFTER 20s 20 DK 998 RF 999</p>
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***TB6.** How old were you the very first time you smoked tobacco at least once a week for a period of at least two months?

IF “ALL MY LIFE” OR “AS LONG AS I CAN REMEMBER,” PROBE: Was it before your teens?
IF NO/ DK, PROBE: Was it before your twenties?

_____ YEARS OLD

- BEFORE TEENS12
- BEFORE 20s19
- AFTER 20s20
- (IF VOL) “NEVER”997 **GO TO *EA1, NEXT SECTION**
- DON’T KNOW998
- REFUSED999

***TB6a.** How old were you the very first time you smoked tobacco (READ SLOWLY) every day or nearly everyday for a period of at least two months?

IF “ALL MY LIFE” OR “AS LONG AS I CAN REMEMBER,” PROBE: Was it before your teens?
IF NO/ DK, PROBE: Was it before your twenties?

_____ YEARS OLD

- BEFORE TEENS12
- BEFORE 20s19
- AFTER 20s20
- (IF VOL) “NEVER”997
- DON’T KNOW998
- REFUSED999

***TB7.** INTERVIEWER CHECKPOINT: (SEE ***TB1**)

- CHECKPOINT IS CODED ‘1’ 1 **GO TO *TB8.1**
- CHECKPOINT IS CODED ‘3’ 2
- ALL OTHERS..... 3

*TB8. Did you smoke at any time in the past 12 months?

- YES.....1
- NO.....5
- DON'T KNOW8
- REFUSED9

*TB8.1. Think about the year or years in your life when you smoked most. During that time, about how many days out of the 365, did you smoke at least one cigarette, cigar, or pipe?

_____ DAYS

- DON'T KNOW998
- REFUSED999

*TB13. On the days you smoked during that time, about how many cigarettes, cigars, and pipes did you usually have per day?

(IF NEC: How many cigars? How many pipes?)

	DON'T KNOW (998)	REFUSED (999)
*TB13a. _____ CIGARETTE(S)	998	999
*TB13b. _____ CIGAR(S)	998	999
*TB13c. _____ PIPE(S)	998	999

	YES (1)	NO (5)	DK (8)	RF (9)
*TB15. The next questions are about some problems you may have had because of smoking tobacco. First, was there ever a time when you often had such a strong desire to smoke that you couldn't resist having a cigarette, cigar, or pipe, or found it difficult to think of anything else? (KEY PHRASE: you had a strong and irresistible urge to smoke)	1	5	8	9
*TB15a. Over time did you develop a physical tolerance for tobacco, so you were able to smoke more without negative effects like nausea, irritability, or restlessness? (KEY PHRASE: you developed a physical tolerance for tobacco)	1	5	8	9
*TB15b. People who cut down or stop smoking after smoking steadily for some time may not feel well. Did you ever have times when you stopped, cut down, or went without smoking and then experienced physical symptoms like fatigue, headaches, constipation, upset stomach, weakness, or trouble sleeping? (KEY PHRASE: you had physical symptoms when you stopped smoking)	1	5	8	9
*TB15c. Did you ever have times when you stopped, cut down, or went without smoking and then experienced <u>emotional</u> symptoms like irritability, nervousness, restlessness, trouble concentrating or feeling depressed? (KEY PHRASE: you had emotional symptoms when you stopped smoking)	1 GO TO *TB15e	5	8	9
*TB15d. Did you ever have times when you smoked to <u>keep</u> from having problems like these? (KEY PHRASE: you smoked to keep from feeling physical or emotional problems)	1	5	8	9
*TB15e. Did you have times when you smoked even though you <u>promised</u> yourself you wouldn't? (KEY PHRASE: : you smoked when you planned not to)	1 GO TO *TB15g	5	8	9
*TB15f. Were there ever times when you smoked more frequently or for <u>more days in a row</u> than you intended? (KEY PHRASE: you smoked more frequently than you intended)	1	5	8	9
*TB15g. Were there times when you tried to stop or cut down on your smoking and found that you were not able to do so? (KEY PHRASE: you tried but weren't able to stop or cut down)	1	5	8	9
*TB15h. Did you ever have periods of several days or more when you chain-smoked, that is, started another cigarette as soon as you had finished one? (KEY PHRASE: you had periods when you chain-smoked for several days or more)	1	5	8	9
*TB15i. Did you ever have a period of a month or longer when you gave up or greatly reduced important activities – like sports, work, or associating with friends and family – so you could smoke? (KEY PHRASE: you gave up or reduced important activities so you could smoke)	1	5	8	9
*TB15j. Did tobacco ever cause you any physical problems like coughing, difficulty breathing, lung trouble, or problems with your heart or blood pressure? (KEY PHRASE: tobacco caused you some physical problems)	1	5 GO TO *TB15l	8 GO TO *TB15l	9 GO TO *TB15l

*TB15k. Did you continue to smoke even though you had any of these physical problems? (KEY PHRASE: you smoked even though tobacco caused you some physical problems)	1 GO TO *TB16	5	8	9
*TB15l. Did tobacco ever cause you any emotional problems like irritability, nervousness, restlessness, difficulty concentrating, or depression? (KEY PHRASE: tobacco caused you some emotional problems)	1	5 GO TO *TB16	8 GO TO *TB16	9 GO TO *TB16
*TB15m. Did you continue to smoke even though you had any of these emotional problems? (KEY PHRASE: you smoked even though tobacco caused you some emotional problems)	1	5	8	9

***TB16. INTERVIEWER CHECKPOINT: (SEE *TB15 - *TB15m)**

ZERO RESPONSES CODED '1'1 **GO TO *EA1, NEXT SECTION**
 ALL OTHERS.....2

***TB16a.INTERVIEWER CHECKPOINT: (SEE *TB15 - *TB15m)**

1 OR 2 RESPONSES CODED '1'2
 ALL OTHERS.....3

***TB21.** You reported having at least one smoking-related problem. Can you remember your exact age the very first time you had any of these problems?

- YES1
- NO5 **GO TO *TB21b**
- DON'T KNOW8 **GO TO *TB21b**
- REFUSED9 **GO TO *TB21b**

***TB21a.** (IF NEC: How old were you?)

_____ YEARS OLD **GO TO *TB22**

- DON'T KNOW998
- REFUSED999

***TB21b.** About how old were you [the first time you had any of these problems because of smoking]?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens?

IF NO/DK, PROBE: Was it before your twenties?

_____ YEARS OLD

- BEFORE TEENS.....12
- BEFORE 20s19
- AFTER 20s.....20
- DON'T KNOW998
- REFUSED999

***TB22.** How recently did you have any of these problems – in the past month, 2 to 6 months ago, 7 to 12 months ago, or more than 12 months ago?

- PAST MONTH 1 **GO TO *TB23.1**
- 2 TO 6 MONTHS AGO 2 **GO TO *TB23.1**
- 7 TO 12 MONTHS AGO 3 **GO TO *TB23.1**
- MORE THAN 12 MONTHS AGO..... 4
- DON'T KNOW 8 **GO TO *TB23.1**
- REFUSED 9 **GO TO *TB23.1**

***TB23.** How old were you the last time you had any of these problems?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens?

IF NO/DK, PROBE: Was it before your twenties?

_____ YEARS OLD

- BEFORE TEENS.....12
- BEFORE 20s19
- AFTER 20s.....20
- DON'T KNOW998
- REFUSED999

***TB23.1.** INTERVIEWER CHECKPOINT: (SEE ***TB16a**)

- *TB16a** CODED '2'1
- ALL OTHERS.....2 **GO TO *TB25**

***TB23.2. INTERVIEWER CHECKPOINT: (SEE *TB22)**

***TB22** CODED '1,' '2,' OR '3'1 **GO TO *TB31**
ALL OTHERS.....2 **GO TO *TB36**

***TB25.** Did you have three or more of these problems in the same year?

YES.....1
NO5 **GO TO *TB30**
DON'T KNOW8 **GO TO *TB30**
REFUSED9 **GO TO *TB30**

***TB26.** How old were you the first time you had 3 or more of these problems in the same year?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens?
IF NO/DK, PROBE: Was it before your twenties?

_____ YEARS OLD

BEFORE TEENS.....12
BEFORE 20s.....19
AFTER 20s.....20
DON'T KNOW998
REFUSED999

***TB30 INTERVIEWER CHECKPOINT: (SEE *TB22)**

***TB22** CODED '1,' '2,' OR '3'1
ALL OTHERS.....2 **GO TO *TB36**

*TB31. How soon after you wake up do you smoke your first cigarette, cigar, or pipe – within 5 minutes after waking, within 6 to 30 minutes, within 31 to 60 minutes, or more than one hour after waking?

- WITHIN 5 MINUTES 1
 - WITHIN 6 – 30 MINUTES 2
 - WITHIN 31 – 60 MINUTES 3
 - MORE THAN 1 HOUR..... 4
 - (IF VOL) I DON'T SMOKE ANYMORE..... 5 **GO TO *TB36**
 - DON'T KNOW 8
 - REFUSED 9
-

*TB32. Do you find it difficult to refrain from smoking in places where it is forbidden to smoke – for example, in church, at the library, in the movie theater, or in no-smoking sections of restaurants or office buildings?

- YES 1
 - NO 5
 - (IF VOL) I DON'T SMOKE ANYMORE..... 7 **GO TO *TB36**
 - DON'T KNOW 8
 - REFUSED 9
-

*TB33. Which cigarette or cigar or pipe would you most hate to give up – the first one in the morning, a smoke while watching television, or some other smoke?

- FIRST ONE IN THE MORNING 1
 - WHILE WATCHING TV 2
 - SOME OTHER SMOKE 3
 - (IF VOL) I DON'T SMOKE ANYMORE..... 4 **GO TO *TB36**
 - DON'T KNOW 8
 - REFUSED 9
-

*TB34. Do you smoke more frequently during the first hours after waking than during the rest of the day?

- YES 1
 - NO 5
 - (IF VOL) I DON'T SMOKE ANYMORE..... 7 **GO TO *TB36**
 - DON'T KNOW 8
 - REFUSED 9
-

*TB35. When you are so ill that you are in bed most of the day, do you smoke?

- YES 1
- NO 5
- (IF VOL) NEVER THAT SICK..... 6
- (IF VOL) I DON'T SMOKE ANYMORE..... 7
- DON'T KNOW 8
- REFUSED 9

*TB36. How many different times did you ever make a serious attempt to quit smoking?

_____ TIME(S)

DON'T KNOW.....998

REFUSED.....999

*TB37. INTERVIEWER CHECKPOINT: (SEE *TB36)

ONE OR MORE TIMES OR *TB36 CODED '998' 1

ALL OTHERS..... 2 **GO TO *EA1, NEXT SECTION**

*TB38. Since then, what is the longest period of time you have ever gone without smoking?

_____ DURATION NUMBER

CIRCLE UNIT OF TIME: DAYS.....1 WEEKS.....2 MONTHS.....3 YEARS.....4

DON'T KNOW.....998

REFUSED.....999

*TB39 INTERVIEWER CHECKPOINT: (SEE *TB36, *TB38)

*TB36 CODED '1'1 **GO TO *EA1, NEXT SECTION**

(*TB36 IS AT LEAST '2' OR *TB36 CODED '998') AND *TB38 IS

AT LEAST 3 MONTHS.....2

ALL OTHERS.....3 **GO TO *EA1, NEXT SECTION**

*TB40. How many different times have you gone without smoking for three months or longer?

_____ TIME(S)

DON'T KNOW.....998

REFUSED.....999

GO TO *EA1, NEXT SECTION

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