TOBACCO – SMQ
Target Group: SPs 12+ (CAPI)

BOX 1

CHECK ITEM SMQ.859:
IF SP AGED 12-17, GO TO SMQ.860.
OTHERWISE, CONTINUE.

SMQ.681   The following questions ask about use of tobacco products in the past **5 days**.

During the past **5 days**, including today, did {you/he/she} smoke cigarettes, pipes, cigars, little cigars or cigarillos, water pipes, hookahs, or e-cigarettes?

HAND CARD SMQ1

YES..	1	
NO	2	(SMQ.851)
REFUSED...	7	(SMQ.851)
DON'T KNOW...	9	(SMQ.851)

SMQ.692   Which of these products did {you/he/she} smoke?

HAND CARD SMQ1

(CHECK ALL THAT APPLY)

Cigarettes	1	
Pipes..	2	
Cigars, or little cigars, or cigarillos	3	
Water pipes or Hookahs	4	
E-cigarettes...	5	
REFUSED...	77	(SMQ.851)
DON'T KNOW...	99	(SMQ.851)

BOX 2

CHECK ITEM SMQ.701:
IF 'CIGARETTES' (CODE 1) IN SMQ.692, GO TO SMQ.710.
IF 'PIPES' (CODE 2) IN SMQ.692, GO TO SMQ.740.
IF 'CIGARS' (CODE 3) IN SMQ.692, GO TO SMQ.771.
IF 'WATER PIPES OR HOOKAHS' (CODE 4) IN SMQ.692, GO TO SMQ.845.
IF 'E-CIGARETTE' (CODE 5) IN SMQ.692, GO TO SMQ.849.

SMQ.710   During the past **5 days,** including today, on how many days did {you/he/she} smoke cigarettes?

HARD EDIT: RANGE 1 – 5.

|___|
ENTER NUMBER OF DAYS

REFUSED..   7
DON'T KNOW..   9

SMQ.720   During the past **5 days**, including today, on the days {you/he/she} smoked, how many cigarettes did {you/he/she} smoke each day?

IF R SAYS 95 OR MORE CIGARETTES PER DAY, ENTER 95.

HARD EDIT: RANGE 1 – 95.

|___|___|
ENTER NUMBER OF CIGARETTES

REFUSED..777
DON'T KNOW..999

SMQ.725   When did {you/he/she} smoke {your/his/her} last cigarette? Was it . . .

today,...   1
yesterday, or..   2
3 to 5 days ago?   3
REFUSED..   7
DON'T KNOW..   9

BOX 3

CHECK ITEM SMQ.731:
IF 'PIPES' (CODE 2) IN SMQ.692, GO TO SMQ.740.
IF 'CIGARS' (CODE 3) IN SMQ.692, GO TO SMQ.771.
IF 'WATER PIPES OR HOOKAHS' (CODE 4) IN SMQ.692, GO TO SMQ.845.
IF 'E-CIGARETTE' (CODE 5) IN SMQ.692, GO TO SMQ.849.
OTHERWISE, GO TO SMQ.851.

SMQ.740   During the past **5 days,** including today, on how many days did {you/he/she} smoke a pipe?

HARD EDIT: RANGE 1 – 5.

|___|
ENTER NUMBER OF DAYS

REFUSED..   7
DON'T KNOW..   9

CHECK ITEM SMQ.761:
IF 'CIGARS' (CODE 3) IN SMQ.692, GO TO SMQ.771.
IF 'WATER PIPES OR HOOKAH IN SMQ.692, GO TO SMQ.845.
IF 'E-CIGARETTE' (CODE 5) IN SMQ.692, GO TO SMQ.849.
OTHERWISE, GO TO SMQ.851.

SMQ.771   During the past **5 days,** including today, on how many days did {you/he/she} smoke cigars, or little cigars or cigarillos?

HARD EDIT: RANGE 1 – 5.

|___|
ENTER NUMBER OF DAYS

REFUSED.. 7
DON'T KNOW... 9

BOX 5

CHECK ITEM SMQ.791:
IF 'WATER PIPE' (CODE 4) IN SMQ.692, GO TO 845.
IF 'E-CIGARETTE' (CODE 5) IN SMQ.692, GO TO 849.
OTHERWISE, GO TO SMQ.851.

SMQ.845   During the past **5 days,** including today, on how many days did {you/he/she} smoke tobacco in a water pipe or Hookah?

HARD EDIT: RANGE 1 – 5.

|___|
ENTER NUMBER OF DAYS

REFUSED.. 7
DON'T KNOW... 9

BOX 6

CHECK ITEM SMQ.847:
IF 'E-CIGARETTE' (CODE 5) IN SMQ.692, GO TO 849.
OTHERWISE, GO TO SMQ.851.

SMQ.849   During the past **5 days,** including today, on how many days did {you/he/she} smoke an e-cigarette?

HARD EDIT: RANGE 1 – 5.

|___|
ENTER NUMBER OF DAYS

REFUSED.. 7
DON'T KNOW... 9

SMQ.851   Smokeless tobacco products are placed in the mouth or nose and include chewing tobacco, snuff, snus, or dissolvables.

During the past **5 days**, including today, did {you/he/she} use any smokeless tobacco?

(Please do not include nicotine replacement products like patches, gum, lozenge, or spray which are considered products to help {you/him/her} stop smoking.)

YES... 1
NO 2 (SMQ.863)
REFUSED.. 7 (SMQ.863)
DON'T KNOW... 9 (SMQ.863)

SMQ.853   Which of these products did {you/he/she} use?

(CHECK ALL THAT APPLY)

Chewing tobacco 1
Snuff 2
Snus.. 3
Dissolvables... 4
REFUSED.. 7 (SMQ.863)
DON'T KNOW... 9 (SMQ.863)

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                         BOX 7

CHECK ITEM SMQ.855:
■   IF 'CHEWING' (CODE 1) IN SMQ.853, GO TO SMQ.800.
■   IF 'SNUFF' (CODE 2) IN SMQ.853, GO TO SMQ.817.
■   IF 'SNUS' (CODE 3) IN SMQ.853, GO TO SMQ.857.
■   IF 'DISSOLVABLES' (CODE 4) IN SMQ.853, GO TO SMQ.861.
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SMQ.800   During the past **5 days,** including today, on how many days did {you/he/she} use chewing tobacco, such as Redman, Levi Garrett or Beechnut?

HARD EDIT: RANGE 1 – 5.

|___|
ENTER NUMBER OF DAYS

REFUSED.. 7
DON'T KNOW... 9

BOX 8

CHECK ITEM SMQ.818:
IF 'SNUFF' (CODE 2) IN SMQ.853, GO TO SMQ.817.
IF 'SNUS' (CODE 3) IN SMQ.853, GO TO SMQ.857.
IF DISSOLVABLES (CODE 4) IN SMQ.853, GO TO SMQ.861.
OTHERWISE, GO TO SMQ.863.

SMQ.817   During the past **5 days,** including today, on how many days did {you/he/she} use snuff, such as Skoal, Skoal Bandits, or Copenhagen?

HARD EDIT: RANGE 1 – 5.

|___|
ENTER NUMBER OF DAYS

REFUSED... 7
DON'T KNOW.. 9

BOX 9

CHECK ITEM SMQ.821:
IF 'SNUS' (CODE 3) IN SMQ.853, GO TO SMQ.857.
IF DISSOLVABLES (CODE 4) IN SMQ.853, GO TO SMQ.861.
OTHERWISE, GO TO SMQ.863.

SMQ.857   During the past **5 days,** including today, on how many days did {you/he/she} use snus?

HARD EDIT: RANGE 1 – 5.

|___|
ENTER NUMBER OF DAYS

REFUSED... 7
DON'T KNOW.. 9

BOX 10

CHECK ITEM SMQ.859:
IF DISSOLVABLES (CODE 4), CONTINUE.
OTHERWISE, GO TO SMQ.863.

SMQ.861   During the past **5 days,** including today, on how many days did {you/he/she} use dissolvables such as strips or orbs?

HARD EDIT: RANGE 1 – 5.

|___|
ENTER NUMBER OF DAYS

REFUSED...   7
DON'T KNOW...   9

SMQ.863   During the past **5 days**, including today, did {you/he/she} use any nicotine replacement therapy products such as nicotine patches, gum, lozenges, inhalers, or nasal sprays?

YES...   1
NO   2   (END OF SECTION)
REFUSED...   7   (END OF SECTION)
DON'T KNOW...   9   (END OF SECTION)

SMQ.831   During the past **5 days,** including today, on how many days did {you/he/she} use any nicotine replacement therapy products such as nicotine patches, gum, lozenges, inhalers, or nasal sprays?

HARD EDIT: RANGE 1 – 5.

|___|
ENTER NUMBER OF DAYS

REFUSED...   7
DON'T KNOW...   9

SMQ.841   When did {you/he/she} last use a nicotine replacement therapy product? Was it . . .

today,...   1   (END OF SECTION)
yesterday, or..   2   (END OF SECTION)
3 to 5 days ago?   3   (END OF SECTION)
REFUSED...   7   (END OF SECTION)
DON'T KNOW...   9   (END OF SECTION)

SMQ.860   The next questions are about {your/his/her} exposure to other people's tobacco smoke.

During the last 7 days, did {you/SP} spend time in a **restaurant?**

YES...   1
NO   2   (SMQ.870)
REFUSED...   7   (SMQ.870)
DON'T KNOW...   9   (SMQ.870)

SMQ.862   While {you were/SP was} in a **restaurant**, did someone else smoke cigarettes or other tobacco products indoors?

YES..	1
NO	2
REFUSED.....................................	7
DON'T KNOW...............................	9

SMQ.870   During the last 7 days, did {you/SP} ride in a **car or motor vehicle?**

YES..	1	
NO	2	(SMQ.874)
REFUSED.....................................	7	(SMQ.874)
DON'T KNOW...............................	9	(SMQ.874)

SMQ.872   While {you were/SP was} riding in **a car or motor vehicle,** did someone else smoke cigarettes or other tobacco products?

YES..	1
NO	2
REFUSED.....................................	7
DON'T KNOW...............................	9

SMQ.874   During the last 7 days, did {you/SP} spend time in **a home other than {your/his/her} own?**

YES..	1	
NO	2	(SMQ.878)
REFUSED.....................................	7	(SMQ.878)
DON'T KNOW...............................	9	(SMQ.878)

SMQ.876   While {you were/SP was} in **a home other than {your/his/her} own,** did someone else smoke cigarettes or other tobacco products indoors?

YES..	1
NO	2
REFUSED.....................................	7
DON'T KNOW...............................	9

SMQ.878   During the last 7 days, {were you/was SP} in **any other indoor area?**

YES..	1	
NO	2	(END OF SECTION)
REFUSED.....................................	7	(END OF SECTION)
DON'T KNOW...............................	9	(END OF SECTION)

SMQ.880   While {you were/SP was} in the **other indoor** area, did someone else smoke cigarettes or other tobacco products?

YES..	1
NO	2
REFUSED.....................................	7
DON'T KNOW...............................	9