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Section: **Survey Introduction (SI)**

INTRO Question text in **Bold** font is read to the respondent.
Text in normal font is not read to the respondent.
Unless otherwise specified, a flow goes to the next question.
The options Don't Know (DK) and Refusal (RF) are allowed on every question
except for a write-in response like Other - Specify.
The survey introduction, household roster, demographics are part of the
Entry/Exit block.

Section: **Household Smoking (HS)**

HS_BEG Beginning of Section

Note: This block requires number of people in the household (HHSIZE).

HS_Q10 **(Do you/Does anyone in your household) smoke cigarettes?**

1 Yes
2 No
   DK, RF

Coverage: *Household respondent*

HS_Q20 **How many people smoke cigarettes inside your home every day or almost
every day? Include all family members and visitors.**

____(2 spaces) [Min: 1 Max: 15]

00 None
   DK, RF

Coverage: *Household respondent*

HS_C30 If HS_Q20=0 or HS_Q20=DK or HS_Q20=RF, go to HS_Q40
Otherwise, go to HS_Q30

HS_Q30 **On a typical day, how many cigarettes are smoked inside your home?**

1 1 to 10 cigarettes
2 11 to 20 cigarettes
3 21 to 30 cigarettes
4 31 to 40 cigarettes
5 41 or more cigarettes
   DK, RF

Default: (Go to HS_Q50)

Coverage: *Households where at least one person smokes inside the home*

HS_Q40	**Is smoking cigarettes allowed inside your home?**

1   Yes
2   No ....(Go to HS_END)
        DK, RF

Coverage: *Households with no regular smokers inside the home or where no cigarettes are smoked inside the home*

HS_Q50	**Is smoking cigarettes inside your home restricted in any way?**

1   Yes
2   No ....(Go to HS_END)
        DK, RF ....(Go to HS_END)

Coverage: *Households with no smokers inside the home but where smoking is allowed or where cigarettes are smoked inside the home*

HS_Q60	**How is smoking cigarettes restricted inside your home?** Mark all that apply

1   **Allowed in certain rooms only**
2   **Restricted in the presence of young children**
3   **Allowed only if windows are open or with another type of ventilation**
4   **Other restrictions**
        DK, RF

Coverage: *Households where smoking is restricted inside the home*

HS_END   End of Section

Section: **Person Age (PA)**

PA_BEG   Beginning of Section

PA_Q01   **For statistical purposes only, may we confirm your age, as of today?**

        ____(3 spaces)   [Min: 0 Max: 130]

        DK, RF ....(Go to PA_END)

Coverage: *All respondents*

PA_END   End of Section

Section: **Smoking Status (SS)**

SS_BEG   Beginning of Section

SS_Q10	**I am going to start with questions about cigarette smoking. Include cigarettes that are bought ready-made as well as cigarettes that you make yourself.**

At the present time, do you smoke cigarettes every day, occasionally or not at all?

1 Every day...(Go to SS_C30)
2 Occasionally
3 Not at all
DK, RF

Coverage: *All respondents*

SS_Q20 **In the past 30 days, did you smoke any cigarettes?**

1 Yes
2 No
DK, RF

Coverage: *Respondents who are not current daily smokers*

SS_C30 If SS_Q10=1 (Daily) or SS_Q20=1 (Smoked in past 30 days), go to SS_Q30
Otherwise, go to SS_Q40

SS_Q30 **During the past 30 days, did you smoke every day?**

1 Yes
2 No
DK, RF

Coverage: *Current daily smokers or respondents who smoked in the past 30 days*

SS_Q40 **Have you smoked at least 100 cigarettes in your life?**

1 Yes
2 No
DK, RF

Coverage: *All respondents*

SS_D40 Create variable SS_Stat

If SS_Q10=1, then SS_Stat=1 (Daily smoker)
Else, if SS_Q10=2, then SS_Stat=2 (Occasional smoker)
Else, if SS_Q10=3 and SS_Q40=1, then SS_Stat=3 (Former smoker)
Else, if SS_Q10=3 and SS_Q40=2, then SS_Stat=4 (Never smoked)
Otherwise, SS_Stat=5 (Not determined)

SS_END End of Section

Section: **Past Smoking (PS)**

PS_BEG Beginning of Section

PS_C10   If SS_Stat=4 (Never smoked), go to PS_Q10
Otherwise, go to PS_C20

PS_Q10   **Have you ever smoked a whole cigarette?**

1   Yes
2   No
        DK, RF

Coverage: *Never smokers (did not smoke 100 cigarettes in life and was not smoking at the time of the interview)*

PS_C20   If SS_Stat=2 (Occasional) or SS_Stat=3 (Former), go to PS_Q20
Otherwise, go to PS_C30

PS_Q20   **Have you ever smoked cigarettes daily?**

1   Yes
2   No
        DK, RF

Coverage: *Occasional smokers or former smokers*

PS_C30   If SS_Stat=1 (Daily) or SS_Stat=2 (Occasional) or SS_Stat=3 (Former) or
PS_Q10=1 (Yes), go to PS_Q30
Otherwise, go to PS_END

PS_Q30   **At what age did you smoke your first cigarette?**

    ____(2 spaces)   [Min: 4 Max: 94]
    DK, RF

Coverage: *Respondents who have ever smoked a cigarette*

PS_C40   If SS_Stat=1 (Daily) or PS_Q20=1 (Yes), go to PS_Q40
Otherwise, go to PS_END

PS_Q40   **At what age did you begin to smoke cigarettes daily?**

    ____(2 spaces)   [Min: 4 Max: 94]
    DK, RF

Coverage: *Respondents who have ever smoked cigarettes daily*

PS_END   End of Section

Section: **Weekly Pattern (WP)**

WP_BEG   Beginning of Section

Note: This block requires SS_Stat and SS_Q20.

WP_C010   If SS_Stat=1 (Daily) or SS_Q20=1 (Smoked in past 30 days), go to WP_D010
Otherwise, go to WP_END

WP_D010   Create variables to fill day of week in WP_Q10A to WP_Q10G: For example, if today is Monday, then Day1=yesterday (Sunday), Day2=Saturday, Day3=Friday, etc.

WP_Q10A   **Some people smoke more or less depending upon the day of the week. So, thinking back over the past 7 days, starting with yesterday, how many cigarettes did you smoke:**

        ... Monday?

        ____(2 spaces)   [Min: 0 Max: 90]

  00   None
           DK, RF ....(Go to WP_END)

Note: Values derived from WP_Q10A to WP_Q10G.

Coverage: *Daily smokers or those who smoked in the last 30 days*

WP_Q10B   Some people smoke more or less depending upon the day of the week. So, thinking back over the past 7 days, starting with yesterday, how many cigarettes did you smoke:

        ... Tuesday?

        ____(2 spaces)   [Min: 0 Max: 91]

  00   None
           DK, RF

Note: Values derived from WP_Q10A to WP_Q10G.

Coverage: *Daily smokers or those who smoked in the last 30 days*

WP_Q10C   Some people smoke more or less depending upon the day of the week. So, thinking back over the past 7 days, starting with yesterday, how many cigarettes did you smoke:

        ... Wednesday?

        ____(2 spaces)   [Min: 0 Max: 91]

  00   None
           DK, RF

Note: Values derived from WP_Q10A to WP_Q10G.

Coverage: *Daily smokers or those who smoked in the last 30 days*

WP_Q10D   Some people smoke more or less depending upon the day of the week. So, thinking back over the past 7 days, starting with yesterday, how many cigarettes did you smoke:

... Thursday?

____(2 spaces)   [Min: 0 Max: 91]

00   None
         DK, RF

Note: Values derived from WP_Q10A to WP_Q10G.

Coverage: *Daily smokers or those who smoked in the last 30 days*

WP_Q10E   Some people smoke more or less depending upon the day of the week. So, thinking back over the past 7 days, starting with yesterday, how many cigarettes did you smoke:

... Friday?

____(2 spaces)   [Min: 0 Max: 91]

00   None
         DK, RF

Note: Values derived from WP_Q10A to WP_Q10G.

Coverage: *Daily smokers or those who smoked in the last 30 days*

WP_Q10F   Some people smoke more or less depending upon the day of the week. So, thinking back over the past 7 days, starting with yesterday, how many cigarettes did you smoke:

... Saturday?

____(2 spaces)   [Min: 0 Max: 91]

00   None
         DK, RF

Note: Values derived from WP_Q10A to WP_Q10G.

Coverage: *Daily smokers or those who smoked in the last 30 days*

WP_Q10G   Some people smoke more or less depending upon the day of the week. So, thinking back over the past 7 days, starting with yesterday, how many cigarettes did you smoke:

    ... Sunday?

    _____(2 spaces)   [Min: 0 Max: 91]

00   None
DK, RF

Note: Values derived from WP_Q10A to WP_Q10G.

Coverage: *Daily smokers or those who smoked in the last 30 days*

WP_END   End of Section

Section: **Smoking Behaviour (SB)**

SB_BEG   Beginning of Section

Note: This block requires SS_Stat.

SB_C10   If SS_Stat=1 (Daily), go to SB_Q10
Else if SS_Stat=2 (Occasional), go to SB_Q20
Otherwise, go to SB_END

SB_Q10   **How soon after you wake up do you smoke your first cigarette?**

1   Within 5 minutes
2   6 to 30 minutes
3   31 to 60 minutes
4   More than 60 minutes
DK, RF

Coverage: *Current daily smokers*

SB_Q20   **What strength of cigarettes do you usually smoke?**

1   **Ultra or extra light**
2   **Light**
3   **Ultra or extra mild**
4   **Mild**
5   **Regular** ....(Go to SB_END)
DK, RF ....(Go to SB_END)

Coverage: *Current smokers*

SB_Q30   **Do you smoke light or mild cigarettes because:**

             ... you believe they reduce the risks of smoking without having to actually give up smoking?

1   Yes
2   No
             DK, RF

Coverage: *Current smokers not smoking regular cigarettes*

SB_Q40   Do you smoke light or mild cigarettes because:

             ... you believe they reduce the amount of tar you inhale, compared to regular cigarettes?

1   Yes
2   No
             DK, RF

Coverage: *Current smokers not smoking regular cigarettes*

SB_Q50   Do you smoke light or mild cigarettes because:

             ... you believe they reduce the risk to your health, compared to regular cigarettes?

1   Yes
2   No
             DK, RF

Coverage: *Current smokers not smoking regular cigarettes*

SB_END   End of Section

Section: **Cigarette Brand (CB)**

CB_BEG   Beginning of Section

Note: This block requires SS_Stat.

CB_C10   If SS_Stat=1 (Daily) or SS_Stat=2 (Occasional), go to CB_Q10
             Otherwise, go to CB_END

CB_Q10	**What brand of cigarettes do you usually smoke?**

01	Belmont
02	Craven 'A' - King
03	Craven Menthol - King
04	DuMaurier - King
05	DuMaurier - Regular
06	DuMaurier - Light King
07	DuMaurier - Light Regular
08	DuMaurier - Extra Light King
09	DuMaurier - Extra Light Regular
10	DuMaurier - Ultra Light King
11	DuMaurier - Ultra Light Regular
12	DuMaurier - Special King
13	DuMaurier - Special 100
14	Export 'A' - Regular
15	Export 'A' - Medium Regular
16	Export 'A' - Light Regular
17	John Player's - Special
18	Matinee - Extra Mild King
19	Matinee - Extra Mild Regular
20	Matinee - Slims King
21	Number 7
22	Player's - Light King
23	Player's - Light Regular
24	Player's - Regular
25	Player's - Extra Light King
26	Player's - Extra Light Regular
27	Player's - Light Smooth
28	Rothmans - King
29	Rothmans - Special Mild King
30	No regular brand
31	Other (specify) ....(Go to CB_S10)
	DK, RF

Default: (Go to CB_END)

Coverage: *Current smokers*

CB_S10   What brand of cigarettes do you usually smoke?

____(80 spaces)

CB_END   End of Section

Section: **Cigarette Access (CA)**

CA_BEG   Beginning of Section

Note: This block requires SS_STAT and PA_Q01. AGE=PA_Q01.

CA_C10   If SS_STAT=1 (Daily) or SS_STAT=2 (Occasional), go to CA_Q10
Otherwise, go to CA_END

CA_Q10	**Where do you usually get your cigarettes? (Do you buy them, or does someone usually give them to you? Where do you buy them? Who do you get them from?)**

01	I buy them from a vending machine
02	I buy them at a small grocery/corner store
03	I buy them at a supermarket
04	I buy them at a drug store
05	I buy them at a gasoline station
06	I buy them at another kind of store
07	I buy them from a friend or someone else
08	I buy them by mail order
09	I buy them from the Internet
10	My brother or sister gives them to me
11	My mother or father gives them to me
12	A friend or someone else gives them to me
13	I take them from my mother, father or siblings
14	Other - specify ....(Go to CA_S10)
	DK, RF

Coverage: *Current smokers*

CA_S10	Where do you usually get your cigarettes?

_____(80 spaces)

CA_C20	If (do not buy from stores) and AGE<19, go to CA_Q20
Else if (buy from store) and AGE<19, go to CA_Q30
Otherwise, go to CA _END

CA_Q20	**In the past 12 months, have you bought or have you tried to buy cigarettes from a store?**

1	Yes
2	No ....(Go to CA_Q50)
	DK, RF ....(Go to CA_Q50)

Coverage: *Current smokers between the age of 15-18 who don't usually buy cigarettes from a store*

CA_Q30	**In the past 12 months, have you been asked for ID when buying cigarettes in a store for yourself or for someone else?**

1	Yes
2	No
	DK, RF

Coverage: *Current smokers between the age of 15-18 who usually buy cigarettes from a store or bought them in the past 12 months*

CA_Q40   **In the past 12 months, has anyone in a store refused to sell you cigarettes?**

1   Yes
2   No
    DK, RF

Coverage: *Current smokers between the age of 15-18 who usually buy cigarettes from a store or bought them in the past 12 months*

CA_Q50   **In the past 12 months, have you asked anyone to buy cigarettes for you?**

1   Yes
2   No
    DK, RF

Coverage: *Current smokers between the age of 15-18*

CA_END   End of Section

Section: **Cheaper Cigarettes (CC)**

CC_BEG   Beginning of Section

Note: This block requires SS_Stat.

CC_C10   If SS_Stat=1 (Daily) or SS_Stat=2 (Occasional), go to CC_Q20
    Otherwise, go to CC_END

CC_Q20   **The next questions refer to efforts you may have made to buy cigarettes at a lower cost. In the past 6 months, did you buy:**

    ... a discount brand?

1   Yes
2   No
    DK, RF

Coverage: *Current smokers*

CC_Q30   In the past 6 months, did you buy:

    ... from a First Nation's Reserve?

1   Yes
2   No
    DK, RF

Coverage: *Current smokers*

CC_Q40   In the past 6 months, did you buy:

... from the Internet?

1   Yes
2   No
           DK, RF

Coverage: *Current smokers*

CC_Q50   In the past 6 months, did you buy:

... by mail order?

1   Yes
2   No
           DK, RF

Coverage: *Current smokers*

CC_Q60   **In the past 6 months, did you buy cigarettes:**

... from outside your province?

1   Yes
2   No
           DK, RF

Coverage: *Current smokers*

CC_Q70   In the past 6 months, did you buy cigarettes:

... that may have been smuggled?

1   Yes
2   No
           DK, RF

Coverage: *Current smokers*

CC_Q80   **Did you do anything else to buy cigarettes at a lower cost?**

1   Yes
2   No
           DK, RF

Coverage: *Current smokers*

CC_END   End of section

Section: **Fire Risk (FR)**

FR_BEG   Beginning of Section

Note: This block requires SS_Stat.

FR_C10   If SS_Stat=1 (Daily) or SS_Stat=2 (Occasional), go to FR_Q10
Otherwise, go to FR_END

FR_Q10   **Many people will smoke in bed while watching television or reading. When was the last time you smoked in bed? Was it...**

1   **in the past week?**
2   **in the past month?**
3   **within one to six months?**
4   **more than six months ago?**
5   Never ....(Go to FR_Q30)
     DK, RF ....(Go to FR_Q30)

Coverage: *Current smokers*

FR_Q20   **In the past year, how often did you smoke in bed?**

1   **Everyday**
2   **A few times a week**
3   **Once a week**
4   **Once a month or less**
5   Never
     DK, RF

Coverage: *Respondents who have smoked in bed*

FR_Q30   **Sometimes people fall asleep with a lit cigarette. This could be in bed, on a sofa or in a chair. When was the last time this happened to you? Was it...**

1   **in the past week?**
2   **in the past month?**
3   **within one to six months?**
4   **more than six months ago?**
5   Never ....(Go to FR_Q50)
     DK, RF ....(Go to FR_Q50)

Coverage: *Current smokers*

FR_Q40   **In the past year, how many times did this happen to you?**

1   Never
2   Once
3   Two to five times
4   More than five times
     DK, RF

Coverage: *Respondents who have fallen asleep with a lit cigarette*

FR_Q50	**Sometimes people leave a cigarette burning in an ashtray while attending to something else. When was the last time you did this? Was it...**

1	**in the past week?**
2	**in the past month?**
3	**within one to six months?**
4	**more than six months ago?**
5	Never .... (Go to FR_END)
6	Don't use ashtrays .... (Go to FR_END)
	DK, RF .... (Go to FR_END)

Coverage: *Current smokers*

FR_Q60	**In the past year, how often did you leave a cigarette burning in an ashtray while attending to something else?**

1	**Everyday**
2	**A few times a week**
3	**Once a week**
4	**Once a month or less**
5	Never
	DK, RF

Coverage: *Respondents who have left a cigarette burning in an ashtray*

FR_END	End of section

Section:	**Smoking Cessation (SC)**

SC_BEG	Beginning of Section

Note: This block requires SS_Stat.

SC_C010	If SS_Stat=3 (Former), go to SC_Q010 Else if SS_Stat=1 (Daily) or SS_Stat=2 (Occasional), go to SC_C060 Otherwise, go to SC_END

SC_Q010	**When did you stop smoking?**

1	**Less than 1 year ago**
2	**1 to 2 years ago** .... (Go to SC_Q040)
3	**3 to 5 years ago** .... (Go to SC_Q040)
4	**More than 5 years ago** .... (Go to SC_Q040)
	DK, RF .... (Go to SC_Q040)

Coverage: *Former smokers*

SC_Q020   **In what month did you stop smoking?**

01   January
02   February
03   March
04   April
05   May
06   June
07   July
08   August
09   September
10   October
11   November
12   December
            DK, RF

Coverage: *Respondents who stopped smoking less than one year ago*

SC_Q030   **What was your main reason to quit smoking?**

01   **Health**
02   **Pregnancy or a baby in the household**
03   **Less stress in life**
04   **Cost of cigarettes**
05   **Smoking is less socially acceptable**
06   Some other reason ....(Go to SC_S030)
            DK, RF

Coverage: *Respondents who stopped smoking less than one year ago*

SC_S030   What was your main reason to quit smoking?

            _____(80 spaces)

SC_Q040   **Approximately, how many attempts to quit did you make, before you quit**
            smoking for good?

            _____(2 spaces)   [Min: 1 Max: 94]
            DK, RF

Coverage: *Former smokers*

SC_Q050   **On average, how many cigarettes were you smoking per day at the time**
            you quit?

            _____(2 spaces)   [Min: 1 Max: 94]
            DK, RF

Coverage: *Former smokers*

SC_C060   If SS_Stat=1 (Daily) or SS_Stat=2 (Occasional), go to SC_Q060
            Otherwise, go to SC_C080

SC_Q060   **Are you seriously considering quitting within the next 6 months?**

1   Yes
2   No ....(Go to SC_C080)
          DK, RF ....(Go to SC_C080)

Coverage: *Current smokers*

SC_Q070   **Are you seriously considering quitting within the next 30 days?**

1   Yes
2   No
          DK, RF

Coverage: *Current smokers who are considering quitting within the next six months*

SC_C080   If SS_Stat=1 (Daily) or SS_Stat=2 (Occasional) or SC_Q010=1 (Former smokers who quit in the past year), go to SC_Q080
Otherwise, go to SC_END

SC_Q080   **In the past year, how many times did you stop smoking for at least 24 hours because you were trying to quit?**

        ____(2 spaces)   [Min: 0 Max: 94]

00   None
         DK, RF

Coverage: *Current smokers and former smokers who quit smoking in the past 12 months*

SC_C090   If SC_Q080=0, DK or RF, go to SC_END
Otherwise, go to SC_Q090

SC_Q090   **How many of these attempts lasted at least one week?**

        ____(2 spaces)   [Min: 0 Max: 52]

00   None
         DK, RF

Coverage: *Current smokers who stopped smoking for at least 24 hours in the past 12 months and former smokers who quit smoking in the past 12 months*

SC_C100   If (SS_Stat=1 (Daily) or SS_Stat=2 (Occasional)) and SC_Q080>0, go to SC_Q100
Otherwise, go to SC_END

SC_Q100	**What was the main reason you began to smoke again?**
01	To control body weight
02	Stress, need to relax or to calm down
03	Boredom
04	Addiction/habit
05	Lack of support or information
06	Going out more (bars, parties)
07	Increased availability
08	No reason/felt like it
09	Family or friends smoke
10	Other
	DK, RF

Coverage: *Current smokers who tried to quit smoking in the past 12 months*

SC_END   End of Section

Section: **Cessation Methods (CM)**

CM_BEG   Beginning of Section

Note: This block requires SS_Stat, SC_Q010 and SC_Q080.

CM_C10   If SS_Stat=1 (Daily) or SS_Stat=2 (Occasional) and SC_Q080=0, DK or RF, go to CM_Q10
If SS_Stat=1 (Daily) or SS_Stat=2 (Occasional) and (SC_Q080>0 and SC_Q080<95), go to CM_Q20
Else if SS_Stat=3 (Former) and (SC_Q010=1 or SC_Q010=2), go to CM_Q20
Otherwise, go to CM_END

CM_Q10	**Have you tried to quit smoking in the past 2 years?**
1	Yes
2	No ....(Go to CM_END)
	DK, RF ....(Go to CM_END)

Coverage: *Respondents who did not try to quit smoking in the last year (SC_Q080=0)*

CM_Q20	**Now, I am going to ask you about methods you might have used to quit smoking in the past 2 years.**
	In the past 2 years, did you use a nicotine patch?
1	Yes
2	No ....(Go to CM_Q40)
	DK, RF ....(Go to CM_Q40)

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years*

CM_Q30   **Was this useful in helping you quit?**

1   Yes
2   No
           DK, RF

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years and used the*
                     nicotine patch

CM_Q40   **In the past 2 years, did you use nicotine gum such as 'Nicorette'?**

1   Yes
2   No ....(Go to CM_Q60)
           DK, RF ....(Go to CM_Q60)

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years*

CM_Q50   **Was this useful in helping you quit?**

1   Yes
2   No
           DK, RF

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years and used nicotine*
                     gum

CM_Q60   **In the past 2 years, did you use a product such as 'Zyban'?**

1   Yes
2   No ....(Go to CM_Q80)
           DK, RF ....(Go to CM_Q80)

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years*

CM_Q70   **Was this useful in helping you quit?**

1   Yes
2   No
           DK, RF

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years and used a*
                     product like Zyban

CM_C80   If CM_Q20=2 and CM_Q40=2 and CM_Q60=2 (did not use patch, gum, or a
                    product like Zyban), go to CM_Q80
                    Otherwise, go to CM_END

CM_Q80	**What were your reasons for not using either a patch, nicotine gum or a product such as 'Zyban' to help you quit smoking?** Mark all that apply

1	**You were concerned about possible side effects**
2	**You didn't believe these products work**
3	**You didn't have enough information about these products**
4	**They cost too much**
5	**Some other reason**
	DK, RF

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years*

CM_END   End of Section

Section: **Other Cessation Methods (OM)**

OM_BEG   Beginning of Section

Note: This block requires SS_Stat, SC_Q010, SC_Q080, CM_Q10, CM_Q20, CM_Q40 and CM_Q60.

OM_C010   If ((SS_Stat=1 (Daily) or SS_Stat=2 (Occasional)) and (SC_Q080>0 and SC_Q080<96) or CM_Q10=1 or (SS_Stat=3 (Former) and (SC_Q010=1 or SC_Q10=2)) (former smoker quit in last 2 years), go to OM_Q010
Otherwise, go to OM_END

OM_Q010   **Did you use hypnosis or acupuncture?**

1	Yes
2	No
	DK, RF

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years*

OM_Q030   **Did you make a deal with a friend or family member to quit smoking together?**

1	Yes
2	No
	DK, RF

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years*

OM_Q050   **In the past 2 years, did you take part in a quit smoking contest?**

1	Yes
2	No
	DK, RF

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years*

OM_Q070   **Did you reduce the number of cigarettes you smoked as a strategy to quit?**

1   Yes
2   No
     DK, RF

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years*

OM_Q090   **Did you use a 1-800 quit smoking phone line?**

1   Yes
2   No
     DK, RF

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years*

OM_Q110   **Did you use an Internet web-site program to quit smoking?**

1   Yes
2   No
     DK, RF

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years*

OM_C130   If (CM_Q20=2 and CM_Q40=2 and CM_Q60=2 and OM_Q010=2 and
               OM_Q030=2 and OM_Q050=2 and OM_Q070=2 and OM_Q090=2 and
               OM_Q110=2) (did not use any of the methods), go to OM_Q130
               Otherwise, go to OM_END

OM_Q130   **Did you try to quit smoking on your own without special preparation or
               help?**

1   Yes
2   No
     DK, RF

Coverage: *Current and former smokers who tried to quit or quit smoking in the past two years without using any
               of the above mentioned methods*

OM_END   End of Section

Section: **Cessation Products (CP)**

CP_BEG   Beginning of Section

Note: This block requires SS_Stat.

CP_C10   If SS_Stat=1 (Daily) or SS_Stat=2 (Occasional), go to CP_Q10
               Otherwise, go to CP_END

CP_Q10   **Sometimes smokers use products such as a nicotine patch or gum when they are not trying to quit smoking. Have you ever used such products when you were not able to smoke or when you wanted to smoke fewer cigarettes? For example, in a meeting, on a plane, at school?**

1   Yes
2   No
               DK, RF

Coverage: *Current smokers*

CP_END   End of Section

Section: **Health Professionals (HP)**

HP_BEG   Beginning of Section

Note: This block requires SS_Stat.

HP_C010   If SS_Stat=1 (Daily) or SS_Stat=2 (Occasional), go to HP_Q010
               Otherwise, go to HP_END

HP_Q010   **Now, I'd like to ask you about your visits with health professionals. In the past 12 months, did you see a doctor?**

1   Yes
2   No ....(Go to HP_Q040)
               DK, RF ....(Go to HP_Q040)

Coverage: *Current smokers*

HP_Q020   **Did the doctor advise you to reduce or quit smoking?**

1   Yes
2   No ....(Go to HP_Q040)
               DK, RF ....(Go to HP_Q040)

Coverage: *Current smokers who saw a doctor in the past 12 months*

HP_Q030   **Did the doctor provide you with information on quit smoking aids such as the patch, a product like 'Zyban' or counselling programs?**

1   Yes
2   No
               DK, RF

Coverage: *Current smokers who saw a doctor in the past 12 months and were advised to reduce or quit smoking*

HP_Q040   **In the past 12 months, did you see a dentist or dental hygienist?**

1   Yes
2   No ....(Go to HP_Q100)
               DK, RF ....(Go to HP_Q100)

Coverage: *Current smokers*

HP_Q050   **Did the dentist or dental hygienist advise you to reduce or quit smoking?**

1   Yes
2   No ....(Go to HP_Q100)
           DK, RF ....(Go to HP_Q100)

Coverage: *Current smokers who saw a dentist in the past 12 months*

HP_Q060   **Did the dentist or dental hygienist provide you with information on quit smoking aids such as the patch, a product like 'Zyban' or counselling programs?**

1   Yes
2   No
           DK, RF

Coverage: *Current smokers who saw a dentist in the past 12 months and were advised to reduce or quit smoking*

HP_Q100   **In the past 12 months, did you talk with a pharmacist?**

1   Yes
2   No ....(Go to HP_END)
           DK, RF ....(Go to HP_END)

Coverage: *Current smokers*

HP_Q110   **Did the pharmacist advise you to reduce or quit smoking?**

1   Yes
2   No ....(Go to HP_END)
           DK, RF ....(Go to HP_END)

Coverage: *Current smokers who talked with a pharmacist in the past 12 months*

HP_Q120   **Did the pharmacist provide you with information on quit smoking aids such as the patch, a product like 'Zyban' or counselling programs?**

1   Yes
2   No
           DK, RF

Coverage: *Current smokers who talked with a pharmacist in the past 12 months and were advised to reduce or quit smoking*

HP_END   End of Section

Section: **Smoking and Pregnancy (SP)**

SP_BEG   Beginning of Section

Note: This block requires SEX, PA_Q01, SS_Stat and SC_Q010. AGE=PA_Q01.

SP_C10   If SEX=2 (Female) and (AGE>=20 and AGE<=44), go to SP_Q10
               Otherwise, go to SP_END

SP_Q10   **Now, a few questions about smoking and pregnancy. Have you been pregnant in the past 5 years?**

1   Yes...(Go to SP_C20)
2   No ....(Go to SP_END)
         DK...(Go to SP_END)
         RF

Coverage: *Women aged 20-44*

SP_C20   If SS_Stat=1 (Daily) or SS_Stat=2 (Occasional) or (SS_Stat=3 (Former) and SC_Q010=1 or 2 or 3 (former smokers who quit less than 5 years ago)), go to SP_Q20
            Otherwise, go to SP_Q30

SP_Q20   **During your most recent pregnancy, did you smoke regularly, that is, every day or almost every day?**

1   Yes
2   No
         DK, RF

Coverage: *Women aged 20-44 who are daily, occasional or former smokers (who quit less than 5 years ago) and were pregnant in the last five years*

SP_Q30   **During your most recent pregnancy, did your spouse or partner smoke regularly in the home, that is, every day or almost every day?**

1   Yes
2   No
3   Not applicable (no spouse/partner)
         DK, RF

Coverage: *Women aged 20-44 who were pregnant in the last 5 years*

SP_END   End of Section

Section: **Tobacco Products (TP)**

TP_BEG   Beginning of Section

TP_Q010   **Now, a couple of questions about tobacco products, other than cigarettes. Have you ever tried smoking a cigar or cigarillos?**

1   Yes
2   No ....(Go to TP_Q030)
         DK, RF ....(Go to TP_Q030)

Coverage: *All respondents*

TP_Q020   **In the past 30 days, did you smoke any cigars or cigarillos?**

1   Yes
2   No
          DK, RF

Coverage: *Respondents who have ever smoked a cigar or cigarillo*

TP_Q030   **Have you ever tried smoking a pipe?**

1   Yes
2   No ....(Go to TP_Q050)
          DK, RF ....(Go to TP_Q050)

Coverage: *All respondents*

TP_Q040   **In the past 30 days, did you smoke a pipe?**

1   Yes
2   No
          DK, RF

Coverage: *Respondents who have ever smoked a pipe*

TP_Q050   **Have you ever tried chewing tobacco, pinch or snuff?**

1   Yes
2   No .... (Go to TP_END)
          DK, RF .... (Go to TP_END)

Coverage: *All respondents*

TP_Q060   **In the past 30 days, did you use any chewing tobacco, pinch or snuff?**

1   Yes
2   No
          DK, RF

Coverage: *Respondents who have ever tried chewing tobacco, pinch or snuff*

TP_END   End of Section

Section: **Opinions on Smoking (OS)**

OS_BEG   Beginning of Section

OS_Q10   **Which of the following statements comes closest to how you feel about smoking in restaurants?**

1   **Smoking should not be allowed in a restaurant**
2   **Smoking should be allowed only in a section of a restaurant that is enclosed**
3   **Smoking should be allowed only in a designated section of a restaurant**
4   **Smoking should be allowed anywhere in a restaurant**
     DK, RF

Coverage: *All respondents*

OS_Q20   **Which of the following statements comes closest to how you feel about smoking in bars and taverns?**

1   **Smoking should not be allowed in a bar or tavern**
2   **Smoking should be allowed only in a section of a bar or tavern that is enclosed**
3   **Smoking should be allowed only in a designated section of a bar or tavern**
4   **Smoking should be allowed anywhere in a bar or tavern**
     DK, RF

Coverage: *All respondents*

OS_Q30   **Thinking about various types of workplaces such as offices, factories, stores, and construction sites, which of the following statements comes closest to how you feel about smoking in the workplace?**

1   **Smoking should not be allowed in any area of the workplace, whether indoor or outdoor**
2   **Smoking should be allowed only in enclosed smoking areas in the workplace**
3   **Smoking should be allowed only in designated outdoor smoking areas of the workplace**
4   **Smoking should be allowed anywhere in the workplace, whether indoor or outdoor**
     DK, RF

Coverage: *All respondents*

OS_END   End of Section

Section: **Exposure to Second-hand Smoke (EX)**

EX_BEG   Beginning of section

Note: This block requires SS_Stat.

EX_Q010   **The next questions are about exposure to second-hand smoke in places other than your own home. Second-hand smoke is what smokers exhale and the smoke from a burning cigarette. In the past month, (excluding your own smoking), were you exposed to second-hand smoke:**

... inside a car or other vehicle?

1   Yes
2   No
       DK, RF

Coverage: *All respondents*

EX_Q020   In the past month, (excluding your own smoking), were you exposed to second-hand smoke:

... inside someone else's home?

1   Yes
2   No
       DK, RF

Coverage: *All respondents*

EX_Q030   **In the past month, (excluding your own smoking), were you exposed to second-hand smoke:**

... on an outdoor patio of a restaurant or bar?

1   Yes
2   No
       DK, RF

Coverage: *All respondents*

EX_Q040   In the past month, (excluding your own smoking), were you exposed to second-hand smoke:

... inside a restaurant?

1   Yes
2   No
       DK, RF

Coverage: *All respondents*

EX_Q050   In the past month, (excluding your own smoking), were you exposed to second-hand smoke:

... inside a bar or tavern?

1   Yes
2   No
       DK, RF

Coverage: *All respondents*

EX_Q060   In the past month, (excluding your own smoking), were you exposed to second-hand smoke:

... at a bus stop or shelter?

1   Yes
2   No
     DK, RF

Coverage: *All respondents*

EX_Q070   **In the past month, (excluding your own smoking), were you exposed to second-hand smoke:**

... at an entrance to a building?

1   Yes
2   No
     DK, RF

Coverage: *All respondents*

EX_Q080   In the past month, (excluding your own smoking), were you exposed to second-hand smoke:

... at your workplace?

1   Yes
2   No
     DK, RF

Coverage: *All respondents*

EX_Q090   In the past month, (excluding your own smoking), were you exposed to second-hand smoke:

... at your school?

1   Yes
2   No
     DK, RF

Coverage: *All respondents*

EX_Q100   In the past month, (excluding your own smoking), were you exposed to second-hand smoke:

... at any other public place such as a shopping mall, arena, bingo hall, concert or sporting event?

1   Yes
2   No
     DK, RF

Coverage: *All respondents*

EX_Q110   In the past month, (excluding your own smoking), were you exposed to second-hand smoke:

... outdoors such as on a sidewalk or in a park?

1   Yes
2   No
    DK, RF

Coverage: *All respondents*

EX_Q120   In the past month, (excluding your own smoking), were you exposed to second-hand smoke:

... anywhere else?

1   Yes
2   No ....(Go to EX_C130)
    DK, RF ....(Go to EX_C130)

Coverage: *All respondents*

EX_Q125   **Where were you exposed to second-hand smoke in the past month?**

          ____(80 spaces)

Coverage: *Respondents who in the past 12 months were exposed to second-hand smoke in places other than those listed above*

EX_C130   If any EX_Q010 to EX_Q120=1, go to EX_Q130
            Otherwise, go to EX_END

EX_Q130   **Overall, (excluding your own smoking), in the past month were you exposed to second-hand smoke:**

1   **Every day?**
2   **Almost every day?**
3   **At least once a week?**
4   **At least once in the past month?**
    DK, RF

Coverage: *Respondents who in the past month were exposed to second-hand smoke in places other than their own home*

EX_END   End of Section

Section: **Language and Education (LA)**

LA_BEG   Beginning of Section

LA_Q10   **Now, a few general questions that will help us analyze the survey data. What language do you speak most often at home?**

1   English
2   French
3   Both English and French
4   Other
           DK, RF

Coverage: *All respondents*

LA_Q20   **What is the highest grade or level of education you have ever attained?**

01   No schooling
02   Some elementary
03   Completed elementary
04   Some secondary
05   Completed secondary
06   Some community college, technical college, CEGEP or nurse's training
07   Completed community college, technical college, CEGEP or nurse's training
08   Some university or teacher's college
09   Completed university or teacher's college
10   Other education or training
           DK, RF

Coverage: *All respondents*

LA_END   End of Section

Section: **Labour Force (LF)**

LF_BEG   Beginning of Section

LF_Q10   **Did you work at a job or a business at any time in the past 12 months? Please include part-time jobs, seasonal work, contract work, self-employment, babysitting and any other paid work, regardless of the number of hours worked.**

1   Yes
2   No ....(Go to LF_END)
           DK, RF ....(Go to LF_END)

Coverage: *All respondents*

LF_Q20   **Are you currently working at a job or a business?**

1   Yes
2   No
           DK, RF ....(Go to LF_END)

Coverage: *Respondents who have worked at a job or business in the past 12 months*

LF_Q30   **The next questions are about your (current job or business./main job or business in the past 12 months.) What kind of work (are/were) you doing? (For example: babysitting in own home, factory worker, forestry technician)**

        ____(50 spaces)
        DK, RF

Coverage: *Respondents who have worked at a job or business in the past 12 months*

LF_Q40   **What (are/were) your most important activities or duties? (For example: caring for children, stamp press machine operator, forest examiner)**

        ____(50 spaces)
        DK, RF

Coverage: *Respondents who have worked at a job or business in the past 12 months*

LF_Q50   **At your place of work, what (are/were) the restrictions on smoking?**

1   **Restricted completely**
2   **Allowed in designated areas**
3   **Restricted only in certain places**
4   **Not restricted at all**
    DK, RF

Coverage: *Respondents who have worked at a job or business in the past 12 months*

LF_END   End of Section

Section: **Student Income (SI)**

SI_BEG   Beginning of Section

Note: This block requires PA_Q01. AGE=PA_Q01.

SI_C10   If AGE<25, go to SI_Q10
    Otherwise, go to SI_END

SI_Q10   **Are you currently attending a school, college or university?**

1   Yes
2   No .... (Go to SI_END)
    DK, RF .... (Go to SI_END)

Coverage: *Respondents less than 25 years of age*

SI_Q20	**Now think about money that you have each week to save or to spend on 'extras' such as snack food, gifts or entertainment, but not living expense items like rent or tuition. About how much money do you have each week to save or spend on yourself? Please include money from jobs, allowances or any other source.**

_____(4 spaces)   [Min: 0 Max: 2000]
DK, RF

Coverage: *Respondents less than 25 years of age who are currently attending a school, college or university*

SI_END   End of Section

Section: **Postal Code (PC)**

PC_BEG   Beginning of Section

PC_Q10   **To determine which geographic region you live in, could you tell me your postal code?**

_____(6 spaces)

DK, RF ....(Go to PC_END)

Coverage: *All respondents*

PC_Q20   **What are the first 3 digits of your postal code?**

_____(3 spaces)

DK, RF ....(Go to PC_END)

Coverage: *Respondents who did not provide their postal code*

PC_END   End of Section

Section: **Marijuana Use (MU)**

MU_BEG   Beginning of Section

Note: This block requires PA_Q01. AGE=PA_Q01.

MU_Q10   **I have finished the questions about tobacco use. Now, I am going to ask a couple of questions about marijuana. Again, I would like to remind you that everything you say will remain strictly confidential. Have you ever used or tried marijuana, cannabis or hashish?**

1   **Yes, just once**
2   **Yes, more than once**
3   **No** ....(Go to MU_END)
               DK, RF .... (Go to MU_END)

Coverage: *All respondents*

MU_Q20	**Have you used it in the past 12 months?**

1   Yes
2   No ....(Go to MU_Q40)
         DK, RF ....(Go to MU_Q40)

Coverage: *Respondents who have ever used marijuana, cannabis or hashish*

MU_C30   If MU_Q10=1, go to MU_Q40

MU_Q30   **How often did you use marijuana, cannabis or hashish in the past 12 months?**

1   **Less than once a month**
2   **1 to 3 times a month**
3   **Once a week**
4   **More than once a week**
5   **Every day**
         DK, RF

Coverage: *Respondents who have ever used or tried marijuana, cannabis or hashish in the past 12 months*

MU_Q40   **How old were you when you first did this?**

         ____(2 spaces)   [Min: 4 Max: 94]
         DK, RF

Coverage: *Respondents who have ever used or tried marijuana, cannabis or hashish*

MU_END   End of Section

CAI_SO   END OF INTERVIEW

         ____(1 spaces)

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