

**Canadian Tobacco Use Monitoring Survey, Cycle 1, 2006  
Questionnaire**

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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: 0 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

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**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

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- 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

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**Section: Past Smoking (PS)**

**PS\_BEG** Beginning of Section

Note: This block requires SS\_Stat, PA\_Q01, SS\_Q20 and SS\_Q30. AGE=PA\_Q01. If PA\_Q01 is DK or RF then AGE=ANDB\_Q01 (Roster Age).

**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) and (SS\_Q30 NE 1 or SS\_Q20 NE=1)) 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: *Former or occasional smokers who did not smoke daily in the past 30 days or who did not smoke at all in the past 30 days.*

**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*

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**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: 90]

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*

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**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: 90]

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: 90]

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: 90]

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*

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**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: 90]

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: 90]

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*



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**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 if SS\_Stat=2 (Occasional), go to CB\_Q10  
                  Otherwise, go to CB\_END

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- 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

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**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*

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**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:**      **Cigarette Source (CS)**

**CS\_BEG**      Beginning of Section

*Note:*            This block requires SS\_Stat.

**CS\_C30**      If SS\_Stat=1 (Daily) or SS\_Stat=2 (Occasional), go to CS\_Q30  
                  Otherwise, go to CS\_END

**CS\_Q30**      **Have you ever purchased cigarettes for, or given cigarettes to, a minor?**

- 1            Yes
- 2            No .....(Go to CS\_END)  
              DK, RF .....(Go to CS\_END)

*Coverage:*      *Current smokers*

**CS\_Q40**      **Did you purchase cigarettes for or give cigarettes to a minor within the last 12 months?**

- 1            Yes
- 2            No .....(Go to CS\_END)  
              DK, RF .....(Go to CS\_END)

*Coverage:*      *Current smokers who have ever purchased or gave cigarettes to a minor*

**CS\_Q50**      **Did you purchase cigarettes for or give cigarettes to a minor within the last 30 days?**

- 1            Yes
- 2            No  
              DK, RF

*Coverage:*      *Current smokers who in the past 12 months have purchased or gave cigarettes to a minor*

**CS\_END**      End of Section

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**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*

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**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*

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**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*

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**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*



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**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

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**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\_Q10=1 and SC\_Q080=0 (former smokers who quit in the past year), go to SC\_END  
                 If (SS\_Stat=1 or SS\_Stat=2) and (SC\_Q080=0, DK or RF) (daily or occasional smokers who did not try to quit in the past year), go to SC\_Q110  
                 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

**Default:**              (Go to SC\_END)

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

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**SC\_Q110**      **Have you tried to quit smoking?**

- 1            Yes
- 2            No  
              DK, RF

*Coverage:*            *Current smokers who did not try to quit in the past year*

**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  
              DK, RF

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

**CM\_Q40**            **In the past 2 years, did you use nicotine gum such as 'Nicorette'?**

- 1            Yes
- 2            No  
              DK, RF

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

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**CM\_Q60** In the past 2 years, did you use a product such as 'Zyban'?

- 1 Yes
- 2 No  
DK, RF

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

**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\_C030** 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\_Q030  
Otherwise, go to OM\_END

**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\_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

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**OM\_C129** If (CM\_Q20=2 and CM\_Q40=2 and CM\_Q60=2 and OM\_Q030=2 and OM\_Q070 (did not use other 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

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**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*

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**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, RF .....(Go to SP\_END)

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

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**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 few 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*



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**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\_Q075)  
              DK, RF ..... (Go to TP\_Q075)

*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\_Q075**      **Have you ever tried smoking herbal cigarettes (these are tobacco free cigarettes often found in natural food stores)?**

- 1            Yes
- 2            No ..... (Go to TP\_Q085)  
              DK, RF ..... (Go to TP\_Q085)

*Coverage:*        *All respondents*

**TP\_Q076**      **In the past 30 days, did you smoke any herbal cigarettes?**

- 1            Yes
- 2            No  
              DK, RF

*Coverage:*        *Respondents who have ever tried to smoke herbal cigarettes*

**TP\_Q085**      **Have you ever tried a water-pipe, also known as a hookah, sheesha, narg-eelay, hubble-bubble, or gouza, to smoke tobacco? (It is a tall container with water at the bottom that the air bubbles through and it has a long hose coming out of it that people smoke through. It is somewhat popular in the Middle East and is often used with flavoured tobacco).**

- 1            Yes
- 2            No ..... (Go to TP\_END)  
              DK, RF ..... (Go to TP\_END)

*Coverage:*        *All respondents*

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**TP\_Q086**      **Do you believe that smoking tobacco in a water-pipe is less harmful than smoking cigarettes?**

- 1            Yes
- 2            No  
              DK, RF

*Coverage:*            *Respondents who have ever tried smoking tobacco in a water-pipe*

**TP\_Q087**      **Do you believe that smoking tobacco in a water-pipe reduces the amount of tar you inhale, compared to smoking cigarettes?**

- 1            Yes
- 2            No  
              DK, RF

*Coverage:*            *Respondents who have ever tried smoking tobacco in a water-pipe*

**TP\_Q088**      **Do you believe that smoking tobacco in a water-pipe reduces the risk to your health, compared to smoking cigarettes?**

- 1            Yes
- 2            No  
              DK, RF

*Coverage:*            *Respondents who have ever tried smoking tobacco in a water-pipe*

**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*

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- 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*

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**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*

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**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*

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**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 reached?**

- 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*

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**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 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 .....(Go to LF\_END)
- 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

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**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



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**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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