



SANTÉ QUÉBEC

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**Everyday,
now and then
or never?**

**Québec Survey
of Tobacco Use
in High School
Students**

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I nstructions



Thousands of high school students across Québec are participating in this important survey on smoking.

There are NO RIGHT OR WRONG ANSWERS. This IS NOT an exam.

DO NOT WRITE YOUR NAME ON THIS QUESTIONNAIRE.
That way, no one in your school will know what answers you gave.

We would like you to read each question carefully.

Give only one answer to each question, unless indicated otherwise.

Indicate your answer by circling the number or filling in the blank where appropriate.

Example A

15. Have you ever smoked a whole cigarette ?

Yes 1
No 2

Example B

16. How old were you when you smoked your first whole cigarette?

I was _____ years old
I don't know 98

General Information

1. What grade are you in?

Secondary I	1
Secondary II	2
Secondary III	3
Secondary IV	4
Secondary V	5

2. How old are you?

11 years old or less	1
12 years old	2
13 years old	3
14 years old	4
15 years old	5
16 years old	6
17 years old	7
18 years old or more	8

3. Are you?

A boy	1
A girl	2

4. What language do you speak most often at home?

L Mark one only

French	01
English	02
Italian	03
Greek	04
Spanish	05
Chinese	06
Vietnamese	07
Armenian	08
Arabic	09

Other
→ (please, specify.) _____

5. To which ethnocultural group do you believe you belong? (for example : Chilean, Lebanese, Vietnamese, Quebecer...)

6. Where were you born?

Québec	01
Other province of Canada	02
Outside Canada	
↳ (specify the country)_____	

7. Where was your father born?

Québec	01
Other province of Canada	02
Outside Canada	
↳ (specify the country)_____	
I don't know	98

8. Where was your mother born?

Québec	01
Other province of Canada	02
Outside Canada	
↳ (specify the country)_____	
I don't know	98

9. Do you have a job (outside of the home) for which you get paid (for example: babysitting, delivering newspapers, working in a store, etc.)?

No	1	% Go to question 10
Yes	2	
↳ 9a. Does the place where you work restrict smoking?		
There is no restriction	1	
Smoking is allowed only in some areas	2	
Smoking is allowed anywhere	3	
I don't know	8	

10. On average, how much money do you have a week for personal expenses? (Include money from jobs, allowances or any other source.)

- \$0 1
- \$1 to \$10 2
- \$11 to \$20 3
- \$21 to \$30 4
- \$31 to \$40 5
- \$41 to \$50 6
- \$51 to \$100 7
- More than \$100 8

11. How much would you like to weigh right now? Would it be...

- Less than you weigh now 1
- Same as you weigh now 2
- More than you weigh now 3
- I don't know 8

12. In the last 30 days, have you...

L Answer to each question

	Yes	No	
A. Smoked cigars	1	2	
B. Smoked pipe tobacco	1	2	I don't know what it is
C. Used chewing tobacco	1	2	±
D. Used snuff (tobacco powder that people sniff)	1	2	±

13. Have you ever tried...

L Answer to each question

	Yes	No	
A. Smoking cigars	1	2	
B. Smoking pipe tobacco	1	2	I don't know what it is
C. Using chewing tobacco	1	2	±
D. Using snuff (tobacco powder that people sniff)	1	2	±

Smoking and you

14. Have you ever tried cigarette smoking, even just a few puffs?

Yes 1
No 2 % **Go to question 26**

15. Have you ever smoked a whole cigarette ?

Yes 1
No 2 % **Go to question 26**

16. How old were you when you smoked your first whole cigarette?

I was _____ years old
I don't know 98

17. Have you smoked 100 or more cigarettes in your life? (100 cigarettes = 4 packs of 25)

Yes 1
No 2
I don't know 8

18. Have you ever smoked every day for at least 30 days in a row?

Yes 1
No 2
I don't know 8

19. How old were you when you first smoked every day for at least 30 days in a row?

I was _____ years old
I have never done this 97
I don't know 98

The next two questions are about cigarettes smoking in the past 30 days

20. During the past 30 days, did you smoke cigarette, even just a few puffs?

- No, I didn't smoke in the last 30 days 0
- Yes, everyday 1
- Yes, almost everyday 2
- Yes, a few times (a few days) 3

21. On the days you smoked, how many cigarettes did you usually smoke?

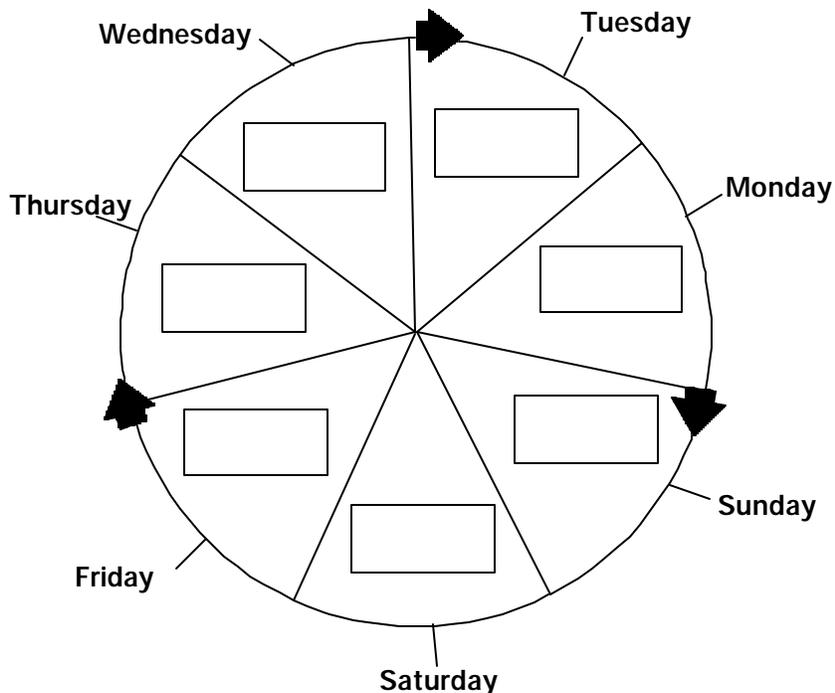
- I didn't smoke in the last 30 days 0
- Less than one cigarette per day (a few puffs per day) 1
- 1 to 2 cigarettes per day 2
- 3 to 5 cigarettes per day 3
- 6 to 10 cigarettes per day 4
- 11 to 20 cigarettes per day 5
- More than 20 cigarettes per day 6

22. Thinking back over the last 7 days, how many cigarettes did you smoke on each day?

I didn't smoke over the last 7 days 97

OR

If you smoked, find yesterday on the wheel and follow the arrows to the preceding days, writing the number of cigarettes in the boxes. For the days you didn't smoke, put a 0 in the box.



23. Why did you start smoking?

L Mark (✓) all that apply

- A. Curiosity - to try it ±
- B. Because my friends smoked ±
- C. Because my brother(s)/sister(s) smoked ±
- D. Because my girlfriend/boyfriend smoked ±
- E. To relax or reduce stress ±
- F. To keep my weight down ±
- G. To have something to do ±
- H. To appear more adult, to look older ±
- I. To look stylish ("cool," "sexy," etc.) ±
- J. Other

 (Please specify) _____

I don't smoke ±

Access to cigarettes

24. How do you usually get your cigarettes?

L Circle only one answer

- I don't smoke 00
- I buy them myself 01
- I have someone buy them for me 02
- My father or mother gives them to me 03
- My brother or sister gives them to me 04
- A friend gives them to me 05
- I take them from a pack of someone I know 06
- Other

 (Please specify) _____

25. Where do you usually buy your cigarettes?

L Circle only one answer

- I don't buy cigarettes 0
- In a convenience store (*dépanneur*) 1
- At a gas station 2
- At another type of store 3
- From a friend or someone else 4

Other
 (Please specify.) _____

26. Has anyone asked you for your age when you have bought cigarettes from a store or other type of business for yourself or for someone else?

- I don't buy cigarettes in a store or other type of business 0
- Often 1
- Rarely 2
- Never 3

27. Has anyone asked you for ID (an identification card) when you have bought cigarettes in a store or other type of business for yourself or for someone else?

- I don't buy cigarettes in a store or other type of business 0
- Often 1
- Rarely 2
- Never 3

28. Has anyone in a store ever refused to sell you cigarettes because of your age?

- I don't buy cigarettes in a store or other type of business 0
- Often 1
- Rarely 2
- Never 3

Attitudes and opinions

29. We are interested in knowing what you think about some of the things that have been said about cigarette smoking.

	Yes	No	Don't know
A. Do you think people have to smoke for many years before it will hurt their health?	1	2	8
B. Do you think smokers can quit anytime they want?	1	2	8
C. Do you think quitting smoking reduces health damage even after many years of smoking?	1	2	8
D. Do you think people can become addicted to tobacco?	1	2	8
E. Do you think tobacco smoke can be harmful to the health of <u>non-smokers</u> ?	1	2	8

30. Do you think that smoking cigarettes are bad for your health?

I don't smoke	0
Yes	1
No	2

31. In your opinion, what percentage of young people smoke cigarettes?

Less than 25%	1
Between 25% and 40%	2
Between 41% and 75%	3
More than 75%	4

Exposure to cigarette smoke

32. Do you think that second-hand cigarette smoke can cause health problems for NON-SMOKERS? ("Second-hand cigarette smoke" is smoke from other people's cigarettes)

	Yes	No	Don't know
A. Lung cancer	1	2	8
B. Asthma	1	2	8
C. Other lung diseases (bronchitis, emphysema....) ...	1	2	8
D. Arthritis	1	2	8
E. Heart disease	1	2	8

33. When people are smoking around you, are you bothered by their cigarette smoke...

- A lot 1
- Quite a bit 2
- A little bit 3
- Not at all 4

34. Have you been in the following situations?

	Often	Sometimes	Never
A. You tell an adult that his/her cigarette smoke is bothering you	1	2	3
B. You tell someone your own age that his/her cigarette smoke is bothering you	1	2	3
C. You avoid going to certain places because the cigarette smoke bothers you	1	2	3

35. How often are you exposed to second-hand cigarette smoke?

(If you smoke, do not include the smoke from your own cigarette. Refer only to second-hand smoke, i.e. smoke from other people's cigarettes).

Circle you answer to each question

	EVERY DAY	ALMOST EVERY DAY	ABOUT ONCE A WEEK	ABOUT ONCE A MONTH	LESS THAN ONCE A MONTH	NEVER	
A. In your home	1	2	3	4	5	6	
B. In the school building	1	2	3	4	5	6	
C. In the schoolyard	1	2	3	4	5	6	
D. At work	1	2	3	4	5	6	I don't work ±
E. Inside places where you spend free time (arenas, shopping malls, arcades, etc.)	1	2	3	4	5	6	

Quitting smoking

If you have never smoked cigarette % Go to question 43

36. Have you tried to stop smoking in the last 12 months?

- I didn't smoke or have only smoked a few times 0 % **Go to question 43**
- Yes 1
- No 2 % **Go to question 42**

37. How many times have you tried to stop smoking in the last 12 months?

_____ number of times I have tried to stop smoking in the last 12 months.

38. The last time you try to stop, how difficult was it?

- Very difficult 1
- Fairly difficult 2
- Not very difficult 3
- Not at all difficult 4

39. The last time you tried to stop, how long did you stay off cigarettes?

- Less than a day 1
- 1 to 2 days 2
- 3 to 6 days 3
- Between 1 week and 1 month 4
- Between 1 month and 3 months 5
- Between 3 and 6 months 6
- More than 6 months 7

40. What is the main reason why you stop smoking?

L Circle only one answer

- For my health 01
- To get into better shape to do sports 02
- Because my girlfriend/boyfriend didn't smoke 03
- I didn't like it anymore 04
- Cigarettes gave me bad breath 05
- They cost too much 06
- Pressure from my family or friends 07
- It was a challenge (or someone dared me to quit) 08

Other
 (Please specify) _____

41. What is the main reason you started smoking again?

L Circle only one answer

- I haven't started smoking again 00% **Go to question 43**
- Because it is difficult to stop 01
- Because my friends smoked 02
- Because my girlfriend/boyfriend smoked 03
- Because I didn't want to gain weight 04
- Because I like smoking 05
- Because I was stressed 06

Other
 (Please specify) _____

42. Do you intend to stop smoking...

	Yes	No	Don't know
A. In the next 30 days?	1	2	8
B. In the next 6 months?	1	2	8

Family, Friends and school

43. Who do you live with?

L Circle only one answer

- With my father and mother 1
- Half the time with my father, the other half
with my mother 2
- With my mother only 3
- With my mother and her spouse/boyfriend 4
- With my father only 5
- With my father and his spouse/girlfriend 6

Other
 (Please specify) _____

44. In your family, do the following people smoke cigarettes?

L Mark (/) all that apply

- A. No one smokes cigarettes at home ±
- B. Your mother ±
- C. Your father ±
- D. Your father's spouse/girlfriend ±
- E. Your mother's spouse/boyfriend ±
- F. Your sister(s) ±
- G. Your brother(s) ±

H. Other
 (Please specify) _____

45. Are you allowed to smoke at home?

- I don't smoke 0
- Yes 1
- No 2

46. Would you say that your family is...

- Rich 1
- Neither rich nor poor 2
- Poor 3

47. How many of your friends (boys and girls) smoke cigarettes?

- None 1
- A few 2
- Most 3
- All 4

48. At school, do the smoking regulations allow students to smoke in the following areas?

	Yes	No	Don't know
A. In the schoolyard	1	2	8
B. In certain places inside the school	1	2	8

49. Do most students obey these regulations?

- There are no regulations 0
- Yes 1
- No 2
- Don't know 8

50. Do the teachers in your school have a room where they are allowed to smoke?

- Yes 1
- No 2
- Don't know 8

Thank for your participation

If you have any comments or suggestions about this questionnaire, please write them in the space provided below.
