



2015 Alaska Supplemental BRFSS Survey

Contents

Contents	2
Cell phone survey intro	6
Interviewer’s Script.....	6
Section 1: Health Status	9
Section 2A: Healthy Days — Health-Related Quality of Life	9
Section 2B: Mental Health-related questions	10
Section 3: Health Care Access	10
Section 6: Tobacco	11
6A: Cigarette Use	11
6B: Cigarette Purchase Patterns	12
6C: Cessation	14
6D: Stages of Readiness (for Quitting Smoking).....	16
6E: Health Professional Ask and Advise	16
6F: <i>Cessation Benefit question</i>	20
6G: Other Smoked Tobacco Products.....	20
6H: Electronic Cigarette Use - Updated	23
6I: Smokeless Tobacco Use.....	25
6J: Smokeless Tobacco Cessation	27
6K: Recent Smokeless Tobacco Products and Dual Use	30
6L: <i>Secondhand Smoke Exposure and Policies</i>	32
6M: <i>Exposure in Cars</i>	35
6N: <i>Attitudes about Secondhand Smoke</i>	35
6O: <i>Social Norms and Secondhand Smoke</i>	37
6P: <i>Alaska Quit Line</i>	41
Section 7A: Demographics	42
Section 7B: Occupation and Industry (NIOSH)	47
Section 7C: Demographics (continued).....	48
Section 8: Alcohol Consumption.....	49
Section 9: Marijuana and Other Drugs	51
Section 10: Alcohol and Drug Treatment.....	53
Section 11: Diabetes and Pre-Diabetes	54
Closing Section.....	55

2015 Interviewer's Script

HELLO, I am calling for the (health department) . My name is (name) . This project is being conducted by the health department to gather information about the health of (state) residents. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.

Is this (phone number) ?

If "No"

Thank you very much, but I seem to have dialed the wrong number. It's possible that your number may be called at a later time. **STOP**

Is this a private residence?

READ ONLY IF NECESSARY: "By private residence, we mean someplace like a house or apartment."

Yes [Go to state of residence]
No [Go to college housing]

No, business phone only

If "No, business phone only".

Thank you very much but we are only interviewing persons on residential phones lines at this time.

STOP

College Housing

Do you live in college housing?

READ ONLY IF NECESSARY: "By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university."

Yes [Go to state of residence]
No

If "No",

Thank you very much, but we are only interviewing persons who live in a private residence or college housing at this time. STOP.

State of Residence

Do you reside in ____ (state) ____ ?

Yes **[Go to Cellular Phone]**
No

If "No"

Thank you very much, but we are only interviewing persons who live in the state of _____ at this time. **STOP**

Cellular Phone

Is this a cellular telephone?

INTERVIEWER NOTE: Telephone service over the internet counts as landline service (includes Vonage, Magic Jack and other home-based phone services).

Read only if necessary: "By cellular (or cell) telephone we mean a telephone that is mobile and usable outside of your neighborhood."

If "Yes"

Thank you very much, but we are only interviewing by land line telephones and for private residences or college housing. **STOP**

No

CATI NOTE: IF (College Housing = Yes) continue; otherwise go to Adult Random Selection

Adult

Are you 18 years of age or older?

- 1 **Yes, respondent is male** **[Go to Page 6]**
- 2 **Yes, respondent is female** **[Go to Page 6]**
- 3 **No**

If "No",

Thank you very much, but we are only interviewing persons aged 18 or older at this time. STOP

Adult Random Selection

I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, including yourself, are 18 years of age or older?

___ Number of adults

If "1,"

Are you the adult?

If "yes,"



Then you are the person I need to speak with. Enter 1 man or 1 woman below (Ask gender if necessary). **Go to page 6.**

If "no,"

Is the adult a man or a woman? Enter 1 man or 1 woman below. May I speak with **[fill in (him/her) from previous question]**? **Go to "correct respondent" on the next page.**

How many of these adults are men and how many are women?

___ Number of men

___ Number of women

The person in your household that I need to speak with is _____.

If "you," go to page 6.



Cell phone survey intro

Interviewer's Script

HELLO, I am calling for the (health department) . My name is (name) . This project is being conducted by the health department to gather information about the health of (state) residents. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.

Is this a safe time to talk with you?

Yes **[Go to phone]**

No

If "No",

Thank you very much. We will call you back at a more convenient time. ([Set appointment if possible]) **STOP**

Phone

Is this (phone number) ?

Yes **[Go to cellular phone]**

No **[Confirm phone number]**

If "No",

Thank you very much, but I seem to have dialed the wrong number. It's possible that your number may be called at a later time. **STOP**

Cellular Phone

Is this a cellular telephone?

READ ONLY IF NECESSARY: "By cellular telephone, we mean a telephone that is mobile and usable outside of your neighborhood."

Yes **[Go to adult]**

No

If "No",

Thank you very much, but we are only interviewing cell telephones at this time. **STOP**

Adult

Are you 18 years of age or older?

1 **Yes, respondent is male** **[Go to Private Residence]**

2 **Yes, respondent is female** **[Go to Private Residence]**

3 **No**



If "No",

Thank you very much, but we are only interviewing persons aged 18 or older at this time. **STOP**

Private Residence

Do you live in a private residence?

READ ONLY IF NECESSARY: "By private residence, we mean someplace like a house or apartment."

Yes [Go to state of residence]
No [Go to college housing]

College Housing

Do you live in college housing?

READ ONLY IF NECESSARY: "By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university."

Yes
No

If "Yes", do not ask NADULT Questions

If "No",

Thank you very much, but we are only interviewing persons who live in a private residence or college housing at this time. **STOP**

State of Residence

Are you a resident of _____ (state) _____?

Yes [Go to landline]
No [Go to state]

State

In what state do you live?

_____ ENTER FIPS STATE

Landline

Do you also have a landline telephone in your home that is used to make and receive calls?

READ ONLY IF NECESSARY: "By landline telephone, we mean a "regular" telephone in your home that is used for making or receiving calls." Please include landline phones used for both business and personal use."



Interviewer Note: Telephone service over the internet counts as landline service (includes Vonage, Magic Jack and other home-based phone services.).

Yes [Go to cellular phone usage]
No [Go to Core]
Don't know/ Not Sure [Go to Core]
Refused [Go to Core]

How many members of your household, including yourself, are 18 years of age or older?

___ Number of adults

Survey Sections

To correct respondent:

I will not ask for your last name, address, or other personal information that can identify you. You do not have to answer any question you do not want to, and you can end the interview at any time. Any information you give me will be confidential. If you have any questions about the survey, please call **1-877-655-2793**

Section 1: Health Status

1.1 Would you say that in general your health is—

Please read:

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair

Or:

- 5 Poor

Do not read:

- 7 Don't know / Not sure
- 9 Refused

Section 2A: Healthy Days — Health-Related Quality of Life

2.1 Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

- — Number of days
- 8 8 None
- 7 7 Don't know / Not sure
- 9 9 Refused

2.2 Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

- — Number of days
- 8 8 None **[If Q2.1 and Q2.2 = 88 (None), go to next section]**
- 7 7 Don't know / Not sure
- 9 9 Refused

2.3 **[REVISED; ask if Q2.1<=30]** During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

- — Number of days
- 8 8 None
- 7 7 Don't know / Not sure
- 9 9 Refused

2.4 [NEW; ask if Q2.2<=30] During the past 30 days, for about how many days did **poor mental health or emotional problems** keep you from doing your usual activities, such as self-care, work, or recreation?

- — Number of days
- 8 8 None
- 7 7 Don't know / Not sure
- 9 9 Refused

Section 2B: Mental Health-related questions

2.5 During the past 12 months, have you received treatment, medication, or counseling from a doctor or other health professional for any type of mental health condition or emotional problem?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

Section 3: Health Care Access

3.1 Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, government plans such as Medicare, Native Health Service or Indian Health Service?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

3.2 Do you have one person you think of as your personal doctor or health care provider?

If "No," ask: "Is there more than one, or is there no person who you think of as your personal doctor or health care provider?"

- 1 Yes, only one
- 2 More than one
- 3 No
- 7 Don't know / Not sure
- 9 Refused

3.3 Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

3.4 About how long has it been since you last visited a doctor for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 5 years (2 years but less than 5 years ago)
- 4 5 or more years ago

- 7 Don't know / Not sure
- 8 Never
- 9 Refused

Section 6: Tobacco

6A: Cigarette Use

6.1 Have you smoked at least 100 cigarettes in your entire life?

NOTE: 5 packs = 100 cigarettes

- 1 Yes
- 2 No **[Skip to 6.22]**

Do not read

- 7 Don't know / Not sure **[Skip to 6.22]**
- 9 Refused **[Skip to 6.22]**

INTERVIEWER NOTE: "For cigarettes, do not include: electronic cigarettes (e-cigarettes, NJOY, Bluetip), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs), or marijuana."

6.2 Do you now smoke cigarettes every day, some days, or not at all?

- 1 Every day
- 2 Some days
- 3 Not at all **[Skip to 6.11]**

Do not read

- 7 Don't know / Not sure **[Skip to 6.22]**
- 9 Refused **[Skip to 6.22]**

6.3 During the past 30 days, on how many days did you smoke cigarettes?

Do not read

- __ 0-30 Number of Days **[If 6.3 = 0, probe for a number; if answer is still "0", then Skip to 6.6]**
- 88 None **[Skip to 6.05]**
- 77 Don't Know / Not Sure **[Skip to 6.05]**
- 99 Refused **[Skip to 6.05]**

[Note different wording depending on whether respondent is daily or some days smoker.]

6.4 [if 6.2=2 add: "On the days when you smoked during the past 30 days"] On the average, about how many cigarettes did you smoke a day?

Do not read

- 0-180 Number of Cigarettes
- 666 Less than one cigarette a day
- 777 Don't Know / Not Sure
- 999 Refused

[Note different wording depending on whether respondent is daily or some days smoker.]

6.5 if 6.2=2 add: "On the days that you smoke", How soon after you wake up do you usually smoke your first cigarette? Would you say

- 1 Within 30 minutes
- 2 31 to 60 minutes
- 3 More than 60 minutes

Do not read

- 7 Don't know/ Not sure
- 9 Refused

6B: Cigarette Purchase Patterns

6.6 Where do you usually buy cigarettes?

- 1 In your community
- 2 In another community in Alaska
- 3 In a community outside Alaska **[Skip to 6.8]**
- 4 Using the Internet **[Skip to 6.10]**
- 5 Using a mail-order source or an 800 number **[Skip to 6.10]**

Do not read

- 7 Don't Know / Not Sure **[Skip to 6.9]**
- 9 Refused **[Skip to 6.9]**

Ask of those who usually buy in Alaska (6.6 = 1 or 2)

6.7 In what type of store do you usually buy cigarettes?

- 1 Convenience stores/gas stations **[Skip to 6.9]**
 - 2 Supermarkets **[Skip to 6.9]**
 - 3 Liquor or drug stores (pharmacies) **[Skip to 6.9]**
 - 4 Tobacco discount stores **[Skip to 6.9]**
 - 5 Other discount stores, such as Wal-Mart **[Skip to 6.9]**
 - 6 Military commissaries **[Skip to 6.9]**
 - 7 Other type of store (**specify**) **[Skip to 6.9]**
-
- [STORCIGT20]
 77 Don't know **[Skip to 6.9]**
 99 Refused **[Skip to 6.9]**

Ask of those who usually buy outside Alaska (6.6=3)

6.8 From which state do you usually buy them? (**open-ended answer**)

Ask of those who usually buy in Alaska or outside Alaska (Ask if 6.6 = 1, 2, 3, 7 or 9 [exclude those who reported that they usually purchase by mail-order or Internet])

6.9 In the last year, have you bought cigarettes over the Internet, or using a mail-order source?

- 1 Yes
- 2 No **[Skip to 6.11]**

Do not read

- 7 Don't Know / Not Sure **[Skip to 6.11]**
- 9 Refused **[Skip to 6.11]**

Ask of those who usually buy over the Internet/mail order [6.6 = 4 or 5] or have done so in the last year [6.9 = 1]

6.10 In the last three months, about how many cartons or packs of cigarettes have you bought through the Internet or using a mail-order source?

___ ___ ___ number of (1 = packs, 2 = cartons)

Do not read

- 7777 Don't Know / Not Sure
- 8888 None
- 9999 Refused

Initiation and Duration of Smoker Status

Ask of Current and Former Smokers (6.2=1,2,3)

6.11 How old were you when you first started smoking cigarettes regularly?

___ ___ **Code age in years (1-100)**

- 888 Never smoked regularly (*don't read*)
- 777 Don't Know / Not Sure
- 999 Refused

6.12 Around this time 12 months ago, were you smoking cigarettes every day, some days, or not at all?

- 1 Every Day
- 2 Some Days
- 3 Not at all

Do not read

- 7 Don't Know/Not Sure
- 9 Refused

If 06.02 = 3 and 06.11 = 888 then go to 6.22

Ask of Former Smokers (6.1 = 1 and 6.2 = 3) else skip to 6.14: REVISED ANSWER CATEGORIES

6.13 (NOTE for CATI Programming): *this is different from Core 8.4, but should be same as state-added item in Standard survey*

About how long has it been since you last smoked cigarettes regularly? Was that...

INTERVIEWER NOTE: Pause between each response category to allow respondent to answer "Yes" or "No" to each category.

INTERVIEWER NOTE: If respondent refuses at any level, code 99 (Refused). If respondent answers "Don't know" or "Not sure" at any level, ask about the next level. If respondent answers "Don't know" or "Not sure" to two levels in a row, code 77 (Don't know/Not sure).

Please read:

- 1 0 10 years or more (If "No," ask 09; if "Yes," code 10)
- 0 9 At least 5 years but less than 10 years ago (If "No," ask 08; if "Yes," code 09)
- 0 8 More than a year ago (but less than 5 years ago) (If "No," ask 07; if "Yes," code 08)
- 0 7 About 1 year ago

[Interviewer note: Can add, "That is, roughly 12 months" if needed]

- 0 6 At least 6 months but less than one year ago (If "No," ask 06; if "Yes," code 07)
- 0 5 At least 3 months but less than 6 months ago (If "No," ask 05; if "Yes," code 06)
- 0 4 At least 30 days ago but less than 3 months ago (If "No," ask 04; if "Yes," code 05)
- 0 3 At least 7 days ago but less than 30 days ago (If "No," ask 03; if "Yes," code 04)
- 0 2 At least 24 hours ago but less than 7 days ago (If "No," ask 02; if "Yes," code 03)
- 0 1 Within the past 24 hours

Do not read:

- 7 7 Don't know / Not sure **[Skip to 6.22]**
- 9 9 Refused **[Skip to 6.22]**

6C: Cessation - Ask of Current Smokers (6.2 = 1 or 2)

6.14 During the past 12 months have you stopped smoking for one day or longer because you were trying to quit smoking?

- 1 Yes
- 2 No **[Skip to 6.19]**
- Do not read**
- 7 Don't know / Not sure **[Skip to 6.19]**
- 9 Refused **[Skip to 6.19]**

6.15 How many times during the past 12 months have you stopped smoking because you were trying to quit smoking?

Interviewer note: If R says “none” go back and ask previous question C06Q14.

___ 1 -400 times
 777 Don't know/Not sure
 999 Refused

6.16 During the past 12 months, what is the longest length of time you stopped smoking because you were trying to quit smoking?

Do not read

1__ days
 2__ weeks
 3__ months
 777 Don't know/Not sure
 999 Refused

<p>Methods of Quitting - Ask of Current Smokers who have tried to quit during past 12 months (6.14 = 1) or Former Smokers who quit within past 5 years (6.13 = 01-08)</p>
--

6.17 Former Smokers:
 When you quit smoking for good...

Current Smokers:
 The last time you tried to quit smoking...

Did you use the nicotine patch, nicotine gum, or any other medication to help you quit?

1 Yes
 2 No
Do not read
 7 Don't know / Not sure
 9 Refused

6.18 Former Smokers:
 When you quit smoking for good...

Current Smokers:
 The last time you tried to quit smoking...

Did you use any other assistance, such as classes or counseling?

1 Yes
 2 No
Do not read
 7 Don't know / Not sure
 9 Refused

[Former Smokers (6.1 = 1 and 6.2 = 3) skip to 6.22]

6D: Stages of Readiness (for Quitting Smoking)

Ask of Current Smokers (6.2 = 1 or 2)

- 6.19 [If 6.14>1] Would you like to quit smoking?
[If 6.14=1] Would you [still] like to quit smoking?

1 Yes
2 No [Skip to 6.22]

Do not read

7 Don't know / Not sure [Skip to 6.22]
9 Refused [Skip to 6.22]

- 6.20 Are you seriously considering stopping smoking within the next 6 months?

1 Yes
2 No [Skip to 6.22]

Do not read

7 Don't know / Not sure [Skip to 6.22]
9 Refused [Skip to 6.22]

- 6.21 Are you planning to stop smoking within the next 30 days?

1 Yes
2 No

Do not read

7 Don't know / Not sure
9 Refused

6E: Health Professional Ask and Advise

Ask 6.22 of All Respondents

- 6.22 In the past 12 months, have you seen a doctor, nurse, or other health professional to get any kind of care for yourself?

1 Yes
2 No [skip to 6.25]

Do not read

7 Don't know / Not sure [skip to 6.25]
9 Refused [skip to 6.25]

Ask of Current Smokers (6.2 = 1 or 2)

- 6.23 In the past 12 months, has a doctor, nurse, or other health professional advised you to quit smoking?

1 Yes [Skip to 6.29]
2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

Ask of Never Smokers (6.1 = 2, 7, or 9), Former Smokers (6.1 = 1 and 6.2 = 3), and Current Smokers who were not advised to quit (6.23 = 2, 7, or 9)

6.24 During the past 12 months, did any doctor or other health professional ask if you smoke?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

If 6.11 = 888 then go to 6.30

Ask of Former Past Year Smokers (6.1 = 1 and 6.2 = 3 and 6.13 < 08)

6.25 Now we would like to ask you some questions about the 12 months prior to when you quit smoking. In the 12 months prior to your quitting, did any doctor, dentist, or other health professional talk to you about your smoking?

- 1 Yes [go to 6.27]
- 2 No

Do not read

- 7 Don't Know/Not Sure
- 9 Refused [go to 6.30]

6.26 [Ask if If 6.25=2 or 6.25=7]

Did you have a health visit to get any kind of care for yourself, in the 12 months prior to when you quit smoking?

- 1 Yes
- 2 No

Do not read

- 7 Don't Know/Not Sure
- 9 Refused

Ask of Former Past Year Smokers who talked to provider about smoking (6.25 = 1)

6.27 In the 12 months prior to your quitting, did any doctor, dentist, or other health professional advise you to quit smoking?

- 1 Yes
- 2 No [skip to 6.30]

Do not read

- 7 Don't Know/Not Sure [skip to 6.30]
- 9 Refused [skip to 6.30]

6.28

In the 12 months prior to your quitting, when a doctor or other health professional advised you to quit smoking, did they also do any of the following?

(a) Prescribe or recommend a patch, nicotine gum, nasal spray, an inhaler, or pills such as Zyban?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

(b) Suggest that you set a specific date to stop smoking?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

(c) Suggest that you use a smoking cessation class, program, quit line, or counseling?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

(d) Provide you with booklets, videos, or other materials to help you quit smoking on your own?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

(e) Follow up with you to discuss your quit attempt or your smoking?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

Additional Interviewer Notes for 6.28e: probe if needed: "By 'follow up' I mean did the provider schedule another appointment or phone call to talk about how you were doing with your quit attempt or to talk about getting ready to quit?"

Ask of Current Smokers advised to quit (6.23 = 1)

6.29 In the past 12 months, when a doctor or other health professional advised you to quit smoking, did they also do any of the following?

(a) Prescribe or recommend a patch, nicotine gum, nasal spray, an inhaler, or pills such as Zyban?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

(b) Suggest that you set a specific date to stop smoking?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

(c) Suggest that you use a smoking cessation class, program, quit line, or counseling?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

(d) Provide you with booklets, videos, or other materials to help you quit smoking on your own?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

(e) Follow up with you to discuss your smoking or quit attempt?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

Additional Interviewer Notes for 6.29e: probe if needed: "By 'follow up' I mean did the provider schedule another appointment or phone call to talk about how you were doing with your quit attempt or to talk about getting ready to quit?"

6F: Cessation Benefit question –
Ask of respondents who have some health insurance coverage (3.1=1) skip if 3.1 = 2,7,9

6.30 Does your health insurance coverage pay for the cost of any help to quit using tobacco, such as a stop-smoking or stop-chewing program, or nicotine patches, pills, or other medications?

[QUITINS]

- 1 Yes
- 2 No

Do not read

- 7 Don't know/Not sure
- 9 Refused

6G: Other Smoked Tobacco Products

[first asked in 2014]

Ask of All Respondents

6.31 This next question is about other types of smoked tobacco that you light and smoke. **Have you ever** tried smoking **even one or two puffs of** any of these types of tobacco: cigars, cigarillos, bidis, or tobacco in a pipe or tobacco in a hookah or water pipe?

Interviewer note: (If respondent is unsure what these words mean)
Examples of full-sized cigars would be Dutch Master, White Owl, King Edward, Muriel. Examples of smaller-sized cigars or cigarillos would be Swisher Sweets, Cheyenne or Winchester.
BEE-DEES are flavored cigarettes with brown wrappers from India.
A water pipe is also called a hookah.
Do not include electronic cigarettes.

- 1 Yes
- 2 No [Skip to 6.38]

Do not read

- 7 Don't know/Not sure [Skip to 6.38]
- 9 Refused [Skip to 6.38]

6.32 Which of these types of tobacco have you ever smoked?

Interviewer note: Repeat list if needed.

If respondent indicates he/she is unsure what these words mean: Examples of full-sized cigars would be Dutch Master, White Owl, King Edward, Muriel. Examples of smaller-sized cigars or cigarillos would be Swisher Sweets, Cheyenne or Winchester.

BEE-DEES, flavored cigarettes with brown wrappers from India.

A water pipe is also called a hookah.

CHECK ALL THAT APPLY

- 1 Yes, full-sized cigars
- 2 Yes, cigarillos or small cigars
- 3 Yes, bidis
- 4 Yes, tobacco in a pipe
- 5 Yes, tobacco in a hookah or water pipe
- 6 Yes, other: _____ [OTHSMKO]
- 88 No (none) (verify)

Interviewer note: If R says "none" go back and ask previous question C06Q31

Do not read

- 77 Don't know/Not sure [Skip to 6.38]
- 99 Refused [Skip to 6.38]

Interviewer note: Do not include electronic cigarettes or e-cigarettes in "Other"; if this is the only product mentioned, code as 88 and go back to 6.31 to change to 6.31=2.

Ask of Respondents who said yes to "Ever" questions (if 6.32=1 thru 66, any)

6.33 During the past 30 days, have you smoked [this type/any of these types] of tobacco?

CATI Note: Limit text and choices to tobacco types listed in 6.32

CHECK ALL THAT APPLY

- 1 Yes, full-sized cigars
- 2 Yes, cigarillos or small cigars
- 3 Yes, bidis
- 4 Yes, tobacco in a pipe
- 5 Yes, tobacco in a hookah or water pipe
- 6 Yes, other: _____
- 88 No (none) [skip to 6.38]

Do not read

- 77 Don't know/Not sure [skip to 6.38]
- 99 Refused [skip to 6.38]

Ask only if respondent said they smoked tobacco in a hookah in past 30 days (6.33 = 5)

6.34 During the past 30 days, on how many days did you smoke tobacco in a hookah or water pipe?

Do not read

__ 1-30 Number of Days

Interviewer note: If R says "none" go back and ask previous question C06Q 33

- 77 Don't Know / Not Sure
- 99 Refused

Ask only if respondent said they smoked tobacco in a hookah in past 30 days (6.33 = 5)

6.35 During the past 30 days, where did you smoke tobacco in a hookah or water pipe?

CHECK ALL THAT APPLY

- 1 At a smoking establishment
- 2 At a bar, lounge or restaurant
- 3 At home
- 4 At another private location (other person's residence or property)
- 5 Other place: _____

Do not read

- 7 Don't know / Not sure
- 9 Refused

Ask only if respondent said they EVER smoked tobacco in a hookah (6.32 = 5)

6.36 How old were you when you first started smoking tobacco in a hookah or water pipe?

__ __ **Code age in years (1-99)**

- 888 Never smoked regularly (*don't read*)
- 777 Don't Know / Not Sure
- 999 Refused

Ask only if respondent said they EVER smoked CIGARILLOS or SMALL CIGARS (6.32 = 2)

6.37 How old were you when you first started smoking cigarillos or small cigars ?

__ __ **Code age in years (1-99)**

- 888 Never smoked regularly (*don't read*)
- 777 Don't Know / Not Sure

6H: Electronic Cigarette Use - Updated

Ask of All Respondents

6.38 Now I'm going to ask about electronic vapor products, which include e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens.

Have you ever used an e-cigarette or other electronic vapor product?

Interviewer note: (If needed) Electronic vapor products are battery-operated nicotine devices that heat a liquid solution into a vapor which is inhaled. They can appear similar to smoking a cigarette, but do not involve the burning of tobacco. The heated vapor produced by an e-cigarette generally contains nicotine. Two examples of brands are Blu and NJOY.

- 1 Yes
- 2 No **[Skip to 6.45]**
- Do not read**
- 7 Don't know/Not sure **[Skip to 6.45]**
- 9 Refused **[Skip to 6.45]**

6.38a: Ask of no/don't know/refused to 6.38 (6.38=2, 7, 9)

Have you ever heard of e-cigarettes or electronic vapor products?

- 1 Yes (skip to 6.45)
- 2 No (skip to 6.45)
- 7 Don't know/Not sure (skip to 6.45)
- 9 Refused (skip to 6.45)

6.39 During the past 30 days, on how many days did you use an e-cigarette or other electronic vapor product?

Do not read

__ 0-30 Number of Days

- 88 None **[skip to 6.45]**
- 77 Don't Know / Not Sure **[skip to 6.45]**
- 99 Refused **[skip to 6.45]**

6.40 Where do you usually buy your electronic vapor products?

- 1 In your community
- 2 In another community in Alaska
- 3 In a community outside Alaska **[Skip to 6.42]**
- 4 Using the Internet **[Skip to 6.42]**
- 5 Using a mail-order source or an 800 number **[Skip to 6.42]**

Do not read

- 7 Don't Know / Not Sure
- 9 Refused

[Skip to 6.42]

[Skip to 6.42]

Ask 6.41 of those who usually buy in Alaska (6.40 = 1 or 2)

6.41 In what type of store do you usually buy electronic vapor products?

- 1 Convenience stores/gas stations
- 2 Supermarkets or discount stores such as Walmart
- 3 Drug stores or pharmacies
- 4 Liquor stores or tobacco shops
- 5 Vape shops
- 6 Military commissaries
- 7 Other (specify) _____ [STORVAPT]
- 77 Don't know
- 99 Refused

6.42 This question is about product choice. Do you usually use:

- 1 A refillable product with a reservoir or tank to fill
- 2 A rechargeable kit with replaceable cartridges
- 3 A disposable product
- or
- 4 Something else (specify) _____ [VAPECHCT]

Do not read

- 7 Don't know
- 9 Refused

Ask only if respondent is a current smoker who also currently uses e-cigs (6.2 = 1-2 AND (6.39>=1 & <77))

6.43 Earlier you said that you also smoke cigarettes. Do you ever use e-cigarettes in situations where you can't smoke or would prefer not to smoke conventional cigarettes?

Probe for which. DO NOT READ RESPONSES.

- 1 Yes
- 2 No
- 7 Don't know/Note sure
- 9 Refused

6.44 Do you currently use e-cigarettes because you are trying to quit smoking conventional cigarettes?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

6I: Smokeless Tobacco Use – all respondents

Current SLT use (REVISED QUESTION FROM CORE)

6.45 Do you CURRENTLY use chewing tobacco, snuff, Snus, or Iq'mik every day, some days, or not at all?

- 1 Every day
- 2 Some days
- 3 Not at all **[Skip to 6.47a]**

Do not read:

- 7 Don't know / Not sure **[Skip to 6.47a]**
- 9 Refused **[Skip to 6.47a]**

Additional Interviewer Notes: Snus (rhymes with 'goose')

NOTE: Snus (Swedish for snuff) is a moist smokeless tobacco, usually sold in small pouches that are placed under the lip against the gum.

NOTE ALSO: Iq'mik (also known as blackbull) is a form of smokeless tobacco that is chewed. It is made by mixing fire-cured tobacco leaves and “punk ash”, which is the ash generated by burning a fungus that grows on birch trees.

Current SLT use Type (REVISED QUESTION)

Ask if 6.45<3

6.46 Which smokeless tobacco products do you currently use? Chewing tobacco, snuff, Snus, or Iq'mik* (also known as Blackbull)? [Probe for which.]

CATI Note: All responses go to 6.47b

Interviewer note: If R says “none” go back and ask previous question C06Q42.

Check all that apply

- 1 Yes, chewing tobacco
- 2 Yes, snuff
- 3 Yes, Iq'Mik or Blackbull
- 4 Yes, Snus
- 5 Yes, other (specify) _____

Do not read

- 7 Don't know / Not sure
- 9 Refused

NOTE: Iq'mik (also known as blackbull) is a form of smokeless tobacco that is chewed. It is made by mixing fire-cured tobacco leaves and “punk ash”, which is the ash generated by burning a fungus that grows on birch trees.

INTERVIEWER NOTE: E-cigarettes are not included in “smokeless tobacco”; if this is the only product mentioned, go back to previous question C06Q42 and do recode=3.

Lifetime (former) SLT use Type (REVISED QUESTION)

Ask of all respondents

6.47 A – Asked of non-current smokeless users 6.45 = 3,7,9

6.47 B - CATI NOTE: AUTOFILL SMOKELESS TYPES FROM 6.46=1-5? If so, then revise question for current users this way:

Besides [types filled from 6.46]....? **DO NOT MARK OUT “OTHER”**

For 6.46=7,9, Wording for 6.47b is: **What types of smokeless tobacco products have you EVER used or tried?**

6.47A Have you EVER used or tried any smokeless tobacco products such as chewing tobacco, snuff, , Snus, or Iq'mik* (also known as Blackbull)? **Probe for which.**

Check all that apply

- 1 Yes, chewing tobacco
- 2 Yes, snuff
- 3 Yes, Iq'mik or Blackbull
- 4 Yes, Snus
- 5 Yes, other (specify) _____
- 6 No, None **[Skip to 6.59]**

Do not read

- 7 Don't know / Not sure
- 9 Refused

NOTE: Snus (Swedish for snuff) is a moist smokeless tobacco, usually sold in small pouches that are placed under the lip against the gum.

NOTE ALSO: Iq'mik (also known as blackbull) is a form of smokeless tobacco that is chewed. It is made by mixing fire-cured tobacco leaves and “punk ash”, which is the ash generated by burning a fungus that grows on birch trees.

6.47 B - Besides [fill smokeless types named in 6.46], have you ever used or tried any other smokeless tobacco products? [Probe for which.]

Check all that apply

- 1 Yes, chewing tobacco
- 2 Yes, snuff
- 3 Yes, Iq'Mik or Blackbull
- 4 Yes, Snus
- 5 Yes, other (specify) _____
- 6 No, None

Do not read

- 7 Don't know / Not sure
- 9 Refused

NOTE: Snus (Swedish for snuff) is a moist smokeless tobacco, usually sold in small pouches that are placed under the lip against the gum.

NOTE ALSO: Iq'mik (also known as blackbull) is a form of smokeless tobacco that is chewed. It is made by mixing fire-cured tobacco leaves and “punk ash”, which is the ash generated by burning a fungus that grows on birch trees.

Current SLT use –measure of Addiction Ask if 6.45<3

6.48 In how many of the past 30 days did you use smokeless tobacco products?

Do not read

__ __ Days

- 88 None
- 77 Don't know/not sure
- 99 Refused

6.49 On the days that you use smokeless tobacco, how soon after you wake up do you usually use smokeless tobacco for the first time? Would you say

- 1 Within 30 minutes**
- 2 31 to 60 minutes**
- 3 More than 60 minutes**

Do not read

- 7 Don't know/ Not sure**
- 9 Refused**

Age at Initiation – ask of Current and Former SLT users (Ask if 6.45<3 OR 6.46 <= 5, or 6.47a <=5)

6.50 How old were you when you first started using smokeless tobacco regularly?

__ __ Code age in years (1 – 100)

- 888 Never used smokeless tobacco regularly
- 777 Don't know/not sure
- 999 Refused

6J: Smokeless Tobacco Cessation - Ask of Current SLT Users (6.45 < 3)

6.451 During the past 12 months have you stopped using smokeless tobacco for one day or longer because you were trying to quit?

- 1 Yes
- 2 No **[Skip to 6.54]**

Do not read

- 7 Don't know / Not sure **[Skip to 6.54]**
- 9 Refused **[Skip to 6.54]**

6.52 How many times during the past 12 months have you stopped using smokeless tobacco because you were trying to quit?

Interviewer note: If R says “none” go back and ask previous question 6.51.

___ 1 -400 times
777 Don't know/Not sure
999 Refused

6.53 During the past 12 months, what is the longest length of time you stopped using smokeless tobacco because you were trying to quit?

Do not read

1__ days
2__ weeks
3__ months
777 Don't know/Not sure
999 Refused

6.54 **[If 6.51=1]** Would you [still] like to quit using smokeless tobacco?
[If 6.51>1] Would you like to quit using smokeless tobacco?

1 Yes
2 No **[Skip to 6.58]**

Do not read

7 Don't know / Not sure **[Skip to 6.58]**
9 Refused **[Skip to 6.58]**

6.55 Are you seriously considering quitting smokeless tobacco products within the next 6 months?

1 Yes
2 No **[Skip to 6.58]**

Do not read

7 Don't know / Not sure **[Skip to 6.58]**
9 Refused **[Skip to 6.58]**

6.56 Are you seriously considering quitting smokeless tobacco products within the next 30 days?

1 Yes
2 No

Do not read

7 Don't know / Not sure
9 Refused

If 6.50 = 888, AUTOFILL 6.57=1

Ask of Former Smokeless Tobacco Users (6.45 >= 3 and 6.47a <= 5)

6.57 About how long has it been since you last used smokeless tobacco regularly?

- 1 Never regularly used smokeless tobacco
- 2 Within the past month
- 3 Within the past 3 months
- 4 Within the past 6 months
- 5 Within the past year
- 6 Within the past 5 years

- 7 Within 10 years
- 8 10 or more years ago

Do not read

- 77 Don't know/Not sure
- 99 Refused

Ask of Current ST Users (6.45<3)

6.58 In the past 12 months, has any doctor, dentist or other health professional advised you to stop using smokeless tobacco?

- 1 Yes **[Skip to 6.60]**
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

Ask of Never ST users (6.45 = 3, 7, or 9 and 6.47a=6), Former ST users (6.47a<=5), and Current ST users NOT advised to quit (6.58 = 2, 7, or 9)

6.59 In the past 12 months, has any doctor, dentist or other health professional asked if you use smokeless tobacco products such as chewing tobacco, snuff, Snus, or Iq'mik?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

Interviewer note: Can add that Blackbull is a form of Iq'mik, if needed

Ask only if respondent is a current smoker who also currently uses smokeless (6.2 = 1-2 AND (6.45 <3))

6.60 How long have you used both cigarettes and smokeless tobacco?

- 1 For less than 1 month
- 2 For at least 1 month but less than 6 months
- 3 For at least 6 months but less than 1 year
- 4 For about a year
- 5 For more than a year but less than 5 years
- 6 For 5 years or more

Do not read

- 77 Don't know/Not sure
- 99 Refused

6K: Recent Smokeless Tobacco Products and Dual Use

[Revised/First asked in 2014]

Ask of All Respondents

6.61 My next question is about dissolvable tobacco products that have recently become available and don't have to be smoked. Have you ever used dissolvable tobacco products like orbs, strips or sticks?

Interviewer note: (If needed) Examples of dissolvable tobacco brands include Camel orbs, sticks or strips. Do not include medications or nicotine replacement treatment items that you got from a doctor or from the tobacco quit line. INTERVIEWER NOTE: E-cigarettes are not included in "dissolvable tobacco".

- 1 Yes
- 2 No **[Skip to 6.64]**

Do not read

- 7 Don't know/Not sure **[Skip to 6.64]**
- 9 Refused **[Skip to 6.61]**

Ask if 6.61=1 (Respondent says they have ever used dissolvable tobacco products)

6.62 Do you currently use dissolvable tobacco products like orbs, strips or sticks every day, some days, or not at all?

- 1 Every day
- 2 Some days
- 3 Not at all **[Skip to 6.64]**

Do not read:

- 7 Don't know / Not sure **[Skip to 6.64]**
- 9 Refused **[Skip to 6.64]**

Interviewer note: If respondent says they use rarely or not very often, code as "some days".

Ask only if respondent is a current smoker who also currently uses dissolvable tobacco products (6.2 = 1-2 AND 6.62<3)

6.63. How long have you used both cigarettes and dissolvable tobacco products?

- 1 For less than 1 month
- 2 For at least 1 month but less than 6 months
- 3 For at least 6 months but less than 1 year
- 4 For about a year
- 5 For more than a year but less than 5 years
- 6 For 5 years or more

Do not read

- 77 Don't know/Not sure
- 99 Refused

Ask only if respondent is a current smoker who also currently uses either smokeless or dissolvable tobacco products (6.2 = 1-2 AND (6.45 <3 or 6.62<3))

6.64 Do you ever use smokeless tobacco or dissolvable tobacco products instead of smoking conventional cigarettes?

INTERVIEWER NOTE: E-cigarettes are not “smokeless tobacco” or “dissolvable tobacco”.

Probe for which. DO NOT READ RESPONSES.

- 1 Yes, smokeless
- 2 Yes, dissolvable tobacco products
- 3 Yes, both
- 8 No [skip to 6.66]

- 7 Don't know/Note sure [skip to 6.66]
- 9 Refused [skip to 6.66]

6.65a-c Here are some reasons people might give for using smokeless tobacco or dissolvable tobacco. Please tell me whether each of these reasons is true for you.

Ask IF respondent is a dual user who said yes to 6.64 IF 6.64=1-3 AND 6.2 = 1-2 AND (6.45 <3 or 6.62<3)

a. I use [smokeless or dissolvable tobacco] in situations where smoking is not allowed.

- 1 Yes
- 2 No
- Do not read**
- 7 Don't know / Not sure
- 9 Refused

b. I use [smokeless or dissolvable tobacco] because I am trying to quit smoking cigarettes.

- | | |
|--------------------|-----------------------|
| 1 | Yes |
| 2 | No |
| Do not read | |
| 7 | Don't know / Not sure |
| 9 | Refused |

Ask IF respondent is a dual user of SLT and dissolvable IF 6.64=1-3 AND 6.2 = 1-2 AND 6.45 <3 AND 6.62<3

c. I use dissolvable tobacco because I am trying to quit smokeless tobacco.

- | | |
|--------------------|-----------------------|
| 1 | Yes |
| 2 | No |
| Do not read | |
| 7 | Don't know / Not sure |
| 9 | Refused |

6L: Secondhand Smoke Exposure and Policies – Ask of All Respondents

6.66 How many people, including you, who live in your household currently smoke cigarettes, cigars, or pipes?

- Do not read**
- | | |
|----|--|
| -- | Number of current smokers in household |
| 88 | No current smokers in household |
| 77 | Don't know/not sure |
| 99 | Refused |

6.67 In the past 30 days, has anyone, including yourself, smoked cigarettes, cigars, or pipes anywhere inside your home?

- | | |
|--------------------|-----------------------|
| 1 | Yes |
| 2 | No |
| Do not read | |
| 7 | Don't know / Not sure |
| 9 | Refused |

6.68 Which statement best describes the rules about smoking inside your home? Do not include decks, garages, or porches.

- 1 Smoking is not allowed anywhere inside your home
- 2 Smoking is allowed in some places or at some times
- 3 Smoking is allowed anywhere inside the home

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.69 Do you own or rent your home?

- 1 Own
- 2 Rent
- 3 Other arrangement _____

- 7 Don't know / Not sure
- 9 Refused

INTERVIEWER NOTE: "Other arrangement" may include group home, staying with friends or family without paying rent.

NOTE: Home is defined as the place where you live most of the time/the majority of the year.

INTERVIEWER NOTE [if needed]: We ask this question in order to compare health indicators among people with different housing situations.

6.70 In what type of place do you currently live? Is it ...

- 1 A single family home **[SKIP TO 6.73]**
- 2 An apartment, condominium, or townhouse in which you share one or more walls with other units
- 3 Room in shared house, or boarding house
- 4 Other **[SKIP TO 6.73]**

Do not read

- 7 Don't know/Not sure **[SKIP TO 6.73]**
- 9 Refused **[SKIP TO 6.73]**

6.71 Has your landlord, property manager, or board of directors set any rules regarding tobacco smoking on the property where you live?

- 1 Yes
- 2 No

Do not read

- 7 Don't know/Not sure
- 9 Refused

[Ask of all who live in an apartment, condominium, or townhouse in which they share one or more walls with other units or shared housing (Q6.70=2 or 3), else skip to 6.73.]

6.72 How often, if ever, have you experienced secondhand smoke drifting into your home or into common spaces from nearby apartments or from outside?

- 1 Every day
- 2 A few times a week
- 3 A few times a month
- 4 Rarely
- 5 Never

Do not read

- 7 Don't know/Not sure
- 9 Refused

Now I am going to ask you some questions about workplace policies

6.73 While working at your job, are you indoors most of the time?

- 1 Yes
- 2 No
- 3 Not employed **[Skip to 6.77]**

Do not read

- 7 Don't know / Not sure **[Skip to 6.76]**
- 9 Refused **[Skip to 6.76]**

6.74 (If 6.73 = 2 add: Even though most of the time you do not work indoors), In the past 30 days, were you exposed to smoke from someone else's cigarettes, cigars, or pipes anywhere indoors at your workplace?

- 1 Yes
- 2 No
- 3 My workplace does not have any indoor area **[skip to 6.76]**

Do not read

- 7 Don't know / Not sure **[Skip to 6.76]**
- 9 Refused **[skip to 6.76]**

6.75 In the past 30 days, were you exposed to smoke from someone else's cigarettes, cigars, or pipes outside, but NEAR the entrances or doorways to indoor areas of your workplace?

- 1 Yes
- 2 No
- 3 My workplace does not have any indoor area

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.76 Which of the following best describes your place of work's official smoking policy for work areas?

- 1 Smoking is not allowed in any work areas
- 2 Smoking is allowed in some work areas
- 3 Smoking is allowed in all work areas

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.77 In indoor work areas, do you think that smoking should be allowed in all areas, some areas, or not allowed at all?

- 1 All areas
- 2 Some areas
- 3 Not allowed at all

Do not read

- 7 Don't know / Not sure (no opinion)
- 9 Refused

6M: Exposure in Cars – Ask of All Respondents

Now I am going to ask you some questions about general smoking policies...

6.78 In the past 30 days, has anyone, including yourself, smoked cigarettes, cigars, or pipes in a car you were in?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

6N: Attitudes about Secondhand Smoke – Ask of All Respondents

6.79 In restaurants, do you think that smoking should be allowed in all areas, some areas, or not allowed at all?

- 1 All areas
- 2 Some areas
- 3 Not allowed at all

Do not read

- 7 Don't know / Not sure (no opinion)
- 9 Refused

6.80 Is smoking currently allowed inside bars and cocktail lounges in your community?

- 1 Yes
- 2 No [Skip to 6.82]
- 3 No bars in community [Skip to 6.83]

Do not read

- 7 Don't know / Not sure
- 9 Refused

Ask of those who either (a) do not have an ordinance banning smoking in bars, or (b) do not know if they do or not, or (c) refused. (6.80 = 1, 7, or 9)

6.81 If smoking were not allowed in bars and cocktail lounges, would you visit them more, less, or would it make no difference?

- 1 More [Skip to 6.83]
- 2 Less [Skip to 6.83]
- 3 No Difference [Skip to 6.83]

Do not read

- 7 Don't know / Not sure [Skip to 6.83]
- 9 Refused [Skip to 6.83]

Ask of those who do have an ordinance banning smoking in bars (6.80= 2)

6.82 **Since** smoking has not been allowed in bars and cocktail lounges, have you visited them more, less, or has it not made any difference?

- 1 More
- 2 Less
- 3 No Difference

Do not read

- 7 Don't know / Not sure
- 9 Refused

Ask of All Respondents

6.83 How strongly do you agree or disagree with the following statement?

People should be protected from smoke from other people's cigarettes.

- 1 Strongly Agree
- 2 Agree
- 3 Disagree
- 4 Strongly Disagree

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.84 Do you think that breathing smoke from other people's cigarettes is:

- 1 Very harmful to one's health
- 2 Somewhat harmful to one's health
- 3 Not very harmful to one's health
- 4 Not harmful at all to one's health

Do not read

- 7 Don't know / Not sure
- 9 Refuse

60: Social Norms and Secondhand Smoke – Ask of All Respondents

6.85 In the last year, have you visited a school in your community?

- 1 Yes
- 2 No **[Skip to 6.89]**

Do not read

- 7 Don't know / Not sure **[Skip to 6.89]**
- 9 Refused **[Skip to 6.89]**

6.86 In the last year, how often have you seen people (students, staff or visitors) smoking or using tobacco outside on school grounds, during school hours?

- 1 All the time
- 2 Sometimes
- 3 Never

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.87 In the last year, how often have you seen people (students, staff or visitors) smoking or using tobacco outside on school grounds, but after school hours?

- 1 All the time
- 2 Sometimes
- 3 Never

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.88 In the last year, how often have you seen people (students, staff or visitors) smoking or using tobacco inside school buildings, but after school hours?

- 1 All the time
- 2 Sometimes
- 3 Never

Do not read

- 7 Don't know / Not sure

9 Refused

6.89 In the last year, how often have you seen people (students, staff or others) smoking or using tobacco at school sponsored events held off school grounds?

- 1 All the time
- 2 Sometimes
- 3 Never

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.90 In the last year, have you visited a hospital in your community?

- 1 Yes
- 2 No **[Skip to 6.92]**

Do not read

- 7 Don't know / Not sure **[skip to 6.92]**
- 9 Refused **[skip to 6.92]**

6.91 In the last year, how often have you seen people smoking or using tobacco on hospital grounds, such as walkways or outside building entrances?

- 1 All the time
- 2 Sometimes
- 3 Never

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.92 In the last year, have you visited a health clinic in your community? *(If needed say, a health clinic is a medical facility where patients do not stay overnight)*

- 1 Yes
- 2 No **[Skip to 6.94]**

Do not read

- 7 Don't know / Not sure **[Skip to 6.94]**
- 9 Refused **[Skip to 6.94]**

6.93 In the last year, how often have you seen people smoking or using tobacco on clinic grounds, such as walkways or outside building entrances?

- 1 All the time
- 2 Sometimes
- 3 Never

Do not read

- 7 Don't know / Not sure

Ask of All Respondents—ATTITUDES ABOUT SMOKING IN AND AROUND SCHOOLS, HOSPITALS AND CLINICS, AND ESTIMATION OF COMMUNITY SMOKING

Please tell me whether you strongly agree, agree, disagree, strongly disagree with the following statements:

6.94 Tobacco use should not be allowed on school grounds during school hours?

- 1 Strongly Agree
- 2 Agree
- 3 Disagree
- 4 Strongly Disagree

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.95 Tobacco use should not be allowed on school grounds after school hours, including evening or weekend events?

- 1 Strongly Agree
- 2 Agree
- 3 Disagree
- 4 Strongly Disagree

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.96 Tobacco use should not be allowed at any school sponsored event, even those held off school grounds?

- 1 Strongly Agree
- 2 Agree
- 3 Disagree
- 4 Strongly Disagree

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.97 Tobacco use should not be allowed on hospital grounds?

- 1 Strongly Agree
- 2 Agree
- 3 Disagree
- 4 Strongly Disagree

Do not read

- 7 Don't know / Not sure

9 Refused

6.98 Tobacco use should not be allowed on health clinic grounds?

- 1 Strongly Agree
- 2 Agree
- 3 Disagree
- 4 Strongly Disagree

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.99 Do you agree or disagree with the following statement:
I prefer to spend time where people are not smoking.

- 1 Strongly Agree
- 2 Agree
- 3 Disagree
- 4 Strongly Disagree

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.100 Some communities have local groups that work on tobacco prevention. To your knowledge, has there been a local group doing tobacco prevention work in your community over the past few years?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.101 About how many adults in your community are smokers? Would you say...

- 1 More than half **[Skip to 6.103]**
- 2 About half **[Skip to 6.104]**
- 3 Less than half **[Skip to 6.102]**

Do not read

- 7 Don't know / Not sure **[Skip to 6.104]**
- 9 Refused **[Skip to 6.104]**

[ask if 6.101=3]

6.102 Would you say the number who smoke is...

- 1 1 in 10, or about 10%
- 2 2 in 10, or about 20%
- 3 3 in 10, or about 30%
- 4 4 in 10, or about 40%
- 5 Other (specify) _____
- 6 less than 1 in 10

Do not read

- 7 Don't know / Not sure
- 9 Refused

[ask if 6.101=1]

6.103 Would you say the number who smoke is...

[Interviewer note: If respondent says "50%", please go back to 6.98 and revise to 6.98 = "2"]

- 1 6 in 10, or about 60%
- 2 7 in 10, or about 70%
- 3 8 in 10, or about 80%
- 4 9 in 10, or about 90%
- 5 Other (specify) _____ [SMOKHIT]
- 6 less than 6 in 10 but more than 5 in 10

Do not read

- 7 Don't know / Not sure
- 9 Refused

6P: Alaska Quit Line – Ask of All Respondents

6.104 Are you aware of the Alaska Tobacco Quit Line, which is a telephone service that can help people quit smoking or using smokeless tobacco?

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

6.105 Would you like the toll free number? 1-800-QUITNOW (784-8669)

[Note for CATI Programmer – For non-smokers add "for a friend or family member that smokes"]

- 1 Yes
- 2 No

Do not read

- 7 Don't know / Not sure
- 9 Refused

Section 7A: Demographics

[**NOTE:** Order of questions MAY NOT BE the same as core BRFSS, but CDC changes to order have been accommodated as much as possible. **NOTE** that the “own or rent” question has already been asked (Q6.66 in Tobacco section), so it is not in this section.

Additional **Note to CATI Programmer:** Changes to cell phone demographics should include additions below as well as cell phone items in Standard BRFSS survey.]

7.1 Indicate sex of respondent. **Ask only if necessary.**

- 1 Male
- 2 Female

7.2 What is your age?

- – Code age in years
- 0 7 Don't know / Not sure
- 0 9 Refused

7.3 Are you Hispanic, Latino/a, or Spanish origin?

If yes, ask: Are you...

Interviewer Note: One or more categories may be selected.

- 1 Mexican, Mexican American, Chicano/a
- 2 Puerto Rican
- 3 Cuban
- 4 Another Hispanic, Latino/a, or Spanish origin

Do not read:

- 5 No
- 7 Don't know / Not sure
- 9 Refused

7.4 Which one or more of the following would you say is your race?

Interviewer Note: Select all that apply.

Interviewer Note: 40 (Asian) or 50 (Pacific Islander) is selected read and code subcategories underneath major heading.

Please read:

- 10 White**
- 20 Black or African American**
- 30 American Indian or Alaska Native**

- 40 Asian**
- 41 Asian Indian
 - 42 Chinese
 - 43 Filipino
 - 44 Japanese
 - 45 Korean
 - 46 Vietnamese
 - 47 Other Asian

- 50 Pacific Islander**
- 51 Native Hawaiian
 - 52 Guamanian or Chamorro
 - 53 Samoan
 - 54 Other Pacific Islander

Do not read:

- 60 Other
- 88 No additional choices
- 77 Don't know / Not sure
- 99 Refused

CATI note: If more than one response to Q7.4; continue. Otherwise, go to Q7.6.

7.5 Which one of these groups would you say best represents your race?

Interviewer Note: If 04 (Asian) or 05 (Pacific Islander) is selected read and code subcategory underneath major heading.

Please read:

- 10 White**
- 20 Black or African American**
- 30 American Indian or Alaska Native**
- 40 Asian**
- 41 Asian Indian
 - 42 Chinese
 - 43 Filipino
 - 44 Japanese
 - 45 Korean
 - 46 Vietnamese
 - 47 Other Asian
- 50 Pacific Islander**
- 51 Native Hawaiian
 - 52 Guamanian or Chamorro
 - 53 Samoan
 - 54 Other Pacific Islander

Do not read:

- 60 Other
- 77 Don't know / Not sure
- 99 Refused

7.6 Are you...?

Please read:

- 1 Married
- 2 Divorced
- 3 Widowed
- 4 Separated
- 5 Never married
- 6 A member of an unmarried couple

Do not read:

- 9 Refused

7.7 Now I'm going to ask you a question about sexual orientation. Do you think of yourself as: A. Gay or lesbian, B. Straight, that is, not lesbian or gay, C. Bisexual, or D. something else?

[Interviewer Notes: Please read the letters with the answer categories, so that respondent may use either the letter or words to give their answer. You may use the descriptions below if respondent asks for clarification.

IF NEEDED:

Gay or Lesbian—A person who is gay or lesbian is primarily attracted to people of the same sex.

Straight—A person who is “straight” is primarily attracted to people of the opposite sex.

Bisexual—A person who is bisexual attracted to people of either sex.]

[Interviewer Coding Note:

If respondent replies that they are “homosexual,” please code with “gay or lesbian”.

If respondent replies that they are “heterosexual,” please code with “straight”.]

- 2 Gay or Lesbian
- 1 Straight, that is, not lesbian or gay
- 3 Bisexual
- 4 Something else? (specify?) _____
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

IF NEEDED: “Research has shown that some sexual minority community members have important health risk factors, such as smoking. We are collecting information about sexual orientation to learn whether this is true in Alaska. You don't have to answer any question if you don't want to.”

7.8 What is the highest grade or year of school you completed?

Read only if necessary:

- 1 Never attended school or only attended kindergarten
- 2 Grades 1 through 8 (Elementary)
- 3 Grades 9 through 11 (Some high school)
- 4 Grade 12 (High school graduate) **Go to 7.9b**
- 5 College 1 year to 3 years (Some college or technical school)
- 6 College 4 years or more (College graduate)

Do not read:

- 9 Refused

7.8b When you say that you completed the 12th grade, does that mean you graduated with a diploma from your high school or a correspondence school or home-school, or did you receive a GED?

- 1 High School Graduate
- 2 GED (High school equivalency Diploma)
- 3 Home-schooled with diploma or correspondence school diploma

Do not read:

- 9 Refused

7.10 What is the ZIP Code where you live?

- | | |
|-----------|-----------------------|
| — — — — — | ZIP Code |
| 7 7 7 7 7 | Don't know / Not sure |
| 9 9 9 9 9 | Refused |

CATI NOTE: If cellular telephone interview skip to 7.14 (QSTVER GE 20)

7.11 Do you have more than one telephone number in your household? Do not include cell phones or numbers that are only used by a computer or fax machine.

- 1 Yes
- 2 No **[Go to Q7.13]**
- 7 Don't know / Not sure **[Go to Q7.13]**
- 9 Refused **[Go to Q7.13]**

7.12 How many of these telephone numbers are residential numbers?

- Residential telephone numbers [**6 = 6 or more**]
- 7 Don't know / Not sure
- 9 Refused

7.13 Do you have a cell phone for personal use? Please include cell phones used for both business and personal use.

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

7.14 Do you follow a subsistence lifestyle?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

7.15 Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit?

INTERVIEWER NOTE: Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

- 1 Yes
- 2 No

Do not read:

- 7 Don't know / Not sure
- 9 Refused

7.16 Are you currently...?

Please read:

- 1 Employed for wages
- 2 Self-employed
- 3 Out of work for 1 year or more **[Skip to 7.19]**
- 4 Out of work for less than 1 year
- 5 A Homemaker **[Skip to 7.19]**
- 6 A Student **[Skip to 7.19]**
- 7 Retired **[Skip to 7.19]**
- 8 Unable to work **[Skip to 7.19]**

Do not read:

- 9 Refused

If Q7.16 = 1 (Employed for wages) or 2 (Self-employed) or 4 (Out of work for less than 1 year), continue else go to next module.

Now I am going to ask you about your work.

Section 7B: Occupation and Industry (NIOSH)

7.17 What kind of work do you do? (for example, registered nurse, janitor, cashier, auto mechanic)

INTERVIEWER NOTE: If respondent is unclear, ask “What is your job title?”

INTERVIEWER NOTE: If respondent has more than one job then ask, “What is your main job?”

[Record answer] _____
99 Refused

7.18. What kind of business or industry do you work in? (for example, hospital, elementary school, clothing manufacturing, restaurant)

[Record answer] _____
99 Refused

[Additional Interviewer Instructions for Industry and Occupation questions:

Interviewer Note: If respondent says that they don't have a job right now follow-up with “If you are not currently working please answer based on the work you usually do or the work you did most recently.”]

Section 7C: Demographics (continued)

- 7.19** How many children live in your household who are...
- a. less than 5 years old? **Code 1-7 (7 = 7 or more)**
 - b. 5 through 12 years old? **Code 1-7 (7 = 7 or more)**
 - c. 13 through 17 years old? **Code 1-7 (7 = 7 or more)**
 - 8 None
 - 9 Refused

- 7.20** Is your annual household income from all sources—

If respondent refuses at ANY income level, code '99' (Refused)

Read only if necessary:

- 04 Less than \$25,000 **If "no," ask 05; if "yes," ask 03**
(\$20,000 to less than \$25,000)
- 03 Less than \$20,000 **If "no," code 04; if "yes," ask 02**
(\$15,000 to less than \$20,000)
- 02 Less than \$15,000 **If "no," code 03; if "yes," ask 01**
(\$10,000 to less than \$15,000)
- 01 Less than \$10,000 **If "no," code 02**
- 05 Less than \$35,000 **If "no," ask 06**
(\$25,000 to less than \$35,000)
- 06 Less than \$50,000 **If "no," ask 07**
(\$35,000 to less than \$50,000)
- 07 Less than \$75,000 **If "no," code 08**
(\$50,000 to less than \$75,000)
- 08 \$75,000 or more

Do not read:

- 77 Don't know / Not sure
- 99 Refused

7.21 Have you used the internet in the past 30 days?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

7.22 About how much do you weigh without shoes?
[WEIGHT2]

Round fractions up

- __ __ __ __ Weight
(pounds/kilograms)
- 7 7 7 7 Don't know / Not sure
- 9 9 9 9 Refused

7.23 About how tall are you without shoes?

Round fractions down

- __ / __ __ Height
(ft / inches/meters/centimeters)
- 7 7 7 7 Don't know / Not sure
- 9 9 9 9 Refused

7.24 To your knowledge, are you now pregnant?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

Section 8: Alcohol Consumption

The next questions are about alcohol.

8.1 During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

- 1 __ Days per week
- 2 __ Days in past 30 days
- 8 8 8 No drinks in past 30 days **[Go to next section]**
- 7 7 7 Don't know / Not sure **[Go to next section]**
- 9 9 9 Refused **[Go to next section]**

8.2 One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?

NOTE: A 40 ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks.

-- Number of drinks
77 Don't know / Not sure
99 Refused

8.3 Considering all types of alcoholic beverages, how many times during the past 30 days did you have **X** [**CATI X = 5 for men, X = 4 for women**] or more drinks on an occasion?

-- Number of times
88 None
77 Don't know / Not sure
99 Refused

8.4 During the past 30 days, what is the largest number of drinks you had on any occasion?

-- Number of drinks
77 Don't know / Not sure
99 Refused

Section 9: Marijuana and Other Drugs

The next questions are about recent use of marijuana or other drugs. Your answers are strictly private and confidential and will only be used to help improve health services.

9.1 During the past 30 days, on how many days did you use marijuana or hashish?

DO NOT READ

- _ _ Number of days (1 thru 30)
- 8 8 Never/None **[Skip to 9.4]**
- 7 7. Don't know / Not sure **[Skip to 9.4]**
- 9 9. Refused **[Skip to 9.4]**

[Interviewer Note: IF NEEDED—"Marijuana is also known as hash, grass, pot, or weed."]
[Interviewer Note: Record days of use in Q9.1 even if respondent indicates that their only use is for medical treatment.]

9.2 This second question is about medical marijuana use only. During the past 30 days, on how many days did you use medical marijuana as recommended by a doctor or other health care provider for treatment of a medical condition?

DO NOT READ

- _ _ Number of days (1 thru 30)
- 8 8 Never/None
- 7 7. Don't know / Not sure
- 9 9. Refused

9.3 During the past 30 days, how did you use marijuana? For each of the following methods please say yes if it does apply or no if it does not apply:

(1 Yes; 2 No; 7 Don't know/Not sure; 9 Refused)

- a. It was Vaporized (e-cigarette-like vaporizer)
- b. It was smoked (in a joint, bong, pipe, blunt)
- c. It was eaten in food (in brownies, cakes, cookies, candy)
- d. It was consumed in a beverage (tea, cola, alcohol)
- e. It was dabbed
- f. It was used in some other way (**SPECIFY**) _____

9.4 During the past 30 days, did you use methamphetamine (meth), heroin, cocaine, crack cocaine, or XTC (ecstasy)?

DO NOT READ

- 1 Yes
- 2 No

- 7 Don't know/Not sure
- 9 Refused

INTERVIEWER NOTE: Method of use could INCLUDE SMOKING, SNORTING, INJECTING, TAKING PILLS, SNIFFING, ETC.

9.5 During the past 30 days, did you use any prescription pain relievers – like OxyContin (ox-e-con-tin), Oxycodone (ox-e-CO-done), or Vicodin – that were **not** prescribed to you or that you took only for the feeling they caused?

DO NOT READ

- 1 Yes
- 2 No

- 7 Don't know/Not sure
- 9 Refused

9.6 During the past 30 days, did you use any other recreational drug?

DO NOT READ

- 1 Yes **(SPECIFY)** _____
- 2 No

- 7 Don't know/Not sure
- 9 Refused

Section 10: Alcohol and Drug Treatment

The next question is about treatment or counseling designed to help you reduce or stop your alcohol or drug use. Please include treatment in a **self-help group** such as **Alcoholics Anonymous** or **Narcotics Anonymous**, but do **not** include treatment for use of cigarettes or other tobacco.

10.1 During the past 12 months, have you received treatment or counseling for your use of alcohol or any drug, not counting cigarettes or other tobacco?

DO NOT READ

- 1 Yes
- 2 No

- 7 Don't know/Not sure
- 9 Refused

10.2 During the past 12 months, did you need treatment or counseling for your use of alcohol or any drug excluding tobacco, but could not get treatment or counseling?

- 1 Yes
- 2 No **[skip to next section]**

- 7 Don't know/Not sure **[skip to next section]**
- 9 Refused **[skip to next section]**

10.3 Which of these statements explain why you did not get the treatment or counseling you needed? You can select more than one answer.

- 1 You had no health care coverage, and you couldn't afford the cost.
- 2 You did have health care coverage, but it didn't cover this treatment, or didn't cover the full cost.
- 3 You had no transportation to a program, or the programs were too far away.
- 4 You were not ready to stop using alcohol or drugs.
- 5 There were no openings in the programs.
- 6 You did not know where to go to get treatment.
- 7 Some other reason **(SPECIFY)** _____

- 77 Don't know/Not sure
- 99 Refused

Section 11: Diabetes and Pre-Diabetes

11.1 Have you ever been told by a doctor that you have diabetes?

If “Yes” and respondent is female, ask: “Was this only when you were pregnant?”

If “No” and respondent is female, ask: “Have you ever been told that you had gestational diabetes or diabetes during your pregnancy?”

- 1 Yes [Skip to 11.2, then to next module]
 - 2 Yes, but female told only during pregnancy [Skip to 11.3]
 - 3 No [Skip to 11.3]
 - 4 No, pre-diabetes or borderline diabetes [Skip to 11.3]
- Do not read**
- 7 Don't know / Not sure [Skip to 11.3]
 - 9 Refused [Skip to 11.3]

11.2. How old were you when you were told you have diabetes?

- — Code age in years [97 = 97 and older]
- 9 8 Don't know / Not sure
- 9 9 Refused

11.3. Have you had a test for high blood sugar or diabetes within the past three years?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

CATI note: If 11.1 = 4(No, pre-diabetes or borderline diabetes); answer 11.4 “Yes” (code = 1).

11.4 Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?

If “Yes” and respondent is female, ask: “Was this only when you were pregnant?”

- 1 Yes
- 2 Yes, during pregnancy
- 3 No
- 7 Don't know / Not sure
- 9 Refused

Closing Section

From time to time the State of Alaska conducts other surveys to collect information that will help us improve our programs and services. May we call you in the future to collect more information on health-related topics?

This means we might call you back for another phone interview, or invite you to some focus groups in your area. Of course, you can always refuse to participate in future surveys.

May I please have your first name, nickname, or initials, so that we know who to ask for?

May we email you in the future to collect more information on health-related topics?

May I please have your email address?

That was my last question. Everyone's answers will be combined to help us provide information about the health practices of people in this state. Thank you very much for your time and cooperation.