Consumer Tobacco Usage Questionnaire

If you would prefer to complete this questionnaire online, please visit the website below.
http://www.usm.edu/disability-studies/tobacco-control-strategies-client-questionnaire

### Demographic Information

<table>
<thead>
<tr>
<th>Category</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>18-24, 25-34, 35-44, 45-54, 55-64, 65 or older</td>
</tr>
<tr>
<td>Gender</td>
<td>Male, Female</td>
</tr>
<tr>
<td>Race</td>
<td>White, Black or African American, American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, Other: ___________________________</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>Spanish/Hispanic/Latino, Not Spanish/Hispanic/Latino</td>
</tr>
<tr>
<td>Household Income</td>
<td>Less than $22,050, Between $22,050 and $44,100, Over $44,100</td>
</tr>
<tr>
<td>Number of people who live in your house:</td>
<td>___________________________</td>
</tr>
<tr>
<td>Marital Status</td>
<td>Single (Never Married), Married, Separated, Divorced, Widowed</td>
</tr>
<tr>
<td>Employment Status</td>
<td>Full-time, Part-time, Unemployed, Retired, Unable to work</td>
</tr>
<tr>
<td>Education Level</td>
<td>High school or Less, Technical school, Some college, College degree</td>
</tr>
</tbody>
</table>

Are you over 18 years old?  □ Yes  □ No
Do you smoke or use other tobacco products?  □ Yes  □ No

If you marked no for one or both of the questions above, thank you for your time. We are only surveying people over 18 years old who smoke or use tobacco products.

If you marked yes for both questions above, please take a moment to help us learn about tobacco use among Mississippians who receive mental health services. Your responses are very important and will remain confidential.

### Tobacco Usage

1. Which of these statements best describes you?
   - □ I smoke.
   - □ I use tobacco products (dip, chew).
   - □ I am exposed to 2nd hand smoke.
   - □ I smoke cigars or pipes.

2. How often do you use cigarettes or other tobacco products each day?
   - □ 2 times or less
   - □ 3-5 times
   - □ 6-10 times
   - □ More than 10 times

3. How many cigarettes do you smoke each day?
   - □ 1 or less
   - □ Less than half a pack (2-9 cigarettes)
   - □ Half a pack or more (10-19 cigarettes)
   - □ 1 pack (20 cigarettes)
   - □ More than 1 pack (More than 20 cigarettes)

4. How many dips or chews do you take each day?
   - □ 1 or less
   - □ 2-9
   - □ 10-19
   - □ 20
   - □ More than 20
   - □ None

5. How old were you when you began smoking or using other tobacco products on a regular basis?
   - □ Under 15 years old
   - □ 15-24
   - □ 25-35
   - □ Over 35

6. Other than yourself, who else living in your household smokes or uses tobacco products?
   - □ Parents
   - □ Brothers/Sisters
   - □ Spouse/Significant Other
   - □ Roommates
   - □ Children
   - □ Caregiver (personal care attendant)
   - □ No one

7. Where do you smoke?
   - □ Home
   - □ Work
   - □ Car
   - □ Mental Health Center
   - □ Other: ___________________________

8. Does the facility where you receive mental health services have a written smoking and tobacco use policy?
   - □ Yes
   - □ No
   - □ Do not know
9. Which of the following statements best describes your facility’s current smoking policies?
   □ Smoking is prohibited in all buildings, but is permitted anywhere outside.
   □ Smoking is prohibited in all buildings and most areas outside except for special designated smoking areas.
   □ The facility is totally smoke-free. Smoking is prohibited in all buildings and all outside areas.

10. Who purchases cigarettes or tobacco products for you? (Check all that apply.)
    □ Yourself  □ Friends  □ Parents  □ Brothers/Sisters  □ Spouse/Significant Other
    □ Roommates  □ Children  □ Caregiver (personal care attendant)  □ Other:______________________

11. Why do you smoke or use tobacco?
    □ Can’t quit  □ Out with friends  □ To relax  □ Lose weight  □ Shows independence
    □ Family  □ Friends  □ Boredom  □ Drinking coffee  □ Drinking alcohol  □ Gambling
    □ Saw on TV, in magazines, or in other ads  □ Other:______________________

12. Have you ever tried to quit smoking or using tobacco?  □ Yes  □ No

13. Have you ever seen/heard an ad for cessation services?  □ Yes  □ No

14. Have you ever participated in a program to help you quit smoking or using tobacco?  □ Yes  □ No

15. Did you quit smoking or using tobacco for a while because of the program?  □ Yes  □ No

16. Which of the following Mississippi programs or organizations have you heard of? (Check all that apply.)
    □ Tobacco Quitline  □ Mississippi Tobacco-Free Coalitions  □ ACT Centers  □ Fresh Start
    □ Reject All Tobacco! (RAT)  □ Generation Free  □ Freedom from Smoking  □ H-O-T
    □ American Lung Association  □ American Cancer Society  □ Other:______________________

17. What are some of the things that keep you from participating in a program to help you stop smoking or using tobacco? (Check all that apply.)
    □ Transportation  □ Don’t know about programs  □ Don’t know where to find programs
    □ Don’t know where to find information  □ Don’t trust strangers  □ No support from friends and family
    □ Can’t afford program  □ Don’t want to give out personal information  □ Don’t want to quit
    □ Other:______________________

18. Do you plan to quit smoking or using tobacco products?  □ Yes  □ No

19. If you said yes to #15, what would make you think about quitting smoking or using tobacco products?
    □ Sickness  □ Family or friends get sick  □ Someone I love asks me to quit  □ Family or friend dies
    □ Cost of cigarettes or tobacco goes up  □ If doctor gave me information  □ Something I read
    □ Something I saw on TV  □ Nothing  □ Other:______________________

20. How often do you exercise?
    □ I don’t exercise  □ 1 day a week  □ 2-3 days a week  □ 4-6 days a week  □ Everyday

21. Is there anything else you would like us to know?

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Thank you for completing the survey!

Please return to:

The University of Southern Mississippi
Institute for Disability Studies
118 College Drive #5163
Hattiesburg, MS  39406-0001
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Phone:  601.266.5163
TTY: 1.888.671.0051

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