



Tobacco Use Survey – Example
Updates Based on STOPS MEETING

These are suggested questions and should be modified to fit your program's needs

1. **Are you currently a tobacco user?** (Select all that apply; if **YES** to any, skip to question #4)
 - a. Yes, I currently smoke cigarettes
 - b. Yes, I currently smoke cigars (e.g., Black 'n Mild, Swisher Sweets, Phillies blunt, little cigars/brown cigarettes, etc)
 - c. Yes, I currently use smokeless tobacco (snus, snuff, dip, chew, etc)
 - d. Yes, I currently use other tobacco products (please specify): _____
 - e. No, I do not currently use any tobacco products

2. **If you do not currently smoke and/or chew, have you smoked and/or chewed tobacco products in the past?**
 - a. Yes; it has been over 30 days since I last used tobacco products
 - b. Yes; it has been over 3 months since I last used tobacco products
 - c. Yes; it has been over 6 months since I last used tobacco products
 - d. Yes; it has been over 12 months since I last used tobacco products
 - e. No, I never smoked and/or chewed tobacco products (Skip to question #15)

3. **If you stopped smoking and/or chewing, what method(s) did you use to successfully quit tobacco use?** (Select all that apply)
 - a. Cold Turkey
 - b. Gradually decreased the amount until quit
 - c. Nicotine patch, gum, or lozenge
 - d. Prescription nicotine therapy such as the inhaler or nasal spray
 - e. Prescription medication such as Chantix or Zyban
 - f. Tobacco Quitline, 1-800 QUIT-NOW (784-8669)
 - g. Group or individual cessation counseling
 - h. Other: Please Specify _____

4. **When did you begin using tobacco?**
 - a. I began using tobacco when I was younger than 13 years old
 - b. I began using tobacco when I was between 13-17 years old
 - c. I began using tobacco when I was a Freshman undergraduate student
 - d. I began using tobacco when I was a Sophomore undergraduate student
 - e. I began using tobacco when I was a Junior undergraduate student
 - f. I began using tobacco when I was a Senior undergraduate student
 - g. I began using tobacco after my 4th year, as an undergraduate student
 - h. I began using tobacco when I was a Graduate student

5. **How has your tobacco use changed since you have been in college?**
 - a. Increased
 - b. Decreased
 - c. Stayed the same
 - d. I no longer use tobacco (Skip to #15)

6. **How often do you smoke and/or chew tobacco products?**
 - a. I smoke and/or chew tobacco products regularly (at least once everyday)
 - b. I smoke and/or chew tobacco products mostly in social situations

c. I smoke and/or chew tobacco products occasionally (less than once a day)

7. On how many of the past 30 days did you use tobacco?

- a. 0
- b. 1-5
- c. 6-10
- d. 11-15
- e. 16-20
- f. 21-29
- g. Everyday

8. In what situations do you smoke and/or chew tobacco products? (Select all that apply)

- a. When I first wake up
- b. When I'm stressed out
- c. When with friends/during social situations
- d. When drinking alcohol
- e. After meals/with coffee
- f. When I realize I haven't smoked/chewed for a while
- g. When with my significant other or close friend who is smoking/chewing
- h. When I'm bored
- i. When I need a "pick me up"
- j. While driving
- k. While studying
- l. Before going to bed
- m. Other: _____

9. When do you have your first cigarette/cigar/chew of the day?

- a. Within 30 minutes of waking up
- b. Within one hour of waking up
- c. After being awake for over an hour

10. Are you *planning* to quit using tobacco in the near future?

- a. No
- b. Yes, within the next 30 days
- c. Yes, within the next 6 months
- d. Yes, within the next year
- e. Yes, when I graduate (*if graduation is more than a year from now*)

11. Have you ever *tried* to quit using tobacco?

- a. Yes, within the last 30 days
- b. Yes, within the last 6 months
- c. Yes, within the last year
- d. No, I have never tried to quit (skip to question #14)

12. How many times in the past year have you tried to stop using tobacco?

- a. 1 time
- b. 2 times
- c. 3 times
- d. 4 times
- e. 5 or more times

13. **What method(s) did you use to *try* to stop using tobacco?** (*Select all that apply*)
- Cold turkey
 - Nicotine patch, gum, or lozenge
 - Gradually decreased the amount until quit
 - Prescription nicotine replacement therapy such as nasal spray or inhaler
 - Prescription medication such as *Chantix* or *Zyban*
 - Tobacco Quitline, 1-800 QUIT-NOW (784-8669)
 - Group or individual cessation counseling
 - Other. Please specify: _____
14. **Do you ever tell yourself you can stop using tobacco whenever you want to?**
- Yes
 - No
15. **Do you think that using tobacco is physically addictive?**
- Yes
 - No
16. **Do you think a cessation program using modern technology such as text messaging or podcasting would be useful in supporting tobacco users attempting to quit?**
- Yes
 - No
17. **Do you think that secondhand smoke is harmful to the health of nonsmokers?**
- Yes
 - No
18. **What is the current tobacco use/smoking policy on your campus?**
- Tobacco *smoking* is prohibited everywhere on campus
 - Tobacco *use* of any variety is prohibited everywhere on campus
 - Tobacco use/smoking is restricted to designated smoking areas only
 - Tobacco use/smoking is restricted to a specific distance from all building and dorm entrances
 - Tobacco use/smoking is allowed anywhere outdoors, except on outdoor sports fields and stadium stands
 - Tobacco use/smoking is allowed anywhere on campus outdoors
 - There is no tobacco use policy on my campus
 - I don't know (*Skip to question #20*)
19. **Do you feel that tobacco users adhere to the campus tobacco use policy?**
- Yes, at all time
 - Yes, but only some of the time
 - No, I feel that tobacco users do not follow the policy
20. **What campus tobacco control policies would you/do you support?**
- Tobacco *smoking* prohibited everywhere on campus
 - Tobacco *use* of any variety is prohibited everywhere on campus
 - Tobacco use/smoking restricted to designated smoking areas only
 - Tobacco use/smoking restricted to a specific distance from all building and dorm entrances
 - Tobacco use/smoking allowed anywhere outdoors, except on outdoor sports fields and stadium stands

- f. Tobacco use/smoking allowed anywhere on campus outdoors

21. Indicate your primary role on campus

- a. Part-time Student
- b. Full-time Student
- c. Faculty
- d. Staff
- e. Facilities/Maintenance Employee
- f. Campus Visitor

22. If you are a student, which best describes your enrollment status?

- a. 1st year undergraduate (freshman)
- b. 2nd year undergraduate (sophomore)
- c. 3rd year undergraduate (junior)
- d. 4th year undergraduate (senior)
- e. Past 4th year undergraduate
- f. Graduate student

23. Select your age group

- a. under 18
- b. 18-25
- c. 26-30
- d. 31-35
- e. 36-40
- f. 41-50
- g. 51-60
- h. Over 60

24. Indicate your gender

- a. Male
- b. Female