

**An Examination of Planned Quit Attempts among Ontario
Smokers and Its Impact on Abstinence**

by

Taryn Sendzik

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AUTHOR'S DECLARATION

I hereby declare that I am the sole author of this thesis. This is a true copy of the thesis, including any required final revisions, as accepted by my examiners.

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Abstract

Background: Planning has long been assumed to be an important element of any successful quit smoking strategy. However, recent research findings indicate that unplanned, or spontaneous quit attempts, may lead to more successful and longer cessation periods than planned attempts. This calls into question continued advice to plan and the validity of planning based behaviour change theories.

Objectives: To: 1) assess the prevalence of planning; 2) identify the attributes of planners; 3) examine the association of planning and intentions to quit; 4) examine the association of planning and use of quit aids; and 5) examine the impact of planning on smoking cessation outcomes.

Methods: Data from the longitudinal Ontario Tobacco Survey (OTS) were examined. Analyses consisted of 418 smokers who made a planned or unplanned quit attempt between their waves 4 and 5 survey response. Descriptive, bivariate, and multivariate analyses were conducted using specialized survey analysis procedures to account for the complex sampling and design features of the OTS. Multiple Imputation (MI) was used to fill in missing data to reduce bias.

Results: The prevalence of planning among Ontario smokers who made a quit attempt in the past six months was 70%. Regression models indicated that women, smokers who felt that it would be “very hard to quit”, and those with intentions to quit in the next 6 months had higher odds of making a planned quit attempt. Individuals who made a planned quit attempt had increased odds for using a quit aid compared to those making unplanned attempts. Univariate regression models indicated that planned attempts did not result in higher odds ratios for being abstinent for at least one week and at least one month.

Conclusions: The present results suggest that a majority of smokers who made a quit attempt did so with a plan. Planned quit attempts had higher odds use of any quit aid compared with unplanned attempts. Planning was not found to increase the odds of being abstinent compared to unplanned attempts. Although more research is needed, the current study contributes to the dialogue of planning and smoking cessation.

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Chapter 1

Introduction and Overview

Tobacco use continues to be the largest preventable cause of morbidity and mortality in the world (Ezzati, Lopez, Rodgers, Vander Hoorn, & Murray, 2002; Mokdad, Marks, Stroup, & Gerberding, 2004; Murray & Lopez, 1997). Globally, tobacco use is responsible for the deaths of approximately 4.9 million people annually with the number of deaths expected to double by the year 2020 (World Health Organization [WHO], 2002). Tobacco use harms almost every organ in the body contributing to the development of over 25 different smoking related diseases. These smoking related diseases include coronary heart disease; stroke; chronic obstructive pulmonary disease; nuclear cataracts; and cancers of the oral cavity, lung, stomach, cervix, bladder, and stomach (United States Department of Health and Human Services [USDHHS], 2004). Despite these startling facts more than 1.1 billion people currently smoke (Jha, Ranson, Nguyen, & Yach, 2002; World Health Organization Regional Office for the Western Pacific [WHORWP], 2006).

This year, approximately half (48.7%) of smokers in Canada will attempt to quit (CTUMS, 2008) for a number of reasons including concern for their health. Successful smoking cessation contributes to immediate and long-term improvements in health. Twenty minutes after the last cigarette, an individual can expect improved blood flow to the hands and feet, and a decrease in blood pressure (Mahmud & Feely, 2003). After 24 hours have passed, the chance of having a heart attack is decreased (Gordon, Kannel, McGee, & Dawber, 1974). As abstinence from smoking continues, an individual's risk of developing a stroke, cancer, and coronary heart disease is significantly reduced (USDHHS, 1990). Additionally, quitters can expect an increase in life expectancy of up to 10 years (Doll, Peto, Boreham, & Sutherland, 2004).

Yet on any given quit attempt, 65-95% of smokers fail (Garvey, Heinold, & Rosner, 1989; Hunt, Barnett, & Branch, 1971; Pierce & Gilpin, 2003; Yudkin, Hey, Roberts, Welch, Murphy, & Walton, 2003). Furthermore, 50% of those who relapse are interested in making another quit attempt immediately, while another 28% intend to quit within the next month (Fu, Snyder, An, Nelson, Clothier, Nugent, et al., 2006; Joseph, Rice, An, & Lando, 2004). Despite these intentions, smokers try to quit only once every 3.5 years (Hughes, 1999) and will make an average of six attempts before they finally succeed (Health Canada, 2001). Given the burden of tobacco use, the benefits of quitting, the number of smokers trying to quit, and the discouraging rates of failure, there is a need to better understand what factors play a role in determining successful quitting. Planning may be one of these key factors; however, very little is known about its use and role in smoking cessation (Conner, 2008). Consequently, the main goal of this thesis is to examine self-reported behavioural planning of smoking cessation attempts in order to broaden our understanding of planning and its relationship to smoking cessation outcomes.

This thesis begins with an overview of the burden of tobacco and motivation for studying planning as a factor for successful smoking cessation. It then proceeds with an overview of the theoretical underpinnings of the role of planning in behaviour change before reviewing what is currently known about planning and smoking cessation. The next chapters provide the rationale for the study and key research questions to be asked, followed by the methods used to answer these questions, and results. The final chapter discusses the key findings, implications, limitations, and concludes with recommendations for future research and practice.

Chapter 2

Literature Review

Many smokers express the interest to quit smoking at some point in their lives (USDHHS, 1994). There are a number of programs that have been developed to assist smokers who want to become smoke-free (e.g., Canadian Cancer Society's One Step at a Time and Provincial Smokers Helplines; Health Canada's On the Road to Quitting and Quit 4 Life Programs). Most of these programs have developed their approaches based on theories which attempt to explain behaviour change. The purpose of these theories is not only to explain behaviour but to guide the development of health promotion, education, and intervention initiatives. Despite their differences in construction, many of these theories include, "planning" as a common mechanism for achieving the desired behaviour change.

2.1 Behavioural Planning

Behavioural planning can be defined as the mental simulation of actions, and preparatory behaviour used to achieve a desired course of action (Aarts, Dijksterhuis, & Midden, 1999; Azjen, & Madden, 1986; Jackson, Lawton, Knapp, Raynor, Conner, Lowe, et al., 2005; Mumford, Schultz, & Van Doorn, 2001; Oettingen, Pak, & Schnetter, 2001; Sniehotta, Schwarzer, Scholz, & Schüz, 2005). Developing a plan is anticipated to: increase one's commitment; assess and gather resources to support, reinforce, and maintain the desired goal; permit the development of contingencies to avoid or overcome barriers responsible for set-back and failure; and provide an opportunity to reflect on past plans, and self identity (Mumford et al., 2001). Planning is considered an essential ability, helping individuals achieve the even the most mundane of activities (e.g., preparation of breakfast, driving to work, and purchasing groceries) (Sniehotta et al., 2005). As activities become more complex, and

challenging (e.g., wedding, retirement, weight loss, smoking cessation, other changes in behaviour) the ability to plan may be even more important in order to successfully achieve the desired outcome.

2.2 Planning and Behaviour Change: An Overview of Prevailing Theories

Theories of health behaviour attempt to classify and explain the various factors and processes that influence behaviour change (Glanz, Rimer, & Lewis, 2002). These theories can be used to predict, guide, and shape our understanding of how successful behaviour change is achieved. There are many different health behaviour change theories containing a wide variety of concepts, constructs, variables, and principles. Those of particular interest to this study are theories which include planning as part of their modeling of individual health behaviour changes.

2.2.1 Theory of Planned Behaviour

The Theory of Planned Behaviour (TPB; Azjen, n.d.; Azjen, 1991) is an extension of the Theory of Reasoned Action (Glanz et al., 2002) which postulates that behaviour change is primarily determined by an individual's intention toward that specific behaviour. This intention is a function of an individual's *attitude* (positive or negative evaluation of the behaviour) and the influence of *subjective norms* (belief about what others think the individual should do about the behaviour). The TPB extends the TRA by introducing an individual's *perceived control* (an individual's perceived ability of how hard or easy it would be to perform the behaviour). The concept of perceived control may include the availability or attainability of skills, resources, and opportunities considered essential by the individual to change existing behaviour. According to TPB, an individual's attitude, subjective norms, and perceived control combine to create a *behavioural intention*, which will determine the resulting *behaviour*. If an individual's attitude, subjective norm, and perceived control are high and positive, TPB predicts that the individual will be able to successfully change their behaviour. If an

individual's attitude, subjective norm, and perceived control are low or negative, their behavioural intention will also be low or negative resulting status quo behaviour or a failed behaviour change.

Despite the appearance of planning in the name of the theory, the TPB does not specifically identify the processes of planning and how the act of planning may facilitate behaviour change. Instead, the concept of planning lies within an individual's intentions and exists only at a motivational level. To obtain a better understanding of the actions involved in planning, one must examine a developing area of research looking at the TPB "intention-behaviour gap" (Sniechotta et al., 2005). According to this body of research planning acts a mediator between intentions and future behaviour (Sniechotta et al., 2005).

2.2.2 Precaution Adoption Process Model

The Precaution Adoption Process Model (PAPM; Weinstein, 1988) was designed to explain complex health behavior and the psychological processes that occur prior to adopting a specific behaviour. The PAPM is a stage-based theory composed of seven different steps that must be completed in a sequential order. The seven different stages are: *unawareness* (no knowledge about a specific health threat); *unengaged* (health threat is known, individual forms opinions about whether the threat applies to them and if action is necessary); *deciding about acting* (individual begins to think about the costs and benefits of potential action, personal relevance of the health threat, and whether to act, not to act, or continuing to think about the issue); *deciding to act*; *deciding not to act*; *acting* (individual takes the necessary steps to avoid the health threat by implementing action behaviors); *maintenance* (if necessary, actions are repeated to avoid threat). Movement through each stage is characterized by an individual's motivation, information available, and the barriers which may hinder or prevent progress through a stage. The planning component of behaviour change occurs between *deciding to act* and *acting*.

2.2.3 Transtheoretical Model of Change

The Transtheoretical Model of Change (TTM; Prochaska & DiClemente, 1982; Prochaska & DiClemente, 1983; Prochaska & Velicer, 1997), also referred to as the Stages of Change Model, is the most widely used and accepted model used in intervention programs (Brug, Conner, Harre, Kremers, McKellar, & Whitelaw, 2005). The model was developed from a comparative analysis of leading psycho- and clinical behavioral therapies, and a review of observed smoking cessation. The TTM is a stage theory expressing the temporal steps that an individual progresses through in the process of changing behaviour. The TTM is composed of five stages – *precontemplation* (no thought of changing in next six months), *contemplation* (thoughts of changing in next six months), *preparation* (planning on changing in the next month), *action* (efforts have been made to change behaviour over the past six months), and *maintenance* (behaviour change has been accomplished and efforts are being made to preserve this new behaviour). The TTM is further composed of four additional constructs which have been used to explain transitions through each of the stages. These four constructs are: *decisional balance*, *self-efficacy*, *temptation*, and *processes of change* (Prochaska & Velicer). The construct of *decisional balance* refers to an individual's consideration and weighting of the pros and cons of changing their behaviour. *Self-efficacy* is the confidence an individual has to cope with and overcome various challenges associated with behaviour change. *Temptation* refers to the intense urge to engage in the behaviour one is trying to change (e.g., smoking) when faced with emotional distress, various social situations, and/ or cravings. The *processes of change* refer to ten covert and overt activities which propel behaviour change. The processes of change are further divided into experiential and behavioural activities. The experiential activities, typically used in the early stages of change, consist of *consciousness raising* (increased awareness of the problem behaviour), *dramatic relief* (heightened emotional affect released by the promise of modifiable action), *self-reevaluation* (analysis one's self-image related to the behaviour), *environmental*

reevaluation (analysis of one's behaviour on the environment and others), and *self-liberation* (belief and commitment to change, also referred to as willpower). The behavioural activities, typically used in the later stages of change, include *social liberation* (increased social opportunities for behaviour), *counterconditioning* (substituting healthy for unhealthy behaviours), *stimulus control* (removal of problem behaviour cues and addition of cues related to healthy behaviour), *contingency management* (rewarding or punishing one's self for specific behaviours), and *helping relationships* (building and acquiring social supports) (Prochaska & Velicer).

Planning and commitment are the key tasks developed within the preparation stage. During this stage, an individual's decisional balance begins to lean toward the positives of change resulting in a favourable weighting of change (Prochaska & Velicer; Velicer, Prochaska, Fava, Norman, & Redding, 1998), their self-efficacy to change becomes greater than temptation to continue the old behaviour, and they begin to transition from the experiential to the behavioural processes of change. Moreover, participants have experienced a raise in consciousness about the causes, consequences, and cures for smoking; dramatic relief; self-reevaluation; environmental reevaluation; and are in the process of initiating self-liberation (Prochaska, DiClemente, & Norcross, 1992; Prochaska & Velicer). The preparation stage marks the beginning of moving toward the processes of social liberation, counterconditioning, stimulus control, contingency management, and helping relationships (Prochaska & Velicer).

The TTM defines planning as the individual preparation and organization of actions to change behaviour. Planning includes decisions about how to manage life problems, the format of problem behaviour treatment (i.e., social support of others, or formal treatment), awareness of self and habit, and the development of concrete steps for action (DiClemente, 2003). These decisions are informed by knowledge about self, their behaviour, and the problem gleaned during the early *experiential*

processes of change. Individuals then rely upon counterconditioning, stimulus control, contingency management, and helping relationships in order to execute these plans successfully. The TTM recommends that planning includes identifying environments which may increase temptation, and decrease self-efficacy; developing coping strategies to deal with environmental cues that increase temptation or change the decisional balance in favour of the problem behaviour; setting a quit date to increase commitment; and setting forth specific steps for initiating and establishing change which include the selection of a treatment method based on prior experience and identification of resources to support the change. Finally according to DiClemente, the plan must be acceptable, accessible, and effective in order to successfully change the problem behaviour.

2.2.4 Health Action Process Approach

The Health Action Process Approach (HAPA; Schwarzer, 2001; Schwarzer, 2008) is among the latest theories emphasizing planning as a mechanism in the behaviour change process. The HAPA is a stage theory, consisting of two major phases: *motivational* and *action*, which are based on cognitive, behavioural, and situational aspects of decision making. The *motivational phase* refers to the factors that contribute to behavioural intention. This phase begins with 3 key driving factors: *self-efficacy* (personal confidence to perform behaviour), *outcome expectancy* (consideration of pros and cons of behaviour), and *risk awareness* (awareness of health threat). These three factors combine to form *goals* (desired outcomes) which contribute to the development of *plans* (actions for achieving desired goals, including a consideration of how, when, and where to act; and simulating actions for coping with anticipated barriers) (Sniehotta, Schwarzer, et al., 2005). During the planning component, an individual further reflects on their *self-efficacy* before proceeding to the *action phase* where intentions formed in the *motivational phase* translate into the desired behaviour. During the action phase, an individual further considers their *self-efficacy*, along with barriers and resources to develop *initiative*

(implementation and adoption of plans to change behaviour), and *maintenance* (sustaining behaviour). If *maintenance* is sustained the individual *disengages* from the model. However, if *maintenance* is not sustained, the individual moves into a *recovery* stage (management of setbacks) where they can return to the *initiative* stage of the model. According to the HAPA, planning is assumed to act as a mediator, explaining how and why certain behavioural intentions result in action (Schüz, Wiedemann, Mallach, & Scholz, 2007). Figure 1 illustrates the stages of the HAPA model.

Figure 1. The Health Action Process Model

2.2.5 Summary of Theories

Figure 2 illustrates the occurrence of planning in the overall process of behaviour change. These theories suggest that planning plays an important role in behaviour change. Despite the suggested importance, there is very little research which has tested the validity of planning as a critical component in each of these models. Using TPB as a framework, research in other health domains have found that planning appears to mediate the relationship between the impact of intentions on

future behaviour, and to moderate the relationship between intention and behaviour (Conner & Norman, 2005, as cited in Schwarzer, 2008; Jones, Abraham, Harris, Schulz, & Chrispin, 2001; Norman & Conner, 2005). The PAPM, TTM, and HAPA have yet to be tested to determine the role of planning within each of the models. Furthermore, given the paucity of research testing planning within each model, there no evidence to date to suggest whether planning is equally important for everyone or if planning is more important to different individuals based on sex, age, SES, education, or other factors.

Figure 2. Occurrence of Planning in Health Behaviour Change Theories

2.3 To Plan or Not to Plan?

Considering the physiological, behavioural, and psychological challenges associated with smoking cessation, and the prevalence of theories emphasizing its critical role in behaviour change, it is no surprise that smoking cessation programs offered by trusted organizations such as Health Canada, Canadian Cancer Society, U.S. CDC, American Cancer Society all recommend planning quit attempts as part of a successful cessation strategy (American Cancer Society, 2007; Canadian Cancer Society, 2007; Health Canada, 2007; USDHHS, 2000). Among the activities identified by these agencies as part of a planned quit attempt are the selection of a quit date in the near future (i.e., sometime within the next 3-6 weeks), reviewing past quit attempts for lessons learned, identification of smoking triggers and methods for avoiding these triggers, selection of a method(s) for dealing with nicotine withdrawal, establishing a strong support network, identifying and preparing rewards as reinforcement for smoke-free behaviour, and devising strategies to deal with smoking triggers and momentary relapse.

2.4 Planning and Smoking Cessation

Although planning appears to be an integral part of behaviour change and is highly endorsed by the world's leading smoking cessation programmes, there has been very little research examining the relationship between planning and smoking cessation. Recently, four new studies have emerged, which suggest that smokers may not actually plan their quit attempts, and despite this lack of preparation, may be more successful in their attempts than their planning peers.

2.4.1 Unplanned Quit Attempts: The Emerging Evidence

Larabie (2005) conducted a series of in-depth, semi-structured, face-to-face interviews with 79 ex-smokers and 67 smokers attending a family medical practice to learn more about whether quit

attempts were planned or unplanned. Participants were asked about their smoking histories, past cessation attempts, reasons for quitting, most recent quit attempt, planning of this attempt, and length of abstinence following this attempt. Larabie found that the majority of participants reported making unplanned quit attempts (51%), and that 67% of ex-smokers were more likely to report that their most recent attempt was unplanned attempt than current smokers (37%).

Intrigued by Larabie's findings, West and Sohal (2005) conducted a retrospective, cross-sectional study using the British Market Research Bureau survey. Current and former smokers were asked about their smoking status, cigarette consumption, attempts to quit smoking, and about whether their last quit attempt was planned. Approximately 49% of smokers and ex-smokers reported that their last attempt was unplanned. The participant's who were most likely to make an unplanned quit attempt were male, over the age of 55, and belonging to the highest socioeconomic (SES) group. Those most likely to plan their attempt were female, between the ages of 35-54, and in the lowest SES group. Looking at the levels of success, defined as a quit attempt that lasted at least six months, West and Sohal found that both current and ex-smokers were more likely to succeed when their attempt was unplanned.

Extending the work of West and Sohal to a U.S. sample, Ferguson and colleagues, examined self-reported planning of quit attempts and smoking abstinence in a sample of 900 smokers and 800 ex-smokers participating in an online market research survey (Ferguson, West, Gitchell, Sembower, & Shiffman, 2008). Participants completed questions about their current smoking status, time spent planning the most quit recent attempt, how long the attempt lasted, time to first cigarette, cigarettes per day, and use of pharmacotherapy. Overall, 40.4% of participants reported that their last attempt was unplanned. Ex-smokers were more likely to report an unplanned attempt (50.6%) compared with current smokers (32.3%). Of those who reported that their attempt was unplanned, 70% reported that

their recent attempt lasted six months or more compared with 40% of those who planned their attempt. Comparing the characteristics of participant's who reported making an unplanned quit attempt to those who had planned their attempt, those making unplanned quit attempts were more likely to have no college education, wait longer than 30 minutes after waking to have their first cigarette of the day, and not use pharmacotherapy during their attempt. No significant differences were found between spontaneous and planned quitters in terms of age, gender, race, marital status, household income, or number of cigarettes per day.

Interested in determining how the process of planning to quit smoking may be related to other planning activities, Khwaja and colleagues (Khwaja, Silverman, Sloan, & Wang, 2007) conducted a set of telephone interviews as part of a Survey on Smoking. Current, former, and never smokers were asked about their level of agreement to questions about the amount of time spent thinking about financial, vacation, and smoking planning. Consistent with planning theories, spending a great deal of time financially planning was related to financial well-being. However, time spent planning smoking behaviour was not found to be related to current or future cigarette consumption. Most smokers and former smokers indicated that they did not spend a great deal of time planning their smoking behaviour, and were more likely to make an unplanned quit attempt. Furthermore, smoking planning was not well predicted by financial or vacation planning suggesting that the underlying processes involved in planning smoking may not be the same as those for financial or vacation planning. Based on these results and those of Larabie, Khwaja et al. (2007) concludes that encouraging smokers to quit may be inconsequential.

2.4.2 Limitations of Current Research

Although the Khwaja et al. build an interesting case, their conclusions may be premature. There are a number of important limitations of these studies which should be considered prior to making conclusive statements.

First, the research conducted by Larabie may not be representative or generalizable to other populations given that the sample of smokers and ex-smokers were recruited consecutively, from a single family medicine practice, and in order to be eligible for the study participants needed to smoke or have reported smoking at least 5 cigarettes per day. It should also be noted that males were underrepresented in the final sample, given that 73% of respondents were female. Furthermore, although face-to-face one-on-one interviews provide an opportunity to gather a rich source of data on the subject of planning and smoking cessation, it is also more susceptible to certain types of bias compared to other data collection methods. In particular, social desirability may have influenced the interviewees' responses. Participants' may have also been less forthcoming with responses to certain questions, given that the interviews were conducted in the physician's office. The retrospective design of the study is also subject to memory distortion bias (sometimes referred to as recall bias), where individual's may fail to report or misattribute information because of memory error. An additional concern is the subjective analysis of semi-structured interview responses which may be open to alternative interpretations.

Second, although the research conducted by West and Sohal used a much larger and more representative sample of individuals (n = 1,914), and structured research questions, the data was collected using a face-to-face interview subject to the effects of social desirability response bias. In this particular case, one of the survey response items on planning, "I did not plan the quit attempt in

advance; I just did it”, may have been more likely to have been selected because participant’s may have wanted to impress the interviewer with their will-power.

Third, both the West and Sohal, and Ferguson et al. studies were completed using marketing surveys that were not intended for monitoring or verifying complex smoking and quitting behaviour. As a result, there is insufficient data upon which to judge the smoking characteristics of participants included in the analysis, whether these characteristics if controlled for could explain the observed findings. Additionally, the data was based on retrospective reports of a quit attempt that may have been made up to 5 (West and Sohal) or 10 years (Ferguson et al.) earlier. A prospective or longitudinal collection of data would have been ideal for eliminating or reducing the effects of recall bias. Finally, the findings are based on a cross-sectional design, making it difficult to infer causality.

Further, the Khwaja et al. study is not without its own limitations. First, the study may not be representative of the full range of smokers and former smokers, given that participants had to be between 50-70 year olds in order to be eligible, in order to qualify for the survey participants had to have smoked at least 5 cigarettes per day, and 64% of the sample were women. Second, some reports of time spent planning by former subjects may be more prone to memory distortion bias, as a significant amount of time may have passed between the study completion date and when the participant previously quit (10 years or more). Third, the questions asked to determine financial, vacation, and smoking cessation planning were worded differently in each domain, making it difficult to determine whether the measures were truly measuring the same construct. A fourth limitation which should be noted is that this was also a cross-sectional survey.

Despite their limitations, these studies are among the first known to examine the concept of planning as it applies to smoking cessation. Combined, their findings seem to suggest that approximately half of all adult smokers plan to quit smoking at a given point in time, while the remaining half attempt to

quit smoking spontaneously or without a plan. What these studies do not indicate is whether planning is equally important for everyone or if planning is more important to different individuals based on different characteristics known to play an important role in other smoking cessation processes (e.g., age, sex, level of education, nicotine dependence, current cigarette consumption, length of time as a smoker, quitting history, expectancies for quitting, self-efficacy for quitting, health status, or baseline social support). Furthermore, the cross-sectional design of these studies which rely on retrospective reports of planning may be inaccurate, contributing to an over or underestimation of the actual prevalence of planned quit attempts. Understanding which types of individuals plan or initiate unplanned quit attempts is important for tailoring smoking cessation information and support, and directing the allocation of smoking cessation resources.

Chapter 3

Study Rationale and Research Questions

The recent research findings by Larabie, Ferguson et al., West and Sohal indicate that unplanned, or spontaneous quit attempts without prior planning or preparedness, may lead to more successful and longer smoking cessation periods relative to planned attempts. Additionally, research by Khwaja et al. suggest that encouraging smokers to plan to quit may not lead to actual cessation, and may actually result in smokers deferring quit attempts. Irrespective of the study limitations, these findings challenge conventional programs and theories recommending planned preparation as a key process involved in successful behaviour change. However, due to the scarcity of research and the limitations of existing research in this area, it would be premature to abandon prevailing models of smoking cessation recommending advanced planning and selection of a quit date. Replication of these studies and validation of retrospective reports seems warranted to affirm or challenge the prevalence and cessation outcomes of unplanned quit attempts.

3.1 Purpose

The purpose of this study is to obtain a better understanding of the role, use, and related effects of planning on smoking cessation behaviour.

3.2 Research Questions

1. What proportion of adult Ontario smokers planned their most recent quit attempt?
2. Do people who report planning for their most recent quit attempt differ by sex, age, education level, perceived addiction, number of cigarettes consumed per day, time to first cigarette after waking, age smoked daily, perceived health, number of lifetime quit attempts (serious),

perceived ease of quitting, confidence quitting, perceived benefit from quitting, and social support for quitting (support person or person making it difficult to quit)?

3. Are intentions to quit related to planning of the most recent quit attempt?
4. Are people who plan more likely to use certain preparatory behaviours believed to be related to planning (i.e., any use pharmacotherapy, formal support, or health professionals)?
5. Are people who plan more likely to be abstinent (for at least one week, at least one month)?

Chapter 4

Methods

4.1 Overview

This study involved the secondary analysis of self-reported, longitudinal data collected from adult current and former smokers participating in the Ontario Tobacco Survey (OTS) (Ontario Tobacco Research Unit [OTRU], 2006, March; http://www.otru.org/tobacco_survey.html). Briefly, the OTS is one of the few longitudinal surveys which data about planning of smoking cessation attempts is collected. Because of the design of the OTS, it is possible to examine information about smokers before and after they make a quit attempt, thus enabling examination of the questions of who plans, the theoretical constructs believed to be related to planning (e.g., intentions to quit), and how long individuals who plan remain abstinent. Figure 3 illustrates the conceptual design of the present study and highlights the key measures of interest. It should be noted that this study did not involve any experimenter delivered intervention or randomization of individuals to conditions. This is an observational study of natural events. A detailed description of the OTS, study sample, measures, and analyses are provided in the sections that follow. Ethics clearance for this study was provided by the Office of Research Ethics at the University of Waterloo (ORE #14960).

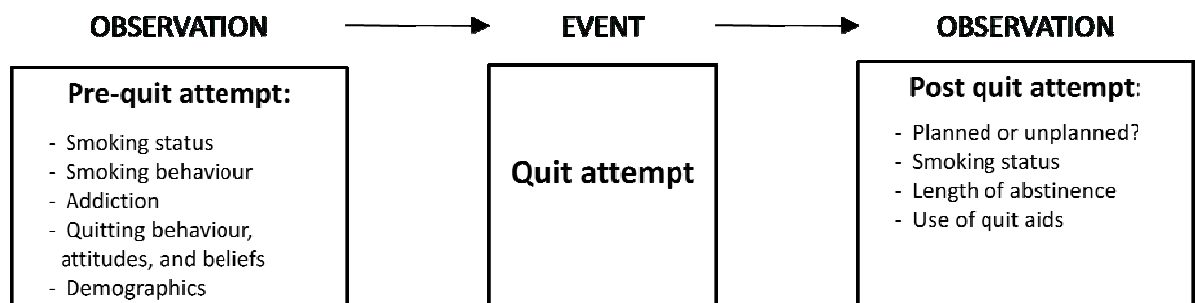


Figure 3. Study Design

4.2 Ontario Tobacco Survey

The OTS is a telephone survey of 7,500 adult smokers and non-smokers living in the province of Ontario. Initiated by OTRU, the main purpose of the OTS is to evaluate the Smoke-Free Ontario Strategy. A second purpose of the survey is to gain a better understanding of the processes and influences involved in smoking cessation and relapse. This survey allows for: 1) the assessment of provincial tobacco policies and programs; 2) monitoring of trends and opinions about tobacco use; and 3) informing researchers, policymakers, and health agencies about existing or future smoking policies and programs (OTRU, 2006, March; OTRU, 2007, July).

Structurally the OTS is a longitudinal survey of smokers and a cross-sectional survey of non-smokers conducted biannually since 2005. New survey waves are launched every six months to carefully evaluate the affects of different policies, programs, and media campaigns, as well as changes in tobacco use and opinions. This provides a more comprehensive picture of population and individual level responses. Each survey wave amasses a rich data set useful for describing complex behaviour. In addition, the longitudinal measurement of smokers permits the establishment of temporal relationships between measures otherwise not obtainable with cross-sectional designs. Further, the OTS is one of the few longitudinal studies asking smokers about whether they plan for their most recent quit attempt, making the OTS an ideal choice for exploring the role of planning in smoking cessation.

4.2.1 Target Audience and Recruitment

The target population of the OTS is adults aged 18 years or older, residing in private dwellings, in the province of Ontario. Excluded from the target populations are persons who were institutionalized in correctional facilities and long term care facilities, and persons who live on First Nations Reserves

and Canadian Forces Bases. Furthermore, because the OTS is a telephone based survey, persons without reasonable access to a telephone are not eligible. As a result, persons from rural and remote regions of the province, and those who rely solely on a cell phone are less likely to be surveyed.

The OTS uses a sample frame drawn from a Random Digit Dialing (RDD) sample program containing general phone numbers from the population that have been stratified into four geographical regions (Northern Ontario, Eastern Ontario, Toronto Region, and Western Ontario). The phone numbers are stratified by geographic region in advance to ensure that each region is proportionally represented (of the entire population) in the final survey sample. Further, numbers within each stratum are randomly ordered. Once a number has been drawn from the sample, sample units (households) are contacted by a professional survey research call centre, using specially trained interviewers.

Because the OTS relies on a probability sample to obtain a representative sample of all adults in Ontario, each person in the probability sample represents themselves plus several other persons not in the sample. Accordingly to ensure that data estimates are representative of the target population, each respondent is assigned a sampling weight indicating the number of individuals they represent in their specific geographical strata, age group (18-24, 25-44, 45-64, 65+), sex (male, female), and smoking status groups (non-smoker, smoker). The weights are then calibrated by summing estimates within characteristic groups and comparing the obtained values with corresponding population estimates for Ontario from the 2001 census (OTRU, 2006, March). This process is repeated for the creation of longitudinal weights which account for different participant retention rates for a specific cohort across each wave.

After a household has been contacted, interviewers confirm the number of adults (18+ years of age) living in the home. If there is more than one adult in the home, the interviewer asks to speak with the

adult celebrating the next birthday to reduce respondent selection bias. To determine eligibility, respondents are first asked if they have “smoked at least one cigarette in the past six months”. If the respondent answers “Yes”, they are invited to participate in the longitudinal smoker survey. If the respondent answers “No” the respondent is invited to participate in the cross-sectional non-smoker survey. Recruitment into the longitudinal survey is limited to 750 smokers, and the cross-sectional survey to 500 non-smokers for each wave or cohort. Households continue to be selected at random until all smoker and non-smoker quotas within each geographic region are filled. The design of the OTS does not include a cohort replenishment system. Thus, at each wave 750 individuals are recruited for the longitudinal survey, regardless of the attrition rate of the previous cohorts for a specific wave.

4.2.2 Data Collection

Data for the OTS is collected by the Survey Research Centre (SRC; <http://www.src.uwaterloo.ca/>) located at the University of Waterloo. All surveys are conducted by trained interviewers using a Computer Assisted Telephone Interviewing (CATI) program. Using standardized protocols and survey questions, respondents are asked about their attitudes and opinions on a variety of tobacco use, secondhand smoke, and media items. The non-smoker survey takes approximately 15 minutes to complete, while the smoker survey is approximately 25 minutes in length. In addition to certain core measures, the longitudinal OTS (Appendix A and B) contains an array of questions about smoking behaviour, addiction, quitting behaviour, use and knowledge of quit aids, use of and advice from health professionals to quit smoking, cigarette purchasing profile, point of purchase, second hand smoke, typology, the tobacco industry, mass media, and individual demographics. Immediately following completion of the survey, respondents are sent a thank-you letter and \$15 in appreciation for their assistance. After completing the initial survey, smokers are re-contacted every six months for

up to 3 years to complete follow-up surveys. Longitudinal survey respondents lost to attrition are not replenished.

Since 2005, five waves of survey data have been collected. The first OTS wave was completed between July and December of 2005. For waves 2, 3, 4, and 5 data were collected during the six month period immediately following the previous survey wave (January-June 2006 for wave 2, July-December 2006 for wave 3, January-June 2007 for wave 4, and July-December 2007 for wave 5).

Figure 4 illustrates the sequence and timing of data collection by wave and cohort (group of smokers recruited for the longitudinal survey at the same wave and followed over time).

All OTS recruitment and data collection procedures were reviewed and cleared by the Ethics Review Boards at the University of Toronto, the Centre for Addiction and Mental Health, and the University of Waterloo (OTRU, 2007).

Figure 4. Sequence and Timing of OTS Data Collection by Wave and Cohort

4.2.3 Longitudinal Smoker Survey Response, Cooperation, and Retention Rates

Recruitment response rates (proportion of eligible individuals agreeing to participate in the survey) (American Association of Public Opinion Research [AAPOR], 2008; AAPOR Response Rate #4) are presented in Table 1. In general, these rates were high and in keeping with recommended response rates for public opinion surveys of high policy importance (Public Works and Government Services of Canada, 2007). Specific recruitment response rates across the cohorts ranged from 57.9% to 65.8%.

Table 1. Longitudinal Smoker Survey Recruitment Response Rates

	Cohort 1	Cohort 2	Cohort 3	Cohort 4	Cohort 5
	% (n)	% (n)	% (n)	% (n)	% (n)
Response Rate (n)	62.8% (750)	65.8% (752)	64.2% (750)	58.0% (751)	57.9% (768)

Note. From OTRU (2007, February).

Follow-up response rates for returning smokers (proportion of previous cohort respondents agreeing to participate in the subsequent follow-up survey) (Table 2) were much higher as the number of individuals having completed the previous survey is used as the basis for determining potential eligibility and excludes the number individuals who were untraceable (e.g., moved, wrong number, number no longer in service). Follow-up response rates ranged from 87.0% - 91.9%.

Table 2. Longitudinal Smoker Survey Follow-up Rates by Wave

	Wave 1	Wave 2	Wave 3	Wave 4	Wave 5
	%	%	%	%	%
Cohort 1	n/a	91.9%	87.0%	89.2%	^a
Cohort 2	n/a	n/a	91.8%	87.5%	87.9%
Cohort 3	n/a	n/a	n/a	90.9%	88.9%
Cohort 4	n/a	n/a	n/a	n/a	89.9%
Cohort 5	n/a	n/a	n/a	n/a	n/a

Note. From OTRU (2007, February).

^a Cohort 1 retired at the end of wave 4 in accordance with the wave 1 recruitment agreement

Cooperation rates (proportion of those agreeing to participate in the survey out of all those contacted) (AAPOR, 2008) are presented in Table 3. On average, cooperation rates were high for both the new cohorts (84.7%) and returning cohorts (96.6%). Cooperation rates for returning cohorts were higher as these values were calculated using the total number of respondents having completed the previous wave as a reference.

Table 3. Longitudinal Smoker Survey Cooperation Rates by Wave

	Wave 1	Wave 2	Wave 3	Wave 4	Wave 5
	%	%	%	%	%
Cohort 1	85.2%	98.1%	96.3%	97.3%	^a
Cohort 2	n/a	86.0%	97.5%	94.9%	96.1%
Cohort 3	n/a	n/a	87.5%	97.0%	96.2%
Cohort 4	n/a	n/a	n/a	81.8%	96.3%
Cohort 5	n/a	n/a	n/a	n/a	83.1%

Note. From OTRU (2007, February).

^a Cohort 1 retired at the end of wave 4 in accordance with the wave 1 recruitment agreement

Retention rates for smokers participating in each longitudinal wave are presented in Table 4. The retention rate indicates the proportion of respondents that who complete a follow-up wave that are retained from their original baseline cohort (Bondy et al., 2006). In general, retention rates for the OTS are high (>72.0%).

Table 4. Longitudinal Smoker Survey Retention Rates (Cumulative) by Wave

	Wave 1	Wave 2	Wave 3	Wave 4	Wave 5
	% (n)	% (n)	% (n)	% (n)	% (n)
Cohort 1	n/a (750)	87.6% (657)	79.1% (593)	76.8% (576)	^a
Cohort 2	n/a	n/a (752)	84.4% (635)	79.5% (598)	72.3% (544)
Cohort 3	n/a	n/a	n/a (750)	86.5% (649)	80.3% (602)
Cohort 4	n/a	n/a	n/a	n/a (751)	82.6% (620)
Cohort 5	n/a	n/a	n/a	n/a	n/a (751)

Note. From OTRU (2007, February)

^a Cohort 1 retired at the end of wave 4 in accordance with the wave 1 recruitment agreement

4.3 Study Selection Criteria, and Sample

This study drew upon the responses of adult smokers (18 years of age or over) participating in the longitudinal OTS, who indicated at the time of recruitment that they had smoked during the past six months. Due to the routing sequence of questions in the OTS, respondents will have also indicated at the baseline surveys, that they have smoked over 100 cigarettes in their lifetime, and smoked at least 1 cigarette per day. Because the key question about planning (see section 4.4.3) was introduced at Wave 5, only respondents from cohorts 2, 3, and 4 who had completed a) wave 5, and b) at least one previous survey wave were eligible. Further, to be eligible, these respondents must have made a quit attempt sometime in the six months prior to completing the wave 5 survey. Individuals who made quit attempts prior to Wave 4 were excluded because key details about the planning of these attempts was not collected. Respondents in cohort 5 were excluded because key details about the time they were able to remain abstinent during their most recent quit attempt were not collected. Figure 5 illustrates the sample selection procedure.

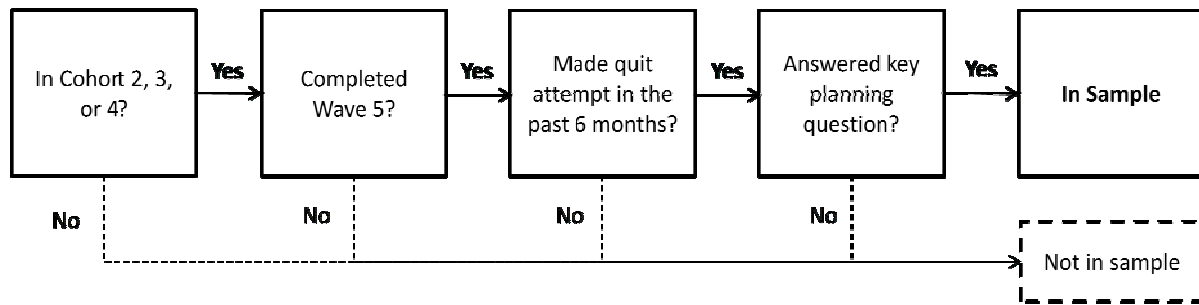


Figure 5. Sample Selection Procedure

4.4 Measures

Selected OTS measures used in the current study are described below beginning with how the most recent quit attempt was defined, followed by a description of quit process (planning, use of quit aids) and abstinence measures, and the personal attributes used as covariates (independent variables anticipated to affect the relationship between the outcome measures and other independent variables).

4.4.1 Defining the Most Recent Quit Attempt

Responses to the wave 5 question, “In the past 6 months, did you try to quit smoking completely? (SB15)” were used to identify those who made a quit attempt and those who did not.

4.4.2 Quit Process Measures

Planning

Planning of the most recent quit attempt was determined using responses to the question “Which of these statements best describes how your most recent quit attempt started? (QB18a).” Attempts for which individuals reported they had planned “later the same day,” “the day beforehand,” “a few days beforehand,” “a few weeks beforehand,” or “a few months beforehand” were defined as **planned** while attempts for which the individual reported that “they did not plan the attempt in advance they

just did it” were defined as *unplanned*. This planning question was added to the OTS at Wave 5 and did not appear in earlier survey waves. Thus, information about planning for previous quit attempts is not available.

Use of Quit Aids

The use of quit aids during a specific quit attempt may be seen as proxy measure of a developed quit plan (i.e., preparation for dealing with withdrawal, difficult situations, and assistance remaining quit). As such, four items – use of pharmacotherapy, health professionals, other formal support, and any quit aids, were identified from the quit aid use questions contained in the OTS. Quit aid use responses were taken from the same waves in which a respondent reported making their most recent quit attempt. Use of pharmacotherapy was defined by response of “yes” to any or all of the following items: In the past six months did you use...“nicotine patches (QA2aa),” “nicotine gum or chewing pieces like Nicorette (QA3),” “a nicotine inhaler (QA4),” “Zyban or bupropion (QA5a),” “Wellbutrin (QA5b),” and “Champix or Varenicline (QA34).” Use of health professionals was defined by a response of “yes” to any or all of the following items: In the past six months, did the “dentist advise you to reduce or quit smoking (HP1A),” “pharmacist advise you to reduce or quit smoking (HP1B),” and “doctor advise you to reduce or quit smoking.” Use of other formal support was defined by a response of “yes” to any or all of the following items: In the past six months have you/did you “use hypnosis, acupuncture, or laser therapy (QA6),” “used a self-help booklet or video, website or chat group (QA7),” “been to group counseling or a group support program (QA8),” “see a specialized addiction counsellor (QA9),” “called the Ontario Smoker’s Helpline (QA23),” and “taken part in a quit program (QA25).” Any use of quit aids was defined by a response of “yes” to any use of pharmacotherapy, and/ or health professionals, and/ or formal support.

4.4.3 Abstinence Measure

Responses to the questions, “How long ago was it that you last smoked a cigarette? (SB3a, SB3b)” and “In the past 6 months, what was the longest amount of time you stayed smokefree? (SB21b)” were used to determine the length of abstinence for an individual’s most recent quit attempt. Reported time since the last cigarette was smoked was used to determine the length of abstinence for respondents who reported that they had quit and were not currently smoking at wave 5. Reported time that a respondent was able to stay smokefree was used to determine the length of abstinence for respondents who reported that they had made a quit attempt but were currently smoking at wave 5. Verbatim responses were categorized into abstinence lasting one week or less, more than one week but less than one month, 1-6 months, 7-11 months, 12-18 months, and 18 months or longer for each group and combined into a single abstinence variable. These categories were later collapsed and dichotomized into “yes” or “no” values for abstinence lasting at least one week, and abstinence lasting at least one month.

Current smoking status was determined using a combination of responses to the questions: “At the present time, do you smoke cigarettes every day, almost every day, occasionally, or not at all? (SB1)”; “Have you smoked at least 100 cigarettes in your life? (SB2),” and “How long ago was it that you last smoked a cigarette? (SB3a, SB3b).” Respondents were classified as being a daily smoker, occasional, former, or never smoker (dvCAMHsmk5) (Table 5) based on definitions constructed by the Centre for Addiction and Mental Health and OTRU (OTRU, 2006, March).

Table 5. Smoking Status Variable Coding Procedure

Smoking Status	Operational Definition	Question		
		SB1. At the present time, do you smoke cigarettes?	SB2. Have you smoked at least 100 cigarettes in your life?	SB3a, SB3b. How long ago was it that you last smoked a cigarette?
Never	Has never smoked OR Has not smoked 100 cigarettes in their life	Never smoked	-	-
		-	No	-
Former (1yr +)	Does not currently smoke cigarettes, has smoked 100 cigarettes in life, and has not had a cigarette in the year or longer OR Smokes occasionally, has smoked 100 cigarettes in life, and has not had a cigarette in the past year or longer	Not at all	Yes	1 to 5 years ago, or More than 5 years ago
		Occasionally	Yes	1 to 5 years ago, or More than 5 years ago
Former (30d-1yr)	Does not currently smoke cigarettes, has smoked 100 cigarettes in life, and has not had a cigarette in the past 30 days to 1 year OR Smokes occasionally, has smoked 100 cigarettes in life, and has not had a cigarette in the past 30 days to 1 year	Not at all	Yes	1 to 6 months ago, or 7-11 months ago
		Occasionally	Yes	1 to 6 months ago, or 7-11 months ago
Occasional	Presently does not smoke at all, has smoked 100 cigarettes in life, and has had a cigarette in the past month OR Smokes occasionally, has smoked 100 cigarettes in life, and has had a cigarette in the past month	Not at all	Yes	One week or less, or More than one week but less than one month ago
		Occasionally	Yes	One week or less, or More than one week but less than one month ago
Daily	Smokes every day or almost every day, has smoked	Every day, or Almost every day	Yes	-

4.4.4 Personal Attributes Used as Key Covariates

Demographic Variables – Sex, Age, and Education

Respondents were asked about their sex (dvsex), year of birth (DE1), and highest level of education completed (DE2). Year of birth responses were recorded verbatim and used to derive a continuous age variable (dvage).

For education respondents were asked, “What is the highest level of education you have completed? (DE2).” Respondents could choose from the following response categories: no schooling; some elementary; completed elementary; some secondary; completed secondary; some community college, CEGEP or nurse’s training; completed community college, CEGEP or nurse’s training; some university or teacher’s college; completed university or teacher’s college; other education or training. This education variable was later collapsed into a variable describing individual’s with some or completed post-secondary experience (college, CEGEP or nurse’s training, university) and those without.

Perceived Addiction

Self-perceived addiction was assessed by asking “Would you say that you are not at all addicted to cigarettes, somewhat addicted to cigarettes or very addicted to cigarettes?”(AD1, AD1a, AD1b). A “very addicted” (yes or no) variable was created by grouping the “not at all addicted,” and “somewhat addicted” together and leaving the “very addicted” as a separate group.

Cigarettes per Day

Another indicator of an individual’s level of addiction, the number of cigarettes smoked per day (CPD), was calculated using respondents answers to the following questions: “In the past month, on

how many weekend days did you smoke at least one cigarette?” (SB5); “In the past month, on how many weekdays did you smoke at least one cigarette?” (SB6); “Over the past month, on the weekend days that you did smoke, about how many cigarettes did you usually smoke?” (SB7); and “On the weekdays that you did smoke, about how many cigarettes did you usually smoke?” (SB8).

Respondent answers to these four questions were used to indicate the average number of cigarettes consumed per day in the past 30 days by multiplying the number of days smoked by the corresponding number of cigarettes smoked, then subsequently adding the weekday and weekend values, and finally dividing this value by 30 (dvavgcons).

Time to First Cigarette

The time to first cigarette, an additional measure of addiction, was collected from respondents’ answers to the question “How soon after you wake up do you usually smoke your first cigarette?” (AD2). Respondents could indicate the amount of time between waking and the first cigarette in hours or minutes. Responses were recorded according to the self-reported number of minutes to the first cigarette (dvAD2). Short self-reported time values (≤ 5 minutes) have been associated with high levels of nicotine dependence, while long values ≥ 61 minutes have been associated with low levels of nicotine dependence (Heatherton, Kozlowski, Frecker, & Kozlowski, 1991).

Age Smoked Daily

To determine when a respondent first began smoking daily, respondents were asked, “At what age did you begin to smoke cigarette daily?” (SB10). Responses were recorded verbatim.

Perceived Health

Perceived health status was determined by asking respondents, “In general, would you say your health is: excellent, very good, good, fair, or poor?” (QB5, DE3). For analyses, responses were collapsed into two groups – those describing their health as excellent or very good, and those describing their health as good, fair, or poor.

Number of Lifetime Quit Attempts (Serious)

Information about a respondent’s attempts to quit smoking was collected from the following questions: “How many times have you EVER made a serious attempt to quit smoking?” (QB10); and “How many times have you made a serious attempt to quit smoking in the past 6 months? By serious we mean that you made a conscious attempt to stay off cigarettes for good?” (QB11a, QB11b). Respondent’s responses to these questions were summed in order to calculate the total number of lifetime quit attempts made by each respondent prior to the most recent quit attempt.

Intentions to Quit

Future intentions to quit were assessed by asking: “Are you planning to quit smoking within the next month, within the next 6 months, sometime in the future beyond 6 months, or are you not planning to quit?” (QB7). Responses were split into two categories – those planning to quit within the next six months (planning to quit in the next month + within the next six months), and those not planning to quit in the next six months (beyond six months or not planning).

Perceived Ease of Quitting

Perceived ease of quitting was determined by asking respondents, “How easy or hard would it be for you to completely quit smoking if you wanted to?” (QB1). Respondents could select from one of four response options: “very easy,” “somewhat easy,” “somewhat hard,” or “very hard.” Responses were later dichotomized into those reporting it would be “very hard” and those reporting it would be “very easy, somewhat hard, or very hard.”

Perceived Confidence Quitting

To assess their level of confidence in their quit ability, respondents were asked “How confident are you that you would succeed if you decided to quit completely in the next six months?” (QB2). Respondents could indicate whether they were “very confident,” “fairly confident,” “not very confident,” or “not at all confident.” These responses were also collapsed, creating a new variable – very confident quitting (no or yes), by combining “fairly confident,” “not very confident,” and “not at all confident” responses into the no group, and changing the “very confident” to the yes group.

Perceived Benefit from Quitting

Perceptions of benefit from quitting were determined by responses to the question, “How much do you think you would benefit from health and other gains if you were to quit smoking permanently in the next 6 months?” (QB6a). Participants could respond with the following options, “not benefit at all,” “benefit a little,” “benefit quite a bit,” or “benefit a lot.” A new dichotomous variable was created, benefit a lot (no or yes), by collapsing those who responded they would “not benefit at all, benefit a little, or benefit quite a bit” into the no response group and converting the benefit a lot responses into the yes group.

Quitting Support Person

Information about whether a respondent had an individual who could provide quitting support was determined by yes or no responses to the question: “If you decided to quit smoking, do you have at least one person you could count on for support?” (QB3).

Person Making it Difficult to Quit

Information about whether a respondent had an individual who would make it difficult was determined by yes or no responses to the question: “Is there anyone who might make it more difficult for you to quit smoking if you wanted to?” (QB4). Participants could respond either “yes” or “no.”

4.5 Analyses

All analyses were conducted using SAS 9.1.3 (SAS Inc., Cary, NC.). Following sample selection and prior to analysis, the data set was reviewed for any unusual values or patterns which could affect the quality of the data and analyses. Missing values were noted and a statistical procedure, multiple imputation (MI), was applied. Compared to direct analyses of the partially complete (data as collected) or completed case (data containing only those cases for which responses to all variables was available), MI reduces potential response and survey completion bias and improves the ability to detect relationships between the key variables under investigation. The MI procedure generates several unique complete data sets in which missing data points are replaced with randomly selected values that are representative of the distribution of all possible response values for that question item (Rubin, 1987). Within MI, different procedures can be used to impute missing values depending on the missing data pattern (SAS, 2001). Based on a review of the current data and its arbitrary pattern of missingness (i.e., pattern of missing data appears anywhere in the data non-systematically as opposed to being in a series) (Allison, 2001), a Markov Chain Monte Carlo (MCMC) procedure was used. The

MCMC approach identified values for each missing data point based on a complex chain of observed values for the case, estimates of uncertainty regarding the missing data, and stability of the missing elements within the chain (SAS, 2001).

Once the complete data sets were created, analyses of the research questions was conducted using the advanced SAS survey procedures – SURVEYMEANS, SURVEYFREQ, and SURVEYLOGISTIC (SAS Institute Inc., 2008), to account and adjust for the complex design of the OTS (i.e., stratification, sampling units, and survey weights). Analyses of each of the complete data sets was then combined using the SAS procedure – MIANALYZE (SAS Institute Inc., 2001), to derive inferences about the parameters of interest. Specific analyses for each research question are described below. All analyses were conducted using both weighted and unweighted data. Survey weights were provided by the OTS data analysis team. The assigned weights were established based on the geographical strata, age group (18-24, 25-44, 45-64, 65+), sex (male, female), and smoking status groups (non-smoker, smoker) to which the individual belonged and representativeness of the population of Ontario based on the 2001 census. Separate analyses were conducted for data sets containing partially complete, complete, and imputed cases.

4.5.1 Question 1: What proportion of adult Ontario smokers planned their most recent quit attempt?

SURVEYFREQ was used to generate frequencies of respondents' responses to the question, "Which of these statements best describes how your most recent quit attempt started?" (QB18a). Separate analyses were conducted for: planning categories as initially reported, planned and unplanned attempts (defined in section 4.4.2), and type of plan (unplanned – just did it; short-term plan – attempt was planned same day to a few days beforehand; and longer-term plan – attempt planned a few weeks to a few months beforehand). The proportion of those reporting a planned quit attempt was

determined using the total number of respondents having made a recent quit attempt (during the survey) and completing the planning question as the denominator.

4.5.2 Question 2: Do people who plan differ on certain personal characteristics?

Descriptive statistics (using SURVEYFREQ and SURVEYMEANS) were generated for respondents using the different plan types (planned or unplanned quit attempt) for each covariate of interest (sex, age, education level, perceived addiction, number of cigarettes consumed per day, time to first cigarette after waking, age smoked daily, perceived health, number of lifetime quit attempts, intentions to quit, perceived ease of quitting, confidence quitting, perceived benefit from quitting, a support person to count on for quitting, or presence of a person who would make it difficult to quit). Because the most recent responses were of interest, for all respondents, information about these characteristics were taken from surveys completed at wave 4, with the exception of sex, education level, age, and number of lifetime quit attempts. Information about a respondent's sex and education level were taken from the baseline survey responses. Information about their age and number of lifetime quit attempts was also taken from the baseline survey. However, to account for the fact that respondents in cohorts 2 and 3 have aged, six months was added to their baseline ages for each additional follow-up survey completed. In addition, because respondents in cohorts 2 and 3 may have made additional serious quit attempts, the number of serious lifetime quit attempts and the number of lifetime quit attempts over each six months survey period were summed.

Logistic regression analysis was then conducted using the SURVEYLOGISTIC procedure to determine if people who report planning for their most recent quit attempt differ from those whose attempt was unplanned. Several logistic regression models were generated with planning (coded planned=1, unplanned=0) being the outcome of interest. In order to correct for the default modeling procedure in SURVEYLOGISTIC, the statement "event=1" was added to model planning. Based on

the results of univariate modeling, potential predictors of planning were identified (p value of 0.20 or less) for further analysis to construct a best predictor model of planning. Backward selection procedures were then applied to identify a parsimonious model.

4.5.3 Question 3: Are intentions to quit related to planning of the most recent quit attempt?

To determine if intentions to quit were related to planning, a logistic regression analysis was conducted. The outcome of interest for was planning (coded planned=1, unplanned=0, modeled as event=1). Intentions to quit at Wave 4 were used as the key explanatory variable (coded within the next six months=1, not within the next six months=0). Initial analysis involved construction of a crude model to determine if intentions to quit significantly predicted planning without controlling for other key covariates. Subsequent modeling included intentions to quit adjusted for the significant key covariates identified in question 2.

4.5.4 Question 4: Are planners more likely to use certain preparatory behaviours believed to be related to planning?

Bivariate analyses were initially performed to determine the frequency of use of quit aids by plan type (planned versus unplanned) during the same six month survey period in which the most recent quit attempt occurred. Separate logistic regression analyses were then conducted to examine the likelihood of planners compared to non-planners for: 1) use of any quit aid (coded yes=1, no=0); 2) any pharmacotherapy (coded yes=1, no=0); 3) any advice from health professionals (coded yes=1, no=0); and 4) any use of other formal support (coded yes=1, no=0). For each model of preparatory behaviour event=1, where 1 = yes.

4.5.5 Question 5: Are people who plan more likely to be abstinent?

Separate logistic regression models were created to examine the likelihood of remaining abstinent for at least one week, and at least one month (yes=1, no=0). Crude models were initially constructed to determine if a relationship existed between planning and each abstinence outcome of interest.

Chapter 5

Results

A total of 434 (24.6%) wave 5 respondents from cohorts 2, 3, and 4 reported making a quit attempt. Of these respondents, 422 (97.2%) completed the question on planning. One participant was excluded from this analysis because their planning response was “other” and could not be classified with confidence as having made a planned or unplanned attempt. Three other respondents were excluded because they were identified as non-smokers. The final sample consisted of 418 respondents.

5.1 Missing Data

Ten per cent of the partial complete data set under study was missing. However, for specific variables the total percentage of missing responses was higher. In particular, the percentage of overall missing responses for Time to First Cigarette was 30.9%. No data was missing for sex, age, and use of other formal support. The unweighted and weighted frequencies and proportions of missing responses for each study variable are reported in Table 6. Of the 418 cases included in this analysis, 182 (43.5%) had at least one missing response value for the study variables of interest. Results of SURVEYLOGISTIC regression modeling revealed that the likelihood of having at least one missing variable was related to having a lower education level ($p < .01$), a poorer perception of health ($p < .01$), having a person that would make quitting difficult ($p < .01$), and use of a quit aid ($p < .01$), when controlling for all other variables of interest (key covariates and outcome measures). The percentage of planned and unplanned cases missing at least one response was 40.9% and 50.9% respectively. This difference was not significant, $\chi^2(1, N = 390) = 2.24, p = 0.13$. Chi-squared testing of completed and missing responses for each of the individual variables of interest and planning revealed no statistically significant differences ($p > 0.05$).

Table 6. Frequency of Missing Data for Study Variables by Plan Type

Variable	Plan Type			
	Planned		Unplanned	
	n=308	Wtd ^a n=274	n=110	Wtd ^a n=116
Use any quit aid	28 (9.1%)	24 (8.8%)	18 (16.4%)	19 (16.4%)
Use of pharmacotherapy	0 (0.0%)	0 (0.0%)	1 (0.9%)	3 (2.6%)
Use of other formal support	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Use of health professionals	28 (9.1%)	24 (8.8%)	18 (16.4%)	19 (16.4%)
One week abstinence	15 (4.9%)	12 (4.4%)	9 (8.2%)	8 (6.9%)
One month abstinence	15 (4.9%)	12 (4.4%)	9 (8.2%)	8 (6.9%)
Sex	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Age	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Education	1 (0.3%)	0 (0.0%)	1 (0.9%)	0 (0.0%)
Perceived addiction	12 (3.9%)	15 (5.5%)	5 (4.5%)	8 (6.9%)
Cigarettes per day	34 (11.0%)	28 (10.2%)	16 (14.5%)	19 (16.4%)
Time to first cigarette (minutes)	88 (28.6%)	83 (30.3%)	40 (36.4%)	49 (42.2%)
Age first smoked daily	9 (2.9%)	9 (3.3%)	4 (3.6%)	4 (3.4%)
Perceived health	14 (4.5%)	17 (6.2%)	5 (4.5%)	7 (6.0%)
# Lifetime quit attempts	16 (5.2%)	10 (3.6%)	6 (5.5%)	12 (10.3%)
Intentions to quit	43 (14.0%)	36 (13.1%)	22 (20.0%)	25 (21.6%)
Ease of quitting	40 (13.0%)	38 (13.9%)	20 (18.2%)	24 (20.7%)
Confidence succeeding	40 (13.0%)	35 (12.8%)	20 (18.2%)	23 (19.8%)
Benefit from quitting	39 (12.7%)	34 (12.4%)	20 (18.2%)	24 (20.7%)
Support person	40 (13.0%)	37 (13.5%)	20 (18.2%)	24 (20.7%)
Difficult person	39 (12.7%)	34 (12.4%)	20 (18.2%)	24 (20.7%)

^a Wtd refers to the weighted values.

Based on the proportion of missing data, from this point onward, unless specified otherwise, weighted (*wtd*) values from the imputed data set are presented.

5.2 Proportion of Planned Quit Attempts

The weighted proportion of respondents endorsing the various type and time they spent planning before beginning their most recent quit attempt is presented in Figure 6. Approximately thirty per cent (29.7%, *wtd n* = 116) of respondents reported that they did not plan the quit attempt in advance. Four per cent (*wtd n* = 17) reported planning the quit attempt for later the same day and 9.2% (*wtd n* = 36) reported planning the quit attempt the day beforehand. The majority of respondents reported planning the most recent attempt either a few days beforehand (26.2%, *wtd n* = 102), a few weeks beforehand (20.8%, *wtd n* = 81), or a few months beforehand (9.7%, *wtd n* = 38).

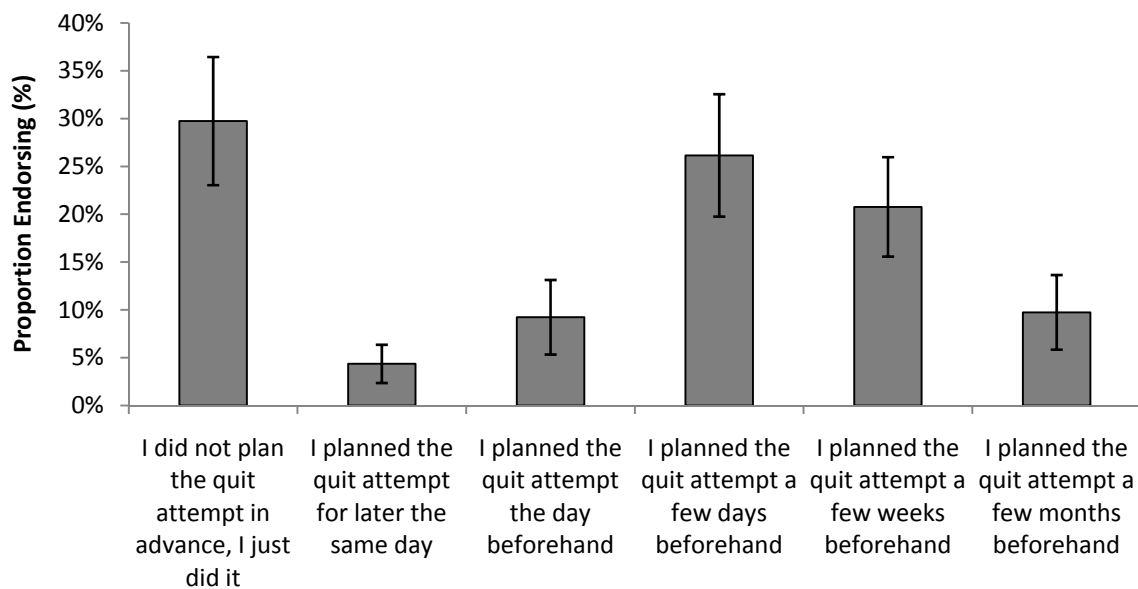


Figure 6. Weighted proportion of plan type according to responses to the question about how their most recent quit attempt was planned. *Note.* Error bars indicate the 95% confidence limits for percents.

Using the definition of planned and unplanned attempts proposed by West and Sohal, and Ferguson et al. (i.e., planned - planned anywhere between the same day and a few months beforehand; unplanned - they did not plan the quit attempt in advance, they just did it) 70% (*wtd n* = 274) of smokers made a planned attempt, while 30% (*wtd n* = 116) of smokers made an unplanned attempt (Figure 7).

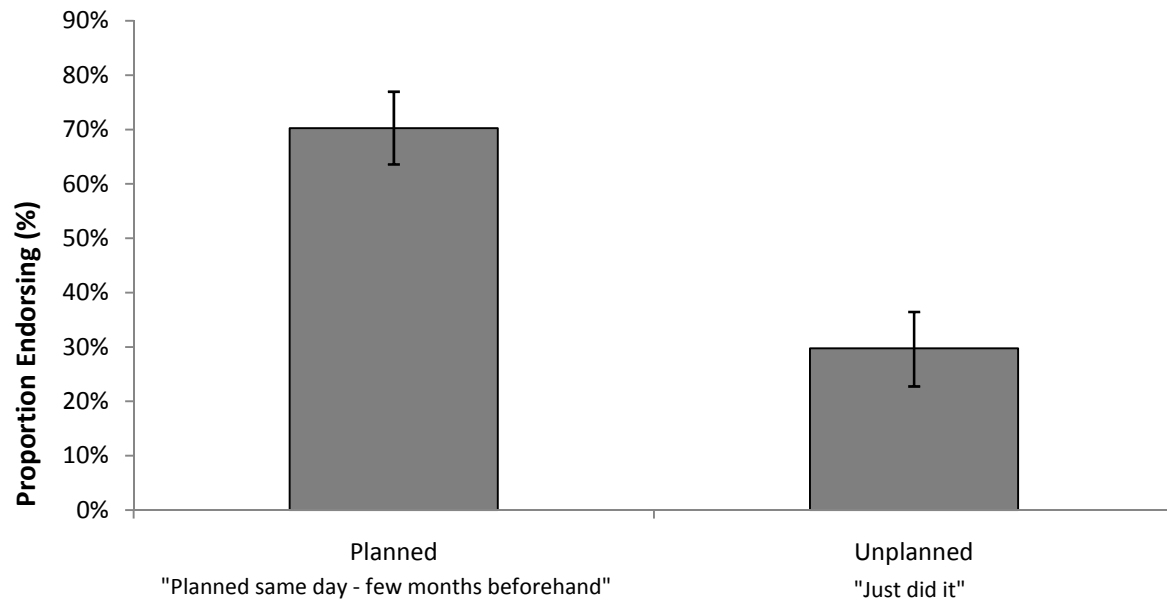


Figure 7. Weighted proportion of planned quit attempts. *Note.* Error bars indicate the 95% confidence limits for percents.

Analysis of the partially complete data revealed similar results. Seventy-five per cent reported planning for their most recent quit attempt, while the remaining 25% reported their most recent attempt was unplanned.

5.3 Personal Attributes of Individuals Making Planned and Unplanned

Attempts

Personal attributes of the final sample by plan type (planned or unplanned) are presented in Table 7 and Table 8. Examining the characteristics of those who planned, the mean age of those making a planned quit attempt was 41.1 years ($SD = 18.6$). They had an average of 5 previous lifetime quit attempts ($SD = 8.2$). On average, those who planned had smoked 12 cigarettes per day ($M = 12.3$, $SD = 12.5$) and had their first cigarette of the morning within an hour and a half of waking ($M = 84.4$, $SD = 125.9$).

Of those who made a planned quit attempt, half were male and half were female. A majority of planners had completed high school (84.6%). Most planners reported being very addicted to cigarettes (59.9%) and that it would be somewhat or very hard to quit (81.0%). Despite perceiving themselves as highly addicted and that it would be somewhat hard to quit, 69.7% of those making a planned quit attempt reported that they were fairly or very confident that they would succeed if they decided to quit completely within the next six months. Further, 88% of planners reported they had a person who would support them if they wanted to quit. Most planners reported that they were either in very good or good health (67.2%). The majority of those who planned believed that they would benefit quite a bit or a lot from health and other gains if they were to quit smoking permanently in the next six months (86.1%).

Table 7. Mean Age, Number of Lifetime Quit Attempts, Age Smoked Daily, Time to First Cigarette, and Cigarettes Smoked Per Day by Plan Type

Variable		Plan Type	
		Planned Wtd n=274	Unplanned Wtd n=116
Age (years)	Mean (SD)	41.1 (18.6)	38.6 (23.2)
# Lifetime quit attempts	Mean (SD)	5.0 (8.2)	3.9 (6.1)
Age smoked daily	Mean (SD)	17.4 (6.0)	17.8 (6.6)
Time to first cigarette (minutes)	Mean (SD)	84.4 (125.9)	128.4 (221.1)
Cigarettes per day	Mean (SD)	12.3 (12.5)	9.1 (10.7)

Note. The values presented are from the imputed data set.

Table 8. Personal Attributes of Sample by Plan Type

Variable	Response Option	Plan Type	
		Planned Wtd n=274 (%)	Unplanned Wtd n=116 (%)
Sex	Female	137 (50.0%)	36 (31.0%)
	Male	138 (50.0%)	80 (69.0%)
Education	Some elementary	0 (0.0%)	0 (0.0%)
	Completed elementary	10 (3.6%)	3 (2.6%)
	Some secondary	32 (11.7%)	14 (12.1%)
	Completed secondary	70 (25.5%)	42 (36.2%)
	Some college/CEGEP	14 (5.1%)	10 (8.6%)
	Completed college/CEGEP	70 (25.5%)	18 (15.5%)
	Some university	17 (6.2%)	2 (1.7%)
	Completed university	60 (21.9%)	26 (22.4%)
	Other	1 (0.4%)	0 (0.0%)
Perceived addiction	Not at all addicted	16 (5.8%)	16 (13.8%)
	Somewhat addicted	94 (34.3%)	60 (51.7%)
	Very addicted	164 (59.9%)	40 (34.5%)
Perceived health	Excellent	27 (9.9%)	14 (12.1%)
	Very Good	84 (30.7%)	49 (42.2%)
	Good	100 (36.5%)	34 (29.3%)
	Fair	55 (20.1%)	15 (12.9%)
	Poor	8 (2.9%)	4 (3.4%)
Ease of quitting	Very easy	6 (2.2%)	14 (12.1%)
	Somewhat easy	44 (16.1%)	34 (29.3%)
	Somewhat hard	90 (32.8%)	46 (39.7%)
	Very hard	134 (48.2%)	24 (20.7%)
Confidence succeeding	Not at all confident	20 (7.3%)	4 (3.4%)
	Not very confident	62 (22.6%)	24 (20.7%)
	Fairly confident	112 (40.9%)	44 (37.9%)
	Very confident	79 (28.8%)	44 (37.9%)
Benefit from quitting	Not benefit at all	2 (0.7%)	1 (0.9%)
	Benefit a little	37 (13.5%)	28 (24.1%)
	Benefit quite a bit	68 (24.8%)	35 (30.2%)
	Benefit a lot	168 (61.3%)	52 (44.8%)
Support person	Yes	241 (88.0%)	104 (89.7%)
	No	33 (12.0%)	12 (10.3%)
Difficult person	Yes	153 (55.8%)	65 (56.0%)
	No	121 (44.2%)	51 (44.0%)

Note. The values presented are weighted and from the imputed data set.

The odd ratios for planning as predicted by each of the personal attributes are presented in Table 9. Results of SURVEYLOGISTIC regression models indicate that men had odds half that of women for planning ($OR = 0.46$, $95\% CI: 0.25 - 0.84$, $p < .05$). Further, the odds of a smoker who perceived that they were “very addicted” planning were 2.7 times that of those who perceived that they were “not” or only “somewhat addicted” to cigarettes ($OR = 2.74$, $95\% CI: 1.52 - 5.35$, $p < .01$). Every additional cigarette a smoker consumes per day increase the odds of planning by a factor of 1.04 ($OR = 1.04$, $95\% CI: 1.01 - 1.08$, $p < .05$). The predicted odds for smokers who said it would be “very hard to quit” planning were 4.2 times the odds from smokers who thought it would be “very easy,” “somewhat easy,” or “somewhat hard” ($OR = 4.18$, $95\% CI: 2.11 - 8.29$, $p < .01$). Although not statistically significant at the $p < .05$ level, it is worth noting that odds for smokers who thought that they would “benefit a lot from health and other benefits” planning were 1.74 times the odds for smokers who thought that they would benefit “quite a bit,” “a little,” or receive no benefit from quitting ($OR = 1.74$, $95\% CI: 1.00 - 3.62$, $p = 0.05$).

Table 9. Odds Ratios and Confidence Intervals for Univariate Modeling of Personal Attributes Predicting Planning

Variable Model			Imputed (wtd n=390)			Partial (total wtd n=390)			Complete Case (wtd n =203)			
			OR	95% CI	<i>p</i>	OR	95% CI	<i>p</i>	wtd n	OR	95% CI	<i>p</i>
Sex	Female	(C)	1.00			1.00				1.00		
	Male		0.46	0.25-0.84	0.0117*	0.46	0.25-0.84	0.0116*	390	0.55	0.21-1.41	0.2133
Age	Continuous		1.01	0.99-1.04	0.3421	1.01	0.99-1.04	0.3407	390	1.02	0.99-1.06	0.2170
Education	No post-secondary	(C)	1.00			1.00				1.00		
	Some or completed post-secondary		1.55	0.81-2.96	0.1863	1.55	0.81-2.98	0.1848	388	0.75	0.30-1.90	0.5282
Perceived addiction	Not at all or somewhat addicted	(C)	1.00			1.00				1.00		
	Very addicted		2.74	1.52-5.35	0.0020**	3.13	1.64-5.96	0.0005**	367	2.79	0.99-7.88	0.0535
CPD	Continuous		1.04	1.01-1.08	0.0307*	1.05	1.01-1.09	0.0236*	343	1.06	1.00-1.13	0.0609
TTFC	Continuous		1.00	0.99-1.00	0.0572	1.00	0.99-1.00	0.0295*	258	1.00	0.99-1.00	0.0190*
Age smoked daily	Continuous		0.99	0.93-1.04	0.6446	0.99	0.93-1.05	0.6341	376	0.96	0.88-1.05	0.3525
Perceived health	Good, fair, or poor	(C)	1.00			1.00				1.00		
	Very good or excellent		0.57	0.30-1.08	0.0873	0.55	0.29-1.05	0.0688	366	0.47	0.18-1.20	0.1142
# Lifetime quit attempts	Continuous		1.04	0.98-1.11	0.2381	1.06	0.99-1.13	0.1056	368	1.02	0.96-1.09	0.4702
Ease of quitting	Very easy, easy, somewhat hard	(C)	1.00			1.00				1.00		
	Very hard		4.18	2.11-8.29	0.0002**	4.46	2.17-9.16	<.0001**	330	3.96	1.56-10.05	0.0039**
Confidence succeeding	Not at all or not very confident	(C)	1.00			1.00				1.00		
	Very or fairly confident		0.73	0.36-1.49	0.4001	0.77	0.36-1.66	0.5046	332	0.78	0.29-2.11	0.6177
Benefit from quitting	No, little, or quite a bit of benefit	(C)	1.00			1.00				1.00		
	Benefit a lot		1.74	1.00-3.62	0.0534	2.22	1.07-4.59	0.0322*	332	2.06	0.75-5.68	0.1642
Support person	No	(C)	1.00			1.00				1.00		
	Yes		0.83	0.37-1.87	0.4538	0.63	0.27-1.42	0.2632	329	0.62	0.23-1.70	0.3548
Difficult person	No	(C)	1.00			1.00				1.00		
	Yes		0.98	0.52-1.83	0.8636	1.01	0.50-2.03	0.9867	332	0.79	0.32-1.97	0.6126

* $p < .05$, ** $p < .01$, *Notes.* C = comparator. The odds ratios and confidence intervals provided above are derived from logistic regression models containing only the covariate listed as a sole predictor of planning. Other key variables are not controlled for.

Using the SURVEYLOGISTIC regression procedure with backwards selection of significant characteristics identified in the crude modeling ($p < .20$), ease of quitting and sex were identified as key predictors in a parsimonious model of planning (*Mallow's Cp* = 0.662) (Table 10). In the constructed model, smokers who reported that quitting would be “very hard” prior to making their attempt had odds 3.9 times of those who reported it would be “very easy,” “easy,” or “somewhat hard” to plan, when the effects of sex were controlled ($OR = 3.90$, $95\% CI: 1.97 - 7.73$, $p < .01$). Controlling for the effects of perceived ease of quitting, the odds of men planning were half that of women ($OR = 0.52$, $95\% CI: 0.28 - 0.97$, $p < .05$).

Univariate logistic regression analyses of the partially complete data found that in addition to the significant odds ratios for sex, perceived addiction, cigarettes per day, and ease of quitting already discussed, significant odds ratios were found for the variables time to first cigarette and benefit from quitting (Table 10). For every minute after waking an individual waited to consume their first cigarette of the day, the odds of planning their most recent quit attempt decreased by a factor of 0.99 ($OR = 0.99$, $95\% CI: 0.99 - 1.00$, $p < .05$). Individuals who reported that they thought they would “benefit a lot” from quitting had twice the odds of planning compared to those who thought they would benefit less or not at all ($OR = 2.22$, $95\% CI: 1.07 - 4.59$, $p < .05$). When the univariate factors that have a $p < .20$ were combined and eliminated through backwards selection, ease of quitting and benefit from quitting were found to significantly predict planning (*Mallow's Cp* = 0.657). In the constructed model for partially complete data, smokers who reported it would be “very hard” to quit and made a quit attempt, had odds 4.4 times of those who reported it would be easier to quit ($OR = 4.36$, $95\% CI: 2.11 - 9.04$, $p < .01$) when controlling for the effects of perceived benefit from quitting. Smokers who reported that they would “benefit a lot” from health and other gains and made a quit attempt, had twice the odds of smokers who reported that they would benefit less or not at all

($OR = 2.09$, 95% CI : 1.01 – 4.34, $p < .05$) when the effects of perceived ease of quitting were controlled for.

The univariate logistic regression analyses of the complete data indicated slightly different results from the imputed and partially complete sets (Table 10). In the complete set, only the odds ratios for the variables time to first cigarette and ease of quitting were found to be significant. According to analysis of the complete cases, for every minute after waking an individual waited to consume their first cigarette of the day, the odds of planning their most recent quit attempt decreased by a factor of 0.99 ($OR = 0.99$, 95% CI : 0.99 – 1.00, $p < .05$). Individuals who reported it would be “very hard” to quit had odds of planning four times those of individuals who reported it would be easier to quit ($OR = 3.96$, 95% CI : 1.56 – 10.05, $p < .01$). These variables were significant predictors of planning when modeled together (*Mallow’s Cp* = 0.629). In the complete case model predicting planning, smokers who reported it would be “very hard to quit” prior to quitting had three times the odds of planning compared of smokers who indicated it would be easier to quit ($OR = 2.93$, 95% CI : 1.24 – 6.91, $p < .05$) when controlling for the effect of time to first cigarette. When controlling for the effect of perceived ease of quitting, for every minute after waking an individual waited to consume their first cigarette of the day, the odds of planning their most recent quit attempt decreased by a factor of 0.99 ($OR = 0.99$, 95% CI : 0.99 – 1.00, $p < .05$).

Table 10. Parsimonious Models of Planning Predicted by Personal Attributes

Data Model Type	Final Model	Model Variables					c
				OR	95% CI	p	
Imputed	Planning = f(Ease of quitting + Sex)	Ease of quitting	Very easy, easy, somewhat hard (C)	1.00			0.662
			Very hard	3.90	1.97-7.73	0.0004**	
		Sex	Female (C)	1.00			
			Male	0.52	0.28-0.97	0.0396*	
Partial	Planning = f(Ease of quitting + Benefit from quitting)	Ease of quitting	Very easy, easy, somewhat hard (C)	1.00			0.657
			Very hard	4.36	2.11-9.04	<.0001**	
		Benefit from quitting	No, little, or quite a bit of benefit (C)	1.00			
			Benefit a lot	2.09	1.01-4.34	0.0469*	
Complete Case	Planning = f(Ease of quitting + TTFC)	Ease of quitting	Very easy, easy, somewhat hard (C)	1.00			0.629
			Very hard	2.93	1.24-6.91	0.0140*	
		TTFC	Continuous	1.00	0.99-1.00	0.0316*	

* $p < .05$, ** $p < .01$, Note. C = comparator.

5.4 Intentions to Quit and Planning

Table 11 presents the frequency of reported intentions to quit. Of the 274 smokers (*wtd*) who planned to quit, prior to the attempt, 190 (*wtd*; 69.3%) reported intentions to do so within the next six months. Only 17 (*wtd*; 6.2%) of planners reported they did not have any intentions to quit.

Table 11. Frequency of Reported Intentions to Quit by Plan Type

Variable	Response Option	Plan type	
		Planned Wtd n=274	Unplanned Wtd n=116
Intentions to quit	Within the next month	79 (28.8%)	19 (16.4%)
	Within 1-6 months	111 (40.5%)	38 (32.8%)
	Sometime in the future beyond 6 months	65 (23.7%)	44 (37.9%)
	Not planning to quit	17 (6.2%)	13 (11.2%)
	I have already quit	1 (0.4%)	2 (1.7%)

Note. The values presented are from the imputed data set.

Individuals with intentions to quit within the next six months had odds of planning that were 2.4 times those who intended to quit “sometime in the future beyond six months,” “did not intend to quit,” or reported that they “had already quit” ($OR = 2.40$, 95% CI : 1.24 – 4.62, $p < .05$). Adding the variable intentions to quit to the parsimonious model predicting planning identified in section 5.3, the model improved (*Mallow's Cp* = 0.714) (Table 12). All variables in the model (ease of quitting, sex, and intentions to quit) remained significant. While controlling for the effects of sex and intentions to quit, smokers who believed it would be “very hard to quit” had odds of planning that were four times that of those who felt quitting would be “very easy,” “easy,” or “somewhat hard” ($OR = 4.04$, 95% CI : 2.03, $p < .01$). Male smokers who attempted to quit had odds of planning that were half those of their female counterparts ($OR = 0.50$, 95% CI : 0.27 – 0.94, $p < .05$). Finally, compared to smokers without intentions to quit in the next six months, smokers with intentions to quit in the next six months had 2.7 times the odds of planning ($OR = 2.67$, 95% CI : 1.33 – 5.33, $p < .05$).

Logistic regression analyses of the partially complete and complete data sets also found that smokers who quit that reported having intentions to quit within the next six months had odds that were twice those of individuals with intentions to quit at a later time beyond six months or not at all ($OR = 2.73$, $95\% CI: 1.29 - 5.78$, $p < .01$; and $OR = 2.85$, $95\% CI: 1.09 - 7.44$, $p < .05$, respectively) (Table 12). Although initial models constructed for predicting planning were different, adding intentions to quit improved the final partial case model (*Model: Planning = f (Ease of quitting + Intentions to quit)*, *Mallow's Cp = 0.657*) and the complete case model (*Model: Planning = f (Ease of quitting + Time to first cigarette + Intentions to quit)*, *Mallow's Cp = 0.657*).

Table 12. Parsimonious Models of Planning Predicted by Personal Attributes and Intentions to Quit

Data Model Type	Final Model	Model Variables					c	
					OR	95% CI		p
Imputed	Planning = f (Ease of quitting + Sex + Intentions to quit)	Ease of quitting	Very easy, easy, somewhat hard	(C)	1.00			0.714
			Very hard		4.04	2.03-8.04	0.0003**	
		Sex	Female	(C)	1.00			
			Male		0.50	0.27-0.94	0.0312*	
		Intentions to quit	Not in the next 6 months	(C)	1.00			
			Within the next 6 months		2.67	1.33-5.33	0.0138*	
Partial	Planning = f (Ease of quitting + Intentions to quit)	Ease of quitting	Very easy, easy, or somewhat hard	(C)	1.00			0.701
			Very hard		4.86	2.28-10.36	<.0001***	
		Intentions to quit	Not in the next 6 months	(C)	1.00			
			Within the next 6 months		3.02	1.38- 6.59	0.0056**	
Complete Case	Planning = f (Ease of quitting + TTFC + Intentions to quit)	Ease of quitting	Very easy, easy, or somewhat hard	(C)	1.00			0.709
			Very hard		3.16	1.26-7.96	0.0146*	
		TTFC	Continuous		1.00	0.99-1.00	0.0197*	
		Intentions to quit	Not in the next 6 months	(C)	1.00			
			Within the next 6 months		3.36	1.29-8.76	0.0131*	

* $p < .05$, ** $p < .01$, *** $p < .001$. Note. C = comparator.

5.5 Use of Quit Aids during Planned Attempt

Use of quit aids, during the six month period in which individuals made their quit attempt, was mixed (see Table 13). The majority of smokers who planned their attempt reported using at least one quit aid (79.9%, *wtd n* = 219). Approximately two-thirds planners reported receiving advice from a health professional to quit (63.1%, *wtd n* = 173), while fewer than half (44.9%, *wtd n* = 123) reported using at least one form of pharmacotherapy, and less than 25% reported using some other form of formal support (22.6%, *wtd n* = 62).

Table 13. Reported Use of Quit Aids During Quit Attempt Period by Plan Type

Independent Variable	Response Option	Plan Type	
		Planned Wtd n=274	Unplanned Wtd n=116
Use any quit aid during attempt	Yes	219 (79.9%)	63 (54.3%)
	No	55 (20.1%)	53 (45.7%)
Use of pharmacotherapy during quit attempt	Yes	123 (44.9%)	23 (19.8%)
	No	151 (55.1%)	93 (80.2%)
Use of other formal support during quit attempt	Yes	62 (22.6%)	16 (13.8%)
	No	212 (77.4%)	100 (86.2%)
Use of health professionals during quit attempt	Yes	173 (63.1%)	55 (47.4%)
	No	101 (36.9%)	61 (52.6%)

Note. The values presented are weighted and from the imputed data set.

SURVEYLOGISTIC modeling predicting use of any quit aid revealed, that compared to non-planners, the odds for planners were 1.9 times for reported use of at least one quit aid during the time period in which their most recent quit attempt was made ($OR = 1.94$, 95% $CI: 1.31 - 2.88$, $p < .01$) (Table 14). The odds of planners using pharmacotherapy were over three times that of non-planners ($OR = 3.46$, 95% $CI: 1.74 - 6.89$, $p < .01$). No statistically significant relationship was found between odds of planners and non-planners reporting use of formal support or health professionals ($p > .05$).

Univariate logistic regression for the partially complete cases and the complete cases revealed different results (Table 14). For the partially complete case data set, smokers who made a planned

quit attempt had odds for use of quit aids four times those of smokers who made an unplanned attempt ($OR = 3.94$, 95% CI : 1.78 – 8.75, $p < .01$). Smokers whose most recent quit attempt was planned had use of pharmacotherapy odds that were four times ($OR = 3.73$, 95% CI : 1.85 – 7.49, $p < .01$), and odds of using health professionals that were twice ($OR = 2.10$, 95% CI : 1.04 – 4.23, $p < .05$) those of smokers whose most recent quit attempt was unplanned. No statistically significant odds ratio was found for other formal support ($p > .05$)

Results of univariate logistic regression analyses for the complete cases were quite different. No statistically significant odds ratio was found for those whose most recent quit attempt was planned or unplanned when it came to reported use of quit aids, use of other formal support, and use of health professionals ($p > .05$). Consistent with other findings, the odds of a smoker who planned their most recent quit attempt were nearly four times of a smoker who made an unplanned quit attempt ($OR = 3.92$, 95% CI : 1.57 – 9.79, $p < .01$).

Table 14. Odds Ratios and Confidence Intervals for Univariate Modeling of Planning Predicting Use of Quit Aids

Outcome	Predictor	Imputed (wtd n=390)			Partial (total wtd n=390)				Complete Case (wtd n =203)		
		OR	95% CI	<i>p</i>	OR	95% CI	<i>p</i>	wtd n	OR	95% CI	<i>p</i>
Use any quit aid	Planned vs. Unplanned (C)	1.94	1.31-2.88	0.0012**	3.94	1.78-8.75	0.0007**	347	3.09	0.97-9.89	0.0569
Use pharmacotherapy	Planned vs. Unplanned (C)	3.46	1.74-6.89	0.0004**	3.73	1.85-7.49	0.0002**	388	3.92	1.57-9.79	0.0034**
Use other formal support	Planned vs. Unplanned (C)	1.90	0.78-4.44	0.1566	1.87	0.79-4.44	0.1566	399	1.45	0.48-4.41	0.5083
Use health professionals	Planned vs. Unplanned (C)	1.91	1.01-3.62	0.0660	2.10	1.04-4.23	0.0375*	347	2.09	0.79-5.49	0.1369

* $p < .05$, ** $p < .01$, *Notes.* The odds ratios and confidence intervals provided above are derived from logistic regression models containing only the planning as a sole predictor of use. Other key variables are not controlled for. C = comparator

5.6 Planning and Abstinence

One Week Abstinence

The frequency of reported abstinence lasting at least one week for each plan type is presented in Table 15. More than half (63.5%, *wtd n* = 174) remained smokefree for at least one week. After modeling the effect of planning on abstinence lasting at least one week, without controlling for the effects of other variables, weak evidence was found to suggest that the odds of planners being abstinent were half that of spontaneous quitters ($OR = 0.54$, 95% $CI: 0.28 - 1.07$, $p = .0797$). Similar results were found examining the partially complete and complete data sets ($ORs = 0.53$ and 0.61 , 95% $CI: 0.26 - 1.08$ and $0.24 - 1.56$, $p = .08$ and $p = .2974$, respectively).

Table 15. Frequency of Reported Abstinence Lasting at Least one week by Plan Type

Outcome		Plan type	
		Planned Wtd n=274	Unplanned Wtd n=116
One week abstinence	No	100 (36.5%)	28 (24.1%)
	Yes	174 (63.5%)	88 (75.9%)

Note. The values presented are from the imputed data set.

Despite weak evidence supporting an odds ratio in favour of making an unplanned attempt, univariate logistic regression models were run testing the relationship between the other personal characteristics used in earlier analyses and one week abstinence for the entire sample of those who quit between Waves 4 and 5. Results of the univariate logistic analyses predicting one week abstinence are presented in Table 16 for the imputed, partially complete, and complete cases data sets.

Table 16. Odds Ratios and Confidence Intervals for Univariate Models of Personal Attributes Predicting One Week Abstinence

Model	Variable Model		Imputed (wtd n=390)			Partial (total wtd n=390)				Complete Case (wtd n =203)		
			OR	95% CI	p	OR	95% CI	p	wtd n	OR	95% CI	p
1	Plan Type	Unplanned (C)	1.00			1.00				1.00		
		Planned	0.54	0.28-1.07	0.0797	0.53	0.26-1.08	0.0818	370	0.61	0.24-1.56	0.2974
2	Sex	Female (C)	1.00			1.00				1.00		
		Male	0.89	0.51-1.53	0.6639	0.95	0.54-1.67	0.8614	370	0.76	0.36-1.60	0.4712
3	Age	Continuous	0.99	0.97-1.01	0.2577	0.99	0.97-1.01	0.2153	370	1.00	0.97-1.02	0.7401
4	Education	No post-secondary (C)	1.00			1.00				1.00		
		Some or completed post-secondary	1.31	0.74-2.30	0.3570	1.28	0.72-2.30	0.4029	370	1.78	0.83-3.81	0.1364
5	Perceived addiction	Not at all or somewhat addicted (C)	1.00			1.00				1.00		
		Very addicted	0.26	0.14-0.48	<0.0001**	0.24	0.12-0.45	<0.0001**	347	0.32	0.14-0.74	0.0077**
6	CPD	Continuous	0.92	0.89-0.95	<0.0001**	0.92	0.89-0.95	<0.0001**	327	0.93	0.89-0.97	0.0003**
7	TTFC	Continuous	1.00	1.00-1.01	0.2806	1.00	1.00-1.01	0.1013	243	1.00	1.00-1.01	0.0829
8	Age smoked daily	Continuous	1.10	1.03-1.17	0.0064**	1.10	1.03-1.18	0.0064**	357	1.15	1.04-1.27	0.0066**
9	Perceived health	Good, fair, or poor (C)	1.00			1.00				1.00		
		Very good or excellent	1.18	0.67-2.08	0.5739	1.26	0.70-2.30	0.4427	346	1.16	0.54-2.48	0.6993
10	# Lifetime quit attempts	Continuous	1.01	0.97-1.05	0.7433	1.01	0.96-1.07	0.6035	351	1.01	0.97-1.05	0.7595
11	Ease of quitting	Very easy, easy, somewhat hard (C)	1.00			1.00				1.00		
		Very hard	0.28	0.16-0.50	<0.0001**	0.28	0.15-0.54	0.0001**	314	0.32	0.15-0.69	0.0039**
12	Confidence succeeding	Not at all or not very confident (C)	1.00			1.00				1.00		
		Very or fairly confident	1.30	0.71-2.38	0.4075	1.24	0.64-2.41	0.5227	316	0.80	0.37-1.73	0.5715
13	Benefit from quitting	No, little, or quite a bit (C)	1.00			1.00				1.00		
		Benefit a lot	0.35	0.19-0.63	0.0006**	0.39	0.20-0.75	0.0049**	317	0.37	0.16-0.83	0.0165*
14	Support person	No (C)	1.00			1.00				1.00		
		Yes	1.10	0.54-2.24	0.6222	1.02	0.49-2.13	0.9565	313	0.78	0.33-1.83	0.5623
15	Difficult person	No (C)	1.00			1.00				1.00		
		Yes	1.50	0.87-2.59	0.1662	1.88	1.04-3.40	0.0356*	317	2.22	1.11-4.44	0.0249*
16	Use of any quit aid	No (C)	1.00			1.00				1.00		
		Yes	0.33	0.16-0.71	0.0044**	0.34	0.14-0.79	0.0129*	329	0.32	0.11-0.95	0.0395*
17	Intentions to quit	Not in the next 6 months (C)	1.00			1.00				1.00		
		Within the next 6 months	0.99	0.55-1.78	0.6347	1.06	0.55-2.07	0.8624	313	0.63	0.29-1.38	0.2503

* $p < .05$, ** $p < .01$, Notes. C = comparator. The odds ratios and confidence intervals provided above are derived from logistic regression models containing only the covariate listed as a sole predictor of abstinence lasting at least one week. Other key variables are not controlled for.

The analyses revealed that for those who made a quit attempt, smokers who thought they were “very addicted” had odds of being abstinent that were 0.26 times those of smokers who thought they were less addicted ($OR = 0.26$, $95\% CI: 0.14 - 0.48$, $p < .01$). For every single cigarette per day a smoker consumed their odds of one week abstinence were 0.92 times those of an individual who smoked one less cigarette ($OR = 0.92$, $95\% CI: 0.89 - 0.95$, $p < .01$). For every extra year older a smoker was before they began to smoke daily, their odds of one week abstinence were 1.10 times those of a smoker who started earlier ($OR = 1.10$, $95\% CI: 1.03 - 1.17$, $p < .01$). The odds of one week abstinence for a smoker who quit and believed it would be very hard to quit prior to the attempt were 0.28 times those of a smoker who thought it would be easy ($OR = 0.28$, $95\% CI: 0.16 - 0.50$, $p < .01$). The odds of one week abstinence for a smoker who quit and thought they would benefit a lot from quitting was 0.35 times that of a quitter who reported they would benefit less ($OR = 0.35$, $95\% CI: 0.19 - 0.63$, $p < .01$). Smokers who quit and reported use of any quit aid during the time period in which the quit attempt was made had odds 0.33 times those of quitters who did not report use of any quit aid. No significant odds ratios were found for sex, age, education, time to first cigarette, perceived health, the number of lifetime quit attempts, confidence succeeding, having a support person, having a difficult person, and having intentions to quit.

When these significant factors were combined to form a predictive model of abstinence lasting at least one week, the variable planning was the first to be dropped using backwards selection for the imputed, partially complete, and complete case data sets ($p > .05$).

One month abstinence

Half of planners, who were abstinent for at least one week, were not found to be abstinent for at least one month following their quit attempt (see Table 17). Of those who made a planned attempt, approximately 30% (28.1%, $wtd n = 77$) were abstinent for at least one month.

Table 17. Frequency of Reported Abstinence Lasting at Least One Month by Plan Type

Outcome	Plan type	
	Planned Wtd n=274	Unplanned Wtd n=116
One month abstinence	No	197 (71.9%)
	Yes	77 (28.1%)

Note. The values presented are weighted and from the imputed data set.

Modeling the effect of planning on abstinence lasting at least one month, without controlling for the effects of other variables, planning was not found to be significant at the 0.05 level for a two-tailed test ($OR = 0.84$, 95% CI : 0.44 – 1.60, $p = .5954$). Results were similar for analysis of the partially complete data set ($OR = 0.85$, 95% CI : 0.43 – 1.65, $p = .6236$) and the complete data sets ($OR = 1.74$, 95% CI : 0.74 – 4.08, $p = .2061$) (Table 18). Because the odds ratio of abstinence lasting at least one month for planning was not significant, no further logistic regression models were completed.

Table 18. Odds Ratios and Confidence Intervals for Univariate Models of Personal Attributes Predicting One Month Abstinence

Model	Variable Model			Imputed (wtd n=390)			Partial (wtd n=390)			wtd n	Complete Case (wtd n =203)		
				OR	95% CI	p	OR	95% CI	p		OR	95% CI	p
1	Plan Type	Unplanned	(C)	1.00			1.00			370	1.00		
		Planned		0.84	0.44-1.60	0.5954	0.85	0.43-1.65	0.6236		1.74	0.74-4.08	0.2061
2	Sex	Female	(C)	1.00			1.00			370	1.00		
		Male		0.74	0.42-1.29	0.2869	0.74	0.42-1.32	0.3132		0.70	0.32-1.53	0.3078
3	Age	Continuous		1.02	1.00-1.03	0.1054	1.01	1.00-1.03	0.1238	370	1.03	1.00-1.05	0.0439*
4	Education	No post-secondary	(C)	1.00			1.00			369	1.00		
		Some or completed post-secondary		0.60	0.34-1.06	0.0802	0.58	0.32-1.05	0.0707		0.90	0.39-2.08	0.8094
5	Perceived addiction	Not at all or somewhat addicted		1.00			1.00			347	1.00		
		Very addicted		0.76	0.43-1.36	0.3747	0.80	0.44-1.47	0.4687		1.13	0.49-2.60	0.7796
6	CPD	Continuous		0.98	0.95-1.01	0.1901	0.98	0.95-1.02	0.2817	327	0.99	0.95-1.03	0.5009
7	TTFC	Continuous		1.00	1.00-1.00	0.3670	1.00	1.00-1.00	0.4384	243	1.00	1.00-1.01	0.1686
8	Age smoked daily	Continuous		0.98	0.93-1.03	0.4213	0.98	0.93-1.03	0.4393	357	0.98	0.91-1.05	0.4824
9	Perceived health	Good, fair, or poor	(C)	1.00			1.00			346	1.00		
		Very good or excellent		1.17	0.66-2.08	0.5228	1.22	0.66-2.26	0.5192		1.07	0.47-2.43	0.8673
10	# Lifetime quit attempts	Continuous		0.99	0.94-1.04	0.6605	1.00	0.95-1.04	0.8195	351	0.99	0.92-1.07	0.7741
11	Ease of quitting	Very easy, easy, somewhat hard		1.00			1.00			314	1.00		
		Very hard		0.49	0.26-0.93	0.0319*	0.57	0.28-1.17	0.1258		0.58	0.25-1.38	0.2187
12	Confidence succeeding	Not at all or not very confident	(C)	1.00			1.00			316	1.00		
		Very or fairly confident		2.67	1.35-5.28	0.0105*	2.76	1.26-6.06	0.0115*		1.73	0.65-4.58	0.2716
13	Benefit from quitting	No, little, or quite a bit of benefit		1.00			1.00			317	1.00		
		Benefit a lot	(C)	0.86	0.48-1.53	0.5534	1.04	0.52-2.06	0.9177		0.89	0.39-2.03	0.7761
14	Support person	No	(C)	1.00			1.00			313	1.00		
		Yes		1.03	0.49-2.19	0.8315	0.99	0.42-2.35	0.9877		0.87	0.30-2.50	0.7910
15	Difficult person	No	(C)	1.00			1.00			317	1.00		
		Yes		0.59	0.33-1.04	0.0882	0.58	0.30-1.12	0.1060		0.77	0.34-1.73	0.5197
16	Use of any quit aid	No	(C)	1.00			1.00			329	1.00		
		Yes		1.10	0.56-2.15	0.7879	1.06	0.49-2.28	0.8917		1.47	0.59-3.67	0.4145
17	Intentions to quit	Not in the next 6 months	(C)	1.00			1.00			313	1.00		
		Within the next 6 months		1.30	0.72-2.33	0.5247	1.35	0.68-2.66	0.3881		1.28	0.54-3.05	0.5798

* $p < .05$, ** $p < .01$, Notes. C = comparator. The odds ratios and confidence intervals provided above are derived from logistic regression models containing only the covariate listed as a sole predictor of abstinence lasting at least one week. Other key variables are not controlled for.

Chapter 6

Discussion

The aim of the current study was to better understand behavioural planning in the context of smoking cessation. Behavioural planning has been defined as the series of mental actions, including intentions and preparatory behaviours, used to achieve a desired goal (Aarts et al., 1999; Azjen & Madden, 1986; Jackson et al., 2005; Mumford et al., 2001; Oettingen et al., 2001; Sniehotta et al., 2005). According to several leading health behaviour change theories (Theory of Planned Behavior, Precaution Adoption Process Model, Transtheoretical Model of Change, and the Health Action Process Approach), planning should increase the likelihood of behaviour change, in this case abstinence. Although this is not the first study to examine planning as it relates to smoking cessation, it is the first to examine planning from a pre- and post-quit attempt point of view. This study examined data from the longitudinal component of the Ontario Tobacco Survey – a provincially representative survey of adult smokers, to identify the prevalence of planning, characteristics and intentions of those who plan, and how planning affects smoking cessation behaviour.

6.1 Summary and Interpretation of Key Findings

Proportion of Planned Quit Attempts

Overall, 70% of adult Ontario smokers who made a recent quit attempt were found to have reported planning their most recent quit attempt. Further, 80.6% smokers who planned their attempt planned at least a few days beforehand. These findings are consistent with advice from many of the leading cessation programs and professionals who recommend planning at least a few days in advance as a means of achieving successful abstinence. The observed high proportion of smokers making a plan

for their most recent quit attempt is similar to earlier research which found that 67.7% and 63.3% of current smokers planned their most recent quit attempts (Ferguson et al., 2008; Larabie, 2005).

Characteristics and Intentions of Individuals Making Planned and Unplanned Attempts

Several differences were found in the characteristics of smokers who planned for their most recent quit attempt. Men had half the odds of women for making a planned attempt. Smokers who reported that they were “very addicted” to cigarettes had planning odds 2.7 times of those who reported they were less addicted. For every additional cigarette smoked per day, a smoker who made a recent quit attempt had 4% greater odds of planning than those who smoked fewer cigarettes. The findings also indicate that those who perceive it would be “very hard to quit” had odds of planning that were 4.2 times of those who thought it be easier to quit. Weak evidence was found indicating that smokers who believed they would “benefit a lot” from quitting had odds 1.74 times those smokers who believed they would benefit less from quitting. Together, these findings might suggest that addiction and perceived addiction are important predictors of planning; however, when characteristics of smokers who made a recent quit attempt were combined and eliminated based on level of significance to identify a parsimonious model predicting planning, it was found that those who anticipated quitting would be “very hard” and women were more likely to plan.

Intentions to quit were also considered as an additional characteristic of those who made a recent quit attempt. Consistent with the health behaviour change theories, intentions to quit within the next six months was related to planning of the most recent quit attempt. The odds of planning for smokers who made a recent quit attempt and had expressed intentions to quit within the next six months were twice those of individuals who indicated that they intended to quit sometime beyond 6 months or not at all. Further, adding intentions to quit improved the best fit model for planning (Model: Planning = f (Ease of quitting + Sex + Intentions to quit)). In the newly constructed model, smokers who were

more likely to plan thought it would be very hard to quit, were female, and intended to quit within the next six months.

In terms of health behaviour change theories, these findings are new. Previous theory has not provided any indicators about which individuals may be more likely to plan than others. It is interesting to note that smokers that were more addicted, smoke more cigarettes per day, expected to find quitting challenging, and thought they would benefit a lot from health and other gains if they decided to quit had odds of planning much higher than the respective comparison groups. Perhaps, these findings support the theoretical idea that individuals who are preparing to plan are reflecting on themselves, their addiction, and future challenges to changing and maintaining behaviour once a quit attempt is made (Mumford et al., 2001). Although several of these characteristics did not remain together in construction of a best fit model to predict planning, the findings help to recognize that certain groups may be less likely to plan based on their gender, perceived ease of quitting, and future intentions to quit.

Use of Quit Aids during Quit Attempt

As expected, those who planned their most recent quit attempt had odds 2.8 times those who made an unplanned attempt for reported use of at least one quit aid and 3.5 times for reported use of pharmacotherapy. Surprisingly, reported odds for use of health professionals or other formal support did not differ amongst planned and unplanned recent quit attempts.

The findings that those who planned were more likely to use a quit aid, in particular pharmacotherapy, are consistent with the theoretical hypothesis that those who are preparing or attempting to maintain behaviour change and avoid setback are gathering resources. Higher reported

use of pharmacotherapy for those who planned their most recent quit attempt has been observed by Ferguson and colleagues (2008).

However, the present findings do not consistently show that planners have higher odds of using all types of quit aids as would be expected according to the theories. There may be two reasons for this. First, significant differences in the odds of use for health professionals and other formal support may not have been observed because these services are relatively easy to access once a quit attempt has been made, and require little work or advanced preparation. Second, differences in the odds of use for pharmacotherapy may have been observed, not because of issues related to access and preparation, but because of differences in the characteristics of those making unplanned and planned attempts. In particular, the current study has already identified that those making planned attempts have greater odds of perceiving themselves as being very addicted, which may in screening with health professionals trigger advice for pharmacotherapy; whereas, those making unplanned attempts may not.

Planning and Abstinence

No significant evidence was found to support the hypothesis that planning increases the odds of being abstinent for at least one week ($p > .05$). Surprisingly, there was weak evidence to support that those making an unplanned quit attempt had odds of being abstinent for at least one week 1.8 times the odds of those who made a planned attempt. No evidence was found to support the hypothesis that smokers who planned their most recent quit attempt were more likely than smokers who made an unplanned attempt to be abstinent for at least one month ($p < .05$). In the case of one month abstinence, no evidence was found to suggest that smokers who made an unplanned attempt were more likely to be abstinent ($p < .05$).

Without controlling for other factors, smokers who made a quit attempt and felt very or fairly confident that they would succeed quitting had 2.67 times the odds of being abstinent for at least one month compared to those who were less confident. In addition, one week and one month abstinence were significantly predicted by perceived ease of quitting. Smokers who did not think it would be very hard to quit had three times the odds of being abstinent for at least one week, and twice the odds of being abstinent for at least one month compared to those who thought it would be very hard. The current results indicate that a smoker's perception of quitting and confidence are a better predictor of short-term abstinence than whether their attempt was planned.

The overall finding that planning quit attempts does not improve the odds of being abstinent are consistent with other studies examining planning and smoking cessation studies which have found that for planned attempts, the odds of being abstinent were lower than those for unplanned attempts (Ferguson et al., 2008; Larabie, 2005; West & Sohal, 2006). These findings are inconsistent with the theories that planning increases the odds of a successful quit attempt.

The current findings do not support health behaviour theories or clinical advice suggesting that planning increases the odds of abstinence. These results may be interpreted as evidence that either planning is not effective or that the quit plans being used by smokers are insufficient to have an appreciable effect on abstinence. Another possibility is that those who choose to plan may be less likely to succeed in general due to differences in their smoking histories, levels of addiction, and perceptions about quitting. However, there may be other possible alternative explanations as to why no positive relationship was found between planning and abstinence in the current study. Those who do not plan may differ systematically in other ways (e.g., psychologically, physically) from those who planned for their recent quit attempt. Planning may be confounded with perceptions of addiction,

perceptions of quitting, or other variables not tested in the current study that have been previously linked to abstinence (Ferguson et al., 2002; Nordstrom et al., 2000; Wetter et al., 1999).

6.2 Limitations

In addition to the limitations previously discussed, there are several other limitations related to the study method and design which need to be considered in the interpretation and application of study results.

First, it was assumed that the operational definition of planning derived from theory and used in this study (i.e., mental simulations and preparatory behaviour used to achieve a desired goal) was consistent with the perceived definition of the construct of planning within the OTS population. Because planning was not defined for OTS question respondents, it is possible that alternative definitions of planning may have been measured. These definitions of planning may differ from individual to individual. For example, to some individuals planning for their quit attempt may merely refer to the intention of quitting in the future. For others it may be based on a decidedly more formal series of steps and procedures. Without knowledge of how the general population of smokers defines planning, it is possible that a larger proportion of individuals may have inadvertently reported planning for their most recent quit attempt and in doing so may have biased the number of planned quit attempts which were abstinent and those that were not. However, given the large proportion of smokers who indicated intentions to quit and later proceeded to report having made an unplanned attempt, the definition of planning amongst the respondent sample may be closer to the hypothetical operational definition.

Second, it is possible that different odds of abstinence may be observed if the current respondents were observed over a longer period of time. There may be delayed effects of planning which are currently not observable during a six month period (Shadish, Cook, & Campbell, 2002). However, the argument in favour of delayed effects for planning runs contrary to the findings reported by Larabie (2005), Ferguson and colleagues (2008), and West and Sohal (2006) which indicate that those making an unplanned quit attempt are more likely to be abstinent for time periods extending beyond six months. Still, these studies are not without their own limitations and so monitoring the relationship between planning and abstinence over time is important.

Finally, missing data is a common problem encountered in longitudinal surveys (Rubin, 1997). The presence of missing data can have a significant impact on the validity of a study and the ability to draw accurate inferences (McKnight, McKnight, Sidani, & Figueredo, 2007; Rubin, 1997). Because there was missing data for certain variables of interest and validity was of importance, several approaches were adopted for analyzing the data including analysis of the data as is, analysis of only complete cases, and analysis of the data using imputed values. One of the best available methods for addressing missing data, multiple imputation, was specifically selected for use with the present data set because of the categorical nature of many of the response measures and the fact that multiple imputation fills in missing values with values that more accurately reflect expected values (SAS, 2001). Nevertheless, multiple imputation may not complete the missing case values with the same value had that question been answered by the respondent (Carpenter & Kenward, 2008). Further, because the imputed data is fit based on the available observed data it is possible that the imputed data may not accurately reflect data for a group with a large amount of missing data (Carpenter & Kenward, 2008). In the present study, missing data was related to having a lower education level, a poorer perception of health, having a person that would make quitting difficult, and use of a quit aid. As such, the results may be less representative of individuals belonging to these groups; however, the relationship

of missing data for these variables to whether an individual reported making a planned or unplanned attempt was not found to be significant, and as such may not alter the overall results. In addition, SAS multiple imputation, is a relatively new program and is not yet fully capable of analyzing non-normally distributed categorical variables. However, comparing the imputed data results to the partial case results, there is substantial agreement with respect to the direction of relationships between the variables explored and overall findings. Finally, when compared to other methods for dealing with missing data (e.g., case deletion, mean imputation), the multiple imputation procedure contributes to results that are likely to be less biased and was the best available method for addressing missing data and reducing biased statistical estimates.

6.3 Future Directions

Tobacco use continues to be a major threat to the health and welfare of the world's population. With increasing knowledge about the harmful effects smoking can have on themselves and others, there are larger numbers of people trying to quit. The fact that many of these attempts are unsuccessful is not only frustrating from a public health stand-point, it is frustrating to the individual trying. There is an ongoing need to work on providing better support and advice based on improved knowledge and evidence.

Although the present findings shed light on the relationship between planning and smoking cessation, further research is needed. In particular, there is a need to replicate the present study with greater number of people over a greater period of time to explore whether planning may contribute to successful abstinence for specific sub-populations, and whether this trend in the relationship between planning and abstinence is observed beyond one month. Including additional qualitative measures or developing qualitative studies to explore whether the quality or type of plan has an impact on abstinence, how the general population of smokers defines planning, and what the experiences are of

individuals who are planning, would further enhance our understanding of the relationship between planning and abstinence. There is also a need to reexamine and test planning in the context of behaviour change theories. It is unclear at this point precisely what combination of factors best predicts successful planning. If the hypothesized processes underlying planning are actually components of planning, how planning may moderate or mediate successful behaviour change, and for which behaviours planning may or may not be effective. Finally, those making spontaneous quit attempts warrant additional study to better understand why they may quit without planning and how they can better be assisted once a quit attempt has been made. Future waves of the OTS are underway which may help to address some of these questions and limitations.

From a clinical practice and public policy perspective, given the large number of attempts which did not reach the short term abstinence milestones, there is a need to provide further cessation support and services to individuals immediately following a quit attempt in order to increase the odds of abstinence (regardless of whether the attempt was planned or unplanned).

6.4 Final Conclusions

The current study contributes to the growing body of evidence regarding planning and smoking cessation. Consistent with previous research findings, it has shown that a majority of smokers who quit plan their quit attempt in advance. Further, it has identified some of the characteristics of individuals who make planned attempts and some of the behaviours which predict or are more likely to be engaged in by planners. Consistent with prevailing health behaviour change theories that include planning as a component, relationships between intentions to quit and planning, and planning and the use of certain preparatory behaviours have been found. Contrary to these theories, planning was not found to increase the odds of abstinence. Although more research is needed, the current study contributes to the dialogue of planning and smoking cessation practices and policies.

Appendix A

Ontario Tobacco Survey Baseline Survey

Wave 5:

July – December 2007

ADMINISTRATIVE

- A1. [ID NUMBER]
- A2. [INTERVIEW DATE: MMM/DD/YYYY]
- A3. [INTERVIEW START TIME: HH:MM]
- A4. [CALL NUMBER] (documenting A1 – A4 for each attempted call)
- A5. [DISPOSITION CODE]
- A6. [WAVE NUMBER]

RECRUITMENT

IF (contact = "") GOTO Q.Intro *[no previous call where person with next birthday was identified]*
ELSE GOTO Q.Intro1 *[previous call where HH member identified name of person with the next birthday]*

Q.Intro1

[added Nov 2005 to ease the respondent strain when the next birthday has been decided during an earlier call]

Hello, may I please speak with [NAME OF PERSON IDENTIFIED TO HAVE THE NEXT BIRTHDAY]

[DO NOT READ CATEGORIES]

IF CHILD ANSWERS, ASK TO SPEAK TO AN ADULT. (Begin again).

IF RESPONDENT DOES NOT UNDERSTAND, THEN REPEAT.

01 – Yes, “Thank-you” and wait for respondent GOTO Q.Intro

02 - No, he/she is not available

“When would be a better time to call back to reach them?” GOTO CB1

03 - Respondent answers phone GOTO Q.Intro

04 – Respondent does not understand/language problem TERMINATE CALL,
PUT BACK IN QUEUE

09 - No/Respondent refuses OR asks who is calling GOTO Q.Intro

Coverage: respondents where a previous call to the household where the PMK identified the name of person with the next birthday

Q.Intro

[bold words added at beginning of W3 – July 06]

[italic text revised at W4 (Jan 07) from “...survey of recent smokers and non-smokers...”]

[Deleted sentence as it appeared to be confusing potential non-smokers – W4, Jan 23/07: ‘The information gathered will help us understand why certain people might be able to quit smoking and why others might not’]

[for consistency, modified all references for age to “18 years of age or OLDER”; some previous text used OVER instead of OLDER – W4, Jan 23/07]

[W5, November 2007: removed underlined text from the first sentence: ...I am calling from the University of Waterloo on behalf of...]

Hello, my name is _____ and I am calling on behalf of the Ontario Tobacco Research Unit, an ACADEMIC research network at the University of Waterloo and University of Toronto. This is a survey of *non-smokers and recent smokers* that will track changes over time in attitudes, behaviours and beliefs related to smoking in Ontario. We are not asking for money or selling anything.

IF (contact ~= " ") Show: *[no previous contact with household]*

“May I ask someone 18 years of age or *older* a few questions to see whether anyone in your household qualifies for the survey?”

IF (Intro1 = 01 | Intro1 = 03) Show: *[previous contact with name of possible respondent]*

“May I ask you a few questions to see whether you qualify for the survey?”

IF (Intro1 = 09) Show:

“May I ask [REPORTED NAME OF POTENTIAL RESPONDENT] a few questions to see whether they qualify for the survey?”

IF CHILD ANSWERS, ASK TO SPEAK TO AN ADULT. (Begin again)

1 – Yes	GOTO Q.2
2 – Child-no adult available	GOTO Q.1(b)
3 - No adult in household	Thank, terminate (CS 19)
4 – No/Respondent refuses	GOTO Q.1c
5 – I am a non-smoker	GOTO Q.NS
6 – I am at the cottage	GOTO Q.1g

[response category 06 added at W3 – July 14, 2006]

Coverage: no previous call to the household or no call where the PMK identified the name of person with the next birthday

Q.NS [If NSQUOTA is not full, interviewer to follow with:]

R: “I am a non-smoker”

Probe I: “We have questions for both smokers and non-smokers”

Probe II: “As smokers and non-smokers alike are affected by public health programs and policies, the survey will also help us understand how these affect the lives of adults in Ontario.”

01 – Yes/ok – continue with survey GOTO Q2

02 – Refusal GOTO Q1c

Coverage: respondents who indicate they are a non-smoker when non-smoker quota is NOT full

[Modified to “18 years of age or older” at W4, Jan07]

If NSQUOTA is full, interviewer to follow with:

QNSfull

I: Actually, I'd like to speak to the person in your household who is 18 years of age or older whose birthday is coming up next. Would that be you?

ADD IF NECESSARY: We need to select somebody at random. With each call we make, we ask to speak to the person whose birthday is coming up next. This helps us to ensure that we have a representative sample.

PROBE (If respondent not sure of next birthday): We need to speak to

the person whose birthday is next to the best of your knowledge.

01 – Yes	GOTO Q.NSQ.2
02 – No	GOTO Q.4b

Coverage: respondents who indicate they are a non-smoker when non-smoker quota IS full

Q.NSQ2

Have you smoked at least one cigarette in the past six months?

01 – Y	GOTO DNSQ2
02 – N	GOTO DNSQ2
06 – DK	GOTO Q.NSQ2b
09 – R	GOTO Q.NSQ2b

Coverage: respondents who indicate they are a non-smoker when non-smoker quota IS full and the person on the phone is the person in the household with the next birthday

Q.NSQ2b

We require this information to determine eligibility for this survey.

[Pause to allow respondent to answer "Have you smoked at least one cigarette in the past six months?"]

[DO NOT READ]

01 - Yes
02 - No
06 - Don't Know
09 - Refused

Coverage: respondents who indicate they are a non-smoker when non-smoker quota IS full and the person on the phone is the person in the household with the next birthday

DNSQ2

If (Q.NSQ2 = 01 | Q.NSQ2b = 01) then do

STAT1 = RECENT SMOKER

GOTO Q.NSQ3

end;

If (Q.NSQ2 = 02 | Q.NSQ2b = 02) then do

STAT1 = NON-SMOKER

GOTO Q.FULL

end;

If (Q.NSQ2b = 06 | Q.NSQ2 = 09) then do

Thank and terminate: "Thank-you for your time. Good-bye"

end;

Q.NSQ3

[added underlined text in W5 – Nov. 19, 2007]

Given your responses, you may be eligible for this survey. Participation is voluntary and you may stop at any time. The answers you provide to the following questions will be kept absolutely confidential. This call may be monitored by my supervisor at the University of

Waterloo Survey Research Centre to assess my performance. Can I ask you a few quick questions to confirm your eligibility?

01 – Yes

GOTO Q.6

02 – No

GOTO NSQ3b

Coverage: respondents who indicate they are a non-smoker when non-smoker quota IS full and may be eligible for the survey as they have had a cig in the past 6 months

Q:NSQ3b

[removed text at W5 – July 2007 – in response to ethics: ‘This is an important research survey and your...’]

Your responses are important to ensure we have good representation of the people in Ontario. We will be reimbursing you for your time - can we ask you a few questions to see if you are eligible for the study?

[DO NOT READ]

01 – Yes

GOTO Q6

02 – No

Thank and Terminate:

“Thank you for your time. Goodbye”

Coverage: respondents who indicate they are a non-smoker when non-smoker quota IS full and respondent is a potential participant

Q.1b

I would like to speak to someone age 18 or older in your household. Is there a better time to call back to speak to them?

[DO NOT READ]

01 – Yes “Could you please tell me their name so that I know who to ask for?”

RECORD CALLBACK INFO AND TERMINATE

02 - No adult in household

Thank & Terminate

03 – No/Don’t know

“Thanks, I’ll try them at another time”

Coverage: child answers phone

Q.1c

[removed text at W5 – July 2007 – in response to ethics: ‘This is an important research survey and your...’]

Your responses are important to ensure we have good representation of the people in Ontario. We will be reimbursing respondents for their time – could I ask you a few more questions to see if anyone in your household is eligible?

[DO NOT READ]

01 – Yes

GO TO Q.2

02 – No

Thank and terminate

Coverage: PKU refuses participation

If Necessary, See Q.HELP for additional background information.

Q.1g

[question added at W3, July 14, 2006]

[removed text at W5 – July 2007 – in response to ethics: ‘This is an important research survey and your...’]

Your responses are important to ensure we have good representation of the people in Ontario. We will be reimbursing respondents for their time. We would like to speak with you at a time that is more convenient for you. Can you provide us with the phone number to your primary residence and indicate when would be a good time to contact you there?

Probe: Can you provide us with the telephone number to your permanent residence or an alternate number that you prefer to be reached at?

[DO NOT READ]

01 – Yes

GOTO Q.1h1

02 – No (refusal)

Thank and terminate

Coverage: PKU refuses participation b/c they are at the cottage

Q.1h1 *[question added at W3, July 14, 2006]*

Enter alternate number: XXX-XXX-XXXX

Extension:

Enter best time to call: Date: _____ and time (if provided)

Coverage: respondents who wish to be contacted at another number (or permanent residence)

“Thank-you. We look forward to speaking with you again soon. Good-bye.”

Q.1h2 *[added at W3, July 14, 2006]*

ENTER EXTENSTION: XXXX [ALTnum_ext]

Q.2

Thank you. I first need to ask a few questions about the household in order to select someone for the survey. How many people age 18 or older live in your household, including yourself?

[DO NOT READ]

01 – Enter number

GOTO Q2num

06 – DK

GOTO Q.2a

09 – R

GOTO Q.2a

Coverage: respondents who agree to be asked questions for eligibility

Q.2a

I'm sorry. We require this information to verify that participants in this survey are 18 years of age or older.

[Pause to allow respondent to confirm number of adults in household]

[DO NOT READ]

01 – Enter number

GOTO Q2num

06 – DK

THANK AND TERMINATE

09 – R

THANK AND TERMINATE

Coverage: respondents who agree to be asked questions for eligibility but refuse/DK number of adults in HH

Q2num

[__ __] Enter number of residents in household 18+

IF Q2num = 0

GOTO Q.1b

ELSE IF Q2num = 1

GOTO Q.5

ELSE IF Q2num >1

GOTO Q.4a

Q.4a

[Modified to "18 years of age or older" at W4, Jan07]

[probe2 added at W5 – July 2007]

I'd like to speak to the person in your household who is 18 years *of age or older* whose birthday is coming up next. Would that be you?

ADD IF NECESSARY : We need to select somebody at random. With each call we make, we ask to speak to the person whose birthday is coming up next. This helps us to ensure that we have a representative sample.

PROBE (If respondent not sure of next birthday): We need to speak to the person whose birthday is next to the best of your knowledge.

PROBE2 if respondent hesitant about personal information: "We are not asking for the specific date. We ask to speak with the person in your household who's birthday is next as this helps us ensure we have a random sample of the population."

[DO NOT READ]

01 - Yes

GO TO Q.5

02 – No

GO TO Q.4b

Coverage: respondents where there is more than one adult in the HH

Q.4b

May I speak to that person now?

[DO NOT READ]

01 – Yes

GO TO Q.4e

02 - No (refusal)

GO TO Q.4c

03 – Not home/unavailable

GO TO Q.4d

Coverage: respondents where there is only one adult in the HH which is not the person on the phone

Q.4c

[removed text at W5 – July 2007 – in response to ethics: 'This is an important research survey and their...']

Their responses are important to ensure we have good representation of the people in Ontario. We will be reimbursing them for their time. Could we call back to ask them a few questions to see if they are eligible for the study?

[DO NOT READ]

01 – Yes

GOTO 4d

02 – No

Thank and Terminate

Coverage: PKU refuses participation for person eligible for participation (next birthday)

If Necessary, See Q.HELP for additional background information.

Q.4d

When can I call back to speak to that person?

[DO NOT READ]

01 – Make callback. "Could you please tell me their name so that I know who to ask for?"

RECORD CALLBACK INFO AND TERMINATE

02 – Refuse/don't callback

IF (Q.4d=02 & (Q4c=01 | Q4c = 02))

Thank and Terminate

ELSE IF Q.4d=02

GOTO Q.4c

Coverage: respondents where the person eligible is not available

Q.4e

[bold words added at W3 – July 06]

[italic text revised at W4 (Jan 24,07) from "...survey of recent smokers and non-smokers..."]

[Deleted sentence as it appeared to be confusing potential non-smokers – W4, Jan 24/07: 'The information gathered will help us understand why certain people might be able to quit smoking and why others might not']

[Simplified recruitment text in W5 – Nov 19, 2007: Removed underlined text "...calling from the University of Waterloo on behalf of..."]

Hello, my name is _____ and I am calling on behalf of the Ontario Tobacco Research Unit, an ACADEMIC research network at the University of Waterloo and University of Toronto. This is a survey of *non-smokers and recent smokers* that will track changes over time in attitudes, behaviours and beliefs related to smoking in Ontario. All responses will be kept absolutely confidential. We are not asking for money or selling anything. Can I ask you a few questions to see whether you qualify for the survey?

[DO NOT READ]

01 – YES

GO TO Q.5

02 – No time

“When would be a better time to call back?”

Make appointment, Thank and Terminate

03= Refuses

GO TO 4f

Coverage: eligible person in HH comes to the phone

INTERVIEWER NOTE: See Q.HELP for info/answers to questions

Q.4f

[removed text at W5 – July 2007 – in response to ethics: 'This is an important research survey and your...']

Your responses are important to ensure we have good representation of the people in Ontario. We will be reimbursing you for your time – can we ask you a few questions to see if you are eligible for the study?

[DO NOT READ]

01 – YES

GOTO Q.5

02 – NO

Thank and terminate

Coverage: eligible respondent refuses

INTERVIEWER NOTE: See Q.HELP for info/answers to questions

Q.5

[added underlined text in W5 – Nov. 19, 2007]

Thank-you. This call may be monitored by my supervisor at the University of Waterloo Survey Research Centre to assess my performance. I first need to ask a few questions in

order to check your eligibility for our survey. Participation is voluntary and you may stop at any time. The answers you provide to the following questions will be kept absolutely confidential.

Coverage: All eligible respondents who agree to participate

Q.6

Note sex – DO NOT ASK UNLESS UNSURE

01 – Female

02 – Male

Coverage: All eligible respondents who agree to participate

Q.7a

Are you 18 years of age or older?

01 – Yes

GOTO D7d

02 – No

GOTO Q.7c

03 – DK

GOTO Q.7b

04 – R

GOTO Q.7b

Coverage: All eligible respondents who agree to participate

Q.7b

“I’m sorry. We require this information to verify that participants in this survey are 18 years of age or older.”

[Pause to allow respondent to confirm age. DO NOT READ]

01 - Respondent confirms age is 18+

GOTO D7d

02 - Respondent confirms age is <18

GOTO Q7c

03 - No confirmation of age

Thank and Terminate

Coverage: All eligible respondents who refuse to confirm age

Q.7c

If Q2num = 1

“The survey requires that respondents are at least 18 years old.”

THANK AND TERMINATE

If Q2num = 2

“The survey requires that respondents are at least 18 years old if possible, I’d like to speak with someone who is 18 or older.”

GOTO Q.4b

IF Q2num>2

“The survey requires that respondents are at least 18 years old- if possible, I’d like to speak with the person in the household who is 18 or over and whose birthday is next.”

GOTO Q.4b

D7d

IF (Q.NSQ2 = 01 | Q.NSQ2b = 01)

THEN GOTO D8b

Q.8

Have you smoked one or more cigarettes in the past six months?

[DO NOT READ]

01 – Y GOTO D8b
02 – N GOTO D8b
06 – DK GOTO Q8b
09 – R GOTO Q8b

Coverage: All eligible respondents who agree to participate (when not previously asked if non-smoker quota is full)

Q.8b

We require this information to determine eligibility for this survey.

[Pause to allow respondent to answer "Have you smoked at least one cigarette in the past six months?"]

[DO NOT READ]

01 - Yes
02 - No
06 - Don't Know
09 - Refused

Coverage: All eligible respondents who refuse to confirm smoking behaviour in last 6 months

D8b

If (Q.8 = 01 | Q.8b = 01 | Q.NSQ2 = 01 | Q.NSQ2b = 01)

then STATUS1 = RECENT SMOKER

If (Q.8 = 02 | Q.8b = 02)

then STATUS1 = NON-SMOKER

If Q8 = 06 or Q8 = 09

then thank and terminate

Q. CONSENTS

If STATUS1 = RECENT SMOKER

[bold words added at W3 – July 06]

[deleted W4 – Jan 2007: "... The first follow-up survey will be in approximately six months."]

As it was redundant with the statement earlier in this paragraph]

[underlined text added at W5 – July '07 – to inform participants there will be up to 6 follow-up surveys and length of survey changed to "ranging from 10-20 minutes"]

[W5 – Oct 1, 2007 – removed text to simplify script: "This survey is being conducted by the University of Waterloo Survey Research Centre on behalf of the Ontario Tobacco Research Unit." And underlined text: ...who would be willing to answer a survey...]

Thank you. We are looking for recent smokers to answer a survey that would take about 20 minutes. To thank you for your time, we will send you \$15 in the next few days. There will be *up to six* additional follow-up surveys *ranging from 10-20 minutes in length* that take place every six months. We will send you \$15 each time you complete a survey.

Your answers to this survey will be kept ABSOLUTELY confidential. All personal information, including your name and address, will be kept STRICTLY confidential and will not be shared with any person or group that is not associated with this survey.

Participation is voluntary and you may stop at any time. I can provide you with the contact numbers if you have any concerns about this survey.

If STATUS1 = NON-SMOKER

[W5 – Oct 1, 2007 – removed text to simplify script: “This survey is being conducted by the University of Waterloo Survey Research Centre on behalf of the Ontario Tobacco Research Unit.” And underlined text: ...who would be willing to answer a survey...]

Thank you. We are looking for non-smokers to answer a survey that would take about 12 minutes. To thank you for your time, we will send you \$15 in the next few days.

Your answers to this survey will be kept ABSOLUTELY confidential. All personal information, including your name and address, will be kept STRICTLY confidential and will not be shared with any person or group that is not associated with this survey.

Participation is voluntary and you may stop at any time. I can provide you with the contact numbers if you have any concerns about this survey.

INTERVIEWER NOTE (only if necessary):

If answering the survey right now is inconvenient for you, we could schedule a time next week.

Is now a good time to start the survey?

[DO NOT READ]

01 – YES

GO TO SB_INTRO

02 – NO

GO TO Q.12

09 – REFUSAL

GOTO Q.11a

Q.FULL

Thank-you for your interest, but at this time we are only looking for [other group (recent smokers OR non-smokers)]. Good-bye.

Coverage: respondents who are non-smokers and non-smoker quota is full

Q.11a

This is an important research survey and we think you will find the questions interesting. Your responses are important to ensure we have good representation of the people in Ontario. Would you be willing to give the survey a try?

[DO NOT READ]

01 – Yes

GOTO SB_INTRO

02 - If no/refusal Thank and Terminate
03 – Yes/Maybe (But respondent does not have time) GOTO Q.13
Coverage: eligible respondents who refuse further participation

Q.12

Ok, we will schedule a time to call you back to complete the survey. First, in order for us to send you the \$15 honourarium, I need to confirm your name, address and postal code where you receive your mail.

[MAKE SURE THAT SPELLING IS CORRECT—REPEAT BACK TO RESPONDENT TO CHECK]

01 – SPECIFY ADDRESS: _____ GOTO Q.FNAME – Q.Altnum
02 – NO GOTO Q.12a
03 – Respondent does not have time – call back GOTO Q.13
Coverage: eligible respondents who schedule callback to complete the survey

Q12a

Without this information, we are unable to send you the \$15 honourarium for participation in this survey.

DO NOT READ

01 - Respondent offers address GOTO Q.FNAME
02 - Respondent does not offer address GOTO Q.ID

Coverage: eligible respondents who schedule callback to complete the survey but do not provide their address information

Q.FNAME – Q.ALTNUM

Q.ID

[added December 2005 to ensure we are able to ask for the eligible respondent during a callback to avoid repeating the next birthday method]

Can you please provide us with something that uniquely identifies you so that when we call back we will be able to reach you? For example, just your first name, a nickname or your initials?

01 – enter name/initials GOTO Q.Acont
02 – R GOTO Q.Acont

Coverage: eligible respondents who schedule callback to complete the survey and refuse to provide their name and mailing address

Q.Acont

We would just like to confirm this phone number as well. [VERIFY THE NUMBER CALLED]

Is there an alternative number that you can also be reached at?

01 – Yes GOTO Q.ALTNUM
402 – No GOTO Q.13

Q.ALTNUM

Enter alternative phone number: _____

Q.Alt_ex *[added beginning of W2 – Jan '06]*

“Extension” – enter [altnum_ext]: ____

Q.13

Thank you. We look forward to talking to you again. When would be a good time for us to call you back to complete the survey?

ENTER CALLBACK INFO _____

NOTE: Participants must schedule an interview within the next 14 days. If they attempt to schedule beyond this time, say: “I'm sorry, but we would like to complete the survey within TWO WEEKS of today's date. Could we schedule the survey for any time after tomorrow, before [today's date + 14 days].”

[In the few cases where respondent will be away for the coming weeks, allow for scheduling outside of the 2 week period.]

[Closing]

“Thank you very much for your help. If you would like any more information about this project, you can phone us at 1-866-303-2822. Good-bye.”

Q.HELP

R: “What is this survey about?”

I: “This is an ongoing study that will survey both recent smokers and non-smokers across Ontario. We will ask you questions about what you think, what you feel and your experiences relevant to tobacco use and second-hand smoke.”

IF RESPONDENT CONTINUES TO INQUIRE, INTERVIEWER TO RESPOND:

“I HAVE BEEN GIVEN SOME EXAMPLE QUESTIONS TO PROVIDE YOU, THESE ARE:”

“In the past 30 days, have you been inside a restaurant where other people were smoking around you?” AND for smokers “Are you thinking about quitting in the next 6 months?”

R: “How much” (for reimbursement) *[W5 – revised estimated time from 25 to 20]*

I: “There will be an honorarium of \$15 for an interview of up to 20 minutes”

R: “Is that a tobacco company?” [referring to OTRU]

I: “No, the Ontario Tobacco Research Unit is not a tobacco company.” And continue with response below for “WHAT IS OTRU?”

R: “What is OTRU?”

I: “The Ontario Tobacco Research Unit is an academic research network at the University of Toronto and University of Waterloo. The Unit conducts tobacco research on smoking behaviours and second-hand smoke in order to identify factors that might help reduce tobacco-related illness and death in Ontario.”

R: "I am not a smoker/recent smoker" [New at W3, July 2006]
I: "We are interested in speaking with all eligible respondents who have smoked even just one cigarette in the past 6 months"

[New for W5 – July 2007]

R: How many follow-up interviews?
I: We will try to contact you every 6 months for 6 follow-up interviews. Follow-up interviews will be shorter in length, ranging from 10-20 minutes. Your participation in each interview is voluntary and you will continue to receive a \$15 cheque for each interview you complete.

SMOKING BEHAVIOUR

SB_INTRO

Thank you very much for agreeing to participate in our survey. First, I would like to ask you some specific questions about your smoking behaviour

SB1 [CTUMS]
At the present time, do you smoke cigarettes every day, almost every day, occasionally, or not at all?
PROBE: [If respondent does not know or refuses: "We require this information to determine eligibility for this survey."]
01 – Every day
02 – Almost every day
03 – Occasionally
04 – Not at all
05 – I have never smoked a cigarette in my life [DO NOT READ] GOTO DSB3
06 – DK GOTO DEintro [error=1]
08 – R GOTO DEintro [error=1]
09 – R (respondent does not have time to complete survey) GOTO Q.12
Coverage: All respondents

SB2 [CTUMS]
Have you smoked at least 100 cigarettes in your life?
[PROBE: That is approximately 4-5 packs of cigarettes]
PROBE: [If respondent does not know or refuses – "We require this information to determine eligibility for this survey."]
01 – Y
02 – N
06 – DK
09 – R
Coverage: All respondents providing valid response (01-04) to SB1

DSB3
IF STATUS1=1 AND (SB1=1 OR SB1=2) THEN GOTO SB4 [everyday or almost e.d. smk]
IF STATUS1=1 AND (SB1=3 OR SB1=4) THEN GOTO SB3a [occas and not at all smk]
IF STATUS1=1 AND (SB1=05) THEN GOTO SBE1b [error in reporting]

IF STATUS1=2 AND (SB1=1 OR SB1=2) THEN GOTO SBE1a [error in reporting]
 IF STATUS1=2 AND SB1=3 THEN GOTO SB3b [occasional "not at all" smk >6mon]
 IF STATUS1=2 AND SB1=4 AND SB2=1 THEN GOTO SB3b [former smk >6mon]
 IF STATUS1=2 AND SB1=4 AND (SB2=2 OR SB2=6 OR SB2=9) [non smoker]
 THEN GOTO SB28 [GOTO changed from PO1intro to SB28 at W2 – Jan 06]
 IF (STATUS1 = "Non-Smoker" & SB1=05 [non-smoker]
 THEN GOTO SB28 [GOTO changed from PO1intro to SB28 at W2 – Jan 06]

SBE1a

Earlier you said that you had NOT smoked at least one cigarette in the past six months. I would just like to confirm your answer to this question: In the past six months have you smoked AT LEAST ONE cigarette?

PROBE: [If respondent does not know or refuses – “We require this information to determine eligibility for this survey.”]

01 – Yes STATUS1=RECENT SMOKER,
 GOTO SB4intro
 02 – No GOTO SBE2a
 06 – DK GOTO DEintro [error=1]
 09 – R GOTO DEintro [error=1]

Coverage: Respondents who originally responded ‘No’ to smoking a cigarette in last 6 months, but then respond to smoking every day or almost every day

SBE1b

Earlier you said that you HAD smoked at least one cigarette in the past six months. I would just like to confirm your answer to this question: In the past six months have you smoked AT LEAST ONE cigarette?

PROBE: [If respondent does not know or refuses – “We require this information to determine eligibility for this survey.”]

01 - Yes GOTO SBE2a
 02 – No STATUS1=NON-SMOKER,
 GOTO SB28

[GOTO changed from PO1intro to SB28 at W2 – Jan 06]

06 - Don't Know GOTO DEintro [error=1]
 09 – Refused GOTO DEintro [error=1]

Coverage: Respondents who originally responded ‘YES’ to smoking a cigarette in last 6 months, but then responded they have never smoked a cigarette in their life

SBE2a

Okay then, I would just like to confirm your answers to a couple previous questions.

At the present time, do you smoke cigarettes every day, almost every day, occasionally, or not at all?

PROBE: [If respondent does not know or refuses – “We require this information to determine eligibility for this survey.”]

[DO NOT READ CATEGORIES]

01 - Every day
 02 - Almost every day
 03 - Occasionally

04 - Not at all

05 - I have never smoked a cigarette in my life

06 - Don't Know

09 - Refused

Coverage: Respondents who originally provided contradictory responses to their smoking behaviour

IF (Status1 = "Non-smoker" & (ANS = 01 | ANS = 02 | ANS = 06 | ANS = 09))

THEN GOTO DEintro [error=1]

IF (Status1 = "Non-smoker" & (ANS = 03 | ANS = 04))

THEN GOTO SBE2b

IF (Status1 = "Non-smoker" & (ANS = 05))

THEN GOTO SB28 [GOTO changed from PO1intro to SB28 at W2 – Jan 06]

IF (Status1 = "Recent smoker" & (ANS = 05 | ANS = 06 | ANS = 09))

THEN GOTO DEINTRO [error=1]

IF (Status1 = "Recent smoker" & (ANS = 01 | ANS = 02 | ANS = 03 | ANS = 04))

THEN GOTO SBE2b

SBE2b

Have you smoked at least 100 cigarettes in your life?

PROBE: That is approximately 4-5 packs of cigarettes

PROBE: [If respondent does not know or refuses – “We require this information to determine eligibility for this survey.”]

[DO NOT READ]

01 - Yes

02 - No

06 - Don't Know

09 - Refused

Coverage: Respondents who originally provided contradictory responses to their smoking behaviour

DSBE3

IF (Status1 = "Recent smoker" & (SBE2a=01 | SBE2a=02))

THEN GOTO SB4intro

IF (Status1 = "Recent smoker" & (SBE2a=03 | SBE2a=04))

THEN GOTO SB3a

IF (Status1 = "Non-smoker" & SBE2a=03)

THEN GOTO SB3b

IF (Status1 = "Non-Smoker" & SBE2a=04 & SBE2b=01)

THEN GOTO SB3b

IF (Status1 = "Non-Smoker" & SBE2a=04 & (SBE2b=02 | SBE2b=06 | SBE2b=09))

THEN GOTO SB28 [GOTO changed from PO1intro to SB28 at W2 – Jan 06]

IF (Status1 = "Non-Smoker" & SBE2a=05)

THEN GOTO SB28 [GOTO changed from PO1intro to SB28 at W2 – Jan 06]

SB3a

How long ago was it that you last smoked a cigarette: was it

[CAMH]

[READ CATEGORIES 1 – 3]

01 – one week or less

GOTO SB4intro

02 – more than one week but less than one month

GOTO SB4intro

03 – 1 to 6 months ago GOTO DSB4a
Coverage: Occasional smokers and those smoking at least ONE cig in past 6 months (Q.8=01)

SB3b

How long ago was it that you last smoked a cigarette: was it [CAMH]
[READ CATEGORIES 1 – 3]

01 – 7 to 11 months ago GOTO SB28
02 – 1 to 5 years ago OR GOTO SB28
03 – more than 5 years ago GOTO SB28
04 – DK GOTO SB28
05 – R GOTO SB28

[GOTO for all response categories changed from PO1intro to SB28 at W2 – Jan 06]

Coverage: Occasional smokers and former smokers who have not smoked a cigarette in past 6 months but have smoked 100 cigarettes in their life

DSB4a

IF (SB2=1 | SBE2b=01) [100+ cig]

THEN GOTO SB9

IF (SB2=2 | SBE2b=02) [not 100+ cig in lifetime]

THEN GOTO SB28 *[GOTO changed from PO1intro to SB28 at W2 – Jan 06]*

SB4intro

Now I'm going to ask you a few questions about your smoking behaviours over the past 30 days

[moved SB7 and SB8 before SB4-SB6 as this has been an issue for interviewers/respondents (W5 – July 2007)]

SB7

Some people smoke more or less depending on the day of the week.

So, thinking back over the past month, on the WEEKEND DAYS that you did smoke, about how many cigarettes did you usually smoke?

[PROBE: For instance, on your average Saturday, how many cigarettes do you usually smoke?]

01 - ___ Enter number (SB7num RANGE: 0-100)

06 – DK

09 – R

Coverage: Current smokers (daily and occasional)

SB8

On the WEEKDAYS that you did smoke, about how many cigarettes did you usually smoke?

[CTS REVISED FOR WEEKEND DAYS]

[IF ASKED, INTERVIEWER TO REMIND RESPONDENT IN LAST 30 DAYS]

01 - ___ Enter number (SB8num RANGE: 0-100)

06 – DK

09 – R

Coverage: Current smokers (daily and occasional)

SB4

On how many of the past 30 days did you smoke cigarettes? [CCHS]

INTERVIEWER NOTE: If participant responds “everyday” to this question, enter 30

[DO NOT READ CATEGORIES]

01 - _____ ENTER NUMBER (SB4num RANGE=0-30) IF SB4num=30 GOTO DSB9

06 – DK

09 – R

Coverage: Current smokers (daily and occasional)

[revised question wording from "...did you smoke at least one cigarette?" on January 24, 2007]

[added interviewer note at W5 – July 2007]

[revised GOTO for SB4num = 30 from SB7 to DSB9 as questions were reordered at W5 – July 2007]

SB5

In the past month, on how many WEEKEND days did you smoke at least one cigarette?

PROBE: Some people ONLY smoke on occasion or on certain days of the week. In the past 30 days, how many weekend days did you smoke at least one cigarette?

[DO NOT READ CATEGORIES]

01 – ENTER NUMBER (SB5num RANGE=0-10)

06 – DK

09 – R

Coverage: Current smokers smoking less than 30 days in the past month [SB4<30]

[added interviewer probe at W5 – July 2007]

SB6

In the past month, on how many WEEKDAYS did you smoke at least one cigarette?

PROBE: Some people ONLY smoke on occasion or on certain days of the week. In the past 30 days, how many weekdays days did you smoke at least one cigarette?

01 - _____ Enter Number (SB6num RANGE: 0 – 25)

06 – DK SKP DSB9

09 – R SKP DSB9

Coverage: Current smokers smoking less than 30 days in the past month

[added interviewer probe at W5 – July 2007]

[Corrected CATI routing error from "IF (ANS = 06|ANS = 09) SKP SB7" – W5- Sept.20, 2007]

DSB9

IF (SB1=1 OR SB1=2) AND SB2=1 *[everyday or almost every day smokers and 100+cig]*

THEN GOTO SB10

IF SB2=2 *[not 100+ cig]*

THEN GOTO SB28 *[GOTO changed from PO1intro to SB28 at W2 – Jan 06]*

IF (SB1=3 OR SB1=4) AND SB2=1 *[occasional and "not at all" smokers and 100+ cig]*

THEN GOTO SB9

SB9

Have you ever smoked cigarettes daily [CTUMS '03]

01 – Y GOTO SB10

02 – N GOTO SB28 *[GOTO changed from PO1intro to SB28 at W2 – Jan 06]*

06 – DK GOTO SB28 *[GOTO changed from PO1intro to SB28 at W2 – Jan 06]*

09 – R GOTO SB28 *[GOTO changed from PO1intro to SB28 at W2 – Jan 06]*

Coverage: Occasional and former (1-6mon) smokers who have smoked 100 cigarettes in lifetime

SB10

At what age did you begin to smoke cigarettes daily? [CTUMS '03]

Interviewer Note: If respondent provides age less 8, repeat question and stress DAILY

[Interviewer Note added and SB10num range lowered (from 10 to 8) at W2 - January 2006]

01 - ____ ENTER NUMBER (SB10num RANGE: 8 – 50)

06 – DK

09 – R

Coverage: All respondents (current, occasional, and 1-6mon former) who have smoked cigarettes daily in their lifetime (100+ cig in lifetime)

DSB11

IF SB1=1 OR SB1=2 OR SB9 = 02 [daily smk and those who never smoked daily]

THEN GOTO SB28 [GOTO changed from PO1intro to SB28 at W2 – Jan 06]

IF SB1=3 AND SB9 = 01 [occasional smk who EVER smoked daily]

THEN GOTO SB11

IF SB1=4 AND SB9=1 [presently smoke “not at all” but have smoked DAILY in lifetime]

THEN GOTO SB11

SB11

How long ago was it that you smoked cigarettes DAILY: was it, [REVISED CAMH]

[READ CATEGORIES 1 – 6]

01 – one week or less

02 – More than one week but less than a month ago

03 – 1 to 6 months ago

04 – 7 to 11 months ago

05 – 1 to 5 years ago OR

06 – More than 5 years ago

08 – DK

09 – R

Coverage: All respondents who ever smoked daily and have now stopped smoking daily (current, occasional, and 1-6mon former; 100+ cig in lifetime)

SB12

What was the main reason you stopped smoking cigarettes daily?

_____ Enter Response [RF/JC / PM/CTUMS]

[CATEGORY CODES NOT TO BE READ]

01 – Reduce disease risk / improve health

02 – Illness / Disability

03 – As quitting strategy/trying to quit

04 – Too expensive / cost

05 – Smoking restrictions

06 – Reduce others' exposure to second-hand smoke

07 – Pregnancy/breastfeeding

08 – Reduced need/craving

09 – Family pressure

10 – Other Specify _____

66 – DK

99 – R

Coverage: All respondents who ever smoked daily and have now stopped smoking daily

SB28

[Added at beginning of WAVE 2 – Jan

/06]

Besides cigarettes, *in the past 6 months*, have you used any other tobacco products such as chewing tobacco, snuff, cigars, pipes or snus?

NOTE: “snus” is pronounced “snoose” – rhymes with moose/goose

PROBE: Other tobacco products include cigarillos, pinch, bidis, kreteks, shisha

PROBE2: Snus is moist tobacco placed in the mouth. It is not smoked or burned and does not require spitting.

[DO NOT READ CATEGORIES]

01 - Yes

02 - No

06 - Don't Know

09 - Refused

Coverage: All respondents [NOTE: previous survey documents indicate question wording “have you EVER used...”; however, the CATI script used the Follow-up question of “...in the past 6 months, have you used...”. The “past 6 month” question wording will be retained in the baseline survey for trend purposes.

[added “snus” to question wording in W5 – July 2007, along with note and probe2]

DAD1

IF SB1 = 04 & (SB2 = 02 | SB2 = 06 | SB2 = 09) GOTO PO1Intro

[currently does not smoke and has not smoked 100+ cig in life, incl DK,R]

IF (SB1 = 05) GOTO PO1Intro *[never smoker]*

IF (SB1 = 04 & Status1 = “Non-smoker”) GOTO PO1intro *[currently does not smoke and has not smoked a cig in the past 6 months]*

IF (SB1 = 01 | SB1 = 02 | SB1 = 03) GOTO AD1a *[everyday/almost everyday, occasional smoker]*

IF (SB1 = 04 & Status1 = “Recent smoker”) GOTO AD1b *[currently does not smoke but has smoked a cig in the past 6 months and 100+ cig]*

[last 2 IF statements revised at W2 – Jan '06 – to account for new question AD1b]

ADDICTION QUESTIONS

AD1a *[W1 variable is AD1; renamed AD1a at W2 – Jan06 – for parallel question AD1b]*

Thinking about your own smoking, would you say that you are NOT AT ALL ADDICTED to cigarettes, SOMEWHAT ADDICTED to cigarettes or VERY ADDICTED to cigarettes?

[Q2000 WITH RE-ORDERED RESPONSE CATS (reversed 01 and 03)]

01 – Not at all addicted

02 – Somewhat addicted

03 – Very addicted

06 – DK

09 – R

GOTO DAD2

Coverage: Current smokers (daily and ALL occasional)

AD1b
'06]

[Added at beginning of WAVE 2 – Jan

At the present time would you say that you are NOT AT ALL ADDICTED to cigarettes, SOMEWHAT ADDICTED to cigarettes or VERY ADDICTED to cigarettes?

[DO NOT READ CATEGORIES]

- 01 - Not at all addicted
- 02 - Somewhat addicted
- 03 - Very addicted
- 06 - Don't Know
- 09 - Refused

Coverage: Respondents who currently do not smoke but has smoked a cigarette in the past 6 months [100+ cigarettes in lifetime]

DAD2

IF (SB2= 01 & (SB1 = 01 | SB1 = 02)) GOTO AD2 [e.day or almost e.day smoker, 100+ cig]

IF ((SB2 = 01 & SB1 = 03) | SB2 = 02) GOTO AD3 [occasional 100+ and those who currently smoke but have not smoked 100+cig]

IF (SB1 = 04 & Status1 = "Recent smoker") GOTO QAintro [currently do not smoke but have smoked in the past 6 months] [this IF statement added at W2 – Jan '06]

AD2

How soon after you wake up do you usually smoke your first cigarette?

[PROBE: What I mean is how long in hours or minutes]

[DO NOT READ]

[MODIFIED FROM CAMH/CTUMS]

01 – ENTER NUMBER OF MINUTES _____ [AD2min RANGE: 0 – 240]

02 – ENTER NUMBER OF HOURS _____ [AD2hr RANGE: 0 – 15]

06 – DK

09 – R

Coverage: Daily smokers (100+ cigarettes in lifetime) [everyday or almost everyday]

AD3

Do you find it difficult to refrain from smoking in places where it is NOT ALLOWED?

[IF NECESSARY, READ RESPONSE CATEGORIES]

01 – Yes it is difficult to refrain from smoking OR

02 – No, it is not difficult to refrain from smoking

06 – DK

09 – R

Coverage: Current smokers (daily and occasional)

QUITTING QUESTIONS

QBintro

I am now going to ask you some questions about quitting smoking.

QB1

How easy or hard would it be for you to completely quit smoking if you wanted to? Would it be:

[READ CATEGORIES 1 – 4]

[ITS]

01 – Very easy

02 – Somewhat easy

03 – Somewhat hard OR

04 – Very hard

06 – DK

09 – R

Coverage: Current smokers

QB2

You said it would be [QB1 RESPONSE] to quit smoking if you wanted to. How confident are you that you would succeed if you decided to quit COMPLETELY in the next six months?

[ITS]

[READ CATEGORIES 1 – 4]

01 – Not at all confident

02 – Not very confident

03 – Fairly confident OR

04 – Very confident

06 – DK

09 – R

Coverage: Current smokers

QB3

If you decided to quit smoking, do you have at least one person you could count on for support?

01 – Yes

02 – No

06 – DK

09 – R

Coverage: Current smokers

QB4

Is there anyone who might make it more DIFFICULT for you to quit smoking if you wanted to?

01 – Yes

02 – No

06 – DK

09 – R

Coverage: Current smokers

QB5

In general, would you say your health is:

[CCHS]

[READ CATEGORIES 1 – 5]

01 – Excellent

02 – Very good

03 – Good

04 – Fair OR

05 – Poor
06 – DK
09 – R

Coverage: Current smokers
[SAME AS DE3, for Former (30+days) and Non-smokers]

QB6 [in follow-up surveys, this question is QB6a]

How much do you think you would benefit from health and other gains if you were to quit smoking permanently in the next 6 months? Would you: [ITS, Revised]

[READ CATEGORIES 1 – 4]

01 – Not benefit at all
02 – Benefit a little
03 – benefit quite a bit OR
04 – benefit a lot
06 – DK
09 - R

Coverage: Current smokers

DQB7

IF SB2=1 [100+ cig]

THEN GOTO QB7

IF SB2=2 [have not smoked 100+ cig]

THEN GOTO QAintro

QB7

Are you planning to quit smoking...

[READ CATEGORIES 1 – 4]

01 – Within the next month?
02 – Within the next 6 months?
03 – Sometime in the future, beyond 6 months? Or are you
04 – Not planning to quit.
05 – I have already quit [DO NOT READ]
06 – DK
09 – R

GOTO QB10

GOTO QB10

GOTO QB10

GOTO QB10

GOTO QB10

Coverage: Current smokers who have smoked 100 cig in lifetime

QB8

What is the main reason you plan to quit smoking?

Enter Response

[CATEGORY CODES – DO NOT READ]

01 – Reduce disease risk / improve health
02 – Illness / Disability
03 – Too expensive / cost
04 – Smoking restrictions
05 – Reduce others' exposure to second hand smoke
06 – Pregnancy/breastfeeding

07 – Reduced need/craving
08 – Family pressure
09 – Other (Specify) _____
66 – DK
99 – R

Coverage: Current smokers [100+ cigarettes in lifetime] who plan to quit smoking in the next 6 months

QB9

Have you set a firm quit date?

01 – Y
02 – N
09 – R

Coverage: Current smokers [100+ cigarettes in lifetime] who plan to quit sometime in the next 6 months

QB10

How many times have you EVER made a serious attempt to quit smoking? By serious, we mean that you made a conscious attempt to stay off cigarettes for good.

01 - ____ ENTER NUMBER (IF RANGE GIVEN, USE MIDPOINT) GOTO QB10num

09 – R GOTO QAintro

Coverage: Current smokers who have smoked 100 cig in lifetime

QB10num

[QB10num RANGE: 0 – 50]

IF QB10num >=1 & QB10num<51 GOTO QB10a

ELSE GOTO QAintro

QB10a

[added at Wave 2 – Jan '06 - to derive Stages of Change]

When did your last serious quit attempt end? Was it...

Probe: By serious, we mean that you made a conscious attempt to stay off cigarettes for good.

[READ CATEGORIES 1-4]

01 – less than one month ago

02 – 1-6 months ago

03 – 7-12 months ago OR

04 – More than one year ago

05 – Currently in a quit attempt [DO NOT READ] *[response category added at W4 – Jan '07]*

06 – DK

09 – R

Coverage: Current smokers who have smoked 100 cig in lifetime and made one or more attempts to quit smoking in their lifetime (1 < QB10num < 51).

QB18a

[added at W5 – July 2007]

Which of these statements best describes how your most recent quit attempt started:

[READ CATEGORIES 01 – 06]

01 – I did not plan the quit attempt in advance, I just did it;

02 – I planned the quit attempt for later the same day;

03 – I planned the quit attempt the day beforehand;

- 04 – I planned the quit attempt a few days beforehand;
- 05 – I planned the quit attempt a few weeks beforehand; OR
- 06 – I planned the quit attempt a few months beforehand;
- 07 – other
- 08 – DK
- 09 – R

Coverage: Current smokers who have smoked 100 cig in lifetime and made one or more attempts to quit smoking in their lifetime (1 < QB10num < 51).

NOTE: coding “other for anything greater than 3months

QUIT AIDS

QAINTRO

Now I am going to ask you some questions about resources and aids to help *people* quit smoking...

[revised “you” to “people” in W4 – Jan 24, 07]

QA1

Can you NAME 5 aids or resources that help people quit smoking?

[Replaced “NAME” for “think of” at the beginning of Wave 3 – July ‘06]

[IF RESPONDENT STRUGGLING INTERVIEWER MAY RESPOND WITH “IT IS OK IF YOU CANNOT” – INTERVIEWER NOT TO AID RESPONDENT]

ENTER RESPONSES

01 – Enter response

QA1a _____

QA1b _____

QA1c _____

QA1d _____

QA1e _____

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers

DQA2

IF SB2=1 *[100+ cig]*

THEN GOTO QA2intro

IF SB2=2 *[not 100+ cig in lifetime]*

THEN GOTO QA21

QA2intro

Now I am going to ask if you have EVER used any of the following to help you quit or reduce smoking.

QA2

Have you EVER used nicotine patches to help you quit or reduce smoking?

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA3

Have you EVER used nicotine gum or chewing pieces like Nicorette?

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA4

Have you EVER used nicotine inhalers?

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA5a

[QA5 renamed QA5a at beginning of W2 – Jan '06 – for new question]

Have you EVER used a pill prescribed by your doctor called Zyban or bupropion?

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA5b

[Added at beginning of WAVE 2 – Jan

'06]

Have you EVER used a pill prescribed by your doctor called Wellbutrin to stop smoking?

[DO NOT READ CATEGORIES]

01 - Yes

02 - No

06 - Don't Know

09 - Refused

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA34

[added at W5 – July 2007]

Have you EVER used a pill prescribed by your doctor called Champix or Varenicline to help you stop smoking?

INTERVIEWER NOTE: “Varenicline” is pronounced “var-en-i-clean”

[DO NOT READ]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers (100+) who attempted to quit or reduce in past 6 months; and former (≥ 7 mon) who have used aids in past 6 months

QA6

Have you EVER used hypnosis, acupuncture, or laser therapy?

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA7

Have you EVER used a self-help booklet or video, a website or a chat group?

[PROBE: THIS MAY INCLUDE ANY SELF-HELP MATERIAL SUCH AS CDs]

[Probe added at beginning of W2 – Jan '06]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA8

Have you EVER been to group counselling or a group support program?

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA9

Have you EVER seen a specialized addiction counsellor?

PROBE: This could be a medical doctor or other health professional trained in nicotine addiction.

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA10intro

I am now going to read a list of statements about stop smoking medications such as the nicotine patch, gum, inhalers or pills from your doctor.

[W5 – July 2007 – deleted “Please tell me if you strongly agree, ...” given revised questions]

QA35 *[revised from QA10 in W5 – July 2007; deleted from F.UP surveys]*

Compared to trying to quit on your own, do you feel that stop smoking medications make it:

[READ CATEGORIES 01 – 05]

01 - A LOT easier than trying to quit on your own

02 - A LITTLE easier

- 03 - About the same
- 04 - A LITTLE harder than trying to quit on your own, or
- 05 - A LOT harder than trying to quit on your own
- 06 - DK
- 09 - R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA36 *[revised from QA11 in W5 – July 2007; deleted from F.UP surveys]*

Do you feel that stop smoking medications cost:

[READ CATEGORIES 01 – 03]

- 01 - Too little
- 02 - About right
- 03 - Too much
- 06 – DK
- 09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA37 *[revised from QA12 in W5 – July 2007; deleted from F.UP surveys]*

Do you feel that stop smoking medications are:

[READ CATEGORIES 01 – 04]

- 01 - Very easy to get
- 02 - Somewhat easy to get
- 03 - Somewhat difficult to get OR
- 04 - Very difficult to get
- 06 – DK
- 09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

QA13 [deleted at W3, July 14, 2006]

~~You are not sure about stop smoking medications. Do you...~~

~~PROBE: That is, you are not sure about what stop smoking medications are.~~

~~_____ [Probe added at beginning of WAVE 2; “about” deleted from Probe for Wave 3]~~

QA38 *[revised from QA14 in W5 – July 2007; deleted from F.UP surveys]*

Do you feel that stop smoking medications have:

[READ CATEGORIES 01 – 03]

- 01 - A LOT of side effects
- 02 - A FEW side effects OR
- 03 - NO side effects that concern you
- 06 – DK
- 09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

IF QA7 AND QA8 AND QA9 = 02 THEN GOTO QA15intr

[NO previous use of self-help, group counselling, and specialized addiction counsellor]

IF QA7 OR QA8 OR QA9 = 01 THEN GOTO QA39 *[revised goto at W5 –July’07– from QA17intr]*

[previous use of self-help, group counselling, or specialized addiction counsellor]

QA15intr

Now I am going to read a list of statements about telephone and other counselling programs delivered by trained professionals.

DQA15

IF QA7 AND QA8 AND QA9 = 02 [NO previous use of self-help, group counselling, and specialized addiction counsellor]

THEN GOTO QA15

IF QA7 OR QA8 OR QA9 = 01 OR (SB1=4 AND SB3a=3) [previous use of self-help, group counselling, or specialized addiction counsellor OR you have already quit]

THEN GOTO QA39 [revised goto at W5 –July'07– from QA17intr]

QA15

If you were going to quit smoking, would you be willing to participate in counselling to help you quit?
PROBE: We are not providing a counselling program. We would just like to determine if these programs are something you would consider if you decided to quit smoking.

01 – Y GOTO QA16

02 – N GOTO QA39 [revised goto at W5 –July'07– from QA17intr]

06 – DK GOTO QA16

09 – R GOTO QA16

Coverage: Current and former (1-6mon) smokers who have never gone to counselling to help them quit smoking (and smoked 100 cig in lifetime)

[revised italicised Q wording and probe added in W4 – Jan '07. Was "Would you be willing to participate in counselling to help you quit smoking?"]

QA16

If you were going to participate in counselling to help you quit, what type of counselling would you prefer? Would it be...

PROBE: We are not providing a counselling program. We would just like to determine if these programs are something you would consider if you decided to quit smoking.

[READ CATEGORIES 1 – 5]

01 – Group counselling

02 – One-on-one counselling

03 – Telephone-based counselling

04 – Web-based counselling OR

05 – Self-help counselling, for example, reading materials

[added "for example" to response 05 at W3 – July '06]

06 – Other Specify: _____

07 – DK

08 – R

Coverage: Current and former (1-6mon) smokers who have never gone to counselling to help them quit smoking (and smoked 100 cig in lifetime)

[revised wording and probe added in W4 – Jan '07. Was "What type of counselling would you prefer to participate in?"]

[W5 – July 2007 – deleted QA17intr and text as the following Qs were revised]

QA39

[revised from QA17 in W5 – July 2007; deleted from F.UP surveys]

Do you feel that counselling programs would make quitting smoking:

[READ CATEGORIES 01 – 04]

01 - A LOT easier

02 - A LITTLE easier OR

03 - Counselling would NOT make quitting smoking any easier than trying to quit on your own OR

04 - Counselling would make quitting smoking harder than trying to quit on your own

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers (100 cig in lifetime)

QA40 *[revised from QA18 in W5 – July 2007; deleted from F.UP surveys]*

Do you feel that counselling programs to help people to quit smoking cost:

[READ CATEGORIES 01 – 03]

01 - Too little

02 - About right

03 - Too much

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers (100 cig in lifetime)

QA41 *[revised from QA19 in W5 – July 2007; deleted from F.UP surveys]*

Do you feel that counselling programs to help people stop smoking are:

[READ CATEGORIES 01 – 04]

01 - Very easy to get

02 - Somewhat easy to get

03 - Somewhat difficult to get OR

04 - Very difficult to get

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers (100 cig in lifetime)

QA42 *[revised from QA20 in W5 – July 2007; deleted from F.UP surveys]*

How well do you know what happens during stop-smoking counseling? Would you say that you:

[READ CATEGORIES 01 – 04]

01 - Know a lot about what happens

02 - Know a little bit

03 - Not very much OR

04 - Not at all about what happens during stop-smoking counseling

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers (100 cig in lifetime)

QA21

Can you tell me the name of a free telephone helpline designed to help smokers who want to quit or the organisation that sponsored this helpline?

01 - _____ (Open ended; record response if not 02 or 03) GOTO QA22

02 – Ontario Smokers’ Helpline GOTO DQA23

03 – Canadian Cancer Society GOTO DQA23

06 – DK GOTO QA22
09 – R GOTO QA22
Coverage: Current and former (1-6mon) smokers

QA22
Have you EVER heard of the Ontario Smokers' Helpline sponsored by the Canadian Cancer Society?
01 – Yes GOTO DQA23
02 – No GOTO QA24
06 – DK GOTO QA24
09 – R GOTO QA24
Coverage: Current and former (1-6mon) smokers who were not aware of the Ontario Smokers' Helpline

DQA23
IF SB2=1 [100+ cig]
THEN GOTO QA23
IF SB2=2 [respondents who have not smoked 100+ cig]
THEN GOTO QA24

QA23
Have you EVER called the Ontario Smokers' Helpline?
01 – Y
02 – N
06 - DK
09 – R
Coverage: Current and former (1-6mon) smokers who were aware (unaided or aided) of the Ontario Smokers' Helpline (and smoked 100 cig in lifetime)

QA23a [added at W5 – July 2007]
Have you EVER accessed the “Smokers' Helpline Online” sponsored by the Canadian Cancer Society?
PROBE: The “Smokers' Helpline Online” is a web-based counselling service to help smokers quit
[DO NOT READ]
01 – Y
02 – N
06 - DK
09 – R
Coverage: Current and former (1-6mon) smokers who were aware (unaided or aided) of the Ontario Smokers' Helpline (and smoked 100 cig in lifetime)

QA24
Have you EVER seen or heard of a “quit program” that offers help to smokers who want to quit through workshops, counselling, or printed materials?
01 – Y GOTO DQA25
02 – N GOTO DHP1
06 – DK GOTO DHP1
09 – R GOTO DHP1

Coverage: Current and former (1-6mon) smokers

DQA25

IF SB2=1 THEN GOTO QA25 [100+ cig]

IF SB2=2 THEN GOTO QA26b[respondents who have not smoked 100+ cig]

QA25

Did you EVER take part in a quit program?

01 – Y

GOTO QA26a

02 – N

GOTO QA26b

06 – DK

GOTO QA26b

09 – R

GOTO DHP1

Coverage: Current and former (1-6mon) smokers who are aware of a quit program (and smoked 100 cig in lifetime)

QA26a

Can you tell me the name of this quit program or what organisation sponsored the program?

01 - _____ (Open ended; record response)

GOTO DHP1

06 – DK

GOTO DHP1

09 – R

GOTO DHP1

Coverage: Current and former (1-6mon) smokers who EVER participated in a quit program

QA26b

Can you tell me the name of a quit program or an organisation that sponsors a quit program?

01 - _____ (Open ended; record response)

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers aware of a quit program (but have not participated in a program for those who have smoked 100+ cigarettes in their lifetime)

HEALTH PROFESSIONALS

DHP1

IF SB2=1 [100+ cig]

THEN GOTO RAND1

IF SB2=2 [respondents who have not smoked 100+ cig]

THEN GOTO PP1intro

HPintro

Now I'd like to ask you about your visits with health professionals.

[SOFTWARE TO RANDOMISE ORDER OF HP1A HP1B HP1C TO RESPONDENT, USE SAME A,B,C ORDER FOR QUESTIONS HP2A HP2B HP2C]

[ADMINISTRATIVE VARIABLE:

RAND1 = RANDOMISATION SCHEME OF RESPONDENT]

HP1A

Has a dentist EVER advised you to reduce or quit smoking?

[DO NOT READ]

INTERVIEWER NOTE: If respondent initially replies “never”, ask respondent “Have you NEVER been to a dentist or has a dentist never advised you to quit smoking?”

01 – Y

02 – N

03 – I have never seen a dentist [added at beginning of W4 – Jan ‘07]

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

[Added note in W4 - January 24, 2007; revised in W5 – July 2007 to clarify “never”]

HP1B

Has a pharmacist EVER advised you to reduce or quit smoking?

INTERVIEWER NOTE: If respondent initially replies “never”, ask respondent “Have you NEVER been to a pharmacist or has a pharmacist never advised you to quit smoking?”

[DO NOT READ]

01 – Y

02 – N

03 – I have never seen a pharmacist [added at beginning of W4 – Jan ‘07]

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

[Added note in W4 – January 24, 2007; revised in W5 – July 2007 to clarify “never”]

HP1C

Has a doctor EVER advised you to reduce or quit smoking?

INTERVIEWER NOTE: If respondent initially replies “never”, ask respondent “Have you NEVER been to a doctor or has a doctor never advised you to quit smoking?”

[DO NOT READ]

01 – Y

02 – N

03 – I have never seen a doctor [added at beginning of W4 – Jan ‘07]

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

[Added note in W4 - January 24, 2007; revised in W5 – July 2007 to clarify “never”]

DHP2

IF (SB1=1 OR SB1=2 OR SB1=3) [respondents who currently smoke daily or occasionally]

THEN GOTO HP2A

IF SB1=4

[respondents who currently do not smoke]

THEN GOTO PO1INTRO

HP2A

If you were going to quit smoking, how likely would you be to ask a DENTIST for advice? Would you be ...[READ CATEGORIES 1 – 3]

01 – Very likely
02 – Somewhat likely OR
03 – Not likely at all
06 – DK
09 – R
Coverage: Current smokers who have smoked 100 cig in lifetime

HP2B
If you were going to quit smoking, how likely would you be to ask a PHARMACIST for advice?
Would you be ...[READ CATEGORIES 1 – 3]
01 – Very likely
02 – Somewhat likely OR
03 – Not likely at all
06 – DK
09 – R
Coverage: Current smokers who have smoked 100 cig in lifetime

HP2C
If you were going to quit smoking, how likely would you be to ask a DOCTOR for advice? Would
you be ... [READ CATEGORIES 1 – 3]
01 – Very likely
02 – Somewhat likely OR
03 – Not likely at all
06 – DK
09 - R
Coverage: Current smokers who have smoked 100 cig in lifetime

PURCHASING PROFILE

PP1intro
Now I would like to ask you a few questions about the cigarettes that you usually smoke and where
you purchase them....

PP1
*[revised in W4 - Jan '07 – to account for brand changes with the discontinuation of the terms
“light/mild” by tobacco manufacturers: originally provided coded answers for interviewers, now
open ended]*

Can you tell me the exact brand of cigarettes that you usually smoke, including the size and type?
[DO NOT READ]
ENTER ONE BRAND ONLY
NOTE: PROBE FOR THE RESPONDENT TO READ THE ENTIRE BRAND OF CIGARETTES,
SUCH AS SIZE AND/OR TYPE
PROBE: What type of cigarette do you usually smoke, for example, menthol, mild, special blend, or
platinum... *[revised probe in W4: Jan 07]*
PROBE: What size do you usually smoke, is it regular or king size?

PROBE IF CANNOT REMEMBER: Do you have a pack of cigarettes near you that you could read me the name? *[added probe in W4: Jan 07]*

- 01 – enter full brand GOTO PP1txt
- 02 – no regular brand GOTO PP11 *[W4: category 99 in previous waves]*
- 03 – roll-your-own/loose leaf, any brand GOTO PP11 *[W4: category 100 in previous waves]*
- 06 – DK GOTO PP11 *[W4: category 166 in previous waves]*
- 09 – R GOTO PP11 *[W4: category 199 in previous waves]*

Coverage: Current smokers

*[response categories 02 – 09 renumbered in W4 for new question wording – see previous surveys]
[GOTO for response categories 02 – 09 revised in W5 –July '07 – to PP11 (previously PP3)]*

~~DPP2~~

~~IF PP1 INCLUDES “LIGHT”, “MILD”, “ULTRA LIGHT”, “ULTRA MILD”, “EXTRA LIGHT”,
OR “EXTRA MILD”~~

~~_____ THEN GOTO PP2~~

~~ELSE~~

~~_____ THEN GOTO PP3~~

[DPP2 not relevant at W4 given new coding for PP1]

PP2

What is the main reason you smoke this brand of cigarettes? Is it...

[READ CATEGORIES 1 – 4]

- 01 – for the taste
- 02 – because of cost
- 03 – to reduce the risks of smoking OR
- 04 – as a step towards quitting smoking completely
- 05 – I have always smoked this brand (habit) [DO NOT READ]
- 06 – Other: SPECIFY [DO NOT READ]
- 07 – DK
- 09 – R

Coverage: Current smokers who provide a regular cigarette brand

*[REVISED Q in W4 (Jan 07); originally asked “...reason you smoke light/mild cigarettes”]
[Revised coverage at W4 – Jan '07 given new wording for PP1 – now asked for all respondents who provide a regular brand whereas previously only asked to those who smoked light/mild cigarettes.
PREVIOUS RESPONSE CATEGORIES: 01-step towards quitting; 02-reduce risks of smoking; 03-milder taste; 04-other; 06-dk; 09-r]*

PP11_0 *[added at W5 – July 2007]*

The last time you bought cigarettes, how much did you pay?

[DO NOT READ]

- 01 – Enter price [PP11num_0] GOTO PP20
- 02 – Other (e.g. other currency) GOTO PP12 *[corrected this GOTO W5 – Aug 3, 2007]*
- 06 – DK GOTO PP12
- 09 – R GOTO PP12

Coverage: Current smokers

PP20_0

[added at W5 – July 2007]

Approximately how many cigarettes did that buy? For example, a carton of 200 or pack of 25?

PROBE: IF RESPONDENT SAYS A PACKAGE, CARTON, OR BAG RESPOND "How many cigarettes were in that [CARTON\PACK\BAG]?"

Interviewer Note: code "other" and provide details if the respondent cannot estimate number of cigarettes that they last purchased.

[DO NOT READ]

01 – enter number of cigarettes [PP20num_0] GOTO PP12_0

02 – other [specify] GOTO PP12_0

06 – DK GOTO PP12_0

09 – R GOTO PP12_0

Coverage: Current smokers providing price of last cigarette purchase

PP12_0

[added at W5 – July 2007]

Does your usual brand have large coloured health warnings on the outside of the cigarette package?

[DO NOT READ]

01 – Yes

02 – No

06 – DK

09 – R

Coverage: Current smokers

PP3

Do you usually buy your cigarettes in Ontario, out of province, over the internet, through the mail, *or do you usually buy your cigarettes from family or friends?*

[DO NOT READ CATEGORIES]

01 – Ontario GOTO PP4

02 – Out of province GOTO PP5

03 – Over the internet or through the mail GOTO PP5

04 – buy from family or friends GOTO PP5

05 – do not usually buy own cigarettes GOTO PP5

06 – DK GOTO PP4

09 – R GOTO PP4

Coverage: Current smokers

[Response categories 04 and 05 added at W4 – Jan '07; italicized question wording extended at W4 – Jan '07 - to incorporate response category 04]

PP4

Where do you usually buy your cigarettes?

[CTS REVISED]

[READ CATEGORIES 1 – 5]

[Note: please code Giant Tiger as a discount store]

[Note added at Wave3 – July '06]

PROBE: "A First Nations or Indian Reserve"

[probe added in W3 – Oct 20, 2006]

01 – At convenience stores GOTO PP5

02 – At gas stations GOTO PP5

03 – At supermarkets GOTO PP5

04 – At discount stores such as Costco OR GOTO PP5

05 – On a First Nations Reserve GOTO PP6

06 – Other Specify _____ GOTO PP5
07 – DK GOTO PP5
09 – R GOTO PP5
Coverage: Current smokers who usually buy their cigarettes in Ontario (including PP3=DK, R)
[response category 05 reworded from “Indian Reserve” to “First Nations” in W3 – Oct 20/06]

PP5

Have you EVER purchased cigarettes on a First Nations Reserve?
[Q reworded from “Indian Reserve” to “First Nations” in W3 – Oct 20/06]
PROBE: "A First Nations or Indian Reserve" *[probe added W3 – Oct 20/06]*
01 – Y GOTO PP6
02 – N GOTO DPP7
06 – DK GOTO DPP7
09 – R GOTO DPP7
Coverage: Current smokers not usually buying their cigarettes on an Indian Reserve [PP3 NE 04]

PP6

About how many packs of cigarettes have you bought on a FIRST NATIONS RESERVE in the past 6 months?
[Q reworded from “Indian Reserve” to “First Nations” in W3 – Oct 20/06]
PROBE: "A First Nations or Indian Reserve" *[probe added Oct 20, 2006]*
[DO NOT READ]
01 – ENTER NUMBER OF CIGARETTES _____ [PP6numa_0 range: 0-1000] *[new W3]*
02 – ENTER NUMBER OF PACKS _____ [PP6numb_0 range: 0-1000]
[PP6num (now PP6numb) range increased from 500 to 1000 at W2 – Jan '06]
03 – ENTER NUMBER OF CARTONS _____ [PP6numc_0 range: 0-1000] *[new at W3]*
06 – DK
09 – R
Coverage: Current smokers EVER purchasing their cigarettes on an Indian Reserve
[added choice of cigarettes (01), or cartons (03) at W3 – July '06; previously included packs only as response 01]
[follow-up code uses PP6na, PP6nb, etc. whereas baseline uses PP6numa, PP6numb, etc.]

DPP7

IF PP3=03 *[respondents who already reported usually purchasing their cig through web/mail]*
THEN GOTO PP8

PP7

Have you EVER purchased cigarettes from the internet or through the mail?
01 – Y GOTO PP8
02 – N GOTO PP17
06 – DK GOTO PP17
09 – R GOTO PP17
Coverage: Current smokers not usually buying their cigarettes from the internet or through the mail
[PP3 NE 03]
[revised skip logic for 02 – 09 at W5 – July 2007 from PO1intro to PP17]

PP8

About how many packs of cigarettes have you bought over the INTERNET in the past 6 months?
[DO NOT READ]

01 – ENTER NUMBER OF CIGARETTES _____ [PP8numa_0 range: 0-1000] *[new at W3]*

02 – ENTER NUMBER OF PACKS _____ [PP8numb_0 range: 0-1000]

[PP8num (now PP8numb) range increased from 200 to 1000 at W2 – Jan '06]

03 – ENTER NUMBER OF CARTONS _____ [PP8numc_0 range: 0-1000] *[new at W3]*

06 – DK GOTO PP9

09 – R GOTO PP9

Coverage: Current smokers EVER purchasing or usually purchasing their cigarettes over the internet
[added choice of cigarettes (01), or cartons (03) at W3 – July '06; previously included packs only as response 01]

[Follow-up code uses PP8na, PP8nb, etc. whereas baseline uses PP8numa, PP8numb, etc.]

PP9

About how many packs of cigarettes have you bought through the MAIL in the past 6 months?

[DO NOT READ]

01 – ENTER NUMBER OF CIGARETTES _____ [PP9numa_0 range: 0-1000] *[new at W3]*

02 – ENTER NUMBER OF PACKS _____ [PP9numb_0 range: 0-1000]

[PP9num (now PP9numb) range increased from 200 to 1000 at W2 – Jan '06]

03 – ENTER NUMBER OF CARTONS _____ [PP9numc_0 range: 0-1000] *[new at W3]*

06 - Don't Know GOTO PP17

09 - Refused GOTO PP17

Coverage: Current smokers EVER purchasing or usually purchasing their cigarettes over the internet
[added choice of cigarettes (01), or cartons (03) at W3 – July '06; previously included packs only as response 01]

[revised skip logic for 02 – 09 at W5 – July 2007 from PO1intro to PP17]

[Follow-up code uses PP9na, PP9nb, etc. whereas baseline uses PP9numa, PP9numb, etc.]

PP17_0

[added at W5 – July 2007]

Have you EVER purchased cigarettes from a non-retail source, such as out of a person's home, out of a person's vehicle, or from someone on the street?

[DO NOT READ]

PROBE: The answers you provide are to be used for research purposes only. They will be kept strictly confidential.

IF ABSOLUTELY NEEDED: “You are free to refuse to answer any of the questions that I ask you”

01 – Yes

02 – No

06 – DK

09 – R

Coverage: Current smokers

POINT OF PURCHASE

PO1intro

The next questions ask about stores that commonly sell cigarettes such as convenience stores, corner stores, and gas stations.

PO1

Over the past 7 days how often have you been to a convenience store, corner store, or gas station?

PROBE: Did you go for ANY reason (if needed: not just to buy cigarettes)?

[READ CATEGORIES 1 – 4]

01 – Not at all	GOTO DPO6
02 – One or two days	GOTO DPO5
03 – Three to five days OR	GOTO DPO5
04 – Six or seven days	GOTO DPO5
06 – DK	GOTO DPO6
09 – R	GOTO DPO6

Coverage: All respondents

[revised skip logic for response category 01,06,09 from ESintro to DPO6 at W5 – July 2007]

[revised skip logic for response category 02-04 from PO2 to DPO5 at W5 – July 2007]

[added probe at W5 – July 2007]

DPO5 *[added at W5 – July 2007]*

IF (SB1=1 OR SB1=2 OR SB1=3) *[e.day, almost e.day, occasional smokers]*

THEN GOTO P05

IF ((SB1=4 AND (SB3a=1 OR SB3a=2)) *[presently “not at all” smoker who smoked in the last month]*

THEN GOTO PO5

Else GOTO PO2

PO5 *[added at W5 – July 2007]*

On how many of these occasions did you purchase cigarettes?

Probe: On how many of your visits to a convenience store, corner store, or gas station in the past 7 days did you purchase cigarettes?

[READ CATEGORIES 1-4]

01 - Not at all
02 - One or two days
03 - Three to five days OR
04 - Six or seven days
06 - DK
09 - R

Coverage: Current smokers who have visited a corner store/gas station in the past 7 days

PO2

In the last 7 days, how often did you notice cigarette packs or other tobacco products displayed BEHIND THE COUNTER at convenience stores, corner stores, or gas stations?

[READ CATEGORIES 01 - 04]

01 – Never
02 – Sometimes
03 – Most of the time OR
04 – Always
06 – DK

09 – R

Coverage: All respondents who have been to a convenience store, corner store, or gas station in the past 7 days

~~PO3 – ON THE COUNTER [DELETED AT W5 – JULY 2007]~~

PO4

Again, in the last 7 days, how often did you notice SIGNS OR POSTERS associated with cigarette brands or tobacco companies at convenience stores, corner stores, or gas stations?

[READ CATEGORIES 01 - 04]

01 – Never

02 – Sometimes

03 – Most of the time OR

04 – Always

06 – DK

09 – R

Coverage: All respondents who have been to a convenience store, corner store, or gas station in the past 7 days

DPO6 *[added at W5 – July 2007]*

IF (SB1=1 OR SB1=2 OR SB1=3) AND SB2=1 AND QB10a ne 05 *[e.day, almost e.day, occasional smokers, 100+ cig who are not in a quit attempt]*

THEN GOTO P06b

IF QB10a=05 OR ((SB1=4 AND (SB3a=1 OR SB3a=2)) AND SB2=1) *[current smoker currently in quit attempt OR presently “not at all” smoker who smoked in the last month and 100+ cig]*

THEN GOTO PO6a

IF (SB1=4 AND (SB3a=3 OR SB3b<4))

THEN GOTO PO6a *[presently “not at all” smoker who smoked >1mon ago]*

IF (SB1=05) OR SB2=2 *[never smoker OR not 100+ cig in lifetime]*

THEN GOTO ESintro

PO6a *[added at W5 – July 2007]*

Do you feel that seeing cigarettes in stores makes it a lot harder, somewhat harder, or not hard at all for you to resist buying cigarettes?

[DO NOT READ]

01 – a lot harder

02 – somewhat harder OR

03 – not hard at all?

06 – DK

09 – R

GOTO ESintro

Coverage: Former smokers (100+), or current smokers in a quit attempt (100+)

PO6b *[added at W5 – July 2007]*

If you were going to quit smoking, do you feel that seeing cigarettes in stores would make it a lot harder, somewhat harder, or not hard at all for you to resist buying cigarettes?

[DO NOT READ]

01 – a lot harder

02 – somewhat harder OR
03 – not hard at all?
06 – DK
09 – R
GOTO ESIntro
Coverage: current smokers (100+) not in a quit attempt

SECOND-HAND SMOKE

ESIntro

Now I would like to ask you a few questions about smoking in your home, your workplace, and in other places such as restaurants and bars.

ES1

Which of the following best describes the smoking behaviours in your home by the people who LIVE there.... [RF]

[READ CATEGORIES 1 – 5]

01 - No one smokes anywhere on the property	GOTO ES1b [revised GOTO at W4]
02 - No one smokes indoors at all	GOTO ES1b [revised GOTO at W4]
03 - People smoke in certain rooms only	GOTO ES2b
04 – People smoke except when young children are present OR	GOTO ES2b
05 - People smoke anywhere in the home	GOTO ES2b
06 – Both response 3 and 4: People smoke in certain rooms except when children present [DO NOT READ] [response added at W5, July 2007]	GOTO ES2b
07 – DK	GOTO ES2b [coded as 06 prior to W5]
09 – R	GOTO ES2b

Coverage: All respondents

[skip logic for 01 and 02 response categories were revised to goto the new question below in W4 – Jan 24, 2007; previously went to ES2a]

[response category 06 added at W5 – July 2007; response 07 – DK was renumbered in W5 – July 2007 – to account for new category]

ES1b [added in W4 – Jan 24, 2007]

Do you ever allow VISITORS to smoke inside your home?

01 – Y	GOTO ES2a
02 – N	GOTO ES23 [revised GOTO at W5]
06 – DK	GOTO ES2a
09 – R	GOTO ES2a

Coverage: Respondents who live in homes where inhabitants do not smoke [ES1 = 1,2]

[revised skip logic for response category 02 from DTY1 to ES23 at W5 – July 2007]

ES2a

Thinking about *these* REGULAR VISITORS, how often does someone smoke inside your home? Is it... [RF]

[READ CATEGORIES 1 – 6]

01 – Daily or almost every day	GOTO ES23 [revised all GOTOs for this Q in W5]
--------------------------------	--

02 – Three or four times a week	GOTO ES23
03 – One or two times a week	GOTO ES23
04 – Less than once a week to once a month	GOTO ES23
05 – Less than once a month OR	GOTO ES23
06 – Not at all	GOTO ES23
07 – DK	GOTO ES23
09 – R	GOTO ES23

Coverage: Respondents who live in homes where inhabitants do not smoke [ES1 = 1,2] *but allow visitors to smoke inside their home* [ES1b = 1,6,9]
 [added “these” to the question wording in W4 – Jan 24, 2007]
 [revised in W4 – Jan 24, 2007 - coverage restricted to those who allow visitors to smoke inside their home, incl DK/R in ES1b (suggest coding to include ES1b=02 as “not at all” to this question)]
 [GOTO for all response categories revised to ES23 at W5 – July 2007 (previously DTY1)]

ES2b

Including YOURSELF, family members and regular visitors, how often does someone smoke inside your home? Is it... [RF]

[READ CATEGORIES 1 – 5]

01 – Daily or almost every day
 02 – Three or four times a week
 03 – One or two times a week
 04 – Less than once a week to once a month OR
 05 – Less than once a month
 06 – DK
 09 – R

Coverage: Respondents who live in homes where people smoke [ES1 ne 1,2]

~~DTY1, DDTY1, TY1~~ [deleted at W5, July 2007]

ES23 [added to BL only; added at W5 – July 2007]

In the past 6 months, how often have you noticed any tobacco smoke entering your home from a neighbour, a neighbouring unit or from outside the building?

PROBE: I am referring to ANY second-hand-smoke entering your home from someone who does not live in your home.

[READ CATEGORIES 1-4]

01 – Every day or almost every day
 02 – At least once a week
 03 – At least once a month
 04 – Never or almost never
 06 – DK
 09 – R

Coverage: All respondents

ES3

Which of the following best describe the behaviours of people smoking in the PRIVATE vehicle you travel in the most?

[READ CATEGORIES 1 – 5]

PROBE: “That is, for everyone that travels in the vehicle”

IF RESPONDENT DOES NOT HAVE A CAR, Probe2: “I am interested to know about the vehicle that you travel in the most”

01 – No one ever smokes

02 – People smoke except when children are present

03 – People smoke when they are the only person in the car *[revised response 03 at W3]
[response category revised at W3–July 2006; was “...smoke except when other adults present”]*

04 – People smoke whenever they want OR

05 – I do not travel in a private vehicle [USE PUBLIC TRANSIT]

06 – DK

09 – R

Coverage: All respondents

[added probes at W5 – July 2007]

ES4intro

Now I would like to ask about smoking in restaurants, bars and taverns in Ontario.

[Added “...in Ontario” in W4 – Jan 24, 2007]

ES4

How often during the past 6 months did you go to a restaurant? This includes any restaurant with seating, except food courts. Would you say...

[READ CATEGORIES 1 – 5]

Probe: In Ontario, how often did you go to a restaurant in the past 6 months?”

01 – More than once a week GOTO ES5

02 – About once a week GOTO ES5

03 – One to four times a month GOTO ES5

04 – Less than once a month OR GOTO ES6

[GOTO changed to response 04 to ES6 from ES5 at W2 – January 2006]

05 – Not at all GOTO ES6

06 – DK GOTO ES5

09 – R GOTO ES5

Coverage: All respondents

[Probe added in W4 - Jan 24, 2007]

ES5

In the past 30 days, have you been INSIDE a restaurant where other people were smoking around you?

Probe: There is a province-wide smoking ban [that came into force on May 31, 2006]; but we are looking to see if people are still being exposed to second-hand-smoke inside.

Probe2: In the past 30 days, have you been inside a restaurant in Ontario where other people were smoking around you?

01 – Y

02 – N

06 – DK

09 – R

Coverage: All respondents who have been to a restaurant in the past 30 days

[Probe added in W3 – July 14/06; stressed INSIDE in question wording at W3]

[Probe2 added in W4 - Jan 24, 2007]

ES14 [NEW at beginning of Wave 3 – July 2006]

In the past 30 days, when you have been to a restaurant, how often did you sit OUTSIDE on a PATIO? Would you say...

[READ CATEGORIES 1 – 3]

01 – Most of the time	GOTO ES15
02 – Some of the time	GOTO ES15
03 – Not at all	GOTO ES6
06 – DK	GOTO ES15
09 – R	GOTO ES15

Coverage: All respondents who have been to a restaurant in the past 30 days

[CATI coding error in W5 – July – Sept 30, 2007 those responding 03 were being skipped to DES21; corrected back to ES6 on Oct. 1, 2007]

ES15 [NEW at beginning of Wave 3 – July 2006]

In the past 30 days, have you been OUTSIDE on a PATIO of a restaurant where other people were smoking around you?

[DO NOT READ]

01 – Y
02 – N
06 – DK
09 – R

Coverage: All respondents who have been to a PATIO of a restaurant in the past 30 days

ES6

How often during the past 6 months did you go to a bar or tavern? Would you say...

[READ CATEGORIES 1 – 5]

Probe: In Ontario, how often did you go to a bar or tavern in the past 6 months?"

01 – More than once a week	GOTO ES7
02 – About once a week	GOTO ES7
03 – One to four times a month	GOTO ES7
04 – Less than once a month OR	GOTO DES21 [revised GOTO at W5]
05 – I never go to bars or taverns	GOTO DES21 [revised GOTO at W5]
06 – DK	GOTO ES7
09 – R	GOTO ES7

Coverage: All respondents

[Probe added in W4 - Jan 24, 2007]

[GOTO for response category 04,05 revised to DES21 (from ES8intro) at W5 – August 1, 2007]

ES7

In the past 30 days, have you been INSIDE a bar or tavern where other people were smoking around you?

Probe: There is a province-wide smoking ban [that came into force on May 31, 2006]; but we are looking to see if people are still being exposed to second-hand-smoke inside.

Probe2: In the past 30 days, have you been inside a bar or tavern in Ontario where other people were smoking around you?

01 – Y

02 – N
06 – DK
09 – R

Coverage: All respondents who have been to a bar or tavern in the past 30 days
[Probe added in W3 – July 14, 2006]
[Probe2 added in W4 – Jan 24, 2007]

ES16 [NEW at beginning of Wave 3– July 2006]

In the past 30 days, when you have been to the bar or tavern, how often did you sit OUTSIDE on a PATIO? Would you say...

[READ CATEGORIES 1 – 3]

01 – Most of the time GOTO ES17
02 – Some of the time GOTO ES17
03 – Not at all GOTO DES21 [revised GOTO at W5]
06 – DK GOTO ES17
09 – R GOTO ES17

Coverage: All respondents who have been to a bar or tavern in the past 30 days
[GOTO for response category 03 revised to DES21 (from ES8intro) at W5 – August 1, 2007]

ES17 [NEW at beginning of Wave 3– July 2006]

In the past 30 days, have you been OUTSIDE on a PATIO of a bar or tavern where other people were smoking around you?

[DO NOT READ]

01 – Y
02 – N
06 – DK
09 – R

Coverage: All respondents who have been to a PATIO of a bar or tavern in the past 30 days

DES21 [added to BL only; added at W5 – July 2007]

IF (SB1=1 OR SB1=2 OR SB1=3) [e.day, almost e.day, occasional smokers]

THEN GOTO ES8intro

IF ES4=05 AND ES6=05 [did not go to restaurant/bar in past 6 months]

THEN GOTO ES8intro

Else GOTO ES21 [non-smokers who frequent bars/restaurants]

ES21 [added to BL only; added at W5, July 2007]

In the past 6 months, did you decide NOT to sit on a restaurant or bar patio because people were smoking there?

[DO NOT READ]

01 – yes
02 – No
06 – DK
09 – R

Coverage – former smokers (1+ mon) and non-smokers and recent quitters who frequented bars/restaurants in the past 6 months

ES8intro

Now I am going to ask you some questions about smoking at your workplace or job.

First, do you work for pay outside your home? [CAMH]

[DO NOT READ]

01 – Y	GOTO ES9
02 – N	GOTO ES18 <i>[new GOTO at W4]</i>
03 – Do not work for pay	GOTO ES18 <i>[new GOTO at W4]</i>
06 – DK	GOTO ES18 <i>[new GOTO at W4]</i>
09 – R	GOTO ES18 <i>[new GOTO at W4]</i>

Coverage: All respondents

[changed skip logic for response categories 02-09 at W4 – Jan '07 - for new ES questions; previously skipped to TYintro now to ES18]

ES9

When you are at work, where do you spend most of your time? Are you ...

[READ CATEGORIES 1 – 3]

01 – Mainly indoors	GOTO ES10a_0
02 – Mainly in a vehicle OR	GOTO ES10c
03 – Mainly outdoors	GOTO ES10a_0
<i>[GOTO for response 03 changed to ES10a from ES10b at W3 (July06)–now ask indoor/outdoor]</i>	
04 – Equally indoors and outdoors [DO NOT READ]	GOTO ES10a_0
05 – equally indoors and in a vehicle [DO NOT READ]	GOTO ES10a_0 <i>[added at W5]</i>
06 – DK	GOTO ES11
09 – R	GOTO ES11

Coverage: All respondents who work outside the home

[response category 05 added at W5 – July 2007]

ES10a_0 (ES20a) (Revised wording for Wave 3 – July 2006)

[NOTE: variable renamed in TECHREPORT to ES20a as the revisions make this essentially a new question]

Which of the following describes the policy on smoking INDOORS where you work?

Probe: There is a province-wide smoking ban [that came into force on May 31, 2006]; but not all indoor workplaces are covered.

Probe2: For example, hotel rooms

[READ CATEGORIES 1-4]

01 - smoking is allowed anywhere indoors; <i>[at W3 revised to “..indoors” from “..inside or out”]</i>
02 - smoking is allowed only in certain areas indoors; <i>[at W3 revised to “indoors” from “inside”]</i>
03 - smoking is not allowed anywhere indoors OR <i>[at W3 revised from “smoking is only allowed outside”]</i>
04 - there are no specific rules or policies for smoking indoors <i>[revised in W3]</i>
05 – Do not work indoors [DO NOT READ] <i>[response 05 added in W4 – Jan 24/07]</i>
06 - DK
09 - R

Coverage: All respondents who spend the majority of their time at work indoors or outdoors (ES9=1,3,4)

[Probes added at W3 – July 14, 2006; also added “...INDOORS...” to question wording in W3]

[W3 – July 2006: Response categories modified from previous Waves to be specific to indoors; SEE PREVIOUS SURVEYS]

[Revised coverage at W3 – July 2006 – to include all indoor and outdoor workers; all respondents sent to ES10b at W3 (July 06) instead of ES11 as in previous surveys]

[W4 – Jan 24, 2007 – added response category 05]

IF ES9=05 GOTO ES10c *[added IF statement at W5 – July 2007]*

ELSE GOTO ES10b_0

ES10b_0 (ES20b) (Revised wording for Wave 3)

[NOTE: variable renamed in TECHREPORT to ES20b]

Which of the following describes the policy on smoking OUTDOORS where you work?

[READ CATEGORIES 1-4]

01 - smoking is allowed anywhere outdoors on the property

02 - smoking is allowed only in certain areas outdoors on the property; [W3–revised from “...areas outside”]

03 - smoking is not allowed anywhere on the property

04 - there are no specific rules or policies for smoking outdoors

06 - DK

09 - R

Coverage: All respondents who spend the majority of their time at work indoors or outdoors (excluding those who work “mainly indoors and in a vehicle) (ES9=1,3,4)

[W3 – July 2006: Response categories modified from previous Waves to be specific to outdoors (SEE PREVIOUS SURVEYS); underlined text was added to response categories]

[Revised coverage at W3 – July 2006 – to include all indoor and outdoor workers; W5 – July 2007 – added exclusion]

ES22 *[added at W5 – July 2007]*

Is smoking allowed around doorways to your workplace?

[DO NOT READ]

01 – Yes

02 – No

06 – DK

09 – R

GOTO ES11 [NOTE: deleted skip to ES11 to GOTO ES10b and placed here in new Q]

Coverage: respondents who work mainly indoors or outdoors (excluding those who work “mainly indoors and in a vehicle”)

ES10c

Which of the following describes the policy or rules on smoking inside the vehicle in which you work?

[READ CATEGORIES 1 – 3]

01 – Smoking is allowed inside the vehicle;

GOTO ES11

02 – Smoking is not allowed inside the vehicle OR

GOTO ES11

03 – There are no specific rules or policies

GOTO ES11

06 – DK

GOTO ES11

09 – R

GOTO ES11

Coverage: All respondents who work outside the home, mainly in a vehicle and those who work “mainly indoors and in a vehicle”

[W5 – July 2007 – added to coverage those who work “indoors and in a vehicle”]

ES11

In the past 30 days, have you been exposed to other people’s smoke at work?

Probe: There is a province-wide smoking ban [that came into force on May 31, 2006]; but not all workplaces are covered.

Probe2: For example, outdoor workplaces and some indoor workplaces like hotel rooms

[DO NOT READ]

01 – Y

02 – N

03 – *Do not work*

06 – DK

09 – R

Coverage: All respondents who work outside home

[Probes added at W3 – July 14, 2006]

ES18

[NEW AT W4 – Jan ‘07]

In the past 30 days, have you been exposed to other people’s smoke in ANY INDOOR public place, other than your workplace, or in bars or restaurants?

PROBE: For example, in a sport complex or concert hall

PROBE2: “By being exposed, I mean even just noticing someone else’s tobacco smoke”

NOTE: Outdoor enclosed spaces are outdoors unless there is a door that physically separates the two environments

IF NEED TO DEFINE INDOOR/OUTDOOR: “Does the [bus shelter/building/etc] have a door that closes completely?: If yes, then “indoor”, if no, then “outdoor”

01 – Y

02 – N

06 – DK

09 – R

Coverage: All respondents

[added probe2 and definition at W5 – July 2007]

ES19

[NEW AT W4 – Jan ‘07]

In the past 30 days, have you been exposed to other people’s smoke in ANY OUTDOOR public place, other than your workplace, or on patios of bars or restaurants?

PROBE: For example, in a park, or on the sidewalk

PROBE2: “By being exposed, I mean even just noticing someone else’s tobacco smoke”

NOTE: Outdoor enclosed spaces are outdoors unless there is a door that physically separates the two environments

IF NEED TO DEFINE INDOOR/OUTDOOR: “Does the [bus shelter/building/etc] have a door that closes completely?: If yes, then “indoor”, if no, then “outdoor”

01 – Y

02 – N

06 – DK

09 – R

Coverage: All respondents

[added probe2 and definition at W5 – July 11,2007]

TYintro

Now I would like to ask you about your general opinions on smoking

TPOLOGY

~~TY2 (enough controls on smoking)~~ DELETED AT W5 – JULY 2007

TY3

Restrictions should be increased to help smokers quit. Do you... [Poland et al]

[READ CATEGORIES 1 – 4]

01 – Strongly agree

02 – Somewhat agree

03 – Somewhat disagree OR

04 – Strongly disagree

06 – DK

09 – R

Coverage: All respondents

~~TY4 (restrictions have gone too far)~~ DELETED AT W5 – JULY 2007

DTY5

IF (SB1=1 OR SB1=2 OR SB1=3) AND SB2=1 [*e.day, almost e.day, occasional smokers, 100+ cig*]

THEN GOTO TY6 [*revised GOTO at W5 – July 2007 – from TY5*]

IF (SB1=4 AND (SB3a=1 OR SB3a=2)) AND SB2=1

THEN GOTO TY6 [*presently “not at all” smoker who smoked in the last month and 100+ cig*] [*revised GOTO at W5 – July 2007 – from TY5*]

IF (SB1=4 AND (SB3a=3 OR SB3b<4)) OR SB2=2

THEN GOTO TY8 [*presently “not at all” smoker who smoked >1mon ago OR not 100+ cig in lifetime*]

IF (SB1=05) [*never smoker*]

THEN GOTO TY8

~~TY5 (smoking around non-smokers)~~ DELETED AT W5 – JULY 2007

TY6

Do you care if most people know you smoke? [Poland et al]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current Smokers (100+ cig in lifetime)

~~TY7 (you enjoy smoking)~~ DELETED AT W5 – JULY 2007

TY8

Everything possible should be done to reduce smoking. Do you...

[Poland et al]

[READ CATEGORIES 1 – 4]

01 – Strongly agree

02 – Somewhat agree

03 – Somewhat disagree OR

04 – Strongly disagree

06 – DK

09 – R

Coverage: All respondents

DTY9

IF (SB1=1 OR SB1=2 OR SB1=3) AND SB2=1 *[e.day, almost e.day, occasional smk, 100+ cig]*

THEN GOTO TIintro

IF (SB1=4 AND (SB3a=1 OR SB3a=2)) AND SB2=1 *[presently “not at all” smk who smoked <1 month ago and has smoked 100+ cig in lifetime]*

THEN GOTO TIintro

~~TY9 (ask someone not to smoke in your home)~~

DELETED AT W5 – JULY 2007

TY10

How easy or difficult would it be for you to ask someone not to smoke in a non-smoking area?

[READ CATEGORIES 1 – 5]

01 – Very easy

02 – Somewhat easy

03 – Somewhat difficult

04 – Very difficult OR

05 – You wouldn't ask

06 – DK

09 – R

Coverage: Former smokers and ALL non-smokers, including all those who have not smoked 100+ cigarettes in lifetime

~~TY11 (make a face, coughing sound, etc.)~~

DELETED AT W5 – JULY 2007

~~TY12 (approach person smoking where not allowed)~~

DELETED AT W5 – JULY 2007

~~TY13~~ [deleted at W4 – Jan 2007]

~~TY14_REVISIED (sit in smoking area of restaurant)~~

DELETED AT W5 – JULY 2007

TOBACCO INDUSTRY

TIintro

Now I would like to ask you about advertising of tobacco products.

[W4 (Jan 24/07) deleted “...a few questions...” from the intro above as some respondents only get one question]

[W5 – July 2007 – revised “events sponsored by tobacco companies” to “advertising of tobacco products”]

TI4 [added at W5 – July 2007]

Have you seen any advertising of tobacco products in the last 30 days: in Canadian newspapers or magazines? Canadian magazines are those that focus on Canadian people or stories such as MacLeans, Chatelaine, Flare and Readers' Digest. [modified Q on July 17/07 with specific examples of CDN magazines]

NOTE: See help for sample list of Canadian magazines [Help screen added July 17/07]

[DO NOT READ]

01 – Yes

02 – No

06 – DK

09 – R

Coverage: All respondents

TI5 [added at W5 – July 2007]

Have you seen any advertising of tobacco products in the last 30 days: in Canadian buses or subway stations or on outdoor billboards?

[DO NOT READ]

01 – Yes

02 – No

06 – DK

09 – R

Coverage: All respondents

~~TI1, TI2, TI3~~ [DELETED AT W5 – July 2007]

HELP:

Canadian Magazines (NOT a complete list)

7 Jours/TV 7 Jours

Canadian Living

Coup de Pouce

Financial Post Magazine

Harrowsmith

Homemaker's/Madame au Foyer

Le Lundi

Reader's Digest

Saturday Night

The Medical Post

TV Guide

Western Living

Canadian Business

Chatelaine

Elle Québec

Frank Magazine

Hockey News

L'Actualite

Maclean's

Report on Business Magazine

Selection du Reader's Digest

Toronto Life

TV Hebdo

MASS MEDIA

MM1Intro

Now I want to ask you about the media more generally.

MM1

First, thinking about news stories related to smoking or tobacco companies that might have been on TV, radio, or in the newspapers. In the past 30 days, that is since [ANCHOR] how often have you seen or heard a news story about smoking?

[READ CATEGORIES 1 – 4]

01 – Never

02 – Sometimes

03 – Often OR

04 – Very often

05 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]

06 – DK

09 – R

Coverage: All respondents

[THE FOLLOWING MASS MEDIA QUESTIONS WILL CHANGE IN FUTURE SURVEYS AS THE CURRENT CAMPAIGNS AND SLOGANS CHANGE. THE MINISTRY OF HEALTH IS CURRENTLY IN THE PROCESS OF GENERATING NEW SLOGANS FOR CAMPAIGNS BEING RELEASED IN THE NEW YEAR]

MM2INTRO

The next several questions are about anti-smoking advertisements. In the past 30 days, have you seen any anti-smoking advertisement or campaign taking place in Ontario with the following themes or slogans:

MM2

An ad about stop smoking medications like the patch or gum?

DO NOT READ CATEGORIES

01 – Y

02 – N

03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]

06 – DK

09 – R

Coverage: All respondents

MM3

An ad showing kids putting up a banner with facts about smoking and the slogan “stupid.ca”?

INTERVIEWER NOTE: if necessary, remind respondent “IN THE PAST 30 DAYS...”

DO NOT READ CATEGORIES

01 – Y

02 – N

03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]

06 – DK

09 – R

Coverage: All respondents

*[Revised June 2, 2006 to capture new creative for this MM campaign. Deleted "An ad about kids doing risky things with the message: "What's more stupid"?"]
[Interviewer note added in W4 – Jan 24/07]*

MM4 *[MM4 Deleted February 1, 2006: Ad about a former waitress...support SFO]*

MM5 *[MM5 deleted May 1, 2006: Ad about Bob...]*

MM6 *[MM6 Deleted February 1, 2006: smoke-rings]*

MM7 *[Added February 1, 2006]*
An ad showing people overcoming life challenges, including throwing away a pack of cigarettes with the message: "you have it in you".
INTERVIEWER NOTE: if necessary, remind respondent "IN THE PAST 30 DAYS..."
DO NOT READ CATEGORIES
01 – Y
02 – N
03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]
06 – DK
09 – R
Coverage: All respondents
[Interviewer note added in W4 – Jan 24/07]

MM8 *[Added February 1, 2006]*
An ad showing different people seeing messages about appointments connected to quitting smoking with the message: "what's your quit date?"
INTERVIEWER NOTE: if necessary, remind respondent "IN THE PAST 30 DAYS..."
DO NOT READ CATEGORIES
01 – Y
02 – N
03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]
06 – DK
09 – R
Coverage: All respondents
[Interviewer note added in W4 – Jan 24/07]

~~MM9~~ *[Heather Crowe ad – added May 1/06; deleted January 24, 2007]*

MM10_0 *[false MM question added at W3 July 2006]*
An ad showing a young child using alphabet blocks to spell out the names of health problems associated with smoking?
INTERVIEWER NOTE: if necessary, remind respondent "IN THE PAST 30 DAYS..."
[note added in W4 – Jan 24/07]
DO NOT READ CATEGORIES
01 – Y
02 – N
03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]
06 – DK

09 – R

Coverage: All respondents

[Interviewer note added in W4 – Jan 24/07]

~~MM11~~ *[ad to increase support for Ontario smoking ban – added June 2/06; deleted January 24/07]*

MM13_0

[Added January 5, 2007]

An ad showing a woman smoking near a window. Her smoke travels through the house and clings to a teddy bear that is picked up by a little girl with the message “Make your home smoke-free”?

INTERVIEWER NOTE: if necessary, remind respondent “IN THE PAST 30 DAYS...”

[note added in W4 – Jan 24/07]

DO NOT READ CATEGORIES

01 – Y

02 – N

03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]

06 – DK

09 – R

Coverage: All respondents

[Interviewer note added in W4 – Jan 24/07]

MM15_0

[Added April 27, 2007]

An ad where a boy passes his dad a CD with a recorded message encouraging his dad to quit smoking?

INTERVIEWER NOTE: if necessary, remind respondent “IN THE PAST 30 DAYS...”

DO NOT READ CATEGORIES

01 – Y

02 – N

03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]

06 – DK

09 – R

Coverage: All respondents

MM12_0

[Added June 2, 2006]

Have you seen or heard of radio or newspaper ads providing tips and support for quitting? For example, “Quit Tip #6: Change your routine?”

INTERVIEWER NOTE: if necessary, remind respondent “IN THE PAST 30 DAYS...”

[note added in W4 – Jan 24/07]

DO NOT READ CATEGORIES

01 – Y

02 – N

03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]

06 – DK

09 – R

Coverage: All respondents

[Interviewer note added in W4 – Jan 24/07]

~~MM14_0 – driven to quit~~

[Deleted W5 – July 2007; added Jan 23, 2007]

DEMOGRAPHICS

DEintro:

Finally, these last questions are for classification purposes only.

DE1

First, in what year were you born?

01 - _____ ENTER YEAR [DE1yr range: 1900-1990]

02 – DK

03 – R

GOTO DE2

GOTO DE1a

GOTO DE1a

Coverage: All respondents

DE1a

Ok, can you tell me to which age group you belong? Are you...

[READ CATEGORIES 1-6]

01 – 18 – 24

02 – 25 – 34

03 – 35 – 44

04 – 45 – 54

05 – 55 – 64 OR

06 – 65 years of age and over

07 – DK

09 – R

Coverage: Respondents who refuse to give year of birth

DE2

What is the highest level of education you have completed?

[DO NOT READ CATEGORIES]

01 – No schooling

02 – Some elementary

03 – Completed elementary

04 – Some secondary

05 – Completed secondary

06 – Some community college, CEGEP or nurse's training

07 – Completed community college, CEGEP or nurse's training

08 – Some university or teacher's college

09 – Completed university or teacher's college

10 – Other education or training

66 – DK

99 – R

Coverage: All respondents

DE9

[added at W5 – July 2007]

How would you describe your sense of belonging to your local community? Would you say:

PROBE: How strongly do you feel that you are part of your local community?

[READ CATEGORIES 01 – 04]

01 – Very strong,

02 – Somewhat strong,
03 – Somewhat weak, OR
04 – Very weak
06 – DK
09 – R
Coverage: All respondents

DDE3

[W3 – Oct 20/06 – revised decision from: IF Q8 = 1 AND (SB1=1 OR SB1=2 OR SB3a =1 OR SB3a = 2) to new code to ensure we do not miss respondents]

IF !QB5=0 *[response to “health” question asked earlier]*
THEN GOTO DE4

ELSE GOTO DE3

DE3

In general, would you say your health is:

[READ CATEGORIES 1 – 5]

01 – Excellent
02 – Very good
03 – Good
04 – Fair OR
05 – Poor
06 – DK
09 – R

Coverage: Former (30days +) and non-smokers
SAME AS QB5, FOR CURRENT SMOKERS

DE4

At present are you married, living with a partner, widowed, divorced, separated, or have you never been married?

[READ CATEGORIES IF NECESSARY]

01 – Married or living with a partner
02 – Widowed
03 – Divorced
04 – Separated
05 – Never been married
06 – DK
09 – R

Coverage: All respondents

DE10

[added to BL only; added at W5 – July 2007]

Which of the following best describes your main residence?

[READ CATEGORIES 1-4]

01 – A detached, single family home
02 – An attached house such as a townhouse, or a semi-detached house.
03 – A multiple unit dwelling, such as an apartment building, a condominium apartment, or a duplex
04 – Shared accommodation, such as a rooming house, dorm, or retirement home
05 – Other specify

06 – DK
09 – R
Coverage: All respondents

DE11 *[added to BL only; added at W5 – July 2007]*

Is this residence owned by yourself or a member of your household?

[DO NOT READ]

01 – Y
02 – N
06 – DK
09 – R

Coverage: All respondents

DDE5

IF (Consents = 01 | (Consents = 02 & (Q12 = 03 | Q12a = 02))) *[consented at recruitment where asked address at end of survey or at recruitment did not provide address]*

THEN GOTO DE5b

IF (Consents = 02) *[scheduled callback – address provided at recruitment]*

THEN GOTO DE5a

IF (Consents=09 & Q11a=3) *[initial refusal but converted by scheduling callback (and address on file)]* GOTO DE5a

IF (Consents=09 & Q11a=1) *[initial refusal but converted and completed interview at time of conversion (no address on file)]* GOTO DE5b

DE5a *[previously provided address]*

Finally, how many children under 18 years of age live in your household?

01 - _____ Enter number *[DE5bnum range: 0-15]* GOTO COMMENTS

02 – DK GOTO COMMENTS

03 – R GOTO COMMENTS

Coverage: All respondents completing the survey at a scheduled call-back time

DE5b *[was not asked or did not provide address]*

How many children under 18 years of age live in your household?

01 - _____ Enter number *[DE5bnum range: 0-15]*

02 – DK

03 – R

Coverage: All respondents completing the survey at the time of recruitment

DE6

Finally, in order for us to send you payment for this survey, can you tell me your name, address and postal code where you receive your mail?

PROBE: This is a UNIVERSITY based research study. Your answers to this survey will be kept absolutely confidential. All personal information, including your name and address, will be kept strictly confidential and will not be shared with any person or group that is not associated with this survey.

[MAKE SURE THAT SPELLING IS CORRECT—REPEAT BACK TO RESPONDENT TO CHECK]

01 – SPECIFY ADDRESS: _____ GOTO DEFNAME
02 – NO GOTO DE7INTRO
Coverage: All respondents

DE7INTRO

Without this information, we are unable to send you the \$15 honourarium for participation in this survey.

01 – Respondent offers FULL address, Enter address GOTO DEFNAME
02 – Respondent does NOT offer FULL address GOTO DE7

DE7

Can you just tell me your postal code?

[PROBE: This information will be used for regional classification purposes only]

01 - _____ ENTER 6-DIGIT POSTAL CODE GOTO DEPCconf
06 – DK GOTO DE8
09 – No/R GOTO DE8

Coverage: Respondents who do not want to provide full address

DE8

Would you be willing to provide me with the first 3 digits of your postal code?

PROBE: As a reminder, this information will be kept completely confidential and will not be shared with any person or group that is not associated with this survey. This information will be used to help us understand regional differences in behaviours and beliefs related to tobacco.

01 - _____ ENTER 3-DIGIT POSTAL CODE GOTO DEPCconf
06 – DK GOTO DDEID1
09 – No/R GOTO DDEID1

Coverage: Respondents who do not want to provide full postal code

DEFNAME – DEPCconf

DDEID1

[Added W2 – Jan 2006]

IF ERROR=1 THEN GOTO COMMENTS
IF STAT1 = RECENT SMOKER & DE7INTRO = 02
THEN GOTO DEID1
ELSE GOTO DCONFIRM (ID1=01)

DEID1

[Added W2 – Jan 2006]

Can you please provide us with something that uniquely identifies you so that when we call back we will be able to reach you? For example, just your first name, a nickname or your initials? .

01 – enter name/initials [DEID1txt] GOTO DCONFIRM
02 – R GOTO DCONFIRM

DCONFIRM

IF (ERROR=1)

THEN GOTO COMMENTS
IF STAT1 = RECENT SMOKER
THEN GOTO DEACONT
IF STAT1 = NON-SMOKER
THEN GOTO COMMENTS

Q.DEAcont

Is there an alternate number that you can also be reached at?

01 - Yes [Enter: DEAltnum (###) ### - #####]

02 – No

GOTO COMMENTS

EDAlt_ex *[added at beginning of W2 – Jan '06]*

“Extension” – enter [altnum_ext]: ____

COMMENTS

If respondent would like to provide comments, enter them here. Interviewer - Do not ask respondent if they have any comments.

DEND

IF (error = 1)

THEN GOTO Q.END_ERR

ELSE

THEN GOTO Q.DEND

Q.END_ERR

Thank you very much for participating in this survey.

You should receive your cheque within a few days.

If you would like any more information about this project,
you can phone us at our toll free number 1-866-303-2822.

Goodbye.

Q.DEND

IF STAT1 = RECENT SMOKER

THEN GOTO Q_Close2

IF STAT1 = NON-SMOKER

THEN GOTO Q_Close1

Q_Close1 (cross-sectional participants)

Thank you very much for participating in this survey. You should receive your cheque within a few days. If you would like any more information about this project, you can phone us at our toll free number 1-866-303-2822. Goodbye.

THANK AND TERMINATE

Q_Close2 (longitudinal participants)

Thank you very much for participating in this survey. You should receive your cheque within a few days. We will contact you again in approximately 6 months time. If you would like any more information about this project, you can phone us at our toll free number 1-866-303-2822. Goodbye.

THANK AND TERMINATE

A7. [POSTAL CODE]

A8. [INTERVIEW COMPLETION TIME: HH:MM]

A9. [SURVEY LENGTH]

Appendix B
Ontario Tobacco Survey Follow-up 1 Survey

Wave 5:
July – December 2007

ADMINISTRATIVE

A1_1. [ID NUMBER]
A2_1 [INTERVIEW DATE: MMM/DD/YYYY]
A3_1 [INTERVIEW START TIME: HH:MM]
A4_1. [CALL NUMBER] (documenting A1 – A4 for each attempted call)
A5_1. [DISPOSITION CODE]
A6_1. [WAVE NUMBER]
A10_1 [FOLLOW-UP NUMBER]

RECRUITMENT

["Alt" code is being added to provide appropriate scripting for interviewers when we have had to look up alternate numbers for a participant who is not reachable by the number used 6 months ago. "Alt" is repeated for each alternate number we try for a given longitudinal participant. Added December 2005]

Q:Alt1

Alternate Number:

Last Call Outcome:

Message:

Hello, may I please speak with [RESPONDENT'S NAME]?

[W5 – July 2007 – changed "our" to "an" academic survey...]

If respondent reached, follow with:

Hello, my name is _____ and I am calling from the University of Waterloo. We are looking for the [RESPONDENT'S NAME], who took part in an academic survey approximately six months ago. Would that be you?

If respondent is not the correct person, code as 03 Wrong Number

Enter call outcome:

01 Respondent reached - proceed with interview	GOTO Q4ea_1
02 No answer/Answering Machine	Callback
03 Busy	Callback
04 Not available	Callback
05 Wrong Number	try next alternate ph#
06 Not in service	try next alternate ph#
07 Other	

Q.Alt2 – Q.Alt5 (repeat of Q.Alt1 for each alternate number we have for the respondent)

Coverage: Respondents who we are no longer able to contact via their recorded phone number and alternate numbers are checked (i.e. 411).

Q:Alt_d [Assign disposition for unreached respondent with alternate numbers]

Respondent Name:

Message:

01 - NIS: Alternate numbers - no response

02 - Moved: Alternate numbers - no response

03 - Wrong Number: Alternate numbers - no response

Q1f_1

Hello, my name is _____ and I am calling from the University of Waterloo. Approximately six months ago an adult in your household took part in our ongoing academic survey. Would that be you?

01 – Yes GOTO Q4ea_1

02 – No GOTO Q1g_1

06 – DK GOTO Q1g_1

09 – R [Thank and terminate (CALL BACK)]

[December 2005: added code for longitudinal respondents who did not provide a name at baseline]

Coverage: Respondents/households who did not provide their name at baseline

Q1g_1

I would like to speak with the adult in your household who participated in our survey. We would have spoken to the person whose birthday is closest to [BASELINE SURVEY DATE]. Would it be possible to speak with them now?

PROBE IF RESPONDENT IS NOT SURE: “Can I speak with another adult in the household to see if they participated in our study?”

01 – Yes, Respondent is available GOTO Q1f_1

02 – Respondent is NOT available GOTO Q4d_1

03 – Unknown respondent (the person on the phone does not know who the participant could be)

Thank and terminate (Call Back)

“Thank-you, we will try back another time”

04 – No (proxy refusal) GOTO Q4c_1

[December 2005: added code for longitudinal respondents who did not provide a name at baseline]

Coverage: Respondents/households who did not provide their name at baseline

Q4c_1

[W5 – July 2007 – removed “This is an important research survey and ...” as per ethics request]

Their responses are important as we are speaking to the same people a number of times to better understand changes over time in attitudes, behaviours and beliefs. We will be reimbursing them for their time. Could we call back to ask them if they participated in our study?

[DO NOT READ]

01 – Yes GOTO Q4d_1

02 – No Thank and Terminate (Call back)

[December 2005: added code for longitudinal respondents who did not provide a name at baseline]

Coverage: Refusal by proxy to speak to adult who may have participated in the baseline survey 6 months ago; for respondents/households who did not provide their name at baseline

Q4d_1

When can I call back to speak to that person?

[DO NOT READ]

01 – Make callback. “Could you please tell me their name so that I know who to ask for?”

[enter Contact Name] RECORD CALLBACK INFO AND TERMINATE

02 – Refuse Thank and Terminate (Call back at a later date)

IF (Q.4d=02 & (Q4c=01 | Q4c = 02)) Thank and Terminate

ELSE IF Q.4d=02 GOTO Q4c_1

[December 2005: added code for longitudinal respondents who did not provide a name at baseline]

Coverage: Respondents/households who did not provide a name at baseline

Q1_1

Hello, may I please speak with [RESPONDENT FIRSTNAME LASTNAME]?

IF NON-COMPREHENDING ADULT/LANGUAGE PROBLEM, REPEAT

01 – Yes GOTO Q2_1

02 – No, he/she is not available GOTO Q1d_1

03 – Respondent answers phone GOTO Q4ea_1

04 – Child GOTO Q1b_1

05 – Language barrier/misunderstanding TERMINATE CALL, RETURN

NUMBER TO QUEUE

06 – No/Respondent refuses OR asks who is calling GOTO Q1e_1

07 – Wrong number Thank and Terminate

08 – Respondent has moved Thank and Terminate

09 – Other GOTO other_1

Coverage: All Respondents (for recorded phone number and recorded name of participant)

Q1b_1

Can I please speak with an adult?

01 – Y GOTO Q1c_1

02 – No / Non-responsive [THANK AND TERMINATE (CALL BACK)]

09 – Refuse [THANK AND TERMINATE (CALL BACK)]

Coverage: Child answers phone

Q1c_1

Hello, may I please speak with [RESPONDENT FIRSTNAME LASTNAME]?

01 – Yes GOTO Q2_1

02 – No, he/she is not available GOTO Q1d_1

03 – Respondent answers phone GOTO Q4ea_1

04– No/Respondent refuses GOTO Q1e_1

05 – Wrong number Thank and Terminate

06 – Respondent has moved Thank and Terminate

07 – Other GOTO other_1

Coverage: Adult comes to phone

Q1d_1

Thank you, when would be a better time to call back to reach them?

01 – Y GOTO CBACKc_1

02 – N [Thank and terminate (CALL BACK)]

Coverage: Participant not available

Q1e_1

[W5 – July 2007 –added ...an “ongoing” academic survey; removed “This is an important research survey and ...” as per ethics request]

My name is _____ and I am calling from the University of Waterloo. Approximately six months ago, [RESPONDENT FIRSTNAME] agreed to take part in an ongoing academic survey. We need to speak directly with [RESPONDENT FIRSTNAME]. When would be a better time to call back to reach them?

[DO NOT READ]

01 – Yes, call back

GO TO CBACKc_1

02 – Respondent is available

GOTO Q2_1

03 – No/Refusal

[Thank and terminate (CALL BACK)]

04 – Other

GOTO other_1

Coverage: PKU refuses for participant or asks who is calling

If Necessary, See Q.HELP for additional background information.

other_1

"OtherDisposition"

Thank and terminate

Q2_1

Thank you. [WAIT FOR RESPONDENT. GOTO Q4ea_1]

Q4ea_1

[bold words added at W3 – July 2006]

[underlined text revised from “three” to several at W5 – July 2007 for additional F.UP surveys]

Hello [RESPONDENT FIRSTNAME]. My name is _____ and I am calling from the University of Waterloo on behalf of the Ontario Tobacco Research Unit, an ACADEMIC research network at the University of Waterloo and University of Toronto. About six months ago, you completed a survey of recent smokers in Ontario, and you agreed to take part in several follow-up surveys. This is the first follow-up survey should take approximately 25 minutes.

Coverage: Participant comes to phone

IF (ADDRESS = “ ”) GOTO Q4i_1

ELSE SHOW

Q4eb_1

Recently, you should have received a letter saying that I would be calling along with a \$15 cheque to thank you for your continued participation.

Did you receive the letter and the cheque?

01 – YES

GOTO Q4g_1

02 – NO [ADDRESS ON FILE]

GOTO Q4h_1

Coverage: Respondents with address provided at baseline

Q4g_1

As with the last survey, your answers to this survey will be kept absolutely confidential. All personal information, including your name and address, will be kept strictly confidential and will not be shared with any person or group that is not associated with this survey.

Participation is voluntary and you may stop at any time.

Is now a good time to start the survey?

[DO NOT READ]

01 – YES

GOTO SBaInt_1

02 – NO

GOTO CBACKa_1

09 – REFUSAL

GOTO Q4f_1

Coverage: Respondents who received their cash incentive

CBACKa_1

OK, when would be a good time to call you back?

01 – Respondent provides call back time

[GOTO CBACKc_1]

09 – Respondent refuses

GOTO Q4f_1

Coverage: Participants who cannot complete the survey at the time of the call

Q4h_1

I'm very sorry. Our mailing service sent the reminder letter with the cheque on [DATE LETTER SENT]. We fully intended for the letter and cheque to get to you by today. We would like you to answer the survey today, but if you feel more comfortable waiting until you receive the cheque, we could schedule the survey in a few days time. As with the last survey, your answers to this survey will be kept absolutely confidential. All personal information, including your name and address, will be kept strictly confidential and will not be shared with any person or group that is not associated with this survey.

Participation is voluntary and you may stop at any time.

Is now a good time to start the survey?

[DO NOT READ CATEGORIES}

01 – ANSWER SURVEY NOW

GOTO SBbInt_1

02 – WAIT

CONFIRM ADDRESS RESCHEDULE FOR 1 WEEK,

THANK AND TERMINATE [see CLOSING]

09 – REFUSAL

GOTO Q4f_1

Coverage: Participants who did not receive their cash incentive [address on file]

Q4i_1

It appears that we did not have your address on file from the last time we spoke. I will ensure that we send you your \$15 honorarium for the survey you completed 6 months ago and for today's survey. We would like you to answer this survey today, but if you feel more comfortable waiting until you receive the cheque, we could schedule the survey in a few days time. As with the last survey, your answers to this survey will be kept absolutely confidential. All personal information, including your name and address, will be kept strictly confidential and will not be shared with any person or group that is not associated with this survey.

Participation is voluntary and you may stop at any time.

Is now a good time to start the survey?

[DO NOT READ CATEGORIES]

01 – ANSWER SURVEY NOW GOTO SBbInt_1

02 – WAIT ENTER ADDRESS AND CONFIRM, RESCHEDULE APPOINTMENT, THANK AND TERMINATE [see CLOSING]

INFORM SUPERVISOR, NEED TO SEND \$30.00

03 – RESPONDENT DOES NOT WANT TO PROVIDE ADDRESS/RECEIVE CHEQUE, but willing to answer survey now GOTO SBaInt_1

04 – Callback – respondent does not want cheque but requests to answer survey at another time GOTO Q4j_1

05 – REFUSAL GOTO Q4f_1

Coverage: Participants who did not provide address at baseline

Q4f_1

We understand how you feel. We really appreciate your participation in the first survey. The difference between this and most other surveys is that we are speaking to the same people a number of times to better understand changes over time in attitudes, behaviours and beliefs related to smoking. This is why your participation is so important to us, would you like to complete the survey now, or can we arrange a better time?

[DO NOT READ]

01 – YES Complete now GOTO SBaInt_1

02 – NO, reschedule GOTO Q4j_1

09 – NO, Refusal Thank and terminate

Coverage: Participants who refuse participation in the follow-up survey

Q4j_1

[Added December 2005]

If name/initials on file GOTO CBACKb_2

Else show:

Can you please provide us with something that uniquely identifies you so that when we call back we will be able to reach you? For example, just your first name, a nickname or your initials?

01 - Enter name/initials (Q4jtxt_1)

02 - Refused

GOTO CBACKb_1

Coverage: Participants who do not want to provide name/address

CBACKb_1

OK, when would be a good time to call you back?

01 – Respondent provides call back time [GOTO FN_1]

09 – Respondent refuses [Thank and terminate]

Coverage: Participants who cannot complete survey at time of call

FN_1 – PC_1

DAc_1

If (Acont=02) GOTO Acon_1 (no alternate number provided at baseline)

Else if (Acont=01) GOTO Ac2_1 (provided alternate number at baseline)

Acon_1

Is there an alternate number that you can be reached at?

01 – Yes GOTO Altn_1

02 – No GOTO Closing

Coverage: Participants who did not provide an alternate number at baseline

Ac2_1

Last time we spoke, you told us that an alternate phone number that you can be reached at was [read number provided at baseline]. Is this still your alternate phone number?

01 – Yes GOTO Closing

02 – No, record new # GOTO Altn_1

03 – No longer has alternate # GOTO Closing

Coverage: Participants who provided an alternate number at baseline

Altn_1

Enter phone number (Altnum) XXX-XXX-XXXX

Altx_1

Extension (Altnum_ext) XXXX

GOTO Closing

Q4k_1

[added at W3(July '06) to minimise burden on callbacks]

[WAITING FOR CHEQUE – requested callback at recent contact]

If respondent has requested callback and received their cheque or respondent does not want their cheque GOTO SbaInt_1

Else show:

Hello, my name is _____ and I am calling from the University of Waterloo. We recently spoke with you regarding this phase of our study. Did you receive your letter and \$15 cheque to thank you for your continued participation?

01 – Yes GOTO Q4l_1

02 – No GOTO Q4h_1

Coverage: Participants who are waiting for their cheque before completing the survey (recently spoke with them for participation in this wave of the survey)

Q4l_1

[added at W3 (July '06) to minimise burden on callbacks]

Great. Just a reminder that your answers to this survey will be kept strictly confidential. Participation is voluntary and you may stop at any time. Is now a good time to start the survey?

01 – Yes GOTO SBAInt_1

02 – No (schedule callback) GOTO CBACKb_1

03 – Refusal GOTO Q4f_1

Coverage: Participants who were waiting for their cheque before completing the survey and have now received their cheque

[Closing]

“Thank you very much for your help. If you would like any more information about this project, you can phone us at 1-866-303-2822. Good-bye.”

Coverage: Participants scheduling callback for interview

NOTE: Participants must schedule an interview within the next 14 days. If they attempt to schedule beyond this time, say: "I'm sorry, but we would like to complete the survey within TWO WEEKS of today's date. Could we schedule the survey for any time after tomorrow, before [today's date + 14 days]."

[In the few cases where respondent will be away for the coming weeks, allow for scheduling outside of the 2 week period.]

Q.HELP

[grey highlighted words added at W3 – July 2006]

R: "What is this survey about?"

I: "This is an ongoing study that will survey both recent smokers and non-smokers across Ontario. We will ask you questions about what you think, what you feel and your experiences related to tobacco use and second-hand smoke."

IF RESPONDENT CONTINUES TO INQUIRE, INTERVIEWER TO RESPOND:

"I HAVE BEEN GIVEN SOME EXAMPLE QUESTIONS TO PROVIDE YOU, THESE ARE:"

"In the past 30 days, have you been inside a restaurant where other people were smoking around you?" AND for smokers "Are you thinking about quitting in the next 6 months?"

R: "How much" (for reimbursement)

I: "There will be an honorarium of \$15 for an interview of up to 25 minutes"

R: "Is that a tobacco company?" [referring to OTRU]

I: "No, the Ontario Tobacco Research Unit is not a tobacco company." And continue with response below for "WHAT IS OTRU?"

R: "What is OTRU?"

I: "The Ontario Tobacco Research Unit is an academic research network at the University of Toronto and University of Waterloo. The Unit conducts tobacco research on smoking behaviours and second-hand smoke in order to identify factors that might help reduce tobacco-related illness and death in Ontario."

[deleted "I am not a smoker/recent smoker" from F.UP HELP screen at W5 to provide sufficient room for more important info – this info provided at interviewer stations]

[New at W5, July 2007]

R: How many follow-up interviews?

I: There will be at least 3 follow-up interviews – this is the 1st detailed follow-up interview. We will be extending the number of follow-up interviews in order to better understand changes over time in attitudes, behaviours and beliefs related to smoking. At the end of your 3rd follow-up interview, we will ask if we can contact you again for up to 3 additional follow-up interviews that will only take 10-15 minutes and you will continue to receive a \$15 cheque for each survey in which you participate."

SMOKING BEHAVIOUR

SBaInt_1

Thank you very much for agreeing to continue your participation. This call may be monitored by my supervisor to assess my performance. You may recognise some of the questions from the last survey. For these questions, we are interested in what may or may not have changed since the last time we spoke. First, I would like to ask you some specific questions about your smoking behaviour.

Coverage: Participants who agree to participate in the follow-up survey and received their cash incentive

SBbInt_1

We will confirm your address at the end of the survey to ensure that the letter was sent to the correct location. Once again, thank you very much for agreeing to continue your participation. This call may be monitored by my supervisor to assess my performance. You may recognise some of the questions from the last survey. For these questions, we are interested in what may or may not have changed since the last time we spoke. First, I would like to ask you some specific questions about your smoking behaviour

Coverage: Participants who agree to participate in the follow-up survey and have NOT received their cash incentive

SB1_1

[CTUMS]

At the present time, do you smoke cigarettes every day, almost every day, occasionally, or not at all?

PROBE: [If respondent does not know or refuses: "In order to complete this survey, it is really important that we know if you smoke cigarettes every day, almost every day, occasionally, or not at all?."]

[DO NOT READ CATEGORIES]

- 01 – Every day
- 02 – Almost every day
- 03 – Occasionally
- 04 – Not at all
- 06 – DK
- 09 – R

Coverage: All respondents

DSB2_1

IF SB2 = 1 THEN GOTO DSB3_1 (*smoked 100+ cig at baseline*)

IF SB2 = 2 | SB2=6 | SB2=9 THEN GOTO SB2_1

SB2_1

Have you smoked at least 100 cigarettes in your life?

[CTUMS]

[PROBE: That is approximately 4-5 packs of cigarettes]

[DO NOT READ CATEGORIES]

- 01 – Y
- 02 – N
- 06 – DK
- 09 – R

Coverage: Respondents who had not smoked 100+ cigarettes at baseline (including DK,R)

DSB3_1

IF (SB1_1=1 OR SB1_1=2) THEN GOTO SB4int_1

[currently smoke every day or almost every day]

IF (SB1_1=3 OR SB1_1=4 OR SB1_1=06 OR SB1_1=09) THEN GOTO SB29_1

[currently smoke occasionally or not at all, incl DK,R]

[GOTO FOR 2ND IF STATEMENT CHANGED FROM SB3_1 TO SB29_1 AT W3 – July 26, 2006; also moved SB1 = 6,9 (DK,R) from first if statement to second if statement on July 26, 2006 to send them to the new SB29 question (previously were skipped to SB4int)]

SB29_1

[added at W3 – July 26, 2006]

Have you smoked a cigarette since we last spoke with you on [Date of last interview]?

NOTE: If respondent initially responds DK or R, Interviewer to probe:

“For this research study, it is really important that we know if you have smoked since your last interview?”

[DO NOT READ]

01 – Yes

02 – No

06 – DK

09 R

Coverage: Respondents presently smoking occasionally or not at all (incl DK and R)

SB3_1

Ok, how long ago was it that you last smoked a cigarette: was it [CAMH]

[READ CATEGORIES 1 – 4] *[W3: changed from “Read categories 1-3 July 26, 2006]*

01 – one week or less

GOTO SB4int_1

02 – more than one week but less than one month

GOTO SB4int_1

03 – 1 to 6 months ago

GOTO DSB4a_1

04 – 7 to 12 months ago

GOTO DSB4a_1

Coverage: Respondents presently smoking occasionally or not at all

DSB4a_1

NOTE: All respondents at this point have SB1_1 >= 3, SB3_1 = 3 or 4.

IF (SB2_1 >= 2) GOTO SB28_1 *[GOTO revised from PO1Int to SB28 at W3, July 26, 2006]*

(R has not smoked 100+ cigarettes, has not smoked in past month or more)

NOTE: All respondents at this point have smoked 100+ cigarettes (SB2_1 or SB2 = 1)

IF (SB1_1 >= 6 & SB29_1 != 2) GOTO SB4int_1 *[added at W3, July 26, 2006]*

(DK/R for current smoking (SB1) and R has smoked since last interview)

IF (SB1_1 = 3) GOTO SB13_1

(Occasional smoker, last smoked 1-12 months ago)

NOTE: All respondents at this point are currently not smoking at all, or have DK/R for frequency of smoking (SB1_1 >= 4)

IF (SB29_1 = 1 & SB3a = 3) GOTO QB18_1 *[added at W3, July 26, 2006]*

(RELAPSEERS - Smoked since last interview and reported smoking 1-6 months ago at last interview)

IF (SB29_1 >= 6 & SB3a = 3 & SB3_1 = 3) GOTO QB18_1 [added at W3, July 26, 2006]
(DK/R for smoked since last interview, smoked 1-6 months ago at last interview, and last smoked 1-6 months ago)

IF (SB29_1 = 2 & SB3a = 3) GOTO SB24_1
(PREVALENT QUITTER - Has not smoked since last interview and smoked 1-6 months ago at last interview)

IF (SB29_1 >= 6 & SB3a = 3 & SB3_1 >= 4) GOTO SB24_1
(PREVALENT QUITTER - DK/R for smoked since last interview, smoked 1-6 months ago at last interview, last smoked >6 months ago)

IF (SB3a <= 2 | SB1 <= 3) GOTO QB11b_1
(INCIDENT QUITTER - Last smoked 1-12 months ago, current smoker at last interview)
[Some revisions to the above code on July 26, 2006 (W3) to better incorporate all types of possible responses – check previous documents]

SB4int_1

Now I'm going to ask you a few questions about your smoking behaviours over the past 30 days

[moved SB7 and SB8 before SB4-SB6 as this has been an issue for interviewers/respondents (W5 – July 2007)]

SB7_1

Some people smoke more or less depending on the day of the week.

So, thinking back over the past month, on the WEEKEND DAYS that you did smoke, about how many cigarettes did you usually smoke?

[PROBE: For instance, on your average Saturday, how many cigarettes do you usually smoke?]

[DO NOT READ CATEGORIES]

01 - ___ Enter number (SB7num_1 RANGE: 0-100)

06 – DK

09 – R

Coverage: Current smokers

SB8_1

On the WEEKDAYS that you did smoke, about how many cigarettes did you usually smoke?

[CTS REVISED FOR WEEKEND DAYS]

[IF ASKED, INTERVIEWER TO REMIND RESPONDENT IN LAST 30 DAYS]

[PROBE: For instance, on your average Monday, how many cigarettes do you usually smoke?]

[DO NOT READ CATEGORIES]

01 - ___ Enter number (SB8num_1 RANGE: 0-100)

06 – DK

09 – R

Coverage: Current smokers

SB4_1

On how many of the past 30 days did you smoke cigarettes? [CCHS]

INTERVIEWER NOTE: If participant responds “everyday” to this question, enter 30

[DO NOT READ CATEGORIES]

01 - _____ ENTER NUMBER (SB4num_1 RANGE=0-30) IF SB4num_1=30 GOTO

SB13_1

06 – DK

09 – R

Coverage: Current smokers

[revised Q wording from “...did you smoke at least one cigarette?” in W4, January 24, 2007]

[added interviewer note at W5 – July 2007]

[revised GOTO for SB4num_x = 30 from SB7 to SB13 as questions were reordered at W5 – July 2007]

SB5_1

In the past month, on how many WEEKEND days did you smoke at least one cigarette?

PROBE: Some people ONLY smoke on occasion or on certain days of the week. In the past 30 days, how many weekend days did you smoke at least one cigarette?

[DO NOT READ CATEGORIES]

01 – ENTER NUMBER (SB5num_1 RANGE=0-10)

06 – DK

09 – R

Coverage: Current smokers smoking less than 30 days in the past month [SB4<30]

[added interviewer probe at W5 – July 2007]

SB6_1

In the past month, on how many WEEKDAYS did you smoke at least one cigarette?

PROBE: Some people ONLY smoke on occasion or on certain days of the week. In the past 30 days, how many weekend days did you smoke at least one cigarette?

[DO NOT READ CATEGORIES]

01 - _____ Enter Number (SB6num_1 RANGE: 0 – 25)

06 – DK

09 – R

Coverage: Current smokers smoking less than 30 days in the past month [SB4<30]

[added interviewer probe at W5 – July 2007]

SB13_1

Compared to 6 months ago, that is since [ANCHOR], would you say that you are now smoking...
[CTS]

[READ CATEGORIES 1-3]

01 – the same as you were smoking GOTO SB14_1

02 – more than you were smoking OR GOTO SB14_1

03 – less than you were smoking GOTO SB15_1

04 – Quit completely [DO NOT READ] GOTO QB11b_1

06 – DK GOTO SB14_1

09 – R GOTO SB14_1

NOTE: IF SB1_1=4 AND SB3_1=2 (R who smoke “not at all” and last smoked <1month ago)

THEN response category 04 is read: “04 – Or did you quit smoking completely?”

Coverage: Current smokers and All Occasional (respondents who self define as occasional) and respondents who smoke “not at all” and last smoked <1month ago (current smoker by definition)

SB14_1

At any time during the past 6 months, did you change your smoking behaviour with the intention of quitting or reducing the amount you smoke?

[DO NOT READ CATEGORIES]

01 – Yes GOTO SB15_1
02 – No GOTO DSB23_1
06 – DK GOTO SB15_1
09 – R GOTO SB15_1

Coverage: Current and All occasional smokers who report smoking the same amount or more than 6 months ago (+DKs and Rs)

SB15_1

IF SB14_1=01 SHOW “In the past 6 months...”

IF (SB13_1=03 | SB14_1=06 | SB14_1=09) SHOW:

“How did you change your smoking behaviour when you were trying to reduce the amount you smoke in the past 6 months? ...”

Did you try to quit smoking completely?

[If necessary, remind respondent “during the past 6 months”]

[DO NOT READ CATEGORIES]

01 – Yes GOTO QB11a_1
02 – No GOTO SB16_1
06 – DK GOTO SB16_1
09 – R GOTO SB16_1

Coverage: Current and ALL occasional smokers who report smoking the same or more (incl DK/R) but did change their smoking behaviour with the intention to quit/reduce in the past 6 months (SB14_1=01), as well as current smokers reporting they are now smoking less than they were 6 months ago

QB11a_1

How many times have you made a serious attempt to quit smoking IN THE PAST 6 MONTHS? By serious, we mean that you made a conscious attempt to stay off cigarettes for good.

[DO NOT READ CATEGORIES]

01 - ____ ENTER NUMBER (IF RANGE GIVEN, USE MIDPOINT)

[QB11aN_1 RANGE: 1 – 50]

GOTO QB18a_1 *[revised skip logic from SB21b_1 to QB18a_1 at W5–July’07]*

06 – DK GOTO SB16_1
09 – R GOTO SB16_1

Coverage: Respondents who tried to quit smoking completely in the past 6 months.

QB18a_1

[added at W5 – July 2007]

Which of these statements best describes how your most recent quit attempt started:

[READ CATEGORIES 01 – 06]

01 – I did not plan the quit attempt in advance, I just did it;
02 – I planned the quit attempt for later the same day;
03 – I planned the quit attempt the day beforehand;
04 – I planned the quit attempt a few days beforehand;
05 – I planned the quit attempt a few weeks beforehand; OR
06 – I planned the quit attempt a few months beforehand;
07 – other
08 – DK
09 – R

GOTO SB21b_1

Coverage: Respondents who tried to quit smoking completely in the past 6 months (QB11aN_1 > 0)

[NOTE: coding "other" for anything greater than 3months]

QB11b_1

In the past 6 months, that is since [ANCHOR], how many times did you make a serious attempt to quit before you were able to quit smoking? By serious, we mean that you made a conscious attempt to stay off cigarettes for good.

[DO NOT READ CATEGORIES]

01 - ____ ENTER NUMBER (IF RANGE GIVEN, USE MIDPOINT)

[QB11bN_1 RANGE: 1 – 50]

GOTO QB18b_1 [revised skip logic from SB24_1 to QB18b_1 at W5–July'07]

06 – DK GOTO SB24_1

09 – R GOTO SB24_1

Coverage: Current smokers reporting that they have quit completely and those reporting that they currently smoke "Not At All", last smoked \geq 1 month ago, and current smoker at last interview (INCIDENT QUITTER)

QB18b_1

[added at W5 – July 2007]

Which of these statements best describes how your most recent quit attempt started:

[READ CATEGORIES 01 – 06]

01 – I did not plan the quit attempt in advance, I just did it;

02 – I planned the quit attempt for later the same day;

03 – I planned the quit attempt the day beforehand;

04 – I planned the quit attempt a few days beforehand;

05 – I planned the quit attempt a few weeks beforehand; OR

06 – I planned the quit attempt a few months beforehand;

07 – other

08 – DK

09 – R

GOTO SB24_1

Coverage: Incident quitters, current smokers at last interview and last smoked \geq 1 month ago

(QB11bN_1 > 0)

[NOTE: coding "other" for anything greater than 3months]

SB16_1

In the past 6 months, did you try to go whole days without smoking?

[DO NOT READ CATEGORIES]

01 – Y GOTO SB17_1

02 – N GOTO SB18_1

06 – DK GOTO SB18_1

09 – R GOTO SB18_1

Coverage: Current and ALL occasional smokers who did not attempt to quit smoking completely (incl DK,R) in the past 6 months (among those who report smoking the same or more but did change

their smoking behaviour with the intention to quit/reduce in the past 6 months (SB14_1=01), as well as current smokers reporting they are now smoking less than they were 6 months ago)

SB17_1

Approximately how many days a week did you try to not smoke?

Note: IF RESPONDENT ANSWERS ZERO, INTERVIEWER TO REPEAT QUESTION STRESSING “How many days did you TRY to not smoke?” before coding response “02”

[Note added January 2006]

[DO NOT READ CATEGORIES]

01 - _____ Enter Number (SB17N_1 RANGE: 1 – 7)

02 – Zero *[response category added January 2006; corrected CODE July 27, 2006 as these respondents were being sent to SB17N_1 which was not needed]*

06 – DK

09 – R

Coverage: Current and ALL occasional smokers who did not attempt to quit smoking completely (incl DK,R) in the past 6 months but did go whole days without smoking (among those who report smoking the same or more but did change their smoking behaviour with the intention to quit/reduce in the past 6 months (SB14_1=01), as well as current smokers reporting they are now smoking less than they were 6 months ago)

SB18_1

IF SB16_1=01 SHOW: “On the days that you did smoke....”

Did you reduce the number of cigarettes you usually smoke?

[DO NOT READ CATEGORIES]

01 – Y GOTO SB19_1

02 – N GOTO SB20_1

06 – DK GOTO SB20_1

09 – R GOTO SB20_1

Coverage: Current and ALL occasional smokers who did not attempt to quit smoking completely (incl DK,R) in the past 6 months (among those who report smoking the same or more but did change their smoking behaviour with the intention to quit/reduce in the past 6 months (SB14_1=01), as well as current smokers reporting they are now smoking less than they were 6 months ago)

SB19_1

Approximately how many cigarettes per day did you cut back?

[DO NOT READ CATEGORIES]

01 - _____ Enter Number (SB19N_1 RANGE: 1 – 100)

06 – DK

09 – R

Coverage: Respondents who reduced the number of cigarettes they smoke per day (SB18_1=1); see coverage for SB18_1

SB20_1

Did you try not to smoke the whole cigarette?

[DO NOT READ CATEGORIES]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and ALL occasional smokers who did not attempt to quit smoking completely (incl DK,R) in the past 6 months (among those who report smoking the same or more but did change their smoking behaviour with the intention to quit/reduce in the past 6 months (SB14_1=01), as well as current smokers reporting they are now smoking less than they were 6 months ago)

SB21a_1

In the past 6 months, what was the longest amount of time you were able to reduce your smoking?

[DO NOT READ CATEGORIES]

01 – ENTER NUMBER OF HOURS _____ [SB21aH_1 RANGE: 0 – 24]

02 – ENTER NUMBER OF DAYS _____ [SB21aD_1 RANGE: 0 – 168]

03 – ENTER NUMBER OF WEEKS _____ [SB21aW_1 RANGE: 0 – 24]

06 – DK

09 – R

GOTO SB22_1

Coverage: Current and All occasional smokers who report smoking the same amount or more, and those smoking less than 6 months ago (+DKs and Rs) who changed their smoking behaviour with the intent to reduce during the last 6 months but did not attempt to quit

[number of hours added at beginning of Wave 2 – Jan '06]

SB21b_1

In the past 6 months, what was the longest time that you stayed smoke free?

[DO NOT READ CATEGORIES]

01 – ENTER NUMBER OF HOURS _____ [SB21bH_1 RANGE: 0 – 24]

02 – ENTER NUMBER OF DAYS _____ [SB21bD_1 RANGE: 0 – 168]

03 – ENTER NUMBER OF WEEKS _____ [SB21bW_1 RANGE: 0 – 24]

06 – DK

09 – R

Coverage: Current and All occasional smokers who report smoking the same amount or more, and those smoking less than 6 months ago (+DKs and Rs) who attempted to quit during the last 6 months

[number of hours added at beginning of Wave 2 – Jan '06]

SB22_1

What was the MAIN reason you cut back the amount you were smoking?

_____ Enter Response

[DO NOT READ CATEGORIES]

01 – Reduce disease risk / improve health GOTO DQB15_1

02 – Illness / Disability GOTO DQB15_1

03 – As quitting strategy/trying to quit GOTO DQB15_1

04 – Too expensive / cost GOTO DQB15_1

05 – Smoking restrictions GOTO DQB15_1

06 – Reduce others' exposure to second-hand smoke GOTO DQB15_1

07 – Pregnancy/breastfeeding GOTO DQB15_1

08 – Reduced need/craving GOTO DQB15_1

09 – Family pressure GOTO DQB15_1

10 – New Years Resolution GOTO Q22a_1

11 – Other Specify _____

GOTO DQB15_1

66 – DK

99 – R

Coverage: Current and All occasional smokers who attempted to reduce or who did reduce smoking during the last 6 months

SB22a_1

What was the MAIN reason you made a New Year's resolution to cut back the amount you were smoking? _____ Enter Response

[DO NOT READ CATEGORIES]

01 – Reduce disease risk / improve health

02 – Illness / Disability

03 – As quitting strategy/trying to quit

04 – Too expensive / cost

05 – Smoking restrictions

06 – Reduce others' exposure to second-hand smoke

07 – Pregnancy/breastfeeding

08 – Reduced need/craving

09 – Family pressure

11 – Other Specify _____

66 – DK

99 – R

Coverage: Current and All occasional smokers who attempted to reduce or who did reduce smoking during the last 6 months as a new years resolution

DQB15_1

IF SB15_1 = 01 THEN GOTO QB15_1 [SMOKERS WHO TRIED TO QUIT IN PAST 6M]

IF SB15 NE 01 THEN GOTO DSB23_1

QB18_1

[added at W3, July 26,

2006]

Did you continue to smoke for more than one day?

[DO NOT READ]

01 – Yes

02 – No GOTO QB15_1

06 – DK

09 – R

Coverage: Not at all smokers, incl DK/R (100+ cig) who smoked since previous interview and last smoked 1-6 months ago AND smoked 1-6 months ago in previous interview (RELAPSEERS)

QB19_1

[added at W3, July 26,

2006]

How long did you continue to smoke before you quit again?

[READ CATEGORIES 1-4]

01 – 2 or 3 days

02 – 4 to 7 days

03 – more than one week but less than one month
04 – one month or longer
06 – DK
09 – R

Coverage: Not at all smokers, incl DK/R (100+ cig) who smoked since previous interview and last smoked 1-6 months ago AND smoked 1-6 months ago in previous interview (RELAPSERS) AND QB18=1,6,9 (smoked for more than one day during relapse)

QB15_1

IF QB18_1 = 02 THEN SHOW: *[the if statement added at W3, July 26, 2006; else statement is original W2 question]*

“Where were you when you smoked that day? Were you...”

ELSE SHOW:

“Thinking about your most recent quit attempt, where were you when you started smoking again? Were you...”

[READ CATEGORIES 1 - 5]

01 – At home
02 – At a friend’s place
03 – At work
04 – At a bar OR
05 – At a restaurant
06 – Some other place [Specify]
07 – DK
09 – R

Coverage: Current and All occasional smokers who attempted to quit during the last 6 months *and respondents who had a relapse during the past 6 months*
[italicized group added to coverage in W3, July 26, 2006]

QB16_1

IF QB18_1 = 02 THEN SHOW: *[the if statement added at W3, July 26, 2006; else statement is original W2 question]*

“Were others *smoking* around you when you smoked that day?” *[edited wording to include “smoking” at W3, October 24, 2006]*

ELSE SHOW:

“Were others around you smoking when you started to smoke again?”
[edited wording to include “smoking” at W3, October 24, 2006]

[DO NOT READ CATEGORIES]

01 – Y
02 – N
06 – DK
09 – R

Coverage: Current and All occasional smokers who attempted to quit during the last 6 months *and respondents who had a relapse during the past 6 months*
[italicized group added to coverage in W3, July 26, 2006]

QB17_1

IF QB18_1 = 02 THEN SHOW: *[the if statement added at W3, July 26, 2006; else statement is original W2 question]*

“Were you drinking alcohol when you smoked that day?”

ELSE SHOW:

“Were you drinking alcohol when you started to smoke again?”

[DO NOT READ CATEGORIES]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and All occasional smokers who attempted to quit during the last 6 months *and respondents who had a relapse during the past 6 months*
[italicized group added to coverage in W3, July 26, 2006]

DSB23_1

NOTE: SB1_1 >= 04 IS WHAT THE CATI CODE SHOULD HAVE BEEN; CHANGED ON March 27, 2007 IN F1 W4 ; CODE FOR W3 WAS SB1 >= 4

[SRC email on Oct 20/06, SB3a is coded in SAS to be the most recent value in the follow-up surveys, these values are then imported into CATI for the current follow-up survey]

IF SB1_1 >= 04 & (SB2 = 01 | SB2_1 = 01) & SB3a = 03 & (SB29_1 = 01 | (SB29_1 >= 06 & SB3_1 = 03))) THEN GOTO SB23a_1 *[added at W3, on July 26/06]*

[R who have quit smoking, incl DK/R (100+ cig), but smoked 1-6 months ago at last interview, and report having smoked since their last interview (incl DK/R if they report last smoking 1-6 months ago for this interview – RESPONDENTS WHO RELAPSED)]

IF SB13_1 = 01 & SB14_1 = 01 THEN GOTO SB23a_1

[now smoking the same as 6 months ago but tried to reduce/quit in the last 6 months]

IF SB13_1 = 02 THEN GOTO SB23b_1

[now smoking more than 6 months ago]

IF SB13_1 = 01 | SB13_1 = 03 | SB13_1 = 06 | SB13_1 = 09 THEN GOTO SB28_1

[now smoking less than 6 months ago, incl dk/r and those smoking the same but did not attempt to reduce/quit during the past 6 months]

SB23a_1

IF QB18_1 = 02 THEN SHOW: *[the if statement added at W3, July 26, 2006; else statement is original W2 question]*

“What was the MAIN reason you smoked that day?”

ELSE SHOW:

What was the MAIN reason you increased your smoking again?

_____ Enter Response GOTO DSB24_1

[corrected skip logic October 20, 2006 from SB28 to DSB24]

[DO NOT READ CATEGORIES]

01 – To control body weight

02 – Stress; need to relax or calm down

03 – Boredom

04 – Addiction / habit

05 – Lack of support/information

06 – Going out more (bars, parties)

07 – Increased availability

- 08 – No reason/felt like it
- 09 – Family or friends smoke
- 11 – Other (specify)
- 66 – DK
- 99 – R

Coverage: Current and All occasional smokers who report smoking the same amount as 6 months ago, but attempted to reduce or quit *and respondents who relapsed since last interview*
[italicized group added to coverage in W3, Oct 20/06]

SB23b_1

What was the MAIN reason you increased the amount you were smoking?

_____ Enter Response GOTO SB28_1

[DO NOT READ CATEGORIES]

- 01 – To control body weight
- 02 – Stress; need to relax or calm down
- 03 – Boredom
- 04 – Addiction / habit
- 06 – Going out more (bars, parties)
- 07 – Increased availability
- 08 – No reason/felt like it
- 09 – Family or friends smoke
- 10 – Enjoy it more
- 11 – Other (specify)
- 66 – DK
- 99 – R

Coverage: Current and All occasional smokers who report smoking more than 6 months ago

DSB24_1

[added at W3, on July

26/06]

[SRC email on Oct 20/06, SB3a is coded in SAS to be the most recent value in the follow-up surveys, these values are then imported into CATI for the current follow-up survey]

IF SB1_1 >= 04 & (SB2 = 01 | SB2_1 = 01) & SB3a = 03 & (SB29_1 = 01 | (SB29_1 >= 06 & SB3_1 = 03))) THEN GOTO SB24_1

[R who have quit smoking, incl DK/R (100+ cig), but smoked 1-6 months ago at last interview, and report having smoked since their last interview (incl DK/R if they report last smoking 1-6 months ago for this interview – RESPONDENTS WHO RELAPSED)]

[error in survey code corrected in W3, Oct. 20, 2006: was IF SB1 > 4 ...]

ELSE GOTO SB28_1

SB24_1

IF (SB1_1 >= 04 & (SB2_0=01 | SB2_1=01) & SB3a_0 = 03 & (SB29_1 = 01|SB29_1 >= 06 & SB3_1 =3)) THEN SHOW:

[the if statement added at W3, July 26/06; else statement is original W2 question]

[error in survey code corrected in W3, Oct. 20, 2006: was IF SB1 > 4 ...]

“What was the MAIN reason you quit smoking *again?*”

ELSE SHOW:

What was the MAIN reason you quit smoking?

Enter Response

[DO NOT READ CATEGORIES]

- | | |
|---|--------------|
| 01 – Reduce disease risk / improve health | GOTO SB25_1 |
| 02 – Illness / Disability | GOTO SB25_1 |
| 04 – Too expensive / cost | GOTO SB25_1 |
| 05 – Smoking restrictions | GOTO SB25_1 |
| 06 – Reduce others' exposure to second-hand smoke | GOTO SB25_1 |
| 07 – Pregnancy/breastfeeding | GOTO SB25_1 |
| 08 – Reduced need/craving | GOTO SB25_1 |
| 09 – Family pressure | GOTO SB25_1 |
| 10 – New Year's Resolution | GOTO SB24a_1 |
| 11 – Other Specify _____ | GOTO SB25_1 |
| 66 – DK | |
| 99 – R | |

Coverage: Former smokers (1-12 months) and current smokers who report having quit smoking (ie at the present time they do not smoke at all) *AND respondents who relapsed but no longer smoking at present time*

[italicized group added to coverage in W3, Oct 20, 2006]

SB24a_1

What was the MAIN reason you made the New Year's resolution to quit smoking?

Enter Response

[DO NOT READ CATEGORIES]

- 01 – Reduce disease risk / improve health
- 02 – Illness / Disability
- 04 – Too expensive / cost
- 05 – Smoking restrictions
- 06 – Reduce others' exposure to second-hand smoke
- 07 – Pregnancy/breastfeeding
- 08 – Reduced need/craving
- 09 – Family pressure
- 11 – Other Specify _____
- 66 – DK
- 99 – R

Coverage: Those responding New Year's Resolution to SB24_1: Former smokers (1-12 months) and current smokers who report having quit smoking (ie at the present time they do not smoke at all) *AND respondents who relapsed but no longer smoking at present time*

[italicized group added to coverage in W3, Oct 20, 2006]

SB25_1

You indicate that you are no longer smoking, but do you ever have a cigarette or puff on a cigarette once and a while?

[CTS - revised]

[DO NOT READ CATEGORIES]

- | | |
|---------|-------------|
| 01 – Y | GOTO SB26_1 |
| 02 – N | GOTO SB28_1 |
| 06 – DK | GOTO SB28_1 |

09 – R GOTO SB28_1

Coverage: Former smokers (1-12 months) and current smokers indicating they have quit smoking
AND respondents who relapsed

[italicized group added to coverage in W3, Oct 20, 2006]

SB26_1

About how often, on average, do you have a cigarette or puff on a cigarette? Would you say....

[READ CATEGORIES 1-3] [CTS]

01 – Once a week or more

02 – Less than weekly, but at least once a month OR

03 – Less than once a month

06 – DK

09 – R

Coverage: Former smokers (1-12 months), *relapsers*, and current smokers indicating they have quit smoking who report that they occasionally have a puff or a full cigarette

[italicized group added to coverage in W3, July 26, 2006]

[slight modifications to response category 02 (from “less often than weekly, but at least monthly”) and 03 (from “less than monthly”) at W5 – July 11, 2007]

SB27_1

On the occasions that you do have a cigarette or puff on a cigarette, about how many do you typically smoke? [CTS]

IF RESPONDENT DOES NOT INDICATE IF THEY OCCASIONALLY HAVE PUFFS OR FULL CIGARETTES, INTERVIEWER TO PROBE: “Would that be puffs or would that be cigarettes?”

[DO NOT READ CATEGORIES]

01 - _____ Enter Number of puffs [SB27Np_1 Range: 1-100]

02 - _____ Enter Number of cigarettes [SB27Nc_1 Range: 1-100]

06 – DK

09 – R

Coverage: Former smokers (1-12 months) and current smokers indicating they have quit smoking
AND respondents who relapsed but no longer smoking at present time who report that they occasionally have a cigarette

[italicized group added to coverage in W3, July 26, 2006]

SB28_1

[added to baseline and follow-up surveys at W2 – Jan ‘06]

Besides cigarettes, in the past 6 months, have you used any other tobacco products such as chewing tobacco, snuff, cigars, pipes, or snus?

NOTE: “snus” is pronounced “snoose” – rhymes with moose/goose

PROBE: Other tobacco products include cigarillos, pinch, bidis, kreteks, shisha

PROBE2: Snus is moist tobacco placed in the mouth. It is not smoked or burned and does not require spitting.

01 – Y

02 – N

06 – DK

09 – R

Coverage: All current and former smokers [everyone]

[added “snus” to question wording in W5 – July 2007, along with note and probe2]

ADDICTION QUESTIONS

DAD1_1

IF SB2_1 >=2 *[not 100+ cig in lifetime]*

GOTO PO1int_1 *[added at W3, July 26, 2006]*

IF SB1_1 = 04 & (SB3_1 >=02)

GOTO AD1b_1 *[current "not at all" smokers who last smoked > 1 week ago]*

[W3, Oct. 24, 2006: skip logic for 2nd IF statement cleaned up but equivalent to previous code (since SB2=2 is skipped out of the following sections)]

ELSE GOTO AD1a_1 *[current smokers, 100+]*

AD1a_1 *[W1 baseline variable is AD1; renamed AD1a at W2 baseline and for all follow-up surveys – Jan06 – for parallel question AD1b]*

Thinking about your own smoking, would you say that you are NOT AT ALL ADDICTED to cigarettes, SOMEWHAT ADDICTED to cigarettes or VERY ADDICTED to cigarettes?

[Q2000 WITH RE-ORDERED RESPONSE CATS (reversed 01 and 03)]

[DO NOT READ CATEGORIES]

01 – Not at all addicted

02 – Somewhat addicted

03 – Very addicted

06 – DK

09 – R

GOTO DAD2_1

Coverage: Current smokers (self defined daily/occasional, *100+ cig in lifetime*
[italicized group added to coverage in W3, July 26, 2006])

AD1b_1 *[Added at beginning of WAVE 2 – Jan '06 (ie not in W1 baseline)]*

At the present time would you say that you are NOT AT ALL ADDICTED to cigarettes, SOMEWHAT ADDICTED to cigarettes or VERY ADDICTED to cigarettes?

[DO NOT READ CATEGORIES]

01 - Not at all addicted

02 - Somewhat addicted

03 - Very addicted

06 - Don't Know

09 - Refused

SKP QB6b_1

Coverage: Current smokers who report they have quit smoking and all former smokers (1-12 months), *100+ cig in lifetime*

[italicized group added to coverage in W3, July 26, 2006]

DAD2_1

IF (SB1_1=01 OR SB1_1=06 OR SB1_1=09 OR SB1_1=02)

THEN GOTO AD2_1 *[SELF-DEFINED DAILY SMK, INCL. DK/R, 100+]*

IF SB1_1=03

[W3, Oct. 24, 2006: skip logic for decision cleaned up but equivalent to previous code (since SB2=2 is skipped out of the following sections)]

THEN GOTO AD3_1 [SELF-DEFINED OCCASIONAL SMK, 100+]

AD2_1

How soon after you wake up do you usually smoke your first cigarette?

[PROBE: What I mean is how long in hours or minutes]

[DO NOT READ]

[MODIFIED FROM CAMH/CTUMS]

01 – ENTER NUMBER OF MINUTES _____ [AD2min_1 RANGE: 0 – 240]

02 – ENTER NUMBER OF HOURS _____ [AD2hr_1 RANGE: 0 – 15]

06 – DK

09 – R

Coverage: Daily or almost daily smokers, 100+ cig in lifetime

[italicized group added to coverage in W3, July 26, 2006]

AD3_1

Do you find it difficult to refrain from smoking in places where it is NOT ALLOWED?

[IF NECESSARY, READ RESPONSE CATEGORIES]

01 – Yes it is difficult to refrain from smoking OR

02 – No, it is not difficult to refrain from smoking

06 – DK

09 – R

Coverage: Current smokers, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

QUITTING QUESTIONS

QB1_1

How easy or hard would it be for you to completely quit smoking if you wanted to? Would it be:

[READ CATEGORIES 1 – 4]

[ITS]

01 – Very easy GOTO QB2_1

02 – Somewhat easy GOTO QB2_1

03 – Somewhat hard OR GOTO QB2_1

04 – Very hard GOTO QB2_1

06 – DK GOTO QB2_1

09 – R GOTO QB2_1

Coverage: Current smokers, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

QB2_1

IF QB1_1 = 1,2,3,4 SHOW:

You said it would be [QB1_1 RESPONSE] to quit smoking if you wanted to.

How confident are you that you would succeed if you decided to quit COMPLETELY in the next six months? [ITS]

[READ CATEGORIES 1 – 4]

01 – Not at all confident

- 02 – Not very confident
- 03 – Fairly confident OR
- 04 – Very confident
- 06 – DK
- 09 – R

Coverage: Current smokers, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

QB3_1

If you decided to quit smoking, do you have at least one person you could count on for support?

[DO NOT READ CATEGORIES]

- 01 – Yes
- 02 – No
- 06 – DK
- 09 – R

Coverage: Current smokers, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

QB4_1

Is there anyone who might make it more DIFFICULT for you to quit smoking if you wanted to?

[DO NOT READ CATEGORIES]

- 01 – Yes
- 02 – No
- 06 – DK
- 09 – R

Coverage: Current smokers, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

QB5_1

In general, would you say your health is:

[CCHS]

[READ CATEGORIES 1 – 5]

- 01 – Excellent
- 02 – Very good
- 03 – Good
- 04 – Fair OR
- 05 – Poor
- 06 – DK
- 09 – R

Coverage: Current smokers, 100+ cig in lifetime (equivalent to DE3 for all other respondents)

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

QB6a_1

[in baseline surveys, this question is QB6]

How much do you think you would benefit from health and other gains if you were to quit smoking permanently in the next 6 months? Would you:

[ITS, Revised]

[READ CATEGORIES 1 – 4]

- 01 – Not benefit at all
- 02 – Benefit a little
- 03 – benefit quite a bit OR

04 – benefit a lot
06 – DK
09 – R

Coverage: Current smokers, 100+ cig in lifetime
[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

DQB7_1

~~IF SB2_0=01|SB2_1=01 THEN GOTO QB7_1 [Have smoked 100+ cig]~~

~~IF SB2_0=02|SB2_1=02 THEN GOTO QA_int_1 [Have not smoked 100+ cig]~~

[at W3, DQB7_1 no longer relevant given all respondents who have still not smoked 100+ cigarettes are skipped to PO1int_1 at DAD1_1]

QB7_1

Are you planning to quit smoking...

[READ CATEGORIES 1 – 4]

01 – Within the next month?

02 – Within the next 6 months?

03 – Sometime in the future, beyond 6 months? Or are you

GOTO QA_int_1

04 – Not planning to quit.

GOTO QA_int_1

05 – I have already quit [DO NOT READ]

GOTO QA_int_1

06 – DK

GOTO QA_int_1

09 – R

GOTO QA_int_1

Coverage: Current smokers who have smoked 100 cig in lifetime

QB8_1

What is the MAIN reason you plan to quit smoking?

_____ Enter Response

[CATEGORY CODES – DO NOT READ]

01 – Reduce disease risk / improve health

02 – Illness / Disability

03 – Too expensive / cost

04 – Smoking restrictions

05 – Reduce others' exposure to second hand smoke

06 – Pregnancy/breastfeeding

07 – Reduced need/craving

08 – Family pressure

09 – Other (Specify) _____

66 – DK

99 – R

Coverage: Current smokers (100+) who plan to quit smoking in the next 6 months

QB9_1

Have you set a firm quit date?

01 – Y

02 – N

09 – R

GOTO DQA2_1

Coverage: Current smokers (100+) who plan to quit sometime in the next 6 months

QB6b_1

[added to follow-up surveys at W2 – Jan '06]

How much do you think you have benefited from health and other gains since you quit smoking?

Have you: [ITS, Revised]

[READ CATEGORIES 1 – 4]

01 – Not benefited at all

02 – Benefited a little

03 – benefited quite a bit OR

04 – benefited a lot

06 – DK

09 - R

Coverage: Former smokers (1-12 months) and current smokers who report they have quit smoking, 100+ cig in lifetime

QB12_1

How confident are you that you will be able to stay smoke-free for the next 6 months?

[READ CATEGORIES 1-4]

01 – Not at all confident

02 – Not very confident

03 – Fairly confident OR

04 – Very confident

06 – DK

09 – R

Coverage: Former smokers (1-12 months) and current smokers who report they have quit smoking, 100+ cig in lifetime

QB13_1

Do you think that there is ANY possible situation that might make you start smoking again?

[CTS]

[DO NOT READ CATEGORIES]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Former smokers (1-12 months) and current smokers who report they have quit smoking, 100+ cig in lifetime

QUIT AIDS

DQA27_1

IF SB1_1 = 04 AND SB3_1 >= 04 THEN GOTO QA27_1 *[Former smokers (7-12 mon)]*

ELSE GOTO QA_int_1

QA27_1

In the past 6 months, did you use any quit aids or resources to help you STAY smoke free?

[PROBE: By quit aids or resources we mean aids such as nicotine patches, gum, medications, hypnosis, acupuncture, or self-help material]

[DO NOT READ CATEGORIES]

01 – Y GOTO QA2ab_1
02 – N GOTO QA23_1 [corrected goto in W3]
03 – DK GOTO QA23_1 [corrected goto in W3]
04 – R GOTO QA23_1 [corrected goto in W3]

[skip logic corrected for responses 02,03,04 in W3 on Oct 24, 2006 from QA10in to QA23 – PI datasets correct this coverage in the code]

Coverage: Former smokers (7-12 months), 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

QA_int_1

Now I am going to ask you some questions about resources and aids to help people quit smoking...

[revised “you” to “people” in W4 – Jan 24, 07]

DQA2_1

IF SB14_1 ne 2 THEN GOTO QA2aa_1

[current smokers (100+) who have quit or reduced their smoking in the past 6m, incl DK/R]

IF SB14_1 = 2 THEN GOTO QA32_1

[current smokers (100+) smoking the same or more than 6m ago w/o changing their behaviour to quit/reduce]

~~IF SB2_0=02|SB2_1=02 THEN GOTO DQA10i_1 [current smoker not smoking 100+]~~

~~*[GOTO revised from QA10i_1 at W3, July 26/06]*~~

~~*[at W3 (July 26, 2006) the last IF statement is no longer relevant given all respondents who have still not smoked 100+ cigarettes are skipped to PO1int_1 at DAD1_1]*~~

QA2aa_1

In the past 6 months, that is since [ANCHOR] did you use nicotine patches to help you quit or reduce smoking?

[DO NOT READ CATEGORIES]

01 – Y GOTO QA2b_1
02 – N GOTO QA3_1
06 – DK GOTO QA3_1
09 – R GOTO QA3_1

Coverage: Current and former (1-6mon) smokers (100+ cig in lifetime) who quit/reduced, or attempted to quit/ reduce in past 6 months

QA2ab_1

In the past 6 months, that is since [ANCHOR], did you use nicotine patches to help you stay smoke free?

[DO NOT READ CATEGORIES]

01 – Y GOTO QA2b_1
02 – N GOTO QA3_1
06 – DK GOTO QA3_1
09 – R GOTO QA3_1

Coverage: Former (7-12mon) smokers who have used aids in past 6 months, 100+ cig in lifetime

QA2b_1

Over the past 6 months, how long did you use the patch?

If response > 6months PROBE: "OK, so you have been using the patch for all of the past 6 months and longer?" if yes, enter 6 months

01 – DAYS _____ [QA2bD_1 LIMIT: 200]

02 – WEEKS _____ [QA2bW_1 LIMIT: 26]

03 – MONTHS _____ [QA2bM_1 LIMIT: 6.5]

06 – DK

09 – R

Coverage: Current and former (1- 12mon) smokers (100+ cig in lifetime) who attempted to quit or reduce in past 6 months and used patches in past 6 months

QA3_1

In the past 6 months, did you use nicotine gum or chewing pieces like Nicorette?

[DO NOT READ CATEGORIES]

01 – Y GOTO QA3b_1

02 – N GOTO QA4_1

06 – DK GOTO QA4_1

09 – R GOTO QA4_1

Coverage: Current and former (1-6mon) smokers (100+ cig in lifetime) who quit/reduced, or attempted to quit/ reduce in past 6 months; and former (7-12) who have used aids in past 6 months

QA3b_1

Over the past 6 months, how long did you use the gum or chewing pieces?

If response > 6months PROBE: "OK, so you have been using gum or chewing pieces for all of the past 6 months and longer?" if yes, enter 6 months

01 – DAYS _____ [QA3bD_1 LIMIT: 200]

02 – WEEKS _____ [QA3bW_1 LIMIT: 26]

03 – MONTHS _____ [QA3bM_1 LIMIT: 6.5]

06 – DK

09 – R

Coverage: Current and former (1- 12mon) smokers (100+ cig in lifetime) who attempted to quit or reduce in past 6 months and used gum in past 6 months

QA4_1

In the past 6 months, did you use a nicotine inhaler?

[DO NOT READ CATEGORIES]

01 – Y GOTO QA4b_1

02 – N GOTO QA5_1

06 – DK GOTO QA5_1

09 – R GOTO QA5_1

Coverage: Current and former (1-6mon) smokers (100+ cig in lifetime) who attempted to quit or reduce in past 6 months; and former (7-12) who have used aids in past 6 months

QA4b_1

Over the past 6 months, how long did you use the inhaler?

If response > 6months PROBE: “OK, so you have been using the inhaler for all of the past 6 months and longer?” if yes, enter 6 months

01 – DAYS _____ [QA4bD_1 LIMIT: 200]

02 – WEEKS _____ [QA4bW_1 LIMIT: 26]

03 – MONTHS _____ [QA4bM_1 LIMIT: 6.5]

06 – DK

09 – R

Coverage: Current and former (1- 12mon) smokers (100+ cig in lifetime) who attempted to quit or reduce in past 6 months and used inhalers in past 6 months

QA5a_1

In the past 6 months, did you use a pill prescribed by your doctor called Zyban or bupropion?

[originally QA5 in W1 baseline – separated into QA5a and QA5b at W2 baseline and follow-up]

[DO NOT READ CATEGORIES]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers (100+) who attempted to quit or reduce in past 6 months; and former (7-12) who have used aids in past 6 months

QA5b_1

In the past 6 months, did you use a pill prescribed by your doctor called Wellbutrin to stop smoking?

[Question added at the beginning of Wave 2 – January 2006 (not in W1 baseline)]

[DO NOT READ CATEGORIES]

01 - Yes

02 - No

06 - Don't Know

09 - Refused

Coverage: Current and former (1-6mon) smokers (100+) who attempted to quit or reduce in past 6 months; and former (7-12) who have used aids in past 6 months

DQA5c_1

IF (QA5a_1 = 01 | QA5b_1 = 01) GOTO QA5c_1 *[use of zyban or wellbutrin in past 6 months]*

ELSE GOTO QA34_1 *[skip logic revised from QA6 to QA34 at W5 – July 2007 – to account for new question]*

QA5c_1

Over the past 6 months, how long did you use [NAME OF DRUG]?

PROBE: “Over the past 6 months, what was the total amount of time that you were on these medications?”

If response > 6months PROBE: “OK, so you have been using these medications for all of the past 6 months and longer?” if yes, enter 6 months

IF QA5a_1 = 01 & QA5b_1 = 01 Show “Zyban and Wellbutrin?” *[use of both drugs]*

IF QA5a_1 = 01 & QA5b_1 ~ = 01 Show “Zyban or bupropion?” *[use of zyban only]*

IF QA5a_1 ~ = 01 & QA5b_1 = 01 Show “Wellbutrin?” *[use of wellbutrin only]*

[DO NOT READ CATEGORIES]

01 – DAYS _____ [QA5bD_1 LIMIT: 200]

02 – WEEKS _____ [QA5bW_1 LIMIT: 26]

03 – MONTHS _____ [QA5bM_1 LIMIT: 6.5]

06 – DK

09 – R

Coverage: Current and former (1- 12mon) smokers (100+) who attempted to quit or reduce in past 6 months and used zyban or wellbutrin in past 6 months

QA34_1

[added at W5 – July 2007]

In the past 6 months, did you use a pill prescribed by your doctor called Champix or Varenicline to help you stop smoking?

INTERVIEWER NOTE: “Varenicline” is pronounced “var-en-i-clean”

01 – Y GOTO QA35_1

02 – N GOTO QA6_1

06 – DK GOTO QA6_1

09 – R GOTO QA6_1

Coverage: Current and former (1-6mon) smokers (100+) who attempted to quit or reduce in past 6 months; and former (≥ 7 mon) who have used aids in past 6 months

QA35_1

[added at W5 – July 2007]

Over the past 6 months, how long did you use Champix or Varenicline?

INTERVIEWER NOTE: “Varenicline” is pronounced “var-en-i-clean”

If response > 6months PROBE: “OK, so you have been using this medication for all of the past 6 months and longer?” if yes, enter 6 months

01 – DAYS _____ [QA3bD_1 LIMIT: 200]

02 – WEEKS _____ [QA3bW_1 LIMIT: 26]

03 – MONTHS _____ [QA3bM_1 LIMIT: 6.5]

06 – DK

09 – R

Coverage: Current and former (≥ 1 mon) smokers (100+ cig in lifetime) who attempted to quit or reduce in past 6 months and used gum in past 6 months

QA6_1

In the past 6 months, have you used hypnosis, acupuncture, or laser therapy?

[DO NOT READ CATEGORIES]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers (100+ cig in lifetime) who attempted to quit or reduce in past 6 months; and former (7-12) who have used aids in past 6 months

QA7_1

In the past 6 months, have you used a self-help booklet or video, a website or a chat group?

[PROBE: THIS MAY INCLUDE ANY SELF-HELP MATERIAL SUCH AS CDs]

[DO NOT READ CATEGORIES]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers (100+ cig in lifetime) who attempted to quit or reduce in past 6 months; and former (7-12) who have used aids in past 6 months

QA8_1

In the past 6 months, have you been to group counselling or a group support program?

[DO NOT READ CATEGORIES]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers (100+ cig in lifetime) who attempted to quit or reduce in past 6 months; and former (7-12) who have used aids in past 6 months

QA9_1

In the past 6 months, have you seen a specialized addiction counsellor?

PROBE: This could be a medical doctor or other health professional trained in nicotine addiction.

[DO NOT READ CATEGORIES]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers (100+ cig in lifetime) who attempted to quit or reduce in past 6 months; and former (7-12) who have used aids in past 6 months

DQA28_1

IF RESPONDENT HAS SAID YES TO MORE THAN ONE OF (QA2aa_1, QA2ab_1, QA3_1, QA4_1, QA5a_1, QA5b_1, QA34_3, QA6_1, QA7_1, QA8_1, QA9_1) THEN GOTO QA28_1 ELSE GOTO DQA30_1

[W5 – added QA34 to decision list]

QA28_1

In the past 6 months, did you use some combination of quit aids or resources to help you quit or reduce smoking, or remain smoke free?

[PROBE: Have you used more than one quit aid at the same time. For example, some people might have used both the patch and the gum at the same time.]

[DO NOT READ CATEGORIES]

01 – Y GOTO QA29in_1

02 – N GOTO DQA30_1

06 – DK GOTO DQA30_1

09 – R GOTO DQA30_1

Coverage: Current and former (1-6mon) smokers (100+ cig in lifetime) who attempted to quit or reduce in past 6 months; and former (7-12) who have used more than one quit aid in past 6 months

QA29in_1

What quit aids or resources have you used at the same time in the past 6 months?

01 – enter responses (GOTO QA29a_1, QA29b_1, QA29c_1, QA29d_1, QA29e_1)

09 – R GOTO DQA30_1

QA29a_1, QA29b_1, QA29c_1, QA29d_1, QA29e_1

Enter response

Coverage: Current and former (1-6mon) smokers (100+) who attempted to quit or reduce in past 6 months; and former (7-12) who have used 2+ quit aids in combination in past 6 months

DQA30_1

IF QA2aa_1 = 01 | QA2ab_1=01 | QA3_1=01 | QA4_1=01 THEN GOTO QA30_1

[use of NRT in past 6 months]

ELSE GOTO DQA31_1 *[no use of NRT in past 6 months]*

QA30_1

You said that you had used nicotine replacement therapy such as the patch, gum, or inhaler. Who paid for this quit aid?

[READ CATEGORIES 1-4, SELECT ALL THAT APPLY]

PROBE: Was there anyone else that helped pay for the quit aid?

01 – You

02 – A private insurance plan [PROBE: Like a workplace health benefit plan]

03 – Your local public health unit OR

04 - The government

05 – Other: SPECIFY

06 – DK

09 – R

Coverage: Respondents using NRT in the past 6 months, 100+ cig in lifetime

[probe added at W5 – July 2007]

DQA31_1

IF (QA5a_1 = 01 | QA5b_1 = 01 | QA34_1=01) THEN GOTO QA32_1 *[use of zyban or Wellbutrin or Champix in past 6 months – added skip for Champix at W5 – July 2007]*

ELSE GOTO QA32_1

QA31_1

You said that you had used pills prescribed by your doctor. Who paid for this quit aid?

[deleted code to add name of drug in question wording at W5 – July 2007]

[READ CATEGORIES 1-4; SELECT ALL THAT APPLY]

PROBE: Was there anyone else that helped pay for the quit aid?

01 – You

02 – A private insurance plan [PROBE: Like a workplace health benefit plan]

03 – Your local public health unit OR

04 - The government

05 – Other: SPECIFY

06 – DK

09 - R

Coverage: Respondents using zyban and/or Wellbutrin and/or champix in the past 6 months

[added those who have used champix to coverage at W5 – July 2007]

[W5 – July 2007 – revised Q wording to remove specific name of drug and be more general for any pills prescribed by a physician (given new Q)]

[probe added at W5 – July 2007]

QA32_1

Who should pay for medications, such as the patch, or the pill named zyban to help people stop smoking?

[READ CATEGORIES 1-5: SELECT ALL THAT APPLY]

PROBE: Is there anyone else that should pay for the medications?

01 – You

02 – A private insurance plan [PROBE: Like a workplace health benefit plan]

03 – Your local public health unit

04 - The government OR

05 – The tobacco companies

06 – Other: SPECIFY

07 – DK

09 - R

Coverage: Current and former (1-6mon) smokers (100+ cig in lifetime) who attempted to quit or reduce in past 6 months; former (7-12) who have used aids in past 6 months; and current smokers smoking the same or more than 6 months ago but did not try to quit or reduce their smoking in the past 6 months.

[probe added at W5 – July 2007]

DQA33_1

IF (SB1_1 = 01 | SB1_1 = 02 | SB1_1=03) & (SB3_1 = 01 | SB3_1 = 02) THEN GOTO QA33_1

[current smokers]

ELSE GOTO DQA10i_1

QA33_1

If the government subsidised the cost of stop smoking medications such as the patch or zyban, how much would you be willing to co-pay on a weekly basis for these medications?

[READ CATEGORIES 1 – 5]

01 – Nothing

02 – Five dollars

03 – Ten dollars

04 – Fifteen dollars OR

05 – Twenty dollars or more

06 – DK

09 – R

Coverage: Current smokers, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

DQA10i_1

~~IF SB1_1 = 04 & SB3_1 = 04 THEN GOTO QA23_1 *[former smokers (7-12 months ago)]* NOT RELEVANT IN FOLLOW-UP SURVEYS AFTER W5 AS FOLLOWING QUESTIONS WERE DELETED~~

SB1_1=3 & SB3_1 >= 4 THEN GOTO PO1int_1 [occasional smokers who last smoked >6 months ago]

[added at W3, Oct 24, 2006]

~~ELSE GOTO QA10in_1~~

DELETED QA10in TO QA12 AND QA14 FROM FOLLOW-UP SURVEYS AT W5 – JULY 2007 – BELIEFS ABOUT STOP SMOKING MEDICATIONS

[deleted QA13 at the beginning Wave 3 – July 14, 2006]

DELETED QA17in, QA17 TO QA20 FROM FOLLOW-UP SURVEYS AT W5 – JULY 2007 – BELIEFS ABOUT COUNSELLING

QA23_1

In the past 6 months, have you called the Ontario Smokers' Helpline?

[PROBE: The Ontario Smokers' Helpline is a telephone based counselling service to help smokers quit]

[DO NOT READ CATEGORIES]

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-12mon), 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

QA23a_1 *[added at W5 – July 2007]*

In the past 6 months, have you accessed the "Smokers' Helpline Online" sponsored by the Canadian Cancer Society?

PROBE: The "Smokers' Helpline Online" is a web-based counselling service to help smokers quit

[DO NOT READ]

01 – Y

02 – N

06 - DK

09 – R

Coverage: Current and former (1-12mon), 100+ cig in lifetime

DQA25_1

IF SB1_1=04 AND SB3_1=04 THEN GOTO PO1int_1 *[former smokers (7-12 months)]*

ELSE GOTO QA25_1

QA25_1

In the past 6 months, have you taken part in a quit program?

[DO NOT READ CATEGORIES]

01 – Y

GOTO QA26a_1

02 – N

GOTO QA26b_1

06 – DK

GOTO QA26b_1

09 – R

GOTO DHP1_1

Coverage: Current and former (1-6mon) smokers, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

QA26a_1

Can you tell me the name of this quit program or what organisation sponsored the program?

01 - _____ (Open ended; record response)

GOTO DHP1_1

06 – DK GOTO DHP1_1
09 – R GOTO DHP1_1
Coverage: Current and former (1-6mon) smokers who participated in a quit program in the past 6 months, 100+ cig in lifetime
[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

QA26b_1
Can you tell me the name of a quit program or an organisation that sponsors a quit program?
01 - _____ (Open ended; record response)
06 – DK
09 – R
Coverage: Current and former (1-6mon) smokers aware of a quit program (but have not participated in a program), 100+ cig in lifetime
[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

HEALTH PROFESSIONALS

DHP1_1
~~IF (SB2_0=1|SB2_1=01) THEN GOTO RAND1_1~~
~~IF SB2_0=02|SB2_1=02 THEN GOTO PP1INT_1~~ *[those who have not smoked 100+ cig]*
[at W3, DHP1_1 no longer relevant given all respondents who have still not smoked 100+ cigarettes are skipped to PO1int_1 at DAD1_1]

HPint_1
Now I'd like to ask you about your visits with health professionals.

[SOFTWARE TO RANDOMISE ORDER OF HP0A_1 HP0B_1 HP0C_1 TO RESPONDENT, USE SAME A,B,C ORDER FOR QUESTIONS HP2A_1 HP2B_1 HP2C_1]

[ADMINISTRATIVE VARIABLE:
RAND1_1 = RANDOMISATION SCHEME OF RESPONDENT]

HP0A_1
In the past 6 months, have you seen a dentist?
01 – Y GOTO HP1A_1
02 – N GOTO (NEXT RANDOM QUESTION)
06 – DK GOTO (NEXT RANDOM QUESTION)
09 – R GOTO (NEXT RANDOM QUESTION)
Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

HP1A_1
Did the dentist advise you to reduce or quit smoking?
PROBE: In the past 6 months... *[probe added at W4, Jan '07]*
01 – Y
02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime who saw a dentist in the past 6 months

HP0B_1

In the past 6 months, have you talked with a pharmacist?

01 – Y GOTO HP1B_1

02 – N GOTO (NEXT RANDOM QUESTION)

06 – DK GOTO (NEXT RANDOM QUESTION)

09 – R GOTO (NEXT RANDOM QUESTION)

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

HP1B_1

Did the pharmacist advise you to reduce or quit smoking?

PROBE: In the past 6 months... *[probe added at W4, Jan '07]*

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime who spoke with a pharmacist in the past 6 months

HP0C_1

In the past 6 months, have you seen a doctor?

01 – Y GOTO HP1C_1

02 – N GOTO (NEXT RANDOM QUESTION)

06 – DK GOTO (NEXT RANDOM QUESTION)

09 – R GOTO (NEXT RANDOM QUESTION)

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime

HP1C_1

Did the doctor advise you to reduce or quit smoking?

PROBE: In the past 6 months... *[probe added at W4, Jan '07]*

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current and former (1-6mon) smokers who have smoked 100 cig in lifetime who saw a doctor in the past 6 months

DHP2_1

IF (SB1_1=01 OR SB1_1=06 OR SB1_1=09 OR SB1_1=02 OR SB1_1=03)

THEN GOTO HP2A_1 *[self-defined current smokers, incl DK,R]*

IF SB1_1=04 THEN GOTO PO1int_1 *[those who currently do not smoke]*

HP2A_1

If you were going to quit smoking, how likely would you be to ask a DENTIST for advice? Would you be ...[READ CATEGORIES 1 – 3]

01 – Very likely

02 – Somewhat likely OR

03 – Not likely at all

06 – DK

09 – R

Coverage: Current smokers who have smoked 100 cig in lifetime

HP2B_1

If you were going to quit smoking, how likely would you be to ask a PHARMACIST for advice? Would you be ...[READ CATEGORIES 1 – 3]

01 – Very likely

02 – Somewhat likely OR

03 – Not likely at all

06 – DK

09 – R

Coverage: Current smokers who have smoked 100 cig in lifetime

HP2C_1

If you were going to quit smoking, how likely would you be to ask a DOCTOR for advice? Would you be ... [READ CATEGORIES 1 – 3]

01 – Very likely

02 – Somewhat likely OR

03 – Not likely at all

06 – DK

09 - R

Coverage: Current smokers who have smoked 100 cig in lifetime

PURCHASING PROFILE

PP1int_1

Now I would like to ask you a few questions about the cigarettes that you usually smoke and where you purchase them....

PP1_1 (revised)

[revised in W4 - Jan '07 – to account for brand changes with the discontinuation of the terms “light/mild” by tobacco manufacturers: originally provided coded answers for interviewers, now open ended]

Can you tell me the exact brand of cigarettes that you usually smoke, including the size and type?

DO NOT READ

ENTER ONE BRAND ONLY

NOTE: PROBE FOR THE RESPONDENT TO READ THE ENTIRE BRAND OF CIGARETTES, SUCH AS SIZE AND/OR TYPE

PROBE: What type of cigarette do you usually smoke, for example, menthol, mild, special blend, or platinum... *[revised probe in W4: Jan 07]*

PROBE: What size do you usually smoke, is it regular or king size?
PROBE IF CANNOT REMEMBER: Do you have a pack of cigarettes near you that you could read me the name? *[added probe in W4: Jan 07]*

01 – enter full brand GOTO PP1txt_1
02 – no regular brand GOTO PP11_1 *[W4: category 99 in previous waves]*
03 – roll-your-own/loose leaf, any brand GOTO PP11_1 *[W4: category 100 in previous waves]*
06 – DK GOTO PP11_1 *[W4: category 166 in previous waves]*
09 – R GOTO PP11_1 *[W4: category 199 in previous waves]*

Coverage: Current smokers, 100+ cig in lifetime
[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]
[W4 – Jan 2007 – Q revised from “what brand of cigarettes do you usually smoke?” and response categories completely revised from previous waves]
[W4 – Feb 1, 2007 – interviewer notes for abbreviations added to code]
[W5 – July 2007 – GOTO for response categories 02 – 09 revised to new question PP11 (previously PP3)]

~~DPP10_1~~
~~IF PP1_1 = PP1_1 THEN GOTO PP10_1~~
~~ELSE GOTO PP3_1~~

[old DPP10_1 not relevant at W4 given new coding for PP1]
[new DPP10_1 added to allow interviewer to determine if there was a brand change from the last interview]

DPP10_1 *[revised at W4, Jan '07]*
INTERVIEWER: Determine whether the old brand is the same as the new brand (DO NOT ASK RESPONDENT)

If PP1txt_2 is missing GOTO PP3_1
Show Old Brand (at last interview): _____
Show New Brand (reported in PP1txt_1): _____
01 – same GOTO PP11_1 *[revised GOTO in W5]*
02 – different GOTO PP10_1

NOTE: if any part of the name has changed (e.g. strength, size, brand) then code as 02. Do not ask the respondent.

[GOTO for response 01 revised in W5 – July 2007 – to new question PP11 (previously PP3)]

PP10_1
What is the MAIN reason that you changed the brand of cigarette that you smoke? Is it...

[READ CATEGORIES 1 - 5]

01 – for a stronger taste
02 – for a milder taste
03 – because they cost less
04 – to reduce the risks of smoking OR
05 – as a step towards quitting smoking completely
06 – Other: SPECIFY [DO NOT READ]
07 – original brand no longer available [DO NOT READ] *[new response at W4 – Jan '07]*

08 – Did not change brand [DO NOT READ] *[this response category recoded from 07 to 08 at W4, Jan '07: CAUTION IN CODING]*

66 – DK *[recoded response category to 66 from 08 at W4 – Jan '07]*

99 – R *[recoded response category to 99 from 09 at W4 – Jan '07]*

Coverage: Current smokers who smoke a different brand than at baseline, 100+ cig in lifetime
[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

PP11_1 *[added at W5 – July 2007]*

The last time you bought cigarettes, how much did you pay?

NOTE: If respondent indicates that price is not in Canadian dollars, code 02 and record both price and currency

[DO NOT READ]

01 – Enter price [PP11n_1] GOTO PP20_1

02 – Other (e.g. other currency) GOTO PP12_3 *[corrected in W5 – Aug 3, 2007]*

06 – DK GOTO PP12_1

09 – R GOTO PP12_1

Coverage: Current smokers (100+)

[Corrected routing error from “IF (ANS = 01) SKP PP11n_3, IF (ANS = 06/ANS = 09) SKP PP12_3” in W5 – August 3, 2007]

PP20_1 *[added at W5 – July 2007]*

Approximately how many cigarettes did that buy? For example, a carton of 200 or pack of 25?

PROBE: IF RESPONDENT SAYS A PACKAGE, CARTON, OR BAG RESPOND "How many cigarettes were in that [CARTON\PACK\BAG]?"

Interviewer Note: code “other” and provide details if the respondent cannot estimate number of cigarettes that they last purchased.

[DO NOT READ]

01 – enter number of cigarettes [PP20n_1]

02 – other [specify] GOTO PP12_1

06 – DK GOTO PP12_1

09 – R GOTO PP12_1

Coverage: Current smokers (100+) providing price of last cigarette purchase

PP12_1 *[added at W5 – July 2007]*

Does your usual brand have large coloured health warnings on the outside of the cigarette package?

[DO NOT READ]

01 – Yes

02 – No

06 – DK

09 – R

Coverage: Current smokers (100+)

PP19_1 *[follow-up surveys only – added at W5 – July 2007]*

Packages of cigarettes are often wrapped in cellophane and may have coloured tear strips. Are the packs of your usual brand wrapped in any of the following:

[READ CATEGORIES 01 – 03]

01 – clear cellophane with a yellow tear strip;

02 – clear cellophane with a peach tear strip; OR

03 – clear cellophane with no coloured tear strip
 04 – packages are not wrapped in cellophane [DO NOT READ]
 06 – DK
 09 – R
 Coverage: Current smokers (100+)

PP3_1

In the past 6 months did you usually buy your cigarettes in Ontario, out of province, over the Internet, through the mail, *or do you usually buy your cigarettes from family or friends?*

[DO NOT READ CATEGORIES]

01 – Ontario	GOTO PP4_1	
02 – Out of province	GOTO DPP13_1	[revised at W5]
03 – Over the internet or through the mail	GOTO DPP13_1	[revised at W5]
04 – buy from family or friends	GOTO DPP13_1	[added at W4, Jan 07] [revised at W5]
05 – do not buy usually buy own cigarettes	GOTO DPP13_1	[added at W4, Jan 07] [revised at W5]
06 – DK	GOTO PP4_1	
09 – R	GOTO PP4_1	

Coverage: Current smokers, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

[Response categories 04 and 05 added at W4 – Jan '07; italicized question wording extended at W4 – Jan '07 - to incorporate response category 04]

[revised GOTO for response categories 02,03,04,05 from PP5 to DPP13 at W5 – July '07]

PP4_1

In the past 6 months, where did you usually buy your cigarettes? [CTS REVISED]

[READ CATEGORIES 1 – 5]

[Note: please code Giant Tiger as a discount store] [Note added beginning of W3 – July '06]

PROBE: "A First Nations or Indian Reserve" [probe added in W3 - Oct 20, 2006]

01 – At convenience stores	GOTO DPP13_1	[revised GOTO in W5]
02 – At gas stations	GOTO DPP13_1	[revised GOTO in W5]
03 – At supermarkets	GOTO DPP13_1	[revised GOTO in W5]
04 – At discount stores such as Costco OR	GOTO DPP13_1	[revised GOTO in W5]
05 – On a First Nations Reserve	GOTO DPP13_1	[revised GOTO in W5]
06 – Other Specify _____	GOTO DPP13_1	[revised GOTO in W5]
07 – DK	GOTO DPP13_1	[revised GOTO in W5]
09 – R	GOTO DPP13_1	[revised GOTO in W5]

[response category 05 reworded from "Indian Reserve" to "First Nations" in W3 - October 20/06]

Coverage: Current smokers buying cigarettes in Ontario, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

[revised GOTO for all response categories from PP5 (from PP6 for response 05) to DPP13 at W5 – Aug 1'07]

DPP13_1 [follow-up surveys only; added at W5 – July 2007]
IF PP12_1=02 [usual cigarettes do not contain health warnings]
THEN GOTO PP15_1
ELSE GOTO PP13_1 [usual cigarettes contain large health warnings]

PP13_1 [follow-up surveys only; added at W5 – July 2007]
In the last 6 months, that is since [ANCHOR], have you purchased cigarettes that did NOT have large coloured health warnings on the outside of the cigarette package?

[DO NOT READ]

NOTE: If respondent hesitates to respond, see HELP2 for more probes

01 – Y GOTO PP14_1
02 – N GOTO PP17_1
06 – DK GOTO PP17_1
09 – R GOTO PP17_1

Coverage: Current smokers (100+) who's usual brand DO NOT have large coloured health warnings
[Added probe for respondents who hesitate – W5, July 11, 2007]

PP14_1 [follow-up surveys only; added at W5 – July 2007]

Can you tell me the name of the brand of cigarettes that did not contain the health warnings on the package?

ENTER ONE BRAND ONLY

NOTE: PROBE FOR THE RESPONDENT TO PROVIDE THE ENTIRE BRAND OF CIGARETTES, SUCH AS SIZE AND/OR TYPE

PROBE: Can you tell me the type of these cigarettes without the large coloured health warnings, for example, menthol, mild, special blend, or platinum...

PROBE: Can you tell me the size of these cigarettes, for example, are they regular or king size?

[DO NOT READ]

01 – ENTER BRAND GOTO PP14tx_1 GOTOPP15_1
02 – No brand name GOTO PP15_1
06 – DK GOTO PP15_1
09 – R GOTO PP15_1

Coverage: Current smokers (100+) who have purchased cigarettes without large coloured health warnings in the past 6 months (excluding those who's usual brand do not contain health warnings as this is covered in PP1)

PP15_1 [follow-up surveys only; added at W5 – July 2007]

In the past 30 days, how many packs of these cigarettes without the large health warnings did you purchase?

[DO NOT READ]

NOTE: If respondent hesitates to respond, see HELP2 for more probes

01 – ENTER NUMBER OF CIGARETTES _____ [PP15na_1 range: 0-1000]
02 – ENTER NUMBER OF PACKS _____ [PP15nb_1 range: 0-1000]
03 – ENTER NUMBER OF CARTONS _____ [PP15nc_1 range: 0-1000]
06 – DK GOTO PP16_1
09 – R GOTO PP16_1

Coverage: Current smokers who have purchased cigarettes w/o health warnings in the past 6 months, 100+ cig in lifetime

[Added probe for respondents who hesitate – W5, July 11, 2007]

PP16_1 *[follow-up surveys only; added at W5 – July 2007]*

Did you purchase these cigarettes at a convenience store or other retail location?

Probe: Did you purchase the cigarettes without health warnings at a convenience store or other retail location?

[DO NOT READ]

NOTE: If respondent hesitates to respond, see HELP2 for more probes

01 – Y

02 – N

06 – DK

09 – R

Coverage: Current smokers (100+) who have purchased cigarettes w/o health warnings in the past 6 months

[Added probe for respondents who hesitate – W5, July 11, 2007]

PP17_1 *[added at W5 – July 2007]*

In the past 6 months, have you purchased cigarettes from a non-retail source, such as out of a person's home, out of a person's vehicle, or from someone on the street?

[DO NOT READ]

NOTE: If respondent hesitates to respond, see HELP2 for more probes

01 – Y GOTO PP18_1

02 – N GOTO DPP5_1

06 – DK GOTO DPP5_1

09 – R GOTO DPP5_1

Coverage: Current smokers (100+)

[Added probe for respondents who hesitate – W5, July 11, 2007]

PP18_1 *[follow-up surveys only; added at W5 – July 2007]*

How were these cigarettes packaged? Were they,,,

PROBE: The last time you purchased these cigarettes, how were they packaged?

[READ CATEGORIES 1 – 4]

NOTE: If respondent hesitates to respond, see HELP2 for more probes

01 – in a small plastic bag like a Ziploc bag

02 – in a large plastic bag like a grocery or garbage bag

03 – in standard loose cigarette PACKAGES OR

04 – in standard cigarette cartons

05 – Other: Specify

06 – DK

09 – R

Coverage: Current smokers (100+) who have purchased from a non-retail source in the past 6 months

[Added probe for respondents who hesitate – W5, July 11, 2007]

HELP2

PROBE: The answers you provide are to be used for research purposes only. They will be kept strictly confidential.

IF ABSOLUTELY NEEDED: "You are free to refuse to answer any of the questions that I ask you"

DPP5_1 *[added at W5 – July 2007]*
IF PP4_1=05 *[usually bought cigarettes on First Nation's Reserve in past 6m]*
THEN GOTO PP6_1 *[corrected CATI error in W5 – Aug 1, 2007 – was coded as PP16 instead of PP6]*
ELSE GOTO PP5_1

PP5_1
In the past 6 months, did you ever purchase cigarettes on a First Nations Reserve?
[Q reworded from "Indian Reserve" to "First Nations" in W3 - October 20, 2006]
PROBE: "A First Nations or Indian Reserve" *[probe added in W3 - Oct 20, 2006]*
01 – Y GOTO PP6_1
02 – N GOTO DPP7_1
06 – DK GOTO DPP7_1
09 – R GOTO DPP7_1
Coverage: Current smokers not usually buying their cigarettes on an Indian Reserve, 100+ cig in lifetime
[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

PP6_1
About how many packs of cigarettes have you bought on a FRIST NATIONS RESERVE in the past 6 months?
[Q reworded from "Indian Reserve" to "First Nations" in W3 - October 20/06]
PROBE: "A First Nations or Indian Reserve" *[probe added in W3 - Oct 20/06]*
[DO NOT READ]
01 – ENTER NUMBER OF CIGARETTES _____ *[PP6na_1 range: 0-1000] [new W3]*
02 – ENTER NUMBER OF PACKS _____ *[PP6nb_1 range: 0-1000]*
[PP6num (now PP6numb) range increased from 500 to 1000 at W2 – Jan '06]
03 – ENTER NUMBER OF CARTONS _____ *[PP6nc_1 range: 0-1000] [new W3]*
06 – DK
09 – R
Coverage: Current smokers who have purchased cigarettes on an Indian Reserve in the past 6 months, 100+ cig in lifetime
[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]
[W3 – July '06 – added choice of cigarettes (01), or cartons (03); previously included packs only as response 01]

DPP7_1
IF PP3_1=03 THEN GOTO PP8_1
[respondents who already reported usually purchasing their cig through web/mail]
ELSE GOTO PP7_1

PP7_1
In the past 6 months, did you purchase any cigarettes from the internet or through the mail?
[DO NOT READ]
01 – Y GOTO PP8_1

02 – N GOTO PO1int_1
06 – DK GOTO PO1int_1
09 – R GOTO PO1int_1

Coverage: Current smokers not usually buying their cigarettes from the internet or through the mail, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

PP8_1

About how many packs of cigarettes have you bought over the INTERNET in the past 6 months?
[DO NOT READ]

01 – ENTER NUMBER OF CIGARETTES _____ [PP8na_1 range: 0-1000] *[new at W3]*

02 – ENTER NUMBER OF PACKS _____ [PP8nb_1 range: 0-1000]
[PP8num (now PP8numb) range increased from 200 to 1000 at W2 – Jan '06]

03 – ENTER NUMBER OF CARTONS _____ [PP8nc_1 range: 0-1000] *[new at W3]*

06 – DK GOTO PP9_1

09 – R GOTO PP9_1

Coverage: Current smokers who have purchased cigarettes over the internet or mail in the past 6 months, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

[W3 – July '06 – added choice of cigarettes (01), or cartons (03); previously included packs only as response 01]

PP9_1

About how many packs of cigarettes have you bought through the MAIL in the past 6 months?

[DO NOT READ]

01 – ENTER NUMBER OF CIGARETTES _____ [PP9na_1 range: 0-1000] *[new at W3]*

02 – ENTER NUMBER OF PACKS _____ [PP9nb_1 range: 0-1000]
[PP9num (now PP9numb) range increased from 200 to 1000 at W2 – Jan '06]

03 – ENTER NUMBER OF CARTONS _____ [PP9nc_1 range: 0-1000] *[new at W3]*

06 - Don't Know GOTO PO1int_1

09 - Refused GOTO PO1int_1

Coverage: Current smokers who have purchased cigarettes over the internet or mail in the past 6 months, 100+ cig in lifetime

[W3: July 26, 2006: limited coverage to those who have also smoked 100+ cig in their lifetime]

[W3 – July '06 – added choice of cigarettes (01), or cartons (03); previously included packs only as response 01]

POINT OF PURCHASE

PO1int_1

The next questions ask about stores that commonly sell cigarettes such as convenience stores, corner stores, and gas stations.

PO1_1

Over the past 7 days how often have you been to a convenience store, corner store, or gas station?

PROBE: Did you go for ANY reason (if needed: not just to buy cigarettes)?

[READ CATEGORIES 1 – 4]

01 – Not at all	GOTO DPO6_1	<i>[revised at w5]</i>
02 – One or two days	GOTO DPO5_1	<i>[revised at w5]</i>
03 – Three to five days OR	GOTO DPO5_1	<i>[revised at w5]</i>
04 – Six or seven days	GOTO DPO5_1	<i>[revised at w5]</i>
06 – DK	GOTO DPO6_1	<i>[revised at w5]</i>
09 – R	GOTO DPO6_1	<i>[revised at w5]</i>

Coverage: All respondents

[revised skip logic for response category 01,06,09 from ESint to DPO6 at W5 – July 2007]

[revised skip logic for response category 02-04 from PO2 to DPO5 at W5 – July 2007]

[added probe at W5 – July 2007]

DPO5_1 *[added at W5 – July 2007]*

IF (SB1_1=01 OR SB1_1=02 OR SB1_1=03) *[e.day, almost e.day, occasional smokers]*

THEN GOTO P05_1

IF (SB1_1=04 AND (SB3_1=01 OR SB3_1=02)) *[presently “not at all” smoker who smoked in the last month]*

THEN GOTO PO5_1

Else GOTO PO2_1

PO5_1 *[added at W5 – July 2007]*

On how many of these occasions did you purchase cigarettes?

Probe: On how many of your visits to a convenience store, corner store, or gas station in the past 7 days did you purchase cigarettes?

[READ CATEGORIES 1-4]

01 - Not at all
02 - One or two days
03 - Three to five days OR
04 - Six or seven days
06 - DK
09 - R

Coverage: Current smokers who have visited a corner store/gas station in the past 7 days

PO2_1

In the last 7 days, how often did you notice cigarette packs or other tobacco products displayed

BEHIND THE COUNTER at convenience stores, corner stores, or gas stations?

[READ CATEGORIES 01 - 04]

01 – Never
02 – Sometimes
03 – Most of the time OR
04 – Always
06 – DK
09 – R

Coverage: All respondents who have been to a convenience store, corner store, or gas station in the past 7 days

~~PO3_1 cigarette displays on the counter~~ DELETED AT W5 – JULY 2007

PO4_1

Again, in the last 7 days, how often did you notice SIGNS OR POSTERS associated with cigarette brands or tobacco companies at convenience stores, corner stores, or gas stations?

[READ CATEGORIES 01 - 04]

01 – Never

02 – Sometimes

03 – Most of the time OR

04 – Always

06 – DK

09 – R

Coverage: All respondents who have been to a convenience store, corner store, or gas station in the past 7 days

DPO6_1 *[added at W5 – July 2007]*

IF (SB1_1=1 OR SB1_1=2 OR SB1_1=3) AND SB13_1 != 04 *[e.day, almost e.day, occasional smokers, who are not in a quit attempt] [corrected routing W5 – Aug 1, 2007 – to include those not in a quit attempt SB13 ne 04]*

THEN GOTO P06b_1

ELSE GOTO PO6a_1 *[former smokers and current smokers in a quit attempt]*

PO6a_1 *[added at W5 – July 2007]*

Do you feel that seeing cigarettes in stores makes it a lot harder, somewhat harder, or not hard at all for you to resist buying cigarettes?

[DO NOT READ]

01 – a lot harder

02 – somewhat harder OR

03 – not hard at all?

06 – DK

09 – R

GOTO ESint_1

Coverage: Former smokers (100+), or current smokers in a quit attempt (100+)

PO6b_1 *[added at W5 – July 2007]*

If you were going to quit smoking, do you feel that seeing cigarettes in stores would make it a lot harder, somewhat harder, or not hard at all for you to resist buying cigarettes?

[DO NOT READ]

01 – a lot harder

02 – somewhat harder OR

03 – not hard at all?

06 – DK

09 – R

GOTO ESint_1

Coverage: current smokers (100+) not in a quit attempt

SECOND-HAND SMOKE

ESint_1

Now I would like to ask you a few questions about smoking in your home, your workplace, and in other places such as restaurants and bars.

ES1_1

Which of the following best describes the smoking behaviours in your home by the people who LIVE there... [RF]

[READ CATEGORIES 1 – 5]

- | | |
|--|----------------------------------|
| 01 - No one smokes anywhere on the property | GOTO ES1b_1 [revised GOTO in W4] |
| 02 - No one smokes indoors at all | GOTO ES1b_1 [revised GOTO in W4] |
| 03 - People smoke in certain rooms only | GOTO ES2b_1 |
| 04 - People smoke except when young children are present OR | GOTO ES2b_1 |
| 05 - People smoke anywhere in the home | GOTO ES2b_1 |
| 06 - Both response 3 and 4: People smoke in certain rooms except when children present [DO NOT READ] | GOTO ES2b_1 |
| [response added at W5, July 2007] | |
| 07 - DK | GOTO ES2b_1 |
| 09 - R | GOTO ES2b_1 |

Coverage: All respondents

[skip logic for 01 and 02 response categories were revised to goto the new question below in W4 – Jan 24, 2007; previously went to ES2a]

[response category 06 added at W5 – July 2007; response 07 – DK was renumbered in W5 – July 2007 – to account for new category]

ES1b_1 [added in W4 – Jan 24, 2007]

Do you ever allow VISITORS to smoke inside your home?

- | | |
|---------|---------------------------------|
| 01 - Y | GOTO ES2a_1 |
| 02 - N | GOTO ES3_1 [revised GOTO in W5] |
| 06 - DK | GOTO ES2a_1 |
| 09 - R | GOTO ES2a_1 |

Coverage: Respondents who live in homes where inhabitants do not smoke [ES1 = 1,2]

[revised skip logic for response category 02 from DTY1 to ES3 at W5 – July 2007]

ES2a_1

Thinking about these REGULAR VISITORS, how often does someone smoke inside your home? Is it... [RF] [added “these” to the question wording in W4 – Jan 24, 2007]

[READ CATEGORIES 1 – 6]

- | | |
|--|---------------------------------|
| 01 - Daily or almost every day | GOTO ES3_1 [revised GOTO in W5] |
| 02 - Three or four times a week | GOTO ES3_1 |
| 03 - One or two times a week | GOTO ES3_1 |
| 04 - Less than once a week to once a month | GOTO ES3_1 |
| 05 - Less than once a month OR | GOTO ES3_1 |
| 06 - Not at all | GOTO ES3_1 |
| 07 - DK | GOTO ES3_1 |

09 – R

GOTO ES3_1

Coverage: Respondents who live in homes where inhabitants do not smoke [ES1 = 1,2] *but allow visitors to smoke inside their home* [ES1b = 1,6,9]
[revised in W4 – Jan 24, 2007 - coverage restricted to those who allow visitors to smoke inside their home, incl DK/R in ES1b (code to include ES1b=02 as “not at all” to this question)]
[GOTO for all response categories revised to ES3 at W5 – July 2007 (previously DTY1)]

ES2b_1

Including YOURSELF, family members and regular visitors, how often does someone smoke inside your home? Is it... [RF]

[READ CATEGORIES 1 – 5]

01 – Daily or almost every day

02 – Three or four times a week

03 – One or two times a week

04 – Less than once a week to once a month OR

05 – Less than once a month

06 – DK

09 – R

Coverage: Respondents who live in homes where people smoke [ES1 ne 1,2]

DTY1_1, DDTY1_1, TY1_1

DELETED AT W5, JULY 2007

ES3_1

Which of the following best describes the behaviours of people smoking in the PRIVATE vehicle you travel in the most?

[READ CATEGORIES 1 – 5]

PROBE: “That is, for everyone that travels in the vehicle”

IF RESPONDENT DOES NOT HAVE A CAR, Probe2: “I am interested to know about the vehicle that you travel in the most”

01 – No one ever smokes

02 – People smoke except when children are present

03 – People smoke when they are the only person in the car [revised response 03 at W3]

04 – People smoke whenever they want OR

05 – I do not travel in a private vehicle [USE PUBLIC TRANSIT]

06 – DK

09 – R

Coverage: All respondents

[response category revised at W3–July 2006; was “...smoke except when other adults present”]
[added probes at W5 – July 2007]

ES4int_1

Now I would like to ask about smoking in restaurants, bars and taverns in Ontario.

[Added “...in Ontario” in W4 – Jan 24, 2007]

ES4_1

How often during the past 6 months did you go to a restaurant? This includes any restaurant with seating, except food courts. Would you say...

Probe: In Ontario, how often did you go to a restaurant in the past 6 months?”

[READ CATEGORIES 1 – 5]

01 – More than once a week GOTO ES14_1 [revised GOTO at W5]

02 – About once a week GOTO ES14_1 [revised GOTO at W5]

03 – One to four times a month GOTO ES14_1 [revised GOTO at W5]

04 – Less than once a month OR GOTO ES6_1

[GOTO changed to response 04 to ES6 from ES5 at W2 – Jan '06]

05 – Not at all GOTO ES6_1

06 – DK GOTO ES14_1 [revised GOTO at W5]

09 – R GOTO ES14_1 [revised GOTO at W5]

Coverage: All respondents

[Probe added in W4 - Jan 24, 2007]

[revised GOTO for response categories 01,02,03,06,09 from ES5 to ES14 at W5 – July 2007]

~~ES5_1 – exposure in restaurants~~ DELETED FROM FOLLOW-UP SURVEYS AT W5 – JULY '07

ES14_1 [NEW at beginning of Wave 3 – July 2006]

In the past 30 days, when you have been to a restaurant, how often did you sit OUTSIDE on a PATIO? Would you say...

[READ CATEGORIES 1 – 3]

01 – Most of the time GOTO ES15_1

02 – Some of the time GOTO ES15_1

03 – Not at all GOTO ES6_1

06 – DK GOTO ES15_1

09 – R GOTO ES15_1

Coverage: All respondents who have been to a restaurant in the past 30 days

ES15_1 [NEW at beginning of Wave 3 – July 2006]

In the past 30 days, have you been OUTSIDE on a PATIO of a restaurant where other people were smoking around you?

[DO NOT READ]

01 – Y

02 – N

06 – DK

09 – R

Coverage: All respondents who have been to a PATIO of a restaurant in the past 30 days

ES6_1

How often during the past 6 months did you go to a bar or tavern? Would you say...

[READ CATEGORIES 1 – 5]

Probe: In Ontario, how often did you go to a bar or tavern in the past 6 months?"

[Probe added in W4 - Jan 24, 2007]

01 – More than once a week GOTO ES7_1

02 – About once a week GOTO ES7_1

03 – One to four times a month GOTO ES7_1

04 – Less than once a month OR GOTO ES8int_1

05 – I never go to bars or taverns GOTO ES8int_1
06 – DK GOTO ES7_1
09 – R GOTO ES7_1
Coverage: All respondents

ES7_1

In the past 30 days, have you been INSIDE a bar or tavern where other people were smoking around you?

Probe: There is a province-wide smoking ban [that came into force on May 31, 2006]; but we are looking to see if people are still being exposed to second-hand-smoke inside.

[Probe added in W3 – July 14, 2006]

Probe2: In the past 30 days, have you been inside a bar or tavern in Ontario where other people were smoking around you?

[Probe2 added in W4 – Jan 24, 2007]

[DO NOT READ]

01 – Y
02 – N
06 – DK
09 – R

Coverage: All respondents who have been to a bar or tavern in the past 30 days

ES16_1 *[NEW at beginning of Wave 3 – July 2006]*

In the past 30 days, when you have been to the bar or tavern, how often did you sit OUTSIDE on a PATIO? Would you say...

[READ CATEGORIES 1 – 3]

01 – Most of the time GOTO ES17_1
02 – Some of the time GOTO ES17_1
03 – Not at all GOTO ES8int_1
06 – DK GOTO ES17_1
09 – R GOTO ES17_1

Coverage: All respondents who have been to a bar or tavern in the past 30 days

ES17_1 *[NEW at beginning of Wave 3 – July 2006]*

In the past 30 days, have you been OUTSIDE on a PATIO of a bar or tavern where other people were smoking around you?

[DO NOT READ]

01 – Y
02 – N
06 – DK
09 – R

Coverage: All respondents who have been to a PATIO of a bar or tavern in the past 30 days

ES8int_1

Now I am going to ask you some questions about smoking at your workplace or job.

First, do you work for pay outside your home? [CAMH]

[DO NOT READ]

01 – Y GOTO ES12_1
02 – N GOTO ES18_1 *[new GOTO at W4]*
03 – Do not work for pay GOTO ES18_1 *[new GOTO at W4]*

06 – DK GOTO ES18_1 [new GOTO at W4]
09 – R GOTO ES18_1 [new GOTO at W4]

Coverage: All respondents

[changed skip logic for response categories 02-09 at W4 – Jan '07 - for new ES questions; previously skipped to TYintro now to ES18]

ES12_1

Over the past 6 months, that is since [ANCHOR], has your job or position changed?

[DO NOT READ]

01 – Y

02 – N

06 – DK

09 – R

Coverage: All respondents who work for pay outside the home

ES9_1

When you are at work, where do you spend most of your time? Are you ...

[READ CATEGORIES 1 – 3]

01 – Mainly indoors GOTO ES10a_1

02 – Mainly in a vehicle OR GOTO ES10c_1

03 – Mainly outdoors GOTO ES10a_1

[GOTO for response 03 changed to ES10a from ES10b at W3 (July06)–now ask indoor/outdoor]

04 – Equally indoors and outdoors [DO NOT READ] GOTO ES10a_1

05 – equally indoors and in a vehicle [DO NOT READ] GOTO ES10a_1 [added R at W5]

06 – DK GOTO ES11_1

09 – R GOTO ES11_1

Coverage: All respondents who work outside the home

[response category 05 added at W5 – July 2007]

ES10a_1 (ES20a) (Revised wording for Wave 3 – July 2006)

[NOTE: variable renamed to ES20a in TECHREPORT as the revisions make this essentially a new question]

Which of the following describes the policy on smoking INDOORS where you work?

Probe: There is a province-wide smoking ban [that came into force on May 31, 2006]; but not all indoor workplaces are covered.

Probe2: For example, hotel rooms

[Probes added at W3 – July 14, 2006; also added "...INDOORS..." to question wording in W3]

[READ CATEGORIES 1-4]

01 - smoking is allowed anywhere indoors; [revised wording at W3]

02 - smoking is allowed only in certain areas indoors; [revised wording at W3]

03 - smoking is not allowed anywhere indoors OR [revised wording at W3]

04 - there are no specific rules or policies for smoking indoors [revised in W3]

05 – Do not work indoors [DO NOT READ] [response 05 added in W4 – Jan 24/07]

06 - DK

09 - R

Coverage: All respondents who spend the majority of their time at work indoors or outdoors

(ES9=1,3,4)

[W3 – July 2006: Response categories modified from previous Waves to be specific to indoors; SEE PREVIOUS SURVEYS FOR EARLIER WORDING]

[Revised coverage at W3 – July 2006 – to include all indoor and outdoor workers; all respondents sent to ES10b at W3 (July 06) instead of ES11 as in previous surveys]

IF ES9_1=05 GOTO ES10c_1 *[added at W5 – July 2007]*

ELSE GOTO ES10b_1 (ES20b_1)

ES10b_1 (ES20b_1) (Revised wording for Wave 3)

[NOTE: variable renamed to ES20b_1 in TECHREPORT]

Which of the following describes the policy on smoking OUTDOORS where you work?

[READ CATEGORIES 1-4]

01 - smoking is allowed anywhere outdoors on the property

02 - smoking is allowed only in certain areas outdoors on the property;

03 - smoking is not allowed anywhere on the property

04 - there are no specific rules or policies for smoking outdoors

06 - DK

09 - R

Coverage: All respondents who spend the majority of their time at work indoors or outdoors

(ES9=1,3,4)

[W3 – July 2006: Response categories modified from previous Waves to be specific to outdoors (SEE PREVIOUS SURVEYS); underlined text was added to response categories]

[Revised coverage at W3 – July 2006 – to include all indoor and outdoor workers]

ES22_1 *[added at W5 – July 2007]*

Is smoking allowed around doorways to your workplace?

[DO NOT READ]

01 – Yes

02 – No

06 – DK

09 – R

GOTO ES11_1

Coverage: respondents who work mainly indoors or outdoors

ES10c_1

Which of the following describes the policy or rules on smoking inside the vehicle in which you work?

[READ CATEGORIES 1 – 3]

01 – Smoking is allowed inside the vehicle; GOTO ES11_1

02 – Smoking is not allowed inside the vehicle OR GOTO ES11_1

03 – There are no specific rules or policies GOTO ES11_1

06 – DK GOTO ES11_1

09 – R GOTO ES11_1

Coverage: All respondents who work outside the home, mainly in a vehicle

ES11_1

In the past 30 days, have you been exposed to other people's smoke at work?

Probe: There is a province-wide smoking ban [that came into force on May 31, 2006]; but not all workplaces are covered.

Probe2: For example, outdoor workplaces and some indoor workplaces like hotel rooms

[DO NOT READ]

[Probes added at W3 – July 14, 2006]

01 – Y

02 – N

03 – *Do not work*

06 – DK

09 – R

Coverage: All respondents who work outside home

ES13_1

Over the past 6 months, how have the smoking policies changed at your workplace? Would you say...

[READ CATEGORIES 1 – 3]

01 – There have been no changes

02 – There are FEWER restrictions on smoking OR

03 – There are MORE restrictions on smoking

06 – DK

09 – R

Coverage: All respondents who work outside home

ES18_1

[NEW AT W4 – Jan '07]

In the past 30 days, have you been exposed to other people's smoke in ANY INDOOR public place, other than your workplace, or in bars or restaurants?

PROBE: For example, in a sport complex or concert hall

PROBE2: "By being exposed, I mean even just noticing someone else's tobacco smoke"

NOTE: Outdoor enclosed spaces are outdoors unless there is a door that physically separates the two environments

IF NEED TO DEFINE INDOOR/OUTDOOR: "Does the [bus shelter/building/etc] have a door that closes completely?: If yes, then "indoor", if no, then "outdoor"

01 – Y

02 – N

06 – DK

09 – R

Coverage: All respondents

[added probe2 and definition at W5 – July 2007]

ES19_1

[NEW AT W4 – Jan '07]

In the past 30 days, have you been exposed to other people's smoke in ANY OUTDOOR public place, other than your workplace, or on patios of bars or restaurants?

PROBE: For example, in a park, or on the sidewalk

PROBE2: "By being exposed, I mean even just noticing someone else's tobacco smoke"

NOTE: Outdoor enclosed spaces are outdoors unless there is a door that physically separates the two environments

IF NEED TO DEFINE INDOOR/OUTDOOR: "Does the [bus shelter/building/etc] have a door that closes completely?: If yes, then "indoor", if no, then "outdoor"

01 – Y
02 – N
06 – DK
09 – R

Coverage: All respondents

NOTE: IN FOLLOW-UP CODE, ES18_1 AND ES19_1 COME BEFORE ES13_1 PRIOR TO APR 2, 2007; THIS WAS SUBSEQUENTLY REVISED TO COME AFTER ES13 FOR BETTER FLOW
[added probe2 and definition at W5 – July 2007]

TYint_1

Now I would like to ask you about your general opinions on smoking

TYPOLOGY

~~TY2_1~~ DELETED AT W5 – JULY 2007

TY3_1

Restrictions should be increased to help smokers quit. Do you... [Poland et al]

[READ CATEGORIES 1 – 4]

01 – Strongly agree
02 – Somewhat agree
03 – Somewhat disagree OR
04 – Strongly disagree
06 – DK
09 – R

Coverage: All respondents

~~TY4_1~~ DELETED AT W5 – JULY 2007

DTY5_1

IF (SB1_1=01 OR SB1_1=06 OR SB1_1=09 OR SB1_1=02 OR SB1_1=03) AND (SB2_0=01 | SB2_1=01) *[current smoker (100+), incl DK,R]*

THEN GOTO TY6_1 *[revised GOTO at W5 – July 2007 – from TY5 to TY6]*

IF (SB1_1=04 AND (SB3_1=01 OR SB3_1=02)) AND (SB2_0=01 | SB2_1=01)

THEN GOTO TY6_1 *[“not at all” current smoker (100+)] [revised GOTO at W5 – July 2007 – from TY5 to TY6]*

IF (SB1_1=04 AND (SB3_1=03 OR SB3_1=04)) OR (SB2_0=02|SB2_1=2)

THEN GOTO TY8_1 [former smokers (1-6mon) and those who have not smoked 100+ cig]

~~TY5_1~~ DELETED AT W5 – JULY 2007

TY6_1

Do you care if most people know you smoke? [Poland et al]

[DO NOT READ]

01 – Y
02 – N
06 – DK

09 – R
Coverage: Current Smokers who have smoked 100 cigs in their life

~~TY7_1~~ DELETED AT W5 – JULY 2007

TY8_1
Everything possible should be done to reduce smoking. Do you... [Poland et al]

[READ CATEGORIES 1 – 4]

- 01 – Strongly agree
- 02 – Somewhat agree
- 03 – Somewhat disagree OR
- 04 – Strongly disagree
- 06 – DK
- 09 – R

Coverage: All respondents

DTY9_1
IF (SB1_1=01 OR SB1_1=06 OR SB1_1=09 OR SB1_1=02 OR SB1_1=03) AND (SB2_0=01 | SB2_1=01) [current smoker (100+), incl DK,R]
THEN GOTO TI_int_1
IF (SB1_1=04 AND (SB3_1=01 OR SB3_1=02)) AND (SB2_0=01 | SB2_1=01)
THEN GOTO TI_int_1 [“not at all” current smoker (100+)]

~~TY9_1~~ DELETED AT W5 – JULY 2007

TY10_1
How easy or difficult would it be for you to ask someone not to smoke in a non-smoking area?

[READ CATEGORIES 1 – 5]

- 01 – Very easy
- 02 – Somewhat easy
- 03 – Somewhat difficult
- 04 – Very difficult OR
- 05 – You wouldn't ask
- 06 – DK
- 09 – R

Coverage: Former smokers and ALL non-smokers, including all those who have not smoked 100+ cigarettes in lifetime

~~TY11_1~~ DELETED AT W5 – JULY 2007

~~TY12_1~~ DELETED AT W5 – JULY 2007

~~TY13_1~~ [deleted at W4 – Jan 07]

~~TY14_1 REVISED~~ DELETED AT W5 – JULY 2007

TOBACCO INDUSTRY

TI_int_1

Now I would like to ask you about advertising of tobacco products.

[W4 (Jan 24/07) deleted "...a few questions..." from the intro above as some respondents only get one question]

[W5 – July 2007 – revised "events sponsored by tobacco companies" to "advertising of tobacco products"]

TI4_1

[added at W5 – July 2007]

Have you seen any advertising of tobacco products in the last 30 days: in Canadian newspapers or magazines? Canadian magazines are those that focus on Canadian people or stories such as MacLeans, Chatelaine, Flare and Readers' Digest. *[modified July 18th with specific info for CDN magazines]*

NOTE: See help for sample list of Canadian magazines

[DO NOT READ]

01 – Yes

02 – No

06 – DK

09 – R

Coverage: All respondents

TI5_1

[added at W5 – July 2007]

Have you seen any advertising of tobacco products in the last 30 days: in Canadian buses or subway stations or on outdoor billboards?

[DO NOT READ]

01 – Yes

02 – No

06 – DK

09 – R

Coverage: All respondents

HELP:

[added list in W5 – July 17, 2007]

Canadian Magazines (NOT a complete list)

7 Jours/TV 7 Jours

Canadian Living

Coup de Pouce

Financial Post Magazine

Harrowsmith

Homemaker's/Madame au Foyer

Le Lundi

Reader's Digest

Saturday Night

The Medical Post

TV Guide

Western Living

Canadian Business

Chatelaine

Elle Québec

Frank Magazine

Hockey News

L'Actualite

Maclean's

Report on Business Magazine

Selection du Reader's Digest

Toronto Life

TV Hebdo

DTI1_1, TI1, TI2, TI3 – DELETED AT W5 – July 2007

MASS MEDIA

MM1int_1

Now I want to ask you about the media more generally.

MM1_1

First, thinking about news stories related to smoking or tobacco companies that might have been on TV, radio, or in the newspapers. In the past 30 days, that is since [ANCHOR] how often have you seen or heard a news story about smoking?

[READ CATEGORIES 1 – 4]

01 – Never

02 – Sometimes

03 – Often OR

04 – Very often

05 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]

06 – DK

09 – R

Coverage: All respondents

[THE FOLLOWING MASS MEDIA QUESTIONS ARE LIKELY TO CHANGE IN THE COMING WAVE AS WELL AS IN FUTURE WAVES AS THE CURRENT CAMPAIGNS AND SLOGANS CHANGE. THE MINISTRY OF HEALTH IS CURRENTLY IN THE PROCESS OF GENERATING NEW SLOGANS FOR CAMPAIGNS BEING RELEASED IN THE NEW YEAR]

MM2int_1

The next several questions are about anti-smoking advertisements. In the past 30 days, have you seen any anti-smoking advertisement or campaign taking place in Ontario with the following themes or slogans:

MM2_1

An ad about stop smoking medications like the patch or gum?

[DO NOT READ CATEGORIES]

01 – Y

02 – N

03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]

06 – DK

09 – R

Coverage: All respondents

MM3_1

An ad showing kids putting up a banner with facts about smoking and the slogan “stupid.ca”?

INTERVIEWER NOTE: if necessary, remind respondent “IN THE PAST 30 DAYS...”

[DO NOT READ CATEGORIES]

01 – Y

02 – N

03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]

06 – DK

09 – R

Coverage: All respondents

[Revised to capture new creative for this MM campaign. Substituted “An ad about kids doing risky things with the message: “What’s more stupid?”” with current text - W2 June 2, 2006]

[“Interviewer Note” added in W4-Jan 24/07]

MM4_1 *[MM4 Deleted February 1, 2006: Ad about a former waitress...support SFO]*

MM5_1 *[MM5 deleted May 1, 2006: Ad about Bob...]*

MM6_1 *[MM6 Deleted February 1, 2006: smoke-rings]*

MM7_1

[Added February 1, 2006]

An ad showing people overcoming life challenges, including throwing away a pack of cigarettes with the message: "you have it in you".

INTERVIEWER NOTE: if necessary, remind respondent “IN THE PAST 30 DAYS...”

[note added in W4 – Jan 24/07]

[DO NOT READ CATEGORIES]

01 – Y

02 – N

03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]

06 – DK

09 – R

Coverage: All respondents

MM8_1

[Added February 1, 2006]

An ad showing different people seeing messages about appointments connected to quitting smoking with the message: "what's your quit date?"

INTERVIEWER NOTE: if necessary, remind respondent “IN THE PAST 30 DAYS...”

[note added in W4 – Jan 24/07]

[DO NOT READ CATEGORIES]

01 – Y

02 – N

03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]

06 – DK

09 – R

Coverage: All respondents

MM9 *[MM9 Deleted January 5, 2007: Heather Crowe ad (was added May 1/06)]*

MM10_1

[false MM question added at W3 July 2006]

An ad showing a young child using alphabet blocks to spell out the names of health problems associated with smoking?

INTERVIEWER NOTE: if necessary, remind respondent “IN THE PAST 30 DAYS...”

[note added in W4 – Jan 24/07]

[DO NOT READ CATEGORIES]

01 – Y
02 – N
03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]
06 – DK
09 – R
Coverage: All respondents

MM11 *[MM11 Deleted January 5, 2007: support for Ontario smoking ban (was added June 2/06)]*

MM13_1 [Added January 5, 2007]
An ad showing a woman smoking near a window. Her smoke travels through the house and clings to a teddy bear that is picked up by a little girl with the message “Make your home smoke-free”?
INTERVIEWER NOTE: if necessary, remind respondent “IN THE PAST 30 DAYS...”
[note added in W4 – Jan 24/07]
DO NOT READ CATEGORIES
01 – Y
02 – N
03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]
06 – DK
09 – R
Coverage: All respondents

MM15_1 [Added April 27, 2007]
An ad where a boy passes his dad a CD with a recorded message encouraging his dad to quit smoking?
INTERVIEWER NOTE: if necessary, remind respondent “IN THE PAST 30 DAYS...”
DO NOT READ CATEGORIES
01 – Y
02 – N
03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]
06 – DK
09 – R
Coverage: All respondents

MM12_1 [Added June 2, 2006]
Have you seen or heard of radio or newspaper ads providing tips and support for quitting? For example, “Quit Tip #6: Change your routine?”
INTERVIEWER NOTE: if necessary, remind respondent “IN THE PAST 30 DAYS...”
[note added in W4 – Jan 24/07]
[DO NOT READ CATEGORIES]
01 – Y
02 – N
03 – Do not watch tv/read newspaper [DO NOT READ CATEGORY]
06 – DK
09 – R
Coverage: All respondents

~~MM14_1 – driven to quit~~ [Deleted W5 – July 2007; added Jan 23, 2007]

DEMOGRAPHICS

DEint_1

Finally, these last questions are for classification purposes only.

DDE1_1

IF DE1 = 02 | DE1 = 03 THEN GOTO DE1_1

ELSE GOTO DDE3_1

DE1_1

First, in what year were you born?

01 - _____ ENTER YEAR [DE1yr_1 range: 1900-1990]

02 – DK

03 – R

GOTO DDE3_1

GOTO DDE1a_1

GOTO DDE1a_1

Coverage: Respondents not providing yr of birth on baseline

DDE1a_1

If DE1a = 07 | DE1a = 09 THEN GOTO DE1a_1

ELSE GOTO DDE3_1

DE1a_1

Ok, can you tell me to which age group you belong? Are you...

[READ CATEGORIES 1-6]

01 – 18 – 24

02 – 25 – 34

03 – 35 – 44

04 – 45 – 54

05 – 55 – 64 OR

06 – 65 years of age and over

07 – DK

09 – R

Coverage: Respondents not providing yr of birth on baseline and those who refuse to give exact yr of birth

DDE3_1

IF QB5_1 ~= (1,2,3,4,5,6,9) THEN GOTO DE3_1

ELSE GOTO DE4_1

DE3_1

In general, would you say your health is:

[CCHS]

[READ CATEGORIES 1 – 5]

01 – Excellent

02 – Very good

03 – Good

04 – Fair OR
05 – Poor
06 – DK
09 – R
Coverage: non-current smokers (parallel with qb5_1 above)

DE4_1
At present are you married, living with a partner, widowed, divorced, separated, or have you never been married?
[READ CATEGORIES IF NECESSARY]
01 – Married or living with a partner
02 – Widowed
03 – Divorced
04 – Separated
05 – Never been married
06 – DK
09 – R
Coverage: All respondents

DE9_1 *[added at W5 – July 2007]*
How would you describe your sense of belonging to your local community? Would you say:
PROBE: How strongly do you feel that you are part of your local community?
[READ CATEGORIES 01 – 04]
01 – Very strong,
02 – Somewhat strong,
03 – Somewhat weak, OR
04 – Very weak
06 – DK
09 – R
Coverage: All respondents

DE5a_1
Finally, how many children under 18 years of age live in your household?
01 - _____ Enter number [DE5an_1num range: 0-15]
06 – DK
09 – R
Coverage: All respondents

DDE6_1
IF address = “ ” {no address given at baseline} THEN GOTO DE6a_1
IF Q4eb_1 = 02 {address given at baseline, did not receive payment}
THEN GOTO DE6b_1
IF Q4i_1 = 03 | Q4i_1 = 04 THEN GOTO DE7_1 {does not want to provide address}
ELSE GOTO DE6c_1 {baseline address and follow-up payment}

DE6a_1

Thank you again for answering my questions. We would like to send you the \$15 honourarium for participating in this survey. Can you tell me your name, address and postal code where you receive your mail?

PROBE: This is a UNIVERSITY based research study. Your answers to this survey will be kept absolutely confidential. All personal information, including your name and address, will be kept strictly confidential and will not be shared with any person or group that is not associated with this survey.

[MAKE SURE THAT SPELLING IS CORRECT—REPEAT BACK TO RESPONDENT TO CHECK]

01 – SPECIFY ADDRESS: _____ GOTO DEFN_1 – DEAcnt_1

02 – NO GOTO DE7_1

Coverage: Respondents with no address on file

DE6b_1

Thank you again for answering my questions. We are sorry that you have not yet received your cheque for this survey. Did your address change since the last time we called you, about 6 months ago?

01 – Y SPECIFY NEW ADDRESS/CONTACT INFO _____

GOTO DEFN_1 – DEPCconf_1 and DEAcnt

02 – N CONFIRM STORED ADDRESS/CONTACT NUMBER

GOTO REPAY_1

Coverage: Respondents with address on file but no cheque received

REPAY_1

[CONFIRM ADDRESS]

Please call us if you have not received the cheque by next week and we will ensure that you receive it. Our toll-free number is 1-800-303-2822.

DE6c_1

Thank you again for answering my questions. About 6 months from now – in [MONTH + 6] – we plan to contact you again. Before calling you, we will send you another cheque for \$15, as a token of our thanks.

To make sure that the cheque for the next survey reaches you, we would like to keep your contact information up to date. Do you expect that your address or phone number to change at any time over the next year?

01 – YES SPECIFY ADDRESS/CONTACT INFO: _____

GOTO DEFN_1 – DEAcnt_1

02 – NO [CONFIRM ADDRESS from baseline]

Coverage: All respondents who received their cheque

DE7_1

Can you just tell me your postal code?

[PROBE: This information will be used for regional classification purposes only]

01 - _____ ENTER 6-DIGIT POSTAL CODE GOTO DEPCconf_1
06 – DK GOTO DE8_1
09 – No/R GOTO DE8_1
Coverage: Respondents who do not want to provide full address

DE8_1

Would you be willing to provide me with the first 3 digits of your postal code?

PROBE: As a reminder, this information will be kept completely confidential and will not be shared with any person or group that is not associated with this survey. This information will be used to help us understand regional differences in behaviours and beliefs related to tobacco.

01 - _____ ENTER 3-DIGIT POSTAL CODE GOTO DEPCconf_1
06 – DK GOTO DCONFIRM_1
09 – No/R GOTO DCONFIRM_1
Coverage: Respondents who do not want to provide full postal code

DEFN_1 – DEPCconf_1

DDEID_1 *[Added December 2005]*

IF !((address = " ") | (address = "")) GOTO DDEAc_1 (name/address previously provided)

IF (Q4j_1 = 01) GOTO DDEAc_1 (provided nickname/initials during previous call)

IF (DE6a_1 = 01) GOTO DDEAc_1 (provided full address at end of survey)

ELSE GOTO DEID_1

DEID_1 *[Added December 2005]*

Can you please provide us with something that uniquely identifies you so that when we call back we will be able to reach you?

For example, just your first name, a nickname or your initials?

01 - Enter name/initials (DEIDtx_1)

02 – Refused GOTO DDEAc_1

DDEAc_1

IF DE6a_1=01 | DE6b=01 | DE6c=01 | DEAcont=02 THEN GOTO DEAcont_1

IF DEAcont=01 THEN GOTO DEAcont2_1

DEAcon_1

Is there an alternate number that you can also be reached at?

01 - Yes [Enter: DEAltnum (###) ### - #####]

02 – No GOTO COMMENTS_1

DEAc2_1

Last time we spoke, you told us that an alternate phone number that you can be reached at was [DEAltnum]. Is this still your alternate phone number?

01 – Yes

GOTO COMMENTS_1

02 – No [Enter: DEAltnum_1 (###) ### - #####] GOTO COMMENTS_1

COMMENTS_1

If respondent would like to provide comments, enter them here. Interviewer - Do not ask respondent if they have any comments.

Q_end

Thank you very much for participating in this survey. We will contact you again in about 6 months time. If you would like any more information about this project, you can phone us at our toll-free number, 1-800-303-2822. Goodbye.

THANK AND TERMINATE

A7. [POSTAL CODE]

A8. [INTERVIEW COMPLETION TIME: HH:MM]

A9. [SURVEY LENGTH]

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