

California Healthy Kids Survey

● Section D ●

This section contains questions about tobacco use, attitudes, and your experiences with tobacco education at school.

- D1. Have you **ever** smoked cigarettes daily, that is, at least one cigarette every day for **30 days**?
- A) No
 - B) Yes
- D2. Did you **ever** smoke to control your weight?
- A) No
 - B) Yes
- D3. During the past **30 days**, on the days you smoked, how many cigarettes did you smoke **per day**?
- | | |
|---|------------------------------------|
| A) I did not smoke cigarettes during the past 30 days | D) 2 to 5 cigarettes per day |
| B) Less than 1 cigarette per day | E) 6 to 10 cigarettes per day |
| C) 1 cigarette per day | F) 11 to 20 cigarettes per day |
| | G) More than 20 cigarettes per day |
- D4. Have you smoked 100 cigarettes in your life?
- A) No
 - B) Yes

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- D5. If you smoked cigarettes during the past **30 days**, how did you **usually** get them? (*Select Only One Response.*)
- | | |
|--|--|
| A) I did not smoke cigarettes in the past 30 days | E) I borrowed (or bummed) them from someone else |
| B) I bought them in a store such as a convenience store, supermarket, or gas station | F) I took them from a store or family member |
| C) I bought them from a vending machine | G) A friend gave them to me |
| D) I gave someone else money to buy them for me | H) A person 18 years or older gave them to me |
| | I) Other people gave them to me |
| | J) I got them some other way |
- D6. During the past **30 days**, on how many days did you smoke any cigars, cigarillos, or little cigars?
- | | |
|----------------|------------------|
| A) 0 days | D) 6 to 9 days |
| B) 1 to 2 days | E) 10 to 19 days |
| C) 3 to 5 days | F) 20 to 30 days |
- D7. If you now smoke cigarettes, would you like to quit smoking?
- A) I don't smoke cigarettes; does not apply
- B) No
- C) Yes
- D8. How many times have you tried to quit smoking cigarettes?
- A) I don't smoke cigarettes; does not apply
- B) 0 times
- C) 1 time
- D) 2 to 3 times
- E) 4 or more times

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If you used tobacco during the **past 12 months**, did you do any of the following things at school to get help to quit using?

		I did not use tobacco	No	Yes
D9.	Go to a special group or class	A	B	C
D10.	Talk to an adult at your school about how to quit	A	B	C
D11.	Talk to a peer helper about how to quit	A	B	C

D12. How hard would it be for you to refuse or say “no” to a friend who offered you a cigarette to smoke?

- A) Very hard
- B) Hard
- C) Easy
- D) Very easy

During the **past 12 months**, did you do any of these things at **school**?

		No	Yes	Don't know
D13.	Have lessons about tobacco and its effects on the body	A	B	C
D14.	Practice different ways to refuse or say "no" to tobacco offers	A	B	C

D15. How likely do you think it is that you will smoke one or more cigarettes in the **next year**?

- A) I am sure it will **not** happen
- B) It probably will **not** happen
- C) There is an even chance (50-50) that it will happen
- D) It probably will happen
- E) It will happen for sure

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D16. About how many adults you know smoke cigarettes?

- A) None of them
- B) Some
- C) Many
- D) Most or all

Please indicate whether or not you agree with the following statements:

		Very much agree	Agree	Disagree	Very much disagree
D17.	Smoking makes kids look grown up.	A	B	C	D
D18.	Smoking makes your teeth yellow.	A	B	C	D
D19.	Smoking is cool.	A	B	C	D
D20.	Smoking makes you smell bad.	A	B	C	D
D21.	Smoking helps you make friends.	A	B	C	D
D22.	Smoking is bad for your health.	A	B	C	D
D23.	Smoking helps you relax.	A	B	C	D
D24.	Smoking helps control your weight.	A	B	C	D