▤ Codebook ▾

▤ Data Dictionary Codebook   03/13/2022 8:24pm

⌃ Collapse all instruments

#	Variable / Field Name	Field Label / *Field Note*	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)
Instrument: **Followup1** (followup1)		🖳 Enabled as survey	⌃ Collapse
1	record_id	Record ID	text
2	study_id	Study_ID	text Custom alignment: LV Field Annotation: @HIDDEN
3	smoking_intro_1	Smoking The following questions are about your experiences and insights with smoking commercial cigarettes (not ceremonial tobacco). Everyone's experience with smoking is personal and unique.	descriptive
4	cigs_smoked_1	Approximately how many cigarettes have you smoked in your life?	radio, Required 1 | 0 (I have never smoked any cigarettes) 2 | 1 to 10 cigarettes 3 | 11 to 19 cigarettes 4 | 20 to 25 cigarettes (This is about one pack of cigarettes) 5 | 26 to 50 cigarettes 6 | 51 to 99 cigarettes (This is about 4-5 packs of cigarettes) 7 | 100 or more 8 | I don't know Custom alignment: LV
5	curr_smoke_1 Show the field ONLY if: [cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8'	How often do you currently smoke cigarettes?	radio, Required 1 | Daily or almost daily 2 | Less than daily but at least weekly 3 | Less than weekly but at least monthly 4 | Less than monthly 5 | Not at all Custom alignment: LV
6	last_smoked_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4' or [curr_smoke_1] = '5')	When was the last time you smoked a cigarette, even a puff?	radio, Required 1 | Less than one month ago 2 | 1-6 months ago 3 | 7-12 months ago 4 | Over 12 months ago Custom alignment: LV

7	cigs_day_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	How many cigarettes do you smoke per day on the days that you smoke? Enter numbers only.	text (number), Required 1 no. of cigarettes per day Custom alignment: LV
8	age_smoke_1 Show the field ONLY if: [cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8'	How old were you when you first started smoking cigarettes. Enter numbers only.	text (number), Required Custom alignment: LV
9	wake_smoke_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	How soon after you wake up do you smoke your first cigarette?	radio, Required 1 Within 5 minutes 2 From 6 to 30 minutes 3 From 31 to 60 minutes 4 More than 60 minutes Custom alignment: LV
10	addicted_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	We want to ask you the extent to which you feel you are dependent on cigarettes. Would you say that you are:	radio, Required 1 Not at all dependent on cigarettes 2 Somewhat dependent on cigarettes 3 Very dependent on cigarettes 4 I don't know Custom alignment: LV

11	brand_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs _smoked_1] = '3' or [cigs_smo ked_1] = '4' or [cigs_smoked_ 1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([c urr_smoke_1] = '1' or [curr_s moke_1] = '2' or [curr_smoke_ 1] = '3' or [curr_smoke_1] = '4')	What brand of cigarettes do you typically smoke?	radio, Required

radio, Required

1	Du Maurier
2	Players
3	Export A
4	Belmont
5	Matinee
6	Cameo
7	Number 7
8	Benson & Hedges
9	Rothman's
10	Peter Jackson
11	Canadian Classics
12	MacDonald
13	Accord
14	Avanti
15	Cigarettes from First Nations/Native brand
16	Don't have a typical brand
17	Other (specify)

Custom alignment: LV

12	brand_other_1 Show the field ONLY if: [brand_1] = '17'	What brand of cigarettes do you typically smoke?	text Custom alignment: LV
13	day_use_intro_1	In the past 30 days, have you used any of the following:	descriptive
14	use_cigar_1	Cigars or cigarillos	radio (Matrix), Required

1	Yes
0	No

15	use_wp_1	Waterpipe (e.g. hookah, sheesha)	radio (Matrix), Required

1	Yes
0	No

16	use_smokeless_1	Smokeless tobacco products (e.g. snus, chew)	radio (Matrix), Required

1	Yes
0	No

17	covidsm_1 Show the field ONLY if: [cigs_smoked_1] = '2' or [cigs_ smoked_1] = '3' or [cigs_smok ed_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' o r [cigs_smoked_1] = '7' or [cig s_smoked_1] = '8'	How much do you currently smoke cigarettes compared to February 2020 (prior to the COVID-19 pandemic)?	radio, Required

1	I smoke more
2	I smoke less
3	I smoke the same
4	I stopped smoking

Custom alignment: LV

18	thoughts_1	Thoughts on Smoking The next questions are about your thoughts on cigarette smoking and how it's perceived.	descriptive

19	cues_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs _smoked_1] = '3' or [cigs_smo ked_1] = '4' or [cigs_smoked_ 1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([c urr_smoke_1] = '1' or [curr_s moke_1] = '2' or [curr_smoke_ 1] = '3' or [curr_smoke_1] = '4')	Which of the following are reasons why you reach for a cigarette? Check all that apply. I reach for a cigarette when I am:	checkbox, Required

checkbox, Required		
1	cues_1___1	Starting a conversation with someone
2	cues_1___2	At a social event
3	cues_1___3	At work
4	cues_1___4	Doing something part of my daily routine
5	cues_1___5	Feeling stressed
6	cues_1___6	Coping with my mental health
7	cues_1___7	Needing to get out of a situation
8	cues_1___8	Giving myself a reward
9	cues_1___9	Taking a break
10	cues_1___10	Trying to control my body weight or suppress appetite
11	cues_1___11	Feeling bored
12	cues_1___12	Offered a cigarette by someone
13	cues_1___13	Craving a cigarette
14	cues_1___14	Feeling dependent on a cigarette
15	cues_1___15	Done eating a meal
16	cues_1___16	About to go to sleep
17	cues_1___17	Drinking alcohol
18	cues_1___18	Using cannabis
19	cues_1___19	Mixing tobacco with cannabis
20	cues_1___20	Using other drugs
21	cues_1___21	I don't know
22	cues_1___22	Other (specify)

Custom alignment: LV
Field Annotation: @NONEOFTHEABOVE='21'

20	cues_oth_1 Show the field ONLY if: [cues_1(22)] = '1'	What are some other reasons why you reach for a cigarette?	notes Custom alignment: LV

21	friends_smoke_1	How many of your close friends smoke?	radio, Required

radio, Required	
1	All of them
2	Most of them
3	About half of them
4	A few of them
5	None of them

Custom alignment: LV

22	risk_intro_1	Section Header: How much do you think people risk harming their health physically and in other ways when they do each of the following: 1 = No risk 2 = Low risk 3 = Moderate risk 4 = High risk 5 = Very high risk	descriptive

23	risk1_1	Smoke cigarettes daily?	radio (Matrix), Required
			1 · 1 No risk
			2 · 2
			3 · 3
			4 · 4
			5 · 5 Very high risk
24	risk2_1	Smoke cigarettes some days but not daily?	radio (Matrix), Required
			1 · 1 No risk
			2 · 2
			3 · 3
			4 · 4
			5 · 5 Very high risk
25	risk3_1	Use e-cigarettes daily?	radio (Matrix)
			1 · 1 No risk
			2 · 2
			3 · 3
			4 · 4
			5 · 5 Very high risk
26	risk4_1	Use e-cigarettes some days but not daily?	radio (Matrix), Required
			1 · 1 No risk
			2 · 2
			3 · 3
			4 · 4
			5 · 5 Very high risk
27	risk_thoughts_1	Feel free to express your thoughts.	notes Custom alignment: LV
28	rates_1	Section Header: What do you think about this statement: "Smoking rates are higher among queer and trans young adults"?	radio, Required 1 · Strongly disagree 2 · Somewhat disagree 3 · Neutral 4 · Somewhat agree 5 · Strongly agree Custom alignment: LV
29	rates_thoughts_1	Feel free to express your thoughts.	notes Custom alignment: LV
30	reasons_intro_1	Section Header: To what extent do you agree or disagree with each of the following statements: I think queer and trans individuals are more likely than straight cisgender individuals to smoke cigarettes because: 1 = Strongly disagree 2 = Somewhat disagree 3 = Neutral 4 = Somewhat agree 5 = Strongly agree	descriptive

31	accept_1	Smoking is more acceptable among queer and trans young adults	radio (Matrix), Required
			1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
32	stress_1	Queer and trans young adults deal with more stress	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
33	stigma_1	Queer and trans young adults deal with more stigma (e.g., discrimination)	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
34	pressure_1	Social pressures to smoke are higher for queer and trans young adults	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
35	mhealth_1	Queer and trans young adults have more mental health concerns	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
36	culture_1	Smoking is part of the queer culture	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
37	reasons_thts_1	Feel free to express your thoughts.	notes Custom alignment: LV
38	sm_accept_self_1	Section Header: How acceptable do you think smoking cigarettes is among queer and trans young adults?	radio, Required 1 | Very unacceptable 2 | Somewhat unacceptable 3 | Neutral 4 | Somewhat acceptable 5 | Very acceptable Custom alignment: LV

39	sm_accept_friends_1	How acceptable do your friends think smoking cigarettes is among queer and trans young adults?	radio, Required

radio, Required

1	Very unacceptable
2	Somewhat unacceptable
3	Neutral
4	Somewhat acceptable
5	Very acceptable

Custom alignment: LV

40	quitting_intro_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7') OR ([curr_smoke_1] = 1 or [curr_smoke_1] = 2 or [curr_smoke_1] = 3 or [curr_smoke_1] = 4)	Quitting Smoking Next up, we'd like to ask about your thoughts and experiences with quitting smoking. We know that everyone is on their own journey and some folks may not have thought about quitting before.	descriptive

41	plan_quit_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	Are you planning to quit smoking cigarettes...?	radio, Required

radio, Required

1	I have already quit
2	Within the next month
3	Within the next 6 months
4	Sometime in the future beyond 6 months
5	I am not planning to quit

Custom alignment: LV

42	why_stop_1 Show the field ONLY if: [plan_quit_1] = '2' or [plan_quit_1] = '3' or [plan_quit_1] = '4'	Why do you want to stop smoking? Please check all that apply.	checkbox, Required

checkbox, Required

1	why_stop_1___1	Reduce disease risk / improve health
2	why_stop_1___2	Illness / disability
3	why_stop_1___3	As quitting strategy / trying to quit
4	why_stop_1___4	Too expensive / cost
5	why_stop_1___5	Smoking restrictions
6	why_stop_1___6	Reduce others' exposure to second-hand smoke
7	why_stop_1___7	Pregnancy / breastfeeding
8	why_stop_1___8	Reduced need / craving
9	why_stop_1___9	Family pressure
10	why_stop_1___10	Peer pressure
11	why_stop_1___11	Other (specify)

Custom alignment: LV

43	why_quit_other_1 Show the field ONLY if: [why_stop_1(11)] = '1'	Please specify why else you want to quit smoking.	notes Custom alignment: LV

44	quit_attempts_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	In the past 12 months, how many attempts have you made (lasting at least 24 hours) to quit smoking cigarettes?	radio, Required 	1	No attempts
2	1 attempt
3	2 attempts
4	3 or more attempts	 Custom alignment: LV
45	time_quit_1 Show the field ONLY if: [quit_attempts_1] = '2' or [quit_attempts_1] = '3' or [quit_attempts_1] = '4'	In the last 12 months, what is the longest period of time you have quit and remained smoke-free? Enter approximate number of days only.	text (number), Required Custom alignment: LV

	46	cess_methods_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') and ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	Have you previously used the following medications, resources or methods to help you quit or reduce smoking? Please check all that apply.	checkbox, Required		
				1	cess_methods_1___1	I have not used any medications, resources or methods to help me quit or reduce smoking
				2	cess_methods_1___2	Stopped smoking suddenly (cold turkey)
				3	cess_methods_1___3	Zyban or Wellbutrin (bupropion)
				4	cess_methods_1___4	Champix (varenicline)
				5	cess_methods_1___5	Nicotine patch
				6	cess_methods_1___6	Nicotine gum
				7	cess_methods_1___7	Nicotine lozenge
				8	cess_methods_1___8	Nicotine inhaler
				9	cess_methods_1___9	E-cigarettes
				10	cess_methods_1___10	Individual counselling
				11	cess_methods_1___11	Group counselling
				12	cess_methods_1___12	Advice from a physician/doctor
				13	cess_methods_1___13	Advice from a dentist/dental hygienist
				14	cess_methods_1___14	Advice from a pharmacist
				15	cess_methods_1___15	Advice from a nurse
				16	cess_methods_1___16	Self-help book
				17	cess_methods_1___17	Self-help website
				18	cess_methods_1___18	Smokers' Helpline Phone
				19	cess_methods_1___19	Smokers' Helpline Text
				20	cess_methods_1___20	Smokers' Helpline Online
				21	cess_methods_1___21	Alternative treatments (e.g., laser therapy, herbal remedies, hypnosis, acupuncture,)
				22	cess_methods_1___22	Mobile app to help quit smoking
				23	cess_methods_1___23	A public health unit/local program
				24	cess_methods_1___24	Other (please specify)
					Custom alignment: LV Field Annotation: @NONEOFTHEABOVE='1'	
	47	cess_methods_1_other_1 Show the field ONLY if: [cess_methods_1(24)] = '1'	What other medications, resources or methods did you use to help you quit or reduce smoking?	notes Custom alignment: LV	

48	methods_challenges_1 Show the field ONLY if: [cess_methods_1(2)] = '1' or [cess_methods_1(3)] = '1' or [cess_methods_1(4)] = '1' or [cess_methods_1(5)] = '1' or [cess_methods_1(6)] = '1' or [cess_methods_1(7)] = '1' or [cess_methods_1(8)] = '1' or [cess_methods_1(9)] = '1' or [cess_methods_1(10)] = '1' or [cess_methods_1(11)] = '1' or [cess_methods_1(12)] = '1' or [cess_methods_1(13)] = '1' or [cess_methods_1(14)] = '1' or [cess_methods_1(15)] = '1' or [cess_methods_1(16)] = '1' or [cess_methods_1(17)] = '1' or [cess_methods_1(18)] = '1' or [cess_methods_1(19)] = '1' or [cess_methods_1(20)] = '1' or [cess_methods_1(21)] = '1' or [cess_methods_1(22)] = '1' or [cess_methods_1(23)] = '1' or [cess_methods_1(24)] = '1'	What challenges, if any, did you encounter in using any of these above methods?	notes Custom alignment: LV		

49	cess_barriers_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7') and ([quit_attempts_1] = '2' or [quit_attempts_1] = '3' or [quit_attempts_1] = '4')	In general, what challenges or barriers to quitting or reducing smoking have you experienced? Please check all that apply.	checkbox, Required

			1	cess_barriers_1___1	I have never tried to quit or reduce smoking
			2	cess_barriers_1___2	No challenges faced
			3	cess_barriers_1___3	Financial cost
			4	cess_barriers_1___4	Stress
			5	cess_barriers_1___5	Addiction/dependency
			6	cess_barriers_1___6	Habit
			7	cess_barriers_1___7	Going out more (parties, bars, etc.)
			8	cess_barriers_1___8	Lack of support or information on programs/services
			9	cess_barriers_1___9	Difficulty accessing programs/services
			10	cess_barriers_1___10	Weight gain
			11	cess_barriers_1___11	Depression, anxiety, boredom
			12	cess_barriers_1___12	Drinking alcohol/caffeine
			13	cess_barriers_1___13	Experiencing symptoms of withdrawal
			14	cess_barriers_1___14	Disconnect from my friends who smoke
			15	cess_barriers_1___15	Not being able to go out with people who are smoking
			16	cess_barriers_1___16	Other (please specify)

Custom alignment: LV
Field Annotation: @NONEOFTHEABOVE='1,2'

50	cess_barriers_other_1 Show the field ONLY if: [cess_barriers_1(16)] = '1'	What other challenges or barriers to quitting or reducing smoking have you experienced?	notes Custom alignment: LV

	51	culturefactor_intro_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	Section Header: To what extent do you agree with the following statements? 1 = Strongly disagree 2 = Somewhat disagree 3 = Neither disagree nor agree 4 = Somewhat agree 5 = Strongly agree	descriptive
	52	convo_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	I'll miss out on conversations if I quit smoking	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
	53	self_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	I don't see myself as a 'smoker'	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
	54	socialize_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	Smoking makes it easier for me to socialize	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
	55	out_friend_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	I only smoke when I'm out with friends	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree

56	enjoy_1	I enjoy smoking too much to give it up	radio (Matrix), Required
	Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')		1 1 Strongly disagree 2 2 3 3 4 4 5 5 Strongly agree
57	keep_1	I might get pressured to keep smoking if I try to quit	radio (Matrix), Required
	Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')		1 1 Strongly disagree 2 2 3 3 4 4 5 5 Strongly agree
58	deal_strss_1	Smoking calms me down when I'm stressed or upset	radio (Matrix), Required
	Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')		1 1 Strongly disagree 2 2 3 3 4 4 5 5 Strongly agree
59	eventual_1	I'll quit smoking eventually	radio (Matrix), Required
	Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')		1 1 Strongly disagree 2 2 3 3 4 4 5 5 Strongly agree
60	impnt_1	Smoking is an important part of my life	radio (Matrix), Required
	Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')		1 1 Strongly disagree 2 2 3 3 4 4 5 5 Strongly agree

61	image_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	I like my image when I smoke	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
62	cutdown_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	I want to reduce my smoking but not quit	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
63	smok_drg_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	I smoke cigarettes when I use other drugs	radio (Matrix), Required 1 | 1 Strongly disagree 2 | 2 3 | 3 4 | 4 5 | 5 Strongly agree
64	quit_support_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	Section Header: If you were to seek support in quitting smoking, how confident are you that you could find the support that you need?	radio, Required 1 | Not very confident at all 2 | Somewhat not confident 3 | Neutral 4 | Somewhat confident 5 | Very confident Custom alignment: LV
65	where_support_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	Where would you turn to for this support?	notes Custom alignment: LV

66	quit_import_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	Section Header: On a scale of 0 to 10 where 0 is not at all important and 10 is extremely important, how important is it to you to quit smoking:	descriptive
67	quitimport1_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	Within the next month?	radio (Matrix), Required 0 / 0 1 / 1 2 / 2 3 / 3 4 / 4 5 / 5 6 / 6 7 / 7 8 / 8 9 / 9 10 / 10
68	quitimport2_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	For good?	radio (Matrix), Required 0 / 0 1 / 1 2 / 2 3 / 3 4 / 4 5 / 5 6 / 6 7 / 7 8 / 8 9 / 9 10 / 10
69	quitimport3_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	And remain smoke-free?	radio (Matrix), Required 0 / 0 1 / 1 2 / 2 3 / 3 4 / 4 5 / 5 6 / 6 7 / 7 8 / 8 9 / 9 10 / 10

70	health_change_1 Show the field ONLY if: ([cigs_smoked_1] = '2' or [cigs_smoked_1] = '3' or [cigs_smoked_1] = '4' or [cigs_smoked_1] = '5' or [cigs_smoked_1] = '6' or [cigs_smoked_1] = '7' or [cigs_smoked_1] = '8') AND ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	Section Header: How much do you think your health would change if you quit smoking?	radio, Required 	1	Significantly decline
2	Somewhat decline
3	No difference
4	Somewhat improve
5	Significantly improve	 Custom alignment: LV
71	vaping_intro_1	Vaping Our main focus of this survey is cigarette smoking, but we want to ask about vaping too. Vaping devices are also known as electronic cigarettes, e-cigarettes, vapes, pod mods, mods and hookah pens. This does not include vapourizers used for cannabis.	descriptive
72	time_vape_1	A vape session is a distinct period of time during which someone uses an e-cigarette, from their first to their last puff. A vape session can last for any length of time and involve any number of puffs, depending on a person's preferences. How many e-cigarette vape sessions have you had in your life?	radio, Required | 1	0 (I have never vaped)
2	1 to 3
3	4 to 10
4	11 to 20
5	21 to 50
6	51 to 99
7	100 or more
8	I don't remember	 Custom alignment: LV
73	curr_vape_1 Show the field ONLY if: [time_vape_1] = '2' or [time_vape_1] = '3' or [time_vape_1] = '4' or [time_vape_1] = '5' or [time_vape_1] = '6' or [time_vape_1] = '7' or [time_vape_1] = '8'	How often do you currently vape?	radio, Required | 1	Daily or almost daily
2	Less than daily, but at least once a week
3	Less than weekly, but at least once a month
4	Less than monthly
5	Not at all	 Custom alignment: LV

74	reasons_vape_1 Show the field ONLY if: [time_vape_1] = '2' or [time_vape_1] = '3' or [time_vape_1] = '4' or [time_vape_1] = '5' or [time_vape_1] = '6' or [time_vape_1] = '7' or [time_vape_1] = '8'	What are the main reasons you vape(d)? Check all that apply.	checkbox, Required

				checkbox, Required
			1	reasons_vape_1___1	To help me quit/reduce smoking cigarettes
			2	reasons_vape_1___2	I think it's safer than cigarettes
			3	reasons_vape_1___3	I was curious
			4	reasons_vape_1___4	It's fun doing tricks with the vapour
			5	reasons_vape_1___5	I like the flavours (taste and smell)
			6	reasons_vape_1___6	My friends vape
			7	reasons_vape_1___7	They're easier to get than cigarettes
			8	reasons_vape_1___8	It's less expensive than smoking cigarettes
			9	reasons_vape_1___9	I can vape anywhere
			10	reasons_vape_1___10	To avoid exposing others to secondhand smoke from cigarettes
			11	reasons_vape_1___11	To help me deal with stress
			12	reasons_vape_1___12	Other (please specify)

Custom alignment: LV

75	reasons_vape_other_1 Show the field ONLY if: [reasons_vape_1(12)] = '1'	What are the other main reasons you vape(d)?	notes Custom alignment: LV

76	cutting_down_1 Show the field ONLY if: ([time_vape_1] = '2' or [time_vape_1] = '3' or [time_vape_1] = '4' or [time_vape_1] = '5' or [time_vape_1] = '6' or [time_vape_1] = '7' or [time_vape_1] = '8') and ([curr_smoke_1] = '1' or [curr_smoke_1] = '2' or [curr_smoke_1] = '3' or [curr_smoke_1] = '4')	While using an e-cigarette, I have been:	radio, Required

				radio, Required
			1	Not at all successful at reducing my tobacco use
			2	Somewhat unsuccessful at reducing my tobacco use
			3	Neutral
			4	Somewhat successful at reducing my tobacco use
			5	Very successful at reducing my tobacco use

Custom alignment: LV

77	nic_strength_1 Show the field ONLY if: [time_vape_1] = '2' or [time_vape_1] = '3' or [time_vape_1] = '4' or [time_vape_1] = '5' or [time_vape_1] = '6' or [time_vape_1] = '7' or [time_vape_1] = '8'	What is the nicotine strength of the e-juice you last used?	radio, Required

				radio, Required
			1	I don't use nicotine
			2	1-4 mg/ml (0.1-0.4%)
			3	5-8 mg/ml (0.5-0.8%)
			4	9-14 mg/ml (0.9-1.4%)
			5	15-20 mg/ml (1.5-2.0%)
			6	21-24 mg/ml (2.1-2.4%)
			7	25-49 mg/ml (2.5-4.9%)
			8	50 mg/ml (5%) or more
			9	I don't know

Custom alignment: LV

78	covidv_1 Show the field ONLY if: [time_vape_1] = '2' or [time_vape_1] = '3' or [time_vape_1] = '4' or [time_vape_1] = '5' or [time_vape_1] = '6' or [time_vape_1] = '7' or [time_vape_1] = '8'	How much do you currently vape compared to February 2020 (prior to the COVID-19 pandemic)?	radio, Required 1 I vape more 2 I vape less 3 I vape the same 4 I stopped vaping Custom alignment: LV
79	friends_vape_1	How many of your close friends use e-cigarettes?	radio, Required 1 All of them 2 Most of them 3 About half of them 4 A few of them 5 None of them 6 I don't know Custom alignment: LV
80	vape_accept_self_1	How acceptable do you think vaping is among queer and trans young adults?	radio, Required 1 Very unacceptable 2 Somewhat unacceptable 3 Neutral 4 Somewhat acceptable 5 Very acceptable Custom alignment: LV
81	vape_accept_friends_1	How acceptable do your friends think vaping is among queer and trans young adults?	radio, Required 1 Very unacceptable 2 Somewhat unacceptable 3 Neutral 4 Somewhat acceptable 5 Very acceptable Custom alignment: LV
82	giphy1	You're getting there!	descriptive
83	substances_intro_1	Section Header: Alcohol, Cannabis, Other Drugs The next questions ask about alcohol, cannabis, and other drugs. Just a reminder, there's no judgment here. Your answers are confidential and will not be shared with anyone outside of the research team.	descriptive
84	alcohol_1	During the past 12 months, on average how often did you drink alcoholic beverages? When we use the word "drink" it means: One bottle or can of beer or a glass of draft / One glass of wine / One drink or cocktail with 1.5 ounces of liquor.	radio, Required 1 Every day 2 4 to 6 times a week 3 2 to 3 times a week 4 Once a week 5 2 to 3 times a month 6 Once a month 7 Less than once a month 8 Not at all Custom alignment: LV

85	alcohol_amount_1 Show the field ONLY if: [alcohol_1] = '1' or [alcohol_1] = '2' or [alcohol_1] = '3' or [alcohol_1] = '4' or [alcohol_1] = '5' or [alcohol_1] = '6' or [alcohol_1] = '7'	How often in the past 12 months have you had 5 or more drinks on one occasion?	radio, Required 	1	Never
2	Less than once a month
3	Once a month
4	2 to 3 times a month
5	Once a week
6	More than once a week	 Custom alignment: LV
86	covidalc_1	How much do you currently consume alcohol compared to February 2020 (prior to the COVID-19 pandemic)?	radio, Required | 1	I consume alcohol more
2	I consume alcohol less
3	I consume alcohol the same
4	I stopped consuming alcohol
5	N/A I haven't consumed alcohol since February 2020	 Custom alignment: LV
87	cannabis_1	During the past 12 months, how often did you use cannabis?	radio, Required | 1	Every day
2	4 to 6 times a week
3	2 to 3 times a week
4	Once a week
5	2 to 3 times a month
6	Once a month
7	Less than once a month
8	Not at all	 Custom alignment: LV
88	covidcan_1	How much do you currently consume cannabis compared to February 2020 (prior to the COVID-19 pandemic)?	radio, Required | 1	I consume cannabis more
2	I consume cannabis less
3	I consume cannabis the same
4	I stopped consuming cannabis
5	N/A I haven't consumed cannabis since February 2020	 Custom alignment: LV
89	warning2_1	Section Header: Warning: The following question is about drug use and can be triggering.	descriptive

90	substances_1	Section Header: For each drug below (not prescribed to you), check off if you ever used it at least once in the past 12 months. Please remember that your answers are anonymous and confidential. Researchers will not identify respondents from their answers. We're asking this to learn more about how smoking is linked to other drugs. Check all that apply.	checkbox

checkbox

1	substances_1___1	Poppers/amyl
2	substances_1___2	Ketamine/Special K
3	substances_1___3	Ecstasy/MDMA
4	substances_1___4	Crystal meth/Tina
5	substances_1___5	Crack, free base
6	substances_1___6	Cocaine
7	substances_1___7	Heroin (smack)
8	substances_1___8	Other prescription opioids (e.g., Percocet, Dialudid, OxyContin)
9	substances_1___9	Fentanyl
10	substances_1___10	GHB/"G"
11	substances_1___11	Tranquilizers or benzos (e.g, Valium, Xanax)
12	substances_1___12	Psychedelics (e.g, LSD, mescaline, acid, mushrooms)
13	substances_1___13	None of the above
14	substances_1___14	Prefer not to answer
15	substances_1___15	Other (please specify)
16	substances_1___16	N/A I've never used any of these drugs

Custom alignment: LV
Field Annotation: @NONEOFTHEABOVE='0,13,14'

91	substances_other_1 Show the field ONLY if: [substances_1(15)] = '1'	Please specify what other drugs you've used at least once in the in the past 12 months.	notes Custom alignment: LV

92	coviddrg_1 Show the field ONLY if: [substances_1(1)] = '1' or [substances_1(2)] = '1' or [substances_1(3)] = '1' or [substances_1(4)] = '1' or [substances_1(5)] = '1' or [substances_1(6)] = '1' or [substances_1(7)] = '1' or [substances_1(8)] = '1' or [substances_1(9)] = '1' or [substances_1(10)] = '1' or [substances_1(11)] = '1' or [substances_1(12)] = '1' or [substances_1(13)] = '1' or [substances_1(15)] = '1'	How much do you currently consume other drugs (not prescribed by a doctor) compared to February 2020 (prior to the COVID-19 pandemic)?	radio, Required

radio, Required

1	I consume other drugs more
2	I consume other drugs less
3	I consume other drugs the same
4	I stopped consuming other drugs
5	N/A I haven't consumed other drugs since February 2020

Custom alignment: LV

93	heath_intro_1	Mental and Physical Health Okay folks, we are going further now. We want to ask about your mental health and physical health too, and we know it's personal. We're asking so we can understand how health is connected to tobacco use. All of your responses are completely confidential.	descriptive

94	gen_health_1	In general, would you say your health is:	radio, Required

radio, Required

1	Poor
2	Fair
3	Good
4	Very good
5	Excellent
6	I don't know
7	Prefer not to answer

Custom alignment: LV

| 95 | mental_health_1 | How would you rate your mental or emotional health? |

radio, Required

1	Poor
2	Fair
3	Good
4	Very good
5	Excellent
6	I don't know
7	Prefer not to answer

Custom alignment: LV

| 96 | stresslife_1 | Thinking about the amount of stress in your life, would you say that most days are: |

radio, Required

1	Extremely stressful
2	Very stressful
3	Neutral
4	Not very stressful
5	Not at all stressful

Custom alignment: LV

| 97 | diagnosis_1 | Have you been diagnosed by a health professional with a mental health condition? |

radio, Required

1	Yes
2	No
3	I don't know
4	Prefer not to answer

Custom alignment: LV

| 98 | feeling_intro_1 | Section Header: | descriptive |

Below is a list of the ways you might have felt or behaved. Please indicate how often you have felt this way during the past week.

1 = Rarely or none of the time (less than 1 day)
2 = Some or a little of the time (1-2 days)
3 = Occasionally or moderate amount of time (3-4 days)
4 = Most or all of the time (5-7 days)
Prefer not to answer

| 99 | feel1_1 | I had trouble keeping my mind on what I was doing |

radio (Matrix), Required

1	1 Rarely or none of the time
2	2
3	3
4	4 Most or all of the time
5	Prefer not to answer

100	feel2_1	I felt depressed	radio (Matrix), Required
			1 | 1 Rarely or none of the time
			2 | 2
			3 | 3
			4 | 4 Most or all of the time
			5 | Prefer not to answer
101	feel3_1	I felt that everything I did was an effort	radio (Matrix), Required
			1 | 1 Rarely or none of the time
			2 | 2
			3 | 3
			4 | 4 Most or all of the time
			5 | Prefer not to answer
102	feel4_1	My sleep was restless	radio (Matrix), Required
			1 | 1 Rarely or none of the time
			2 | 2
			3 | 3
			4 | 4 Most or all of the time
			5 | Prefer not to answer
103	feel5_1	I could not get "going"	radio (Matrix), Required
			1 | 1 Rarely or none of the time
			2 | 2
			3 | 3
			4 | 4 Most or all of the time
			5 | Prefer not to answer
104	feel6_1	I felt sad	radio (Matrix), Required
			1 | 1 Rarely or none of the time
			2 | 2
			3 | 3
			4 | 4 Most or all of the time
			5 | Prefer not to answer
105	feel7_1	I did not feel like eating; my appetite was poor	radio (Matrix), Required
			1 | 1 Rarely or none of the time
			2 | 2
			3 | 3
			4 | 4 Most or all of the time
			5 | Prefer not to answer
106	covidmh_1	Section Header: How is your mental health compared to February 2020 (prior to the COVID-19 pandemic)?	radio, Required
			1 | My mental health is worse
			2 | My mental health is the same
			3 | My mental health is better
			 Custom alignment: LV

107	resources_1	If you need to speak with someone, here are some resources. National Services: Crisis Services Canada 24/7 Suicide prevention service (EN) 1-833-456-4566 (FR) 1-866-277-3553 Kids Help Phone 24/7 national support service for children and youth Call 1-800-668-6868 Text CONNECT 686868 Youthspace Online crisis and emotional support chat for anyone under 30 6pm-midnight (PST) Text: 778 783 0177 Ontario Services: LGBT Youthline Confidential peer support age 16 to 29 Text: 647-694-4275 Chat online: www.youthline.ca Sunday to Friday 4pm-9:30pm Trans Lifeline Trans-led organization connecting people to community and resources 1-877-330-6366 Good 2 Talk Confidential support services for post-secondary students in Ontario and Nova Scotia 1-866-925-545 Text GOODTOTALKON to 686868 Quebec Services: Interligne Front-line center for help and information for people concerned with sexual and gender diversity 514-866-0103 (Montreal) 1-888-505-1010 (Toll-free) Text : 1-888-505-1010 Online chat: https://interligne.co/ Email: aide@interligne.co Aide aux trans du Quebec 24-hour crisis and intervention line, support groups for transgender individuals 1-855-909-9038 Option 1 (Montreal and other regions in Quebec) Option 3 (Québec City) TEL-JEUNES Confidential line for young people aged 20 and under in Quebec 1-800-263-2266 – TEXT 514-600-1002 Online Chat: https://www.teljeunes.com/Accueil 211 QC - https://www.211qc.ca/en/ Thunder Bay Services and Organizations: NorWest CHC Thunder Bay District Health Unit Thunder Bay Counselling Canadian Mental Health Association – Thunder Bay PRIDE Central Toronto Services and Organizations: The 519 Lumenus Centre for Addiction and Mental Health (CAMH) Rainbow Services Centre for Addiction and Mental Health (CAMH) Gender Identity Clinic Toronto 211 Central Montreal Services and Organizations: LGBTQ+ Community Centre of Montreal Pride Therapy Network of Montreal REZO Projet 10 West Island LGBTQ2+ Centre – Beaconsfield AGIR Montreal (Action LGBTQ avec les Immigrant.es et Refugié.es) L'astérisk Project contact: smokingproject.dlsph@utoronto.ca	descriptive
108	campaign_intro_1	Section Header: The following questions are about a project that addresses smoking and vaping among queer and trans young adults.	descriptive
109	camp_1	In the past 3 months, have you seen or heard of a project that addresses smoking and vaping among queer and trans young adults?	radio, Required 1 Yes 2 No 3 I don't know Custom alignment: LV
110	name_1 Show the field ONLY if: [camp_1] = '1'	Do you remember what the project was called?	radio, Required 1 Yes 2 No 3 I don't know Custom alignment: LV
111	nameopen_1 Show the field ONLY if: [name_1] = '1'	What was the project called?	text Custom alignment: LV

112	projects_1 Show the field ONLY if: [name_1] = '2'	Have you seen or heard of any of the following? Check all that apply.	checkbox, Required

			1	projects_1___1	The Propel Project
			2	projects_1___2	The Expand Project
			3	projects_1___3	The Breathe Project
			4	projects_1___4	The Inspire Project
			5	projects_1___5	None of the above

Custom alignment: LV
Field Annotation: @NONEOFTHEABOVE='5'

113	message_1 Show the field ONLY if: [camp_1] = '1'	You said that you've seen or heard of a project about smoking and vaping. What were the project's main messages?	notes Custom alignment: LV

114	expandlogo	Section Header: Have you heard of The Expand Project? The Expand Project aims to spark conversations about smoking and vaping within communities of queer and trans young adults.	descriptive

115	expand_1		radio, Required

1	Yes
2	No
3	I don't know

Custom alignment: LV

116	learn_1 Show the field ONLY if: [expand_1] = '1'	Where did you learn about the Expand Project? Check all that apply.	checkbox

1	learn_1___1	Instagram
2	learn_1___2	TikTok
3	learn_1___3	Facebook
4	learn_1___4	Project website
5	learn_1___5	Posters in community
6	learn_1___6	In a newspaper
7	learn_1___7	In a magazine
8	learn_1___8	On a billboard
9	learn_1___9	On the radio
10	learn_1___10	On TV
11	learn_1___11	At an event
12	learn_1___12	On public transit
13	learn_1___13	From a friend
14	learn_1___14	From a healthcare professional
15	learn_1___15	From a community organization
16	learn_1___16	I don't know
17	learn_1___17	Other (specify)

Custom alignment: LV
Field Annotation: @NONEOFTHEABOVE="16"

117	learn_other_1 Show the field ONLY if: [learn_1(17)] = '1'	Where else did you learn about the Expand Project?	text Custom alignment: LV

118	click_1 Show the field ONLY if: [learn_1(1)] = '1' or [learn_1(2)] = '1' or [learn_1(3)] = '1'	How often have you clicked the link(s) from the Expand Project social media to learn more?	radio, Required 	1	Never
2	One time
3	A few times
4	Many times	 Custom alignment: LV
119	share_1 Show the field ONLY if: [learn_1(1)] = '1' or [learn_1(2)] = '1' or [learn_1(3)] = '1'	How often have you shared content from the Expand Project social media?	radio, Required | 1	Never
2	One time
3	A few times
4	Many times	 Custom alignment: LV
120	follow_1 Show the field ONLY if: [learn_1(1)] = '1' or [learn_1(2)] = '1' or [learn_1(3)] = '1'	Have you followed the Expand Project on social media?	radio, Required | 1	Yes
2	No	 Custom alignment: LV
121	sofar_intro_1 Show the field ONLY if: [expand_1] = '1'	Section Header: Based on what you've seen about the Expand Project so far, to what extent do you agree with the following statements: 1 = Strongly disagree 2 = Somewhat disagree 3 = Neither disagree nor agree 4 = Somewhat agree 5 = Strongly agree The Expand project:	descriptive
122	attn_1 Show the field ONLY if: [expand_1] = '1'	Grabbed my attention	radio (Matrix) | 1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree	
123	inform_1 Show the field ONLY if: [expand_1] = '1'	Was informative	radio (Matrix) | 1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree	
124	meaning_1 Show the field ONLY if: [expand_1] = '1'	Was meaningful	radio (Matrix) | 1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree	

125	compel_1 Show the field ONLY if: [expand_1] = '1'	Was compelling	radio (Matrix) 	1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree	
126	worth_1 Show the field ONLY if: [expand_1] = '1'	Was worth remembering	radio (Matrix) | 1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree	
127	seeself_1 Show the field ONLY if: [expand_1] = '1'	I could see myself in the Expand Project	radio (Matrix) | 1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree	
128	glance_1 Show the field ONLY if: [expand_1] = '1'	I understood what the Expand Project was about from a quick glance	radio (Matrix) | 1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree	
129	expand_aware_intro Show the field ONLY if: [expand_1] = '1'	Section Header: Since November 2021, to what extent did the Expand Project increase your: 1 = Not at all 2 = Very little 3 = Neutral 4 = Somewhat 5 = To a great extent	descriptive
130	awaresmoke_1 Show the field ONLY if: [expand_1] = '1'	Awareness of higher smoking rates among queer and trans young adults?	radio (Matrix) | 1	1 Not at all
2	2
3	3
4	4
5	5 To a great extent	
131	awarerel_1 Show the field ONLY if: [expand_1] = '1'	Awareness of the relationship between smoking, stress, and stigma?	radio (Matrix) | 1	1 Not at all
2	2
3	3
4	4
5	5 To a great extent	

132	awarebenefits_1 Show the field ONLY if: [expand_1] = '1'	Awareness of the benefits of quitting smoking?	radio (Matrix) 1 | 1 Not at all 2 | 2 3 | 3 4 | 4 5 | 5 To a great extent
133	awarerisksm_1 Show the field ONLY if: [expand_1] = '1'	Awareness of risks of smoking?	radio (Matrix) 1 | 1 Not at all 2 | 2 3 | 3 4 | 4 5 | 5 To a great extent
134	awareriskvp_1 Show the field ONLY if: [expand_1] = '1'	Awareness of the risks of vaping?	radio (Matrix) 1 | 1 Not at all 2 | 2 3 | 3 4 | 4 5 | 5 To a great extent
135	tryservices_1 Show the field ONLY if: [expand_1] = '1'	Willingness to try smoking cessation services tailored to queer and trans young adults?	radio (Matrix) 1 | 1 Not at all 2 | 2 3 | 3 4 | 4 5 | 5 To a great extent
136	exquits_1 Show the field ONLY if: [expand_1] = '1'	Section Header: To what extent has the Expand Project affected your intentions to quit smoking, if at all?	radio, Required 1 | Not at all 2 | Somewhat 3 | A lot 4 | I don't intend to quit smoking 5 | I already quit smoking 6 | N/A I don't currently smoke 7 | I don't know Custom alignment: LV
137	exbehs_1 Show the field ONLY if: ([expand_1] = '1')	Since November 2021, how has the Expand Project affected your smoking behaviours, if at all?	radio, Required 1 | I smoke the same 2 | I smoke less 3 | I smoke more 4 | I switched to vaping 5 | I quit smoking 6 | N/A I don't currently smoke 7 | I don't know Custom alignment: LV
138	exbehs_ex_1 Show the field ONLY if: [exbehs_1] = '1' or [exbehs_1] = '2' or [exbehs_1] = '3' or [exbehs_1] = '4' or [exbehs_1] = '5' or [exbehs_1] = '6'	Feel free to explain your answer.	notes Custom alignment: LV

139	exquitv_1 Show the field ONLY if: [expand_1] = '1'	To what extent has the Expand Project affected your intentions to quit vaping, if at all?	radio, Required
			1 Not at all
			2 Somewhat
			3 A lot
			4 I don't intend to quit vaping
			5 I already quit vaping
			6 N/A I don't currently vape
			7 I don't know
			Custom alignment: LV
140	exbehv_1 Show the field ONLY if: ([expand_1] = '1')	Since November 2021, how has the Expand Project affected your vaping behaviours, if at all?	radio, Required
			1 I vape the same
			2 I vape less
			3 I vape more
			4 I quit vaping
			5 N/A I don't currently vape
			6 I don't know
			Custom alignment: LV
141	exbehv_ex_1 Show the field ONLY if: [exbehv_1] = '1' or [exbehv_1] = '2' or [exbehv_1] = '3' or [exbehv_1] = '4' or [exbehv_1] = '5'	Feel free to explain your answer.	notes Custom alignment: LV
142	visit_intro_1 Show the field ONLY if: [expand_1] = '1'	Section Header: Please answer yes or no to each of the following statements:	descriptive
143	research_1 Show the field ONLY if: [expand_1] = '1'	I visited www.expandproject.ca to learn more	radio (Matrix) 1 Yes 2 No 3 N/A
144	friendsv_1 Show the field ONLY if: [expand_1] = '1'	I did more research on smoking/vaping	radio (Matrix) 1 Yes 2 No 3 N/A
145	hlthprosv_1 Show the field ONLY if: [expand_1] = '1'	I talked to my friends about smoking/vaping	radio (Matrix) 1 Yes 2 No 3 N/A
146	helpsv_1 Show the field ONLY if: [expand_1] = '1'	I talked to a healthcare professional about smoking/vaping	radio (Matrix) 1 Yes 2 No 3 N/A
147	nothing_1 Show the field ONLY if: [expand_1] = '1'	I reached out for help about my smoking/vaping	radio (Matrix) 1 Yes 2 No 3 N/A
148	smexample_1	Section Header: Below is one of the videos from the Expand Project.	descriptive

149	exprsm_intro_1	Based on the video above, to what extent do you agree with the following statements: 1 = Strongly disagree 2 = Somewhat disagree 3 = Neutral 4 = Somewhat agree 5 = Strongly agree The Expand Project:	descriptive
150	sm_attn_1	Grabbed my attention	radio (Matrix) <table><tr><td>1</td><td>1 Strongly disagree</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5 Strongly agree</td></tr></table>
151	sm_inform_1	Was informative	radio (Matrix) <table><tr><td>1</td><td>1 Strongly disagree</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5 Strongly agree</td></tr></table>
152	sm_meaning_1	Was meaningful	radio (Matrix) <table><tr><td>1</td><td>1 Strongly disagree</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5 Strongly agree</td></tr></table>
153	sm_compel_1	Was compelling	radio (Matrix) <table><tr><td>1</td><td>1 Strongly disagree</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5 Strongly agree</td></tr></table>
154	sm_worth_1	Was worth remembering	radio (Matrix) <table><tr><td>1</td><td>1 Strongly disagree</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5 Strongly agree</td></tr></table>
155	sm_self_1	I could see myself in the Expand Project	radio (Matrix) <table><tr><td>1</td><td>1 Strongly disagree</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5 Strongly agree</td></tr></table>

156	sm_glance_1	I understood what the Expand Project was all about from a quick glance	radio (Matrix)
			1 1 Strongly disagree
			2 2
			3 3
			4 4
			5 5 Strongly agree

157	nrt_intro	Nicotine Replacement TherapyThe next few questions are about free nicotine replacement therapy provided through the Expand Project.	descriptive

158	nrtaware_1	Are you aware that the Expand Project provides free 2-week trials of nicotine replacement therapy (NRT)? (Note: Free NRT from this project is only available for Ontario residents)	radio, Required
			1 Yes
			2 No
			Custom alignment: LV

159	freenrt_1	Did you sign up for a free 2-week trial of nicotine replacement therapy (NRT) as part of the Expand Project?	radio, Required
			1 N/A I haven't smoked in the past 3 months
			2 N/A I've never smoked
			3 N/A I don't live in Ontario
			4 Yes
			5 No
			6 I don't know
			Custom alignment: LV

160	nrttry_1 Show the field ONLY if: [freenrt_1] = '1' or [freenrt_1] = '3' or [freenrt_1] = '5' or [freenrt_1] = '6'	Would you be interested in trying a free 2-week trial of NRT from the Expand Project in the future?	radio, Required
			1 Yes
			2 No
			3 I don't know
			Custom alignment: LV

161	nrttryexp_1 Show the field ONLY if: [nrttry_1] = '1' or [nrttry_1] = '2' or [nrttry_1] = '3'	Please feel free to explain your response.	notes Custom alignment: LV

162	nrttype_1 Show the field ONLY if: [freenrt_1] = '3'	What kind of NRT did you receive?	radio, Required
			1 Low dose patch
			2 High dose patch
			3 Gum
			4 Lozenge
			5 Spray
			6 I don't know
			Custom alignment: LV

163	ntramnt_1 Show the field ONLY if: [freenrt_1] = '3'	How much of the NRT that you received through the Expand Project did you use?	radio, Required
			1 All of the NRT
			2 Most of the NRT
			3 Some of the NRT
			4 None of the NRT
			5 I don't know
			Custom alignment: LV

164	nrtwhy_1 Show the field ONLY if: [ntramnt_1] = '2' or [ntramnt_1] = '3' or [ntramnt_1] = '4' or [ntramnt_1] = '5'	Why didn't you use any or all of the NRT?	checkbox, Required 	1	nrtwhy_1___1	I didn't need all of the NRT
2	nrtwhy_1___2	I started smoking again
3	nrtwhy_1___3	I didn't like using the NRT
4	nrtwhy_1___4	I only used the NRT occasionally
5	nrtwhy_1___5	The NRT caused me stress, anxiety
6	nrtwhy_1___6	I didn't try to quit smoking until recently
7	nrtwhy_1___7	Other (specify)	 Custom alignment: LV
165	nrtwhy_other_1 Show the field ONLY if: [nrtwhy_1(7)] = '1'	Why else didn't you use any or all of the NRT?	text Custom alignment: LV
166	nrtwhy_exp_1 Show the field ONLY if: ([nrtwhy_1(1)] = '1' or [nrtwhy_1(2)] = '1' or [nrtwhy_1(3)] = '1' or [nrtwhy_1(4)] = '1' or [nrtwhy_1(5)] = '1' or [nrtwhy_1(6)] = '1') or ([nrtwhy_other_1] <> "")	Feel free to explain your answer.	notes Custom alignment: LV
167	nrtenough_1 Show the field ONLY if: [freenrt_1] = '3'	Was the NRT you received through the Expand Project enough to support you in your quit attempt?	radio, Required 	1	Yes
2	No
3	I didn't make a quit attempt
4	Don't know	 Custom alignment: LV
168	nrtenough_exp_1 Show the field ONLY if: [nrtenough_1] = '1' or [nrtenough_1] = '2' or [nrtenough_1] = '3' or [nrtenough_1] = '4'	Feel free to explain your answer.	notes Custom alignment: LV
169	nrtquit_1 Show the field ONLY if: [freenrt_1] = '3'	Since starting the NRT through the Expand Project, have you stopped smoking for at least 24 hours, because you were trying to quit?	radio, Required 	1	Yes
2	No
3	I don't know	 Custom alignment: LV
170	nrtno_1 Show the field ONLY if: [nrtquit_1] = '1'	How many times did you stop smoking for at least 24 hours? Enter numbers only.	text (number), Required Custom alignment: LV
171	nrtimpt_1 Show the field ONLY if: [freenrt_1] = '3'	How important was the 2-week NRT trial in encouraging you to try to quit or stay smoke-free?	radio, Required 	1	Not important at all
2	Somewhat unimportant
3	Neutral
4	Somewhat important
5	Very important	 Custom alignment: LV

172	nrthelp_1 Show the field ONLY if: [freenrt_1] = '3'	How helpful was the 2-week NRT trial for quitting smoking?	radio, Required 	1	Not helpful at all
2	Somewhat unhelpful
3	Neutral
4	Somewhat helpful
5	Very helpful
6	N/A I didn't quit smoking	 Custom alignment: LV
173	nrtreco_1 Show the field ONLY if: [freenrt_1] = '3'	Would you recommend the 2-week NRT trial to a friend who is trying to quit smoking or stay smoke-free?	radio, Required | 1	No definitely not
2	No, I don't think so
3	Neutral
4	Yes, I think so
5	Yes, definitely	 Custom alignment: LV
174	nrtreco_exp_1 Show the field ONLY if: [nrtreco_1] = '1' or [nrtreco_1] = '2' or [nrtreco_1] = '3' or [nrtreco_1] = '4' or [nrtreco_1] = '5'	Please feel free to explain.	notes Custom alignment: LV
175	nrtoth_1 Show the field ONLY if: [freenrt_1] = '3'	Is there is another type of smoking cessation support other than NRT that would have helped you?	radio, Required | 1	Yes
2	No
3	I don't know	 Custom alignment: LV
176	nrtothsp_1 Show the field ONLY if: [nrtoth_1] = '1'	What other support would have been helpful in addition to NRT?	notes Custom alignment: LV
177	nrtst_intro_1 Show the field ONLY if: [freenrt_1] = '3'	Section Header: To what extent do you agree with the following statements? 1 = Strongly disagree 2 = Somewhat disagree 3 = Neutral 4 = Somewhat agree 5 = Strongly agree 6 = N/A	descriptive
178	nrttime_1 Show the field ONLY if: [freenrt_1] = '3'	I received the NRT in a timely manner	radio (Matrix) | 1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree
6	6 N/A	

179	nrtship_1 Show the field ONLY if: [freenrt_1] = '3'	The NRT was shipped to where I currently live	radio (Matrix)

1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree
6	6 N/A

180	nrtorder_1 Show the field ONLY if: [freenrt_1] = '3'	I received the type of NRT I ordered	radio (Matrix)

1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree
6	6 N/A

181	nrtlocal_1 Show the field ONLY if: [freenrt_1] = '3'	I picked up the NRT at a different location	radio (Matrix)

1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree
6	6 N/A

182	nrtinstruct_1 Show the field ONLY if: [freenrt_1] = '3'	I could understand the instructions that came with the NRT	radio (Matrix)

1	1 Strongly disagree
2	2
3	3
4	4
5	5 Strongly agree
6	6 N/A

183	nrtst_exp_1 Show the field ONLY if: [nrttime_1] = '1' or [nrttime_1] = '2' or [nrttime_1] = '3' or [nrttime_1] = '4' or [nrttime_1] = '5' or [nrttime_1] = '6' or [nrtship_1] = '1' or [nrtship_1] = '2' or [nrtship_1] = '3' or [nrtship_1] = '4' or [nrtship_1] = '5' or [nrtship_1] = '6' or [nrtorder_1] = '1' or [nrtorder_1] = '2' or [nrtorder_1] = '3' or [nrtorder_1] = '4' or [nrtorder_1] = '5' or [nrtorder_1] = '6' or [nrtlocal_1] = '1' or [nrtlocal_1] = '2' or [nrtlocal_1] = '3' or [nrtlocal_1] = '4' or [nrtlocal_1] = '5' or [nrtlocal_1] = '6' or [nrtinstruct_1] = '1' or [nrtinstruct_1] = '2' or [nrtinstruct_1] = '3' or [nrtinstruct_1] = '4' or [nrtinstruct_1] = '5' or [nrtinstruct_1] = '6'	Feel free to explain your answer.	notes Custom alignment: LV
184	website_intro	Section Header: Expand Project Website The next questions are about The Expand Project website.	descriptive

185	web_1	Have you visited the Expand Project website?	radio, Required

radio, Required

1	Yes
2	No
3	I don't know

Custom alignment: LV

186	section_1 Show the field ONLY if: [web_1] = '1'	Which sections of the website did you visit? Check all that apply.	checkbox, Required

checkbox, Required

1	section_1___1	Home page
2	section_1___2	Questions and answers
3	section_1___3	Quit map
4	section_1___4	Quit calculator
5	section_1___5	Quit coach chat
6	section_1___6	Nicotine replacement therapy (NRT) order form
7	section_1___7	Other (specify)
8	section_1___8	I don't know

Custom alignment: LV
Field Annotation: @NONEOFTHEABOVE='8'

187	section_other_1 Show the field ONLY if: [section_1(7)] = '1'	What other sections of the website did you visit?	text Custom alignment: LV

188	webuse_1 Show the field ONLY if: [web_1] = '1'	Which section of the website did you find the most useful?	radio, Required

radio, Required

1	Home page
2	Questions and answers
3	Quit map
4	Quit calculator
5	Quit coach chat
6	Nicotine replacement therapy (NRT) order form
7	Other (please specify)

Custom alignment: LV

189	webothsp_1 Show the field ONLY if: [webuse_1] = '7'	What other section of the website did you find useful?	text Custom alignment: LV

190	sh_intro	Expand Project Smokers' Helpline Services The next questions are about The Expand Project's Smokers' Helpline Services.	descriptive

191	shl_1	Are you familiar with the Expand Project Smokers' Helpline services?	radio, Required

radio, Required

1	N/A I haven't smoked in the past 3 months
2	N/A I've never smoked
3	Yes
4	No
5	I don't know

Custom alignment: LV

192	shluse_1	Did you use the Expand Project Smokers' Helpline services? Smokers Helpline Services include options to speak over the phone with a quit coach, live chat and text messaging.	radio, Required

radio, Required

1	Yes
2	No
3	I don't know

Custom alignment: LV

193	shlservic_1 Show the field ONLY if: [shluse_1] = '1'	Which Smokers' Helpline services did you use? Check all that apply.	checkbox, Required 	1	shlservic_1___1	Smokers' Helpline Phone with a quit coach
2	shlservic_1___2	Smokers' Helpline Text Messaging
3	shlservic_1___3	Smokers' Helpline Live Chat
4	shlservic_1___4	I don't know	 Custom alignment: LV Field Annotation: @NONEOFTHEABOVE='4'
194	shlquit_1 Show the field ONLY if: [shluse_1] = '1'	Since starting using the Expand Project Smokers' Helpline services, have you stopped smoking for at least 24 hours, because you were trying to quit?	radio, Required | 1	Yes
2	No
3	I don't know	 Custom alignment: LV
195	shlquittimes_1 Show the field ONLY if: [shlquit_1] = '1'	How many times did you stop smoking for at least 24 hours, because you were trying to quit? Enter number only.	text (number), Required Custom alignment: LV
196	shlimpt_1 Show the field ONLY if: [shluse_1] = '1'	How important was the Expand Project Smokers' Helpline services in encouraging you to try to quit or stay smoke-free?	radio, Required | 1	Not important at all
2	Somewhat unimportant
3	Neutral
4	Somewhat important
5	Very important
6	N/A I didn't quit smoking	 Custom alignment: LV
197	shlimpt_exp_1 Show the field ONLY if: [shlimpt_1] = '1' or [shlimpt_1] = '2' or [shlimpt_1] = '3' or [shlimpt_1] = '4' or [shlimpt_1] = '5' or [shlimpt_1] = '6'	Feel free to explain your response.	notes Custom alignment: LV
198	shlhelp_1 Show the field ONLY if: [shluse_1] = '1'	How helpful was the Expand Project Smokers' Helpline services in quitting smoking?	radio, Required | 1	Not helpful at all
2	Somewhat unhelpful
3	Neutral
4	Somewhat helpful
5	Very helpful
6	N/A I didn't quit smoking	 Custom alignment: LV
199	shlreco_1 Show the field ONLY if: [shluse_1] = '1'	Would you recommend the Expand Project Smokers' Helpline services to a friend who is trying to quit smoking or stay smoke-free?	radio, Required | 1	No definitely not
2	No, I don't think so
3	Neutral
4	Yes, I think so
5	Yes, definitely	 Custom alignment: LV

200	shlreco_exp_1 Show the field ONLY if: [shlreco_1] = '1' or [shlreco_1] = '2' or [shlreco_1] = '3' or [shl reco_1] = '4' or [shlreco_1] = '5'	Feel free to explain your response.	notes Custom alignment: LV
201	shltiming_1 Show the field ONLY if: [shluse_1] = '1'	In relation to the Expand Project Smokers' Helpline services, when did you stop smoking or make an attempt to quit?	radio, Required <table><tr><td>1</td><td>I quit before using Helpline services</td></tr><tr><td>2</td><td>I made a quit attempt on the first day using Helpline services</td></tr><tr><td>3</td><td>I made a quit attempt some time after the first day using Helpline services</td></tr><tr><td>4</td><td>I did not make an attempt to quit</td></tr></table> Custom alignment: LV
202	shl_improv_1 Show the field ONLY if: [shluse_1] = '1'	How can the Expand Project Smokers' Helpline Services could be improved?	notes Custom alignment: LV
203	demo_intro_1	Additional Demographic Questions It's been a long survey... Thank you for taking the time and making it to this final section.	descriptive
204	residence_1	How long have you lived in Canada?	radio, Required <table><tr><td>1</td><td>2 years or less</td></tr><tr><td>2</td><td>3 to 5 years</td></tr><tr><td>3</td><td>6 to 10 years</td></tr><tr><td>4</td><td>11 to 20 years</td></tr><tr><td>5</td><td>All of my life</td></tr><tr><td>6</td><td>Prefer not to answer</td></tr></table> Custom alignment: LV
205	education_1	What is the highest level of education you have completed?	radio, Required <table><tr><td>1</td><td>Less than high school</td></tr><tr><td>2</td><td>High school diploma, certificate or equivalent</td></tr><tr><td>3</td><td>Some post-secondary education without degree, certificate or diploma</td></tr><tr><td>4</td><td>Registered apprenticeship or other trades certificate or diploma</td></tr><tr><td>5</td><td>College, CEGP, or other certificate or diploma</td></tr><tr><td>6</td><td>University degree</td></tr><tr><td>7</td><td>Prefer not to answer</td></tr></table> Custom alignment: LV
206	employ_1	How would you best describe your current employment status? Check all that apply	checkbox, Required <table><tr><td>1</td><td>employ_1___1</td><td>Full-time paid employment</td></tr><tr><td>2</td><td>employ_1___2</td><td>Part-time paid employment</td></tr><tr><td>3</td><td>employ_1___3</td><td>Self-employed</td></tr><tr><td>4</td><td>employ_1___4</td><td>Student</td></tr><tr><td>5</td><td>employ_1___5</td><td>Unemployed</td></tr><tr><td>6</td><td>employ_1___6</td><td>Working without pay</td></tr><tr><td>7</td><td>employ_1___7</td><td>Volunteering</td></tr><tr><td>8</td><td>employ_1___8</td><td>Other (specify)</td></tr><tr><td>9</td><td>employ_1___9</td><td>Prefer not to answer</td></tr></table> Custom alignment: LV Field Annotation: @NONEOFTHEABOVE='9'

207	employ_other_1 Show the field ONLY if: [employ_1(8)] = '1'	How would you describe your current employment status?	text Custom alignment: LV
208	house_income_1	What is your household income, before taxes and deductions, for the past year? Household income is the combined income of everyone who lives in your home.	radio, Required 1 Less than $15,000 2 $15,000 to $29,999 3 $30,000 to $59,999 4 $60,000 to $79,999 5 $80,000 to $100,000 6 More than $100,000 7 I don't know 8 Prefer not to answer Custom alignment: LV
209	ind_income_1	What is your individual income, before taxes and deductions, for the past year?	radio, Required 1 Less than $15,000 2 $15,000 to $29,999 3 $30,000 to $59,999 4 $60,000 to $79,999 5 $80,000 to $100,000 6 More than $100,000 7 I don't know 8 Prefer not to answer Custom alignment: LV
210	postal_intro_1	What are the first three digits of your postal code? (This is only for research purposes)	descriptive
211	post_letter1_1	Letter	dropdown, Required 1 G 2 H 3 J 4 K 5 L 6 M 7 N 8 P Custom alignment: LV
212	post_number1_1	Number	dropdown, Required 1 1 2 2 3 3 4 4 5 5 6 6 7 7 8 8 9 9 0 0 Custom alignment: LV

213	post_letter2_1	Letter	dropdown, Required
			1 A
			2 B
			3 C
			4 D
			5 E
			6 F
			7 G
			8 H
			9 I
			10 J
			11 K
			12 L
			13 M
			14 N
			15 O
			16 P
			17 Q
			18 R
			19 S
			20 T
			21 U
			22 V
			23 W
			24 X
			25 Y
			26 Z
			Custom alignment: LV
214	rural_city_1	What best describes the environment you live in?	radio, Required
			1 Large urban centre (100,000+ people)
			2 Medium city/town (30,000-99,999 people)
			3 Small city/town (1,000-29,999 people)
			4 Rural area (< 1,000 people)
			Custom alignment: LV

215	where_live_1	How would you describe your current living situation? (This is only for research purposes) Please select one.	radio, Required
			1 Boarding home
			2 Couch surfing
			3 Correctional facility
			4 Foster home
			5 Friend's home
			6 Group home
			7 In a car
			8 In a tent
			9 On the street
			10 Own my own place
			11 Parent/guardian's home
			12 Relative's home
			13 Rent my own place with a roommate/partner
			14 Rent my own place by myself
			15 School residence
			16 Shelter/hostel
			17 Subsidized housing
			18 Supportive/assisted housing
			19 Other (please specify)
			20 I don't know
			21 Prefer not to answer
			Custom alignment: LV
216	where_live_other_1 Show the field ONLY if: [where_live_1] = '19'	Where do you currently live?	text Custom alignment: LV
217	comments	Section Header: The last word is yours. If you feel like it, please let us know about your experience with the survey and if you have any suggestions on how to make it better.	notes Custom alignment: LV
218	newsletter	Section Header: Thank you for taking the time to complete this survey. We really appreciate your input and your data will help shape the campaign we are developing. Please be sure to press the SUBMIT button to send your responses and exit the survey.You will receive a $10 electronic gift card in the next 10 days. Please note that the gift card is not sent automatically but only after reviewing the survey data for completeness.If you have any questions, please contact us at smokingproject@dlsph.utoronto.ca.Would you like to receive our project updates?	yesno, Required 1 Yes 0 No Custom alignment: LV
219	followup1_complete	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete