FLORIDA YOUTH SURVEY 2007
Florida Youth Tobacco Survey (FYTS)
2007 Questionnaire

This survey is about you and what you do that may affect your health. The information you give us will be used to develop better education programs for people like you.

DO NOT write your name on this survey. The answers you give will be kept private. No one will know what you write. Remember, this is not a test. Answer the questions based on what you really do and know.

Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class. If you are not comfortable answering a question, just leave it blank.

The questions that ask about your background will only be used to describe the types of students completing this survey. The information will not be used to find out who you are. No names will ever be reported.

Make sure to read every question. Fill in the circles on the survey booklet completely. When you are finished, follow the instructions of the person giving you the survey.

Thank You Very Much For Your Help.
DIRECTIONS

- Use a #2 pencil only.
- Make dark marks.
- Fill in a response like this: ☐ ☐ ☐ ☐ ☐.
- To change your answer, erase completely.

THE FIRST QUESTIONS ASK FOR SOME INFORMATION ABOUT YOURSELF.

1. How old are you?
   ☐ 9 years old
   ☐ 10 years old
   ☐ 11 years old
   ☐ 12 years old
   ☐ 13 years old
   ☐ 14 years old
   ☐ 15 years old
   ☐ 16 years old
   ☐ 17 years old
   ☐ 18 years old
   ☐ 19 years old
   ☐ 20 years old
   ☐ 21 years old

2. What is your sex?
   ☐ Female
   ☐ Male

3. What grade are you in?
   ☐ 6th
   ☐ 7th
   ☐ 8th
   ☐ 9th
   ☐ 10th
   ☐ 11th
   ☐ 12th
   ☐ Ungraded or other grade

4. Are you Hispanic or Latino?
   ☐ Yes ☐ No

5. How do you best describe yourself? (SELECT ONLY ONE RESPONSE)
   ☐ American Indian or Alaska Native
   ☐ Asian
   ☐ Black or African American
   ☐ Native Hawaiian or Other Pacific Islander
   ☐ White
   ☐ Other

6. On how many of the past 7 days did you exercise or participate in physical activity for at least 20 minutes that made you sweat and breathe hard, such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing, or similar aerobic activity?
   ☐ 0 days
   ☐ 1 or 2 days
   ☐ 3 or 4 days
   ☐ 5 or 6 days
   ☐ 7 days

7. On how many of the past 7 days did you exercise or participate in physical activity for at least 20 minutes that made you sweat and breathe hard, such as fast walking, slow bicycling, skating, pushing a lawn mower, or mopping floors?
   ☐ 0 days
   ☐ 1 or 2 days
   ☐ 3 or 4 days
   ☐ 5 or 6 days
   ☐ 7 days

THE NEXT QUESTIONS ASK ABOUT TOBACCO USE.

Cigarette Smoking

8. Have you ever tried cigarette smoking, even one or two puffs?
   ☐ Yes ☐ No

9. How old were you when you smoked a cigarette for the first time?
   ☐ I have never smoked a cigarette
   ☐ 8 years old or younger
   ☐ 9 years old
   ☐ 10 years old
   ☐ 11 years old
   ☐ 12 years old
   ☐ 13 years old
   ☐ 14 years old
   ☐ 15 years old
   ☐ 16 years old
   ☐ 17 years old or older
10. About how many cigarettes have you smoked in your entire life?
   - None
   - 1 to 2 puffs, but not a whole cigarette
   - One cigarette
   - 2 to 20 cigarettes
   - 21 to 99 cigarettes
   - 100 or more cigarettes

11. Have you ever smoked cigarettes daily, that is, at least one cigarette every day for 30 days?
   - Yes
   - No

12. During the past 30 days, on how many days did you smoke cigarettes?
   - 0 days
   - 1 or 2 days
   - 3 to 5 days
   - 6 to 9 days
   - 10 to 19 days
   - 20 to 29 days
   - All 30 days

13. During the past 30 days, on the days you smoked, how many cigarettes did you smoke per day?
   - 0 cigarettes
   - Less than 1 cigarette per day
   - 1 cigarette per day
   - 2 to 5 cigarettes per day
   - 6 to 10 cigarettes per day
   - 11 to 20 cigarettes per day
   - More than 20 cigarettes per day

14. During the past 30 days, how did you usually get your cigarettes? (CHOOSE ONLY ONE ANSWER)
   - I did not smoke during the past 30 days
   - I bought them in a store such as a convenience store, supermarket, or gas station
   - I bought them from a vending machine
   - I gave someone else money to buy them for me
   - I borrowed (or bummed) them from someone else
   - I stole them from a store
   - I stole them from someone I know
   - I got them from my parents
   - A person 18 years old or older gave them to me
   - I bought them from another person (not in a store)
   - I bought them on the internet
   - I got them some other way

15. When you bought or tried to buy cigarettes in a store during the past 30 days, were you ever asked to show proof of age?
   - Yes
   - No

16. During the past 30 days, did anyone ever refuse to sell you cigarettes because of your age?
   - Yes
   - No

17. When you bought or tried to buy cigarettes during the past 30 days, did you use or try to use a fake ID?
   - Yes
   - No

18. During the past 30 days, on how many days did you smoke cigarettes on school property?
   - 0 days
   - 1 or 2 days
   - 3 to 5 days
   - 6 to 9 days
   - 10 to 19 days
   - 20 to 29 days
   - All 30 days

19. During the past 12 months, did you ever try to quit smoking cigarettes?
   - Yes
   - No

20. Do you want to completely stop smoking cigarettes?
   - Yes
   - No
21. How many times, if any, have you tried to quit smoking?
   - I have never smoked cigarettes
   - None
   - 1 time
   - 2 times
   - 3 to 5 times
   - 6 to 9 times
   - 10 or more times

22. When you last tried to quit, how long did you stay off cigarettes?
   - I have never smoked cigarettes
   - I smoke but have never tried to quit
   - Less than 1 day
   - 1 to 7 days
   - More than 7 days but less than 30 days
   - More than 30 days but less than 6 months
   - More than 6 months but less than 1 year
   - More than 1 year

23. How long can you go without smoking before you feel like you need a cigarette?
   - I don't smoke now
   - Less than 15 minutes
   - 15 to 30 minutes
   - More than 30 minutes but less than 60 minutes
   - 1 to 2 hours
   - More than 2 hours but less than half a day
   - More than half a day

24. How soon after you wake up do you usually smoke your first cigarette?
   - I don't smoke now
   - Less than 15 minutes
   - 15 to 30 minutes
   - More than 30 minutes but less than 60 minutes
   - 1 to 2 hours
   - More than 2 hours but less than half a day
   - More than half a day

25. How true is this statement for you? When I go without a smoke for a few hours, I experience craving.
   - I don't smoke now
   - Not at all true
   - Not very true
   - Fairly true
   - Very true

26. How true is this statement for you? I sometimes have a strong craving where it feels like I'm in the grip of a force that I can't control.
   - I don't smoke now
   - Not at all true
   - Not very true
   - Fairly true
   - Very true

27. In the past 12 months, did you do any of the following to help you stop smoking? (SELECT ALL YOU HAVE TRIED)
   - I did not smoke in the past 12 months
   - Attended a program in my school
   - Attended a program in my community
   - Called a help line or a quit line
   - Used nicotine gum or nicotine patch
   - Used any medications to help you stop
   - Used a quit line service on the internet

28. Are you seriously thinking about quitting smoking? Would you say...
   - I do not smoke now
   - Yes, within the next 30 days
   - Yes, within the next 6 months
   - Yes, but not within the next 6 months
   - No, I am not thinking of quitting smoking totally and for good
   - Not sure

Smokeless Tobacco: Chewing Tobacco, Snuff, or Dip

29. Have you ever used chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?
   - Yes
   - No

30. How old were you when you used chewing tobacco, snuff, or dip for the first time?
   - I have never used chewing tobacco, snuff, or dip
   - 8 years old or younger
   - 9 years old
   - 10 years old
   - 11 years old
   - 12 years old
   - 13 years old
   - 14 years old
   - 15 years old
   - 16 years old
   - 17 years old or older
31. During the past 30 days, on how many days did you use chewing tobacco, snuff, or dip?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

32. During the past 30 days, on how many days did you use chewing tobacco, snuff, or dip on school property?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

33. During the past 30 days, how did you usually get your chewing tobacco, snuff, or dip? (CHOOSE ONLY ONE ANSWER)

- I did not use chewing tobacco, snuff, or dip during the past 30 days
- I bought it in a store such as a convenience store, supermarket, or gas station
- I bought it from a vending machine
- I gave someone else money to buy it for me
- I borrowed (or bummed) it from someone else
- I stole it from a store
- I stole it from someone I know
- I got it from my parents
- A person 18 years old or older gave it to me
- I bought it from another person (not in a store)
- I bought it on the internet
- I got it some other way

34. When you bought or tried to buy chewing tobacco, snuff, or dip in a store during the past 30 days, were you ever asked to show proof of age?

- I did not try to buy chewing tobacco, snuff, or dip in a store during the past 30 days
- Yes, I was asked to show proof of age
- No, I was not asked to show proof of age

35. During the past 30 days, did anyone refuse to sell you chewing tobacco, snuff, or dip because of your age?

- I did not try to buy chewing tobacco, snuff, or dip in a store during the past 30 days
- Yes, someone refused to sell me chewing tobacco, snuff, or dip because of my age
- No, my age did not keep me from buying chewing tobacco, snuff, or dip

36. Have you ever tried smoking cigars, cigarillos, or little cigars, such as Swisher Sweets, Black & Mild, Phillies, Garcia Y Vega, Macanudos, or King Edward, even one or two puffs?

- Yes
- No

37. How old were you when you smoked a cigar, cigarillo, or little cigar for the first time?

- 8 years old or younger
- 9 years old
- 10 years old
- 11 years old
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old or older

38. During the past 30 days, on how many days did you smoke cigars, cigarillos, or little cigars?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

39. During the past 30 days, on how many days did you smoke cigars, cigarillos, or little cigars on school property?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days
40. During the past 30 days, how did you usually get your cigars, cigarillos, or little cigars? (CHOOSE ONLY ONE ANSWER)
   - I did not smoke a cigar, cigarillo, or little cigar during the past 30 days
   - I bought them in a store such as a convenience store, supermarket, or gas station
   - I bought them from a vending machine
   - I gave someone else money to buy them for me
   - I borrowed (or bummed) them from someone else
   - I stole them from a store
   - I stole them from someone I know
   - I got them from my parents
   - A person 18 years old or older gave them to me
   - I bought them from another person (not in a store)
   - I bought them on the internet
   - I got them some other way

41. When you bought or tried to buy cigars, cigarillos, or little cigars in a store during the past 30 days, were you ever asked to show proof of age?
   - I did not try to buy cigars, cigarillos, or little cigars in a store during the past 30 days
   - Yes, I was asked to show proof of age
   - No, I was not asked to show proof of age

42. During the past 30 days, did anyone ever refuse to sell you cigars, cigarillos, or little cigars because of your age?
   - I did not try to buy cigars, cigarillos, or little cigars in a store during the past 30 days
   - Yes, someone refused to sell me cigars, cigarillos, or little cigars because of my age
   - No, my age did not keep me from buying cigars, cigarillos, or little cigars

THE NEXT QUESTIONS ARE ABOUT THE FOLLOWING SPECIALTY TOBACCO PRODUCTS:
1. BIDIS (OR “BEEDIES”) WHICH ARE SMALL BROWN CIGARETTES FROM INDIA CONSISTING OF TOBACCO WRAPPED IN A LEAF TIED WITH A THREAD;
2. KRETEKS (OR “CLOVE CIGARETTES”) WHICH ARE CIGARETTES CONTAINING TOBACCO AND CLOVE EXTRACT;
3. PIPE TOBACCO WHICH INCLUDES ANY TOBACCO PRODUCT PLAIN OR FLAVORED THAT IS SMOKED OUT OF A PIPE; AND
4. FLAVORED CIGARETTES WHICH ARE CIGARETTES THAT HAVE BEEN MADE TO TASTE LIKE OTHER FLAVORS SUCH AS CHOCOLATE, CANDY, OR FRUIT FLAVORS.

43. Have you ever tried smoking bidis, kreteks, or tobacco in a pipe?
   - Yes
   - No

44. During the past 30 days, on how many days did you smoke bidis, kreteks, or tobacco in a pipe?
   - 0 days
   - 1 or 2 days
   - 3 to 5 days
   - 6 to 9 days
   - 10 to 19 days
   - 20 to 29 days
   - All 30 days

45. Have you ever tried smoking flavored cigarettes?
   - Yes
   - No

46. During the past 30 days, on how many days did you smoke flavored cigarettes?
   - 0 days
   - 1 or 2 days
   - 3 to 5 days
   - 6 to 9 days
   - 10 to 19 days
   - 20 to 29 days
   - All 30 days

47. Have you ever smoked tobacco out of a water pipe (also called a “hookah”), even one or two puffs?
   - Yes
   - No

THE NEXT QUESTIONS ASK ABOUT TOBACCO USE PREVENTION EDUCATION.

48. During this school year, were you taught in any of your classes about tobacco use?
   - Yes
   - No
   - Not sure

49. During this school year, were you taught in any of your classes about the reasons why some people of your age smoke cigarettes?
   - Yes
   - No
   - Not sure

50. During this school year, were you taught in any of your classes about the strategies tobacco companies use to attract teenagers to their products?
   - Yes
   - No
   - Not sure
51. During this school year, were you taught in any of your classes that most people your age do not smoke cigarettes?
   ☐ Yes
   ☐ No
   ☐ Not sure

52. During this school year, did you learn in any of your classes about different kinds of pressure to smoke? (For example, pressure from media or friends.)
   ☐ Yes
   ☐ No
   ☐ Not sure

53. During this school year, did you practice in any of your classes ways to say “no” to tobacco? (For example, through skits or role playing.)
   ☐ Yes
   ☐ No
   ☐ Not sure

54. During this school year, were you taught in any of your classes about the effects of smoking? (For example, it makes your teeth yellow, causes wrinkles, or makes you smell bad.)
   ☐ Yes
   ☐ No
   ☐ Not sure

55. During this school year, were any of the lessons or activities you had on tobacco use prevention led by other students?
   ☐ Yes
   ☐ No
   ☐ Not sure

56. During this school year, has what you learned in school helped you feel it is okay to say “no” to friends who offer you cigarettes?
   ☐ Yes
   ☐ No
   ☐ Not sure

57. Does your school have any special groups or classes for students who want to quit using tobacco?
   ☐ Yes
   ☐ No
   ☐ Not sure

58. Is there a rule at your school that no one is allowed to smoke cigarettes in the school building or on the school yard?
   ☐ Yes
   ☐ No
   ☐ Not sure

59. Have you seen students break that rule?
   ☐ My school does not have a no-smoking rule
   ☐ Yes
   ☐ No
   ☐ Not sure

60. Have you seen adults break that rule?
   ☐ My school does not have a no-smoking rule
   ☐ Yes
   ☐ No
   ☐ Not sure

61. During the past 12 months, have you seen teachers, staff, or other adults use chewing tobacco on school property?
   ☐ Yes
   ☐ No
   ☐ Not sure

62. How strongly do you agree or disagree with the following statement: Tobacco use by adults should not be allowed on school grounds or at any school events.
   ☐ Strongly agree
   ☐ Agree
   ☐ Disagree
   ☐ Strongly disagree

THE NEXT QUESTIONS ASK ABOUT YOUR THOUGHTS ABOUT TOBACCO.

63. Do you think that you will try a cigarette soon?
   ☐ I have already tried smoking cigarettes
   ☐ Yes
   ☐ No

64. Do you think you will smoke a cigarette at anytime during the next year?
   ☐ Definitely yes
   ☐ Probably yes
   ☐ Probably not
   ☐ Definitely not
65. Do you think you will be smoking cigarettes 5 years from now?
- Definitely yes
- Probably yes
- Probably not
- Definitely not

66. If one of your best friends offered you a cigarette, would you smoke it?
- Definitely yes
- Probably yes
- Probably not
- Definitely not

67. Do you think people can get addicted to cigarette smoking just like they can get addicted to cocaine or heroin?
- Definitely yes
- Probably yes
- Probably not
- Definitely not

68. Do you think young people who smoke cigarettes have more friends?
- Definitely yes
- Probably yes
- Probably not
- Definitely not

69. Do you think smokers have shorter lives than non-smokers?
- Definitely yes
- Probably yes
- Probably not
- Definitely not

70. Do you think smoking cigarettes makes young people look cool or fit in?
- Definitely yes
- Probably yes
- Probably not
- Definitely not

71. Do you think smoking cigarettes helps people feel more comfortable at parties and in other social situations?
- Definitely yes
- Probably yes
- Probably not
- Definitely not

72. Do you think smoking cigarettes helps people maintain or control body weight?
- Definitely yes
- Probably yes
- Probably not
- Definitely not

73. Do you think smoking cigarettes helps people relieve stress?
- Definitely yes
- Probably yes
- Probably not
- Definitely not

74. Do you think you would be able to quit smoking cigarettes if you wanted to?
- Yes
- No

75. Has a doctor or someone in a doctor’s office talked to you about the danger of tobacco use, in the past 12 months?
- I have not visited a doctor’s office in the past 12 months
- Yes
- No

76. Has a dentist or someone in a dentist’s office talked to you about the danger of tobacco use, in the past 12 months?
- I have not visited a dentist’s office in the past 12 months
- Yes
- No

77. Has a parent or guardian talked to you about the danger of tobacco use, in the past 12 months?
- Yes
- No

78. Has a friend talked to you about the danger of tobacco use, in the past 12 months?
- Yes
- No

79. During the past 12 months, have you participated in any community events to discourage people your age from using cigarettes, chewing tobacco, snuff, dip, or cigars?
- Yes
- No
87. During the past 12 months, did you buy or receive anything that has a tobacco company name or picture on it?

- Yes
- No

88. Would you ever use or wear something that has a tobacco company name or picture on it such as a lighter, t-shirt, hat, or sunglasses?

- Definitely yes
- Probably yes
- Probably not
- Definitely not

89. During the past 7 days, on how many days were you in the same room with someone who was smoking cigarettes?

- 0 days
- 1 or 2 days
- 3 or 4 days
- 5 or 6 days
- 7 days

90. During the past 7 days, on how many days did you ride in a car with someone who was smoking cigarettes?

- 0 days
- 1 or 2 days
- 3 or 4 days
- 5 or 6 days
- 7 days

91. During the past 7 days, when you were around someone who was smoking indoors, were you usually:

- I was not around anyone smoking during the past 7 days
- At home
- At school
- At work
- In another public place like a mall
- At someone else's house
- In your parent's car
- In someone else's car
- At some other place
92. During the past 7 days, when you were around someone who was smoking indoors, who was smoking?
   - I was not around anyone smoking during the past 7 days
   - One or both of my parents
   - Another relative
   - One or more of my friends
   - Someone I work with
   - Someone I don’t know

93. Do you think smoke from other people’s cigarettes is harmful to you?
   - Definitely yes
   - Probably yes
   - Probably not
   - Definitely not

94. In the past 12 months, have you ever asked someone not to smoke?
   - Yes
   - No

95. On the same occasion, what was the primary reason you asked that person not to smoke?
   - Smoke was annoying you
   - Concerned about long-term health effects of secondhand smoke
   - Smoking was illegal
   - Concerned about the smoker’s health
   - Concerned about your own health
   - Other
   - Not sure

96. Does anyone who lives in your home smoke cigarettes now? (Do not count yourself.)
   - Yes
   - No

97. In the past 12 months, have you asked any of the people who live in your home who smoke, to quit smoking?
   - No one in my home smoked in the past 12 months
   - Yes
   - No

98. Does anyone who lives in your home use chewing tobacco, snuff, or dip now? (Do not count yourself.)
   - Yes
   - No

99. Which statement best describes you?
   - I do not smoke
   - I smoke and my parents don’t know about it
   - I smoke and my parents don’t like it
   - I smoke and my parents don’t mind

100. Have your parents ever offered you a cigarette?
   - Yes
   - No

101. Is smoking allowed inside your home?
   - Yes
   - No

102. How many of your closest friends smoke?
   - None
   - One
   - Two
   - Three
   - Four or more
   - Not sure

103. Have you ever asked any of your closest friends to quit smoking?
   - None of my closest friends ever smoked
   - Yes
   - No

104. How many of your closest friends use chewing tobacco, snuff, or dip?
   - None
   - One
   - Two
   - Three
   - Four or more
   - Not sure

105. How many of your closest friends smoke cigars, cigarillos, or little cigars?
   - None
   - One
   - Two
   - Three
   - Four or more
   - Not sure

106. What is the youngest age a person can legally buy cigarettes in Florida?
   - Less than 16 years old
   - 16 years old
   - 18 years old
   - 21 years old
   - Not sure
107. Have you or anyone you know gotten a ticket, paid a fine, or had to go to court for using or possessing tobacco? (YOU CAN CHOOSE ONE ANSWER, OR MORE THAN ONE)
   ① Yes, I have
   ② Yes, someone I know has
   ③ No

108. According to Florida law, can your driver’s license be suspended if you are under 18 and caught with tobacco?
   ① Yes
   ② No
   ③ Not sure

109. Does Florida have a law that punishes anyone under age 18 who has cigarettes or any other tobacco product in their possession?
   ① Yes
   ② No
   ③ Not sure

110. Has a doctor or nurse ever told you that you have asthma?
   ① Yes
   ② No
   ③ Not sure

111. During the past 12 months, have you ever had an asthma attack?
   ① I do not have asthma
   ② No, I have asthma, but I have not had an asthma attack during the past 12 months
   ③ Yes, I have had an asthma attack during the past 12 months
   ④ Not sure

112. How tall are you without your shoes on? (Write your height in the blank boxes. Fill in the matching circle below each written number.)

113. How much do you weigh without your shoes on? (Write your weight in the blank boxes. Fill in the matching circle below each written number.)

114. Which of the following are you trying to do about your weight?
   ① Lose weight
   ② Gain weight
   ③ Stay the same weight
   ④ I am not trying to do anything about my weight

THANK YOU FOR PARTICIPATING IN THIS SURVEY.