

# 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
  - B) Less than 1 cigarette per day
  - C) 1 cigarette per day
  - D) 2 to 5 cigarettes per day
  - E) 6 to 10 cigarettes 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
- 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
  - B) I bought them in a store such as a convenience store, supermarket, or gas station
  - C) I bought them from a vending machine
  - D) I gave someone else money to buy them for me
  - E) I borrowed (or bummed) them from someone else
  - F) I took them from a store or family member
  - G) A friend gave them to 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

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- 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

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

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

	No	Yes	Not Sure
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

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