

2005 American Indian Adult Tobacco Interview

Eligibility

Are you at least age 18?

==> [IF LESS THAN AGE 18, DON'T KNOW OR REFUSED, SAY: Thank you but we are only interviewing adults age 18 and older.]

Are you American Indian or Alaska Native?

==> [IF NOT AMERICAN INDIAN OR ALASKA NATIVE, DON'T KNOW OR REFUSED, SAY: Thank you but we are only interviewing American Indians and Alaska Natives.]

Interviewer Initials:	<input type="text"/>	<input type="text"/>	
Date of interview:	<input type="text"/>	<input type="text"/>	<input type="text"/>

Survey Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Data Entry Initials:	<input type="text"/>	<input type="text"/>	
Date of Entry:	<input type="text"/>	<input type="text"/>	<input type="text"/>

GENERAL HEALTH

Let's get started. First, I am going to ask you a question about your general health.

1. Would you say in general your health is: Excellent Good Fair Poor

INDIAN COMMUNITY: CIGARETTE SMOKING

The next few questions are about your thoughts on cigarette smoking in our community.

2. How many of the adults in the Indian community do you think smoke cigarettes? Would you say:
- Almost all
 - More than half
 - Less than half
 - Almost none
3. How many of the teens in the Indian community do you think smoke cigarettes? Would you say:
- Almost all
 - More than half
 - Less than half
 - Almost none
4. How much pressure is there on adults in the Indian community to smoke cigarettes? Would you say there is:
- A lot of pressure
 - Some pressure
 - A little pressure
 - No pressure
5. How much pressure is there on teens in the Indian community to smoke cigarettes? Would you say there is:
- A lot of pressure
 - Some pressure
 - A little pressure
 - No pressure
6. How strongly do you agree or disagree with this statement? It is a community's responsibility to discourage cigarette smoking among young people. Would you...
- Strongly agree
 - Somewhat agree
 - Somewhat disagree
 - Strongly disagree

HOUSEHOLD

The next set of questions is about cigarette smoking in your household, not including tobacco that is used for ceremonial prayer or in a traditional way.

7. Is cigarette smoking allowed in your home?

Yes →

7a. Would that be everywhere or only in some places? <input type="radio"/> Everywhere <input type="radio"/> Only in some places

No →

7b. Are there any exceptions to this no-smoking rule? <input type="radio"/> Yes IF YES, what would that be? _____ <input type="radio"/> No
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8. During the past 7 days did anyone smoke cigarettes anywhere inside your home?

- Yes
- No

9. How many people live in your household?

_____ [IF PARTICIPANT LIVES ALONE, GO TO QUESTION 12]

9a. Number of Adults _____

9b. Number of Children _____ [IF ZERO, GO TO QUESTION 12]

9c. What are the ages of the children in your household?

9d. What is your relationship to the children in your household? Are you their...

[OKAY TO CHOOSE MORE THAN ONE]

- Parent
- Grandparent
- Aunt/Uncle
- Sister/ Brother
- Cousin
- Friend
- Other: _____

HOUSEHOLD (CONTINUED)

10. Would you say that your household has rules or expectations against youth smoking cigarettes?

- Yes
- No

10a. Have you ever talked with the youth in your household about the consequences of breaking the rules or expectations against smoking?

- Yes
- No

11. How strongly do you agree or disagree with this statement? There would be consequences for children in my household if they were smoking cigarettes. Would you...

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree

12. At what age do you think it is okay to start smoking cigarettes?

_____ Age or Never

13. How many of the people who live in your household smoke cigarettes?

Number of smokers _____

SECONDHAND SMOKE

Next, we are going to be talking about your experience with secondhand smoke, or smoke from other people's cigarettes.

14. In the past 12 months, have you asked anybody not to smoke cigarettes around you so you wouldn't have to breathe their smoke?

- Yes
- No
- Never around anybody who smokes

15. In the past 12 months, have you asked anybody not to smoke cigarettes around children so they wouldn't have to breathe their smoke?

- Yes
- No
- Never around children
- Never around anybody who smokes

16. In the past 12 months, have you ever **wanted** to ask somebody not to smoke cigarettes around you or a child **but you didn't ask**?

- Yes
- No
- Never around anybody who smokes

17. Has cigarette smoke ever been a major factor in your decision **not** to go to a place or an event, such as bingo, restaurants, bar, or casinos?

- Yes
- No

COMMERCIAL TOBACCO USE

Now we are going to talk about your experience with smoking cigarettes.

18. Not including ceremonial or sacred smoking, have you smoked at least 100 cigarettes, (about 5 packs), in your entire life?

- Yes
- No **[GO TO PAGE 5, NON-SMOKER]**

19. Not including ceremonial or sacred smoking, do you smoke cigarettes now at all?

- Yes **[GO TO PAGE 8, CURRENT SMOKER]**
- No **[GO TO PAGE 6, FORMER SMOKER]**

NON-SMOKER

Even though you have not smoked more than 100 cigarettes in your lifetime,

20. Not including ceremonial or sacred smoking, have you ever smoked a cigarette, even 1 or 2 puffs?

- Yes
- No [GO TO QUESTION 23]

21. How old were you the first time you smoked a cigarette that was **not** for ceremonial or sacred purposes?

_____Age

22. Tell me about your first cigarette smoking experience.

23. At what age did your parents say it was okay for you to smoke cigarettes?

_____Age or Never

24. How strongly do you agree or disagree with this statement? People close to me would be upset if I started smoking. Would you....

- __ Strongly agree
- __ Agree
- __ Disagree
- __ Strongly disagree

[IF "STRONGLY AGREE" OR "AGREE"] 24a. Of the people who would be upset, whose opinion matters the most? _____ [RELATIONSHIP]
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[GO TO PAGE 11]

FORMER SMOKER

Think back to when you first started smoking cigarettes. We are not talking about smoking for ceremonial or sacred purposes here.

25. How old were you the first time you smoked a cigarette, even one or two puffs?
_____Age

26. Tell me about your first cigarette smoking experience.

27. How old were you when you started smoking cigarettes regularly?

_____Age

28. Why did you continue to smoke? _____

29. At what age did your parents say it was okay for you to smoke cigarettes?

_____Age or Never

30. About how long has it been since you last smoked cigarettes?

- Within the past month (\leq 1 MONTH AGO)
- Within the past 3 months (>1 MONTH BUT ≤ 3 MONTHS AGO)
- Within the past 6 months (>3 MONTHS BUT ≤ 6 MONTHS AGO)
- Within the past year (>6 MONTHS BUT ≤ 1 YEAR AGO)
- Within the past 5 years (>1 YEAR BUT ≤ 5 YEARS AGO)
- Within the past 10 years (>5 YEARS BUT ≤ 10 YEARS AGO)
- 10 or more years ago

30a. What has helped you to not smoke cigarettes for this long? _____

31. What was your main reason for quitting? _____

32. What was the hardest part about quitting? _____

FORMER SMOKER (CONTINUED)

33. How strongly do you agree or disagree with this statement? People close to me would be upset if I started smoking again. Would you...

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree

[IF "STRONGLY AGREE" OR "AGREE"]
33a. Of the people who would be upset, whose opinion matters the most? _____ [RELATIONSHIP]

34. Before you quit smoking, did people close to you talk with you about quitting?

- Yes
- No

[IF YES]
34a. Who was that? _____ [RELATIONSHIP]

[GO TO PAGE 11]

CURRENT SMOKER

Thinking back to when you first started smoking,

35. How old were you the first time you smoked a cigarette, even one or two puffs, **not** for ceremonial or sacred purposes?

_____Age

36. Tell me about your first cigarette smoking experience.

37. How old were you when you started smoking cigarettes regularly?

_____Age

38. At what age did your parents think it was okay for you to smoke cigarettes?

_____Age or Never

39. During the past 30 days, on approximately how many days did you smoke cigarettes?

_____ Number of days [IF ZERO, GO TO QUESTION 41]

40. On the days when you smoked in the past 7 days, about how many cigarettes did you smoke a day?

_____ Number of cigarettes per day [1 PACK = 20 CIGARETTES]

41. During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit?

Yes

No

42. Do you want to quit smoking?

Yes

No [GO TO QUESTION 44]

Not sure [GO TO QUESTION 44]

43. What is your main reason for wanting to quit? _____

44. What is your main reason for not quitting? _____

CURRENT SMOKER (CONTINUED)

45. What are the benefits of smoking for you? You can choose any or all from the following list.

- Stress-relief
- To Relax
- To Be Alert
- To Socialize/ Be Friendly/ Visit
- Other reasons: _____

46. How strongly do you agree or disagree with this statement? People close to me are upset about my smoking. Would you...

- Strongly agree
- Agree
- Disagree
- Strongly disagree

[IF "STRONGLY AGREE" OR "AGREE"] 46a. Of the people who are upset, whose opinion matters the most? _____ [RELATIONSHIP]

47. Have people close to you talked with you about quitting?

- Yes
- No

[IF YES] 47a. Who was that? _____ [RELATIONSHIP]

48. How many times, if any, have you tried to quit smoking?

- None [GO TO QUESTION 51]
- 1 time
- 2 times
- 3 to 5 times
- 6 to 9 times
- 10 or more times

49. The last time you tried to quit, how long did you stay off cigarettes?

- Less than a 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 a year
- More than a year

50. The last time you tried to quit, what helped you to not smoke cigarettes for that long? _____

CURRENT SMOKER (CONTINUED)

51. If you were going to try to quit smoking, would you try any of the following?

- | | | |
|---|---------------------------|--------------------------|
| a. Ask a friend or family member for help | <input type="radio"/> Yes | <input type="radio"/> No |
| b. Try medications (nicotine patch, gum or Zyban/ Wellbutrin) | <input type="radio"/> Yes | <input type="radio"/> No |
| c. Attend a smoking cessation program or group | <input type="radio"/> Yes | <input type="radio"/> No |
| d. Talk to a doctor or nurse at a clinic about quitting | <input type="radio"/> Yes | <input type="radio"/> No |
| e. Read a book or a pamphlet about quitting | <input type="radio"/> Yes | <input type="radio"/> No |
| f. Call a quit smoking phone line | <input type="radio"/> Yes | <input type="radio"/> No |
| g. Talk to a spiritual leader or medicine person | <input type="radio"/> Yes | <input type="radio"/> No |
| h. Go to a quit smoking website | <input type="radio"/> Yes | <input type="radio"/> No |
| i. Try acupuncture | <input type="radio"/> Yes | <input type="radio"/> No |
| j. I would just quit on my own | <input type="radio"/> Yes | <input type="radio"/> No |
| k. Something else: _____ | <input type="radio"/> Yes | <input type="radio"/> No |

CEREMONIAL OR SACRED USE

Next, I am going to ask about your experiences with tobacco for ceremonial prayer or traditional reasons.

52. Has anyone ever taught you or shown you how Indian people use tobacco for ceremonial prayer or traditional reasons?

- Yes
- No

<p>[IF YES] 52a. Who was this? You can choose as many as you want.</p> <ul style="list-style-type: none"><input type="radio"/> Parent/Guardian<input type="radio"/> Grandparent<input type="radio"/> Brother or Sister<input type="radio"/> Friend<input type="radio"/> Spiritual Advisor/Medicine Person<input type="radio"/> Aunt or Uncle<input type="radio"/> Cousin<input type="radio"/> Community Leader<input type="radio"/> Anybody else: _____

53. Have you ever used tobacco for ceremonial prayer or traditional reasons?

- Yes
- No [GO TO PAGE 12]

54. Have you used tobacco for ceremonial prayer or traditional reasons in the past 12 months?

- Yes
- No [GO TO PAGE 12]

55. How often do you use tobacco for ceremonial prayer or traditional reasons?

- Daily
- Weekly
- Monthly
- A few times a year or less

56. What type of tobacco do you use for ceremonial prayer or traditional reasons? You can choose any or all from the list I will read to you.

- Native tobacco plant/ mixture (i.e. Indian tobacco, kinnickinnick, can-sa-sa)
- Cigarettes
- Pouch/package tobacco (pipe tobacco)
- Other: _____

57. What type of tobacco do you most often use for ceremonial prayer or traditional reasons? [ONLY ONE]

- Native tobacco plant/ mixture (i.e. Indian tobacco, kinnickinnick, can-sa-sa)
- Cigarettes
- Pouch/package tobacco (pipe tobacco)
- Other: _____

58. If you needed traditional tobacco (i.e., Indian tobacco, kinnickinnick, can-sa-sa) would you know where to get it?

- Yes
- No

59. How hard is it for you to get traditional tobacco, would you say it is:

- Very Hard
- Hard
- A Little Hard
- Not Hard

COMMUNITY IDENTIFIED PROBLEMS & SOLUTIONS

Okay, we are almost done. The next questions are about smoking in the Indian community.

60. Do you know where to find resources in the Indian community to help people quit smoking?

- Yes
- No

61. Do you think smoking is a problem in our community?

- Yes →

61a. If yes, why do you think smoking is a problem in our community?

- No →

61b. If no, why do you think smoking is NOT a problem in our community?

62. What can be done to help young Indian kids in our community avoid addictive smoking?

DEMOGRAPHICS

These final questions are about general characteristics, such as your age, and tribal affiliation.

63. What's the zip code where you live? _____
 Don't know [ASK FOR ADDRESS]
64. Are you female or male?
 Female
 Male
65. Which category best describes your age?
 18-24 years 25-34 years 35-44 years 45-54 years 55-64 years 65+ years
66. How would you describe yourself? You can pick all that describe you from the following list.
 American Indian, Alaska Native
 White
 Black or African American
 Hispanic or Latino
 Asian
 Native Hawaiian or other Pacific Islander
 Other: _____
67. Are you enrolled in a tribe?
 Yes → 67a. If YES, which one? _____
 No
68. Are there any tribes that you are a part of, but are not enrolled in? [ASK EVERYONE]
 Yes → 68a. If YES, which one(s)? _____
 No

CLOSING COMMENT

That's my last question. Everyone's answers will be combined to give us information about tobacco use among American Indians living in the Twin Cities. Thank you very much for your time and participation. As a thank you, I will give you a \$25 gift card.