



Three-Month Follow-up Survey
Smoke-Free Homes Intervention
California Grants Program

The following questions will ask about you, your household, and cigarette smoking. All the information you provide will be kept strictly confidential. This interview will take about 10 minutes.

Do you have any questions before we start?

Household and Car Smoking Rules

First, I have a few questions about your current household smoking rules.

1. Which statement best describes the rules about smoking inside your home? This does not include decks, garages, or porches. Would you say... **[Read Responses]**

- There are no rules about smoking inside your home..... 1
- Smoking is not allowed anywhere inside your home.....2
- Smoking is allowed in some places or at some times.....3
- Smoking is allowed anywhere inside your home..... 4

[if Q1 is 1, 3, or 4, ask Q2, otherwise skip]

2. In the last 3 months, has anyone tried to establish a smoke-free rule in your current home? By smoke-free, we mean that smoking is not allowed at any time or anyplace within your home.

- No 0
- Yes 1
- [Don't know.....888]*
- [Refused..... 999]*

3. Now, what about smoking in your household vehicles (cars or trucks), would you say... **[Read Responses]**

- There are no rules about smoking in the vehicles..... 0
- Smoking is sometimes allowed in some vehicles 1
- Smoking is never allowed in any vehicle 2
- You don't have a vehicle 7
- [Don't know.....888]*
- [Refused..... 999]*

Secondhand Smoke Exposure

4. During the past 7 days, on how many days have people smoked in your home in your presence?

|_|_| Number of days (0–7)
[refused to answer enter 999]

Use of Program Components

Now, please tell whether or not you or someone in your home did any of the following in the past 3 months.

	No	Yes	[Don't Know]	[Refused]
5. Did you come up with a list of reasons for making your home smoke-free?	0	1	888	999
6. Did you have a talk with your family or household members about making your home smoke-free?	0	1	888	999
7. Did you and your family sign the pledge?	0	1	888	999
8. Did you or someone in the home post the pledge?	0	1	888	999
9. Did you or someone in the home put up the signs?	0	1	888	999
10. Did you or someone in the home use the stickers?	0	1	888	999
11. Did you or someone in the home call any of the telephone numbers for smoking cessation services such as the California Smokers' Quitline, Quit Now or a local referral for cessation help?	0	1	888	999

Beliefs Regarding Secondhand Smoke and Thirdhand Smoke Harm

Please tell me how much you agree or disagree with the following statements.

[Read Responses]	Strongly disagree	Disagree	Agree	Strongly agree	[Don't Know]	[Refused]
12. Breathing smoke from other people's cigarettes causes heart disease in adults. Would you say you...	1	2	3	4	888	999
13. Inhaling smoke from someone else's cigarettes can cause lung cancer in non-smokers. Would you say you...	1	2	3	4	888	999
14. Breathing smoke from other people's cigarettes can cause asthma or ear infections in children. Would you say you...	1	2	3	4	888	999
15. There are health risks associated with being in a room where someone previously smoked. Would you say you...	1	2	3	4	888	999

Smoking Behavior

16. Now I will ask about your tobacco use history.

In the last 30 days, how many days did you use the following products?

	Tobacco Product	None	Some Days	Most Days	Every Day	[Don't Know]	[Refused]
16.1	Cigarettes	0	1	2	3	888	999
16.2	Little cigars or cigarillos	0	1	2	3	888	999
16.3	Electronic cigarettes or vaping devices	0	1	2	3	888	999
16.4	Smokeless tobacco (e.g., chew, dip, snuff or snus)	0	1	2	3	888	999
16.5	Hookah tobacco	0	1	2	3	888	999
16.6	Marijuana or blunts	0	1	2	3	888	999

Note to Interviewer: Only ask questions #17, #18, and #19 if the response to #16.1 was something other than “None.”

17. On average, on the days you smoke cigarettes, how many cigarettes do you smoke in a day?

|_|_|_| cigarettes per day
[refused to answer enter 999]

Cessation

18. How many times during the past 3 months have you stopped smoking cigarettes for one day or longer because you were trying to quit smoking?

|_|_|_| times Not a regular smoker
[refused to answer enter 999] (skip question if smokes not at all)

19. What best describes your intentions regarding quitting. Would you say you are thinking about quitting smoking cigarettes in:

	No	Yes/Correct	[Don't Know]	[Refused]
The next 30-days	0 = if no, ask the next 3 months	1 = if yes, skip remaining questions	888	999
The next 3 months	0 = if no, ask the next 6 months	1 = if yes, skip remaining questions	888	999
The next 6 months	0 = if no, ask if there are No plans to quit in the near future	1 = if yes, skip remaining question	888	999
No plans to quit in near future	0	1	888	999

This concludes our call and your participation in the Smoke-free Homes Program. Thank you very much for your time and the valuable information you provided. We will be mailing out the final incentive of (fill in the blank) to you.

If the participant created a smoke-free home or made improvements, state:

I'd like to congratulate you on taking steps to keep your home smoke-free. If you have additional questions or need any assistance, we can be reached at XXX-XXX-XXXX.

If the participant quit smoking, state:

Congratulations on quitting. Quitting is hard so if you need help, please call the California Smokers' Helpline for free assistance.

1-800-NO-BUTTS (1-800-662-8887)

1-800-NO-FUME (1-800-456-6386)

1-800-838-8917 (Chinese)

1-800-556-5564 (Korean)

1-800-778-8440 (Vietnamese)

www.nobutts.org

If the participant reduced their smoking, state:

It's great that you cut down how much you smoke; however, it is important to quit for good. The sooner you quit, the sooner your body can heal. I encourage you to call the California Smokers' Helpline for free assistance.

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Thank you and have a great day.

INTERVIEWER NOTES:
