



2016 CLARK COUNTY ADULT TOBACCO SURVEY

Report Prepared By:
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As a research center within the UNLV School of Community Health Sciences, NICRP is dedicated to improving the lives of children through research, advocacy, and other specialized services.

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EXECUTIVE SUMMARY

The Tobacco Control Program (TCP) in the Southern Nevada Health District's (SNHD) Office of Chronic Disease Prevention and Health Promotion (OCDPHP) has been a leader in tobacco control in Nevada for nearly 20 years. Since its inception, the SNHD TCP has provided strong and successful leadership in addressing the public health risks associated with tobacco use.

The purpose of the 2016 Clark County Adult Tobacco Survey (ATS) is to assess current rates of the use of tobacco products, and measure the knowledge, attitudes, beliefs, and perceptions of tobacco products, electronic cigarettes, and cessation behaviors among Clark County, Nevada residents. By comparing the results of this survey to the 2012 Clark County ATS, changes in the aforementioned outcomes can be assessed. This information can then be used to determine if current programs and strategies promoted by SNHD's TCP are effective in reducing tobacco use rates and increasing awareness and public knowledge. The Adult Tobacco Survey was designed to be administered over the telephone, taking no more than 15 minutes to complete. The Cannon Survey Center (CSC) at UNLV was hired to administer the ATS to Clark County residents using a random digit dialing technique. The survey was conducted between December 1, 2015 and January 31, 2016. The following presents key findings from the report.

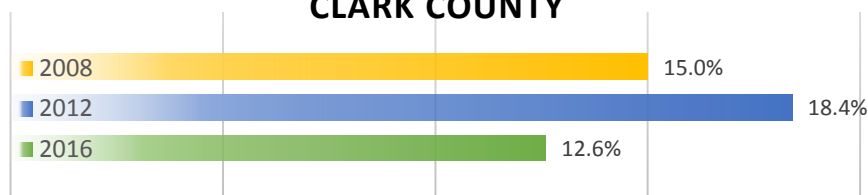
Smoking Prevalence Decreases in Clark County

The 2016 current daily smoking rate of 12.6% represented a 31.5% decline compared to the 2012 daily smoking rate of 18.4%. However, the 2016 rate is only a slight decrease from the 2011 current daily smoking rate of 12.8%. In addition, among respondents who indicated they have never smoked in the past, the percent of individuals who also do not currently smoke (65.6%) rose by 41.1%. With regard to smoking cessation behaviors, rates of those who attempted to quit smoking in the past year remained fairly consistent over the past four years (35.4% = 2012; 36.0% = 2016). However, with regard to smoking cessation methods used to stop smoking, there was an increase in those who used prescriptions other than nicotine replacements, herbal or homeopathic methods, and those who tried switching to smokeless tobacco. Additionally, there was a decrease in those who tried to use 1-800-QUIT-NOW. Given that the rates of individuals quitting have remained steady over the past four year, it seems that the decline in current daily tobacco users might largely be due to individuals who never began smoking.

	2012	2016	% change	*
CIGARETTE USE HISTORY				
Current daily use	18.4%	12.6%	- 31.5%	▼
Does not smoke now or in the past	46.5%	65.6%	+ 41.1%	▲
SMOKING CESSATION BEHAVIOR				
Tried to quit in past year:	35.4%	36.0%	+1.7%	▲
<i>Group counseling</i>	0.0%	0.0%	0.0%	-
<i>Nicotine replacement</i>	28.8%	26.8%	-6.9%	▼
<i>Other prescriptions</i>	8.7%	16.9%	+94.3%	▲
<i>Herbal/Homeopathic</i>	1.9%	6.6%	+247.4%	▲
<i>Tried 1-800-QUIT-NOW</i>	12.1%	9.9%	-18.2%	▼
<i>Tried switching to smokeless tobacco</i>	5.0%	28.2%	+464.0%	▲
<i>Tried stopping on own</i>	86.4%	88.6%	+2.5%	▲
<i>Other methods</i>	30.6%	23.5%	-23.2%	▼

Note. * Green arrows = positive change, red arrows = negative change, dash (-) = no percentage change

CURRENT DAILY TOBACCO USE IN CLARK COUNTY



Media Influence on Smoking Cessation

The top three places where individuals indicated that they noticed advertisements about quitting smoking were television (62.9%), billboards (31.7%), and newspapers/magazines (27.7%). There was a 62.1% increase in individuals reporting that a media source led them to think about quitting smoking (30.6% = 2012; 49.6% = 2016), with television as the primary source influencing individuals to quit or prompting them to encourage someone else to quit (74.8%). This was a substantial increase from 2012 (46.6%). It appears that television advertisements are one of the most effective media methods to encourage individuals to quit smoking. While this survey did assess attempts and thoughts about quitting, this survey did not assess whether or not individuals were successful. Success rates would help in understanding the impact of both media campaigns and cessation methods.

	2012	2016	% change	*
Noticed information about dangers of smoking/encouraging quitting:				
<i>In newspapers/magazines</i>	26.4%	27.7%	+4.9%	▲
<i>On television</i>	50.9%	62.9%	+23.6%	▲
<i>On the radio</i>	30.3%	23.5%	-22.4%	▼
<i>On billboards</i>	28.8%	31.7%	+10.1%	▲
<i>On bus stop benches/shelters</i>	18.9%	22.2%	+17.5%	▲
<i>On signs in shopping malls</i>	20.8%	17.6%	-15.4%	▼
<i>On the Internet</i>	27.3%	27.6%	+1.1%	▲
<i>Somewhere else</i>	11.0%	11.7%	+6.4%	▲
Sources led respondent to think about quitting	30.6%	49.6%	+62.1%	▲
Sources led respondent to encourage someone to quit	29.4%	35.3%	+20.1%	▲
Type of source that led to think about quitting/encouraging someone to quit:				
<i>Newspapers or magazines</i>	16.4%	6.3%	-61.6%	▼
<i>Television</i>	46.6%	74.8%	+60.5%	▲
<i>Radio</i>	6.8%	4.9%	-27.9%	▼
<i>Billboards</i>	1.9%	9.8%	+415.8%	▲
<i>Bus stop benches/shelters</i>	0.5%	2.1%	+320.0%	▲
<i>Signs in shopping malls</i>	1.5%	7.1%	+373.3%	▲
<i>Internet</i>	3.7%	2.4%	-35.1%	▼
<i>Somewhere else (not including health warnings on cigarettes)</i>	22.7%	11.6%	-48.9%	▼

Note. * Green arrows = positive change, red arrows = negative change

Secondhand Smoke

Similar to the 2012 survey results, the majority of respondents never allowed smoking in their cars (74.3%) or in their homes (85.4%). The majority of respondents indicated that secondhand smoke did not infiltrate their homes (73.6%); this is an 8.1% decrease compared to 2012 (80.1%). With regards to the work environment in casinos, more respondents indicated that smoking is allowed in some indoor areas at work in a casino this year (45.7%) than in 2012 (25/1%). Fewer individuals reported that they were never exposed to smoke at work in a casino (43.9%=2012; 18.8%=2016) while more individuals reported daily exposure to secondhand smoke at work at a casino (29.8%=2012; 41.4%=2016). This may be reflective of the exemptions that still exist in the Nevada Clean Indoor Air Act that continue to allow smoking on the gaming floors inside casinos, the largest industry of employment in the state.

	2012	2016	% change	*
Smoking is never allowed in car	72.7%	74.3%	+2.2%	▲
Smoking never allowed in home	84.7%	85.4%	+0.8%	▲
Secondhand smoke does not infiltrate residence	80.1%	73.6%	-8.1%	▼
Smoking is not allowed indoors at work in a casino	66.5%	44.5%	-33.1%	▼
Exposed daily to secondhand smoke at work in a casino	29.8%	41.4%	+38.9%	▲
Never exposed to secondhand smoke at work in a casino	43.9%	18.8%	-57.2%	▼

Note. * Green arrows = positive change, red arrows = negative change

Health and Economic Perceptions of Smoking

Overall, perceptions of the health and economic impacts of smoking have not changed dramatically over the past 4 years. The majority of respondents - while still not all respondents – correctly indicated that smoking causes serious illnesses (79.4%), strokes (71.6%), heart attacks (81.5%), and lung cancer (95.4%). However, less than half of respondents indicated that smoking causes bladder or pancreatic cancer. Compared to 2012 data, there was a large decrease (35.5%) in respondent views that their current product brand is less harmful and a corresponding increase (36.2%) in those that believed their brand was more harmful when compared to other cigarette brands. However, the majority of individuals (77.2%) indicate that all types are equally harmful.

	2012	2016	% change	*
Smoking causes stroke	68.4%	71.6%	+4.7%	▲
Smoking causes heart attack	76.1%	81.5%	+7.1%	▲
Smoking causes lung cancer	95.0%	95.4%	+0.4%	▲
Smoking causes bladder cancer	38.5%	36.8%	-4.4%	▼
Smoking causes pancreatic cancer	41.4%	40.8%	-1.4%	▼
Smoking causes added economic burden to the healthcare system	85.4%	91.0%	+6.6%	▲
Smokeless tobacco causes serious illness	73.0%	79.4%	+8.8%	▲
Current brand is a little less harmful compared to other cigarettes	24.8%	16.0%	-35.5%	▼
Current brand is a little more harmful compared to other cigarettes	12.7%	17.3%	+36.2%	▲
All types are equally harmful	87.2%	77.2%	-11.5%	▼

Note. * Green arrows = positive change, red arrows = negative change

Opinions Regarding Tobacco Laws and Regulations

Overall, opinions regarding laws and regulations have not changed dramatically over the past four years. The laws and regulations that had the most support among respondents included prohibiting smoking within 30 feet of the entrance to a building (81.3%) and prohibiting smoking in areas where children are present (72.3%). At least half of all respondents supported prohibiting smoking in bars (50.3%), prohibiting smoking in other outdoor venues (55.0%), prohibiting advertisement of smoking products (59.7%), and prohibiting smoking in casino gaming areas (61.5%). The latter experienced a 9.2% increase in support, the largest change in this topic area.

	2012	2016	% change	*
Increasing taxes on tobacco products	67.1%	69.1%	+3.0%	▲
Prohibiting all advertisements for tobacco products	62.9%	59.7%	-5.1%	▼
Prohibiting smoking anywhere on college campuses	65.7%	67.2%	+2.3%	▲
Prohibiting smoking indoors/outdoors of multi-unit housing complexes	66.5%	67.2%	+1.1%	▲
Prohibiting smoking within 30 ft. of entrance	82.3%	81.3%	-1.2%	▼
Prohibiting smoking in outdoor public places where children present	72.3%	72.3%	0.0%	-
Prohibiting smoking in other outdoor venues	53.7%	55.0%	+2.4%	▲
Prohibiting smoking in casino gaming areas	56.3%	61.5%	+9.2%	▲
Prohibiting smoking in all bars	42.5%	50.3%	+18.4%	▲

Note. * Green arrows = positive change, red arrows = negative change, dash (-) = no percentage change

While Clark County is making good progress in many areas related to tobacco control, it is very important that Tobacco Control Program efforts continue within the community in order to sustain the gains made over the past four years as well as to increase progress. While tobacco cessation efforts can be successful, quitting is not easy; therefore, it is encouraging to see the increase in numbers of respondents who have never smoked. Survey results suggest that media advertisements on television and on billboards get the most attention and that newspaper and magazines may not be as effective as they were in the past. With regards to policy initiatives, there seems to be high community support in the prohibition of smoking within 30 feet of building entrances and in areas where children are present. These might be two issues to consider when moving forward in the near future.

INTRODUCTION

Tobacco use has been proven to contribute to many negative health outcomes; cancer, chronic obstructive pulmonary disorder (COPD), emphysema, and heart disease have all been linked to using tobacco products. In a report from the United States Surgeon General's Office published in 2014, tobacco use and exposure to tobacco smoke are cited as the most significant causes of preventable chronic disease and premature death among adults in the United States (USDHHS, 2014). National surveys indicate that patterns of tobacco use and exposure are shaped by a variety of complex social and geographical factors (King, Dube, & Tynan, 2012). Additionally, attitudes towards use of tobacco products and smoke-free policies in public spaces further influence the amount of public support tobacco control programs can expect from individuals in their local areas. For example, according to the 2009-2010 National Adult Tobacco Survey, Nevadans' support for smoke-free policies in restaurants, bars, clubs, and casinos was well below the national average (King, Dube, & Tynan, 2013). Gauging the changes in these attitudes over time will help public health efforts to focus on messaging targeted toward specific populations and geographic regions.

Efforts to implement comprehensive tobacco control programs have been successful at reducing overall tobacco use over the past 50 years. Between 2005 and 2013, smoking in adults in the United States declined from 20.9% to 17.8%, and daily smoking declined to 13.7% (Jamal et al., 2014). In Nevada, smoking rates declined from 22.9% in 2011 to 17.0% in 2014 (Jamal et al., 2015). In 1999, Nevada had some of the highest tobacco use rates in the nation, with adult smoking prevalence at 31.5% (CDC et al., 1999) and youth smoking prevalence at 32.6% (Kann et al., 2000). Over the years, the Southern Nevada Health District's Tobacco Control Program (TCP) has used a blend of media, local data-driven decision-making, creativity, and innovative programming to contribute to a steady and significant decline in those rates, with adult smoking prevalence falling to 17.0% (CDC et al., 2014) and youth smoking prevalence declining to 10.3% (Kann et al., 2014).

However, there are still many disparate populations that face increased risk of health complications due to smoking, in addition to the influx of new products that influence different tobacco-use habits among a new generation (USDHHS, 2014). Specifically, Jamal et al. (2014) found that groups such as young adult males, those who identify as multiracial or multiethnic, those with lower levels of education, and those who are of a lower socioeconomic status tend to have smoking rates higher than other groups. Understanding the underlying motivation for smoking among individuals in these groups could enhance the effectiveness of targeted tobacco control interventions.

Electronic Cigarettes

The rise in availability and popularity of electronic cigarettes (e-cigarettes) during the past few years has been established in recent studies (Ayers, Ribisl, & Brownstein, 2011; CDC, 2013; Emery, Vera, Huang, & Szczycka, 2014; King, Alam, Promoff, Arrazola, & Dube, 2013). These products entered the U.S. market in 2007 and have been promoted as a "healthier" alternative to traditional cigarettes and as a tool to aid in smoking cessation (Arnold, 2014). Within the first six years of their appearance, usage among adults doubled between 2010 and 2011 (Abrams, 2014), advertising expenses reached \$18.3 million dollars by 2012 (Kim, Arnold, & Makarenko, 2014), and sales totaled nearly \$2 billion by the end of 2013 (Besaratina & Tommasi, 2014). In order to establish rates of e-cigarette use among adults in Clark County, three questions were added to the Adult Tobacco Survey used in this study. The results of these questions will also help to determine the level of knowledge that Clark County residents have about the health impact of e-cigarette use and may help to inform programmatic efforts.

Changes to Tobacco Laws in Nevada

Since the previous Clark County Adult Tobacco Survey (2012), numerous changes to Nevada's legislation have been implemented. At least ten bills have been passed in Nevada addressing the pricing, taxation, licensing, and distribution of tobacco products. The tobacco-related bills passed specifically during the 2013 legislative session addressed critical issues, such as prohibitions on tobacco products and use for minors, clarification of taxing responsibilities, and revisions to the Nevada Insurance Code so that tobacco use may be used in determining health insurance premiums. These laws also clarified several terms in the tobacco industry for taxing and responsibility purposes, differentiating between

manufacturers, wholesalers, and importers. Additional bills addressed the allocation of funds from the Master Settlement Agreement into tobacco-related programs and provisions to the Nevada Advisory Council on the State Program for Fitness and Wellness. In 2015, taxes on a pack of cigarettes were significantly increased, in addition to other tobacco legislation that addressed non-cigarette products. For instance, Senate Bill 79 established legal terminology for vapor-related products. These bills included revisions to existing tobacco laws to include provisions for “liquid nicotine,” “e-cigs,” and vapor or “vape” products, making them all prohibited to minors. Differentiation between tobacco and “other tobacco products” was made to aid in future legislative efforts. As these products become more available and intensely promoted, these and future bills will help to ensure that e-cigarettes are effectively regulated to prevent increases in related negative health outcomes.

Purpose of Current Survey

The Tobacco Control Program (TCP) in the Southern Nevada Health District’s (SNHD) Office of Chronic Disease Prevention and Health Promotion (OCDPHP) has been a leader in tobacco control in Nevada for nearly 20 years. Since its inception, the SNHD TCP has provided strong and successful leadership in addressing the public health risks associated with tobacco use. The Clark County Adult Tobacco Survey (ATS) was previously conducted in 2012 to evaluate how the TCP’s efforts impacted the knowledge, perceptions, and use of tobacco products among Southern Nevada residents.

The purpose of the 2016 Clark County ATS is to assess current rates of the use of tobacco products, and measure the knowledge, attitudes, beliefs, and perceptions of tobacco products, electronic cigarettes, and cessation behaviors among Clark County, Nevada residents. By comparing the results of this survey to the 2012 Clark County ATS, changes in the aforementioned outcomes can be assessed. This information can then be used to determine if current programs and strategies promoted by SNHD’s TCP are effective in reducing tobacco use rates and increasing awareness and public knowledge. This report will provide results from the most recent Clark County ATS completed in 2016. Activities associated with this project were supported by a Fund for a Healthy Nevada (FHN) grant received by SNHD via the Nevada Division of Public and Behavioral Health, Chronic Disease Prevention and Promotion Section.

METHODOLOGY

Survey Development

The Adult Tobacco Survey (ATS) used in this study was modified collaboratively by Nevada Institute for Children's Research and Policy (NICRP) and the Tobacco Control Program Coordinator in the Office of Chronic Disease Prevention and Health Promotion at SNHD from a previous ATS administered in Clark County, Nevada in 2012. New questions on the 2016 version of the ATS were used to assess attitudes, beliefs, and use rates of electronic cigarettes as they have grown in popularity and availability since 2012. Once survey questions were finalized, the survey was translated into Spanish.

The final version of the ATS consisted of 67 items assessing rates of use of electronic cigarettes (3), smoking tobacco (5), smokeless tobacco (4), and cessation resources (6). Additional items were used to measure attitudes toward, exposure to, and personal rules about secondhand smoke (11). Questions were also asked about tobacco messaging use in the media (4), knowledge, attitudes, and perceptions of tobacco use (16), and use of water pipes (7). The remaining 11 items were used to assess demographic characteristics of the sample.

Procedures

The Adult Tobacco Survey (ATS) was designed to be administered over the telephone, taking no more than 15 minutes to complete. Both landlines and wireless phone numbers were utilized. The Cannon Survey Center (CSC) at the University of Nevada, Las Vegas (UNLV) was hired to administer the ATS to Clark County residents using a random digit dialing technique. The CSC gave a detailed description of their procedures which is provided below. All participants were offered the chance to be entered into a drawing to win a \$50 gift card for an online retailer. For those who opted to be entered into the drawing, a name, telephone number, and e-mail address (optional) were collected to be able to notify the winning respondent. Staff at NICRP was responsible for contacting the winner and distributing the gift card. After this protocol was finalized, this project was submitted to the UNLV Social Behavioral Institutional Review Board (IRB) for administrative review. It was determined that this project was excluded from needing a full IRB review as it did not meet their definition of human subjects research.

Cannon Survey Center (CSC) Procedures

The survey was conducted between December 1, 2015 and January 31, 2016. Calls were made on various days of the week at different times, including weekends, between 1:00 p.m. and 9:00 p.m. on weekdays and 10:00 a.m. to 3:00 p.m. on weekends. Interviews lasted 15 minutes on average. A total of 386 interviews were completed from a sample of 6,296 numbers (combination of both landline and cellular devices). The interviewers attempted each number up to seven times. In addition, all respondents were given the opportunity to complete the survey at another time by scheduling a time convenient for the respondent.

To sample the general population of Clark County, Nevada, telephone numbers were purchased from Survey Sampling Inc. (SSI), and random-digit-dialing techniques were used to select respondent households located throughout the county. SSI uses information developed from the most current telephone exchange data available. (Telephone exchanges may be thought of as the three-digit "prefix" included in any telephone number.) The sampling service, SSI, maintains a database of "working blocks," where a "block" is a set of 100 contiguous numbers identified by the first two digits of the last four digits of a telephone number. After the blocks are verified to contain residential phone numbers, phone numbers are randomly generated from each block. This procedure allows the inclusion of unlisted numbers and any newly listed numbers that have not been included in the most recently published telephone directories. SSI uses "working blocks" to develop its cell phone frames as well. Land line and cell phone numbers were utilized, with over half of the numbers available for contact being cell phones after non-working numbers were screened out by SSI. Telephone numbers were dialed by interviewers manually, thus giving the CSC the legal capacity to contact cell phones.

In addition to using these typical sampling techniques to reach a sample of the general population, CSC purchased two other types of samples from SSI in an effort to oversample Hispanic/Latino and African American respondents in Clark

County. The first targeted sample was generated by SSI's RDD exchange density methodology, which uses estimates of "the probability of ethnic densities of census tracts" along with RDD exchange databases to identify landline phone numbers which are more likely than general RDD samples to yield the targeted population. The second targeted sampling method utilized SSI's wireless LITe database, which combines information available from telephone companies and public information to assist with identifying specific demographics and increase likelihood of reaching a target population. A total of 147 surveys (38.1% of total) were collected from Hispanic/Latino respondents, and 80 surveys (20.8% of total) were collected from African American respondents for intentional oversampling of these populations relative to general population distributions in Clark County (30% and 12%, respectively).

The CSC utilizes Sawtooth Technology software for its CATI system. Prior to administering the survey, the CSC staff attended a survey specific training session. Training included a refresher session that covered the following topics: a) interviewer roles and responsibilities; b) importance of maintaining strict confidentiality and general principles of survey administration; c) interviewing procedures, including how to probe survey questions and specific guidelines for probing for numbers, pre-coded questions, and any open-ended questions; d) how to maximize respondent cooperation; e) operation of CATI software, and f) general administration procedures. Survey interviewers also received detailed training regarding the specifics of this study which included a project overview, study-specific interviewing procedures, and a detailed discussion of the questionnaire contents.

The interviewing process was monitored by phone room supervisors. One field supervisor or senior interviewer was present at all times during the data collection period to assure the quality and integrity of the data collection process. The phone room supervisor was able to instantaneously address any problems that might arise in the field. An auditory and visual monitoring system is in place and the supervisors, the survey manager/data collection manager, and director can access any of the call stations at any time. The CATI software has visual monitoring capabilities built in, thus supervisors can see what is on the interviewers screen as data is being entered as well as hearing both sides of the interview. Both the auditory and visual monitoring systems allow for unobtrusive monitoring. The monitoring process may also occur in addition to the actual interview during callbacks, survey introductions, or initial refusals.

Disposition codes defined by the American Association of Public Opinion Researchers (AAPOR) were used to code all numbers and to determine the Response Rate 4 (RR4). Response Rate 4 represents the number of complete and partial interviews, divided by the number of interviews (complete or partial), plus the number of non-interviews (refusal + break-off + noncontacts + others), plus all cases of unknown eligibility, and an estimate of what proportion of the cases of unknown eligibility (Response Rate 4: $RR4 = \frac{I+P}{(I+P)+(R+NC+O)+e(UH+UO)}$). The response rate was 8.0%. The proportion of interviews that were collected from the wireless sampling frames was 77.9% of all completed interviews.

Weighting

Sample weights were calculated to adjust for unequal probabilities of selection and non-response bias resulting from differential response rates across a variety of demographic groups. Post-stratification variables included gender, race, and ethnicity, therefore respondents that did not report this information (n = 15) were not included when the data were analyzed, except for the demographic section of the report. Population characteristics from Clark County were based on 2014 U.S. Census Bureau estimates (U.S. Census Bureau, 2014). The weighting process helps to more accurately represent the population of Clark County as a whole, therefore weighted data were used for all analyses. Other than the demographic information of the survey respondents, only weighted data are presented in this report. Based on the final sample of weighted data (n = 371), the overall margin of error is +/-5.1 percentage points at the 95% confidence level. However, individuals could choose not to respond to individual items within the survey so the sample size, and therefore the margin of error, could vary for each item. The margin of error for each individual item can be requested from NICRP staff.

SURVEY RESULTS

The following sections provide results for each category of questions asked on the Adult Tobacco Survey (ATS): demographics, electronic cigarettes, tobacco smoking, smokeless tobacco, cessation of tobacco use, secondhand smoke exposure, exposure to media messages about tobacco use, knowledge, attitudes, and perceptions about tobacco use and policies, and water pipe/hookah use. With the exception of demographics, all of the results tables in the sections below present weighted data that is representative of the adult population of Clark County.

Demographics of Survey Respondents

The following tables provide the un-weighted sample characteristics for all 371 respondents who completed the survey and whose responses will be provided in the remaining results sections.

Table 1. Survey Demographics (n=371)

AGE		GENDER		SEXUAL ORIENTATION		ETHNICITY	
18-24	8.2%	Male	49.3%	Heterosexual (Straight)	94.3%	Hispanic	39.6%
25-34	13.0%	Female	50.7%	Gay or Lesbian	0.5%	Non-Hispanic	60.4%
35-44	19.4%			Bisexual	1.9%		
45-54	18.5%			Transgender	0.3%		
55-64	18.5%			Other	0.3%		
65-74	8.6%			Unknown	3.8%		
75+	8.3%						
Unknown	5.2%						

RACE		EDUCATION		ANNUAL HOUSEHOLD INCOME	
African American/Black	21.3%	Eighth grade or less	3.0%	Under \$15,000	8.1%
American Indian/Alaska Native	1.3%	Some high school	8.6%	\$15,000 - \$24,999	7.5%
Asian	2.2%	Grade 12 or GED	31.0%	\$25,000 - \$34,999	8.6%
Caucasian	36.4%	Some technical school	0.8%	\$35,000 - \$44,999	11.6%
Native Hawaiian/Pacific Islander	2.4%	Technical school graduate	1.1%	\$45,000 - \$54,999	7.0%
Multiple Races	10.5%	Some college	23.2%	\$55,000 - \$64,999	3.8%
Other	23.2%	College graduate	24.3%	\$65,000 - \$74,999	6.5%
Unknown	2.7%	Post-graduate/ Professional degree	7.8%	\$75,000 - \$99,999	8.1%
		Unknown	0.3%	\$100,000+	12.9%
				Unknown	25.9%

Electronic Cigarettes

Electronic cigarettes (e-cigarettes) are a relatively new tobacco product in the United States market. Previous adult tobacco surveys conducted in Clark County, Nevada did not ask about the prevalence of e-cigarette use or knowledge about the safety of e-cigarettes as compared to traditional cigarettes. Below is a summary of the results of the three new questions about e-cigarettes asked in the 2016 Clark County ATS.

Perceptions of Safety of Electronic Cigarettes

- 60.2% of respondents reported believing that electronic cigarettes are NOT safer than regular cigarettes.
- 20.3% of respondents reported that they did not know if e-cigarettes are safer.

Electronic Cigarette Use

- 75.8% of respondents reported that they have NEVER used electronic cigarettes.
- 82.4% of respondents (who reported ever having used a vapor product) reported currently **not** using e-cigarettes at all. Of those that reported using e-cigarettes, very few (5.3%) reported using them every day.

Tobacco Smoking

The primary objective of the Clark County Adult Tobacco Survey is to determine the prevalence of tobacco product use among adults. Collecting this information on a regular basis helps the efforts of tobacco control programs to follow trends in use over long periods of time. These data can then be used to inform future prevention and intervention campaigns that aid in decreasing the prevalence of tobacco product use. The following tables refer to the detailed results of the 2016 Clark County ATS that addresses smoking tobacco product use, to include current and past use. Currently 36.0% of respondents used tobacco in the past and only 16.0% currently use tobacco products. For those that currently use, the majority started using between the ages of 13 and 21.

When comparing 2016 to 2012 data (see Appendix A for comparison table):

- 12.6% of respondents indicated they smoked daily, a 31.5 percent decrease compared to 2012 (18.4%).
- The percentage of individuals that do not smoke currently and have not smoked in the past (65.6%) increased by 41.1 percent since 2012 (46.5%).

Table 2. Tobacco Product Use Rates – Breakdown of Daily and Weekly Use of Tobacco Products

PAST USE		AGE OF FIRST DAILY USE*	
Daily	19.1%	<10	1.5%
Less than daily	12.2%	10 - 12	7.1%
Not at all	55.9%	13 - 15	22.2%
Don't know	0.2%	16 - 18	35.7%
		19 - 21	13.2%
		22 - 24	5.5%
CURRENT USE		25 - 27	0.7%
Daily	12.6%	28 - 30	1.9%
Less than daily	3.4%	31 - 48	11.7%
Not at all	84.0%	Refused	0.4%

*% only from those who currently use or have used daily in the past

Products Smoked by Current Tobacco Users

Individuals who reported currently using tobacco products (16.0%) were asked the daily and/or weekly amounts of manufactured cigarettes they smoke. The majority of individuals do not smoke daily or weekly. In addition, respondents were also asked if they smoke menthol cigarettes and most respondents do not.

Table 3. Number of Cigarettes Smoked Daily and Weekly by Current Tobacco Users

DAILY		WEEKLY		MENTHOL CIGARETTES*	
1 to 5 per day	7.3%	1 to 19 per week	3.2%	Yes	31.9%
6 to 9 per day	2.4%	20 to 44 per week	1.3%	No	68.1%
10 to 19 per day	8.4%	45 per week	0.3%		
20 to 29 per day	11.9%	Unsure	1.6%		
30 to 40 per day	3.0%	None	93.6%		
Unsure	0.6%				
None/Not Applicable	66.4%				

**% only from those who currently smoke manufactured cigarettes*

Respondents were also asked about other types of smoking tobacco products (other than conventional cigarettes) they use on a daily and/or weekly basis. The most frequently used types of products among survey respondents were cigars, cheroots, and cigarillos.

Table 4. Number of Tobacco Products Smoked Daily and Weekly by Current Tobacco Users

	HAND ROLLED CIGARETTES	PIPES	KRETEKS	CIGARS, CHEROOTS, CIGARILLOS	WATER PIPE/HOOKAH SESSIONS
DAILY					
<5	0.5%	0.0%	0.0%	3.7%	0.2%
5 – 9	0.0%	0.0%	0.0%	0.0%	0.0%
10 – 15	0.4%	0.0%	0.0%	0.0%	0.0%
16 – 20	0.5%	0.0%	0.0%	0.0%	0.0%
21 – 29	0.0%	0.0%	0.0%	0.0%	0.0%
30+	0.0%	0.0%	1.5%	0.0%	0.0%
Unsure	1.1%	2.4%	3.0%	0.9%	0.7%
None	96.3%	96.4%	94.2%	94.2%	98.5%
Refused	1.2%	1.2%	1.2%	1.2%	0.6%
Total Use	2.5%	2.4%	4.5%	4.6%	0.9%
WEEKLY					
1 – 2	0.6%	0.0%	0.0%	2.6%	0.6%
3 – 5	0.0%	0.0%	0.0%	0.9%	0.0%
6+	0.0%	0.0%	0.0%	0.6%	0.0%
Unsure	1.1%	0.0%	3.0%	0.3%	2.2%
None	97.1%	98.8%	95.8%	94.4%	96.6%
Refused	1.2%	1.2%	1.2%	1.2%	0.6%
Total Use	1.7%	0.0%	3.0%	4.4%	2.8%

Finally, respondents who reported currently smoking were asked about their use of flavored little cigars at least once in the past 30 days, and 6.7% indicated use of this product.

Smokeless Tobacco

Use of smokeless tobacco products (snuff, chewing tobacco, and betel quid) was less prevalent (0.3%) among respondents than use of smoking tobacco products (16.0%). Of those who reported currently using smokeless tobacco products, most reported being unsure of the amount of products they used daily or weekly.

Table 5. Use Rates of Smokeless Tobacco Products

CURRENT USE		PAST USE		AGE AT FIRST DAILY USE*	
Daily	0.2%	Daily	2.8%	11 - 19	35.7%
Less than daily	0.1%	Less than daily	3.3%	20 - 29	60.4%
Not at all	98.0%	Not at all	93.9%	30 - 60	4.0%
Don't know	1.7%			*% only from those who currently use or have used daily in the past	

TYPES OF PRODUCTS USED*	
Snuff by mouth, daily	7.5%
Snuff by nose, weekly	7.5%
Chewing tobacco, daily	6.7%
Chewing tobacco, weekly	5.7%
Betel Quid, daily	16.8%
Betel Quid, weekly	16.8%

*Question only asked of those who currently use smokeless tobacco products.

Cessation

The next set of questions asked about respondents' awareness and use of various smoking cessation methods. Although 71.3% of respondents in 2016 reported being aware of the 1-800-QUIT-NOW hotline, only 9.9% of current smokers tried using that method to quit smoking within the past 12 months. Zero percent of respondents reported trying to quit using smokeless tobacco products in the past 12 months, therefore no data were collected on respondents' thoughts about quitting smokeless tobacco (see Appendix C, question C06).

When comparing 2016 to 2012 data (see Appendix A for comparison table):

- There was a 26.6% decrease in the number of respondents who reported being advised to quit during a doctor's visit between 2012 (55.2%) and 2016 (40.5%).
- There is little difference in the rates of those who have attempted to quit smoking in 2016 (36.0%) compared to 2012 (35.4%).
- 16.9% of 2016 respondents use prescriptions other than nicotine replacement when trying to quit smoking, compared to 8.7% in 2012, a 94.3 percent increase.
- There was an 18.2% decline in the number of respondents who tried using the 1-800-QUIT-NOW hotline to stop smoking between 2012 (12.1%) and 2016 (9.9%).
- 6.6% use herbal or homeopathic methods to try to quit smoking, a 247.4 percent increase from previous data (1.9% in 2012).

Table 6. Smoking Cessation Behavior and Attempted Methods of Current Tobacco Users

SMOKING TOBACCO CESSATION BEHAVIOR*			
Current Tobacco Users Advised to Quit During Doctor's Visit			40.5%
Tried to Quit Smoking Tobacco in the Past Year			36.0%
Tried to Quit Smokeless Tobacco in the Past Year			0.0%
CESSATION METHODS**			
Stopping on own/willpower	88.6%	Other prescription medication	16.9%
Switching to smokeless tobacco	28.2%	Tried 1-800-QUIT-NOW	9.9%
Nicotine replacement	26.8%	Herbal/Homeopathic medicine	6.6%
Other methods	23.5%	Group counseling	0.0%

*Of those who reported using tobacco products.

**Of those who reported they tried to quit within the past year.

Respondents who reported "Other" methods to stop smoking reported the following: gum, marijuana, e-cigarettes, prayer, snapping a rubber band.

Secondhand Smoke

Exposure to secondhand smoke has been linked to increased risk for multiple negative health outcomes. The two most common places for exposure to secondhand smoke to occur are at home and in the workplace. For those who indicated that smoking is allowed in their home, a follow up question was asked to determine if smoking was allowed in every room, or only in some rooms of the home. In Nevada, smoking is still allowed inside most casinos, exposing many individuals to secondhand smoke during each work shift. In order to gauge how Clark County residents are affected by this, the following tables provide responses to the questions asked about secondhand smoke exposure in all respondents' homes, vehicles, and for those who work in casinos, which make up 17.1% of people who work outside their home.

When comparing 2016 to 2012 data (see Appendix A for comparison table):

- 74.3% of respondents never allow smoking in their cars, a 2.2 percent increase since 2012 (72.7%).
- 85.4% never allow smoking in their homes, similar to 2012's 84.7 percent.
- 73.6% report that secondhand smoke NEVER infiltrates their homes, 3.5 percent less than in 2012 (77.1%).
- Smoking is prohibited indoors at work in casinos for nearly a third (33.1 percent) fewer respondents in 2016 (44.5%) than in 2012 (66.5%).
- Daily secondhand smoke exposure at work in casinos has increased by 38.9% in 2016 (2012=29.8%; 2016=41.4%).

Table 7. Smoking Policies in the Home, in Vehicles, and at the Workplace in Casinos

RULES AND POLICIES ABOUT SMOKING	AT HOME	IN THE CAR	AT WORK IN CASINOS
Smoking is allowed inside/indoors.	7.8%	7.6%	8.0%
Smoking generally not allowed but there are exceptions.	3.9%	8.2%	45.7%
Smoking never allowed.	85.4%	74.3%	44.5%
No rules about smoking.	2.7%	8.8%	1.8%
Don't know.	0.2%	0.6%	0.0%
Refused to answer.	0.0%	0.5%	0.0%
ROOMS WHERE SMOKING IS ALLOWED IN THE HOME*			
Smoking is allowed inside every room.	43.1%		
Smoking is not allowed in every room.	56.9%		

*Of those who allow smoking in their home.

Additional questions were asked about respondents' exposure to secondhand smoke at home and in the workplace. More detailed results can be viewed in Appendices A and B.

- There was an increase in the rate of secondhand smoke infiltration of the home, with the biggest increase (up 50.7% from 7.1% in 2012) in daily secondhand smoke infiltration (10.7% in 2016).
- The percentage of people exposed to secondhand smoke at work in a casino on a daily basis rose 38.9%, from 29.8% in 2012 to 41.1% in 2016.

Table 8. Secondhand Smoke (SHS) Exposure in the Home and at the Workplace in Casinos

HOME		WORKPLACE INSIDE CASINOS*	
SHS infiltrates residence from outside.	24.3%	Exposed to SHS at work in casinos	81.2%
SHS does not infiltrate residence	73.6%	Never exposed to SHS at work in casinos	18.8%
SHS infiltrates daily.	10.7%	Exposed daily to SHS at work in casinos	41.4%
SHS infiltrates weekly.	2.5%	Exposed weekly to SHS at work in casinos	11.9%
SHS infiltrates monthly.	2.1%	Exposed monthly to SHS at work in casinos	22.3%
SHS infiltrates < monthly	9.0%	Exposed < monthly to SHS at work in casinos	5.6%
Don't know.	2.1%	Witnessed someone smoking indoors at work in casinos	47.7%

* Only asked of those who work at a casino.

Media

In an effort to determine where people are most exposed to information about the dangers of smoking cigarettes, several questions were asked about the types of media that respondents viewed recently with that kind of information. Of all media mentioned, television was reported by most respondents (63.1%) to have exposed them to information on the dangers of smoking within the past 30 days.

When comparing 2016 to 2012 data (see Appendix A for comparison table):

- 49.6% of respondents reported that various media sources led to thoughts of smoking cessation (30.6% in 2012).
- Respondents noticed an increase of information since 2012 about the dangers of smoking on most types of media except radio (22.4% decrease from 30.3%) and signs in shopping malls (15.4% decrease from 20.8%).
- Of those that considered cessation, 74.8% were influenced by the television (46.6% in 2012), a 60.5% increase from 2012.
- There was an increase of 415.8 percent in the influence of billboards on cessation in 2016 (1.9% in 2012 to 9.8% in 2016).
- Bus stops benches/shelters (2.1%) and signs in shopping malls (7.1%) both increased their overall influence by more than 300 percent since 2012 (0.5% and 1.5%, respectively).

Table 9. Media Exposure to Dangers of Smoking

On television	62.9%	On the radio	23.5%
On billboards	31.7%	On bus stop benches/shelters	22.2%
In newspapers/magazines	27.7%	On signs in shopping malls	17.6%
On the internet	27.6%	Somewhere else	11.7%

"Other" places respondents noticed information on the dangers of tobacco use include:

- | | | |
|---------------------------------|------------------------------|-------------------|
| • Convenience store/gas station | • Pamphlets/flyers/brochures | • Doctor's office |
| • In the workplace | • Internet | • Restrooms |
| • Restaurants | • Schools/School newsletters | • Church |
| • Hospitals/urgent care | • Privately owned businesses | • Inside casinos |

Table 10. Media Influence on Smoking Cessation for Current Smokers

LEVEL OF INFLUENCE			
Sources led me to think about quitting		49.6%	
Sources led me to encourage someone to quit		35.3%	
SOURCE THAT LED RESPONDENT TO THINK ABOUT QUITTING/ENCOURAGING SOMEONE TO QUIT			
Television	74.8%	Newspapers or magazines	6.3%
Somewhere else	11.6%	Radio	4.9%
Billboards	9.8%	Internet	2.4%
Signs in shopping malls	7.1%	Bus stop benches/shelters	2.1%

Knowledge, Attitudes, & Perceptions

One important facet of public health efforts to control tobacco use is education of the public on the negative health consequences of smoking. The next set of survey questions asked respondents to indicate whether they know or believe that smoking and smokeless tobacco can cause serious illness or an added burden to the healthcare system. A higher percentage of respondents reported being aware that smoking causes stroke, heart attack, lung cancer, and added economic burdens to the healthcare system. A higher percentage was also aware that smokeless tobacco causes serious illness.

When comparing 2016 to 2012 data (see Appendix A for comparison table):

- Vast majority of the population in 2016 (95.4%) still agrees that smoking causes lung cancer (95.0% in 2012).
- More respondents in 2016 believe that strokes (71.6%) and heart attacks (81.5%) to can be caused by smoking than in 2012 (68.4% and 76.1%, respectively).
- There was 8.8 percent increase in belief that smokeless tobacco causes serious illness (73.0% in 2012 to 79.4% in 2016).
- 17.3% thought their current brand was *more* harmful than other cigarettes, 36.2 percent higher than in 2012 (12.7%).
- Also, there was an 11.5 percent decrease (87.2%=2012; 77.2%=2016) in the belief that all types of cigarettes are equally harmful.

Table 11. Health and Economic Perceptions of Smoking

BASED ON WHAT YOU KNOW OR BELIEVE:	
People should be protected from secondhand smoke	83.9%
Smoking causes lung cancer	95.4%
Smoking causes added economic burden to the healthcare system	91.0%
Smoking causes heart attack	81.5%
Smoking causes stroke	71.6%
Smoking causes pancreatic cancer	40.8%
Smoking causes bladder cancer	36.8%
Smokeless tobacco causes serious illness	79.4%

Table 12. Perceptions of Harmfulness Based on Brand of Cigarettes Smoked for Current Smokers *

Current brand is no different compared to other cigarettes	58.7%
Current brand is a little more harmful compared to other cigarettes	17.3%
Current brand is a little less harmful compared to other cigarettes	16.0%
Don't know	8.0%
All types are equally harmful	77.2%
Some types of cigarettes could be less harmful than others	17.8%
Don't know	4.9%

* Questions were only asked of those who currently smoke tobacco.

Tobacco Laws and Regulations

Respondents were also asked about their attitudes towards potential laws prohibiting smoking in certain areas and raising the minimum age to purchase cigarettes. The majority of respondents reported that they would favor the laws mentioned in all questions. There was a decrease in respondent support for laws that would prohibit smoking in outdoor public places where children could be present or other outdoor venues. However, every other category saw an increase in favorable responses towards increased tobacco regulations, including raising the minimum age to 21 for the purchase/possession of tobacco and vapor products, with the exception of prohibiting all advertisements for tobacco products.

Comparing 2016 to 2012 data (see Appendix A for comparison table):

- A large majority of participants, 81.3%, still supports prohibiting smoking within 30 feet of a building entrance.
- 61.5% support prohibiting smoking in casino gaming areas, compared to 56.3% in 2012.
- 72.3% support prohibiting smoking in all outdoor public places where children are present which is not a significant change from 2012 (72.3%).

Table 13. Positive Attitudes towards Potential Laws and Regulations on Tobacco

Prohibiting smoking within 30 ft. of entrance to businesses and public buildings	81.3%	Prohibiting smoking indoors and in outdoor public spaces of multi-unit housing complexes	67.2%
Raising minimum purchase age of tobacco products to 21	79.0%	Restricting the sale of flavored tobacco products	63.2%
Making it illegal to purchase or possess vapor products if under 21	72.9%	Prohibiting smoking in casino gaming areas	61.5%
Prohibiting smoking in outdoor public places (parks, zoos, playgrounds)	72.3%	Prohibiting all advertisements for tobacco products	59.7%
Increasing taxes on tobacco products	69.1%	Prohibiting smoking in other outdoor venues (rodeos and racetracks)	55.0%
Prohibiting smoking anywhere on college campuses	67.2%	Prohibiting smoking in all bars	50.3%

Water Pipes (Hookah/Shisha/Nargile)

Respondents were also asked about their use of water pipes (also known as hookah, shisha, and nargile). Water pipes are stemmed instruments that are used to vaporize and smoke flavored tobacco. Less than 4.0% of respondents reported using water pipes (see Table 4).

Table 14. Past Water Pipe/ Hookah Use

PAST WATER PIPE/HOOKAH USE		AGE AT FIRST USE*	
Daily	0.8%	12 – 15	13.4%
Less than daily	6.9%	16 – 19	28.9%
Not at all	92.3%	20 – 23	18.9%
		24 – 27	12.9%
		28 – 32	2.5%
		33+	20.1%
		Don't know	2.2%
		Refused	1.3%

*Of those reporting past use.

In order to obtain more detailed information about each respondent's last water pipe/hookah session, four additional questions were asked: the location, number of people in attendance, length of session, and type of tobacco smoked. Just over half of the respondents indicated that their last session occurred with 1-3 people in attendance, the most common length of the session was 30 minutes, and the most common type used was flavored tobacco. In addition, just over half of respondents indicated that their last session occurred at home. Respondents that indicated an "other" location were asked to specify the location. Respondents that provided an answer indicated the following as the location of their last session of use:

- At a party
- In college
- In a dorm room
- At a friend's house
- Outside

Table 15. Details of Most Recent Water Pipe/Hookah Session for Past and Current Users

LOCATION OF LAST SESSION		LENGTH OF LAST SESSION	
Home	54.4%	5 minutes	10.5%
Bar/Club	16.6%	20 minutes	10.9%
Restaurant	0.0%	25 minutes	2.9%
Other	29.0%	30 minutes	44.4%
		45 minutes	14.2%
		1 hour	17.1%

NUMBER OF PEOPLE AT LAST SESSION		NUMBER OF ROCKS SMOKED		TYPE OF TOBACCO SMOKED	
0	6.0%	≤1	3.9%	Flavored	66.4%
1 – 3	52.8%	1-3	50.1%	Unflavored	9.8%
4 – 6	40.0%	4+	7.8%	Both	20.5%
7 –15	1.3%	Unsure	38.1%	Don't know	2.0%
				Refused	1.3%

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APPENDIX A: Comparison of ATS Results from 2012 to 2016

One method for evaluating the effectiveness of tobacco control programs is to assess changes in the prevalence of tobacco product use and public perceptions over time. The following table provides a comparison of the responses to the ATS questions in 2012 and 2016. Questions regarding e-cigarettes and water pipe/hookah use were not asked in the 2012 Clark County ATS, and therefore no comparisons for those categories are included in this table.

	2012	2016	% change	*
CIGARETTE USE HISTORY				
Currently smokes daily	18.4%	12.6%	-31.5%	▼
Currently smokes less than daily, smoked daily in the past	0.8%	1.8%	+125.0%	▲
Currently smokes less than daily, not smoked daily in the past	2.1%	1.8%	-14.3%	▲
Currently does not smoke, smoked daily in the past	22.0%	18.4%	-16.4%	▼
Currently does not smoke, smoked less than daily in the past	9.8%	11.0%	+12.2%	▲
Does not smoke now or in the past	46.5%	65.6%	+41.1%	▲
Average age when first smoked daily	15.8	19.5	+3.7 years	▲
Smokes menthol (of those currently smoking manufactured cigarettes)	22.7%	31.9%	+40.5%	▲
SMOKING CESSATION BEHAVIOR				
Advised to quit during last doctors visit	55.2%	40.5%	-26.6%	▼
Tried to quit in past year:	35.4%	36.0%	+1.7%	▲
<i>Group counseling</i>	0.0%	0.0%	-	-
<i>Nicotine replacement</i>	28.8%	26.8%	-6.9%	▼
<i>Other prescriptions</i>	8.7%	16.9%	+94.3%	▲
<i>Herbal/Homeopathic</i>	1.9%	6.6%	+247.4%	▲
<i>Tried 1-800-QUIT-NOW</i>	12.1%	9.9%	-18.2%	▼
<i>Tried switching to smokeless tobacco</i>	5.0%	28.2%	+464.0%	▲
<i>Tried stopping on own</i>	86.4%	88.6%	+2.5%	▲
<i>Other methods</i>	30.6%	23.5%	-23.2%	▼
MEDIA INFLUENCE ON SMOKING CESSATION				
Noticed information about dangers of smoking/encouraging quitting:				
<i>In newspapers/magazines</i>	26.4%	27.7%	+4.9%	▲
<i>On television</i>	50.9%	62.9%	+23.6%	▲
<i>On the radio</i>	30.3%	23.5%	-22.4%	▼
<i>On billboards</i>	28.8%	31.7%	+10.1%	▲
<i>On bus stop benches/shelters</i>	18.9%	22.2%	+17.5%	▲
<i>On signs in shopping malls</i>	20.8%	17.6%	-15.4%	▼
<i>On the Internet</i>	27.3%	27.6%	+1.1%	▲
<i>Somewhere else</i>	11.0%	11.7%	+6.4%	▲
Sources led respondent to think about quitting	30.6%	49.6%	+62.1%	▲
Sources led respondent to encourage someone to quit	29.4%	35.3%	+20.1%	▲
Type of source that led to think about quitting/encouraging someone to quit:				
<i>Newspapers or magazines</i>	16.4%	6.3%	-61.6%	▼
<i>Television</i>	46.6%	74.8%	+60.5%	▲
<i>Radio</i>	6.8%	4.9%	-27.9%	▼
<i>Billboards</i>	1.9%	9.8%	+415.8%	▲
<i>Bus stop benches/shelters</i>	0.5%	2.1%	+320.0%	▲
<i>Signs in shopping malls</i>	1.5%	7.1%	+373.3%	▲
<i>Internet</i>	3.7%	2.4%	-35.1%	▼
<i>Somewhere else (not including health warnings on cigarettes)</i>	22.7%	11.6%	-48.9%	▼

Note. * Green arrows = positive change, red arrows = negative change

	2012	2016	% change	*
SECONDHAND SMOKE EXPOSURE AND POLICIES IN THE CAR, AT HOME, & AT WORK IN A CASINO				
Smoking is allowed inside car	9.4%	7.6%	-19.1%	▼
Smoking generally not allowed inside car / willing to make exceptions	6.1%	8.2%	+34.4%	▲
Smoking is never allowed in car	72.7%	74.3%	+2.2%	▲
No rules about smoking in car	4.4%	8.8%	+100.0%	▲
Smoking is allowed inside home	9.1%	7.8%	-14.3%	▼
Smoking generally not allowed in home / willing to make exceptions	2.8%	3.9%	+39.3%	▲
Smoking never allowed in home	84.7%	85.4%	+0.8%	▲
No rules about smoking in home	2.2%	2.7%	+22.7%	▲
Rooms in which smoking is allowed in the home:				
<i>Smoking is allowed inside every room in the home</i>	67.7%	43.1%	-36.3%	▼
<i>Smoking is only allowed inside some rooms in the home</i>	32.3%	56.9%	+76.2%	▲
Secondhand smoke infiltrates residence from outside	16.4%	24.3%	+48.2%	▲
Secondhand smoke does not infiltrate residence	80.1%	73.6%	-8.1%	▼
Secondhand smoke infiltrates residence daily	7.1%	10.7%	+50.7%	▲
Secondhand smoke infiltrates residence weekly	4.3%	2.5%	-41.9%	▼
Secondhand smoke infiltrates residence monthly	0.8%	2.1%	+162.5%	▲
Secondhand smoke infiltrates residence less than monthly	6.5%	9.0%	+38.5%	▲
Secondhand smoke infiltrates residence never	77.1%	73.6%	-4.5%	▼
Smoking is allowed anywhere indoors at work in casinos	4.7%	8.0%	+70.2%	▲
Smoking is only allowed in some indoor areas at work in casinos	25.1%	45.7%	+82.1%	▲
Smoking is not allowed indoors at work in casinos	66.5%	44.5%	-33.1%	▼
No smoking policy at work in casinos	2.9%	1.8%	-37.9%	▼
Exposed daily to secondhand smoke at work in casinos	29.8%	41.4%	+38.9%	▲
Exposed weekly to secondhand smoke at work in casinos	10.0%	11.9%	+19.0%	▲
Exposed monthly to secondhand smoke at work in casinos	4.9%	22.3%	+355.1%	▲
Exposed < monthly to secondhand smoke at work in casinos	10.2%	5.6%	-45.1%	▼
Never exposed to secondhand smoke at work in casinos	43.9%	18.8%	-57.2%	▼
HEALTH AND ECONOMIC PERCEPTIONS OF SMOKING				
Smoking causes stroke	68.4%	71.6%	+4.7%	▲
Smoking causes heart attack	76.1%	81.5%	+7.1%	▲
Smoking causes lung cancer	95.0%	95.4%	+0.4%	▲
Smoking causes bladder cancer	38.5%	36.8%	-4.4%	▼
Smoking causes pancreatic cancer	41.4%	40.8%	-1.4%	▼
Smoking causes added economic burden to the healthcare system	85.4%	91.0%	+6.6%	▲
Smokeless tobacco causes serious illness	73.0%	79.4%	+8.8%	▲
Current brand is a little less harmful compared to other cigarettes	24.8%	16.0%	-35.5%	▼
Current brand is no different compared to other cigarettes	54.9%	58.7%	+6.9%	▲
Current brand is a little more harmful compared to other cigarettes	12.7%	17.3%	+36.2%	▲
Some types of cigarettes could be less harmful than others	12.8%	17.8%	+39.1%	▲
All types are equally harmful	87.2%	77.2%	-11.5%	▼

Note. * Green arrows = positive change, red arrows = negative change

	2012	2016	% change	*
FAVORING THE FOLLOWING TOBACCO LAWS & REGULATIONS				
Increasing taxes on tobacco products	67.1%	69.1%	+3.0%	▲
Prohibiting all advertisements for tobacco products	62.9%	59.7%	-5.1%	▼
Prohibiting smoking anywhere on college campuses	65.7%	67.2%	+2.3%	▲
Prohibiting smoking indoors/outdoors of multi-unit housing complexes	66.5%	67.2%	+1.1%	▲
Prohibiting smoking within 30 ft. of entrance	82.3%	81.3%	-1.2%	▼
Prohibiting smoking in outdoor public places where children present	72.3%	72.3%	+0.0%	▼
Prohibiting smoking in other outdoor venues	53.7%	55.0%	+2.4%	▲
Prohibiting smoking in casino gaming areas	56.3%	61.5%	+9.2%	▲
Prohibiting smoking in all bars	42.5%	50.3%	+18.4%	▲
Raising the minimum purchase age to 21	-	79.0%	-	-

Note. * Green arrows = positive change, red arrows = negative change, dash (-) = question was not asked in 2012

APPENDIX B: Comparison of 2016 ATS Results by Race/Ethnicity

It is also important to examine the prevalence of tobacco product use and public perceptions of the public by race/ethnicity. This comparison can help determine if there is a need to target efforts toward particular racial/ethnic groups and to determine if messaging needs to be altered to increase effectiveness. The following table provides an overview of the use of smoking tobacco products and perceptions of respondents by race/ethnicity.

	TOTAL	CAUCASIAN	AFRICAN AMERICAN / BLACK	ASIAN	NHPI/ AIAN	MULTIPLE	HISPANIC
ELECTRONIC CIGARETTE ATTITUDES & USE							
Believes e-cigarettes/vapor products are safer than regular cigarettes	19.5%	21.3%	17.9%	14.7%	0.0%	16.7%	19.6%
Ever used an e-cigarette or other “vaping” product	24.0%	22.5%	20.5%	17.6%	50.0%	41.7%	26.5%
Currently uses e-cigarettes daily ¹	4.6%	7.9%	0.0%	0.0%	0.0%	0.0%	3.3%
Currently uses e-cigarettes some days ¹	12.6%	15.8%	12.5%	0.0%	0.0%	0.0%	13.3%
Currently does not use e-cigarettes ¹	82.8%	76.3%	87.5%	100.0%	100.0%	100.0%	83.3%
SMOKING TOBACCO USE HISTORY							
Currently smokes daily ²	12.6%	17.2%	15.4%	0.0%	25.0%	16.7%	8.0%
Currently smokes less than daily ²	3.5%	2.4%	2.6%	0.0%	0.0%	8.3%	6.2%
Currently does not smoke ²	83.9%	80.5%	82.1%	100.0%	75.0%	75.0%	85.8%
Smoked daily in the past ³	21.7%	32.1%	15.2%	14.7%	50.0%	27.3%	10.7%
Smoked less than daily in the past ³	13.9%	14.3%	12.1%	14.7%	0.0%	9.1%	14.6%
Has never smoked in the past ³	64.1%	53.6%	69.7%	70.6%	50.0%	63.6%	74.8%
Average age when first smoked daily	19.3	17.8	18.6	38.0	14.5	18.0	21.0
Types of Tobacco Products Used Daily or Weekly:							
<i>Hand-rolled cigarettes</i>	34.0%	0.0%	18.2%	0.0%	0.0%	0.0%	9.5%
<i>Kreteks</i>	5.1%	6.8%	0.0%	0.0%	0.0%	0.0%	4.8%
<i>Pipes of tobacco</i>	2.6%	2.7%	9.1%	0.0%	0.0%	0.0%	0.0%
<i>Cigars/cheroots/cigarillos</i>	8.5%	6.8%	9.1%	0.0%	0.0%	40.0%	10.0%
<i>Water pipe/hookah</i>	2.6%	1.4%	0.0%	0.0%	0.0%	0.0%	9.5%
<i>Manufactured cigarettes</i>	39.8%	33.8%	54.5%	0.0%	66.7%	60.0%	55.0%
<i>Menthols</i>	32.6%	23.1%	50.0%	0.0%	50.0%	50.0%	40.0%
Smoked flavored little cigars in the past 30 days	6.8%	6.8%	9.1%	0.0%	0.0%	25.0%	4.8%
SMOKELESS TOBACCO USE HISTORY							
Currently uses daily ⁴	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.9%
Currently uses less than daily ⁴	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Currently does not use ⁴	98.1%	100.0%	100.0%	82.4%	100.0%	100.0%	99.1%
Used daily in the past ⁵	2.8%	3.0%	5.1%	0.0%	0.0%	0.0%	2.7%
Used less than daily in the past ⁵	3.3%	5.3%	2.6%	0.0%	0.0%	8.3%	0.9%
Has never used in the past ⁵	93.9%	91.7%	92.3%	100.0%	100.0%	91.7%	96.4%
Average age when first used daily	19.7	20.0	16.5	N/A	N/A	N/A	20.8
Types of Tobacco Products Used Daily or Weekly:							
<i>Snuff, by mouth</i>	0.0%						
<i>Snuff, by nose</i>	9.1%	0.0%	0.0%	0.0%	0.0%	0.0%	25.0%
<i>Chewing Tobacco</i>	18.2%	0.0%	50.0%	0.0%	0.0%	0.0%	25.0%
<i>Betel quid with tobacco</i>	16.7%	33.3%	0.0%	0.0%	0.0%	0.0%	0.0%

Note: Native Hawaiian/Pacific Islander (NHPI) and American Indian/Alaska Native (AIAN) racial groups were combined for this analysis due to low response rates.

N/A: Preceding questions disqualified respondent from answering this question, therefore the item is not applicable to them.

Superscript: Items on this page with the same superscript number total 100%. For groups totaling less than 100%, the difference is due to individuals who responded “Don’t Know” or refused to answer.

	TOTAL	CAUCASIAN	AFRICAN AMERICAN / BLACK	ASIAN	NHPI/ AIAN	MULTIPLE	HISPANIC
SMOKING TOBACCO CESSATION BEHAVIOR							
Advised to Quit During Last Doctor Visit	40.7%	40.6%	71.4%	0.0%	100.0%	33.3%	25.0%
Tried to Quit in Past Year	36.7%	24.2%	57.1%	0.0%	100.0%	66.7%	43.8%
<i>Group counseling</i>	0.0%	N/A	N/A	N/A	N/A	N/A	N/A
<i>Nicotine Replacement</i>	28.6%	37.5%	25.0%	N/A	0.0%	0.0%	28.6%
<i>Other Prescriptions</i>	19.0%	14.3%	25.0%	N/A	100.0%	0.0%	14.3%
<i>Herbal/Homeopathic</i>	9.1%	0.0%	25.0%	N/A	100.0%	0.0%	0.0%
<i>Aware of 1-800-QUIT-NOW</i>	71.4%	100.0%	75.0%	N/A	100.0%	100.0%	28.6%
<i>Tried 1-800-QUIT-NOW</i>	9.5%	14.3%	0.0%	N/A	0.0%	0.0%	14.3%
<i>Tried switching to smokeless tobacco</i>	28.6%	37.5%	25.0%	N/A	0.0%	100.0%	14.3%
<i>Tried stopping on own/using willpower</i>	86.4%	75.0%	75.0%	N/A	100.0%	100.0%	100.0%
<i>Other methods</i>	25.0%	14.3%	25.0%	N/A	100.0%	100.0%	14.3%

Note: Native Hawaiian/Pacific Islander (NHPI) and American Indian/Alaska Native (AIAN) racial groups were combined for this analysis due to low response rates.

N/A: Preceding questions disqualified respondent from answering this question, therefore the item is not applicable to them.

	TOTAL	CAUCASIAN	AFRICAN AMERICAN / BLACK	ASIAN	NHPI/ AIAN	MULTIPLE	HISPANIC
SECONDHAND SMOKE (SHS) EXPOSURE AND POLICIES IN THE CAR, THE HOME, & AT WORK							
Smoking is allowed inside car ¹	7.6%	11.3%	7.7%	0.0%	0.0%	8.3%	4.4%
Smoking generally not allowed in car, will allow exceptions ¹	8.1%	8.9%	7.7%	0.0%	25.0%	0.0%	9.7%
Smoking is never allowed in car ¹	74.3%	70.2%	74.4%	82.4%	75.0%	75.0%	77.9%
No rules about smoking in car ¹	8.9%	7.7%	10.3%	17.6%	0.0%	16.7%	7.1%
Smoking is allowed inside home ²	7.8%	13.5%	10.3%	0.0%	0.0%	8.3%	0.9%
Smoking generally not allowed in home, will allow exceptions ²	4.0%	5.9%	7.7%	0.0%	0.0%	0.0%	1.8%
Smoking never allowed in home ²	85.0%	77.6%	79.5%	100.0%	100.0%	83.3%	93.0%
No rules about smoking in home ²	2.9%	2.9%	2.6%	0.0%	0.0%	8.3%	3.5%
Rooms in which smoking is allowed:							
<i>Smoking is allowed inside every room³</i>	42.9%	43.8%	33.3%	0.0%	0.0%	100.0%	33.3%
<i>Not every room³</i>	57.1%	56.3%	66.7%	0.0%	0.0%	0.0%	66.7%
Secondhand smoke infiltrates home daily ⁴	10.5%	12.4%	12.8%	14.7%	25.0%	8.3%	5.3%
Secondhand smoke infiltrates home weekly ⁴	2.4%	3.0%	0.0%	0.0%	0.0%	0.0%	3.5%
Secondhand smoke infiltrates home monthly ⁴	2.2%	3.0%	2.6%	0.0%	0.0%	0.0%	1.8%
Secondhand smoke infiltrates home less than monthly ⁴	9.1%	7.7%	15.4%	14.7%	0.0%	16.7%	7.0%
Secondhand smoke never infiltrates the home ⁴	73.7%	70.4%	69.2%	70.6%	75.0%	75.0%	80.7%
Works outside the home	63.8%	52.1%	64.1%	85.7%	75.0%	69.2%	73.5%
Works in a casino	16.6%	15.9%	24.0%	20.7%	0.0%	25.0%	13.4%
Works indoors at a casino ⁵	75.0%	73.3%	100.0%	0.0%	N/A	100.0%	100.0%
Works outdoors at a casino ⁵	15.0%	0.0%	0.0%	100.0%	N/A	0.0%	0.0%
Works both indoors and outdoors at a casino ⁵	10.0%	26.7%	0.0%	0.0%	N/A	0.0%	0.0%
There are indoor areas at work	15.0%	N/A	N/A	100.0%	N/A	N/A	N/A
Smoking is allowed anywhere indoors at work (in a casino) ⁶	7.5%	7.1%	0.0%	0.0%	N/A	50.0%	8.3%
Smoking only allowed in some indoor areas at work in a casino ⁶	47.5%	42.9%	66.7%	0.0%	N/A	50.0%	66.7%
Smoking not allowed indoors at work in a casino ⁶	42.5%	50.0%	33.3%	100.0%	N/A	0.0%	16.7%
No smoking policy at work in a casino ⁶	2.5%	0.0%	0.0%	0.0%	N/A	0.0%	8.3%
Witnessed someone smoking indoors at work in a casino in the past 30 days	48.7%	64.3%	50.0%	0.0%	N/A	100.0%	45.5%
Exposed daily to SHS at work in a casino ⁷	42.5%	57.1%	50.0%	0.0%	N/A	100.0%	33.3%
Exposed weekly to SHS at work in a casino ⁷	10.0%	7.1%	0.0%	0.0%	N/A	0.0%	25.0%
Exposed monthly to SHS at work in a casino ⁷	22.5%	14.3%	0.0%	100.0%	N/A	0.0%	8.3%
Exposed less than monthly to SHS at work in a casino ⁷	7.5%	0.0%	16.7%	0.0%	N/A	0.0%	16.7%
Never exposed to SHS at work in a casino ⁷	17.5%	21.4%	33.3%	0.0%	N/A	0.0%	16.7%

Note: Native Hawaiian/Pacific Islander (NHPI) and American Indian/Alaska Native (AIAN) racial groups were combined for this analysis due to low response rates.

N/A: Preceding questions disqualified respondent from answering this question, therefore the item is not applicable to them.

Superscript: Items on this page with the same superscript number total 100%. For groups totaling less than 100%, the difference is due to individuals who responded "Don't Know" or refused to answer.

	TOTAL	CAUCASIAN	AFRICAN AMERICAN / BLACK	ASIAN	NHPI/ AIAN	MULTIPLE	HISPANIC
MEDIA INFLUENCE ON SMOKING CESSATION							
Noticed Information about Dangers of smoking/encouraging quitting :							
<i>In newspapers or magazines</i>	27.7%	13.0%	41.0%	65.7%	50.0%	25.0%	32.7%
<i>On television</i>	63.0%	48.8%	71.8%	100.0%	75.0%	75.0%	67.9%
<i>On the radio</i>	23.7%	15.4%	23.1%	34.3%	40.0%	41.7%	30.4%
<i>On billboards</i>	31.6%	22.6%	45.9%	17.6%	50.0%	33.3%	43.8%
<i>On bus stop benches/shelters</i>	22.2%	14.2%	23.7%	34.3%	25.0%	33.3%	28.6%
<i>On signs in shopping malls</i>	17.5%	8.9%	20.5%	14.3%	50.0%	27.3%	28.3%
<i>On the Internet</i>	27.6%	14.8%	26.3%	51.4%	66.7%	36.4%	37.7%
<i>Somewhere else</i>	11.9%	4.2%	10.3%	34.3%	50.0%	16.7%	15.2%
Sources led me to think about quitting	50.0%	52.4%	33.3%	0.0%	0.0%	0.0%	57.1%
Sources led me to encourage someone to quit	35.1%	31.1%	53.8%	73.9%	0.0%	0.0%	20.4%
Source that led to think about quitting/encouraging someone to quit:							
<i>Newspapers or magazines</i>	4.5%	3.4%	12.5%	0.0%	N/A	N/A	7.7%
<i>Television</i>	74.3%	80.0%	66.7%	70.6%	N/A	N/A	71.4%
<i>Radio</i>	5.7%	6.7%	11.1%	0.0%	N/A	N/A	7.1%
<i>Billboards</i>	8.7%	10.0%	22.2%	0.0%	N/A	N/A	7.7%
<i>Bus stop benches/shelters</i>	1.4%	0.0%	0.0%	0.0%	N/A	N/A	7.7%
<i>Signs in shopping malls</i>	7.2%	6.7%	11.1%	0.0%	N/A	N/A	15.4%
<i>Internet</i>	1.4%	0.0%	0.0%	0.0%	N/A	N/A	7.7%
<i>Somewhere else</i>	11.6%	3.4%	11.1%	29.4%	N/A	N/A	7.1%

HEALTH AND ECONOMIC PERCEPTIONS OF SMOKING							
Based on What you know or believe:							
Feels people should be protected from secondhand smoke	84.4%	71.6%	94.9%	100.0%	75.0%	91.7%	94.6%
Smoking causes stroke	71.8%	76.9%	61.5%	85.7%	75.0%	66.7%	63.7%
Smoking causes heart attack	81.5%	83.4%	74.4%	85.7%	75.0%	83.3%	79.6%
Smoking causes lung cancer	95.7%	93.5%	92.1%	100.0%	100.0%	91.7%	99.1%
Smoking causes bladder cancer	36.7%	31.4%	33.3%	65.7%	40.0%	33.3%	37.2%
Smoking causes pancreatic cancer	41.0%	29.8%	43.6%	65.7%	60.0%	25.0%	50.0%
Smoking causes added economic burden to the healthcare system	91.1%	89.9%	87.2%	100.0%	100.0%	91.7%	91.2%
Smokeless tobacco causes serious illness	79.6%	76.3%	76.9%	100.0%	75.0%	76.9%	79.5%
Current brand is a little less harmful compared to other brands ¹	16.9%	18.8%	28.6%	N/A	0.0%	33.3%	6.3%
Current brand is no different compared to other brands ¹	57.6%	53.1%	42.9%	N/A	100.0%	0.0%	81.3%
Current brand is a little more harmful compared to other brands ¹	16.9%	18.8%	28.6%	N/A	0.0%	33.3%	6.3%
Some types of cigarettes could be less harmful than others ²	17.8%	27.2%	12.8%	0.0%	0.0%	16.7%	11.6%
All types are equally harmful ²	77.6%	63.9%	84.6%	100.0%	100.0%	83.3%	87.5%

Note: Native Hawaiian/Pacific Islander (NHPI) and American Indian/Alaska Native (AIAN) racial groups were combined for this analysis due to low response rates. Superscript: Items on this page with the same superscript number add up to 100%. For groups totaling less than 100%, the difference is due to individuals who responded "Don't Know" or refused to answer.

	TOTAL	CAUCASIAN	AFRICAN AMERICAN / BLACK	ASIAN	NHPI/ AIAN	MULTIPL E	HISPANIC
FAVORING THE FOLLOWING TOBACCO LAWS & REGULATIONS							
Increases taxes on tobacco products	69.3%	61.5%	65.8%	100.0%	75.0%	58.3%	73.5%
Prohibiting all advertisements for tobacco products	59.8%	48.5%	59.0%	82.4%	50.0%	58.3%	70.8%
Prohibiting smoking anywhere on college campuses	67.2%	55.0%	71.8%	85.7%	75.0%	53.8%	79.5%
Prohibiting smoking indoors/outdoors of multiunit housing complexes	67.7%	55.0%	66.7%	85.7%	50.0%	66.7%	82.1%
Prohibiting smoking within 30 ft. of entrance	81.2%	76.3%	76.9%	100.0%	80.0%	69.2%	85.7%
Prohibiting smoking in outdoor public places where children present	72.2%	66.5%	66.7%	85.7%	75.0%	84.6%	77.0%
Prohibiting smoking in other outdoor venues	55.1%	52.1%	53.8%	51.4%	25.0%	58.3%	61.9%
Prohibiting smoking in casino gaming areas	61.3%	52.7%	61.5%	100.0%	50.0%	50.0%	63.7%
Prohibiting smoking in all bars	50.4%	42.9%	48.7%	85.7%	50.0%	33.3%	53.1%
Raising the minimum purchase age to 21	79.0%	71.0%	82.1%	100.0%	75.0%	76.9%	83.9%
Making it illegal to purchase or possess vapor products if under 21	72.7%	65.1%	79.5%	85.7%	75.0%	76.9%	77.0%
Prohibiting the sale of flavored tobacco products	63.1%	55.6%	60.0%	100.0%	60.0%	50.0%	65.5%

	Total	Caucasian	African American / Black	Asian	NHPI/AIAN	Multiple	Hispanic
WATER PIPE/HOOKAH USE							
Currently uses water pipes/hookah	2.6%	1.4%	0.0%	0.0%	0.0%	0.0%	9.5%
Used daily in the past	0.5%	0.6%	0.0%	0.0%	0.0%	0.0%	0.9%
Used less than daily in the past	7.0%	6.5%	7.7%	0.0%	25.0%	25.0%	7.1%
Has never used in the past	92.5%	92.9%	92.3%	100.0%	75.0%	75.0%	92.0%
Average age when first used hookah	24.8	24.3	18.6	N/A	12.0	27.0	29.4
Last session lasted 1 hour or more	16.7%	0.0%	0.0%	N/A	0.0%	100.0%	28.6%
Last session lasted less than 1 hour	66.7%	85.7%	50.0%	N/A	100.0%	0.0%	57.1%
Last session with at least 1 other person	94.7%	100.0%	100.0%	N/A	100.0%	100.0%	85.7%
Smoked more than 1 rock during last session	38.9%	25.0%	50.0%	N/A	0.0%	100.0%	50.0%
Last smoked hookah at home	55.6%	62.5%	50.0%	N/A	100.0%	100.0%	33.3%
Last smoked hookah at a bar/club	16.7%	0.0%	50.0%	N/A	0.0%	0.0%	33.3%
Last smoked hookah at a restaurant	0.0%	N/A	N/A	N/A	N/A	N/A	N/A
Last smoked somewhere other than home, a bar/club, or a restaurant	27.8%	37.5%	0.0%	N/A	0.0%	0.0%	33.3%
Last smoked with flavored tobacco	66.7%	37.5%	50.0%	N/A	100.0%	100.0%	100.0%
Last smoked with unflavored tobacco	11.1%	25.0%	0.0%	N/A	0.0%	0.0%	0.0%
Last smoked both flavored and unflavored tobacco	22.2%	37.5%	50.0%	N/A	0.0%	0.0%	0.0%

	Total	Caucasian	African American / Black	Asian	NHPI/AIAN	Multiple	Hispanic
WATER PIPE/HOOKAH USE							
Currently uses water pipes/hookah	2.6%	1.4%	0.0%	0.0%	0.0%	0.0%	9.5%
Used daily in the past ¹	0.5%	0.6%	0.0%	0.0%	0.0%	0.0%	0.9%
Used less than daily in the past ¹	7.0%	6.5%	7.7%	0.0%	25.0%	25.0%	7.1%
Has never used in the past ¹	92.5%	92.9%	92.3%	100.0%	75.0%	75.0%	92.0%
Average age when first used daily	24.8	24.3	18.6	N/A	12.0	27.0	29.4
Last session lasted 1 hour or more ²	16.7%	0.0%	0.0%	N/A	0.0%	100.0%	28.6%
Last session lasted less than 1 hour ²	66.7%	85.7%	50.0%	N/A	100.0%	0.0%	57.1%
Last session with at least 1 other person	94.7%	100.0%	100.0%	N/A	100.0%	100.0%	85.7%
Smoked more than 1 rock during last session	38.9%	25.0%	50.0%	N/A	0.0%	100.0%	50.0%
Last smoked hookah at home ³	55.6%	62.5%	50.0%	N/A	100.0%	100.0%	33.3%
Last smoked hookah at a bar/club ³	16.7%	0.0%	50.0%	N/A	0.0%	0.0%	33.3%
Last smoked hookah at a restaurant ³	0.0%	N/A	N/A	N/A	N/A	N/A	N/A
Last smoked somewhere other than home, a bar/ club, or a restaurant ³	27.8%	37.5%	0.0%	N/A	0.0%	0.0%	33.3%
Last smoked with flavored tobacco ⁴	66.7%	37.5%	50.0%	N/A	100.0%	100.0%	100.0%
Last smoked with unflavored tobacco ⁴	11.1%	25.0%	0.0%	N/A	0.0%	0.0%	0.0%
Last smoked both flavored and unflavored tobacco ⁴	22.2%	37.5%	50.0%	N/A	0.0%	0.0%	0.0%

Note: Native Hawaiian/Pacific Islander (NHPI) and American Indian/Alaska Native (AIAN) racial groups were combined for this analysis due to low response rates.

N/A: Preceding questions disqualified respondent from answering this question, therefore the item is not applicable to them.

Superscript: Items on this page with the same superscript number add up to 100%. For groups totaling less than 100%, the difference is due to individuals who responded "Don't Know" or refused to answer.

APPENDIX C: Comparison of 2016 Nevada ATS Results by County

Given that behaviors and attitudes might vary based on characteristics on the surrounding environment, it is important to examine the prevalence of tobacco product use and public perceptions of the public by region. This comparison can help determine if there is a need to target outreach efforts and messaging toward particular regions. The following table provides an overview of the use of smoking tobacco products and perceptions of respondents within each of the following regions in Nevada: Clark County, Washoe County, and Rural Counties in Nevada (15 rural counties combined due to population sizes).

	STATE	CLARK COUNTY	WASHOE COUNTY	RURAL COUNTIES
ELECTRONIC CIGARETTE ATTITUDES & USE				
Believes e-cigarettes/vapor products are safer than regular cigarettes	21.1%	19.4%	20.6%	26.8%
Ever used an e-cigarette or other “vaping” product	24.1%	23.9%	24.9%	22.5%
Currently uses e-cigarettes daily ¹	8.0%	5.6%	8.8%	12.5%
Currently uses e-cigarettes some days ¹	18.9%	12.4%	18.8%	37.5%
Currently does not use e-cigarettes ¹	73.1%	82.0%	72.5%	50.0%
SMOKING TOBACCO USE HISTORY				
Currently smokes daily ²	11.3%	12.6%	9.7%	11.6%
Currently smokes less than daily ²	3.4%	3.5%	2.8%	4.3%
Currently does not smoke ²	84.5%	83.9%	86.6%	81.2%
Smoked daily in the past ³	22.2%	21.8%	20.2%	28.2%
Smoked less than daily in the past ³	16.5%	13.8%	17.8%	20.5%
Has never smoked in the past ³	60.5%	64.0%	61.7%	47.9%
Average age when first smoked daily	17.3	19.3	17	16.9
Types of Tobacco Products Used Daily or Weekly:				
<i>Hand-rolled cigarettes</i>	3.1%	3.4%	3.3%	2.0%
<i>Kreteks</i>	3.5%	4.3%	3.4%	2.0%
<i>Pipes of tobacco</i>	1.6%	2.5%	1.1%	0.0%
<i>Cigars/cheeroots/cigarillos</i>	10.5%	9.3%	12.4%	10.0%
<i>Water pipe/hookah</i>	7.4%	3.4%	5.6%	20.0%
<i>Manufactured cigarettes</i>	36.4%	39.8%	34.4%	32.0%
<i>Menthols</i>	29.7%	31.8%	25.8%	31.3%
<i>Other tobacco products</i>	0.4%	0.0%	1.1%	0.0%
Smoked flavored little cigars in the past 30 days	5.4%	6.8%	5.6%	2.0%
SMOKELESS TOBACCO USE HISTORY				
Currently uses daily ⁴	1.7%	0.3%	2.5%	3.6%
Currently uses less than daily ⁴	1.1%	0.0%	2.2%	1.4%
Currently does not use ⁴	95.8%	98.1%	94.7%	92.1%
Used daily in the past ⁵	3.2%	2.7%	3.2%	4.7%
Used less than daily in the past ⁵	6.1%	3.3%	8.4%	8.5%
Has never used in the past ⁵	90.7%	94.0%	88.4%	86.8%
Average age when first used daily	22.6	19.7	21.6	22.3
Types of Tobacco Products Used Daily or Weekly:				
<i>Snuff, by mouth</i>	15.0%	0.0%	22.2%	18.2%
<i>Snuff, by nose</i>	4.9%	9.1%	5.3%	0.0%
<i>Chewing Tobacco</i>	27.5%	10.0%	31.6%	36.4%
<i>Betel quid with tobacco</i>	9.8%	18.2%	10.5%	0.0%

Superscript: Percentages on this page with the same superscript number add up to 100%. For groups totaling less than 100%, the difference is due to individuals who responded “Don’t Know” or refused to answer.

	STATE	CLARK COUNTY	WASHOE COUNTY	RURAL COUNTIES
SMOKING TOBACCO CESSATION BEHAVIOUR				
Advised to Quit During Last Doctor Visit	50.0%	40.7%	54.2%	63.0%
Tried to Quit in Past Year	45.5%	35.6%	51.2%	60.9%
<i>Group counseling</i>	0.0%	0.0%	0.0%	0.0%
<i>Nicotine Replacement</i>	29.8%	27.3%	28.6%	35.7%
<i>Other Prescriptions</i>	14.0%	18.2%	14.3%	7.1%
<i>Herbal/Homeopathic</i>	3.6%	4.8%	4.8%	0.0%
<i>Aware of 1-800-QUIT-NOW</i>	69.1%	71.4%	66.7%	69.2%
<i>Tried 1-800-QUIT-NOW</i>	10.7%	9.5%	19.0%	0.0%
<i>Tried switching to smokeless tobacco</i>	12.5%	28.6%	4.8%	0.0%
<i>Tried stopping on own/using willpower</i>	96.4%	90.5%	100.0%	100.0%
<i>Other methods</i>	23.2%	23.8%	38.1%	0.0%
SMOKELESS TOBACCO CESSATION BEHAVIOUR				
Tried to Quit in Past Year	30.4%	0.0%	26.7%	42.9%
<i>Group counseling</i>	0.0%	N/A	0.0%	0.0%
<i>Nicotine Replacement</i>	0.0%	N/A	0.0%	0.0%
<i>Other Prescriptions</i>	0.0%	N/A	0.0%	0.0%
<i>Herbal/Homeopathic</i>	0.0%	N/A	0.0%	0.0%
<i>Aware of 1-800-QUIT-NOW</i>	28.6%	N/A	25.0%	33.3%
<i>Tried 1-800-QUIT-NOW</i>	0.0%	N/A	0.0%	0.0%
<i>Tried stopping on own/using willpower</i>	100.0%	N/A	100.0%	100.0%
<i>Other methods</i>	28.6%	N/A	25.0%	33.3%
Thoughts about quitting smokeless tobacco:				
<i>Planning to quit within the next month¹</i>	25.0%	N/A	20.0%	33.3%
<i>Thinking about quitting within the next 12 months¹</i>	37.5%	N/A	60.0%	0.0%
<i>Will quit someday but not within the next 12 months¹</i>	25.0%	N/A	20.0%	33.3%
<i>I am not interested in quitting¹</i>	12.5%	N/A	0.0%	33.3%

N/A: Preceding questions disqualified respondent from answering this question, therefore the item is not applicable to them.

Superscript: Items on this page with the same superscript number add up to 100%. For groups totaling less than 100%, the difference is due to individuals who responded "Don't Know" or refused to answer.

	STATE	CLARK COUNTY	WASHOE COUNTY	RURAL COUNTIES
SECONDHAND SMOKE (SHS) EXPOSURE AND POLICIES IN THE CAR, THE HOME, & AT WORK				
Smoking is allowed inside car ¹	6.3%	7.5%	6.2%	2.9%
Smoking is generally not allowed in car, but will allow exceptions ¹	9.1%	8.3%	9.0%	11.5%
Smoking is never allowed in car ¹	74.4%	74.2%	76.9%	69.1%
No rules about smoking in car ¹	9.3%	8.9%	7.2%	15.1%
Smoking is allowed inside home ²	5.7%	7.8%	4.7%	2.2%
Smoking generally not allowed in home, but exceptions ²	4.1%	4.0%	3.7%	5.1%
Smoking never allowed in home ²	85.9%	85.2%	87.5%	84.1%
No rules about smoking in home ²	4.2%	2.7%	4.0%	8.7%
Rooms in which smoking is allowed:				
<i>Smoking is allowed inside every room³</i>	38.3%	43.2%	25.9%	50.0%
<i>Not every room³</i>	61.7%	56.8%	74.1%	50.0%
Secondhand smoke infiltrates home daily ⁴	8.3%	10.8%	7.5%	3.6%
Secondhand smoke infiltrates home weekly ⁴	1.8%	2.4%	1.9%	0.0%
Secondhand smoke infiltrates home monthly ⁴	3.1%	2.2%	4.4%	2.9%
Secondhand smoke infiltrates home less than monthly ⁴	9.4%	8.9%	7.2%	15.9%
Secondhand smoke never infiltrates the home ⁴	76.0%	73.6%	78.2%	77.5%
Works outside the home	64.0%	63.7%	65.4%	61.6%
Works in a casino	12.1%	16.9%	7.6%	9.4%
Works indoors at a casino ⁵	73.4%	75.0%	80.0%	55.6%
Works outdoors at a casino ⁵	9.4%	15.0%	0.0%	0.0%
Works both indoors and outdoors at a casino ⁵	17.2%	10.0%	20.0%	44.4%
There are indoor areas at work in a casino	0.8%	100.0%	N/A	N/A
Smoking is allowed anywhere indoors at work in a casino ⁶	6.1%	7.5%	5.9%	0.0%
Smoking only allowed in some indoor areas at work in a casino ⁶	47.0%	45.0%	52.9%	44.4%
Smoking not allowed indoors at work in a casino ⁶	45.5%	45.0%	41.2%	55.6%
No smoking policy at work in a casino ⁶	1.5%	2.5%	0.0%	0.0%
Witnessed someone smoking indoors at work in a casino in the past 30 days	55.4%	47.5%	75.0%	55.6%
Exposed daily to SHS at work in a casino ⁷	50.8%	41.5%	73.3%	55.6%
Exposed weekly to SHS at work in a casino ⁷	9.2%	12.2%	6.7%	0.0%
Exposed monthly to SHS at work in a casino ⁷	13.8%	22.0%	0.0%	0.0%
Exposed less than monthly to SHS at work in a casino ⁷	7.7%	4.9%	20.0%	0.0%
Never exposed to SHS at work in a casino ⁷	18.5%	19.5%	0.0%	44.4%

N/A: Preceding questions disqualified respondent from answering this question, therefore the item is not applicable to them.

Superscript: Items on this page with the same superscript number add up to 100%. For groups totaling less than 100%, the difference is due to individuals who responded "Don't Know" or refused to answer.

	STATE	CLARK COUNTY	WASHOE COUNTY	RURAL COUNTIES
MEDIA INFLUENCE ON SMOKING CESSATION				
Noticed Information about Dangers of smoking/encouraging quitting :				
<i>In newspapers or magazines</i>	29.8%	27.8%	31.4%	31.7%
<i>On television</i>	62.3%	62.9%	61.1%	63.3%
<i>On the radio</i>	25.3%	23.5%	26.9%	26.8%
<i>On billboards</i>	33.5%	31.8%	32.5%	40.6%
<i>On bus stop benches/shelters</i>	18.9%	22.3%	20.2%	6.6%
<i>On signs in shopping malls</i>	23.2%	17.5%	27.3%	29.0%
<i>On the Internet</i>	29.9%	27.7%	28.3%	39.6%
<i>Somewhere else</i>	14.0%	11.6%	15.0%	18.1%
Sources led me to think about quitting	39.6%	50.0%	27.0%	45.5%
Sources led me to encourage someone to quit	32.4%	35.3%	29.0%	35.6%
Source that led to think about quitting/encouraging someone to quit:				
<i>Newspapers or magazines</i>	10.3%	5.8%	15.1%	9.3%
<i>Television</i>	63.8%	75.4%	58.9%	53.5%
<i>Radio</i>	7.1%	4.3%	12.3%	2.4%
<i>Billboards</i>	11.4%	10.0%	15.3%	7.0%
<i>Bus stop benches/shelters</i>	3.3%	1.4%	6.9%	0.0%
<i>Signs in shopping malls</i>	8.2%	7.2%	11.1%	4.7%
<i>Internet</i>	13.0%	2.9%	12.3%	31.0%
<i>Somewhere else</i>	15.8%	11.6%	16.7%	20.9%
HEALTH AND ECONOMIC PERCEPTIONS OF SMOKING				
Based on what you know or believe:				
Feels people should be protected from secondhand smoke	85.3%	84.1%	85.4%	88.5%
Smoking causes stroke	68.3%	71.7%	62.3%	73.2%
Smoking causes heart attack	78.7%	81.7%	73.8%	81.9%
Smoking causes lung cancer	95.4%	95.4%	94.1%	98.6%
Smoking causes bladder cancer	36.7%	36.8%	36.4%	37.0%
Smoking causes pancreatic cancer	41.2%	40.9%	40.6%	43.5%
Smoking causes added economic burden to the healthcare system	88.8%	91.1%	84.1%	93.4%
Smokeless tobacco causes serious illness	80.1%	79.5%	81.3%	79.0%
Current brand is a little less harmful compared to other brands ¹	16.9%	16.7%	25.0%	4.2%
Current brand is no different compared to other brands ¹	54.8%	58.3%	42.5%	66.7%
Current brand is a little more harmful compared to other brands ¹	14.5%	16.7%	12.5%	12.5%
Some types of cigarettes could be less harmful than others ²	19.4%	17.8%	23.4%	14.5%
All types are equally harmful ²	75.6%	77.4%	70.3%	83.3%

Superscript: Items on this page with the same superscript number add up to 100%. For groups totaling less than 100%, the difference is due to individuals who responded "Don't Know" or refused to answer.

	STATE	CLARK COUNTY	WASHOE COUNTY	RURAL COUNTIES
FAVORING THE FOLLOWING TOBACCO LAWS & REGULATIONS				
Increasing taxes on tobacco products	67.7%	69.1%	68.5%	62.3%
Prohibiting all advertisements for tobacco products	58.7%	59.8%	58.3%	56.8%
Prohibiting smoking anywhere on college campuses	68.9%	67.2%	71.0%	68.3%
Prohibiting smoking indoors and in outdoor public spaces of multi-unit housing complexes	66.5%	67.2%	65.9%	66.2%
Prohibiting smoking within 30 ft. of entrances to businesses and public buildings	82.7%	81.4%	82.2%	87.1%
Prohibiting smoking in outdoor public places (parks, zoos, playgrounds)	72.3%	72.3%	73.2%	70.3%
Prohibiting smoking in other outdoor venues (rodeos, racetracks)	56.0%	55.0%	58.3%	53.6%
Prohibiting smoking in casino gaming areas	52.9%	61.5%	49.2%	38.8%
Prohibiting smoking in all bars	44.6%	50.3%	42.1%	35.3%
Raising the minimum purchase age of tobacco products to 21	75.8%	79.0%	73.8%	71.7%
Making it illegal to purchase or possess vapor products if under 21	71.0%	73.0%	69.5%	69.1%
Prohibiting the sale of flavored tobacco products	59.0%	63.2%	57.3%	51.4%
WATER PIPE/HOOKAH USE				
Currently uses water pipes/hookah daily	0.0%	0.0%	0.0%	0.0%
Used daily in the past ¹	1.1%	0.8%	1.6%	0.7%
Used less than daily in the past ¹	10.0%	7.0%	10.6%	16.7%
Has never used in the past ¹	88.9%	92.2%	87.9%	82.6%
Average age when first used daily	22.6	25.5	21.9	18.7
Last session lasted 1 hour or more ²	26.8%	15.8%	36.4%	26.7%
Last session lasted less than 1 hour ²	64.3%	68.4%	54.5%	73.3%
Last session with at least 1 other person	90.9%	94.4%	100.0%	73.3%
Smoked more than 1 rock during last session	47.3%	38.9%	40.9%	66.7%
Last smoked hookah at home ³	61.8%	55.6%	63.6%	66.7%
Last smoked hookah at a bar/club ³	14.5%	16.7%	22.7%	0.0%
Last smoked hookah at a restaurant ³	5.5%	0.0%	0.0%	20.0%
Last smoked somewhere other than home, a bar/club, or a restaurant ³	18.2%	27.8%	13.6%	13.3%
Last smoked with flavored tobacco ⁴	69.1%	66.7%	77.3%	60.0%
Last smoked with unflavored tobacco ⁴	21.8%	11.1%	18.2%	40.0%
Last smoked both flavored and unflavored tobacco ⁴	7.3%	22.2%	0.0%	0.0%

Superscript: Items on this page with the same superscript number add up to 100%. For groups totaling less than 100%, the difference is due to individuals who responded "Don't Know" or refused to answer.

APPENDIX D: 2016 Adult Tobacco Survey - English

Hello! My name is _____ and I am calling from UNLV. We are conducting a survey of adults in Nevada regarding tobacco use.

[THE HOUSEHOLD SCREENING RESPONDENT SHOULD BE 18 YEARS OF AGE OR OLDER AND YOU MUST BE CONFIDENT THAT THIS PERSON CAN PROVIDE ACCURATE INFORMATION ABOUT ALL MEMBERS OF THE HOUSEHOLD. IF NEEDED, VERIFY THE AGE OF THE HOUSEHOLD SCREENING RESPONDENT TO MAKE SURE HE/SHE IS 18 YEARS OF AGE OR OLDER.]

1. May I speak with an adult age 18 or older?

- | | |
|---|---------------------------|
| Yes | 1 |
| No adult 18+ in household | 2 (Thank and terminate) |
| Adult 18+ not available/Not a good time | 7 (Set time to call back) |
| Hard refusal | 8 (Thank and terminate) |

Great! The purpose of this survey is to better understand adult tobacco use in Nevada. For your participation, you can choose to be entered into a drawing to win a \$50 Visa gift card after completing the survey! All information gathered WILL remain confidential and will in no way be linked to your name. The survey should take approximately 15 minutes.

2. Are you willing to take the survey today?

- | | |
|-----|--|
| Yes | 1 |
| No | 2 (Thank and schedule CB if appropriate) |

3. Can you verify which county you live in?

- Clark County NV
- Washoe County NV
- Carson City County NV
- Churchill County NV
- Douglas County NV
- Elko County NV
- Esmeralda County NV
- Eureka County NV
- Humboldt County NV
- Lander County NV
- Lincoln County NV
- Lyon County NV
- Mineral County NV
- Nye County NV
- Pershing County NV
- Storey County NV
- White Pine County NV
- Don't Know
- Refuse

Section AA. E-cigarettes

The first few questions relate to the use of e-cigarettes and vapor products.

AA1. Do you believe e-cigarettes or vaping products are safer than regular cigarettes?

Yes	1
No	2
Don't know	777
Refused	999

AA2. Have you ever used an e-cigarette or other electronic "vaping" product, even just one time, in your entire life?

Yes	1
No	2 [Go to next section]
Don't know / Not Sure	777 [Go to next section]
Refused	999 [Go to next section]

AA3. Do you now use e-cigarettes or other electronic "vaping" products every day, some days, or not at all?

Every day	1
Some days	2
Not at all	3
Don't know / Not sure	777
Refused	999

Section A. Tobacco Smoking

I would now like to ask you some questions about *smoking* tobacco, including cigarettes, cigars, pipes. Please do not answer about smokeless tobacco at this time.

A01. Do you *currently* smoke tobacco on a daily basis, less than daily, or not at all?

Daily	1 (skip to A03)
Less than daily	2
Not at all	3
Don't know	777 (skip to next section)
Refused	999 (skip to next section)

A02. In the *past*, have you smoked tobacco on a daily basis, less than daily, or not at all?

[IF RESPONDENT HAS DONE BOTH "DAILY" AND "LESS THAN DAILY" IN THE PAST, CHECK "DAILY"]

Daily	1
Less than daily	2 (skip to next section)
Not at all	3 (skip to next section)
Don't know	777 (skip to next section)
Refused	999 (skip to next section)

A03. How old were you when you first started smoking tobacco *daily*?

Age: _____ [IF DON'T KNOW OR REFUSED, ENTER 99]

A04. On average, how many of the following products do you *currently* smoke each day? Also, let me know if you smoke the product, but not every day.

[IF RESPONDENT REPORTS SMOKING PRODUCT, BUT NOT EVERY DAY, ENTER 888]

[IF RESPONDENT REPORTS IN PACKS OR CARTONS, PROBE TO FIND OUT HOW MANY ARE IN EACH AND CALCULATE TOTAL NUMBER]

<i>On average, how many of the following do you currently smoke each day/week?</i> [If a respondent doesn't know, enter 777. If they refuse, enter 999]	PER DAY [If not daily, enter 888]	PER WEEK [Only if daily = 888]
Manufactured cigarettes	A04a.	A04b.
A04c. Menthols (manufactured cigarettes) a. Yes 1 b. No 2 c. Don't know 7 d. Refused 9		
Hand-rolled cigarettes	A04d.	A04e.
Kreteks	A04f.	A04g.
Pipes full of tobacco	A04h.	A04i.
Cigars, cheroots, or cigarillos	A04j.	A04k.
Water pipe/hookah sessions	A04l.	A04m.
Any others: _____	A04n.	A04o.

A05. During the past 30 days did you use flavored little cigars on at least one day?

Yes	1
No	2
Don't know	777
Refused	999

Section B. Smokeless Tobacco

The next questions are about using smokeless tobacco, such as snuff, chewing tobacco, and dip. Smokeless tobacco is tobacco that is not smoked, but is sniffed through the nose, held in the mouth, or chewed.

B01. Do you *currently* use smokeless tobacco on a daily basis, less than daily, or not at all?

- Daily 1 (skip to B03)
- Less than daily 2
- Not at all 3
- Don't know 777 (skip to next section)
- Refused 999 (skip to next section)

B02. In the *past*, have you used smokeless tobacco on a daily basis, less than daily, or not at all?

[IF RESPONDENT HAS DONE BOTH "DAILY" AND "LESS THAN DAILY" IN THE PAST, CHECK "DAILY"]

- Daily 1
- Less than daily 2 (skip to next section)
- Not at all 3 (skip to next section)
- Don't know 777 (skip to next section)
- Refused 999 (skip to next section)

B03. How old were you when you first started using smokeless tobacco *daily*?

[IF DON'T KNOW OR REFUSED, ENTER 99] __

B04. On average, how many times a day do you *currently* use the following products? Also, let me know if you use the product, but not every day.

[IF RESPONDENT REPORTS USING THE PRODUCT BUT NOT EVERY DAY, ENTER 888]

<i>On average, how many of the following do you currently smoke each day/week?</i> [If a respondent doesn't know, enter 777. If they refuse, enter 999]	PER DAY [If not daily, enter 888]	PER WEEK [Only if daily = 888]
Snuff, by mouth	B04a.	B04b.
Snuff, by nose	B04c.	B04d.
Chewing tobacco	B04e.	B04f.
Betel quid with tobacco	B04g.	B04h.
Any others: _____	B04i.	B04j.

Section C. Cessation

IF A01 = 3, 7, OR 9 (RESPONDENT DOES NOT CURRENTLY SMOKE TOBACCO) AND B01 = 3, 7, OR 9 (RESPONDENT DOES NOT CURRENTLY USES SMOKELESS TOBACCO), SKIP TO NEXT SECTION.

C01. During any visit to a doctor or health care provider in the past 12 months, were you advised to quit smoking tobacco or use of any other tobacco products?

Yes	1
No	2
Refused	999

IF A01 = 1 OR 2 (RESPONDENT CURRENTLY SMOKES TOBACCO), CONTINUE WITH THIS SECTION, AND ASK THESE QUESTIONS. IF NOT, SKIP TO NEXT SECTION.

The next questions ask about any attempts to stop using tobacco that you might have made during the past 12 months.

SMOKING TOBACCO

C02. During the past 12 months, have you tried to stop smoking?

Yes	1
No	2 (SKIP to C04:Smokeless Tobacco)
Refused	999

C03. During the past 12 months, did you use any of the following to try to stop smoking tobacco...

C03a. Did you use group counseling, including at a smoking cessation clinic to try to stop smoking?

Yes	1
No	2
Refused	999

C03b. Did you use nicotine replacement therapy, such as the patch or gum to try to stop smoking?

Yes	1
No	2
Refused	999

C03c. Did you use other prescription medications, for example Zyban (Bupropion, Aplenzin, Wellbutrin, Wellbutrin SR, Wellbutrin XL) or Chantix to try to stop smoking?

Yes	1
No	2
Refused	999

C03d. Did you use herbal/homeopathic medicines to try to stop smoking?

Yes	1
No	2
Refused	999

C03e. Were you aware of the 1-800-QUIT-NOW telephone support line to try to stop smoking?

Yes	1
No	2
Refused	999

C03f. Did you use the 1-800-QUIT-NOW telephone support line to try to stop smoking?

Yes	1
No	2
Refused	999

C03g. Did you use switching to smokeless tobacco to try to stop smoking?

Yes	1
No	2
Refused	999

C03h. Did you try to stop smoking on your own or by using your willpower?

Yes	1
No	2
Refused	999

C03i. Did you use anything else to try to stop smoking?

Yes	1
C03i1. What was that?	_____
No	2
Refused	999

IF B01 = 1 OR 2 (RESPONDENT CURRENTLY USES SMOKELESS TOBACCO), CONTINUE WITH THIS SECTION, AND ASK THESE QUESTIONS.

SMOKELESS TOBACCO

C04. During the past 12 months, have you tried to stop using smokeless tobacco?

Yes	1
No	2 (SKIP to next section)
Refused	999

C05. During the past 12 months, did you use any of the following to try stop using smokeless tobacco?

C05a. Did you use group counseling?

Yes	1
No	2
Refused	999

C05b. For smokeless tobacco, did you use nicotine replacement therapy, such as the patch or gum?

Yes	1
No	2
Refused	999

C05c. For smokeless tobacco, did you use other prescription medications, for example Zyban (Bupropion, Aplenzin, Wellbutrin, Wellbutrin SR, Wellbutrin XL) or Chantix?

Yes	1
No	2
Refused	999

C05d. For smokeless tobacco, did you use herbal/homeopathic medicines?

Yes	1
No	2
Refused	999

C03e. Were you aware of the 1-800-QUIT-NOW telephone support line to try to stop smoking?

Yes	1
No	2
Refused	999

C05e. For smokeless tobacco, did you use the 1-800-QUIT-NOW telephone support line?

Yes	1
No	2
Refused	999

C05g. Did you try to stop using smokeless tobacco on your own or by using your willpower?

Yes	1
No	2
Refused	999

C05h. Did you use anything else to try to stop using smokeless tobacco?

Yes	1
C05h1. What was that?	_____
No	2
Refused	999

C06. Which of the following best describes your thinking about quitting the use of smokeless tobacco?

I am planning to quit within the next month	1
I am thinking about quitting within the next 12 months	2
I will quit someday but not within the next 12 months	3
I am not interested in quitting	4
DON'T KNOW	7
REFUSED	9

Section D. Secondhand Smoke

I would now like to ask you a few questions about smoking in various places.

D01. Which of the following best describes the rules about smoking inside of your car: Smoking is allowed inside of your car, smoking is generally not allowed inside of your car but there are exceptions, smoking is never allowed inside of your car, or there are no rules about smoking in your car?

ALLOWED	1
NOT ALLOWED, BUT EXCEPTIONS	2
NEVER ALLOWED	3
NO RULES	4
DON'T KNOW	777
REFUSED	999

D02. Which of the following best describes the rules about smoking inside of your home: Smoking is allowed inside of your home, smoking is generally not allowed inside of your home but there are exceptions, smoking is never allowed inside of your home, or there are no rules about smoking in your home?

ALLOWED	1
NOT ALLOWED, BUT EXCEPTIONS	2
NEVER ALLOWED	3 (skip to D04)
NO RULES	4 (skip to D04)
DON'T KNOW	777 (skip to D04)
REFUSED	999 (skip to D04)

D03. Inside your home, is smoking allowed in every room?

Yes	1
No	2
Don't know	777
Refused	999

D04. How often does secondhand smoke infiltrate your home/residence? Would you say...

DAILY	1
WEEKLY	2
MONTHLY	3
LESS THAN MONTHLY	4
NEVER	5
DON'T KNOW	777
REFUSED	999

D05. Do you currently work outside of your home?

Yes	1
No/Don't Work	2 (skip to D11)
Refused	999 (skip to D12)

D06. Do you currently work inside a casino?

Yes	1
No/Don't Work	2 (skip to D11)
Refused	999 (skip to D10)

D07. Do you usually work indoors or outdoors?

INDOORS	1 (skip to D09)
OUTDOORS	2
BOTH	3 (skip to D09)
REFUSED	999

D08. Are there any indoor areas at your work place?

Yes	1
No	2 (skip to D10)
Don't know	777 (skip to D10)
Refused	999 (skip to D10)

D09. Which of the following best describes the indoor smoking policy where you work: Smoking is allowed anywhere, smoking is allowed only in some indoor areas, smoking is not allowed in any indoor areas, or there is no policy?

ALLOWED ANYWHERE	1
ALLOWED ONLY IN SOME INDOOR AREAS	2
NOT ALLOWED IN ANY INDOOR AREAS	3
THERE IS NO POLICY	4
DON'T KNOW	777
REFUSED	999

D09a. During the past 30 days, did anyone smoke in indoor areas where you work?

Yes	1
No	2
Don't know	7
Refused	9

D10. How often are you exposed to secondhand smoke at your work place?

DAILY	1
WEEKLY	2
MONTHLY	3
LESS THAN MONTHLY	4
NEVER	5
DON'T KNOW	777
REFUSED	999

D11. Based on what you know or believe, do you feel that people should be protected from secondhand smoke?

Yes	1
No	2
Don't know	777
Refused	999

Section E. Media

The next few questions ask about your exposure to the media and advertisements in the last 30 days.

E01. In the last 30 days, have you noticed *information* about the dangers of smoking cigarettes or that encourages quitting tobacco use in any of the following places?

a. In newspapers or in magazines?

Yes	1
No	2
Don't know	777
Not applicable	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Refused	999

b. On television?

Yes	1
No	2
Don't know	777
Not applicable	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Refused	999

c. On the radio?

Yes	1
No	2
Don't know	777
Not applicable	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Refused	999

d. On billboards?

Yes	1
No	2
Don't know	777
Not applicable	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Refused	999

e. On bus stop benches/shelters?

Yes	1
No	2
Don't know	777
Not applicable	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Refused	999

f. On signs in shopping malls?

Yes	1
No	2
Don't know	777
Not applicable	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Refused	999

g. On the Internet?

Yes	1
No	2
Don't know	777
Not applicable	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Refused	999

h. Somewhere else?

[DO NOT INCLUDE HEALTH WARNINGS ON CIGARETTE PACKAGES]

Yes	1
No	2
Don't know	777
Not applicable	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Refused	999

h1. Where else was it that you noticed this information?: _____

[DO NOT INCLUDE HEALTH WARNINGS ON CIGARETTE PACKAGES]

E02. [Administer if A01 = 1 or 2.]

In the last 30 days, have any of these sources of information led you to think about quitting?

Yes	1
No	2
Don't know	777
Refused	999

E03. [Administer if A01 = 3.]

In the last 30 days, have any of these sources of information led you to encourage someone you know to think about quitting?

Yes	1
No	2
Don't know	777
Refused	999

E04. [Administer if E02 or E03 = 1.]

Which sources of information caused you to do so? [Only read what was answered "yes" to E01]

a. Newspapers or magazines	1
b. Television	2
c. Radio	3
d. Billboards	4
e. Bus stop benches/shelters	5
f. Signs in shopping malls	6
g. Internet	7
h. Somewhere else?	8

[DO NOT INCLUDE HEALTH WARNINGS ON CIGARETTE PACKAGES]

E04h1. Please specify where: _____

Section F. Knowledge, Attitudes & Perceptions

The next question is asking about *smoking* tobacco.

F01. Based on what you know or believe, does smoking tobacco cause the following...

a. Stroke (blood clots in the brain that may cause paralysis)?

Yes	1
No	2
Don't know	777
Refused	999

b. Heart attack?

Yes	1
No	2
Don't know	777
Refused	999

c. Lung cancer?

Yes	1
No	2
Don't know	777
Refused	999

d. Bladder cancer?

Yes	1
No	2
Don't know	777
Refused	999

e. Pancreatic cancer?

Yes	1
No	2
Don't know	777
Refused	999

f. Added economic burden to the healthcare system?

Yes	1
No	2
Don't know	777
Refused	999

F02. Based on what you know or believe, does using *smokeless tobacco* cause serious illness?

Yes	1
No	2
Don't know	777
Refused	999

F03. ASK ONLY IF A01 = 1 OR 2 (CURRENT TOBACCO SMOKERS) Based on your experience of smoking, do you think that your current brand might be a little less harmful, is no different, or might be a little more harmful, compared to other cigarettes?

A little less harmful	1
No different	2
A little more harmful	3
Don't know	777
Refused	999

F04. Do you think that some types of cigarettes *could* be less harmful than other types, or are all cigarettes equally harmful?

Could be less harmful	1
All equally harmful	2
Don't know	777
Refused	999

For the next set of questions, please tell me if you would favor or oppose the following:

F05	Would you favor or oppose increasing taxes on tobacco products?	Favor	1
		Oppose	2
		Don't know	777
		Refused	999
F06	[Would you favor or oppose] a law prohibiting all advertisements for tobacco products?	Favor	1
		Oppose	2
		Don't know	777
		Refused	999
F07	[Would you favor or oppose] a law prohibiting smoking anywhere on college campuses?	Favor	1
		Oppose	2
		Don't know	777
		Refused	999
F08	[Would you favor or oppose] a law prohibiting smoking indoors and in outdoor public areas of multiunit housing complexes?	Favor	1
		Oppose	2
		Don't know	777
		Refused	999
F09	[Would you favor or oppose] a law prohibiting smoking close to the entrances of businesses and public buildings, within thirty feet?	Favor	1
		Oppose	2
		Don't know	777
		Refused	999
F10	[Would you favor or oppose] a law prohibiting smoking in outdoor public places, such as the park, zoos, and playgrounds (i.e. Places where children are likely to be present)?	Favor	1
		Oppose	2
		Don't know	777
		Refused	999
F11	[Would you favor or oppose] a law prohibiting smoking in other outdoor venues, such as rodeos and race tracks (i.e. Places where large amounts of people are likely to be present)?	Favor	1
		Oppose	2
		Don't know	777
		Refused	999
F12	[Would you favor or oppose] a law prohibiting smoking in casino gaming areas?	Favor	1
		Oppose	2
		Don't know	777
		Refused	999
F13	[Would you favor or oppose] a law prohibiting smoking in all bars?	Favor	1
		Oppose	2
		Don't know	777
		Refused	999
F14	Would you favor a law raising the minimum age to purchase tobacco products to 21?	Favor	1
		Oppose	2
		Don't know	777
		Refused	999
F15	Would you favor a law making it illegal for anyone under the age of 21 to buy e-cigarettes or vapor products?	Favor	1
		Oppose	2
		Don't know	777
		Refused	999
F16	Would you favor a law restricting the sale of flavored tobacco products? (ex. Bubble gum, root beer, cherry)	Favor	1
		Oppose	2
		Don't know	777
		Refused	999

G. Water Piper (Hookah/Shisha/Nargile)

G01. I would now like to ask you some questions about smoking water pipe.

In the *past*, have you smoked a water pipe on a daily basis, less than daily, or not at all?

[IF RESPONDENT HAS DONE BOTH "DAILY" AND "LESS THAN DAILY" IN THE PAST, CHECK "DAILY"]

- | | |
|-----------------|----------------------------|
| Daily | 1 |
| Less than daily | 2 |
| Not at all | 3 (skip to next section) |
| Refused | 999 (skip to next section) |

G02. How old were you when you first started smoking a water pipe?

[IF DON'T KNOW ENTER 777 OR REFUSED, ENTER 999] __

ROUTING: – CURRENT WATER PIPE SMOKERS: IF (A04l > 0 OR A04m > 0) GO TO G03 – ELSE, GO TO NEXT SECTION

G03. The last time you smoked a water pipe, how long did you participate in the water pipe smoking session?

- | | |
|------------|---|
| Hours | 1 |
| Minutes | 2 |
| Don't know | 7 |
| Refused | 9 |

G03a. [FOR HOURS/MINUTES, ENTER THE NUMBER. ASK IF NEEDED.] __

G04. The last time you smoked a water pipe, how many other people did you share the same pipe with during the session?

[IF DON'T KNOW OR REFUSED, ENTER 99] __

G05. The last time you smoked a water pipe, about how many rocks were smoked while you were participating in the session?

- | | |
|-------------|-----|
| Less than 1 | 0 |
| 1 | 1 |
| 2 | 2 |
| 3 | 3 |
| 4 | 4 |
| 5 or more | 5 |
| Don't know | 777 |
| Refused | 999 |

G06. The last time you smoked a water pipe, where did you smoke it?

- | | |
|-------------|---|
| Home | 1 |
| Coffee shop | 2 |
| Bar/Club | 3 |
| Restaurant | 4 |
| Other | 5 |

8a. Specify other place: _____

- | | |
|------------|-----|
| Don't know | 777 |
| Refused | 999 |

G07. The last time you smoked a water pipe, did you smoke it with flavored tobacco, unflavored tobacco, or both?

- | | |
|------------|-----|
| Flavored | 1 |
| Unflavored | 2 |
| Both | 3 |
| Don't know | 777 |
| Refused | 999 |

H. Background Characteristics

Now I am going to ask you a few questions about your background.

[INTERVIEWER: READ IF NECESSARY: This information is used for statistical purposes only and will remain confidential.]

H01. What is your gender?

Male	1
Female	2
Other	3
Don't know	777
Refused	999

H02. What is the month of your date of birth?

January	1
February	2
March	3
April	4
May	5
June	6
July	7
August	8
September	9
October	10
November	11
December	12
Don't know	777
Refused	999

H03. What is the year of your date of birth?

[IF DON'T KNOW, ENTER 7777; IF REFUSED, ENTER 9999] ____

H03. How old are you?

[IF RESPONDENT IS UNSURE, PROBE FOR AN ESTIMATE] ____

H04. [INTERVIEWER!: DO NOT READ! WAS AGE ESTIMATED ON PREVIOUS QUESTION?]

Yes	1
No	2
Don't know	777

H05. What is the highest grade or year of school you completed?

Eighth grade or less	1
Some high school (grades 9-11)	2
Grade 12 or GED certificate (high school graduate)	3
Some technical school	4
Technical school graduate	5
Some college	6
College graduate	7
Postgraduate or professional degree	8
Don't know	777
Refused	999

H06. Are you Hispanic or Latino?

Yes	1
No	2
Don't know	777
Refused	999

H07. Which one of the following best describes your race?

White / Caucasian	1
African-American / Black	2
Asian	3
Native Hawaiian / Pacific Islander	4
American Indian or Alaska Native	5
Other	6

H07a. Please specify: _____

Multiple Races	7
Don't know	777
Refused	999

H08. Please stop me when I reach the category that includes your total household income for last year before taxes. This would be the total income for everyone living in your household last year, not just your income.

< \$15,000	1
\$15,000 TO < \$25,000	2
\$25,000 TO < \$35,000	3
\$35,000 TO < \$45,000	4
\$45,000 TO < \$55,000	5
\$55,000 TO < \$65,000	6
\$65,000 TO < \$75,000	7
\$75,000 TO < \$100,000	8
\$100,000 OR MORE	9
Don't know	777
Refused	999

H09. Do you consider yourself to be one or more of the following? Please tell me the letter or letters: [INTERVIEWER: say the letter so that they can respond by letter.]

[IF PAUSE/REFUSAL ALSO SAY:]

["You can name a different category if that fits you better"]

- A. Straight
 - B. Gay or Lesbian
 - C. Bisexual
 - D. Transgender
- Other: _____
- Don't know
- Refused

I. End Individual Questionnaire

That was our final question! Thank you for your time today.

I01. Would you like to be entered into the drawing to win a \$50 Visa gift card?

Yes	1
No	2

I02. If yes, please provide your name and phone number that you would like to be contacted at should you win:

I02a. Name: _____

I02b. Phone: _____

I03. Would you also like us to keep an e-mail address on file should we have difficulty reaching you by phone?

Yes	1 [Enter e-mail: _____]
No	2

Thank you again for your time and participation in this survey. Have a great day!

[INTERVIEWER: ENTER ANY NECESSARY NOTES ABOUT INTERVIEW.]

APPENDIX E: 2016 Adult Tobacco Survey - Spanish

¡Hola! Mi nombre es _____ y estoy llamando de la Universidad de Nevada Las Vegas. Estamos llevando a cabo una encuesta de adultos en Nevada con respecto al uso del tabaco.

[THE HOUSEHOLD SCREENING RESPONDENT SHOULD BE 18 YEARS OF AGE OR OLDER AND YOU MUST BE CONFIDENT THAT THIS PERSON CAN PROVIDE ACCURATE INFORMATION ABOUT ALL MEMBERS OF THE HOUSEHOLD. IF NEEDED, VERIFY THE AGE OF THE HOUSEHOLD SCREENING RESPONDENT TO MAKE SURE HE/SHE IS 18 YEARS OF AGE OR OLDER.]

1. ¿Puedo hablar con un adulto de 18 años de edad o mayor?
- | | |
|--|---------------------------|
| Sí | 1 |
| Ningún adulto de 18+ años en el hogar | 2 (Thank and terminate) |
| Adulto de 18+ años no disponible/No es un buen momento | 7 (Set time to call back) |
| Rechazo | 8 (Thank and terminate) |

¡Excelente! El propósito de esta encuesta es conocer mejor el consumo de tabaco de adultos en Nevada. Por su participación, puede elegir ser inscrito en un sorteo para ganarse una tarjeta de regalo Visa de \$50 después de completar la encuesta! Toda la información recolectada se mantendrá confidencial y en ningún caso su nombre será vinculado. La encuesta debe tomar aproximadamente 15 minutos.

2. ¿Está dispuesto a participar en la encuesta hoy?
- | | |
|----|--|
| Sí | 1 |
| No | 2 (Thank and schedule CB if appropriate) |

3. Puede verificar el condado donde vive?

Clark County NV
Washoe County NV
Carson City County NV
Churchill County NV
Douglas County NV
Elko County NV
Esmeralda County NV
Eureka County NV
Humboldt County NV
Lander County NV
Lincoln County NV
Lyon County NV
Mineral County NV
Nye County NV
Pershing County NV
Storey County NV
White Pine County NV
Don't Know
Refuse

Sección AA . E-cigarrillos

Las primeras preguntas se relacionan con el uso de los cigarrillos electrónicos y productos de vapor.

AA1. ¿Cree usted que los cigarrillos electrónicos o productos vaporizantes electrónicos son más seguros que los cigarrillos regulares ?

Sí	1
No	2
No sé	777
Rechazar	999

AA2. ¿Alguna vez ha utilizado un e -cigarrillo u otro producto vaporizante electrónico, aunque sólo haya sido una vez, en toda su vida?

Sí	1
No	2 [Go to next section]
No sé / No estoy seguro	777 [Go to next section]
Rechazar	999 [Go to next section]

AA3. ¿Actualmente utiliza los cigarrillos electrónicos u otros productos vaporizantes electrónicos todos los días, algunos días, o nunca?

Todos los días	1
Algunos días	2
Nunca	3
No sé / No estoy seguro	777
Rechazar	999

Sección A. Fumar Tabaco

Ahora me gustaría hacerle algunas preguntas acerca de *fumar * tabaco, incluyendo cigarrillos, cigarros, pipas. Por favor, no responda sobre el tabaco sin humo en este momento.

A01. ¿*Actualmente* fuma tabaco a diario, menos de todos los días, o no en lo absoluto?

Diario	1 (skip to A03)
Menos de todos los días	2
No en lo absoluto	3
No sé	777 (skip to next section)
Rechazar	999 (skip to next section)

A02. En el *pasado,*¿ha fumado tabaco a diario, menos de todos los días, o no en lo absoluto?

[IF RESPONDENT HAS DONE BOTH “DAILY” AND “LESS THAN DAILY” IN THE PAST, CHECK “DAILY”]

Diario	1
Menos de todos los días	2 (skip to next section)
No en lo absoluto	3 (skip to next section)
No sé	777 (skip to next section)
Rechazar	999 (skip to next section)

A03. ¿Qué edad tenía cuando empezó a fumar *tabaco* diariamente?

Edad: _____ [IF DON'T KNOW OR REFUSED, ENTER 999]

A04. En promedio, ¿cuántos de los siguientes productos *actualmente* fuma cada día? También, déjeme saber si usted fuma el producto, pero no todos los días.

[IF RESPONDENT REPORTS SMOKING PRODUCT, BUT NOT EVERY DAY, ENTER 888]

[IF RESPONDENT REPORTS IN PACKS OR CARTONS, PROBE TO FIND OUT HOW MANY ARE IN EACH AND CALCULATE TOTAL NUMBER]

<i>En promedio, ¿cuántos de los siguientes actualmente fuma cada día / semana?</i> [If respondent doesn't know, enter 777. If they refused, enter 999.]	POR DÍA [If not daily, enter 888]	POR SEMANA [Only if daily = 888]
Cigarrillos liados (hechos) a mano	A04a.	A04b.
A04c. Mentolados (cigarrillos manufacturados) a. Sí 1 b. No 2 c. No sé 777 d. Rechazar 999		
Cigarrillos Kreteks	A04d.	A04e.
Pipas llenas de tabaco	A04f.	A04g.
Cigarros, puros, y cigarritos	A04h.	A04i.
Pipas de agua/sesiones de hookah	A04j.	A04k.
Cualquier otro: _____	A04l.	A04m.
Cigarrillos Manufacturados	A04n.	A04o.

A05. Durante los últimos 30 días uso pequeños cigarros de sabor por lo menos un día?

- Sí 1
- No 2
- No sé 777
- Rechazar 999

Sección B. Tabaco Sin Humo

Las siguientes preguntas son sobre el uso de tabaco sin humo, como el tabaco nasal (“snuff”), el tabaco de mascar, y el tabaco humedecido. El tabaco sin humo es el tabaco que no se fuma, pero se huele a través de la nariz, que se mantiene en la boca, o se mastica.

B01. ¿*Actualmente* consume tabaco sin humo a diario, menos de todos los días, o nada en lo absoluto?

- Diario 1 (skip to B03)
- Menos de todos los días 2
- No en lo absoluto 3
- No sé 777 (skip to next section)
- Rechazar 999 (skip to next section)

B02. En el *pasado,* ¿ha usado tabaco sin humo a diario, menos de todos los días, o nada en lo absoluto?

[IF RESPONDENT HAS DONE BOTH “DAILY” AND “LESS THAN DAILY” IN THE PAST, CHECK “DAILY”]

- Diario 1
- Menos de todos los días 2 (skip to next section)
- No en lo absoluto 3 (skip to next section)
- No sé 777 (skip to next section)
- Rechazar 999 (skip to next section)

B03. ¿Qué edad tenía cuando empezó a usar tabaco sin humo *diariamente*?

[IF DON’T KNOW OR REFUSED, ENTER 999] __

B04. En promedio, ¿cuántas veces al día *actualmente* utiliza los siguientes productos? También, déjeme saber si usted fuma el producto, pero no todos los días.

[IF RESPONDENT REPORTS USING THE PRODUCT BUT NOT EVERY DAY, ENTER 888]

<i>En promedio, ¿cuántos de los siguientes actualmente fuma cada día / semana?</i> [If respondent doesn’t know, enter 777. If they refused, enter 999.]	POR DÍA [If not daily, enter 888]	POR SEMANA [Only if daily = 888]
Tabaco, vía oral	B04a.	B04b.
Tabaco, por la nariz	B04c.	B04d.
Tabaco, de mascar	B04e.	B04f.
Quid de betel con tabaco	B04g.	B04h.
Cualquier otro: _____	B04i.	B04j.

Sección C. Cesación

IF A01 = 3, 7, OR 9 (RESPONDENT DOES NOT CURRENTLY SMOKE TOBACCO) AND B01 = 3, 7, OR 9 (RESPONDENT DOES NOT CURRENTLY USES SMOKELESS TOBACCO), SKIP TO NEXT SECTION.

C01. Durante su visita a un médico o proveedor de salud en los últimos 12 meses, ¿le aconsejaron dejar de fumar tabaco o usar otros productos de tabaco?

Sí	1
No	2
Rechazar	999

IF A01 = 1 OR 2 (RESPONDENT CURRENTLY SMOKES TOBACCO), CONTINUE WITH THIS SECTION, AND ASK THESE QUESTIONS. IF NOT, SKIP TO NEXT SECTION.

Las siguientes preguntas son acerca de cualquier intento de dejar de consumir tabaco que pudo haber hecho durante los últimos 12 meses.

FUMANDO TABACO

C02. Durante los últimos 12 meses, ¿ha intentado dejar de fumar?

Sí	1
No	2 (SKIP to C04: Smokeless Tobacco)
Rechazar	999

C03. Durante los últimos 12 meses, ¿uso alguna de las siguientes para tratar de dejar de fumar tabaco...

C03a. ¿Utilizó terapia en grupo, incluyendo en una clínica para dejar de fumar?

Sí	1
No	2
Rechazar	999

C03b. ¿Utilizo la terapia de reemplazo de nicotina, como el parche o chicle para tratar de dejar de fumar ?

Sí	1
No	2
Rechazar	999

C03c. ¿Utilizó otros medicamentos recetados, por ejemplo Zyban (Bupropion , Aplenzin , Wellbutrin , Wellbutrin SR , Wellbutrin XL) o Chantix para tratar de dejar de fumar ?

Sí	1
No	2
Rechazar	999

C03d. ¿Ha utilizado hierbas medicinales /medicamentos homeopáticos para tratar de dejar de fumar?

Sí	1
No	2
Rechazar	999

C03e. ¿Estaba consciente de la línea de asistencia telefónica 1-855-DEJELO-YA para tratar de dejar de fumar?

Sí	1
No	2
Rechazar	999

C03f. ¿Utilizó la línea de asistencia telefónica 1-855-DEJELO-YA para tratar de dejar de fumar?

Sí	1
No	2
Rechazar	999

C03g. ¿Utilizó el cambio a tabaco sin humo para tratar de dejar de fumar?

Sí	1
No	2
Rechazar	999

C03h. ¿Ha intentado dejar de fumar por su cuenta o mediante el uso de su fuerza de voluntad?

Sí	1
No	2
Rechazar	999

C03i. ¿Ha utilizado cualquier otra cosa para tratar de dejar de fumar?

Sí	1
C03i1. ¿Qué fue?	_____
No	2
Rechazar	999

IF B01 = 1 OR 2 (RESPONDENT CURRENTLY USES SMOKELESS TOBACCO), CONTINUE WITH THIS SECTION, AND ASK THESE QUESTIONS.

TABACO SIN HUMO

C04. Durante los últimos 12 meses, ¿ha tratado de dejar de usar el tabaco sin humo?

Sí	1
No	2 (SKIP to next section)
Rechazar	999

C05. Durante los últimos 12 meses, ¿utilizó cualquiera de los siguientes para tratar de dejar de usar el tabaco sin humo?

C05a. ¿Utilizó terapia en grupo?

Sí	1
No	2
Rechazar	999

C05b. Para el tabaco sin humo, ¿utilizó la terapia de reemplazo de nicotina, como el parche o el chicle?

Sí	1
No	2
Rechazar	999

C05c. Para el tabaco sin humo, ¿utilizó otros medicamentos recetados, por ejemplo Zyban (Bupropion, Aplenzin , Wellbutrin , Wellbutrin SR , Wellbutrin XL) o Chantix?

Sí	1
No	2
Rechazar	999

C05d. Para el tabaco sin humo ¿utilizó hierbas medicinales/medicamentos homeopáticos?

Sí	1
No	2
Rechazar	999

C03e. ¿Estaba consciente de la línea de asistencia telefónica 1-855-DEJELO-YA para tratar de dejar de fumar?

Sí	1
No	2
Rechazar	999

C05e. Para el tabaco sin humo ¿utilizó la línea de asistencia telefónica 1-855-DEJELO-YA?

Sí	1
No	2
Rechazar	999

C05g. ¿Ha intentado dejar de usar el tabaco sin humo por su cuenta o mediante el uso de su fuerza de voluntad?

Sí	1
No	2
Rechazar	999

C05h. ¿Ha utilizado cualquier otra cosa para tratar de dejar el tabaco sin humo?

Sí	1
C05h1. ¿Qué fue?	_____
No	2
Rechazar	999

C06. ¿Cuál de las siguientes opciones describe mejor su forma de pensar acerca de dejar el tabaco sin humo?

Tengo la intención de dejar de fumar en el próximo mes	1
Estoy pensando en dejar de fumar en los próximos 12 meses	2
Voy a dejarlo algún día pero no en los próximos 12 meses	3
No estoy interesado en dejarlo	4
NO SÉ	777
RECHAZAR	999

Sección D. Humo de Segunda Mano

Ahora me gustaría hacerle algunas preguntas acerca de fumar en varios lugares.

D01. ¿Cuál de las siguientes opciones describe mejor las reglas sobre el fumar adentro de su coche: se permite fumar adentro de su coche, por lo general no se permite fumar adentro de su coche pero hay excepciones, el fumar nunca es permitido adentro de su coche, o no existen reglas sobre el fumar adentro de su coche?

PERMITIDO	1
NO ES PERMITIDO, PERO HAY EXCEPCIONES	2
NUNCA ES PERMITIDO	3
NO HAY REGLAS	4
NO SÉ	777
RECHAZAR	999

D02. ¿Cuál de las siguientes opciones describe mejor las reglas sobre el fumar adentro de su hogar: Se permite fumar adentro de su hogar, por lo general no se permite fumar adentro de su hogar pero hay excepciones, el fumar nunca es permitido adentro de su hogar, o no existen reglas sobre el fumar adentro de su hogar?

PERMITIDO	1
NO ES PERMITIDO, PERO HAY EXCEPCIONES	2
NUNCA ES PERMITIDO	3 (skip to D04)
NO HAY REGLAS	4 (skip to D04)
NO SÉ	777 (skip to D04)
RECHAZAR	999 (skip to D04)

D03. Dentro de su hogar, ¿está permitido fumar en todas las habitaciones?

Sí	1
No	2
No sé	777
Rechazar	999

D04. ¿Con qué frecuencia el humo de segunda mano se infiltra en su hogar/residencia?

DIARIAMENTE	1
SEMANAL	2
MENSUAL	3
MENOS DEL MES	4
NUNCA	5
NO SÉ	777
RECHAZAR	999

D05. ¿Trabaja actualmente fuera de su hogar?

Sí	1
No/No Trabajo	2 (skip to D11)
Rechazar	999 (skip to D12)

D06. ¿Trabaja actualmente adentro de un casino?

Sí	1
No/No Trabajo	2 (skip to D11)
Rechazar	999 (skip to D10)

D07. ¿Normalmente trabajar en áreas interiores o exteriores?

INTERIORES	1 (skip to D09)
EXTERIORES	2
AMBOS	3 (skip to D09)
RECHAZAR	999

D08. ¿Hay áreas interiores en su lugar de trabajo?

Sí	1
No	2 (skip to D10)
No sé	777 (skip to D10)
Rechazar	999 (skip to D10)

D09. ¿Cuál de las siguientes opciones describe mejor la política de fumar en lugares interiores donde trabaja: Fumar está permitido en cualquier lugar, se permite fumar sólo en algunas áreas interiores, no se permite fumar en áreas interiores, o no existe una política?

PERMITIDO EN CUALQUIER LUGAR	1
PERMITIDO SOLO EN ALGUNAS ÁREAS INTERIORES	2
NO SE PERMITE FUMAR EN ÁREAS INTERIORES	3
NO EXISTE UNA POLIZA	4
NO SÉ	777
RECHAZAR	999

D09a. Durante los últimos 30 días, ¿alguien fumó en áreas interiores en su trabajo?

Sí	1
No	2
No sé	777
Rechazar	999

D10. ¿Con qué frecuencia está expuesto al humo de segunda mano en su lugar de trabajo?

DIARIAMENTE

1	
SEMANAL	2
MENSUAL	3
MENOS DEL MES	4
NUNCA	5
NO SÉ	777
RECHAZAR	999

D11. En base a lo que sabe o cree, ¿siente que las personas deben estar protegidas contra el humo de segunda mano?

Sí	1
No	2
No sé	777
Rechazar	999

Sección E. Medios

Las siguientes preguntas son acerca de que tan expuesto ha estado a los medios de comunicación y anuncios publicados en los últimos 30 días.

E01. En los últimos 30 días, ¿ha notado *información* sobre los peligros de fumar cigarrillos o que alienta a dejar el consumo de tabaco en cualquiera de los siguientes lugares?

a. ¿En los periódicos o en las revistas?

Sí	1
No	2
No sé	777
No aplica	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Rechazar	999

b. ¿En televisión?

Sí	1
No	2
No sé	777
No aplica	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Rechazar	999

c. ¿En la radio?

Sí	1
No	2
No sé	777
No aplica	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Rechazar	999

d. ¿En las carteleras?

Sí	1
No	2
No sé	777
No aplica	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Rechazar	999

e. ¿En la parada de autobús en bancas/refugios?

Sí	1
No	2
No sé	777
No aplica	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Rechazar	999

f. ¿En letreros en los centros comerciales?

Sí	1
No	2
No sé	777
No aplica	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Rechazar	999

g. ¿En Internet?

Sí	1
No	2
No sé	777
No aplica	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Rechazar	999

h. ¿En algún otro lugar?

[DO NOT INCLUDE HEALTH WARNINGS ON CIGARETTE PACKAGES]

Sí	1
No	2
No sé	777
No aplica	888 [INTERVIEWER: Use this if R has not been exposed to this/doesn't use it.]
Rechazar	999

h1. Por favor especifique dónde: _____

[DO NOT INCLUDE HEALTH WARNINGS ON CIGARETTE PACKAGES]

E02. [Administer if A01 = 1 or 2.]

En los últimos 30 días, ¿alguna de estas fuentes de información le ha llevado a pensar en dejar de fumar?

Sí	1
No	2
No sé	777
Rechazar	999

E03. [Administer if A01 = 3.]

En los últimos 30 días, ¿alguna de estas fuentes de información le ha llevado a animar a alguien que conoce a pensar en dejar de fumar?

Sí	1
No	2
No sé	777
Rechazar	999

E04. [Administer if E02 or E03 = 1.]

¿Qué fuente de información provocó que lo hiciera? [Only read what was answered "yes" to E01]

a. Periódicos o revistas	1
b. Televisión	2
c. Radio	3
d. Carteleras	4
e. Parada de autobús en bancas/refugios	5
f. Letreros en los centros comerciales	6
g. Internet	7
h. ¿En algún otro lugar?	8

[DO NOT INCLUDE HEALTH WARNINGS ON CIGARETTE PACKAGES]

E04h1. Por favor especifique dónde: _____

Sección F. Conocimientos, Actitudes y Percepciones

La siguiente pregunta es sobre el *fumar* tabaco.

F01. En base a lo que sabe o cree, el fumar tabaco causa lo siguiente ...

a. ¿Derrame cerebral (coágulos de sangre en el cerebro que pueden causar parálisis)?

Sí	1
No	2
No sé	777
Rechazar	999

b. ¿Ataque al corazón?

Sí	1
No	2
No sé	777
Rechazar	999

c. ¿Cáncer de pulmón?

Sí	1
No	2
No sé	777
Rechazar	999

d. ¿Cáncer de vejiga?

Sí	1
No	2
No sé	777
Rechazar	999

e. ¿Cáncer pancreático?

Sí	1
No	2
No sé	777
Rechazar	999

f. ¿Añade una carga económica para el sistema de salud?

Sí	1
No	2
No sé	777
Rechazar	999

F02. En base a lo que sabe o cree, ¿el usar tabaco sin *humo* causa enfermedades graves?

Sí	1
No	2
No sé	777
Rechazar	999

F03. ASK ONLY IF A01 = 1 OR 2 (CURRENT TOBACCO SMOKERS) Basado en su experiencia de fumar, ¿cree que su marca actual podría ser un poco menos dañina, no es diferente, o podría ser un poco más dañina, en comparación con otros cigarrillos?

Poco menos dañina	1
No es diferente	2
Poco más dañina	3
No sé	777
Rechazar	999

F04. ¿Cree usted que algunos tipos de cigarrillos *podrían* ser menos dañinos que otros tipos, o todos los cigarrillos son igualmente dañinos?

Podría ser menos dañino	1
Todos son igualmente dañinos	2
No sé	777
Rechazar	999

Para las siguientes preguntas, por favor dígame si usted está a favor o en contra de lo siguiente:

F05	¿Estaría a favor o en contra de aumentar los impuestos sobre los productos de tabaco?	A favor	1
		En contra	2
		No sé	777
		Rechazar	999
F06	[¿Estaría a favor o en contra de] una ley que prohíbe todos los anuncios sobre los productos de tabaco?	A favor	1
		En contra	2
		No sé	777
		Rechazar	999
F07	[¿Estaría a favor o en contra de] una ley que prohíbe fumar en cualquier lugar dentro de los campos universitarios?	A favor	1
		En contra	2
		No sé	777
		Rechazar	999
F08	[¿Estaría a favor o en contra de] una ley que prohíbe fumar en el interior y en las áreas comunes al exterior de complejos de viviendas de múltiples unidades?	A favor	1
		En contra	2
		No sé	777
		Rechazar	999
F09	[¿Estaría a favor o en contra de] una ley que prohíbe fumar cerca de las entradas de empresas y edificios públicos, dentro de los treinta pies?	A favor	1
		En contra	2
		No sé	777
		Rechazar	999
F10	[¿Estaría a favor o en contra de] una ley que prohíbe fumar en lugares públicos al exterior, tales como los parques, zoológicos, y zonas de juegos (es decir, lugares donde los niños puedan estar presentes)?	A favor	1
		En contra	2
		No sé	777
		Rechazar	999
F11	[¿Estaría a favor o en contra de] una ley que prohíbe fumar en otros lugares al exterior, tales como rodeos y pistas de carrera (es decir, lugares donde es probable que esté presente una gran cantidad de personas) ?	A favor	1
		En contra	2
		No sé	777
		Rechazar	999
F12	[¿Estaría a favor o en contra de] una ley que prohíbe fumar en las zonas de juegos de casino?	A favor	1
		En contra	2
		No sé	777
		Rechazar	999
F13	[¿Estaría a favor o en contra de] una ley que prohíbe fumar en todos los bares?	A favor	1
		En contra	2
		No sé	777
		Rechazar	999
F14	¿Estaría a favor de una ley que eleva la edad mínima para comprar productos de tabaco a los 21 años?	A favor	1
		En contra	2
		No sé	777
		Rechazar	999
F15	¿Estaría a favor de una ley que haría ilegal la compra de cigarrillos electrónicos o productos de vapor para cualquier persona menor de los 21 años?	A favor	1
		En contra	2
		No sé	777
		Rechazar	999
F16	¿Estaría a favor de una ley que restringe la venta de productos de tabaco con sabores? (ej. Sabor a chicle, root beer, cereza)	A favor	1
		En contra	2

No sé	777
Rechazar	999

G. Pipa de Agua (Hookah/Shisha/Nargile)

G01. Ahora me gustaría hacerle algunas preguntas acerca de fumar una pipa de agua.

En el *pasado,* ¿ha fumado una pipa de agua a diario, menos de todos los días, o nada en lo absoluto?

[IF RESPONDENT HAS DONE BOTH "DAILY" AND "LESS THAN DAILY" IN THE PAST, CHECK "DAILY"]

Diariamente	1
Menos de todos los días	2
No en lo absoluto	3 (skip to next section)
Rechazar	999 (skip to next section)

G02. ¿Qué edad tenía cuando empezó a fumar una pipa de agua?

[IF DON'T KNOW ENTER 777 OR REFUSED, ENTER 999] ____

ROUTING: — CURRENT WATER PIPE SMOKERS: IF (A04i > 0 OR A04j > 0) GO TO G03 — ELSE, GO TO NEXT SECTION

G03. La última vez que fumó una pipa de agua, ¿cuánto tiempo participó en la sesión de fumar la pipa de agua?

Horas	1
Minutos	2
No sé	777
Rechazar	999

G03a. [FOR HOURS/MINUTES, ENTER THE NUMBER. ASK IF NEEDED.] ____

G04. La última vez que fumó una pipa de agua, ¿con cuántas otras personas compartió la misma pipa durante la sesión ?

[IF DON'T KNOW OR REFUSED, ENTER 999] ____

G05. La última vez que fumó una pipa de agua, ¿cuántas rocas se fumó mientras participo en la sesión?

Menos de 1	0
1	1
2	2
3	3
4	4
5 o más	5
No sé	777
Rechazar	999

G06. La última vez que fumó una pipa de agua, ¿dónde la fumó?

Casa	1
Cafetería	2
El bar/El club	3
Restaurante	4
Otros	5

8a. Especifique otro lugar: _____

No sé	777
Rechazar	999

G07. La última vez que fumó una pipa de agua, ¿fumó tabaco con sabor, tabaco sin sabor, o ambos?

Sabor a	1
Sin sabor	2
Ambos	3
No sé	777
Rechazar	999

H. Características de su Historial

Ahora voy hacerle algunas preguntas sobre su historial.

[INTERVIEWER: READ IF NECESSARY: This information is used for statistical purposes only and will remain confidential.]

H01. ¿Cuál es su género?

Hombre	1
Mujer	2
Otro (Transgénero, intersexual)	3
No sé	777
Rechazar	999

H02. ¿Cuál es el mes de su fecha de nacimiento?

Enero	1
Febrero	2
Marzo	3
Abril	4
Mayo	5
Junio	6
Julio	7
Agosto	8
Septiembre	9
Octubre	10
Noviembre	11
Diciembre	12
No sé	777
Rechazar	999

H03. ¿Cuál es el año de su fecha de nacimiento?

[IF DON'T KNOW, ENTER 777; IF REFUSED, ENTER 999] ____

H04. ¿Cuántos años tiene?

[IF RESPONDENT IS UNSURE, PROBE FOR AN ESTIMATE] ____

H05. [INTERVIEWER!: DO NOT READ! WAS AGE ESTIMATED ON PREVIOUS QUESTION?]

Sí	1
No	2
No sé	777

H06. ¿Cuál es el grado más alto o el año de escuela que completó?

Octavo grado o menos	1
Algo de secundaria (grados 9-11)	2
Grado 12 o certificado de GED (graduado de la escuela secundaria)	3
Algo de escuela técnica	4
Graduado de la escuela técnica	5
Algo de universidad	6
Graduado de la universidad	7
Postgrado o título profesional	8
No sé	777
Rechazar	999

H07. ¿Es Hispano o Latino?

Sí	1
No	2

No sé	777
Rechazar	999

H08. ¿Cuál de las siguientes opciones describe mejor su raza?

Blanca / Caucásica	1
Afroamericano / Negro	2
Asiático	3
Nativo de Hawái / de las Islas del Pacífico	4
Indio Americano o Nativo de Alaska	5
Otro	6

H07a. Especificar: _____

Múltiples razas	7
No sé	777
Rechazar	999

H09. Por favor dígame cuando llegue a la categoría que incluye el total de su ingreso familiar del año pasado antes de impuestos. Esto sería el ingreso total de todos los que vivieron en su hogar el año pasado, no sólo su ingreso.

< \$15,000	1
\$15,000 A < \$25,000	2
\$25,000 A < \$35,000	3
\$35,000 A < \$45,000	4
\$45,000 A < \$55,000	5
\$55,000 A < \$65,000	6
\$65,000 A < \$75,000	7
\$75,000 A < \$100,000	8
\$100,000 O MÁS	9
No sé	777
Rechazar	999

H10. ¿Se considera usted ser uno o más de los siguientes? Por favor, dígame la letra o letras:

[INTERVIEWER: say the letter so that they can respond by letter.]

[IF PAUSE/REFUSAL ALSO SAY:]

["You can name a different category if that fits you better"]

- A. Heterosexual
- B. Gay o Lesbiana
- C. Bisexual
- D. Transgénero
- Otra: _____
- Don't know
- Refused

I. Fin del Cuestionario Individual

¡Esa fue nuestra última pregunta! Gracias por su tiempo el día de hoy.

I01. ¿Le gustaría entrar en el sorteo para poder ganar una tarjeta Visa de regalo de \$50?

Sí	1
No	2

I02. En dado caso que si, por favor proporcione su nombre y número de teléfono donde desea ser contactado en caso de ganar:

I02a. Nombre: _____

I02b. Teléfono: _____

I03. ¿Desearía también que mantuviéramos su correo electrónico en nuestro archivo por si se nos dificulta contactarle por teléfono?

Sí	1 [Enter e-mail: _____]
No	2

Gracias de nuevo por su tiempo y participación en esta encuesta. ¡Que tenga un buen día!

[INTERVIEWER: ENTER ANY NECESSARY NOTES ABOUT INTERVIEW.]