1989

1989 TAPS I

Telephone (CATI) Questionnaire

TEENAGE ATTITUDES AND PRACTICES SURVEY

For these first questions, I'll be asking for YOUR opinion, not what others may say or believe.

A1.	Do you think kids your age care about wearing seat belts?	<1> Yes (A2) <2> No (B1)	
A2.	Would you say they care a lot, somewhat, or just a little?	<1> A lot <2> Somewhat <3> Just a little	(B1)
B1.	Do you think kids your age care about keeping their weight down?	<1> Yes (B2) <2> No (C1)	
B2.	Would you say they care a lot, somewhat, or just a little?	<1> A lot <2> Somewhat <3> Just a little	(C1)
C1.	Do you think kids your age care about staying away from drugs?	<1> Yes (C2) <2> No (D1)	
C2.	Would you say they care a lot, somewhat, or just a little?	<1> A lot <2> Somewhat <3> Just a little	(D1)
D1.	Do you think kids your age care about NOT getting high on alcohol when they drink?	<1> Yes (D2) <2> No (E1)	
D2.	Would you say they care a lot, somewhat, or just a little?	<1> A lot <2> Somewhat <3> Just a little	(E1)
E1.	Do you think kids your age care about NOT getting drunk when they drink?	<1> Yes (E2) <2> No (F1)	
E2.	Would you say they care a lot, somewhat, or just a little?	<1> A lot <2> Somewhat <3> Just a little	(F1)
F1.	Do you think kids your age care about staying off cigarettes?	<1> Yes (F2) <2> No (G1)	
F2.	Would you say they care a lot, somewhat, or just a little?	<1> A lot <2> Somewhat <3> Just a little	(G1)

G1.	Do you think kids your age care about eating healthy foods?	<1> Yes (G2) <2> No (H1)
G2.	Would you say they care a lot, somewhat, or just a little?	<1> A lot <2> Somewhat <3> Just a little } (H1)
H1.	Do you think kids your age care about staying away from marijuana?	<1> Yes (H2) <2> No (I1)
H2.	Would you say they care a lot, somewhat, or just a little?	<1> A lot <2> Somewhat <3> Just a little } (I1)
I1.	Do you think kids your age care about the dangers of driving if they've been drinking?	<1> Yes (I2) <2> No (J1)
I2.	Would you say they care a lot, somewhat, or just a little?	<1> A lot <2> Somewhat <3> Just a little } (J1)
J1.	Do you think kids your age care about being fit and exercising?	<1> Yes (J2) <2> No (1)
J2.	Would you say they care a lot, somewhat, or just a little?	<1> A lot <2> Somewhat <3> Just a little } (1)
	The next questions I will be asking you are about cigarette smoking.	
1.	Have you ever smoked a cigarette?	<1> Yes (2) <2> No (16) <D> DK (16)
2.	How old were you when you smoked your first whole cigarette?	_____ Age
3.	Have you smoked at least 100 cigarettes in your life?	<1> Yes <2> No <D> DK
4.	Have you ever smoked a cigarette every day for at least a month?	<1> Yes <2> No <D> DK

5a.	Think about the last 30 days. On how many of these days did you smoke?	<0> None (21) <A> All of them (6b) <1-30>_____ Number of Days (CHECK 1) <D> DK (5b)
5b.	Was it more or less than 15 days?	<0> Exactly 15 days (6a) <1> Less than 15 days (5c) <2> More than 15 days (5e) <D> DK (6a)
5c.	Was it more or less than 10 days?	<0> Exactly 10 days (6a) <1> Less than 10 days (5d) <2> More than 10 days (6a) <D> DK (6a)
5d.	Was it more or less than 5 days?	<0> Exactly 5 days <1> Less than 5 days (6a) <2> More than 5 days <D> DK
5e.	Was it more or less than 20 days?	<0> Exactly 20 days (6a) <1> Less than 20 days (6a) <2> More than 20 days (5f) <D> DK (6a)
5f.	Was it more or less than 25 days?	<0> Exactly 25 days (6b) <1> Less than 25 days (6a) <2> More than 25 days (6b) <D> DK (6a)
CHECK 1	Refer to q.5a.	< > Less than 25 days (6a) < > 25 or more days (6b)
6a.	Now, think carefully about the last SEVEN days. Did you smoke cigarettes on any of THOSE days?	<1> Yes <2> No (7) <D> DK (6b)
6b.	I'm going to ask you to think back about your cigarette smoking on each of the last seven days. Let's start with yesterday...which was (DAY). Please think back carefully and tell me how may cigarettes you smoked (DAY)?	Number cigarettes smoked (DAY) _____
6c.	Now, how many cigarettes did you smoke the day before that which was (DAY)?	Number cigarettes smoked (DAY) _____ (DAY) _____ (DAY) _____ (DAY) _____ (DAY) _____ (DAY) _____

The following probe questions will appear if the respondent answers with a Don't Know or Refused in questions 6b and 6c.

6b1. or 6c1. Was it more or less than 20 cigarettes?

<M> More (store 20 in 6b or 6c)
<L> Less (6b2 or 6c2)
<0-999> Exact Number
<D> DK (6b2 or 6c2)
<R> Refused (6b2 or 6c2)

6b2. or 6c2. Was it more or less than 10 cigarettes?

<M> More (store 15 in 6b or 6c)
<L> Less (6b3 or 6c3)
<0-999> Exact Number
<D> DK (6b3 or 6c3)
<R> Refused (6b3 or 6c3)

6b3. or 6c3. Was it more or less than 5 cigarettes?

<M> More (store 7 in 6b or 6c)
<L> Less (store 3 in 6b or 6c)
<0-999> Exact Number
<D> DK
<R> Refused

7.	Do you usually buy your own cigarettes?	<1> Yes <2> No (12)
8.	What brand do you usually buy?	<1> Marlboro <2> Salem <3> Merit <4> Winston <5> Benson & Hedges <6> Kool <7> Camel <8> Vantage <9> Newport <10> Pall Mall <11> Other
9.	How often do you buy your cigarettes from a vending machine...would you say often, sometimes, rarely, or never?	<1> Often <2> Sometimes <3> Rarely <4> Never
10.	How often do you buy your cigarettes from a large store, such as a supermarket ...would you say often, sometimes, rarely, or never?	<1> Often <2> Sometimes <3> Rarely <4> Never
11.	How often do you buy your cigarettes from a small store, such as a Seven-Eleven or a gas station...would you say often, sometimes, rarely, or never?	<1> Often <2> Sometimes <3> Rarely <4> Never
12.	Have you ever seriously thought about quitting smoking?	<1> Yes <2> No (21) <3> Never smoked regularly (21) <D> DK (21)
13.	How many times have you tried to quit smoking?	<0> Never (21) <1> Once <2> 2-3 times <3> 4 or more times <D> DK
14.	Have you tried to quit smoking in the last six months?	<1> Yes <2> No

15.	What is the longest time you have stayed off cigarettes since you started smoking regularly?	(ENTER NUMBER OF DAYS, WEEKS, MONTHS, YEARS AS APPROPRIATE) <N> Never smoked regularly <0> Less than a day <D> DK _____ <1-999> Num. of days, weeks, months, years (ENTER THE APPROPRIATE TIME FRAME) <1> Days <2> Weeks <3> Months <4> Years } (21)
16.	Have you ever tried or experimented with cigarette smoking, even a few puffs?	<1> Yes (18) <2> No (17) <D> DK (17)
17.	Do you think that you will try a cigarette soon?	<1> Yes <2> No <D> DK
18.	Have you ever been offered a cigarette?	<1> Yes <2> No
19.	If one of your best friends were to offer you a cigarette, would you smoke it? Would you say definitely yes, probably yes, probably not, or definitely not?	<1> Definitely yes <2> Probably yes <3> Probably not <4> Definitely not <D> DK
20.	Do you think it would be easy or hard for you to get cigarettes if you wanted some?	<1> Easy <2> Hard <D> DK
21.	Do you think you will be smoking cigarettes one year from now? Would you say definitely yes, probably yes, probably not, or definitely not?	<1> Definately yes <2> Probably yes <3> Probably not <4> Definitely not <D> DK
	These next questions are about chewing tobacco and snuff.	
22a.	Have you ever tried using chewing tobacco or snuff?	<1> Yes (23a) <2> No (22b) <3> DK what chewing tobacco or snuff is (27a) <D> DK (27a)

22b.	Do you think you will ever use chewing tobacco or snuff? Would you say definitely yes, probably yes, probably not, or definitely not?	<1> Definitely yes <2> Probably yes <3> Probably not <4> Definitely not <D> DK	(27a)
23a.	Was there ever a time when you considered yourself to be a regular user of chewing tobacco or snuff?	<1> Yes (23b) <2> No (27a)	
23b	Are you now a regular user of chewing tobacco or snuff?	<1> Yes <2> No	
23c	What brand (did/do) you usually buy?	<1> Redman <2> Levi Garrett <3> Beechnut <4> Skoal <5> Skoal Bandits <6> Copenhagen <7> Other	
24.	How old were you when you first started using chewing tobacco or snuff?	<00-19> Enter Age _____	
CHECK 2	Refer to q.23b	< > Yes in q.23b (25a) < > No in q.23b (26)	
25a.	On how many of the last 30 days did you use chewing tobacco or snuff?	<0> None (26) <A> All of them <1-30> Days _____ <D> DK	
25b.	On the (number in 25a) days you used chewing tobacco or snuff, how many times each day did you use it?	<00-99> Times per day _____ <D> DK	
26.	(Including the last time) how many times have you tried to quit using chewing tobacco or snuff?	<0> Never <1> Once <2> 2-3 times <3> 4 or more times <D> DK	
27a.	(Besides yourself) Does anyone who lives in your household--now smoke cigarettes?	<1> Yes (27b) <2> No (27c) <D> DK (27c)	

27b.	Who is this? PROBE: Anyone else? If "brother(s)/sister(s), PROBE: "(Are/Is your brother(s)/sister(s) who smoke younger or older than you? (ENTER ALL THAT APPLY) ENTER N IF NO MORE APPLY	<1> Mother <2> Father <3> Adoptive/foster mother <4> Adoptive/foster father <5> Stepmother <6> Stepfather <7> Older brother(s) <8> Older sister(s) <9> Younger brother(s) <10> Younger sister(s) <11> Other relative(s) <12> Unrelated person(s)
27c.	Do any close relatives NOT living in your household--now smoke cigarettes?	<1> Yes <2> No (28a) <D> DK (28a)
27d.	Who is this? PROBE: Anyone else? If "brother(s)/sister(s)", PROBE: "(Are/Is) your brother(s)/sister(s) who smoke younger or older than you? (ENTER ALL THAT APPLY) ENTER N IF NO MORE APPLY	<1> Mother <2> Father <3> Adoptive/foster mother <4> Adoptive/foster father <5> Stepmother <6> Stepfather <7> Older brother(s) <8> Older sister(s) <9> Younger brother(s) <10> Younger sister(s) <11> Other relative(s)
28a.	(Besides yourself) Does anyone who lives in your household--now use chewing tobacco or snuff?	<1> Yes (28b) <2> No (28c) <D> DK (28c)
28b.	Who is this? PROBE: Anyone else? If "brother(s)/sister(s)", PROBE: "(Are/Is) your brother(s)/sister(s) who use chewing tobacco or snuff younger or older than you? (ENTER ALL THAT APPLY) ENTER N IF NO MORE APPLY	<1> Mother <2> Father <3> Adoptive/foster mother <4> Adoptive/foster father <5> Stepmother <6> Stepfather <7> Older brother(s) <8> Older sister(s) <9> Younger brother(s) <10> Younger sister(s) <11> Other relative(s) <12> Unrelated person(s)
28c.	Do any close relatives NOT living in your household--now use chewing tobacco or snuff?	<1> Yes (28d) <2> No (29) <D> DK (29)

28d.	Who is this? PROBE: Anyone else? If "brother(s)/sister(s)", PROBE: "(Are/Is) your brother(s)/sister(s) who use chewing tobacco or snuff younger or older than you? (ENTER ALL THAT APPLY) ENTER N IF NO MORE APPLY	<1> Mother <2> Father <3> Adoptive/foster mother <4> Adoptive/foster father <5> Stepmother <6> Stepfather <7> Older brother(s) <8> Older sister(s) <9> Younger brother(s) <10> Younger sister(s) <11> Other relative(s)
29.	Of your four best male friends, how many of them smoke?	<0> None. If don't have four best male friends, enter precode 5 <1> One <2> Two <3> Three <4> Four <5> Don't have four best male friends <D> DK
30.	Of your four best female friends, how many of them smoke?	<0> None. If don't have four best female friends, enter precode 5 <1> One <2> Two <3> Three <4> Four <5> Don't have four best female friends <D> DK
31.	How do your think your BEST friends would feel about you smoking one or more packs of cigarettes a day? Would they approve, disapprove, or would they not care?	<1> Approve <2> Disapprove <3> Not care
32.	How do you think your BEST friends would feel about you using chewing tobacco or snuff regularly? Would they approve, disapprove, or would they not care?	<1> Approve <2> Disapprove <3> Not care
33.	Do any of your friends who smoke ever say that THEY should quit smoking?	<1> Yes <2> No <3> No friends who smoke <D> DK
34.	Have you seen anything on television recently about the health risks of smoking?	<1> Yes <2> No <3> Don't watch TV
35.	(Have you) heard anything on the radio recently (about the health risks of smoking)?	<1> Yes <2> No <3> Don't listen to radio

36.	(Have you) read anything in the newspaper or magazines recently (about the health risks of smoking)?	<1> Yes <2> No <3> Don't read newspapers or magazines
	How many of people you know, who are about your age, smoke cigarettes? Would you say none, a few, some, or most of them?	
37a.	smoke cigarettes?	<0> None <1> A few <2> Some <3> Most/All
37b.	use chewing tobacco or snuff?	<0> None <1> A few <2> Some <3> Most/All
37c.	smoke marijuana?	<0> None <1> A few <2> Some <3> Most/All
37d.	use cocaine or crack?	<0> None <1> A few <2> Some <3> Most/All
37e.	drink alcohol, such as beer, wine, or liquor at least ONCE A WEEK?	<0> None <1> A few <2> Some <3> Most/All
37f.	get drunk at least ONCE A MONTH?	<0> None <1> A few <2> Some <3> Most/All
37g.	have ever had sex?	<0> None <1> A few <2> Some <3> Most/All

For these next questions, once again, I'd like you to give me YOUR opinion, not what others may say or believe.

Do YOU believe.....

38a.	it's safe to smoke for only a year or two?	<1> Yes <2> No <D> DK
38b.	there is any harm in having an occasional cigarette?	<1> Yes <2> No <D> DK
38c.	smoking can help people when they are bored?	<1> Yes <2> No <D> DK
38d.	cigarette smoking helps people relax?	<1> Yes <2> No <D> DK
38e.	cigarette smoking helps reduce stress?	<1> Yes <2> No <D> DK

Do YOU believe.....

38f.	smoking helps people feel more comfortable at parties and in other social situations?	<1> Yes <2> No <3> DK
38g.	smoking helps people keep their weight down?	<1> Yes <2> No <D> DK
38h.	almost all doctors are strongly against smoking?	<1> Yes <2> No <D> DK
38i.	using chewing tobacco and snuff can cause cancer?	<1> Yes <2> No <D> DK

Now I'm going to read a list of statements about smoking. After I read each one, please tell me whether you agree, disagree, or if you have no opinion.

39a.	I strongly dislike being around people who are smoking.	<1> Agree <2> Disagree <3> No opinion

39b.	When I'm older my parents won't mind if I smoke.	<1> Agree <2> Disagree <3> No opinion
39c.	Seeing someone smoking turns me off.	<1> Agree <2> Disagree <3> No opinion
39d.	I'd rather date people who don't smoke.	<1> Agree <2> Disagree <3> No opinion
39e.	(If I started to smoke regularly), I could stop smoking anytime I wanted.	<1> Agree <2> Disagree <3> No opinion
39f.	I personally don't mind being around people who are smoking.	<1> Agree <2> Disagree <3> No opinion
39g.	I get a kick out of doing things every now and then that are a little risky or dangerous.	<1> Agree <2> Disagree <3> No opinion
	Up until now, the questions I have asked have been mostly about smoking and the use of tobacco products. Now, I'm going to ask you some questions about school.	
40.	Do you go to school?	<1> Yes <2> No
41.	How much (do/did) you like school? Would you say a lot, some, very little, or not at all?	<1> A lot <2> Some <3> Very little <4> Not at all <D> DK
42.	How (do/did) you do in school? Would you say much better than average, better than average, average, or below average?	<1> Much better than average <2> Better than average <3> Average <4> Below average <5> DK
43.	How useful do you think the things you you (are learning/learned) in school will be to you later in life? Would you say very useful, somewhat useful, or not at all useful?	<1> Very useful <2> Somewhat useful <3> Not at all useful

44a.	(Is/Was) there a rule at your school that students (are/were) not allowed to smoke on school property?	<1> Yes <2> No (45) <D> DK (45)
44b.	How many students who smoke obey that rule...would you say none, a few, some, most, or all of them?	<0> None <1> A few <2> Some <3> Most <4> All of them
45.	How many of the teachers in your school (smoke/smoked) cigarettes? Would you say none, a few, some, or most of them?	<0> None <1> A few <2> Some <3> Most/All
46.	Have you ever taken a class or course at school in which the health risks of smoking were discussed?	<1> Yes <2> No <D> DK

DO NOT ASK UNTIL THIRD WEEK OF SEPTEMBER

Ask if "yes" in q.40, otherwise skip to q.48a:

47a.	During the last TWO WEEKS, have you missed any FULL days from school?	<1> Yes <2> No (48a)
47b.	How many days in the last TWO WEEKS did you miss because you were sick or injured?	<0-14> Number of days _____
47c.	How many days in the last TWO WEEKS did you miss because you just felt like skipping or cutting school?	<0-14> Number of days _____
47d.	How many days in the last TWO WEEKS did you miss for other reasons?	<0-14> Number of days _____

These last questions are about social activities, your family, your health, and things that may affect your health.

During the past year, how often have you felt too tired to do things..... would you say often, sometimes, rarely or never?

48a. felt too tired to do things?
<1> Often
<2> Sometimes
<3> Rarely
<4> Never

How often have you--

48b. had trouble going to sleep or staying asleep?
<1> Often
<2> Sometimes
<3> Rarely
<4> Never

48c. felt unhappy, sad, or depressed?
<1> Often
<2> Sometimes
<3> Rarely
<4> Never

48d. felt hopeless about the future?
<1> Often
<2> Sometimes
<3> Rarely
<4> Never

48e. felt nervous or tense?
<1> Often
<2> Sometimes
<3> Rarely
<4> Never

48f. worried too much about things?
<1> Often
<2> Sometimes
<3> Rarely
<4> Never

49. During the PAST YEAR, have you had an accident, injury, or poisoning that required medical attention by a doctor, nurse, or medical assistant?
<1> Yes
<2> No

50a.	During the PAST YEAR have you been in a physical fight that involved hitting pushing, shoving or any other kind of physical contact? Do not include family fights, such as fights with brothers and sisters.	<1> Yes (50b) <2> No (51a)
50b.	How many times in the PAST YEAR have you been in physical fights?	<1> Once <2> Twice <3> 3 - 5 times <4> 6 - 9 times <5> 10 or more times <D> DK
51a.	In the PAST YEAR have you ridden on a motorcycle or minibike, either by yourself or with someone else driving?	<1> Yes <2> No (52)
51b.	How often in the PAST YEAR have you done this? Would you say often, sometimes, or rarely?	<1> Often <2> Sometimes <3> Rarely
52.	How often do you wear a seat belt when you drive or ride in a car...would you say always, most of the time, sometimes, rarely, or never.	<1> Always <2> Most of the time <3> Sometimes <4> Rarely <5> Never
53.	During the LAST FOUR WEEKS, have you ridden in a vehicle driven by someone who had been drinking or using drugs?	<1> Yes <2> No
54.	Including Saturdays and Sundays, how many nights a week do you usually go out for fun or recreation?	<0> None <1-7> Number of nights out _____
55a.	Have you ever had a steady (boyfriend/ girlfriend)?	<1> Yes (55b) <2> No (56)
55b.	Did (he/she) smoke cigarettes?	<1> Yes <2> No <D> DK if smoked
	Ask Q56b only if the answer in Q56a is over $50.00.	
56a.	About how much money do you have each each week to spend on yourself any way you want to?	<0> None <1-999> Dollars $____.00 <D> DK
56b.	Is this money that you can spend on yourself any way you want to?	<1> Yes (57) <2> No (56a)
57.	In the past year have you participated in any kind of competitive and organized physical activity, such as team sports?	<1> Yes <2> No

58a.	If you had a serious problem, is there someone you could talk to or go to for help?	<1> Yes <2> No (59a)
58b.	Who is that? Anyone else? (ENTER ALL THAT APPLY) ENTER N IF NO MORE APPLY	<1> Mother <2> Father <3> Brother(s) <4> Sister(s) <5> Other relative <6> Priest/Minister <7> Teacher <8> School counselor <9> Other adult <10> Friend
	Ask only for children 12-16 who attend school	
59a.	About how many days a week are you at home before or after school without a parent or adult around?	<0> Never (60) <1-7> Days a week _____ <8> Not on a regular basis (60) <9> Everyday
59b.	On those days, about how many hours are you at home without a parent or adult?	(ENTER WHOLE NUMBERS ONLY) <0> Less than one hour <1-24> Hours a day _____.00
60.	How often do you attend religious services...would you say often, sometimes, rarely, or never?	<1> Often <2> Sometimes <3> Rarely <4> Never
61a.	A law was passed recently requiring warning labels on beer, wine and liquor containers. Have you heard about this law?	<1> Yes <2> No
61b.	Have you ever seen one of these warning labels on any bottles or cans containing an alcoholic beverage?	<1> Yes <2> No (62a)
61c.	Have you read the warning label?	<1> Yes <2> No (62a)
61d.	What WERE the warnings on the label? (ENTER ALL THAT APPLY) ENTER N IF NO MORE APPLY	<1> Driving risk <2> Pregnancy risk <3> Health risk <D> DK

62a. ***REVIEW THE ADDRESS BELOW***

ENTER CODE 2 WITHOUT ASKING IF
ANY PART APPEARS TO BE INVALID

I have your address as:

ADDRESS: _____

CITY: _____

STATE: _____

ZIP CODE: _____

Is that correct?

<1> Yes (END)
<2> No (62b)

62b. ***ENTER CHANGES OR S FOR SAME***

PROBE, AS NECESSARY, TO
OBTAIN A COMPLETE ADDRESS

NUMBER AND STREET: _____

CITY: _____

STATE: _____

ZIP CODE: _____

LISTENING IN QUESTIONS

>suspect< Do you suspect that someone may have been listening in at the respondent's household during the interview?

<1> Yes
<2> No (end)

>howsure< How sure are you that someone may have been listening in?

<1> Absolutely sure
<2> Quite sure
<3> Somewhat sure
<4> Not real sure

>bias< Do you think the respondent's answers were biased because someone was listening in?

<1> Yes
<2> No
<D> DK