

2020

Delaware School Health Survey

Youth Tobacco Component

Student Questionnaire

DELAWARE YOUTH TOBACCO SURVEY STUDENT ASSENT AND INSTRUCTIONS

We at the University of Delaware are conducting a study for the Delaware Division of Public Health and the federal Centers for Disease Control and Prevention. We want to find out what students think about, know about, and do about cigarettes and other tobacco products. To learn these things, we are asking 6th to 12th graders in all Delaware public schools these questions. We are doing this to find out what kinds of information and programs students need most and what kinds they don't need. THIS IS NOT A TEST. This is research, so there are no right or wrong answers. It is very important that you answer each question truthfully. The best answer you can give us is the one that is true for you.

DO NOT PUT YOUR NAME ON THIS BOOKLET. We want to be sure that everyone's answers are private and anonymous. When you are done, turn your booklet over and raise your hand; I will come around with an envelope for you to put your survey in. Then you can work quietly at your desk on something else until everyone has finished. Your teacher and your classmates will not know your answers. The answers will be important when we combine them with all the other students' answers so we will know what all students in Delaware are thinking and doing about topics we ask about in the questions. We keep your responses private and anonymous because if the study is to be helpful, it is important that you answer each question truthfully.

You don't have to answer any questions you don't want to. Anything you don't want to answer, just leave blank. There is no penalty if you choose not to fill out the survey or any part of it.

Unless the question says otherwise, mark only one answer for each question.

REMEMBER, this isn't a test, so there are no right or wrong answers. We need TRUE ANSWERS. Work quickly so you can finish. If you don't find an answer that fits exactly, choose the one that comes closest. If it's something you just don't understand, raise your hand for help. If it's something you don't know, leave it blank and go on to the next question.

Thank you very much for your help and for being an important part of this study.



SERIAL

3/8" SPINE PERF

The first questions ask for some background information about you.

1. How old are you?

- 9 years old
- 10 years old
- 11 years old
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old
- 18 years old
- 19 years old or older

2. What is your sex?

- Female
- Male

3. What grade are you in?

- 6th
- 7th
- 8th
- 9th
- 10th
- 11th
- 12th
- Ungraded or other grade

4. Are you Hispanic or Latino?

- No
- Yes, I am Mexican, Mexican American, or Chicano
- Yes, I am Puerto Rican
- Yes, I am Cuban or Cuban American
- Yes, I am some other Hispanic or Latino not listed here

5. What race or races do you consider yourself to be? (You can **CHOOSE ONE ANSWER** or **MORE THAN ONE ANSWER**)

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

6. Do you use or rely upon any of the following: (You can **CHOOSE ONE ANSWER** or **MORE THAN ONE ANSWER**)

- A magnifier, large print, text to voice reader or Braille to help you read
- A hearing device, sign language interpreter, or teacher of the deaf
- Wheelchair or other mobility aid
- Classroom Aide or Paraprofessional
- Life Skills Coach
- Mental health counseling or therapy
- Medicine prescribed for you by a doctor
- No - I do not use any of the above

7. The Individualized Education Program (or IEP) and Section 504 Accommodations Plan are formal plans to help students who use accommodations in their school work and school related activities. Do you have an IEP or 504 Plan?

- Yes, I have an IEP
- Yes, I have a 504 Plan
- No, I do not have an IEP nor 504 Plan
- Not sure

8. Do you know the zip code of your home address?

- Yes
- No
- Not sure

9. If you know your zip code, please write the numbers in the boxes below. Then fill in the circles that match each number.

Example:

ZIP CODE				
1	9	7	1	6
<input type="radio"/> 0	<input type="radio"/> 0	<input type="radio"/> 0	<input type="radio"/> 0	<input type="radio"/> 0
<input checked="" type="radio"/> 1	<input type="radio"/> 1	<input checked="" type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6	<input checked="" type="radio"/> 6
<input type="radio"/> 7	<input type="radio"/> 7	<input checked="" type="radio"/> 7	<input type="radio"/> 7	<input type="radio"/> 7
<input type="radio"/> 8	<input type="radio"/> 8	<input type="radio"/> 8	<input type="radio"/> 8	<input type="radio"/> 8
<input type="radio"/> 9	<input checked="" type="radio"/> 9	<input type="radio"/> 9	<input type="radio"/> 9	<input type="radio"/> 9

Your answer:

ZIP CODE				
1	9			
<input type="radio"/> 0	<input type="radio"/> 0	<input type="radio"/> 0	<input type="radio"/> 0	<input type="radio"/> 0
<input checked="" type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6
<input type="radio"/> 7	<input type="radio"/> 7	<input type="radio"/> 7	<input type="radio"/> 7	<input type="radio"/> 7
<input type="radio"/> 8	<input type="radio"/> 8	<input type="radio"/> 8	<input type="radio"/> 8	<input type="radio"/> 8
<input type="radio"/> 9	<input checked="" type="radio"/> 9	<input type="radio"/> 9	<input type="radio"/> 9	<input type="radio"/> 9

10. During the last 30 days, about how much money did you have **each week** to spend any way you want to?

- None
- Less than \$1
- \$1 to \$5
- \$6 to \$10
- \$11 to \$20
- \$21 to \$50
- \$51 to \$100
- More than \$100

The next six sets of questions ask about your use of certain tobacco products.

Cigarettes

11. Have you **ever tried** cigarette smoking, even one or two puffs?

- Yes
- No

12. If one of your best friends were to offer you a cigarette, would you smoke it?

- Definitely yes
- Probably yes
- Probably not
- Definitely not

13. How old were you when you **first tried** cigarette smoking, even one or two puffs?

- I have never smoked cigarettes, not even one or two puffs
- 8 years old or younger
- 9 years old
- 10 years old
- 11 years old
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old
- 18 years old
- 19 years old or older

14. About how many cigarettes have you smoked in your **entire life**?

- I have never smoked cigarettes, not even one or two puffs
- 1 or more puffs but never a whole cigarette
- 1 cigarette to 5 cigarettes
- 6 to 15 cigarettes (about 1/2 a pack total)
- 16 to 25 cigarettes (about 1 pack total)
- 26 to 99 cigarettes (more than 1 pack, but less than 5 packs)
- 100 or more cigarettes (5 or more packs)

15. During the **past 30 days**, on how many days did you smoke cigarettes?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

16. During the past 30 days, **on the days you smoked**, how many cigarettes did you smoke per day?

- I did not smoke cigarettes during the past 30 days
- Less than 1 cigarette per day
- 1 cigarette per day
- 2 to 5 cigarettes per day
- 6 to 10 cigarettes per day
- 11 to 20 cigarettes per day
- More than 20 cigarettes per day

17. When was the last time you smoked a cigarette, even one or two puffs? (**PLEASE CHOOSE THE FIRST ANSWER THAT FITS**)

- I have never smoked cigarettes, not even one or two puffs
- Earlier today
- Not today but sometime during the past 7 days
- Not during the past 7 days but sometime during the past 30 days
- Not during the past 30 days but sometime during the past 6 months
- Not during the past 6 months but sometime during the past year
- 1 to 4 years ago
- 5 or more years ago

18. Do you think you will be smoking cigarettes **5 years from now**?

- I definitely will
- I probably will
- I probably will not
- I definitely will not

19. Menthol cigarettes are cigarettes that taste like mint. During the past 30 days, were the cigarettes that you usually smoked menthol?

- I did not smoke cigarettes during the past 30 days
- Yes
- No
- Not sure

20. Where do you smoke cigarettes? (**You can CHOOSE ONE ANSWER OR MORE THAN ONE ANSWER**)

- I do not smoke
- At home
- At school or on school property
- At work
- In the car
- At friends' houses
- At sports events, parties, dances, raves or other social events
- In public places (parks, shopping malls or other hangouts)



Cigars

21. Have you **ever tried** smoking cigars, cigarillos, or little cigars, even one or two puffs?
- Yes
 - No
22. How old were you when you **first tried** smoking a cigar, cigarillo, or little cigar, even one or two puffs?
- I have never smoked cigars, cigarillos, or little cigars, not even one or two puffs
 - 8 years old or younger
 - 9 years old
 - 10 years old
 - 11 years old
 - 12 years old
 - 13 years old
 - 14 years old
 - 15 years old
 - 16 years old
 - 17 years old
 - 18 years old
 - 19 years old or older
23. During the past 30 days, did you smoke . . .
- Little cigars or cigarillos
 - Regular cigars
 - Both regular cigars and little cigars or cigarillos
 - I did not smoke any cigars or cigarillo
24. During the past 30 days, on how many days did you smoke cigars, cigarillos, or little cigars?
- 0 days
 - 1 or 2 days
 - 3 to 5 days
 - 6 to 9 days
 - 10 to 19 days
 - 20 to 29 days
 - All 30 days

Smokeless Tobacco

25. Have you **ever used** chewing tobacco, snuff, snus, dip, or dissolvables (**such as** Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen, Ariva, Stonewall, or Camel orbs or strips) even just a small amount?
- Yes
 - No
26. How old were you when you **used** chewing tobaccos, snuff, snus, or dip for the first time?
- I have never used chewing tobacco, snuff, snus, or dip
 - 8 years old or younger
 - 9 years old
 - 10 years old
 - 11 years old
 - 12 years old
 - 13 years old
 - 14 years old
 - 15 years old
 - 16 years old
 - 17 years old
 - 18 years old
 - 19 years old or older
27. During the **past 30 days**, on how many days did you use chewing tobacco, snuff, snus, or dip?
- 0 days
 - 1 or 2 days
 - 3 to 5 days
 - 6 to 9 days
 - 10 to 19 days
 - 20 to 29 days
 - All 30 days

***Electronic cigarettes* come in many shapes and sizes, and may be called e-hookahs, vapes, mods, vaporizers, juuls, hookah pens, and other names. In the following questions, 'e-cigarettes' refers to any and all of these products.**

28. Have you ever tried juuling, vaping or using e-cigarettes?
 Yes
 No
29. How old were you when you first tried juuling, vaping or smoking an e-cigarette?
 I have never used an electronic cigarette or e-cigarette
 8 years old or younger
 9 years old
 10 years old
 11 years old
 12 years old
 13 years old
 14 years old
 15 years old
 16 years old
 17 years old
 18 years old
 19 years old or older
30. During the **past 30 days**, on how many days did you juul, vape or use an e-cigarette?
 0 days
 1 or 2 days
 3 to 5 days
 6 to 9 days
 10 to 19 days
 20 to 29 days
 All 30 days
31. Where do you juul, vape, or use e-cigarettes?
(You can CHOOSE ONE ANSWER or MORE THAN ONE ANSWER)
 I do not vape, juul, or use e-cigarettes
 At home
 At school or on school property
 At work
 In the car
 At friends' houses
 At sports events, parties, dances, raves, or other social events
 In public places (parks, shopping malls, or other hangouts)

Pipe Tobacco

32. Have you ever tried smoking tobacco from a hookah, or water pipe?
 Yes
 No
33. During the **past 30 days**, on how many days did you smoke from a hookah or water pipe?
 0 days
 1 or 2 days
 3 to 9 days
 10 to 19 days
 20 to 29 days
 All 30 days
34. Have you **ever tried** smoking tobacco in a regular pipe, even one or two puffs?
 Yes
 No
35. During the **past 30 days**, on how many days did you smoke tobacco in a pipe?
 0 days
 1 or 2 days
 3 to 9 days
 10 to 19 days
 20 to 29 days
 All 30 days

Bidis (small brown cigarettes wrapped in a leaf) and Kreteks (clove cigarettes)

36. Have you **ever tried** smoking any of the following, even one or two puffs: Bidis (small brown cigarettes wrapped in a leaf), Kreteks (clove cigarettes), clove cigars, or roll-your-own cigarettes?
 Yes
 No
37. During the **past 30 days**, on how many days did you smoke Bidis, Kreteks, clove cigars or roll-your-own cigarettes?
 0 days
 1 or 2 days
 3 to 9 days
 10 to 19 days
 20 to 29 days
 All 30 days



Flavored tobacco is any tobacco product scented with mint (menthol), alcohol (wine, cognac), candy or other sweets, fruit, chocolate, vanilla or other spices, or other flavors with names like "Jazz" or "Unicorn" that are not plain tobacco.

Tobacco products include cigarettes, cigars, little cigars or cigarillos, chew, snuff, snus, pipe and roll-your-own tobacco, bidis, kreteks, hookah or water pipe, e-cigarettes, vapes, JUUL and any tobacco products not listed here.

38. During the past 30 days, did you use any flavored tobacco?

- Yes
- I used tobacco in the past 30 days, but it was **not** flavored
- No, I did not use **any** tobacco products during the last 30 days

The next set of questions ask for your thoughts about getting tobacco products.

39. How easy would it be for you to get tobacco products if you wanted some?

- Very easy
- Somewhat easy
- Not easy at all

40. Have you ever bought or tried to buy cigarettes, smokeless tobacco, cigars, e-cigarettes or any other form of tobacco in a store?

- Yes
- No

41. During the past 30 days, how did you get your own cigarettes, Juul pods, little cigars or other tobacco products? (You can **CHOOSE ONE ANSWER or MORE THAN ONE ANSWER**)

- I did not smoke, vape or chew any tobacco during the past 30 days
- I bought them myself
- I had someone else buy them for me
- I borrowed or bummed them
- Someone gave them to me without my asking
- I took them from a store or another person
- I got them some other way

42. During the **past 30 days**, where did you **buy or try to buy a tobacco product**? (You can **CHOOSE ONE ANSWER or MORE THAN ONE ANSWER**)

- I did not buy or try to buy tobacco during the past 30 days
- A gas station
- A convenience store
- A grocery store
- A drugstore
- A vending machine
- Over the internet
- Through the mail
- I bought them from someone (not in a store)
- A vape shop
- A tobacco shop
- Some other place not listed here

43. When you bought or tried to buy tobacco in a store in the **past 30 days**, were you ever asked to show proof of age?

- I did not try to buy tobacco in a store during the past 30 days
- Yes, I was asked to show proof of age
- No, I was not asked to show proof of age

44. During the **past 30 days**, did anyone **refuse** to sell you tobacco because of your age?

- I did not try to buy tobacco during the past 30 days
- Yes
- No

45. In the area where you live, do you know of any places that sell **single** or loose cigarillos or little cigars?

- Yes
- No

46. In the area where you live, do you know of any places that sell **single** or loose cigarettes?

- Yes
- No

The next questions ask about advertisements you have seen or heard on the internet, in newspapers, magazines, television, movies, or stores, and about promotions you may have received.

47. During the **past 30 days**, did you receive coupons from a tobacco company through . . . (You can **CHOOSE ONE ANSWER or MORE THAN ONE ANSWER**)

- I did not receive coupons from a tobacco company
- The mail
- E-mail
- The internet
- Facebook
- Instagram
- A text message

48. During the **past 30 days**, did you receive ads from a tobacco company through . . . (You can **CHOOSE ONE ANSWER or MORE THAN ONE ANSWER**)

- I did not receive ads from a tobacco company
- The mail
- E-mail
- The internet
- Facebook
- Instagram
- A text message

49. During the **past 30 days**, have you seen a commercial stating that some e-cigarette pods contain as much nicotine as a pack of cigarettes?

- Yes
- No
- Not sure

50. When you go to a convenience store, supermarket, or gas station, how often do you see ads or promotions for cigarettes and other tobacco products?

- I never go to a convenience store, supermarket, or gas station
- Never
- Rarely
- Sometimes
- Most of the time
- Always

51. During the **past 30 days**, how often did you see an ad for cigarettes or other tobacco product that was outdoors on a billboard or could be seen from outside a store?

- I did not see an ad for cigarettes or smokeless tobacco during the past 30 days
- Never
- Rarely
- Sometimes
- Most of the time
- Always

52. When you watch TV or go to the movies, how often do you see actors and actresses using cigarettes or other tobacco products?

- I do not watch TV or go to the movies
- Never
- Rarely
- Sometimes
- Most of the time
- Always

53. A warning label tells you if a product is harmful to you and can be either a picture or words. During the **past 30 days**, how often did you see a warning label **on a cigarette pack**?

- I did not see a cigarette pack during the past 30 days
- Never
- Rarely
- Sometimes
- Most of the time
- Always

54. During the **past 30 days**, how often did you see a warning label **on a smokeless tobacco product**?

- I did not see a smokeless tobacco product during the past 30 days
- Never
- Rarely
- Sometimes
- Most of the time
- Always

55. Are you aware of the website called The Dirty Truth?

- Yes
- No
- Not sure

65. In the **past 12 months**, did you do any of the following to help you quit using tobacco of any kind for good? (**You can CHOOSE ONE ANSWER or MORE THAN ONE ANSWER**)
- I did not use tobacco of any kind during the past 12 months
 - I did not try to quit during the past 12 months
 - Attended a program at my school
 - Attended a program in the community
 - Called a telephone help line or telephone quit line
 - Used nicotine gum
 - Used nicotine patch
 - Used any medicine to help quit
 - Visited an internet quit site
 - Got help from family or friends
 - Used another method such as hypnosis or acupuncture
 - Tried to quit on my own or quit "cold turkey"

The next questions ask about your exposure to other people's tobacco smoke. This includes vapors from e-cigarettes & Juuls, as well as smoke from cigarettes, cigars, hookahs and other pipes.

66. During the **past 7 days**, on how many days did someone smoke any tobacco products **in your home** while you were there?
- 0 days
 - 1 day
 - 2 days
 - 3 days
 - 4 days
 - 5 days
 - 6 days
 - 7 days
67. During the **past 7 days**, on how many days did you ride **in a vehicle** where someone was smoking a tobacco product?
- 0 days
 - 1 day
 - 2 days
 - 3 days
 - 4 days
 - 5 days
 - 6 days
 - 7 days

68. During the **past 7 days**, on how many days did you breathe the smoke from someone who was smoking a tobacco product **at your school**, including school buildings, school grounds, and school parking lots?
- 0 days
 - 1 day
 - 2 days
 - 3 days
 - 4 days
 - 5 days
 - 6 days
 - 7 days
69. During the **past 7 days**, on how many days did you breathe the smoke from someone who was smoking tobacco products in the place **where you work**?
- I do not have a job
 - I have a job but did not work in the past seven days
 - 0 days
 - 1 day
 - 2 days
 - 3 days
 - 4 days
 - 5 days
 - 6 days
 - 7 days

70. During the **past 7 days**, on how many days did you breathe the smoke from someone who was smoking tobacco products in an **indoor** public place? Examples of indoor public places are school buildings, stores, restaurants, and enclosed sports arenas.
- 0 days
 - 1 day
 - 2 days
 - 3 days
 - 4 days
 - 5 days
 - 6 days
 - 7 days
71. During the **past 7 days**, on how many days did you breathe the smoke from someone who was smoking tobacco products in an **outdoor** public place? Examples of outdoor public places are school grounds, parking lots, stadiums and parks.
- 0 days
 - 1 day
 - 2 days
 - 3 days
 - 4 days
 - 5 days
 - 6 days
 - 7 days

The next questions ask about smoking rules in your home and vehicle.

The next questions ask about use of tobacco products by family and friends.

72. Inside your home (not counting decks, garages, or porches), is smoking . . .

- Always allowed
- Allowed only at some times or in some places
- Never allowed

73. In the vehicles that you and family members who live with you own or lease, is smoking . . .

- Always allowed
- Allowed only at some times or in some places
- Never allowed

74. Do you think that breathing smoke from other people's cigarettes or other tobacco products is harmful to you?

- Definitely yes
- Probably yes
- Probably not
- Definitely not

75. In your opinion, inside your home, smoking tobacco products should . . .

- Always be allowed
- Be allowed only at some times or in some places
- Never be allowed

76. In your opinion, inside your vehicles, smoking should . . .

- Always be allowed
- Be allowed only at some times or in some places
- Never be allowed

77. Does anyone who lives with you now ...?

(MARK ALL THAT APPLY)

- Smoke cigarettes
- Use chewing tobacco, snuff, dip, or snus
- Smoke cigars, cigarillos, or little cigars
- Use e-cigarettes, vape, or juul
- Smoke tobacco using a hookah or waterpipe
- Smoke tobacco out of a pipe other than a hookah or water pipe
- Smoke Bidis (small brown cigarettes wrapped in a leaf)
- Smoke Kreteks (clove cigarettes)
- Use any other form of tobacco
- No one who lives with me now uses any form of tobacco

78. Do either of your **parents/guardians** smoke cigarettes, cigars, hookah, pipe, or vape or use chewing tobacco, snuff, dip or any other tobacco product?

- Both my parents/guardians use tobacco
- Yes, my mother/female guardian does
- Yes, my father/male guardian does
- No, neither uses any kind of tobacco

79. How many of your **four** closest friends smoke cigarettes?

- None
- One
- Two
- Three
- Four
- Not sure

80. How many of your **four** closest friends smoke cigars, little cigars, or cigarillos?

- None
- One
- Two
- Three
- Four
- Not sure



81. How many of your **four** closest friends vape, juul, or use e-cigarettes?

- None
- One
- Two
- Three
- Four
- Not sure

82. How many of your **four** closest friends use chewing tobacco, snuff, snus or dip?

- None
- One
- Two
- Three
- Four
- Not sure

83. Out of **10 KIDS** your age in Delaware, how many, on average, do you think smoke cigarettes at least once a month?

- None
- One
- Two
- Three
- Four
- Five
- Six
- Seven
- Eight
- Nine
- Ten

84. Out of **10 ADULTS** in Delaware, how many, on average, do you think smoke cigarettes at least once a month?

- None
- One
- Two
- Three
- Four
- Five
- Six
- Seven
- Eight
- Nine
- Ten

The next questions ask about your thoughts about tobacco.

85. Do you think that breathing vapors from other people's e-cigarettes, mods, or juuls is harmful to you?

- Definitely yes
- Probably yes
- Probably not
- Definitely not

86. Do you think smoking cigarettes makes young people look cool or fit in?

- Definitely yes
- Probably yes
- Probably not
- Definitely not

87. Do you think young people who smoke cigarettes have more friends?

- Definitely yes
- Probably yes
- Probably not
- Definitely not

88. Do you think Juuls contain more or less nicotine than other kinds of vapes or e-cigarettes?

- More
- Less
- Same amount
- Juuls don't contain nicotine
- Don't know or not sure

89. How strongly do you agree with the statement 'All tobacco products are dangerous'?

- Strongly agree
- Agree
- Disagree
- Strongly disagree

The next questions are about your experiences at home and in your community.

The last questions ask about your experiences at school.

90. During the **past 12 months**, have your parents or guardians talked with you, even once, about not using any type of tobacco product?

- Yes
- No

91. During the **past 12 months**, have you been involved in any organized activities outside of school (such as at a Boys & Girls Club, 4-H Club, or at a Community Center) to keep people your age from using any form of tobacco?

- Yes
- No

92. Have you ever participated in Kick Butts Generation (KBG) or Anti-Ash Brigade (AAB)?

- Yes
- No
- Not sure

93. In Delaware, how old does someone have to be to legally buy a tobacco product?

- 16
- 18
- 21
- 24
- Not sure

94. During **this school year**, were you taught in any class or assembly about why you should not use tobacco products?

- Yes
- No

95. During the **past 30 days**, how many days did you miss **at least one class period** because you skipped, "cut," or just did not want to be there?

- 0 days
- 1 day
- 2 to 5 days
- 6 to 10 days
- 11 or more days

96. During the **past year** were you taught in any of your classes or at a school lunch assembly, lunch 'n learn or other school program about why you should not use tobacco products?

- Yes
- No

END OF SURVEY

THANK YOU FOR COMPLETING THE DELAWARE YOUTH TOBACCO SURVEY!

