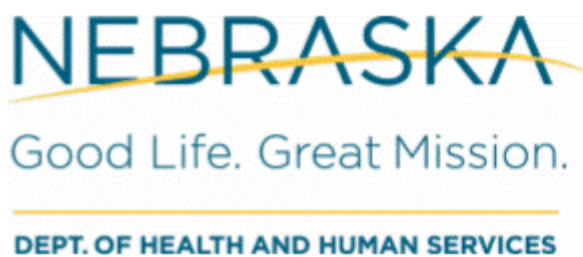


**2023**

**Adult Tobacco  
Survey**

**Report Date: October 2024**





# Summary of the 2023 Adult Tobacco Survey for the State of Nebraska

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## Statistical Summary

Source: Nebraska Adult Tobacco Survey 2023 (NE ATS 2023)

### Adult Tobacco Use in Nebraska

		95% CI	
	%	<u>Lower</u>	<u>Upper</u>
<i>Ever Tried</i>			
Have Tried a Cigarette	62.3%	62.2%	62.4%
Have Tried an E-Cigarette	27.5%	27.5%	27.6%
Have Tried a Cigar/Cigarillo/Small Cigar	43.4%	43.4%	43.5%
Have Tried Smokeless Tobacco	25.1%	25.0%	25.1%
<i>Current Use</i>			
Smoke Cigarettes Currently	9.3%	9.3%	9.4%
Use E-Cigarettes Currently	8.6%	8.5%	8.6%
Smoke Cigars/Cigarillos/Small Cigars Currently	3.2%	3.1%	3.2%
Use Smokeless Tobacco Currently	2.7%	2.7%	2.8%
<i>Cessation</i>			
Cigarette Smokers Who Have Attempted to Quit	83.9%	83.7%	84.1%
<i>Mass Media Recall</i>			
Read, Saw, or Heard Ad(s) About Dangers of Tobacco Use – Within Past Month	56.1%	56.1%	56.2%
<i>Policy and Taxes</i>			
Support for Increasing Cigarette Tax and Spending on Prevention	77.4%	77.3%	77.4%
Support for Increasing Tobacco Tax (Tobacco Users)	58.7%	58.6%	58.9%

## Demographics

### Age

18-24	14.5%
25-64	61.6%
65+	23.9%

### Gender

Male	49.9%
Female	50.1%

### Education

Less Than or Equal to GED/High School	34.7%
Some College	34.7%
Associate Degree	6.5%
Bachelor's Degree or Higher	24.1%

### Income

Less than \$35,000	29.5%
\$35,000 to \$74,999	30.7%
\$75,000 and Above	39.8%

### Ethnicity

Hispanic or Latino(a)	13.3%
Non-Hispanic or Latino(a)	86.7%

### Race

White (Non-Person of Color)	71.7%
Person of Color	28.3%

### Marital Status

Married	54.4%
Unmarried (All other statuses)	45.6%

### Housing

Own	66.5%
Rent	30.0%
Other Arrangement	3.5%

### Employment Status

Employed for Wages	52.2%
Self-Employed	10.6%
Out of Work for More Than 1 Year	1.4%
Out of Work for Less Than 1 Year	1.9%
A Homemaker	3.7%
A Student	5.4%
Retired	20.2%
Unable to Work	4.7%

### Military Service

Have ever Served on Active Duty in the United States Armed Forces	9.3%
Never Served on Active Duty in the United States Armed Forces	90.7%



## Introduction

Tobacco use remains the leading preventable cause of death in the United States. Annually, approximately 480,000 Americans die prematurely due to tobacco use including 2,500 Nebraskans.<sup>1</sup>

Each year Tobacco Free Nebraska (TFN), a program within the Nebraska Department of Health and Human Services – Division of Public Health, conducts the Nebraska Adult Tobacco Survey (ATS). The ATS monitors tobacco-related issues including trends among different groups of Nebraskans, new or emerging product evolution, and opportunities to support cessation efforts. This report summarizes the major findings from the ATS conducted in calendar year 2023.

## Study Design and Method

TFN contracted with the Bureau of Sociological Research (BOSR), University of Nebraska – Lincoln to complete the ATS. The ATS sampling design, data collection, data cleaning, and weighting strategies were modeled closely after the 2023 Behavioral Risk Factor Surveillance System (BRFSS). The target population for the ATS is adult Nebraskans (18 years and older) residing in a private residence or college housing. A probability sample of all households with telephones in the state of Nebraska was utilized. Landline and Cell Phone samples were drawn separately. A disproportionate stratified sample for the landline was employed, whereas cellular telephone numbers were drawn from commercially available frames at random. The total sample was stratified by the six Behavioral Health regions in Nebraska with two additional strata for Lincoln and Omaha. Please refer to Figure 1 for a description of the regions.

## NEBRASKA ADULT TOBACCO SURVEY

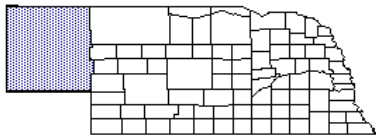
Adult Tobacco Survey is a statewide landline and cellular telephone survey of adults aged 18 years or older. Core questions assess adults' knowledge, attitudes, and behaviors related to tobacco use, secondhand smoke exposure, use of cessation assistance, and their awareness of and support for evidence-based policy interventions.

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<sup>1</sup> Centers for Disease Control and Prevention. Best Practices for Comprehensive Tobacco Control Programs — 2014. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014. Page 105.

Figure 1

Definitions of Regions

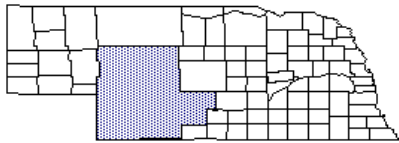


**Region 1 -  
Panhandle**

Banner  
Box Butte  
Cheyenne  
Dawes

Deuel  
Garden  
Kimball  
Morrill

Scotts Bluff  
Sheridan  
Sioux

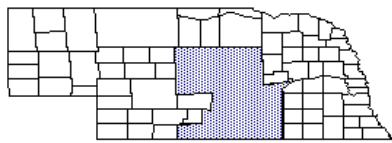


**Region 2 -  
Southwest**

Arthur  
Chase  
Dawson  
Dundy  
Frontier  
Gospel

Grant  
Hayes  
Hitchcock  
Hooker  
Keith  
Lincoln

Logan  
McPherson  
Perkins  
Red Willow  
Thomas

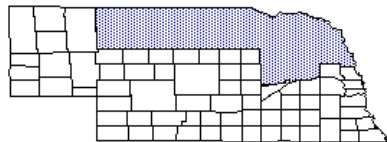


**Region 3 -  
South  
Central**

Adams  
Blaine  
Buffalo  
Clay  
Custer  
Franklin  
Furnas  
Garfield

Greeley  
Hall  
Hamilton  
Harlan  
Howard  
Kearney  
Loup  
Merrick

Nuckolls  
Phelps  
Sherman  
Valley  
Webster  
Wheeler

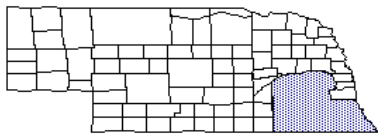


**Region 4 -  
North**

Antelope  
Boone  
Boyd  
Brown  
Burt  
Cedar  
Cherry  
Colfax

Cuming  
Dakota  
Dixon  
Holt  
Keya Paha  
Knox  
Madison  
Nance

Pierce  
Platte  
Rock  
Stanton  
Thurston  
Wayne

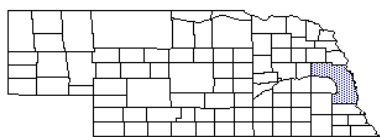


**Region 5 -  
Southeast**

Butler  
Fillmore  
Gage  
Jefferson  
Johnson  
Lancaster

Nemaha  
Otoe  
Pawnee  
Polk  
Richardson  
Saline

Saunders  
Seward  
Thayer  
York



**Region 6 -  
Midland**

Cass  
Dodge

Douglas  
Sarpy

Washington

BOSR purchased the 2023 ATS sample from Marketing Systems Group on a quarterly basis for all four quarters.

Upon speaking with a person, a series of qualification questions are asked to determine whether a household was reached and whether the household members were eligible. For the landline survey, the interviewer created a household roster by asking how many adult men and adult women live in the household. From there, one adult is randomly chosen by WinCATI as the selected respondent. Cell phones are largely personal devices, therefore, the person who answered the cell phone was the selected respondent as long as they met the eligibility requirements.

The 2023 ATS had an annual target of 3200 completed interviews (400 interviews, combined, from each stratum). Sample sizes were adjusted slightly in each order based on previous sample performance and the number of completed interviews needed to meet the annual target.

### **Data Collection and Process**

The questionnaire for the 2023 ATS (Appendix A, see also Appendix B for 2021 and 2022 questions included in this report) was developed by TFN and implemented by BOSR in both English and Spanish. The questionnaire was programmed and administered in the WinCATI software. Sampled phone numbers were called by professionally trained BOSR interviewers from January 28, 2023, to February 5, 2024. Interviews were conducted during each calendar month in 2023. Calls were made 7 days a week, during both daytime and evening hours. Live monitoring and verification callbacks were performed for quality assurance purposes.

### **Response Rate**

Using the American Association for Public Opinion Research (AAPOR)'s standard definitions for Response Rate 4, the landline survey had a response rate of 48.5% (n=658 completed interviews, 42 partial interviews) and the cell phone survey had a response rate of 51.3% (n=2331 completed interviews, 154 partial interviews).

### **Data Cleaning and Weighting**

Data were exported from the BOSR's interviewing platform WinCATI and reviewed to exclude any duplicate cases. Responses that had reached the partial threshold with all of the demographic questions answered were coded as partial completes.

### **Weighting**

To ensure the results are representative and generalizable to all adult Nebraskans, the data were weighted by BOSR using the Stratum Weight, Design Weight, as well as Composite Weight for each completed interview.

The Stratum Weight accounts for the differences in the probability of being selected based on the geographic stratum. There are eight geographic strata that correspond to the six Behavioral Health Regions in Nebraska as well as an oversample for Lincoln and Omaha. A stratum weight is calculated as:

$$\text{Stratum Weight} = \frac{\text{Number of phone numbers drawn into the sample for that quarter}}{\text{Total number of phone numbers available}}$$

In order to combine the landline and cell phone samples, the Design Weight was applied taking into account the Stratum weight, the number of landline phone numbers in the household and the number of eligible adults in the household. The Design Weight was calculated (The BRFSS Data User Guide, 2013):

$$\text{Design Weight} = \text{Stratum Weight} \times \frac{1}{\text{Number of Phones}} \times \text{Number of Adults}$$

In the above calculations, the number of adults was capped at three, and the number of phone numbers was capped at two to minimize weight variation. If there was missing data for the number of phones, that value was set as one. For Cell phone respondents, both the number of phones and the number of adults were set to one. Therefore, the Cell phone Design weight equaled the Stratum Weight.

A dual-use adjustment to the design weights was needed to account for the overlapping sample frames. The design weight was multiplied by this adjustment factor for records that had the potential to be in both sample frames, creating a composite weight.

The dual-use adjustment is calculated for three categories based on phone usage. The three dual-use categories include landline survey respondents that have a cell phone, cell phone survey respondents that have a landline, and respondents that are not dual users in that they use only a landline or only a cell phone.

The formula for calculating the composite weight is as follows:

$$\text{Composite weight for dual use} = \text{design weight} \times \frac{N \text{ effective value for category 1 or 2}}{N \text{ effective category 1} + N \text{ effective category 2}}$$

where the N effective sample size is

$$N \text{ effective} = \frac{N}{DEFF}$$

where N is number of interviews and

$$DEFF = 1 + \left( \frac{\text{Standard Deviation of Design Weight}}{\text{Mean Value of Design Weight}} \right)^2$$

Finally, the adjusted design weight was then used as the input weight for raking to represent the total population by iteratively introducing and adjusting one demographic variable at a time.

## Raking

The raking variables used in the ATS included age, sex, race/ethnicity, education, marital status, home ownership, phone source and region. Prior to raking, any missing data is imputed for each of the variables. Landline and cell phone data are imputed separately. The age variable is imputed using the mean age of the gender and race/ethnicity category of the region the respondent is assigned. Race is imputed using the most common race category for the region. Education, marital status, and home ownership are imputed using hot-deck imputation. After the data has been collected, the region data is generated based on the self-reported county. On occasion, a respondent may not know in which county they live, or he or she will refuse this question. In this case, there is no county data to use to determine the region. However, prior to data collection, the sample is split into eight geographic strata that correspond to the regions described here. If a respondent does not provide a county during the survey, the region is imputed using the stratum to which the record was originally assigned.



The number of categories for each variable have been selected to match the BRFSS as closely as possible. However, there are some deviations to this based on what is publicly available for the population data as well as ensuring that there is enough data to produce statistically valid results. After the missing values have been imputed and the data has been collapsed, prior to raking, the frequencies of the collapsed data are checked to ensure that there is enough data in each category to proceed.

Raking margins are ordered starting with the smaller geographic regions and proceeding to the state population data. After each of these margins have been adjusted the process starts over with Race/Ethnicity by Region variable and continues until each of the margins reached fifty iterations or the margins have converged to 0.001. Some of these margins may be removed or collapsed further depending on the number of responses for the categories. The final weight in the dataset is named raked\_wt1.

## Design Effects

The design effect due to weighting adjustments is 3.15, which represents the loss in statistical efficiency that results from unequal weights<sup>2</sup>.

Disproportionate stratification was used for the 2023 ATS. The use of this type of sampling resulted in a sampling design effect of 1.47<sup>3</sup>.

Appropriate adjustments need to be incorporated into statistical tests when using the 2023 ATS data. See Estimate of Sampling Error in Appendix C.

Because BOSR used SPSS for analysis, the values have not been adjusted.

## Limitations

In telephone surveys, timing must be carefully considered. BOSR monitored the time of day of the call and varied the day of the week and time of the follow-up call. Telephone only surveys also exclude those who do not have a telephone.

## Questions

Any questions regarding this report or the data collected can be directed to the Tobacco Free Nebraska at the Nebraska Department of Health and Human Services by calling (402) 471-2101 or by sending an email to [dhhs.tfn@nebraska.gov](mailto:dhhs.tfn@nebraska.gov).

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<sup>2</sup> The formula used is:  $1 + cv^2(w) = \frac{n(\sum_1^n w_i^2)}{(\sum_1^n w_i)^2}$ .

$$deff = \frac{\text{var}_{\text{complex}}(\bar{y})}{\text{var}_{\text{SRS}}(\bar{y})}$$

<sup>3</sup> The formula used is: . Used Q2 (Have you ever smoked a cigarette, even 1 or 2 puffs?) to calculate.

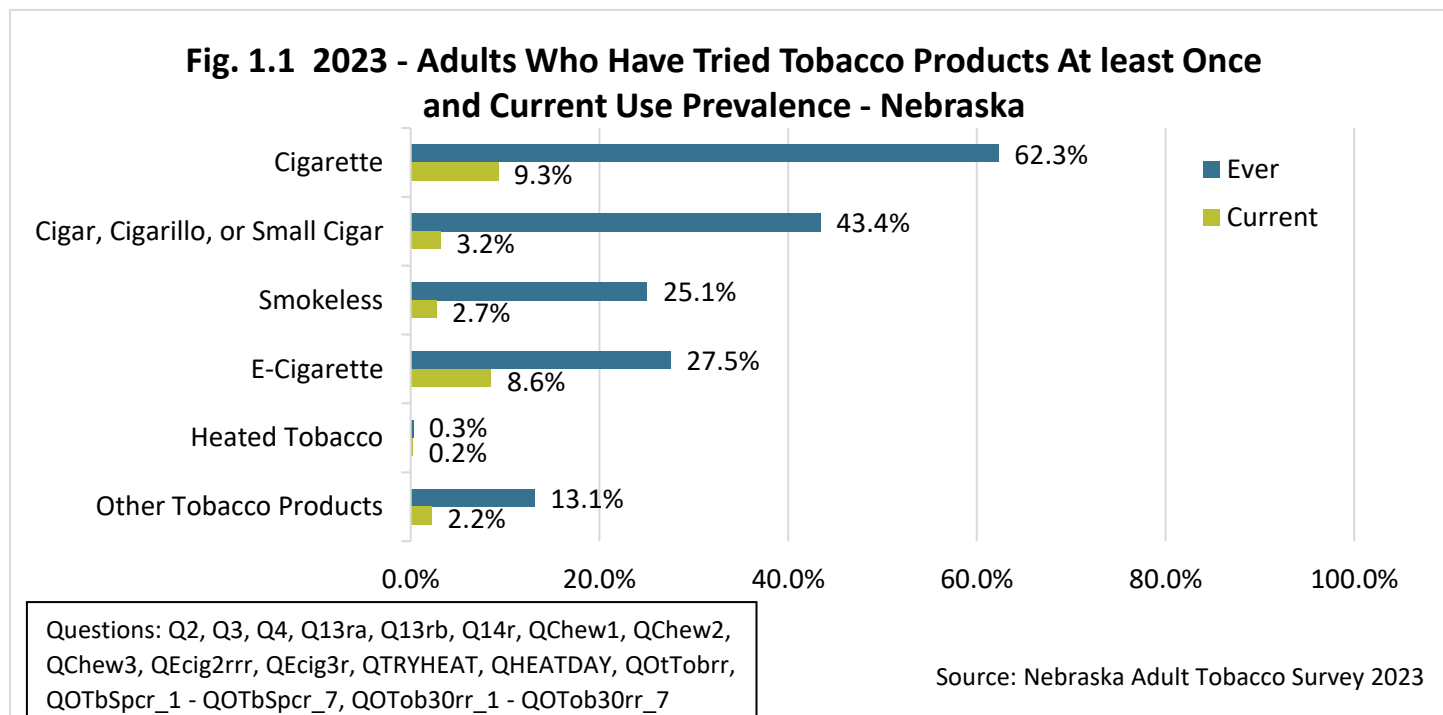
## Adult Tobacco Use in Nebraska

The health burden of tobacco use falls primarily upon the adult population because nearly all health impacts (with some exception like fires, burns, and poisonings) of tobacco use are chronic medical conditions that take years or decades to develop; the impact of a tobacco-use decision in adolescence or young adulthood is not felt for many years.

In this report, current tobacco users (also referred to as tobacco users) were defined as someone who reported using any of the major tobacco products (cigarettes, cigars/cigarillos/small cigars, smokeless tobacco, or e-cigarettes) every day or some days and/or used any other tobacco products (heated tobacco products, roll-your-own, bidis, kreteks, hookah/waterpipe, tobacco pipe, orbs, or some other product) in the past 30 days. Non-tobacco users were defined as someone who was not currently using any amount of any major tobacco products or any other tobacco products in the past 30 days prior to the survey. Additionally, those who reported using a particular tobacco product in the past but did not use that product at all when the survey was administered were defined as former users of that tobacco product. Moreover, respondents who reported having never used a tobacco product or having tried within a certain amount<sup>4</sup> of that product in their lifetime were categorized as “never smokers” of that product. Those who were either trying to quit using tobacco products at the time of the survey, have tried to quit in the past, or both, were included in the “ever tried to quit” subgroup. Please note, the findings throughout this report have been rounded to the nearest tenth or hundredth of a percent. As a result, the sum of individual percentages do not always add up to 100.0%.

### Ever Tried and Current Use Rates

The majority of respondents reported that they had tried cigarettes at least once during their lifetime (Fig. 1.1).



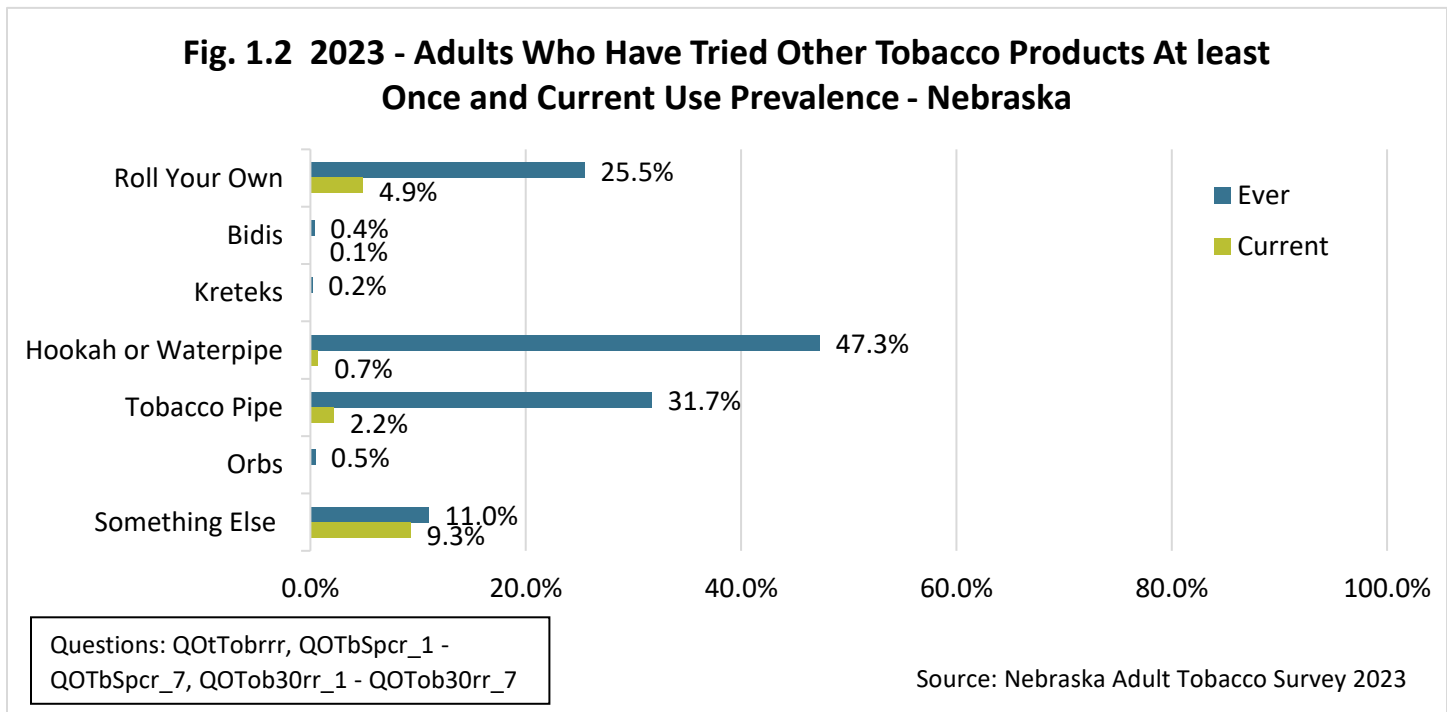
<sup>4</sup> Cigarette smokers: smoked at least 100 cigarettes in their entire life;

Cigar, cigarillo, or small cigar smokers: smoked at least 50 cigars, cigarillos, or small cigars in their entire life;

Smokeless tobacco users: used chewing tobacco, dip, snuff, or snus at least 20 times in their entire life.

The figure above (1.1) highlights the use of tobacco products by adults in Nebraska. Both ever tried and current use rates are noted. Similarly to recent Adult Tobacco Survey (ATS) implementations, the most-often used product with adults remained the combustible cigarette. Around six out of ten adults had tried a cigarette in their lifetime (62.3%) while 9.3% currently smoked cigarettes. About two-fifths of the adult population had tried a cigar, cigarillo, or small cigar (43.4%), but only 3.2% were regular cigar, cigarillo, or small cigar smokers. Just over one-fourth of adults had tried smokeless tobacco in their life (25.1%) while those who reported current use accounted for 2.7% of the respondents. E-cigarettes had been tried by more than one-fourth of adults (27.5%) while 8.6% reported using them in the last 30 days prior to the survey. Interestingly, the percentage of respondents who had ever tried other tobacco products is 13.1%, whereas only 2.2% reported current use. But there are likely sub-groups where prevalence is higher because of religious or cultural practices.

Nearly half (47.3%) of Nebraskans have tried smoking a hookah or waterpipe, roughly one-third (31.7%) have tried a tobacco pipe, and about one-fourth (25.5%) have tried roll your own (Fig. 1.2).

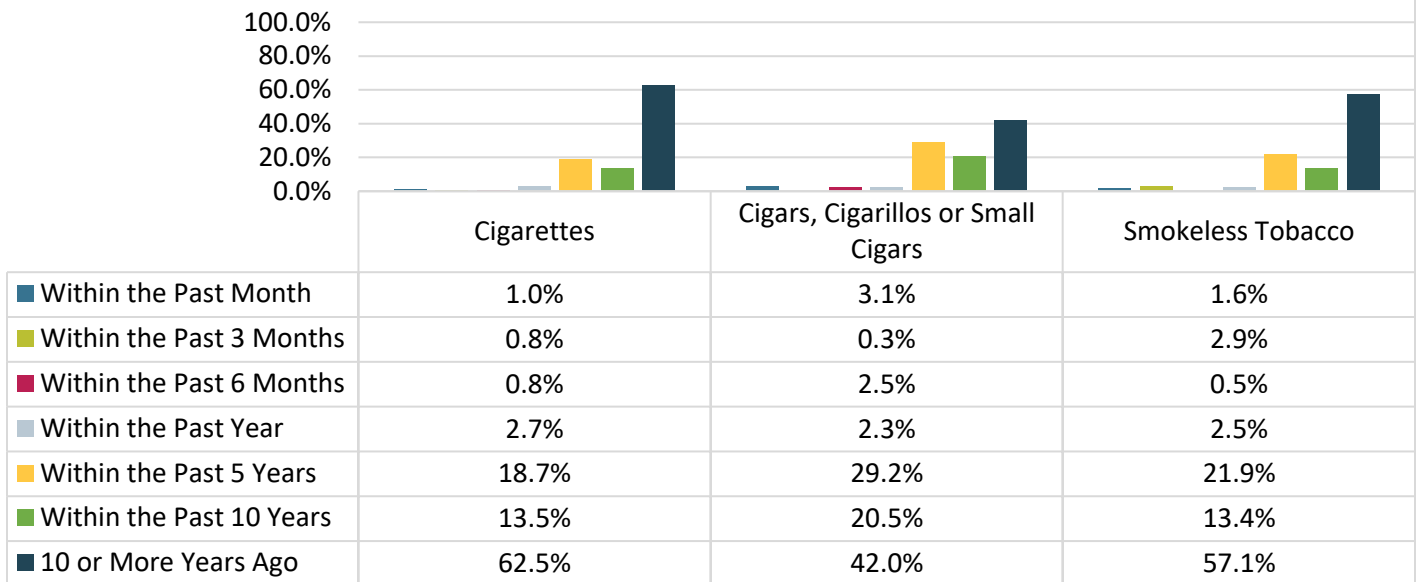


Nearly half (47.3%) of Nebraskans who have tried smoking other types of tobacco products report having tried smoking a hookah or waterpipe; 0.7% of those who have tried a hookah or waterpipe have used a hookah or waterpipe in the last 30 days. Roughly one-third (31.7%) of respondents indicated that they have tried a tobacco pipe, with 2.2% having used a tobacco pipe in the last 30 days. About one-fourth (25.5%) have tried roll your own tobacco products, with 4.9% having used roll your own tobacco products in the last 30 days. Some (11.0%) reported having tried something else, with 9.3% having used something else in the last 30 days. Few indicated that they have tried bidis (0.4%), kreteks (0.2%), and orbs (0.5%). No respondents (0.0%) reported the use of kreteks or orbs in the last 30 days while 0.1% reported having used bidis.

## Time Elapsed Since Tobacco Use

For more than half of cigarette smokers and smokeless tobacco users, it has been 10 years or more since they have used that product regularly (Fig. 1.3).

**Fig. 1.3 2023 - Length of Time Since Last Used Tobacco Product Regularly - Nebraska**



Questions: Q8, Q14rd, Q18d

Source: Nebraska Adult Tobacco Survey 2023

For most cigarette smokers (62.5%) and smokeless tobacco users (57.1%) it had been 10 or more years since they quit using the product regularly. For cigar, cigarillo, or small cigar smokers, 42.0% had not used the product regularly for 10 or more years.

As seen in Table 1.1 below, those who had ever tried an e-cigarette (31.1%), other tobacco products (17.1%), or a cigarette (14.9%) became current users at higher rates than those who had ever tried smokeless tobacco (10.9%) and cigars, cigarillos, or small cigars (7.3%). \*Please note, the number of users who ever tried or currently used heated tobacco was extremely small, so data are not shown here.

**Table 1.1 2023 Ratio of Current User to Ever Tried by Tobacco Product**

Product	Ratio (Current User/Ever Tried)
Cigarette	14.9%
Cigar, Cigarillo, or Small Cigar	7.3%
Smokeless Tobacco	10.9%
E-Cigarette	31.1%
Other Tobacco Products	17.1%

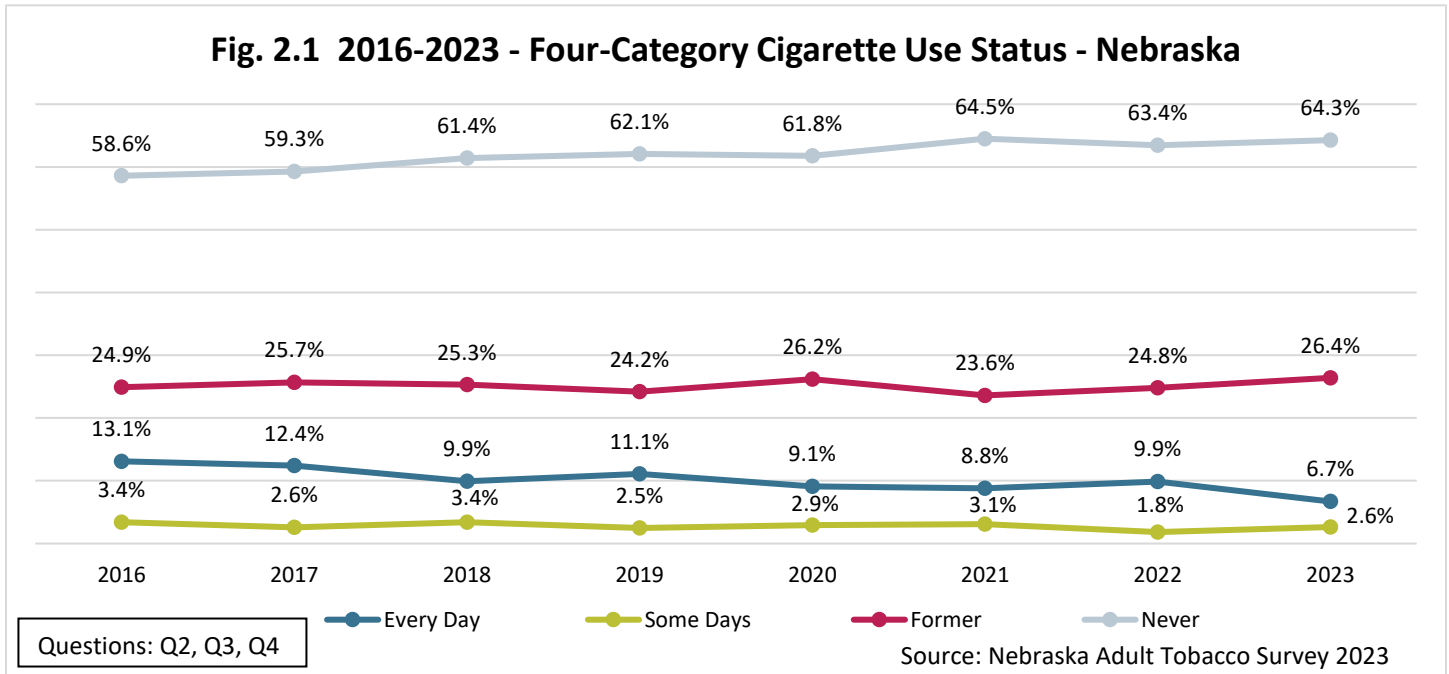
Source: Nebraska Adult Tobacco Survey 2023



# Cigarette Smoking

## Cigarette Smoking Status 2016-2023

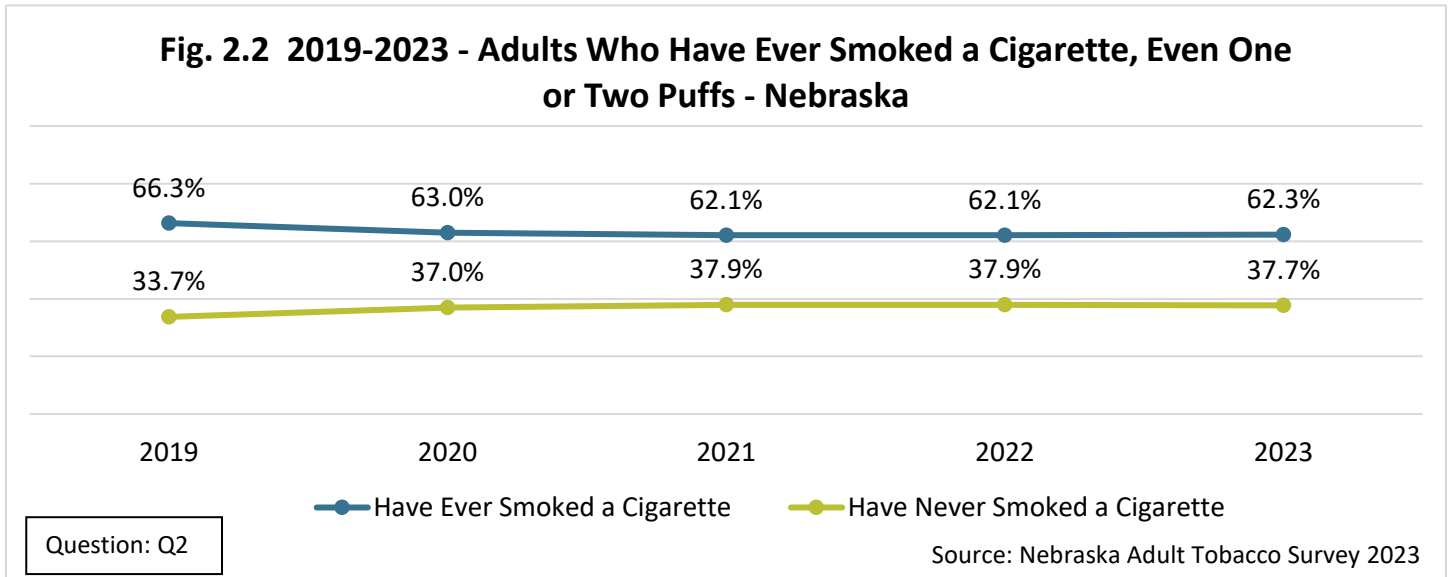
The status of cigarette smoking by adults remained stable over the measurement period (Fig. 2.1).



The proportion of adults who indicated smoking cigarettes every day dropped from 9.9% in 2022 to 6.7% in 2023. A comparable number of adults indicated they were former smokers in 2022 (24.8%) and 2023 (26.4%). The percentage of former smokers remained essentially unchanged at about one in four adults (26.4%) in 2023. The percentage of individuals who reported never having smoked increased slightly from 63.4% in 2022 to 64.3% in 2023.

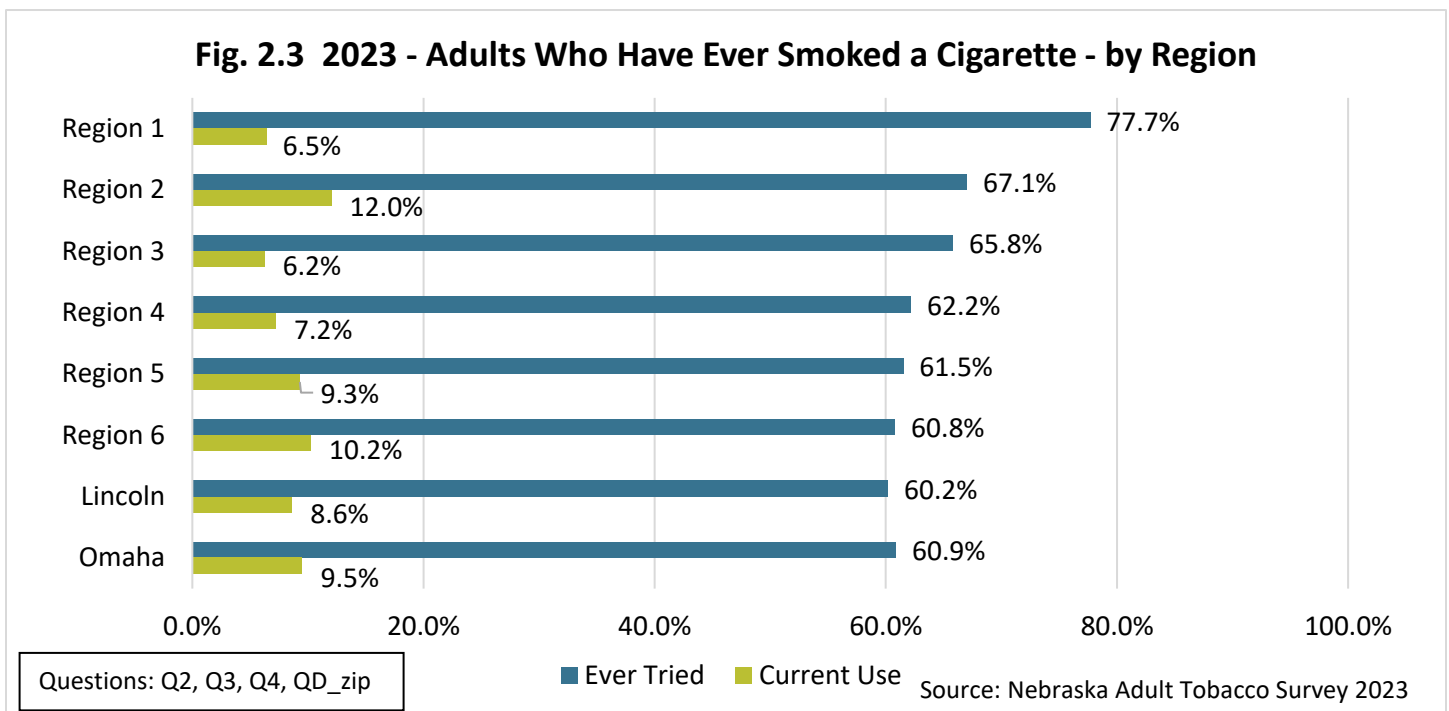
## Ever Smoked a Cigarette

The majority of adults in Nebraska have tried smoking a cigarette (Fig. 2.2).



The figure above (2.2) highlights that the percentage of adults in Nebraska who have ever smoked a cigarette, even one or two puffs, has remained relatively consistent between 2019 and 2023.

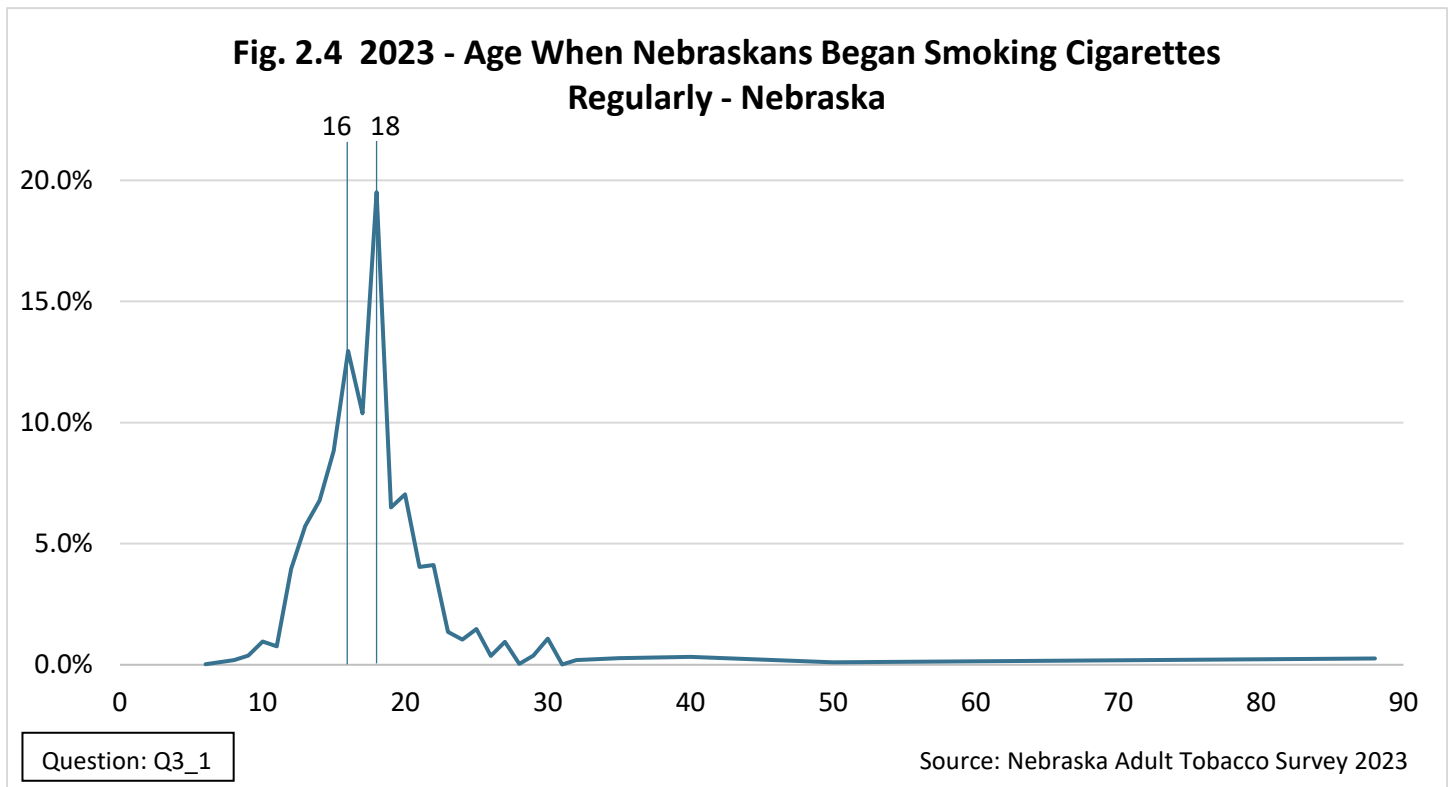
Over half of the adults in each region have tried smoking a cigarette (Fig. 2.3).



A higher percentage of adults from Region 1 (77.7%) have smoked a cigarette, even one or two puffs, while the lowest rate comes from Lincoln (60.2%).

## Age When Started Smoking Regularly

Just over two-fifths (42.8%) of Nebraskans who began smoking cigarettes regularly started between the ages of 16 and 18 years old (Fig. 2.4).

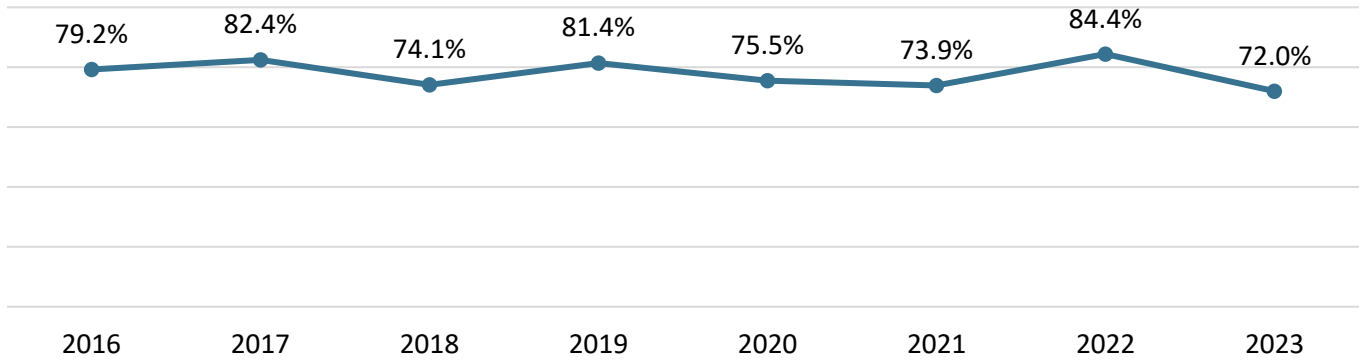


The start of regular cigarette smoking peaked at 16 and 18 years of age. A majority of the regular smokers (94.6%) started smoking cigarettes at or before 24 years old. These results revealed the importance of youth tobacco prevention.

## Currently Smoke

While the occasional use of cigarettes does exist among some cigarette smokers, most smoke every day (Fig. 2.5).

**Fig. 2.5 2016-2023 - Cigarette - Percent of Current Smokers Who Smoke Every Day - Nebraska**



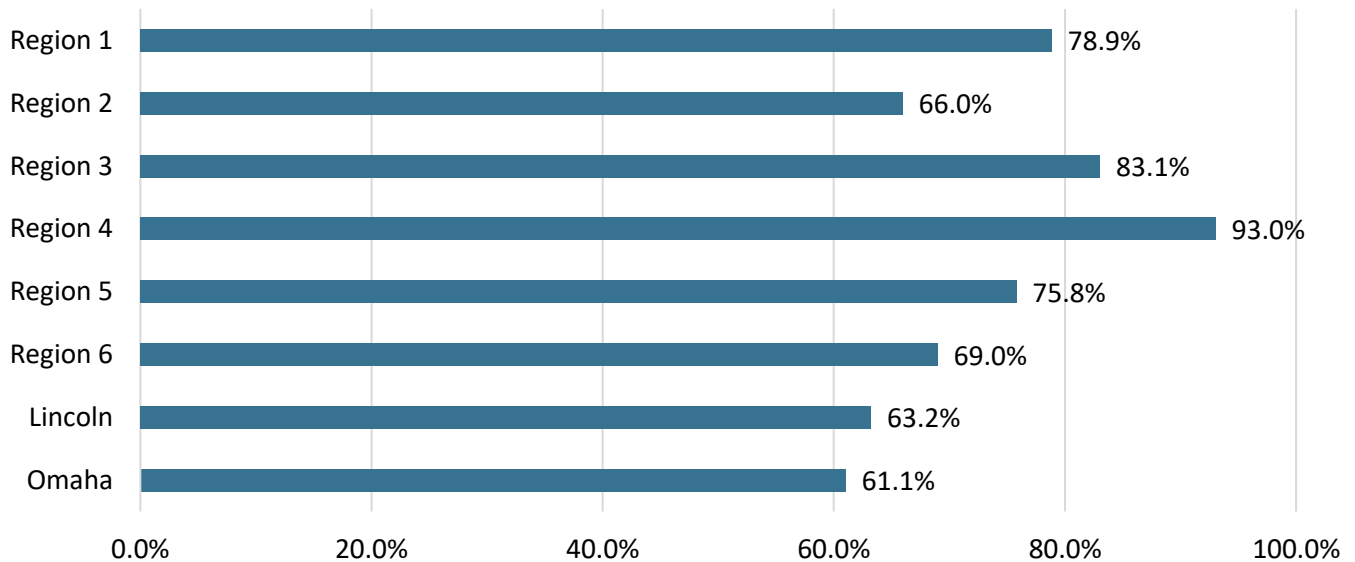
Question: Q4

Source: Nebraska Adult Tobacco Survey 2023

Among current cigarette smokers, those who report smoking every day dropped from 84.4% in 2022 to 72.0% in 2023.

Regardless of region, the majority of cigarette smokers smoke every day (Fig. 2.6).

**Fig. 2.6 2023 - Cigarette - Percent of Current Smokers Who Smoke Every Day - by Region**

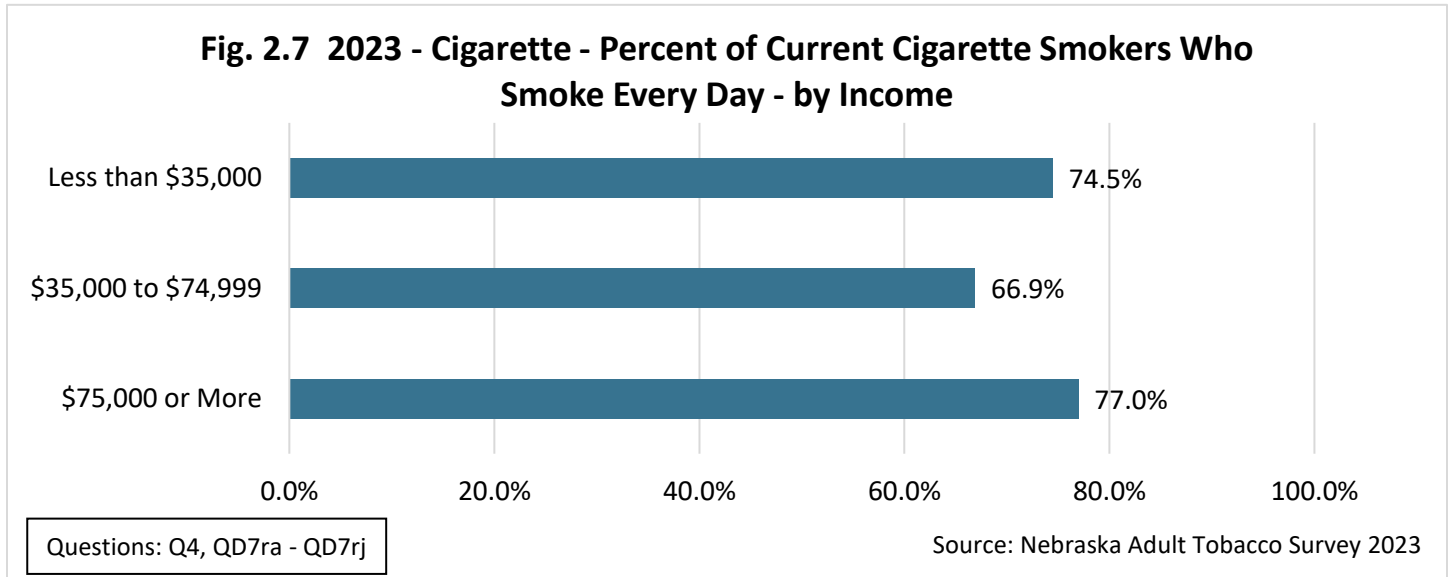


Questions: Q4, QD\_zip

Source: Nebraska Adult Tobacco Survey 2023

Current cigarette smokers from Omaha reported smoking every day (61.1%) at lower rates than other Nebraska regions, and Nebraskan cigarette smokers from Region 4 reported smoking every day (93.0%) at higher rates than other Nebraska regions.

Nebraskan cigarette smokers with an annual household income of \$35,000 to \$74,999 reported smoking every day at lower rates than those with higher or lower annual household incomes (Fig. 2.7).

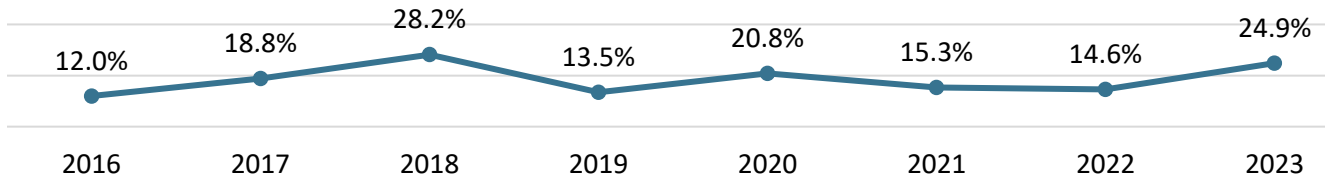


Nebraskan cigarette smokers with an annual household income of \$35,000 to \$74,999 reported smoking every day (66.9%) at lower rates than Nebraskans with higher or lower annual household incomes. There is little difference in daily smoking rates among Nebraskan cigarette smokers with an annual household income of less than \$35,000 (74.5%) and Nebraskan cigarette smokers with an annual household income of \$75,000 or more (77.0%).

## Time Before First Cigarette of the Day 2016-2023

Nicotine dependence rose in 2023 (Fig. 2.8).

**Fig. 2.8 2016-2023 - Nicotine Dependence: First Cigarette of the Day is Smoked Within the First Five Minutes of Waking - Nebraska**



Question: Q7

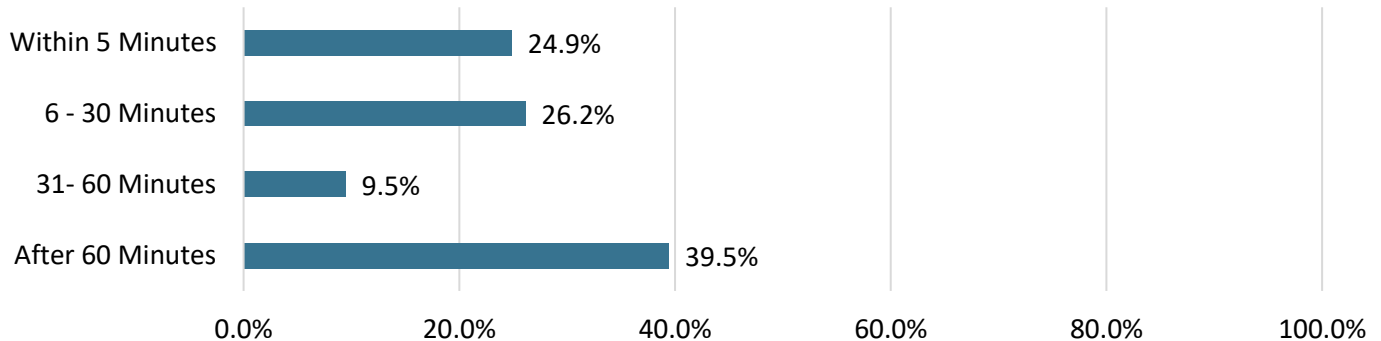
Source: Nebraska Adult Tobacco Survey 2023

An indicator of the extent an individual is dependent on nicotine is the urgency with which they need nicotine after waking in the morning. In 2016, 12.0% of the respondents indicated they used their first cigarette within five minutes of waking. In 2018, that heavily addicted population more than doubled to 28.2%, and dropped to 13.5% in 2019, before increasing again in 2020 to 20.8%, potentially related to the pandemic situation as the heavily addicted population dropped in 2021 to 15.3%, and again to 14.6% in 2022. In 2023 the rate of nicotine dependence rose again to 24.9%.

## Time Before First Cigarette of the Day

Roughly two-fifths of respondents reported having their first cigarette after 60 minutes of waking (Fig. 2.9).

**Fig. 2.9 2023 - Nicotine Dependence: How Soon After Waking Until First Cigarette - Nebraska**



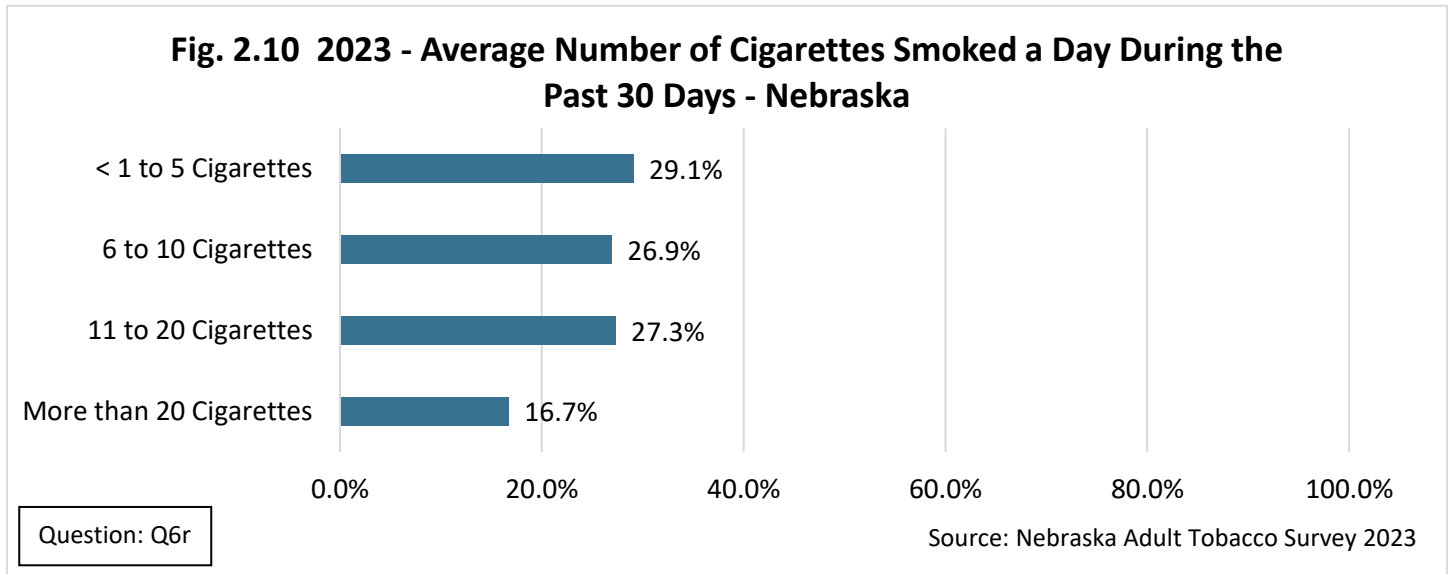
Question: Q7

Source: Nebraska Adult Tobacco Survey 2023

Roughly two-fifths (39.5%) of respondents reported having their first cigarette after 60 minutes of waking. About one-fourth have their first cigarette 6-30 minutes after waking (26.2%) or within 5 minutes of waking (24.9%). Less than 10.0% (9.5%) wait 31-60 minutes after waking to have their first cigarette.

## Average Number of Cigarettes Smoked a Day

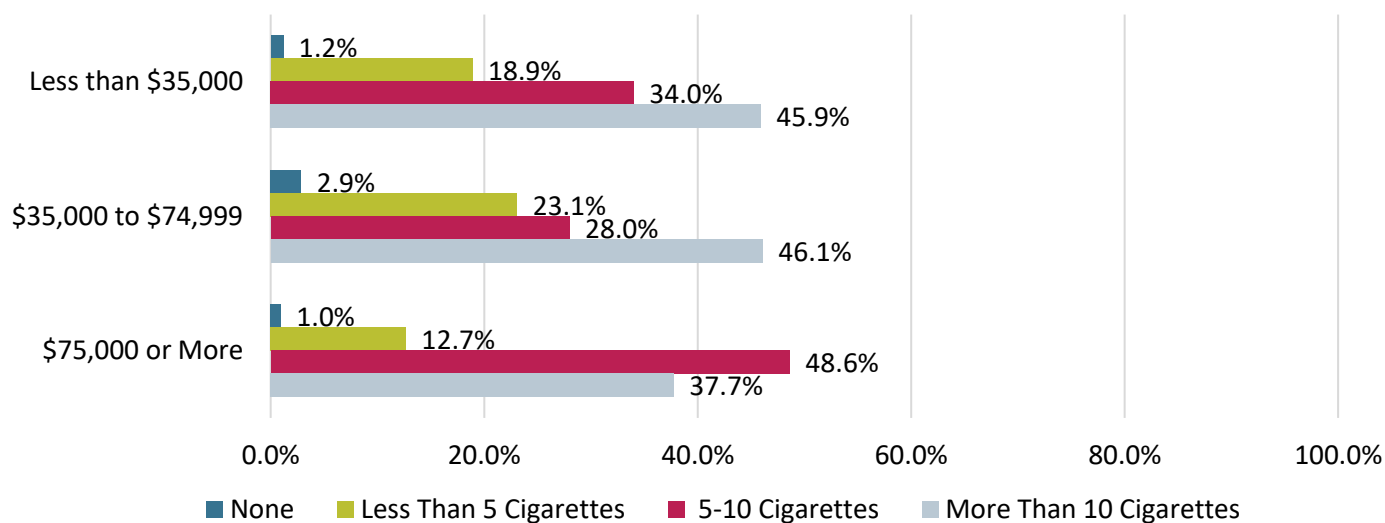
Roughly one-third of Nebraskan cigarette smokers consumed an average of less than 1 to 5 cigarettes each day that they smoked (Fig. 2.10).



For 29.1% of Nebraskan cigarette smokers, the average number of cigarettes smoked in a day is less than 1 cigarette to 5 cigarettes, while 16.7% smoke, on average, more than 20 cigarettes a day.

Cigarette smokers with an annual household income of \$35,000 to \$74,999 reported smoking, on average, more than 10 cigarettes each day at higher rates than those with higher or lower annual household incomes (Fig. 2.11).

**Fig. 2.11 2023 - Average Number of Cigarettes Smoked a Day During the Past 30 Days - by Income**



Questions: Q6r, QD7ra - QD7rj

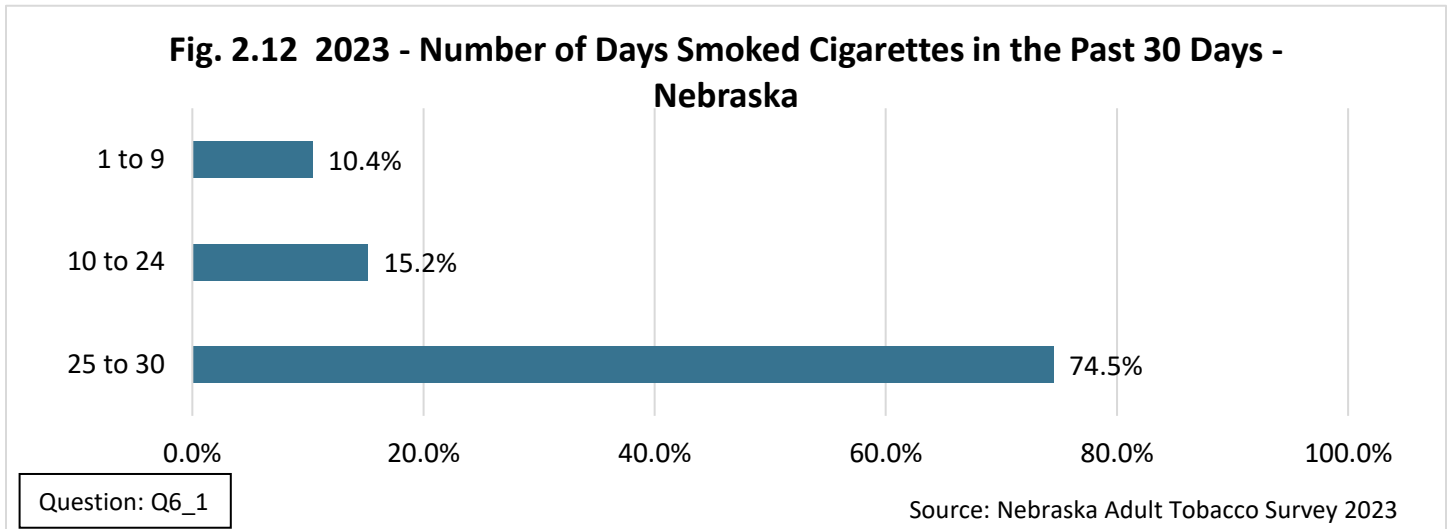
Source: Nebraska Adult Tobacco Survey 2023

Among those who reported smoking cigarettes either every day or some days, those with an annual household income of \$35,000 to \$74,000 reported, on average, smoking more than 10 cigarettes on days when they smoked during the past 30 days (46.1%) at a slightly higher rate than cigarette smokers with an annual household income less than \$35,000 (45.9%). Respondents with an annual household income of \$75,000 or more reported smoking an average of more than 10 cigarettes a day at lower rates (37.7%) than respondents with lower annual household incomes.



## Number of Days when Cigarettes Were Smoked

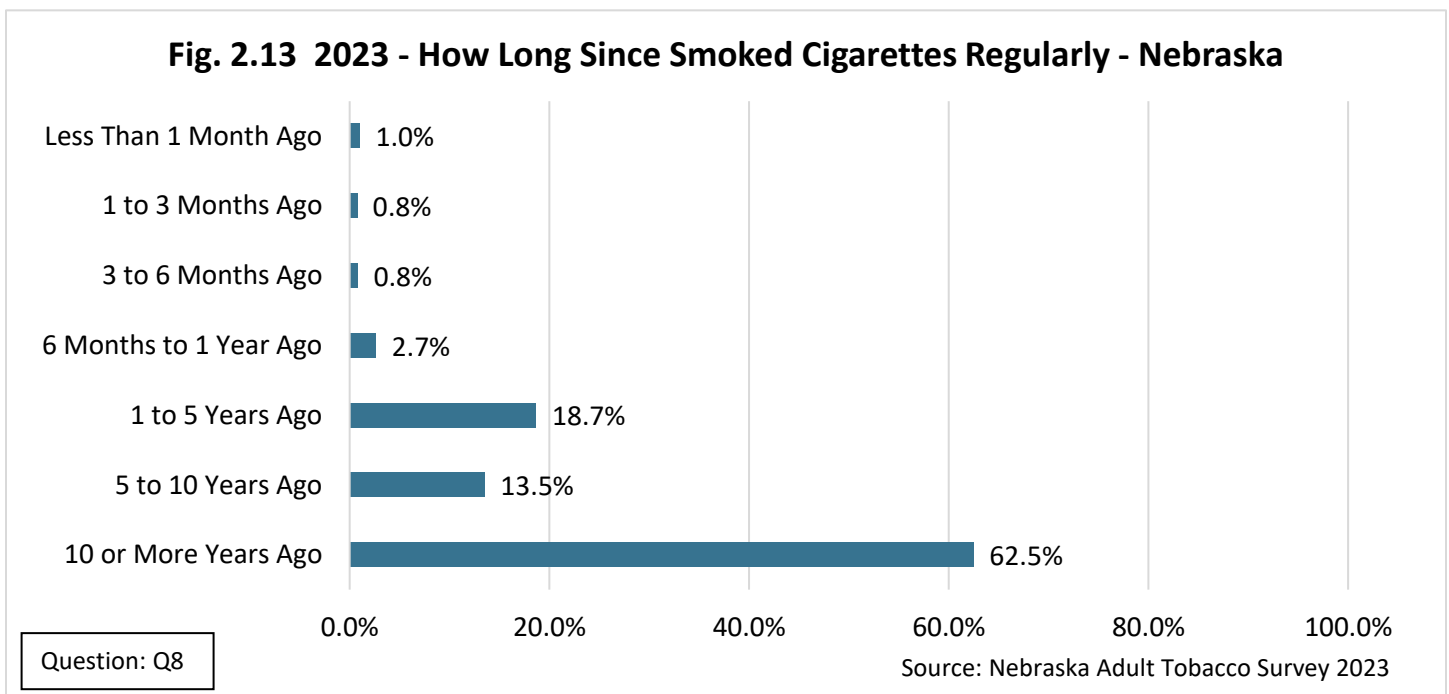
The majority of Nebraskan cigarette smokers have smoked on 25 to 30 days during the past 30 days (Fig. 2.12).



The majority (74.5%) of Nebraskan cigarette smokers reported smoking on 25 to 30 days during the past 30 days, indicating a dominant fraction of daily smokers. Some (15.2%) smoked on 10 to 24 days, while only 10.4% smoked on one to nine days.

## Length of Time Since Regularly Smoked

More than half of cigarette smokers have not smoked regularly for 10 years or more (Fig. 2.13).

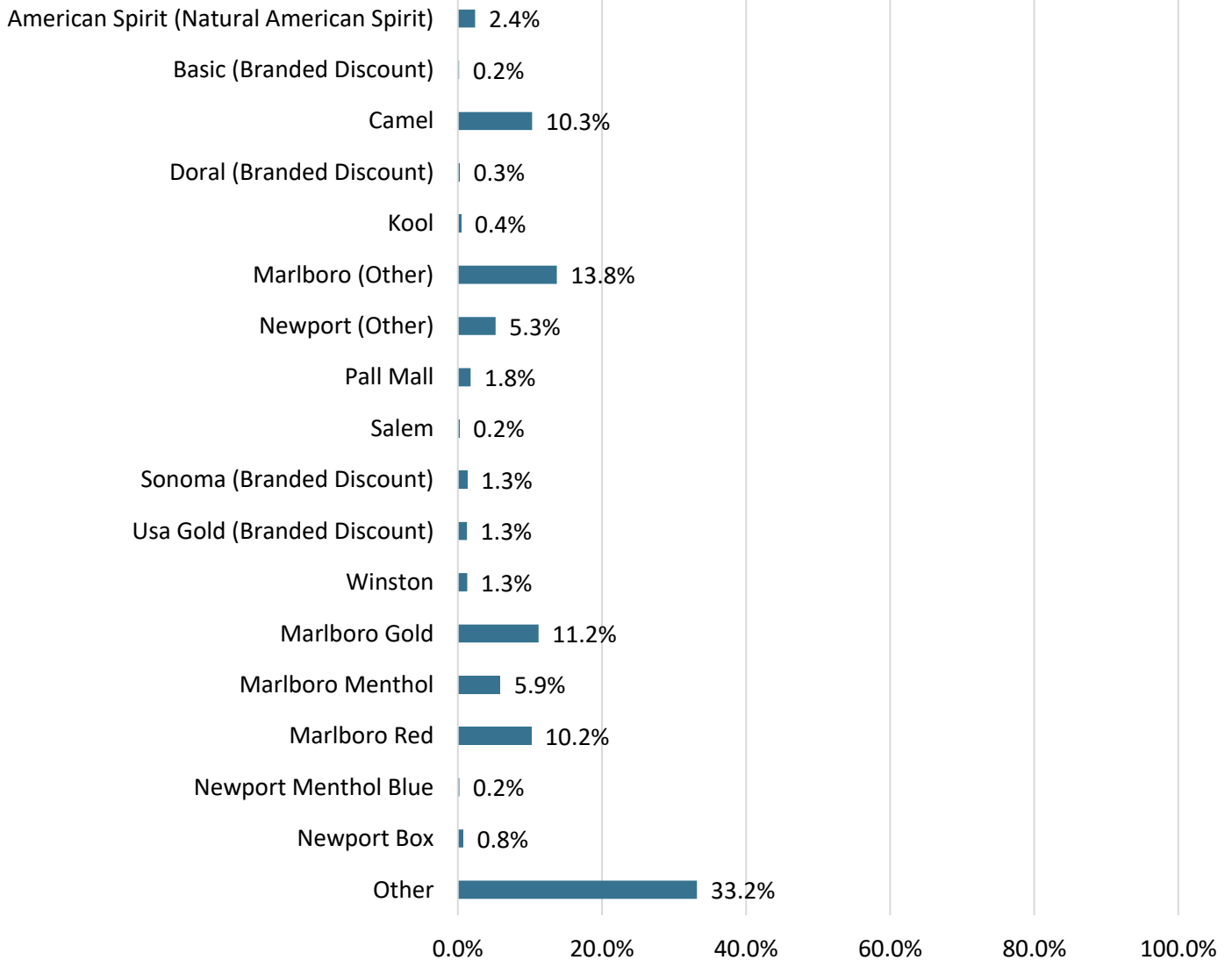


For most cigarette smokers (62.5%), it had been 10 or more years since they quit using the product regularly.

## Brand Smoked Most Often

The most common brands of cigarettes smoked during the past 30 days were Marlboro (Other), Marlboro Gold, or other brands not listed (Fig. 2.14).

**Fig. 2.14 2023 - Brand of Cigarette Smoked Most Often During the Past 30 Days - Nebraska**



Question: CgtBrnd

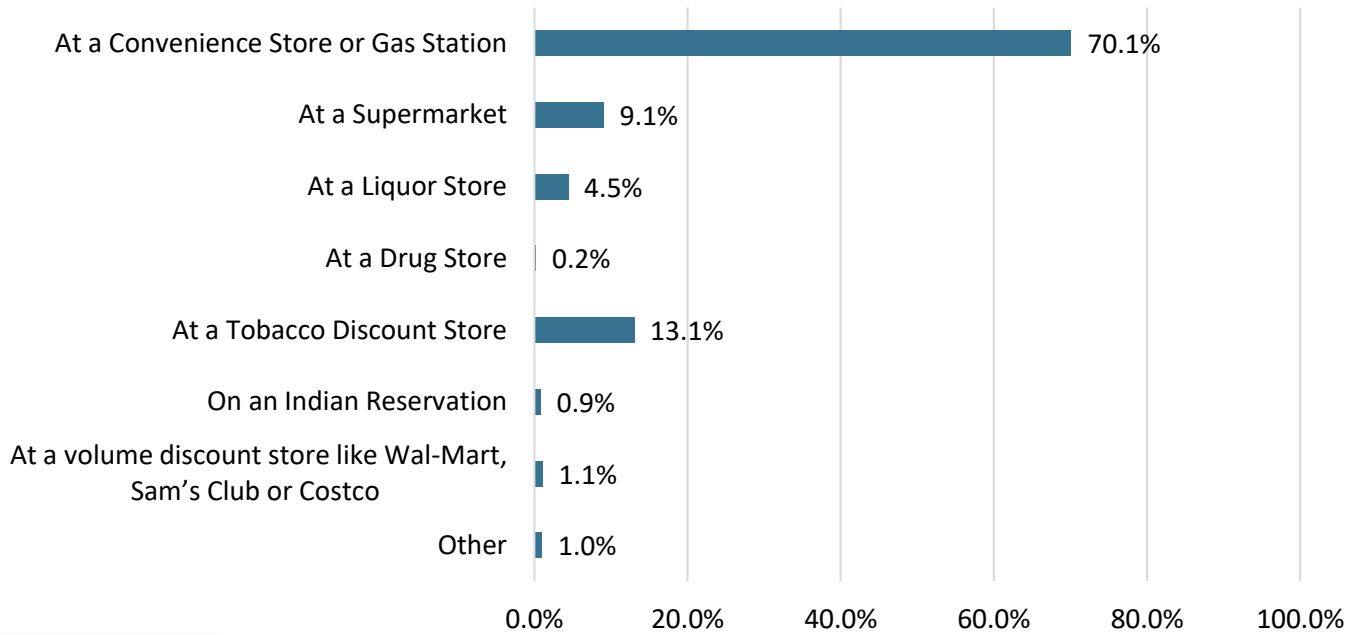
Source: Nebraska Adult Tobacco Survey 2023

The majority of cigarette smokers smoked a brand other than the brands listed (33.2%), followed by Marlboro (Other) (13.8%) and Marlboro Gold 11.2%.

## Location of Purchase

During the past 30 days, most cigarette smokers bought cigarettes for themselves at a convenience store or gas station (Fig. 2.15).

**Fig. 2.15 2023 - Where Cigarettes Were Most Often Purchased During the Past 30 Days - Nebraska**



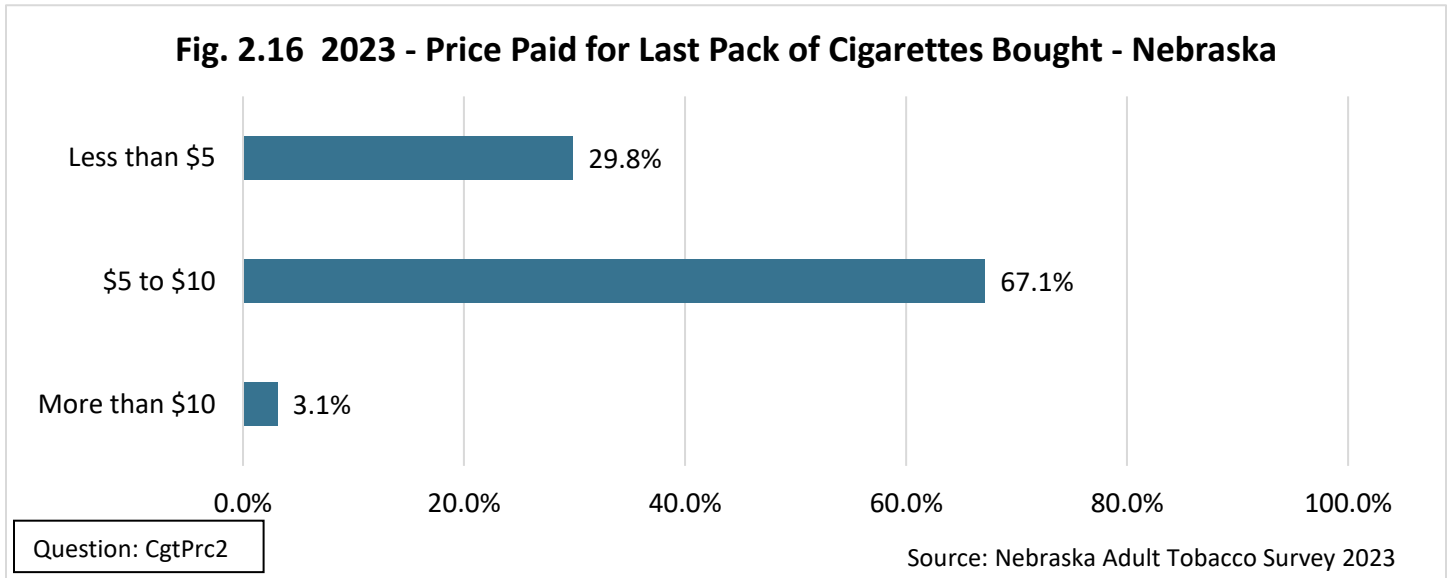
Question: CgtPlc1

Source: Nebraska Adult Tobacco Survey 2023

The majority of cigarette smokers (70.1%) bought their cigarettes from a convenience store or gas station, while 13.1% bought from a tobacco discount store.

## Price Paid for a Pack

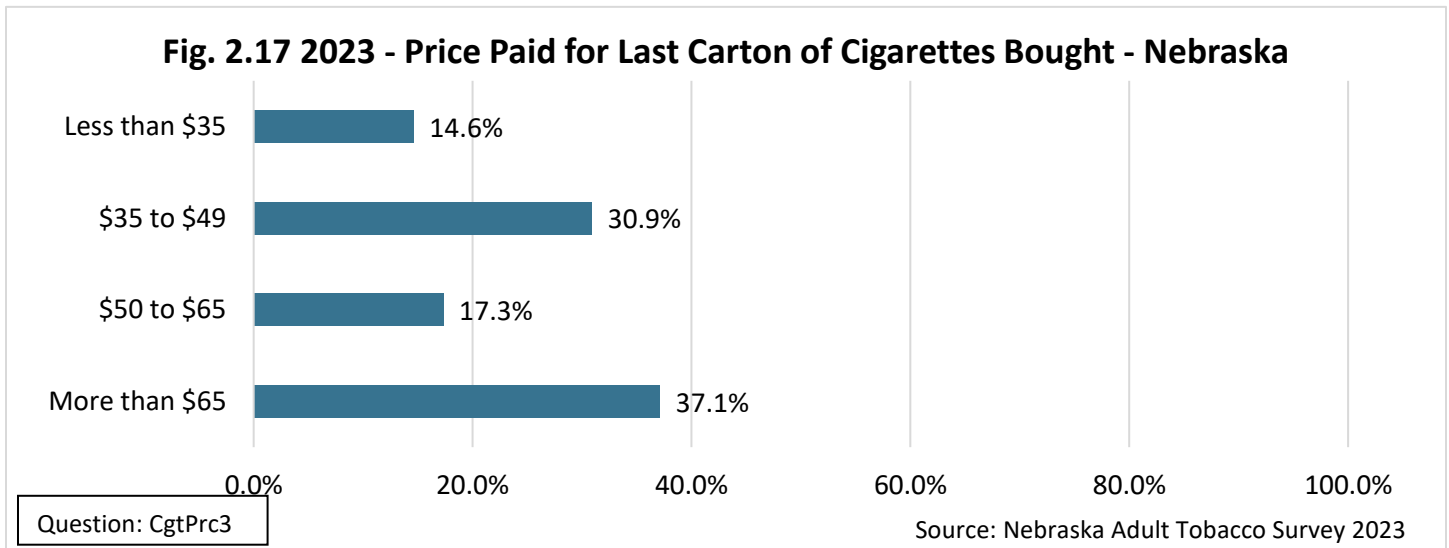
Most smokers paid \$5 to \$10 for a pack of cigarettes the last time they bought one for themselves (Fig. 2.16).



Those who paid \$5 to \$10 for a pack of cigarettes made up 67.1% of respondents, while those who paid less than \$5 made up 29.8% of respondents, and only 3.1% of respondents paid more than \$10.

## Price Paid for a Carton

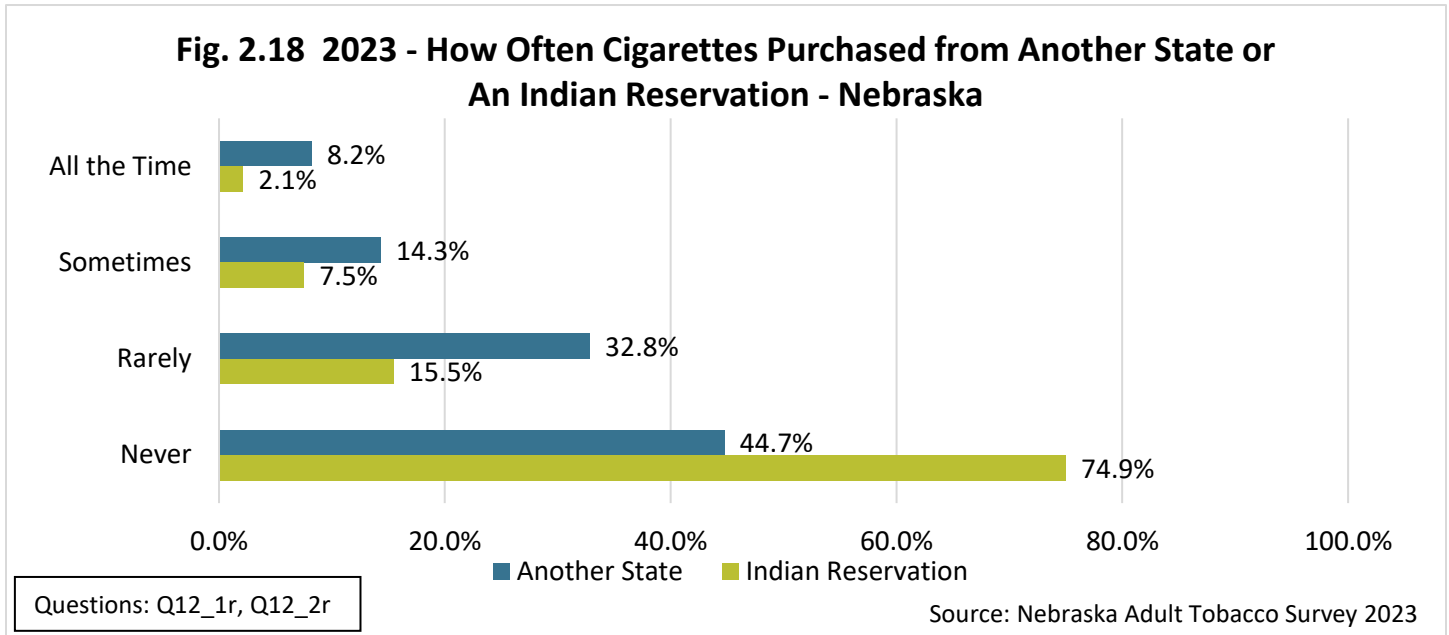
Over one in three cigarette smokers paid over \$65 for a carton of cigarettes the last time they bought one for themselves (Fig. 2.17).



Those who paid more than \$65 for a carton of cigarettes made up 37.7% of respondents. Those who paid less than \$35 made up 14.6% of respondents.

## Out of State and Indian Reservation Purchases

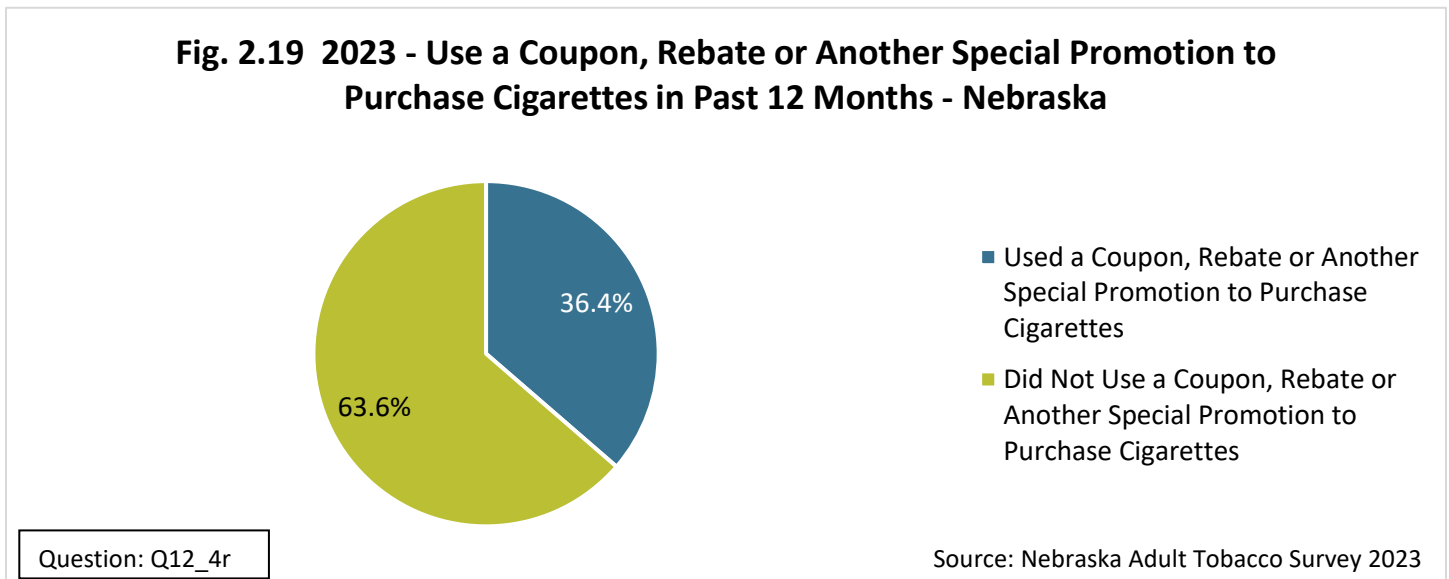
Few Nebraskan smokers regularly purchased cigarettes from another state or an Indian reservation (Fig. 2.18).



In 2023, over two-fifths (44.7%) of Nebraskan smokers indicated that they never purchase cigarettes from out of state, while roughly three-fourths (74.9%) never purchased cigarettes from an Indian reservation.

## Use of Coupons or Other Promotions

About one-third of cigarette smokers had taken advantage of coupons or other special promotions for cigarettes (Fig. 2.19).

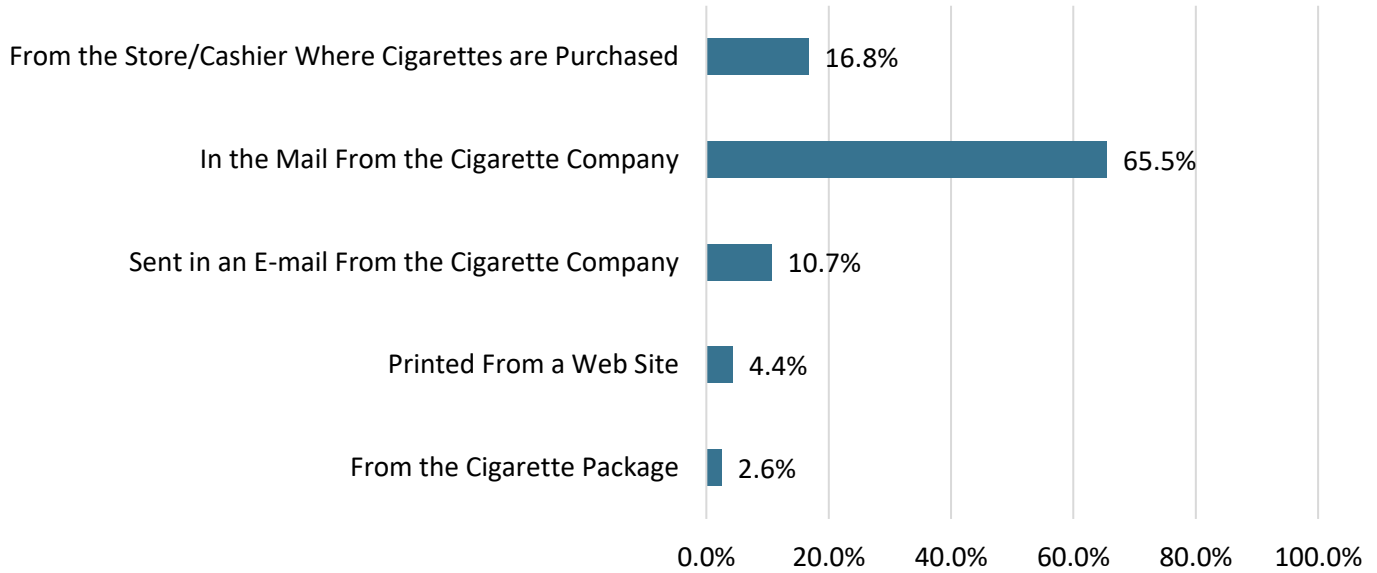


About one-third of cigarette smokers (36.4%) had taken advantage of promotions for cigarettes, while 63.6% had not.

## Source of Coupons

Almost half of current smokers who reported using coupons got the coupons through the mail from a cigarette company (Fig. 2.20).

**Fig. 2.20 2023 - Where Coupons Usually Come from - Nebraska**



Question: Q12\_4br

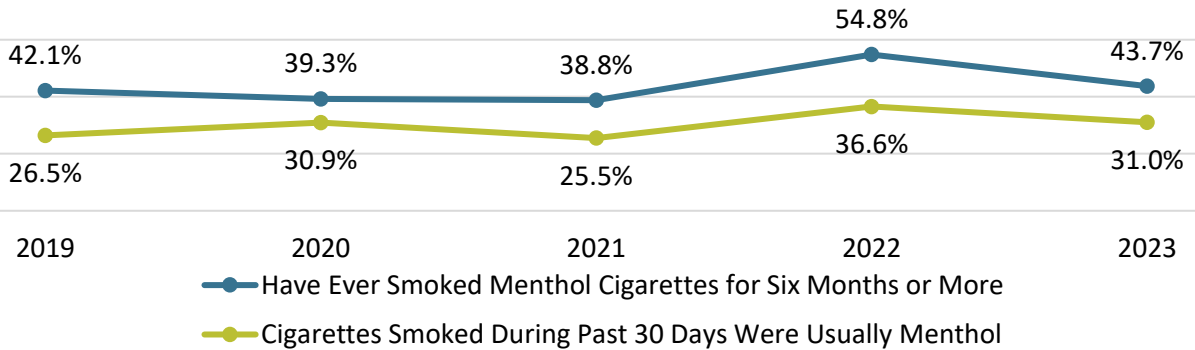
Source: Nebraska Adult Tobacco Survey 2023

About two-thirds (65.5%) of respondents who have used coupons to purchase cigarettes got their coupons in the mail from a cigarette company, while 16.8% got them from the store or cashier where they purchased their cigarettes.

## Use of Menthol Cigarettes

In 2023, two-fifths of cigarette smokers reported having ever used menthol cigarettes for six months or more, and just under one-third had smoked menthol cigarettes in the past 30 days (Fig. 2.21).

**Fig. 2.21 2019-2023 - Use of Menthol Cigarettes - Nebraska**



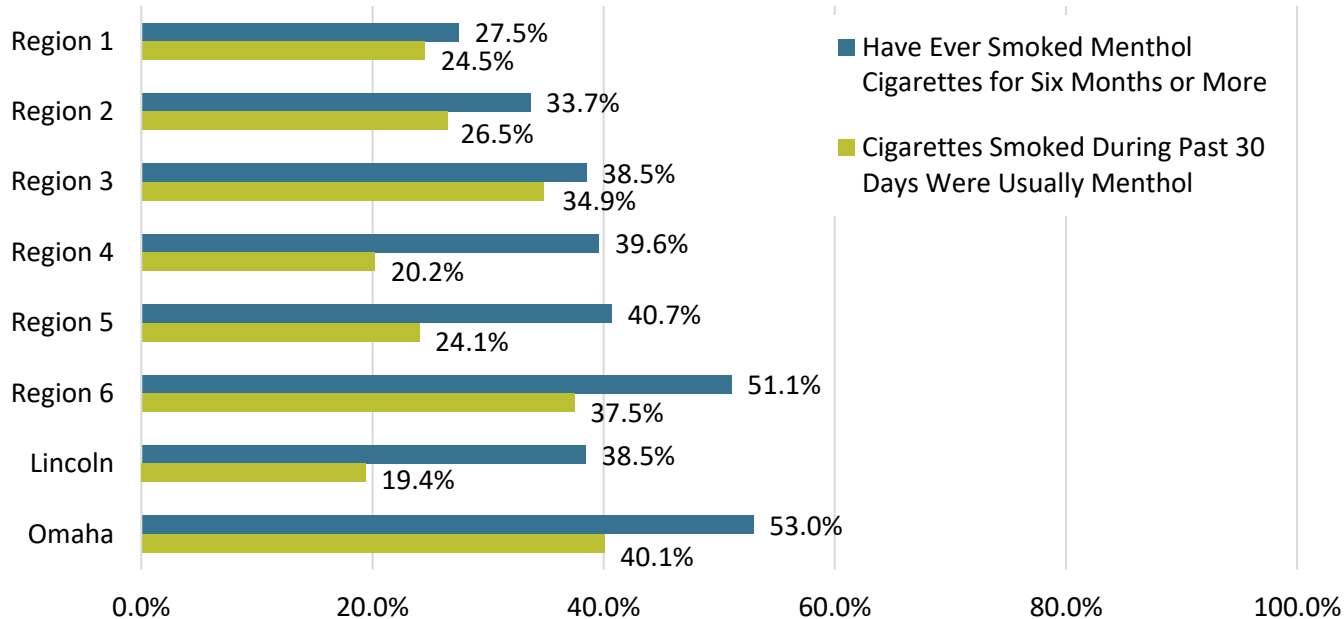
Questions: MENTREG, MENTH30

Source: Nebraska Adult Tobacco Survey 2023

Flavorings for combustible cigarettes were banned in the United States except for menthol, a type of flavoring similar to mint that also has a soothing effect for the smoker’s mouth, throat, and lungs. In 2023, two-fifths of respondents (43.7%) report having smoked menthol cigarettes for six months or more. Among that 43.7%, 31.0% of them usually smoked menthol cigarettes during the past 30 days.

Between roughly one-fourth to over half of Nebraskan cigarette smokers had ever used menthol cigarettes for six months or more across all Nebraska regions (Fig. 2.22).

**Fig. 2.22 2023 - Use of Menthol Cigarettes - by Region**



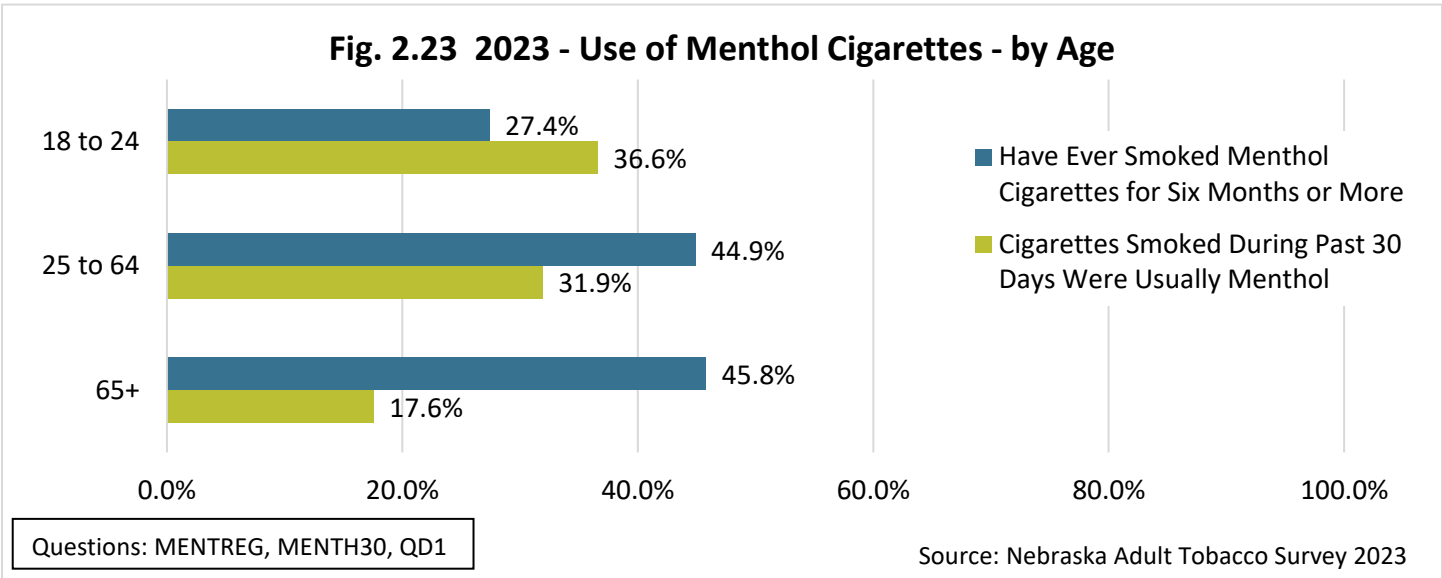
Questions: MENTREG, MENTH30, QD\_zip

Source: Nebraska Adult Tobacco Survey 2023

Some variation occurs in the rate of cigarette smokers who have ever used menthol cigarettes for six months or more across regions. The lowest rate (27.5%) occurs in Region 1 while the highest rate (53.0%) comes from Omaha. Similar variance occurs in the rate of cigarette smokers who usually smoked menthol cigarettes during the past 30 days, with the lowest rate (19.4%) coming from Lincoln and the highest rate (40.1%) coming from Omaha.



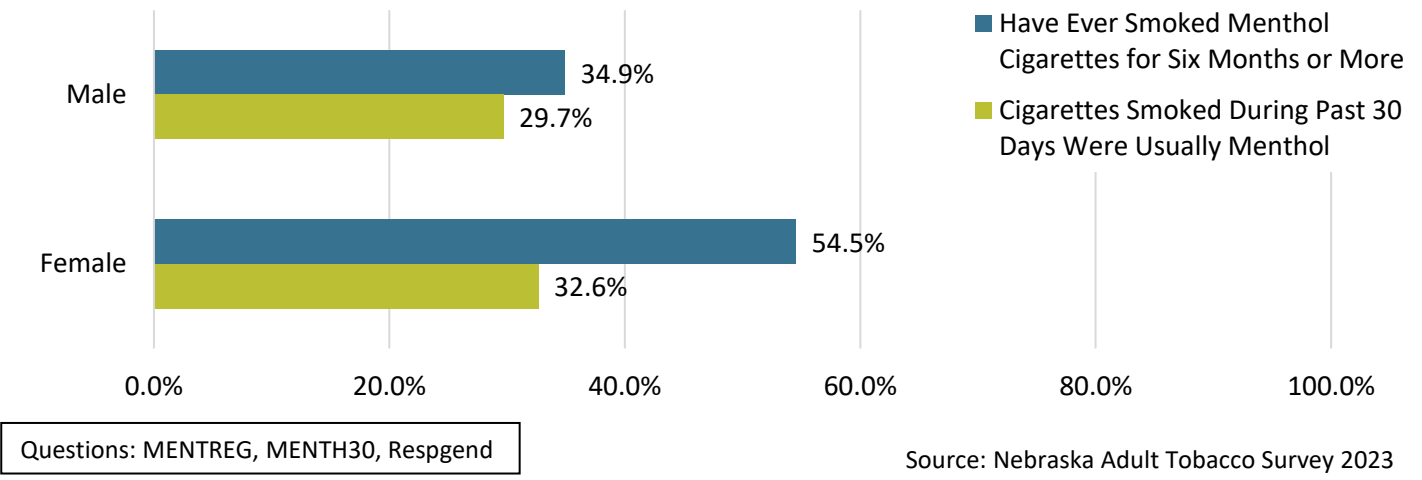
Cigarette smokers who are 25 years-old or older have used menthol cigarettes for six months or more at higher rates than those aged 18 to 24 (Fig. 2.23).



When looking at the prevalence of those who have ever smoked menthol cigarettes for 6 months or more across age groups, respondents aged 25 to 64 years old reported using menthol cigarette at a higher rate (44.9%) than 18 to 24 year-olds (27.4%), and at a similar rate to those aged 65 years or older (45.8%). As for the prevalence of those who usually smoked menthol cigarettes during the past 30 days, respondents aged 18 to 24 years reported smoking menthol cigarettes at higher rates (36.6%) than those aged 25 to 64 years (31.9%) and those 65 years-old or older (17.6%).

Women reported having ever smoked menthol cigarettes for six months or more and indicated usually smoking menthol cigarettes during the past 30 days at higher rates than men (Fig. 2.24).

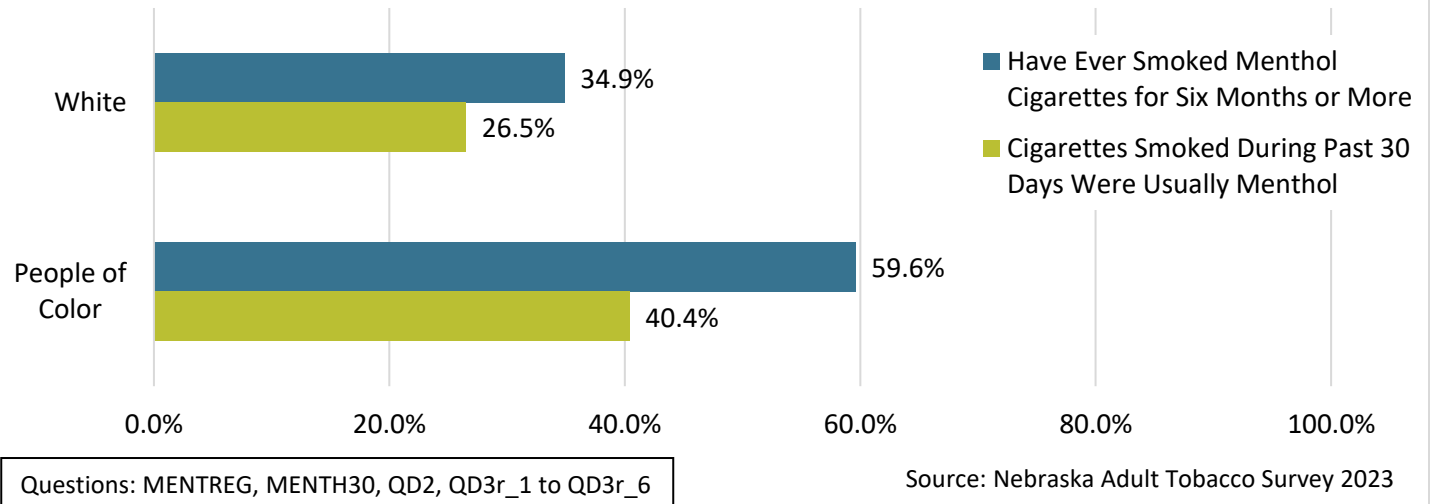
**Fig. 2.24 2023 - Use of Menthol Cigarettes - by Gender**



Menthol use is more prevalent among women (54.5%) than men (34.9%), among those who ever smoked menthol cigarettes for six months or more. Similarly, women (32.6%) reported higher rates of using menthol cigarettes than men (29.7%) during the past 30 days.

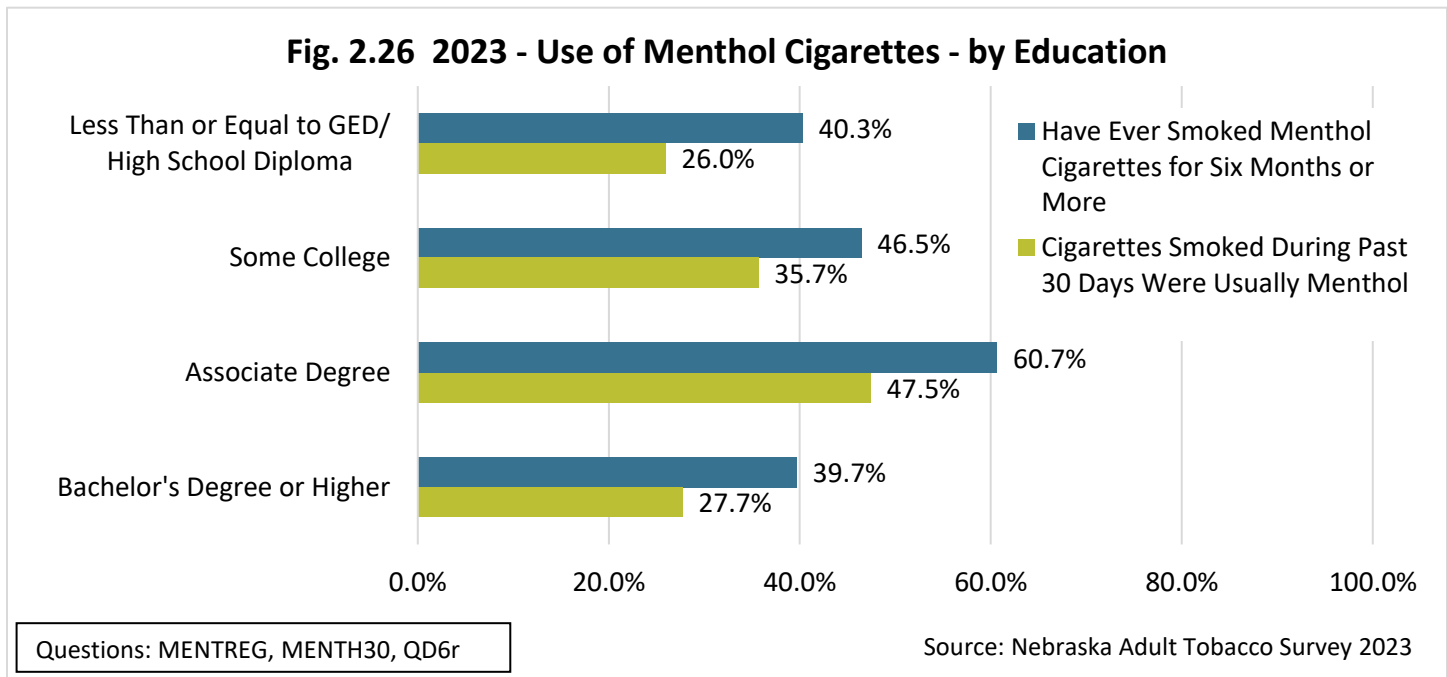
Nebraskans of Color reported having smoked menthol cigarettes for six months or more and usually smoking menthol cigarettes during the past 30 days at higher rates than White Nebraskans (Fig. 2.25).

**Fig. 2.25 2023 - Use of Menthol Cigarettes - by Race**



People of Color (59.6%) reported having ever smoked menthol cigarettes for six months or more at higher rates than White respondents (34.9%). Nebraskans of Color who smoke cigarettes also reported usually smoking menthol cigarettes during the past 30 days (40.4%) at higher rates than White Nebraskans (26.5%).

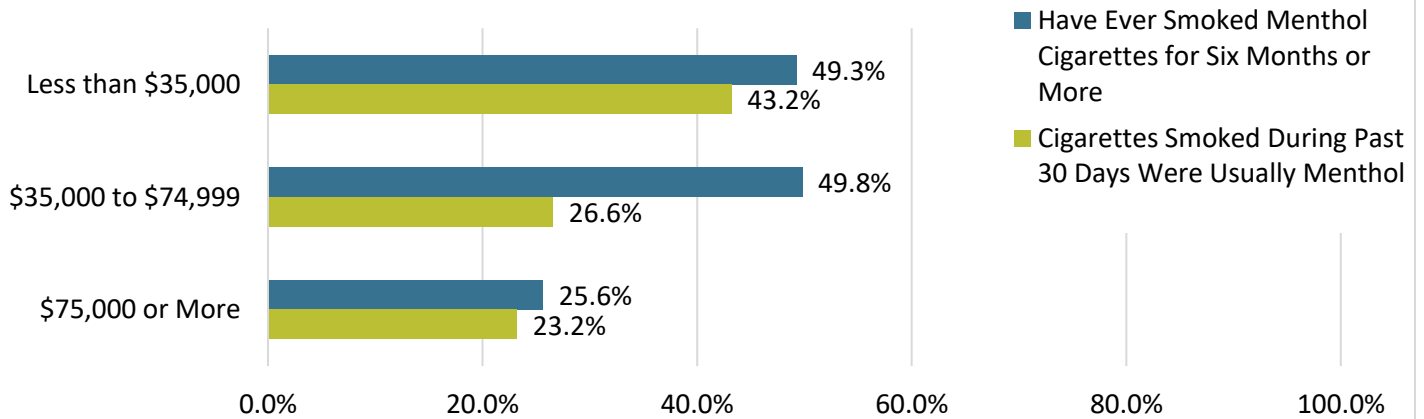
Across education levels, respondents with a bachelor’s degree or higher reported the lowest rate for having ever smoked menthol cigarettes for six months or more, while those with less than or equal to a GED/High School Diploma had lower rates of usually smoking menthol cigarettes during the past 30 days (Fig. 2.26).



Cigarette smokers with an associate degree (60.7%) reported the highest rate of smokers who have ever smoked menthol cigarettes for six months or more, while cigarette smokers with a bachelor’s degree or higher (39.7%) reported the lowest rate across education categories. Nebraskan cigarette smokers with an associate degree reported usually smoking menthol cigarettes during the past 30 days (47.5%) at higher rates than respondents from any other education category. Respondents with an education level less than or equal to a GED/High School Diploma reported usually smoking menthol cigarettes during the past 30 days (26.0%) at lower rates than respondents with other levels of educational attainment.

Respondents with an annual household income of \$75,000 or more reported having ever smoked menthol cigarettes for six months or more and usually smoking menthol cigarettes during the past 30 days at lower rates than those with an annual household income less than \$75,000 (Fig. 2.27).

**Fig. 2.27 2023 - Use of Menthol Cigarettes - by Income**



Questions: MENTHREG, MENTH30, QD7ra - QD7rj

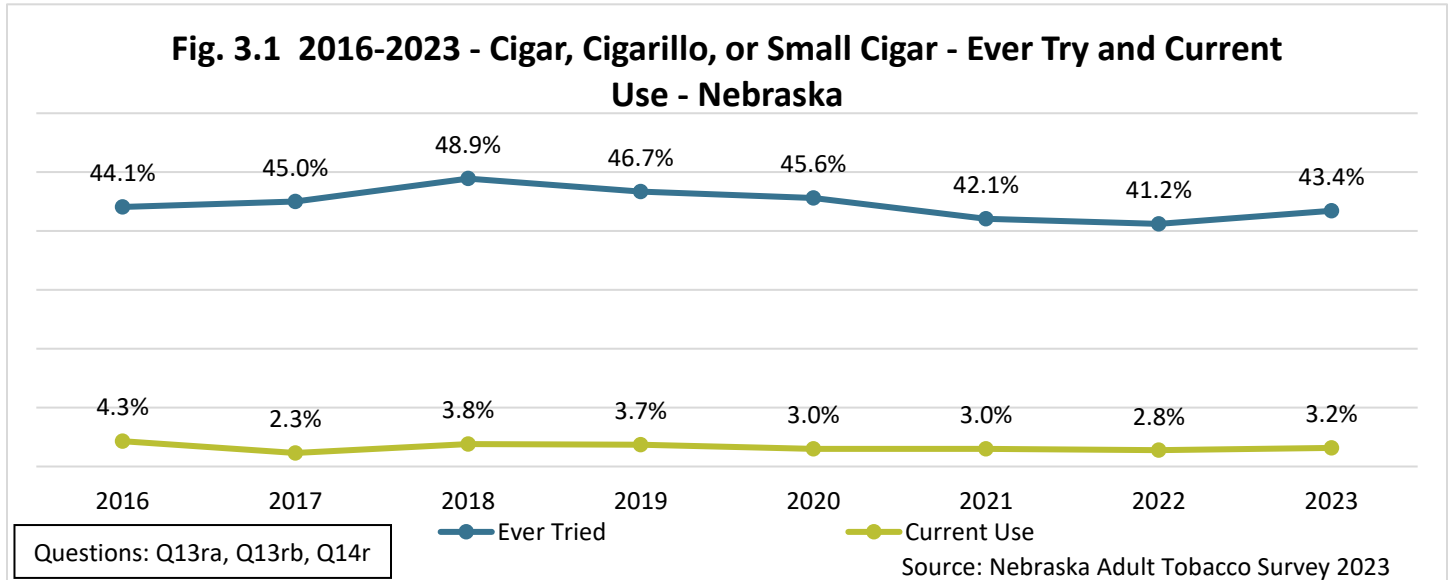
Source: Nebraska Adult Tobacco Survey 2023

Of cigarette smokers whose annual household income is less than \$35,000, 49.3% indicated that they have ever smoked menthol cigarettes for six months or more. A similar rate (49.8%) can be observed for smokers with an annual household income of \$35,000 to \$74,999, while a lower rate (25.6%) is seen among those whose annual household income is \$75,000 or more. Cigarette smokers with an annual household income of less than \$35,000 (43.2%) reported the highest use rate of menthol cigarettes during the past 30 days. This drops to 26.6% among smokers with an annual household income of \$35,000 to \$74,999 and drops again to only 23.2% among those with an annual household income of \$75,000 or more.

## Cigar Smoking

### Ever Tried and Current Use of Cigar/Cigarillo/Small Cigar

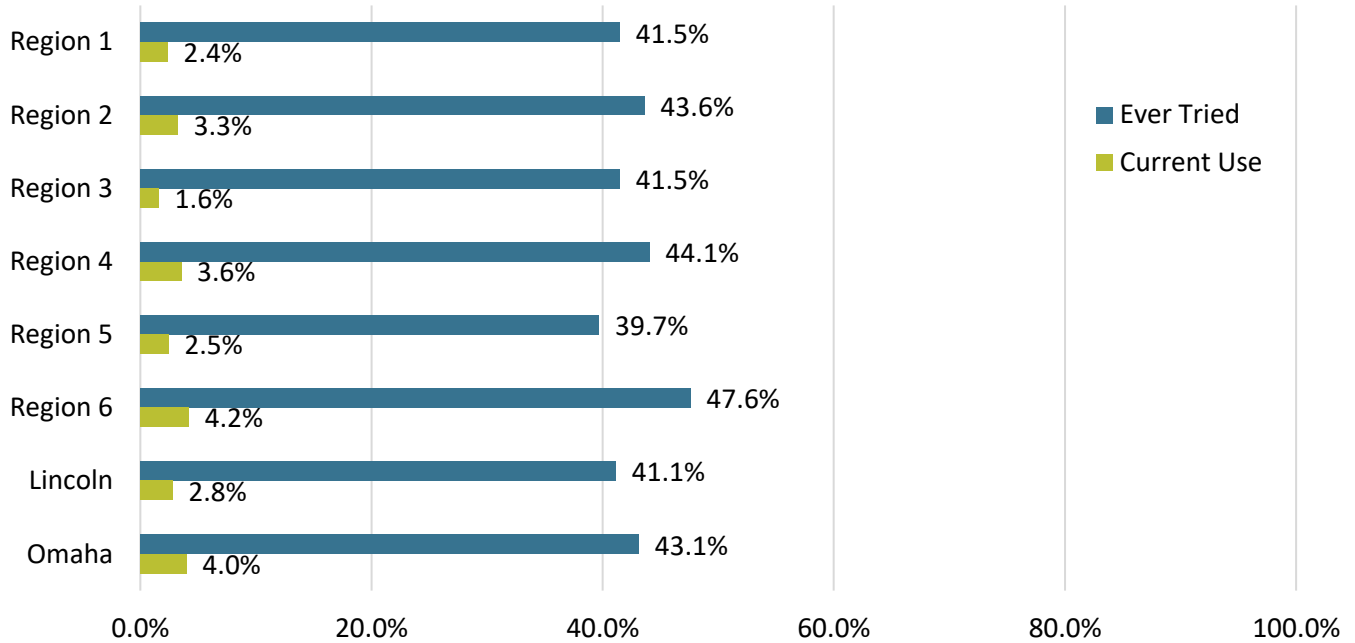
Around two-fifths of the respondents had tried a cigar, cigarillo, or small cigar in 2023, but a much smaller portion of the respondents were current users (Fig. 3.1).



The rate of Nebraskans who have ever tried or currently use cigars, cigarillos, or small cigars has remained relatively stable over the measurement period, with 43.4% of 2023 respondents reporting that they have ever tried cigars, cigarillos, or small cigars and 3.2% are current cigar, cigarillo, or small cigar smokers.

Respondents from Region 6 reported higher rates of having ever smoked and being current users of cigars, cigarillos, or small cigars than other Nebraska regions (Fig. 3.2).

**Fig. 3.2 2023 - Cigar, Cigarillo, or Small Cigar - Ever Try and Current Use - by Region**



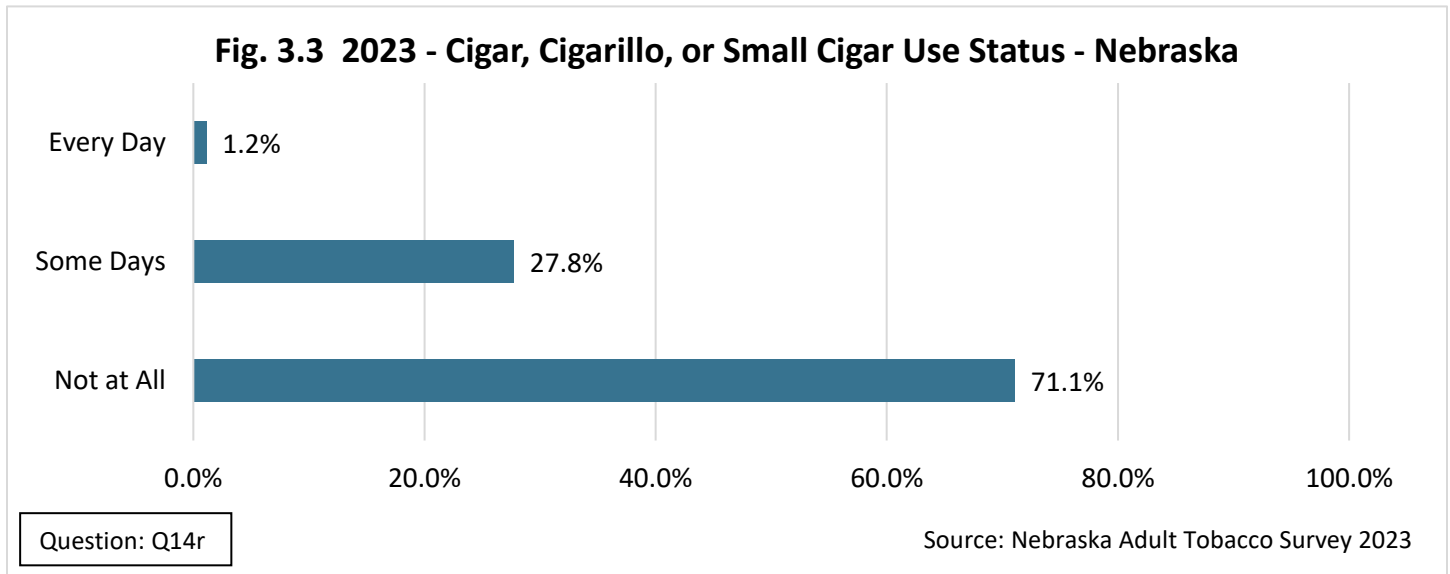
Questions: Q13ra, Q13rb, Q14r, QD\_zip

Source: Nebraska Adult Tobacco Survey 2023

Respondents from Region 6 reported having ever smoked a cigar, cigarillo, or small cigar (47.6%) and being current users of cigars, cigarillos, or small cigars (4.2%) at higher rates than respondents from other Nebraska regions. Region 5 reported the lowest rate of respondents who have ever smoked a cigar, cigarillo, or small cigar (39.7%) while Region 3 reported the lowest rate of current cigar, cigarillo, or small cigar users (1.6%).

## Currently Smoke Cigars, Cigarillos, or Small Cigars

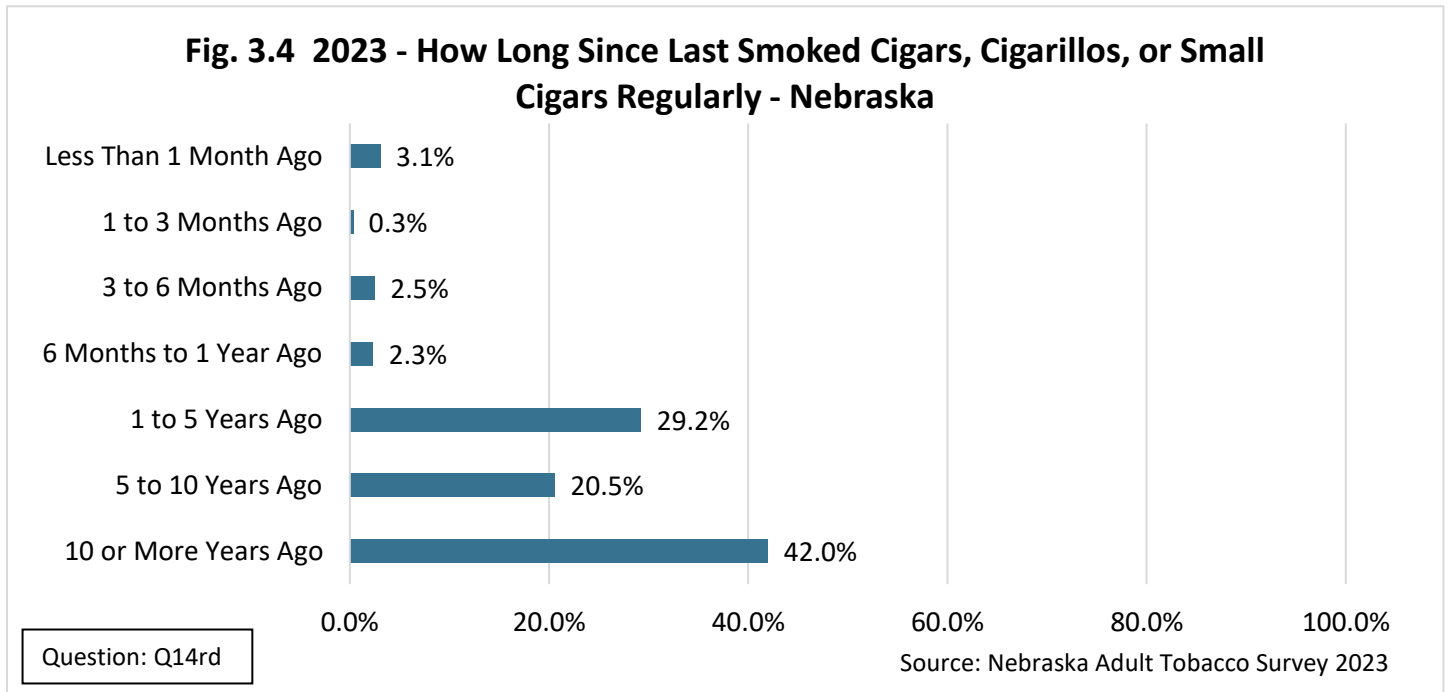
Most adults who have smoked at least 50 cigars, cigarillos, or small cigars in their lifetime currently do not smoke cigars, cigarillos, or small cigars at all (Fig. 3.3).



Adults who indicated that they have smoked at least 50 cigars, cigarillos, or small cigars in their lifetime were asked about their current cigar use. While the majority of this population indicated that they currently do not smoke cigars, cigarillos, or small cigars at all (71.1%), 27.8% reported smoking them on some days and another 1.2% reported smoking them every day.

## Length of time Since Last Regularly Smoked

About two-fifths of former cigar, cigarillo, or small cigar smokers have not smoked the product regularly for 10 years or more (Fig. 3.4).



For a sizable proportion of former cigar, cigarillo, or small cigar smokers, (42.0%) it has been 10 or more years since they quit using the product regularly. An additional 29.2% reported that it had been one to five years since using the product regularly.



## Use Flavored Cigars, Cigarillos, or Small Cigars

The use of flavored cigars, cigarillos, or small cigars among current users is relatively small (Fig. 3.5).

**Fig. 3.5 2023 - Percentage of Cigar, Cigarillo, or Small Cigar Smokers Who Use Flavored Products - Nebraska**



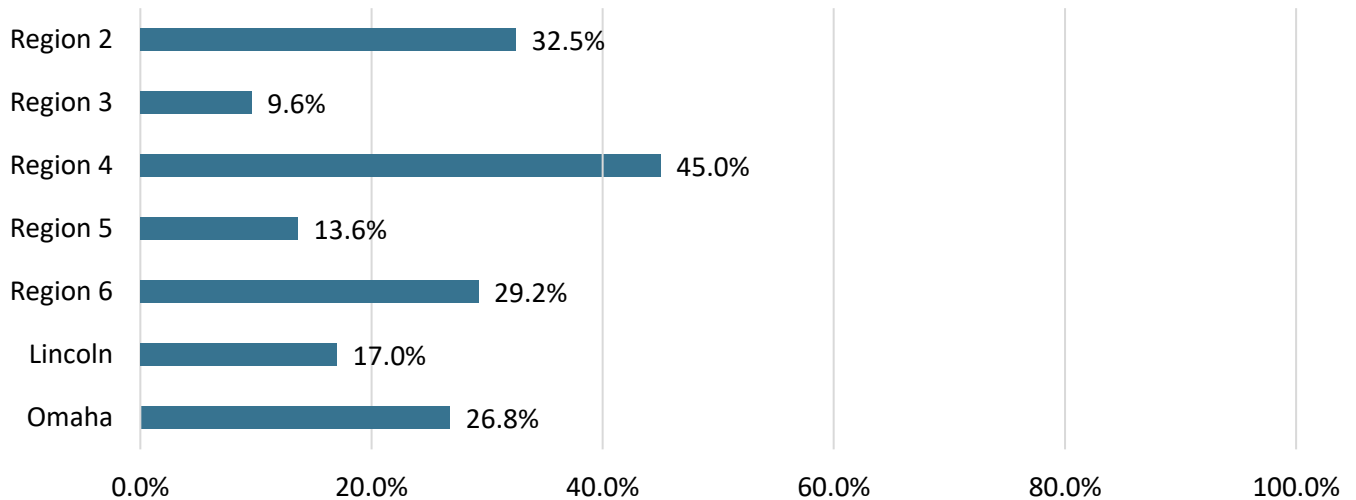
Question: Q14rer

Source: Nebraska Adult Tobacco Survey 2023

The majority (73.9%) of Nebraskans who reported smoking cigars, cigarillos, or small cigars stated that they do not use flavored versions of these products.

The use of flavored cigars, cigarillos, or small cigars among those who use these products varies across regions (Fig. 3.6).

**Fig. 3.6 2023 - Percentage of Cigar, Cigarillo, or Small Cigar Smokers Who Use Flavored Products - by Region**

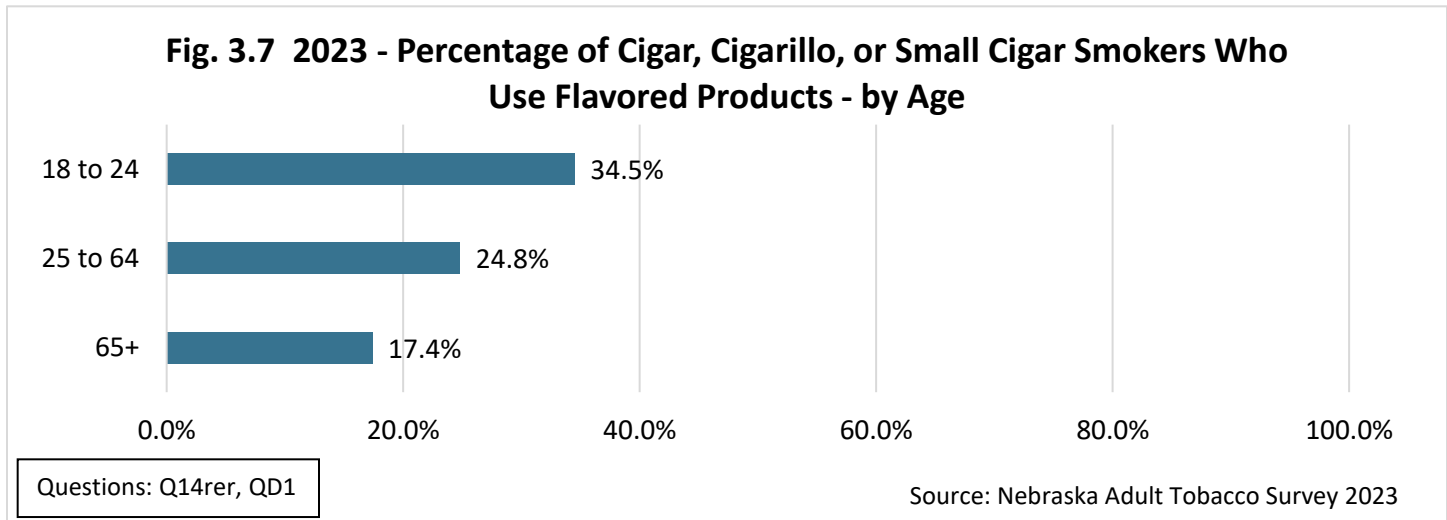


Questions: Q14rer, QD\_zip

Source: Nebraska Adult Tobacco Survey 2023

Nebraskans who reported smoking flavored cigars, cigarillos, or small cigars range from 9.6% (Region 3) to nearly half (45.0%) in Region 4. Region 1 is not included in this analysis due to its extremely low frequency.

There appears to be a correlation between age and the use of flavored cigars, cigarillos, or small cigars (Fig. 3.7).

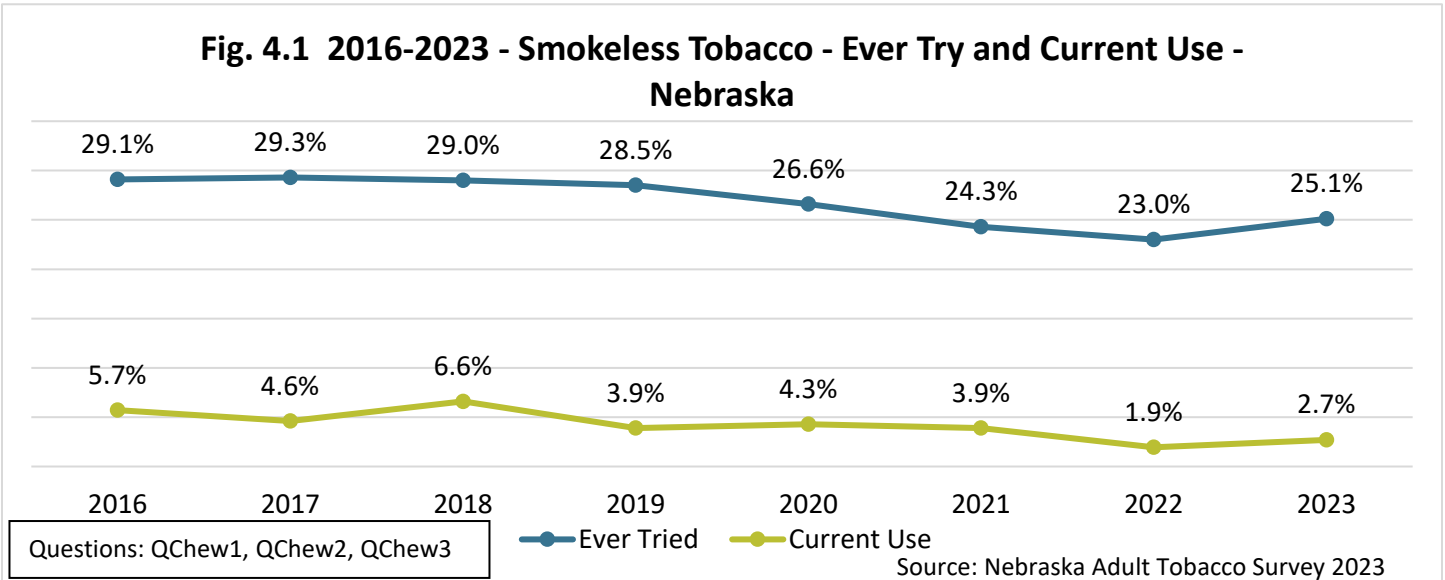


Respondents aged 18 to 24 (34.5%) were vastly more likely to report using flavored cigars, cigarillos, or small cigars compared to their counterparts aged 25 to 64 (24.8%) and those aged 65 or older (17.4%).

## Smokeless Tobacco

### Ever Tried and Current Use 2016-2023

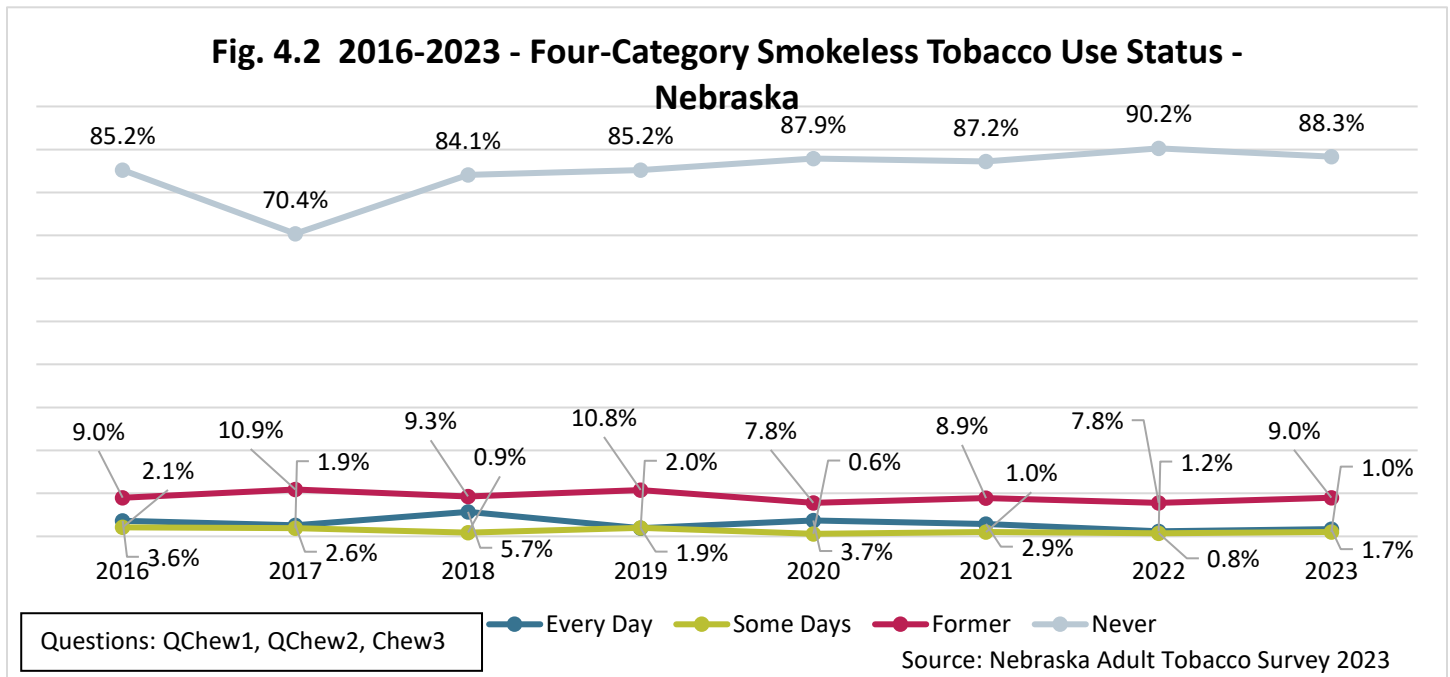
The proportion of respondents who reported having tried smokeless tobacco steadily declined from 2017 to 2022 then increased in 2023 (Fig. 4.1).



In 2023, 2.7% of respondents indicated current smokeless tobacco use. Respondents indicating having ever tried smokeless tobacco steadily declined between 2017 (29.3%) and 2022 (23.0%) then rose to 25.1% in 2023.

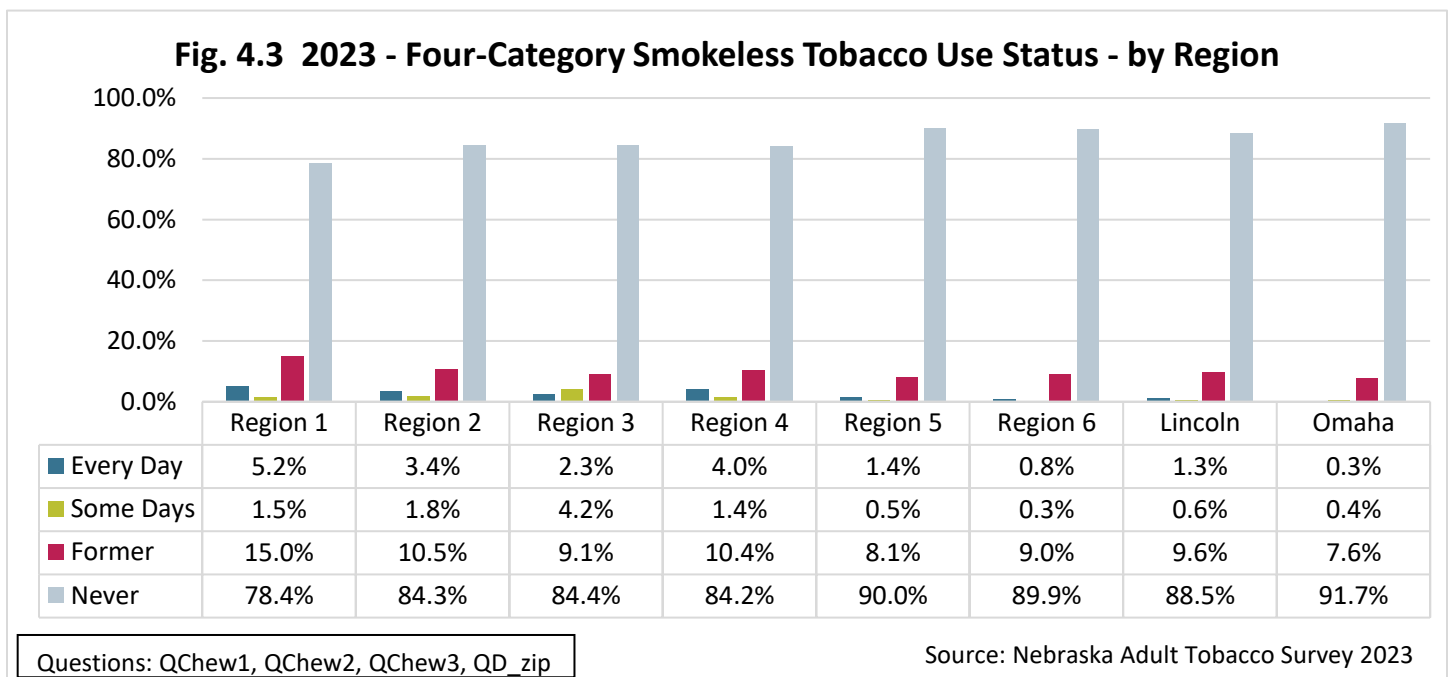
## Smokeless Tobacco Use Status 2016-2023

Respondents who indicated having never used smokeless tobacco declined in 2023 (Fig. 4.2).



The rate of respondents who indicated having never used smokeless tobacco dropped from 90.2% in 2022 to 88.3% in 2023.

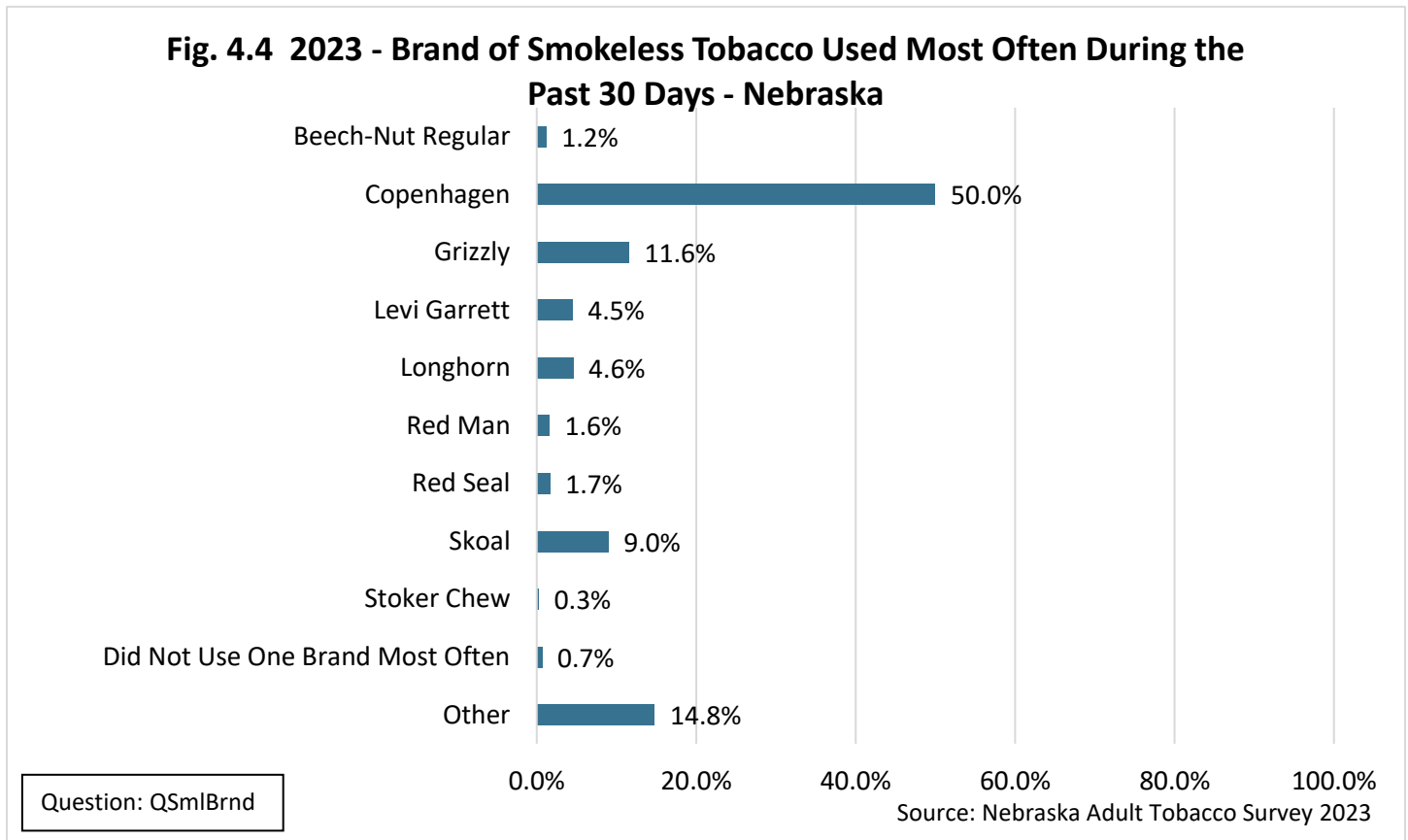
Most Nebraskans reported never using smokeless tobacco regardless of region (Fig. 4.3).



While most Nebraskans reported that they have never used smokeless tobacco, a higher rate of respondents from Region 1 indicated that they have formerly used smokeless tobacco (15.0%) than respondents in other regions. Region 1 also has the highest rate of respondents who currently use smokeless tobacco either every day or some days (6.7%).

### Brand Used Most Often

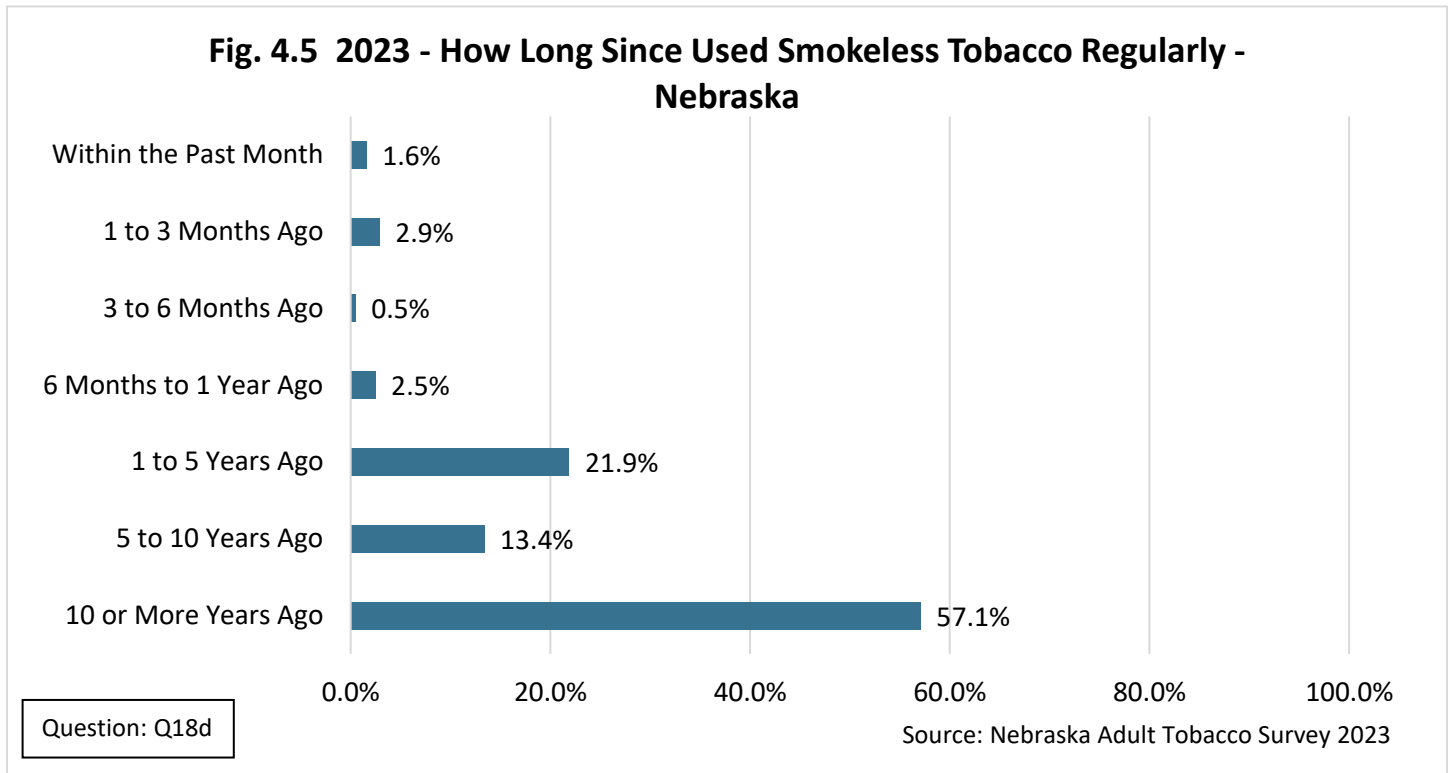
Smokeless tobacco users reported having used Copenhagen, Grizzly, or other brands not listed more frequently



Half of smokeless tobacco users used Copenhagen (50.0%), followed by a brand not listed (14.8%), then Grizzly (11.6%) most often during the past 30 days.

## Length of Time Since Used Regularly

For most smokeless tobacco users, it had been 10 or more years since they last used the product regularly (Fig. 4.5).

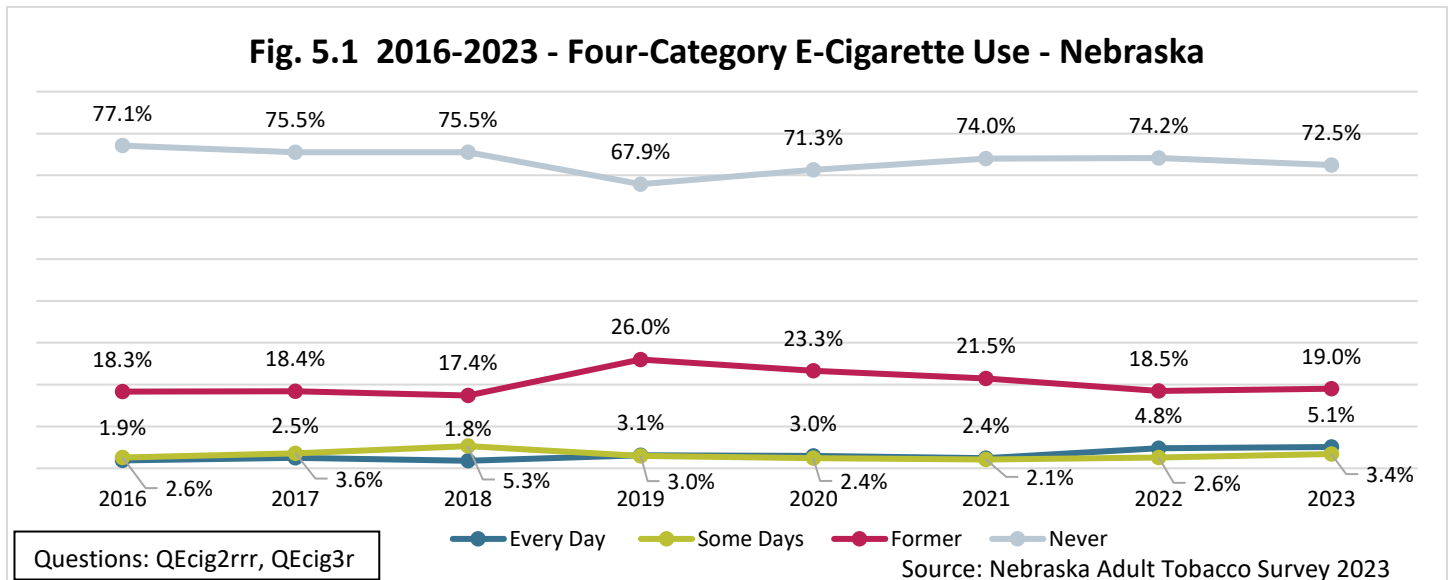


The length of time passed since smokeless tobacco users have used the product regularly ranges from within the past month (1.6%) to 10 or more years ago (57.1%).

## E-Cigarette Use

### E-Cigarette Use Status 2016-2023

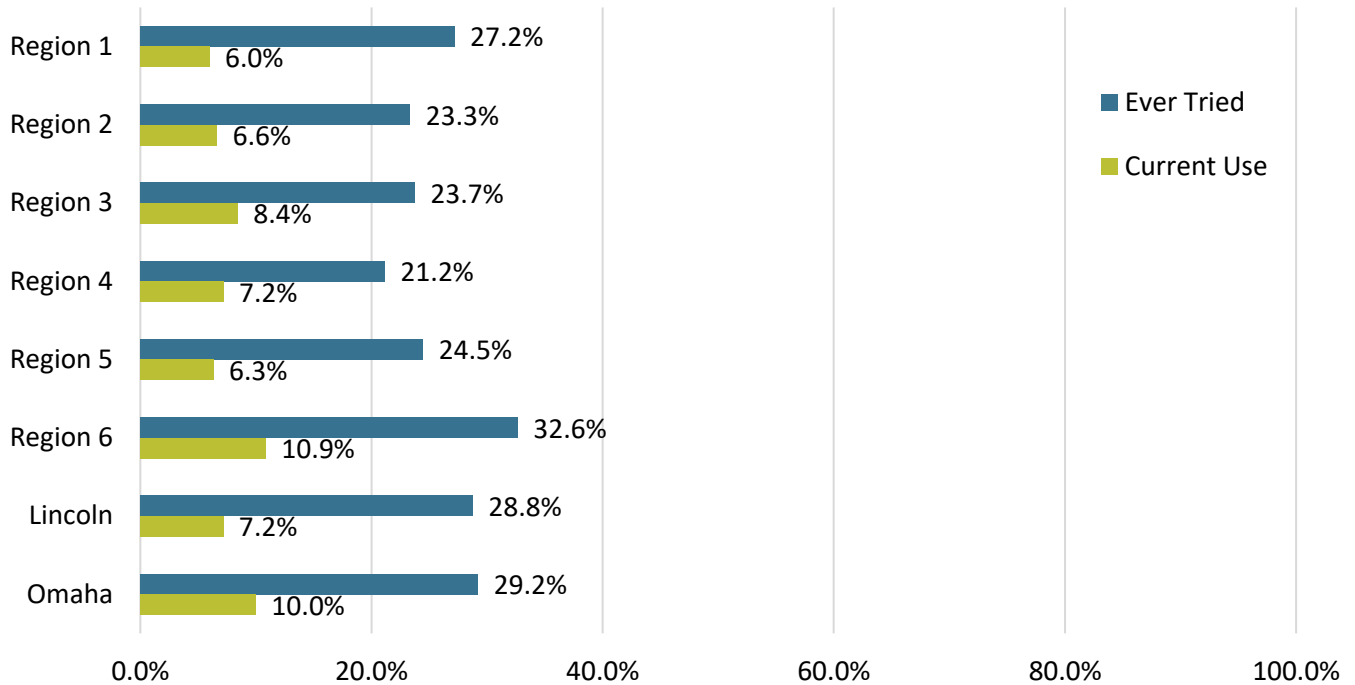
The use of e-cigarettes has remained relatively stable during its documentation period (Fig. 5.1).



The number of adults in Nebraska who report having never used e-cigarettes steadily rose from 67.9% in 2019 to 74.2% in 2022 then decreased slightly in 2023 to 72.5%. Less than one-fifth (19.0%) of the 2023 population are former e-cigarette users. In 2023, the rate of those who reported using e-cigarettes every day (5.1%) increased from 4.8% in 2022, and the rate of those who reported using e-cigarettes some days (3.4%) increased from 2.6% in 2022.

Rates of ever having tried an e-cigarette range from 21.2% to 32.6% between regions (Fig. 5.2).

**Fig. 5.2 2023 - E-Cigarette - Ever Try and Current Use - by Region**



Questions: QEcig2rrr, QEcig3r, QD\_zip

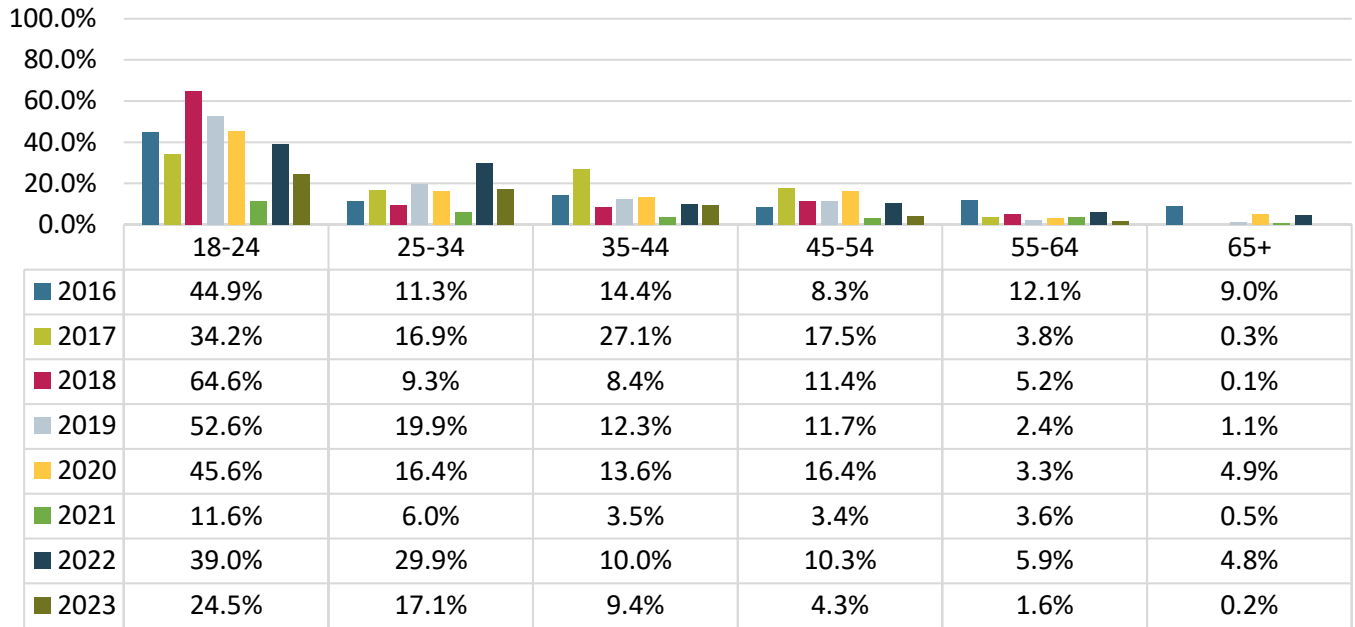
Source: Nebraska Adult Tobacco Survey 2023

About one-third of respondents from Region 6 reported having ever tried an e-cigarette (32.6%) and 10.9% reported being current users. The rate of respondents who ever tried an e-cigarette goes down to around 30.0% among respondents from Regions 1, Lincoln, and Omaha (27.2%, 28.8%, and 29.2%, respectively), down to about one-fourth in Regions 5 (24.5%), 2 (23.3%), and 3 (23.7%), and down again to about one-fifth of respondents in Region 4 (21.2%). All but one Region (Region 6, (10.9%)) reported a current use rate at or below 10.0%.



The use of e-cigarettes is consistently higher among respondents within the 18-24 year-old age group (Fig. 5.3).

**Fig. 5.3 2016-2023 - Current E-Cigarette Use by Age - Nebraska (Percent of All E-Cigarettes Users in Each Age Category)**

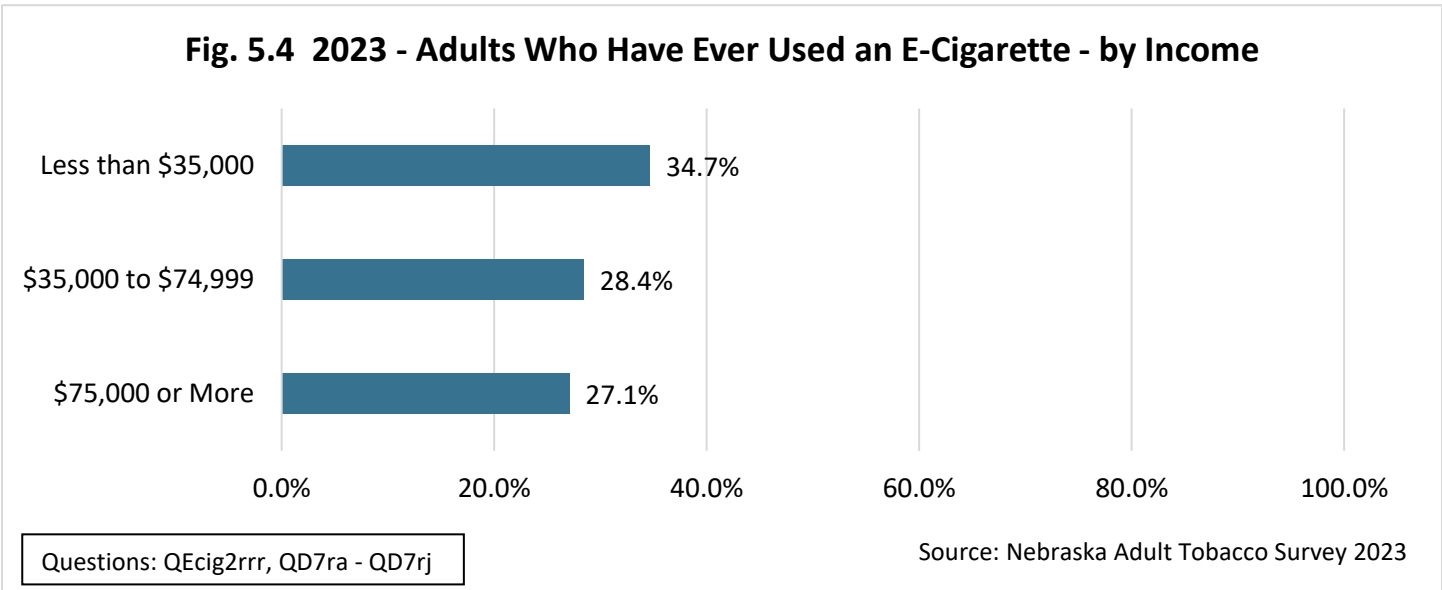


Questions: QEcig2rrr, QEcig3r, QD1

Source: Nebraska Adult Tobacco Survey 2023

Every year, e-cigarette use has been proportionately higher among respondents within the 18-24 year-old age group. Interestingly, a downward trend appeared in the use of e-cigarettes for this age group between 2018 and 2021. Use increased in 2022 before dropping again in 2023.

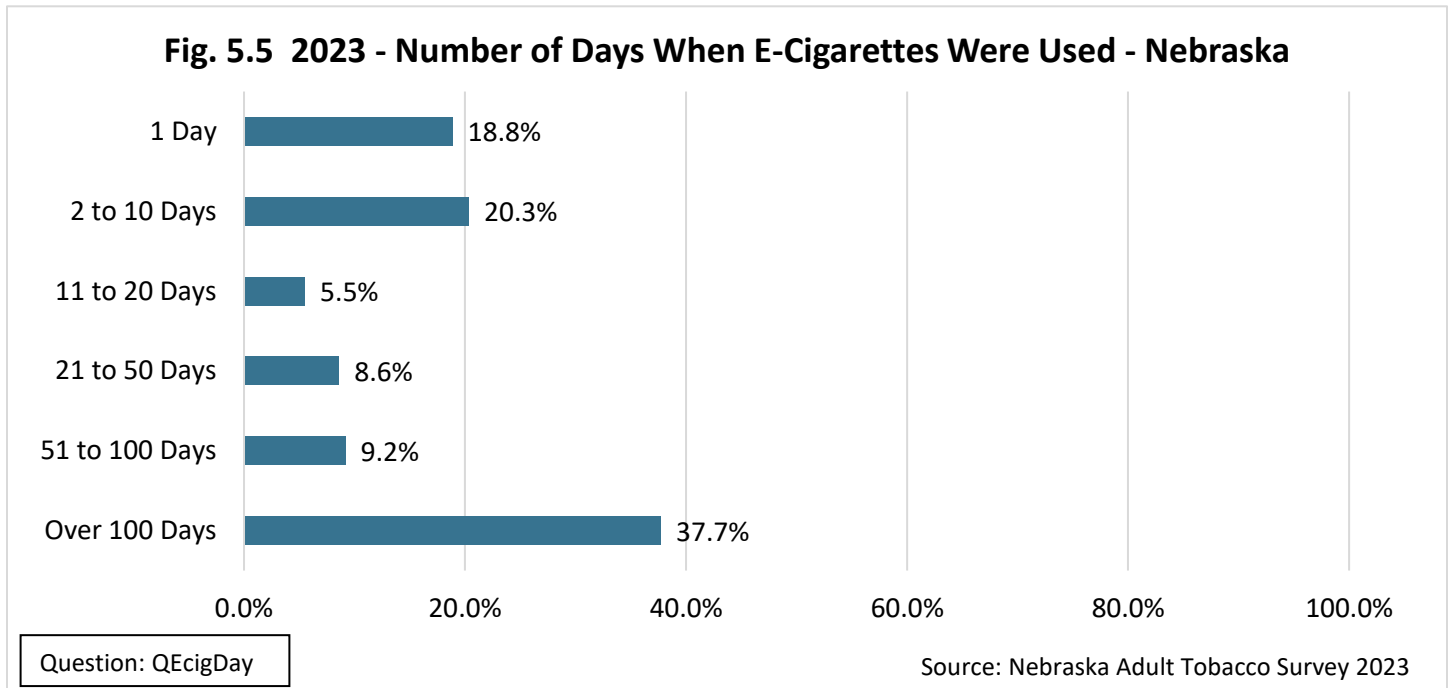
There appears to be a slight correlation between e-cigarette use and annual household income (Fig. 5.4).



Among respondents with an annual household income below \$35,000, 34.7% reported having ever tried an e-cigarette, while 28.4% of those with an annual household income between \$35,000 and \$75,000 and 27.1% of those within the \$75,000 or more categories reported this behavior.

## Number of Days When E-Cigarettes Were Used

Over one-third of e-cigarette users reported having used e-cigarettes on more than 100 days in their entire life (Fig. 5.5).



Over one-third of e-cigarette users (37.7%) reported having used e-cigarettes on more than 100 days in their entire life. Additionally, 18.8% reported having used e-cigarettes only one day during their entire life, and roughly one-fifth (20.3%) reported that they have used e-cigarettes a total of two to ten days in their entire life.

## Cigarettes or E-Cigarettes – First Product Tried

Most respondents who had tried both cigarettes and e-cigarettes tried cigarettes first (Fig. 5.6).

**Fig. 5.6 2023 - First Product Tried Among Those Who Have Tried E-Cigarettes and Cigarettes - Nebraska**



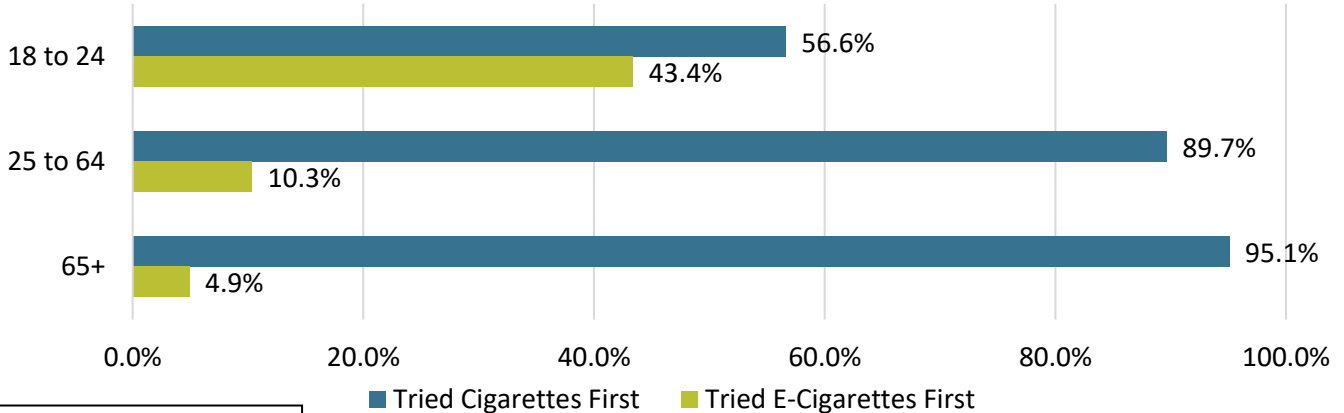
Question: QEcigTry

Source: Nebraska Adult Tobacco Survey 2023

Among those who have tried both cigarettes and e-cigarettes, 83.9% tried cigarettes first and 16.1% tried e-cigarettes first.

18 to 24 year-olds are exceedingly more likely to reporting having tried e-cigarettes first compared to those aged 25 or older (Fig. 5.7).

**Fig. 5.7 2023 - First Product Tried Among Those Who Have Tried E-Cigarettes and Cigarettes - by Age**

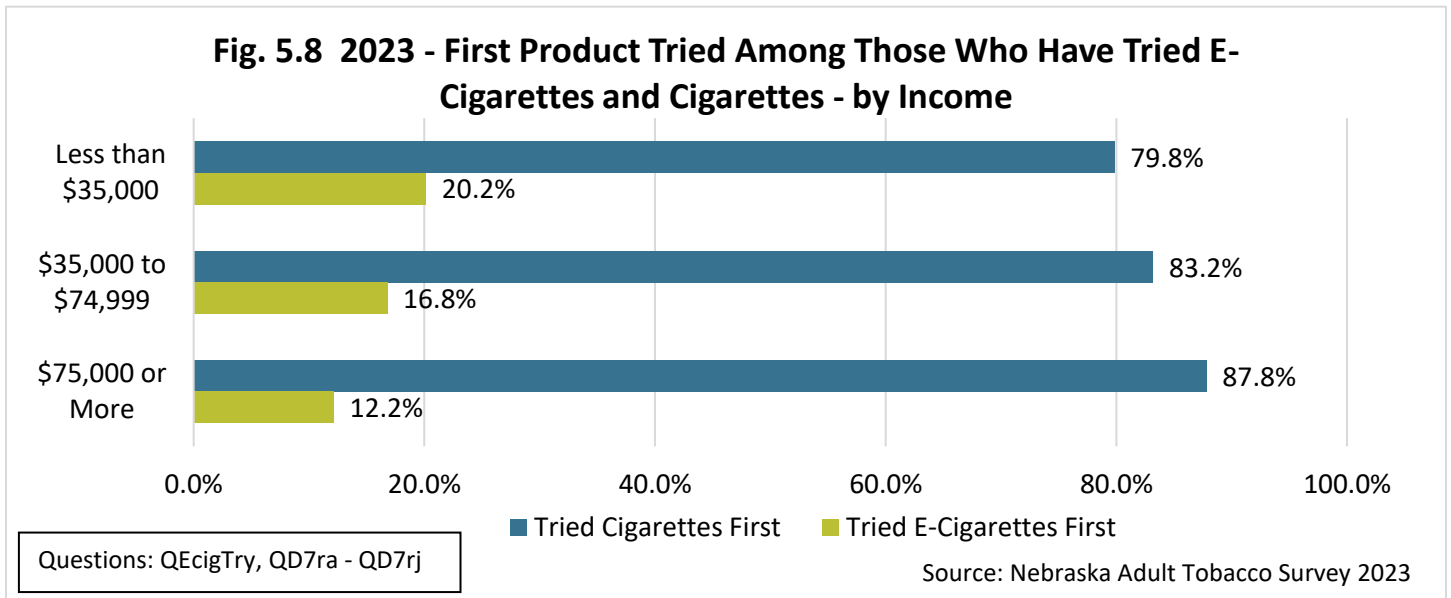


Questions: QEcigTry, QD1

Source: Nebraska Adult Tobacco Survey 2023

An overwhelming majority of respondents aged 25 to 64 years (89.7%) and those aged 65 years and older (95.1%) who have tried both cigarettes and e-cigarettes reported having tried cigarettes first. 18 to 24-year-olds break this trend, with over half (56.6%) reporting that they used e-cigarettes first.

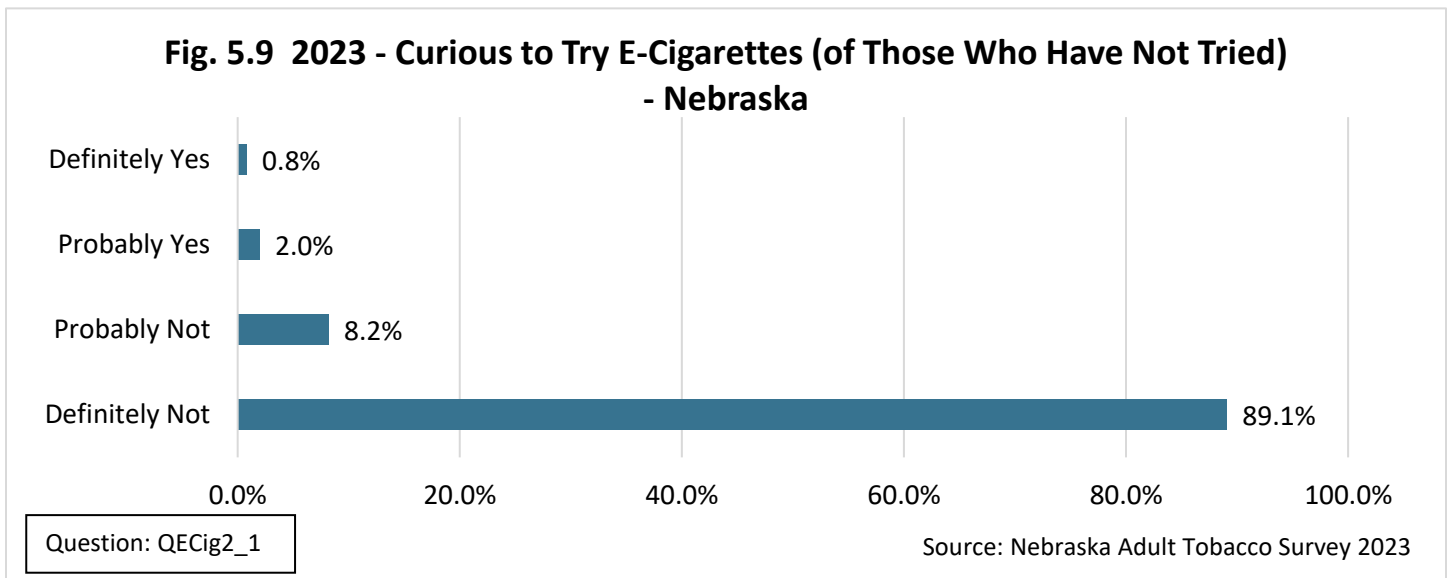
Respondents were more likely to report having tried cigarettes first regardless of annual household income (Fig. 5.8).



Regardless of income, more respondents who have tried both cigarettes and e-cigarettes reported having tried cigarettes first. However, those with an annual household income of \$75,000 or more (87.8%) were even more likely to report having tried cigarettes first than those with an annual household income between \$35,000 and \$74,999 (83.2%) and even more so than those with an annual household income below \$35,000 (79.8%).

### Curious to Try

Most respondents who have never tried e-cigarettes indicated that they are not curious to try them (Fig. 5.9).

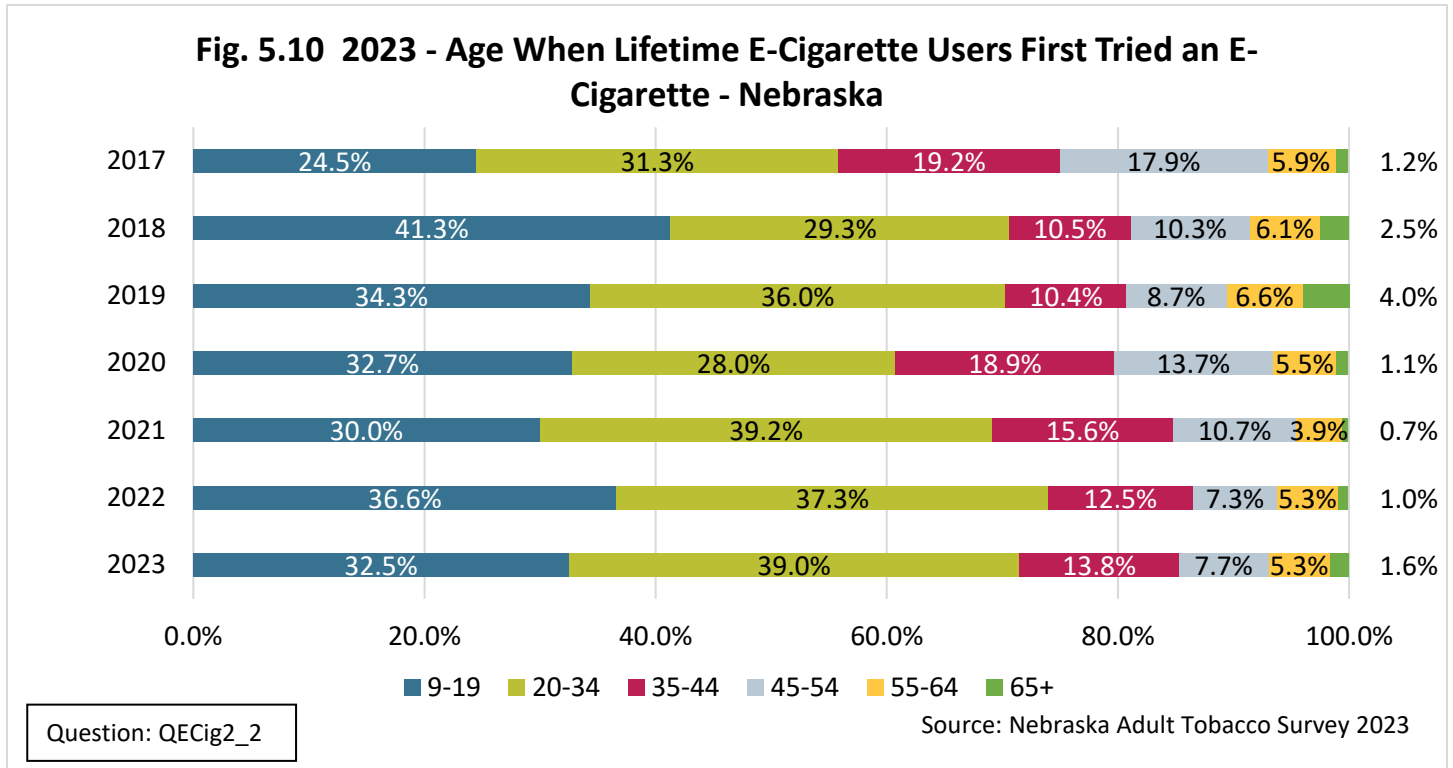


Individuals who have not tried e-cigarettes reported a strong aversion to trying them. The majority of those who had never used an e-cigarette reported that they are either definitely not curious (89.1%) or probably not curious (8.2%) to

try them. Only 2.8% of respondents indicated that they are curious to try. This group, who are curious but have not tried, are at-risk for future e-cigarette use.

### Age of Initiation 2017-2023

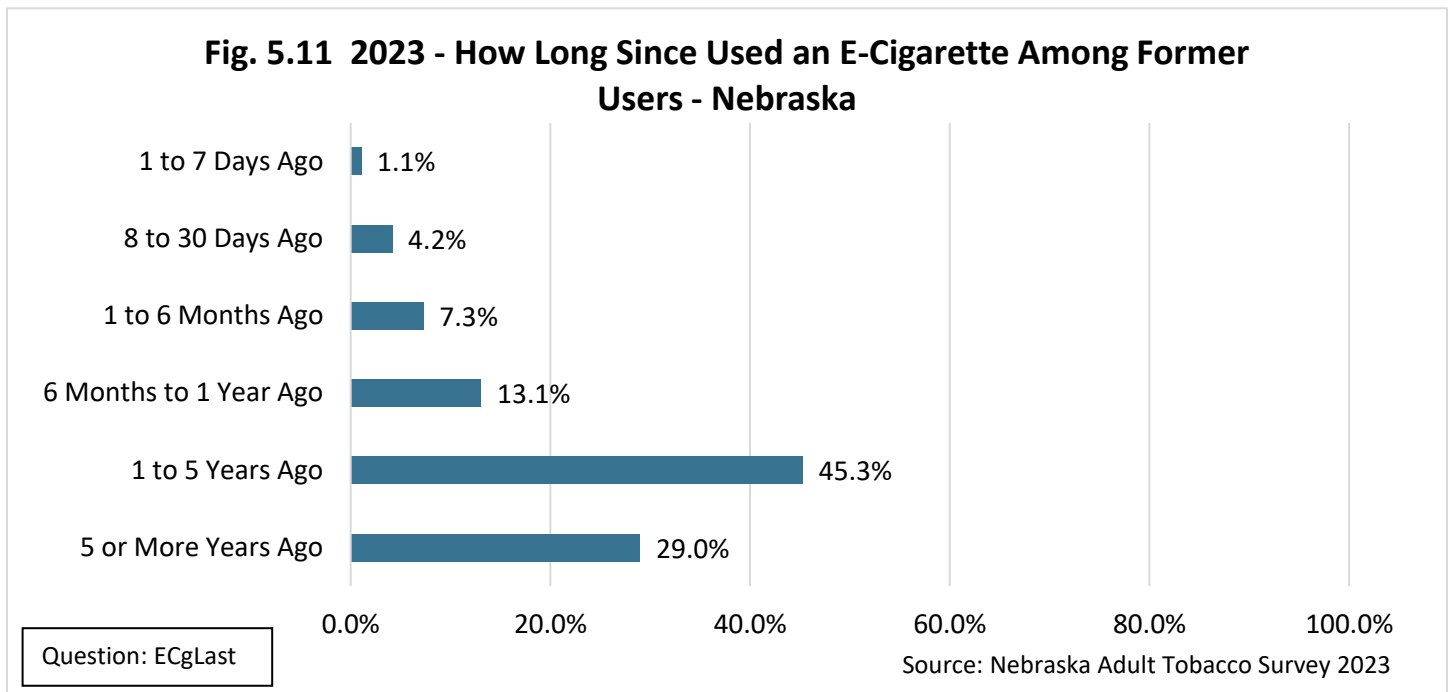
Most Nebraskans who use e-cigarettes tried them for the first time before the age of 35 years. (Fig. 5.10).



In 2017, 55.8% of adults indicated that they tried their first e-cigarette before the age of 35 years. This rose to 70.6% in 2018, dropped again from 70.3% in 2019, and to 60.7% in 2020, increased once again to 69.2% in 2021 and to 73.9% in 2022, before dropping once again to 71.5% in 2023. It is notable that e-cigarettes came on the U.S. market in 2006-2007, which limited the older population accessing them at a young age.

## Length of Time Since Last Regularly Used

A large proportion of former e-cigarette users reported that it has been one to five years since they last regularly used e-cigarettes (Fig. 5.11).

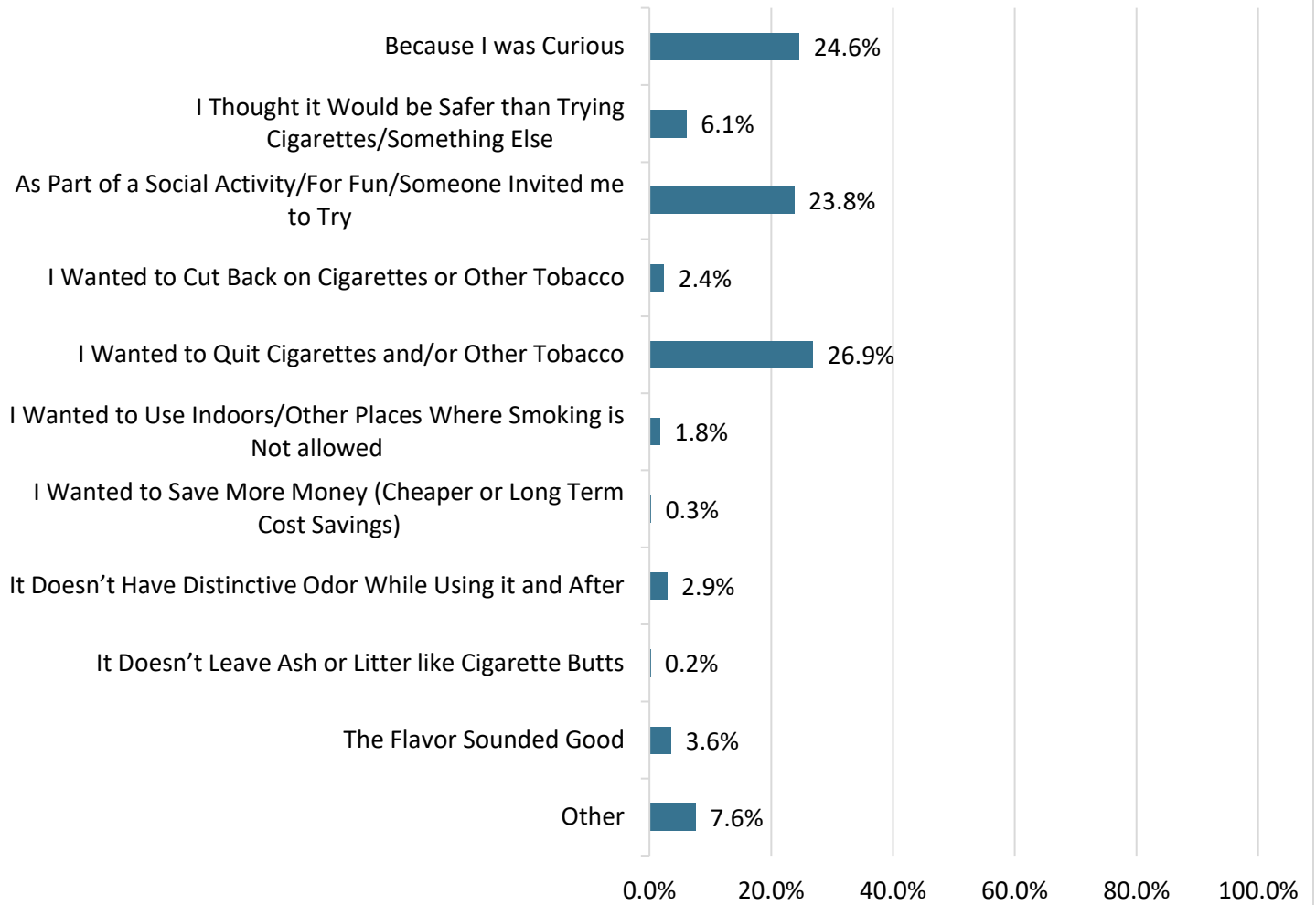


Almost half (45.3%) of former e-cigarette users reported that it has been one to five years since they last regularly used e-cigarettes. For an additional 29.0% of respondents, it had been five years or longer.

## Reason Tried

The top reasons for trying an e-cigarette were curiosity, social activity/for fun/someone invited me, and trying to quit cigarettes and/or other tobacco (Fig. 5.12).

**Fig. 5.12 2023 - The Main Reason Lifetime Smokers Tried an E-Cigarette Among Lifetime E-Cigarette Users - Nebraska**



Question: QEcgRer

Source: Nebraska Adult Tobacco Survey 2023

Nearly one-fourth of respondents who tried an e-cigarette reported that they tried an e-cigarette because they were curious (24.6%). Those who tried an e-cigarette as part of a social activity, for fun or because someone invited them to try make up 23.8% of respondents, while 26.9% of them tried an e-cigarette because they wanted to quit cigarettes or another tobacco product.

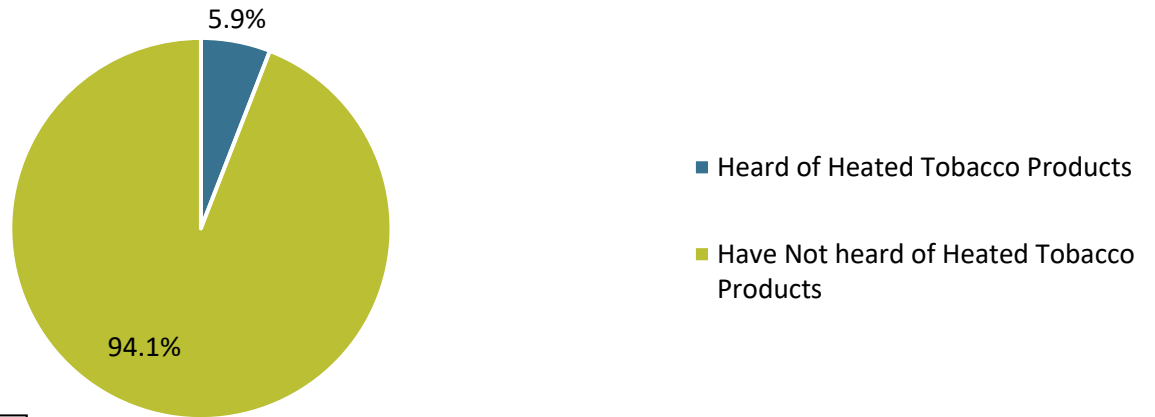


## Heated Tobacco

### Heard of Heated Tobacco

The majority of Nebraskans had not heard of heated tobacco products (Fig. 6.1).

**Fig. 6.1 2023 - Have Ever Heard of Heated Tobacco Products - Nebraska**



Question: QHEATTOB

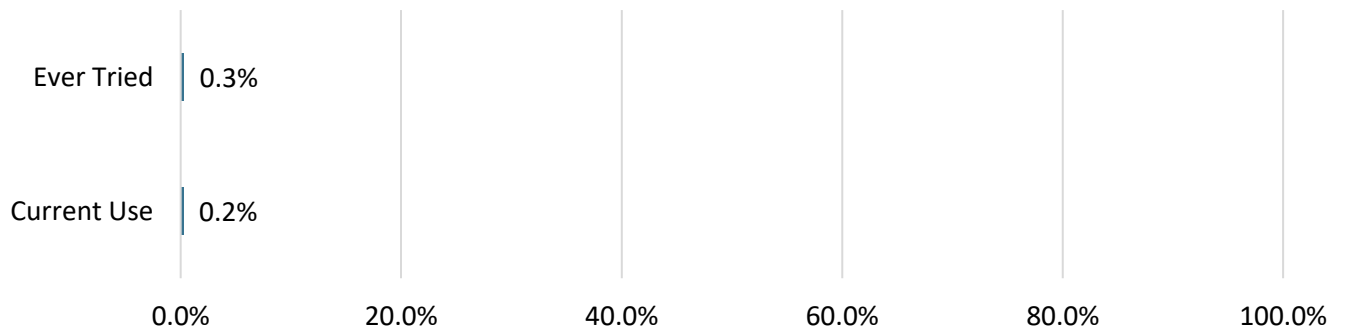
Source: Nebraska Adult Tobacco Survey 2023

Only 5.9% of respondents had heard of heated tobacco, while nearly all respondents (94.1%) had not heard of heated tobacco.

### Ever Tried and Current Use

Only a handful of respondents reported having ever tried or currently using heated tobacco products (Fig. 6.2).

**Fig. 6.2 2023 - Heated Tobacco Products - Ever Tried and Current Use - Nebraska**



Questions: QHEATTOB, QTRYHEAT, QHEATDAY

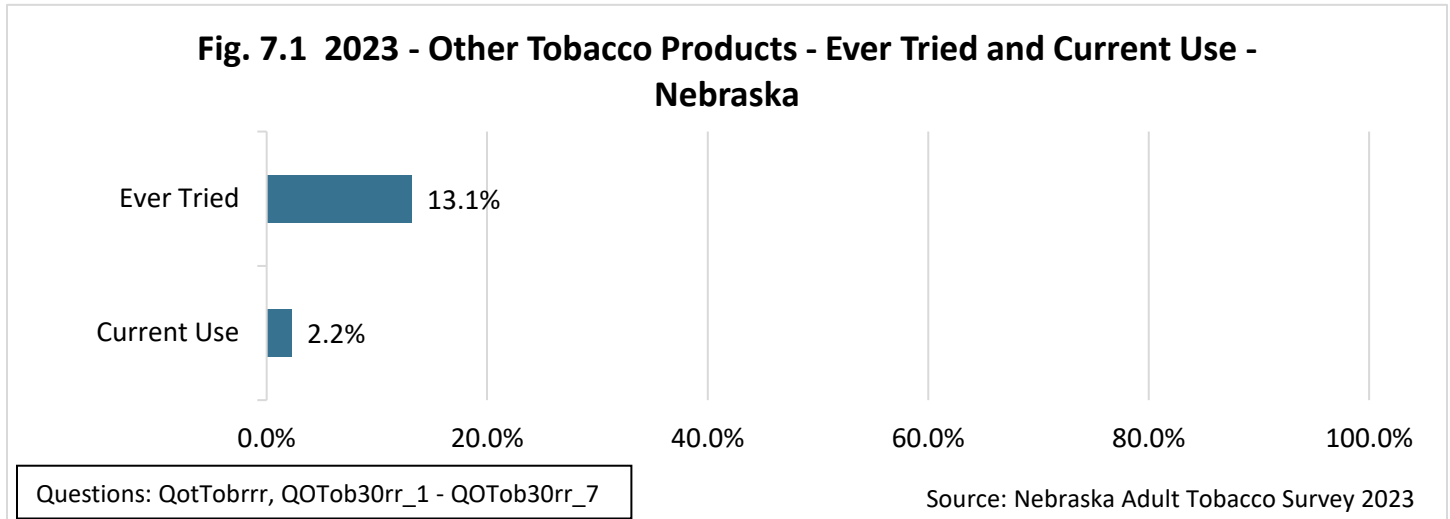
Source: Nebraska Adult Tobacco Survey 2023

Less than 1.0% of respondents who have ever heard of heated tobacco indicated that they had ever tried heated tobacco, and only 0.2% of those who had ever tried heated tobacco were current users.

## Other Tobacco Products

### Ever Tried and Current Use

Less than 15.0% of respondents reported having ever tried other tobacco products (Fig. 7.1).

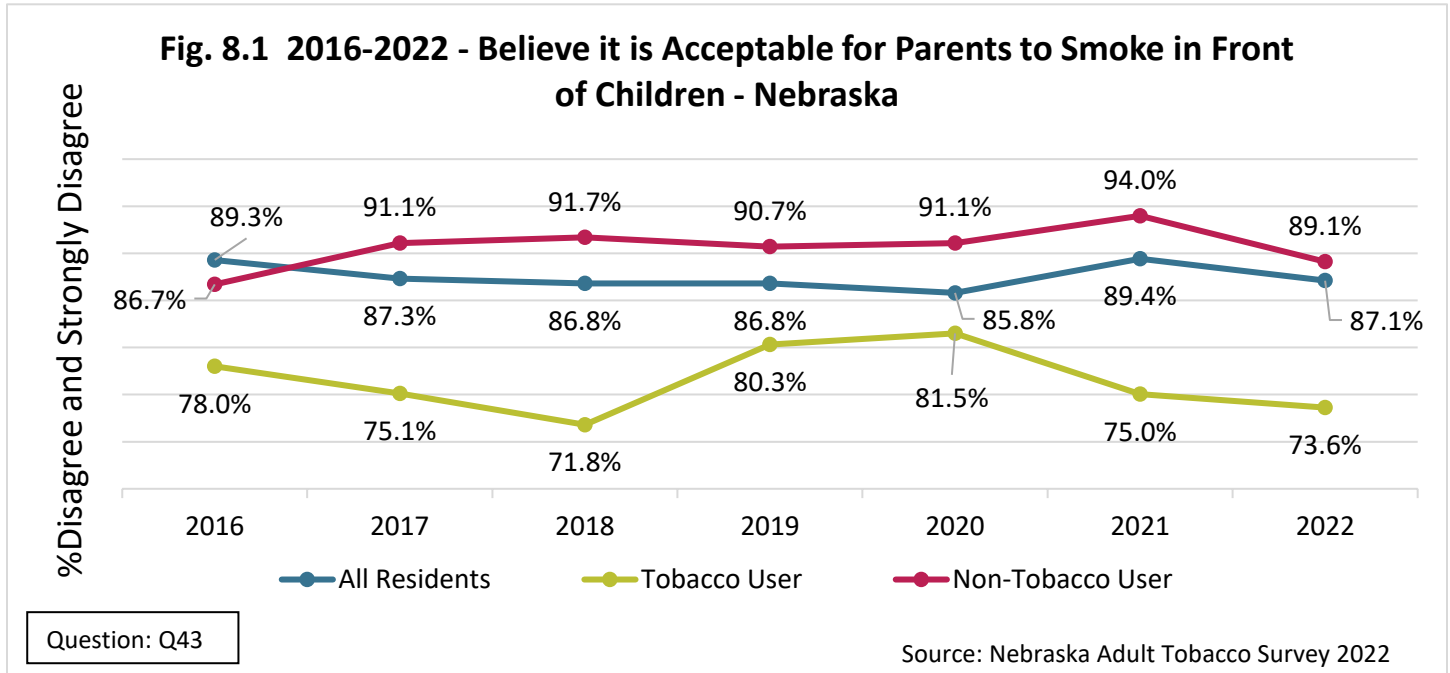


Only 13.1% of respondents indicated having ever tried other tobacco products, such as heated tobacco products, roll-your-own, bidis, kreteks, hookah/waterpipe, tobacco pipe, orbs, or some other product, and only 2.2% of those who have tried other tobacco products are current users.

## Health Impact of Smoking and Secondhand Smoke

### Opinions on Parents Smoking in Front of Children 2016-2022

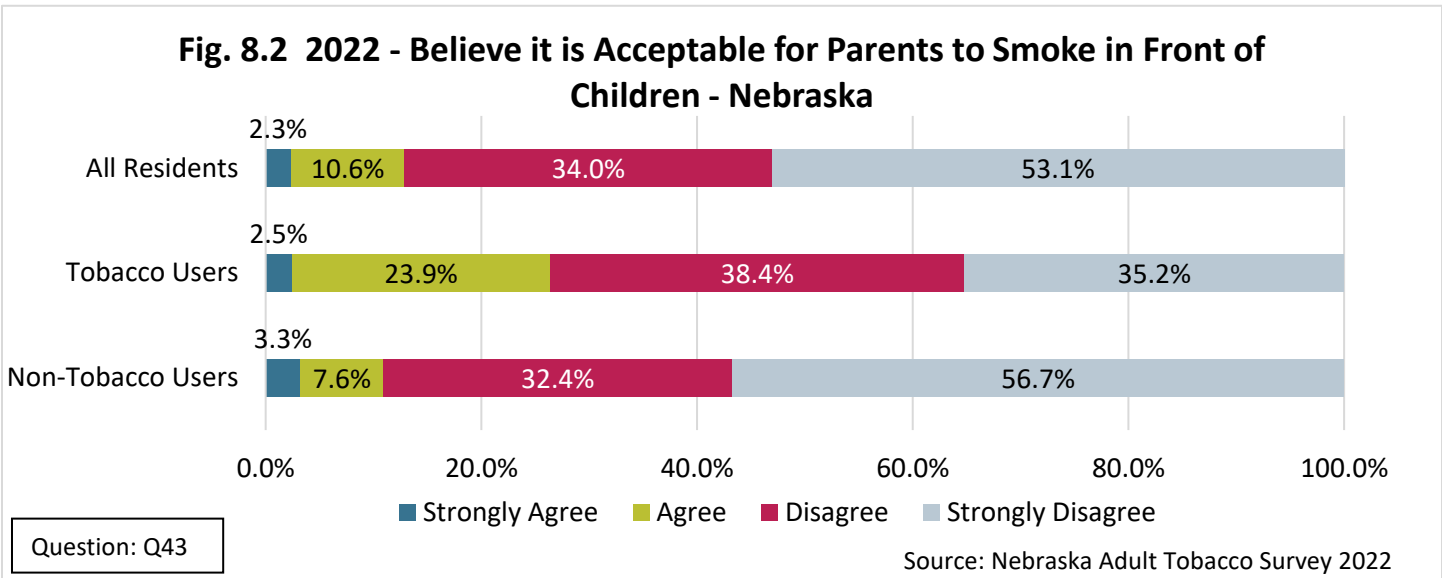
Non-tobacco users consistently indicated an unfavorable opinion regarding parents smoking in front of their children at higher rates than tobacco users (Fig. 8.1).



\*Question last asked in 2022

While the disapproval rate of parents smoking in front of their children has remained relatively stable throughout the years among all residents and non-tobacco users, tobacco users' disapproval rate of parents smoking in front of children shows much more variance, reaching its second lowest point (73.6%) in 2022.

Over half of non-tobacco users strongly disagreed that it is acceptable for parents to smoke in front of children (Fig. 8.2).

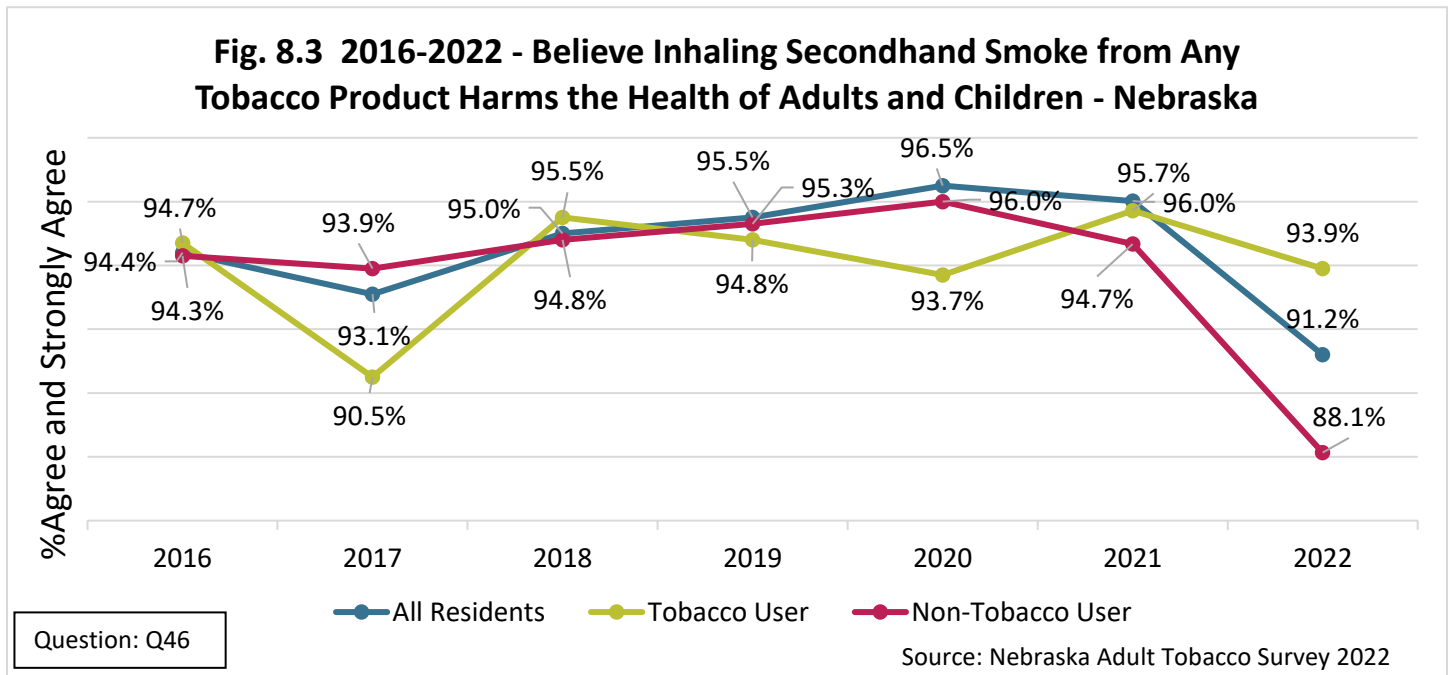


\*Question last asked in 2022

In 2022, non-tobacco users (56.7%) strongly disagreed that it was acceptable for parents to smoke in front of children at a much higher rate than tobacco users (35.2%).

## Opinions on the Harm of Tobacco Products 2016-2022

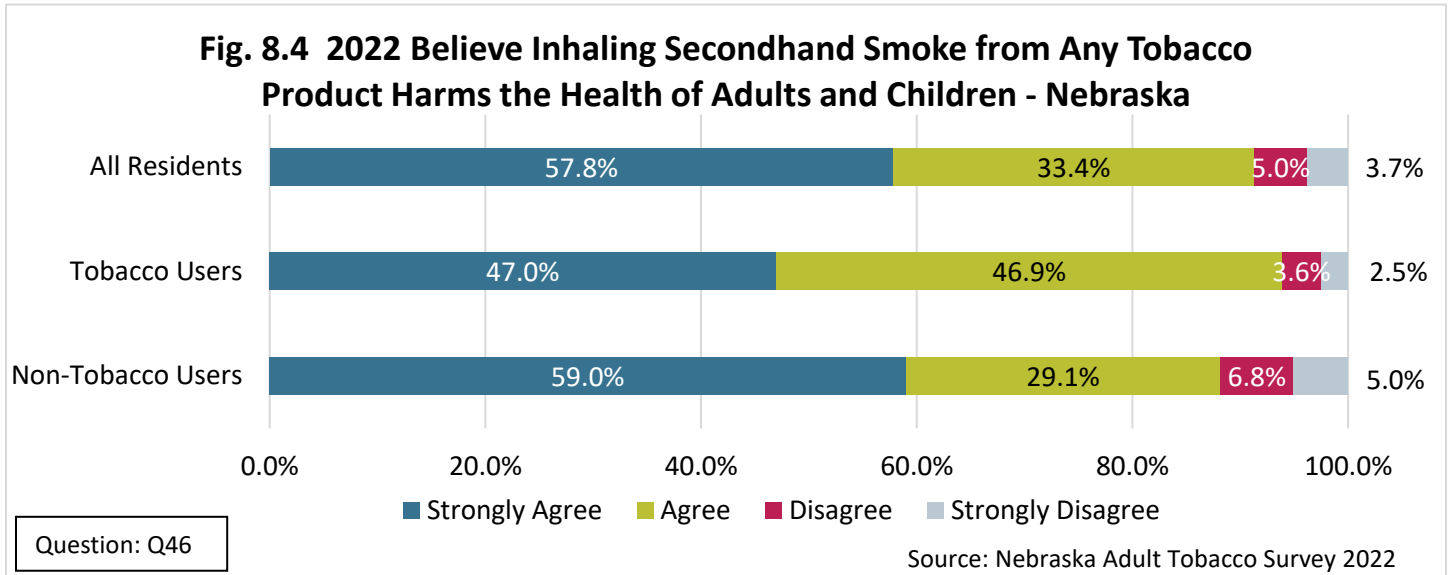
The majority of respondents in all categories believed that inhaling secondhand smoke harms both adults and children (Fig. 8.3).



\*Question last asked in 2022

In 2022, over 90.0% of all residents (91.2%) and tobacco users (93.9%), and 88.1% of non-tobacco users agreed or strongly agreed that inhaling secondhand smoke from any tobacco product is harmful to the health of adults and children.

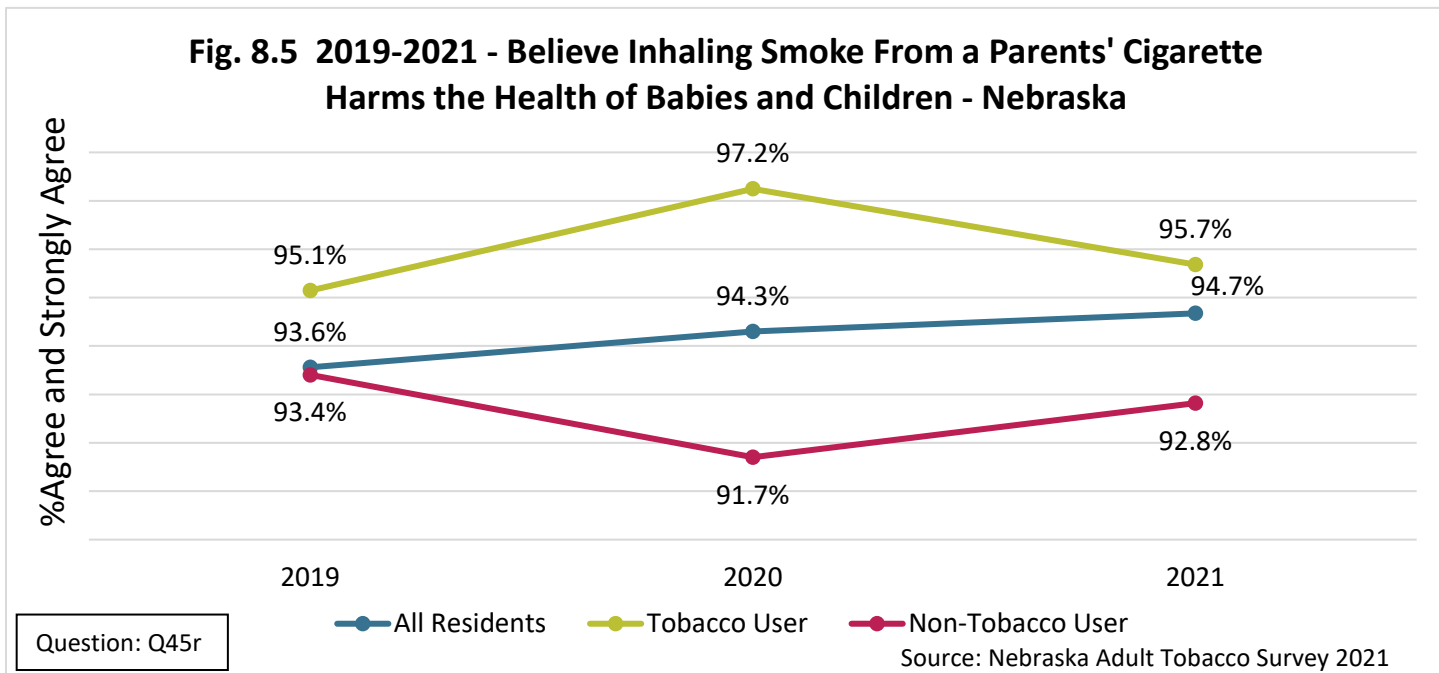
A higher proportion of tobacco users believed that inhaling secondhand smoke from any tobacco product harms the health of adults and children than non-tobacco users (Fig. 8.4).



\*Question last asked in 2022

Interestingly, disagreement that inhaling secondhand smoke from any tobacco product harms the health of adults and children was higher among non-tobacco users (6.8% disagree and 5.0% strongly disagree) than tobacco users (3.6% disagree and 2.5% strongly disagree).

Tobacco users consistently agreed and strongly agreed that inhaling secondhand cigarette smoke harms the health of babies and children at higher rates than non-tobacco users. (Fig. 8.5).

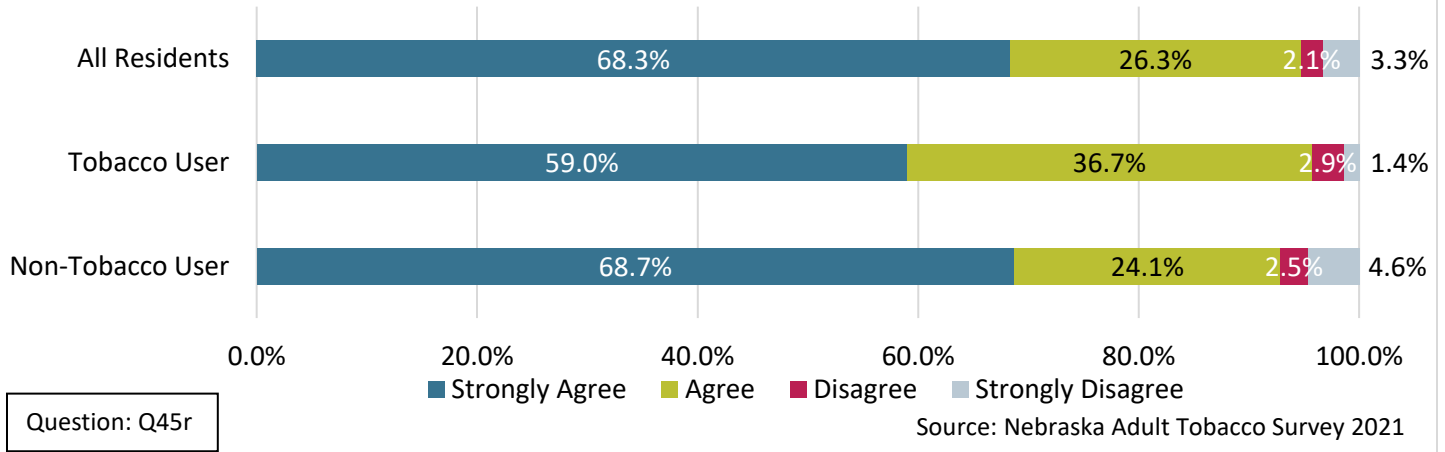


\*Question last asked in 2021

While the majority of respondents agreed and strongly agreed (94.7%) that inhaling secondhand cigarette smoke harms the health of babies and children, a higher proportion of tobacco users (95.7%) felt this way than non-tobacco users (92.8%).

The majority of respondents in all categories believed that inhaling secondhand smoke from a parent’s cigarette harms both babies and children (Fig. 8.6).

**Fig. 8.6 2021 - Believe Inhaling Smoke from a Parent's Cigarette Harms the Health of Babies and Children - Nebraska**

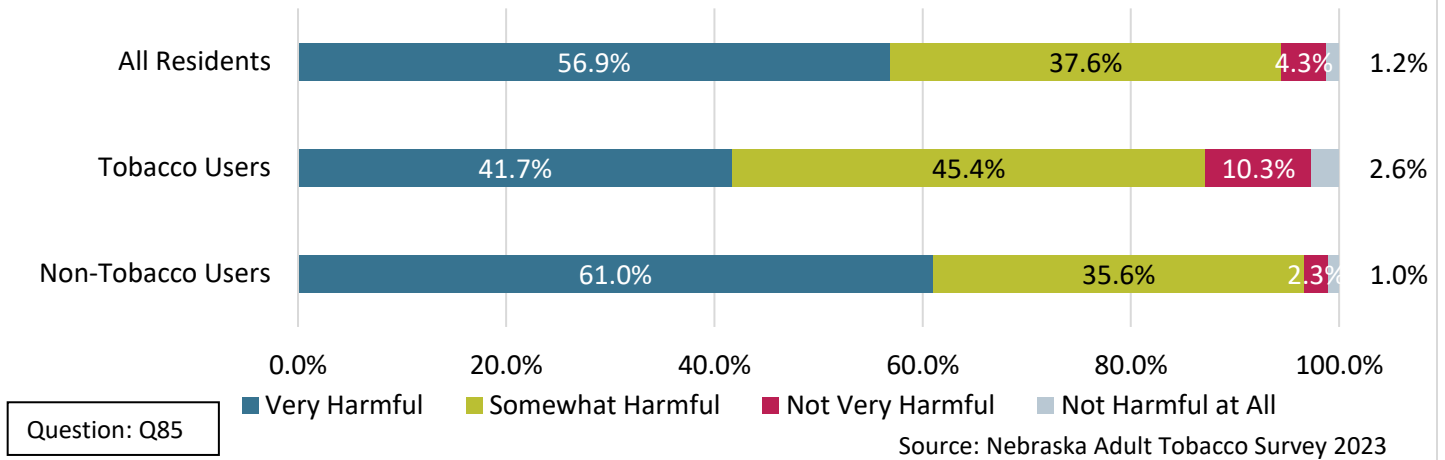


\*Question last asked in 2021

Most respondents (68.3%) believed that inhaling secondhand smoke from a parent’s cigarette harms the health of babies and children. However, non-tobacco users strongly agreed (68.7%) at higher rates than tobacco users (59.0%).

Non-tobacco users were much more likely than tobacco users to view breathing smoke from other people’s cigarettes as very harmful (Fig. 8.7).

**Fig. 8.7 2023 - Secondhand Smoke is Harmful/Not Harmful to One's Health - Nebraska**

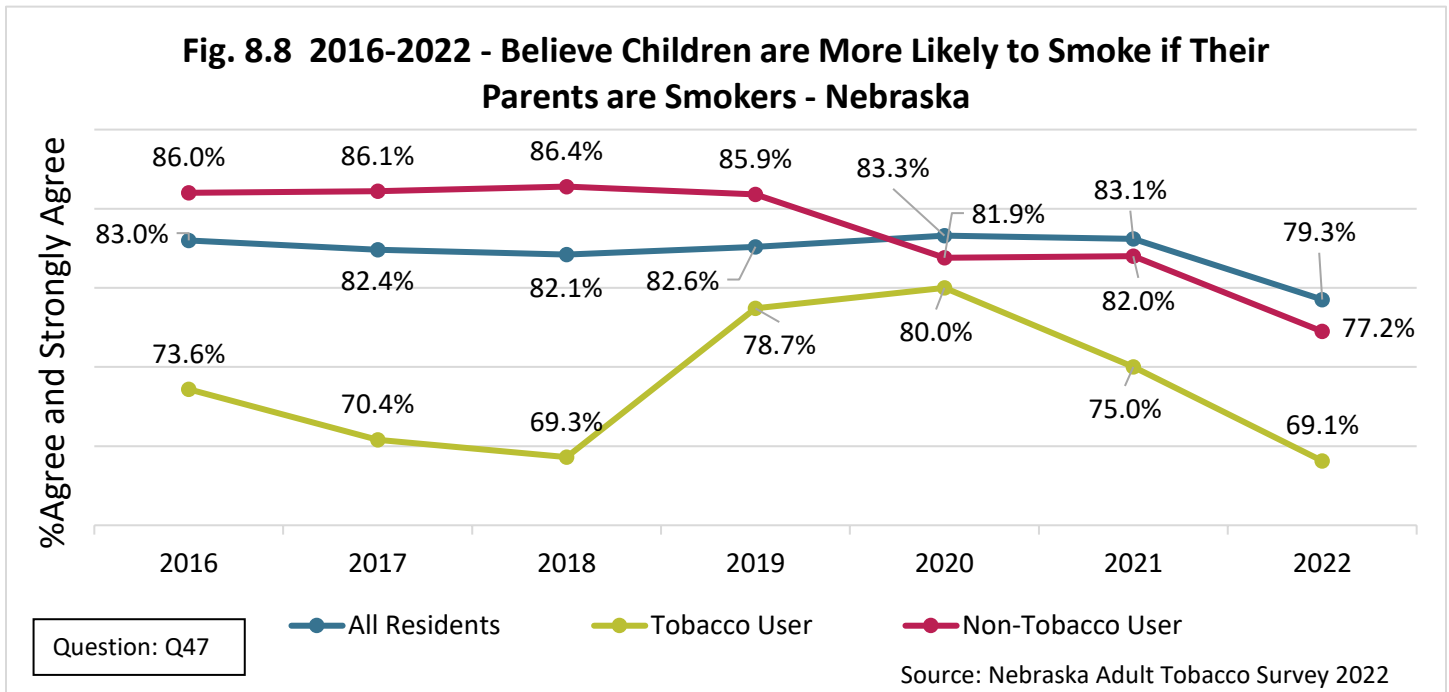


Over half of all respondents (56.9%) believed that breathing smoke from other people’s cigarettes is very harmful to one’s health. However, non-tobacco users were much more likely to believe this (61.0%) than tobacco users (41.7%).



## Opinions on Parents' Influence on Children's Smoking Behaviors 2016-2022

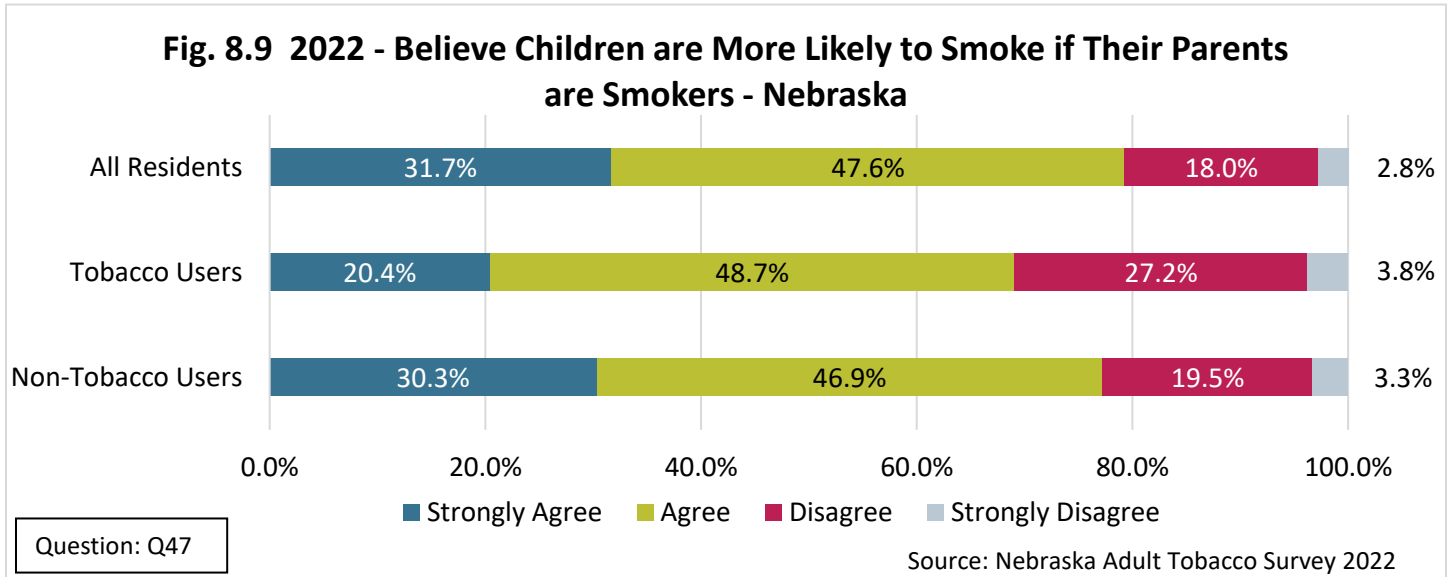
The majority of respondents, including both tobacco users and non-tobacco users, believed that parents' smoking behaviors would influence children (Fig. 8.8).



\*Question last asked in 2022

While the majority of all residents, tobacco users, and non-tobacco users have consistently agreed or strongly agreed that parents' smoking behaviors influence children, the rate of those who agree or strongly agree reached its lowest point in 2022 for all residents (79.3%), tobacco users (69.1%), and non-tobacco users (77.2%).

In 2022, tobacco users disagreed and strongly disagreed that children are more likely to smoke if their parents are smokers at higher rates than non-tobacco users (Fig. 8.9).

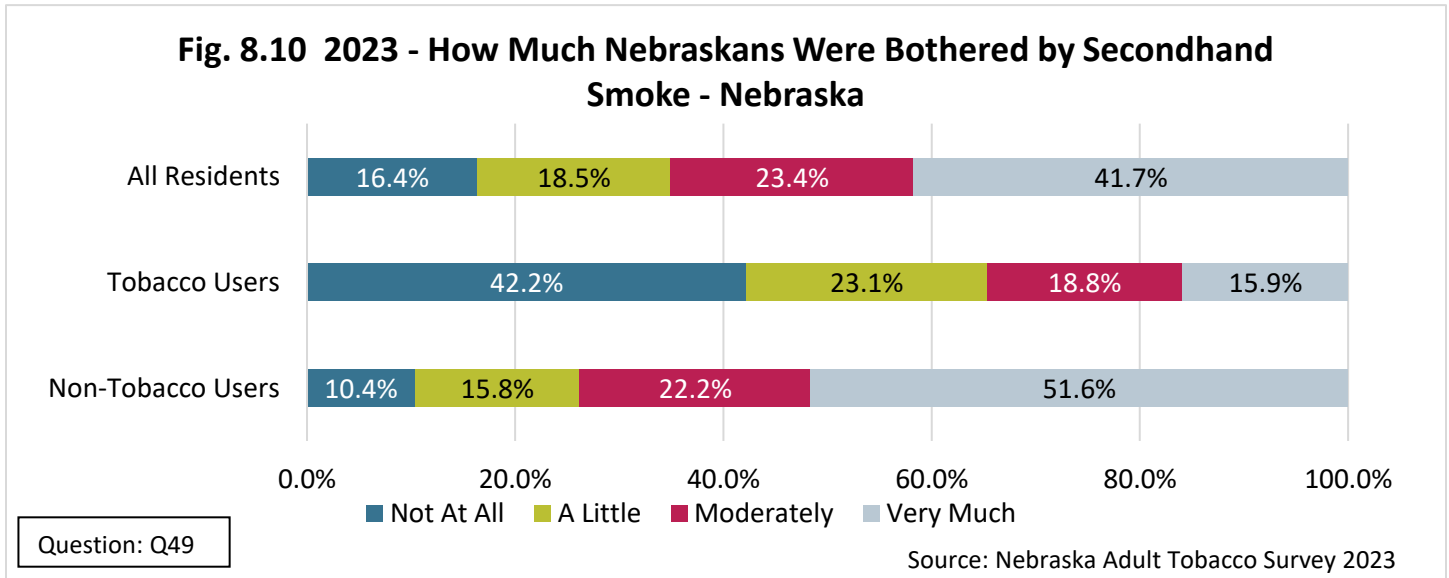


\*Question last asked in 2022

In 2022, roughly seven in ten tobacco users (69.1%) and three-fourths of non-tobacco users (77.2%) strongly agreed or agreed that children are more likely to smoke if their parents are smokers.

## Nebraskans Bothered by Secondhand Smoke from Cigarettes

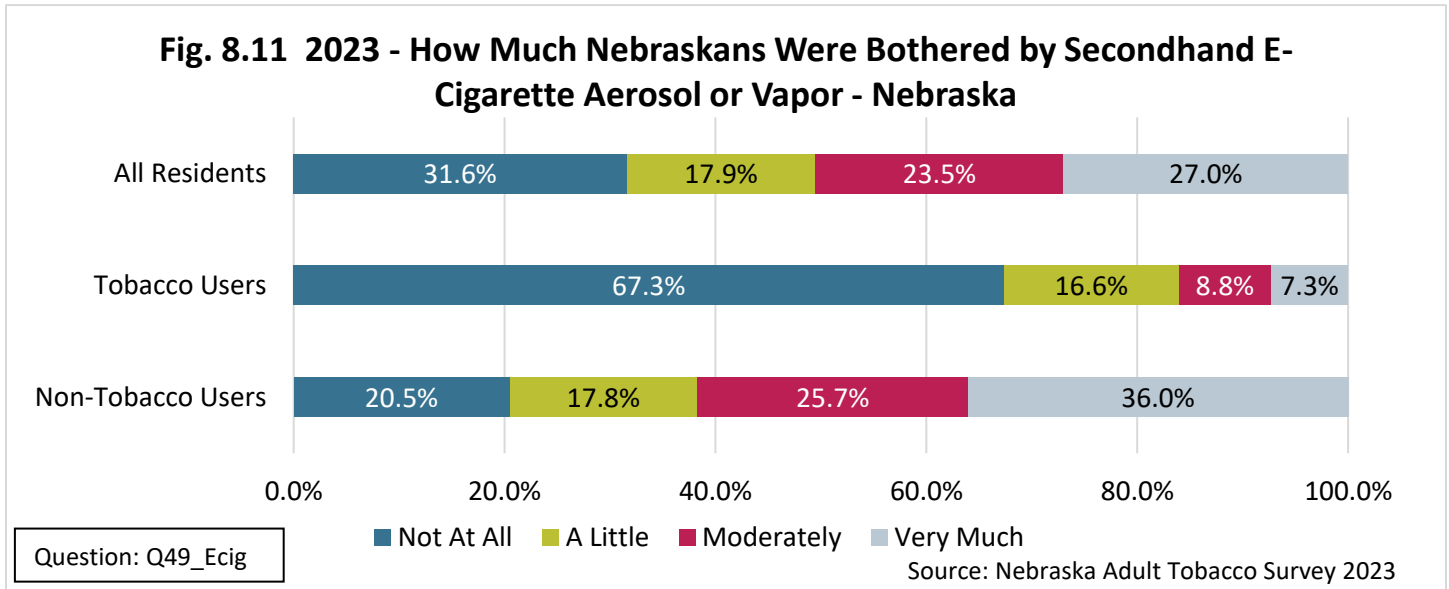
Non-tobacco users were much more likely to report being bothered by secondhand smoke from cigarettes than tobacco users (Fig. 8.10).



The majority (51.6%) of non-tobacco users reported being bothered very much by secondhand smoke from cigarettes as compared to only 15.9% of tobacco users. Additionally, 42.2% of tobacco users reported that they are not at all bothered by secondhand smoke from cigarettes while only 10.4% of non-tobacco users reported being not at all bothered by secondhand smoke from cigarettes.

## Nebraskans Bothered by Secondhand E-Cigarette Aerosol or Vapor

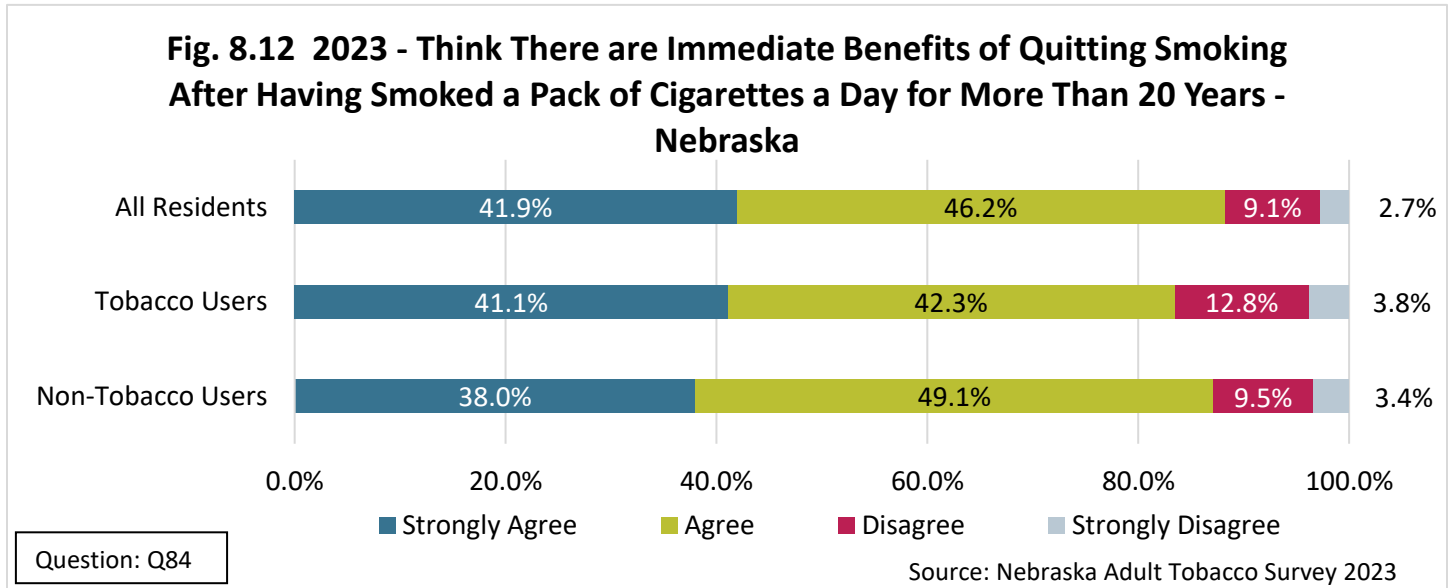
Non-tobacco users were much more likely to report being bothered by secondhand e-cigarette aerosol or vapor than tobacco users (Fig. 8.11).



Over one-third (36.0%) of non-tobacco users reported being bothered very much by secondhand e-cigarette aerosol or vapor as compared to only 7.3% of tobacco users. Additionally, 67.3% of tobacco users reported that they are not at all bothered by secondhand e-cigarette aerosol or vapor while only 20.5% of non-tobacco users reported the same.

## Think There are Immediate Benefits of Quitting After Having Smoked For 20 Years

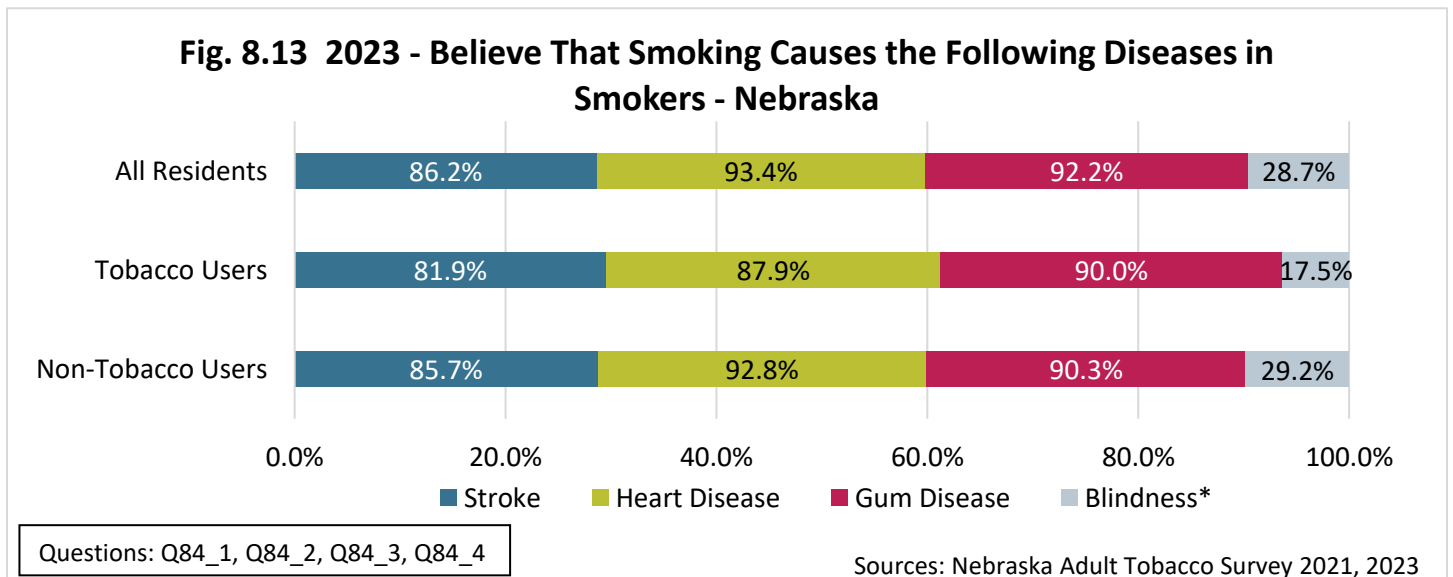
Most respondents strongly agreed or agreed that there are immediate benefits of quitting smoking (Fig. 8.12).



The majority (88.1%) of Nebraskan adults either strongly agreed or agreed that there are immediate benefits of quitting smoking after having smoked a pack of cigarettes a day for more than 20 years.

## Believe That Smoking Causes Disease

Non-tobacco users believed that smoking causes stroke, heart disease, gum disease, and blindness at higher rates than tobacco users (Fig. 8.13).

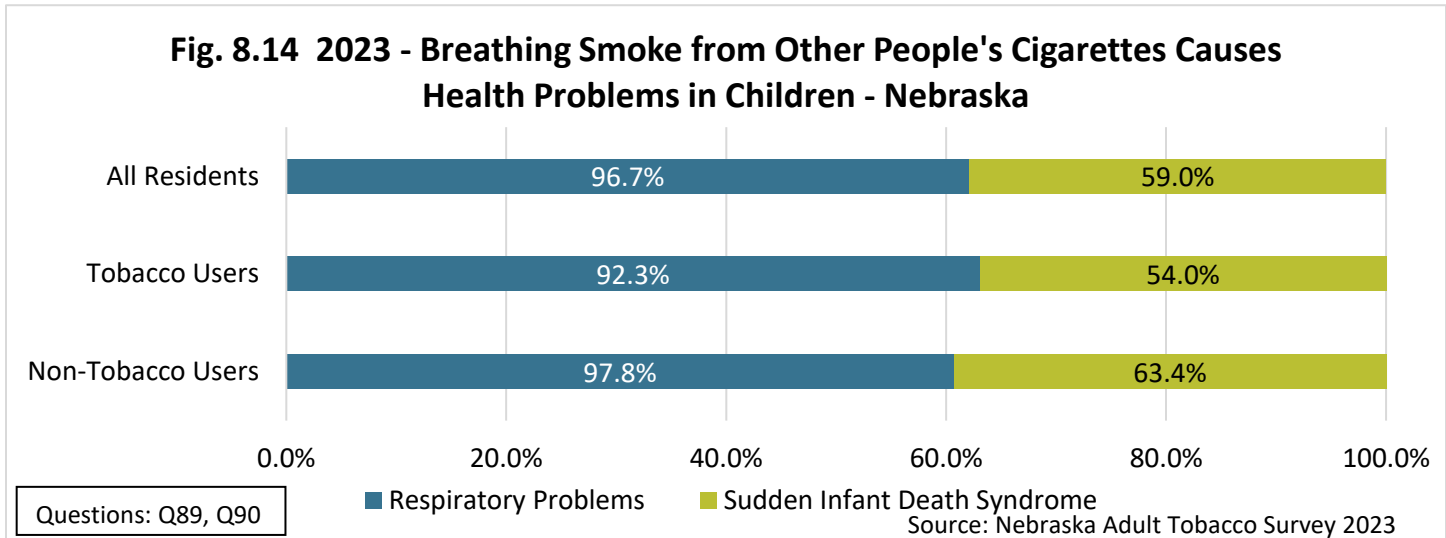


\*Last asked about blindness in 2021

The majority of all respondents believed that smoking causes stroke (86.2%), heart disease (93.4%), and gum disease (92.2%), while only 28.7% believed smoking causes blindness. Additionally, non-tobacco users were more likely to believe that smoking causes any of the four diseases listed in Fig. 8.13 than tobacco users.

### Believe Smoke from Other People’s Cigarettes Causes Health Problems in Children

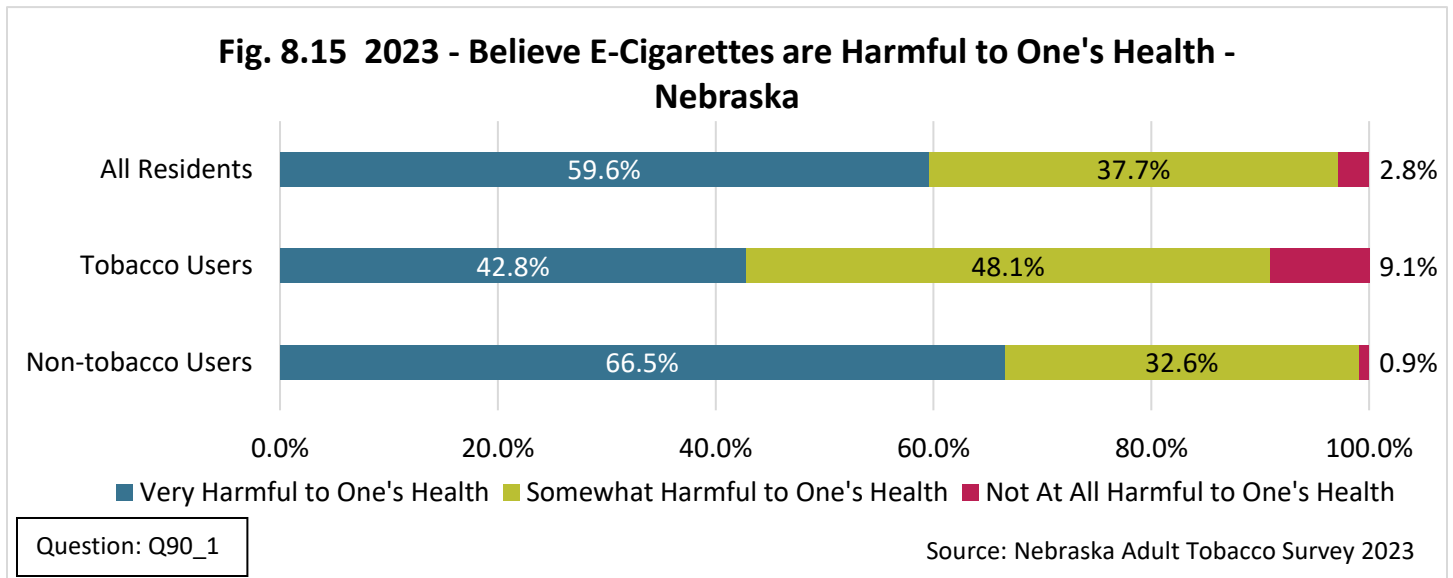
Non-tobacco users were somewhat more likely children than tobacco users to believe that breathing smoke from other people’s cigarettes causes health problems in (Fig. 8.14).



Nearly all (96.7%) of Nebraska residents believed that breathing smoke from other people’s cigarettes causes respiratory problems in children, whereas 59.0% believed that breathing smoke from other people’s cigarettes causes sudden infant death syndrome.

## Believe E-Cigarettes are Harmful to One's Health

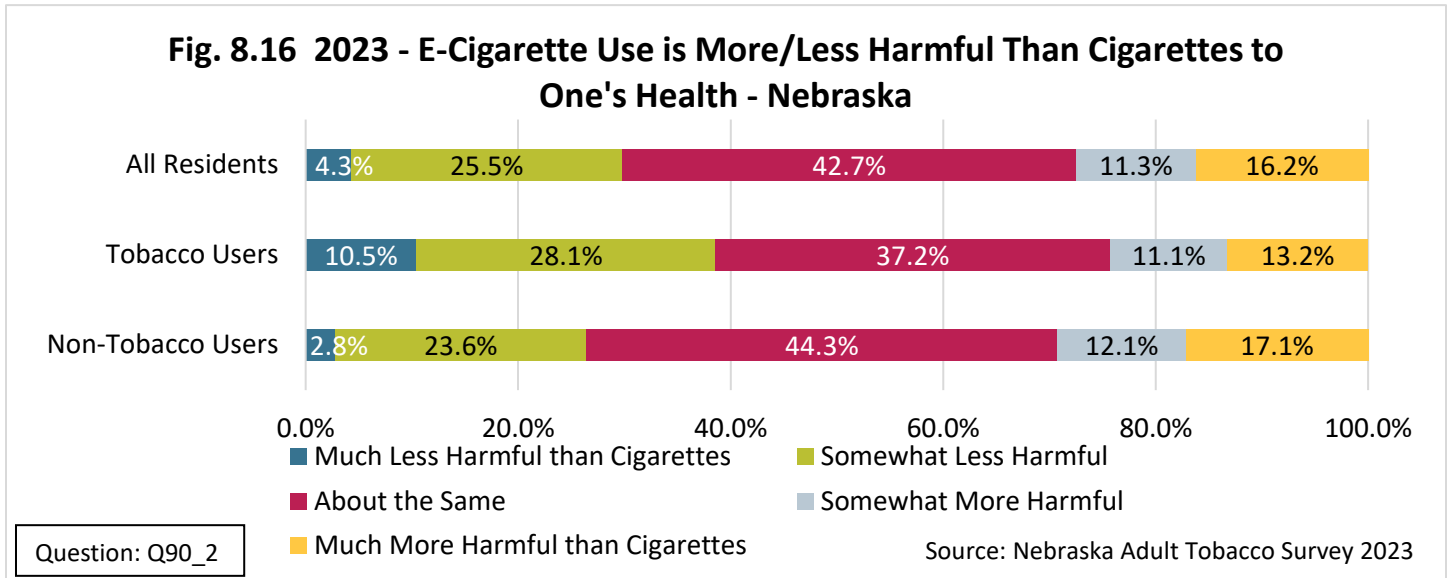
Non-tobacco users believed that e-cigarettes are harmful to one's health at much higher rates than tobacco users (Fig. 8.15).



The majority of tobacco users believed that e-cigarettes are very or somewhat harmful to one's health, only 9.1% believed that e-cigarettes cause no harm at all.

## Harm of E-Cigarette Use Compared to Smoking Cigarettes

Tobacco users believed that e-cigarettes are much less harmful or somewhat less harmful than cigarettes at higher rates than non-tobacco users (Fig. 8.16).



More respondents across tobacco use categories believed that e-cigarettes cause about the same amount of harm as cigarettes. However, tobacco users were much more likely to believe e-cigarettes are much less harmful (10.5%) or somewhat less harmful (28.1%) than non-tobacco users (2.8% and 23.6%, respectively).



## Tobacco Cessation for All Tobacco Products

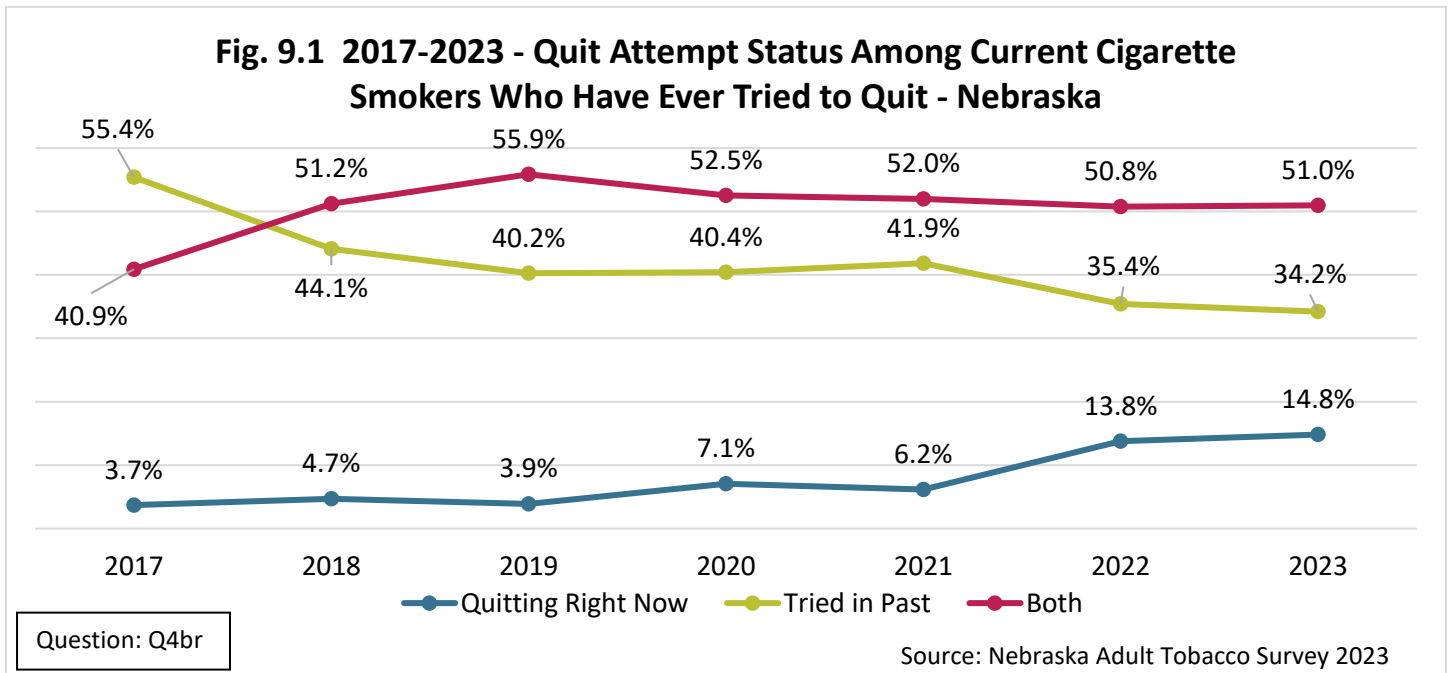
### Quit Attempt Status of Cigarette Smokers 2017-2023

As seen in Table 9.1 below, the cigarette smoking population has historically tried to quit smoking cigarettes, with 83.9% having ever tried to quit in 2023.

Year	Ever Tried to Quit	Never Tried to Quit
2017	79.1%	20.9%
2018	79.9%	20.1%
2019	86.6%	13.4%
2020	77.1%	22.9%
2021	79.4%	20.6%
2022	79.7%	20.3%
2023	83.9%	16.1%

Source: Nebraska Adult Tobacco Survey 2023

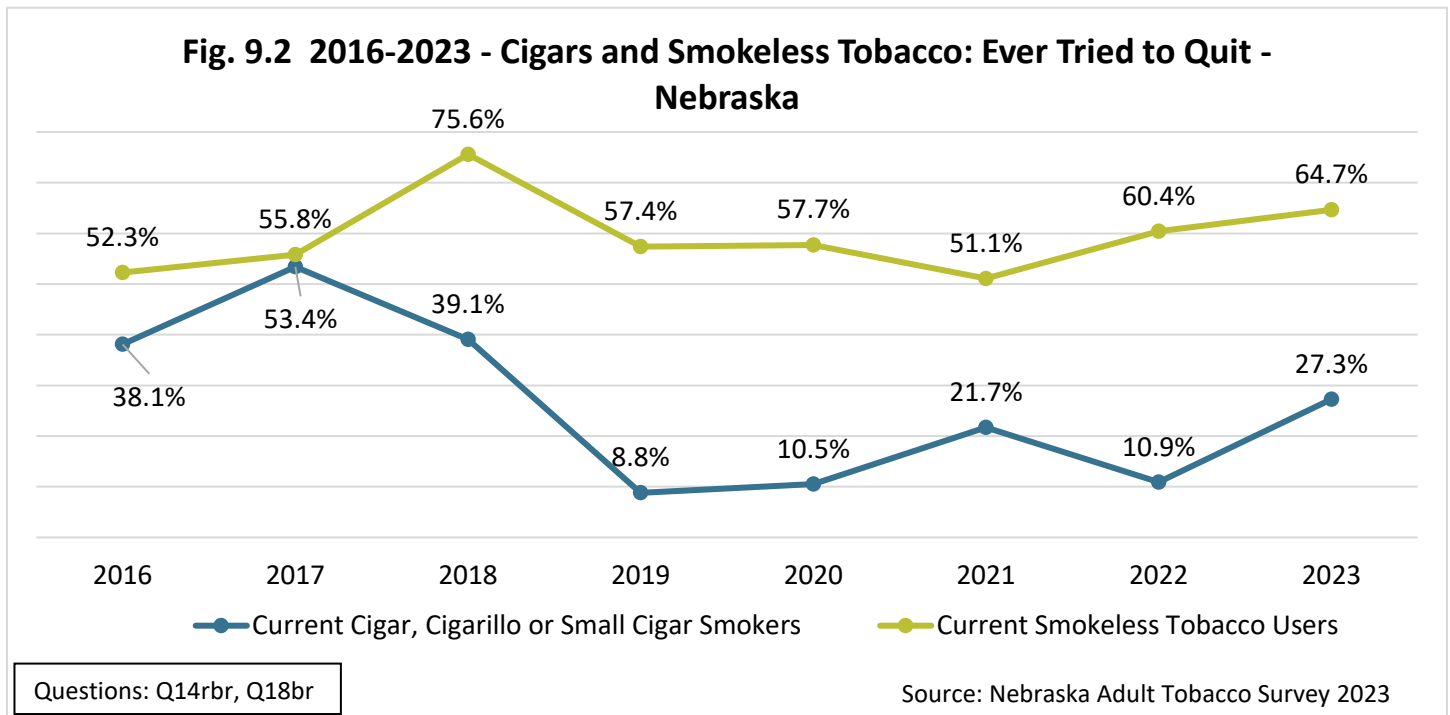
In 2023, many current cigarette smokers reported actively trying to quit (Fig. 9.1).



In 2023, of the 83.9% of cigarette smokers who have ever tried to quit, 14.8% reported that they were quitting right now, 34.2% had tried to quit in the past, and over half (51.0%) had both tried to quit in the past and were quitting right now.

## Quit Attempt Status of Cigar/Cigarillo/Small Cigar Smokers and Smokeless Tobacco Users 2016-2023

In 2023, the rate of cessation attempts among cigar, cigarillo, or small cigar smokers and tobacco users rose (Fig. 9.2).



Cessation attempts by current smokeless tobacco users rose from 60.4% in 2022 to 64.7% in 2023. The rate for cessation attempts among current smoke cigars, cigarillos, or small cigars showed much more variation, with only 10.9% reporting that they had ever tried to quit smoking in 2022 and over one-fourth (27.3%) reporting the same in 2023.

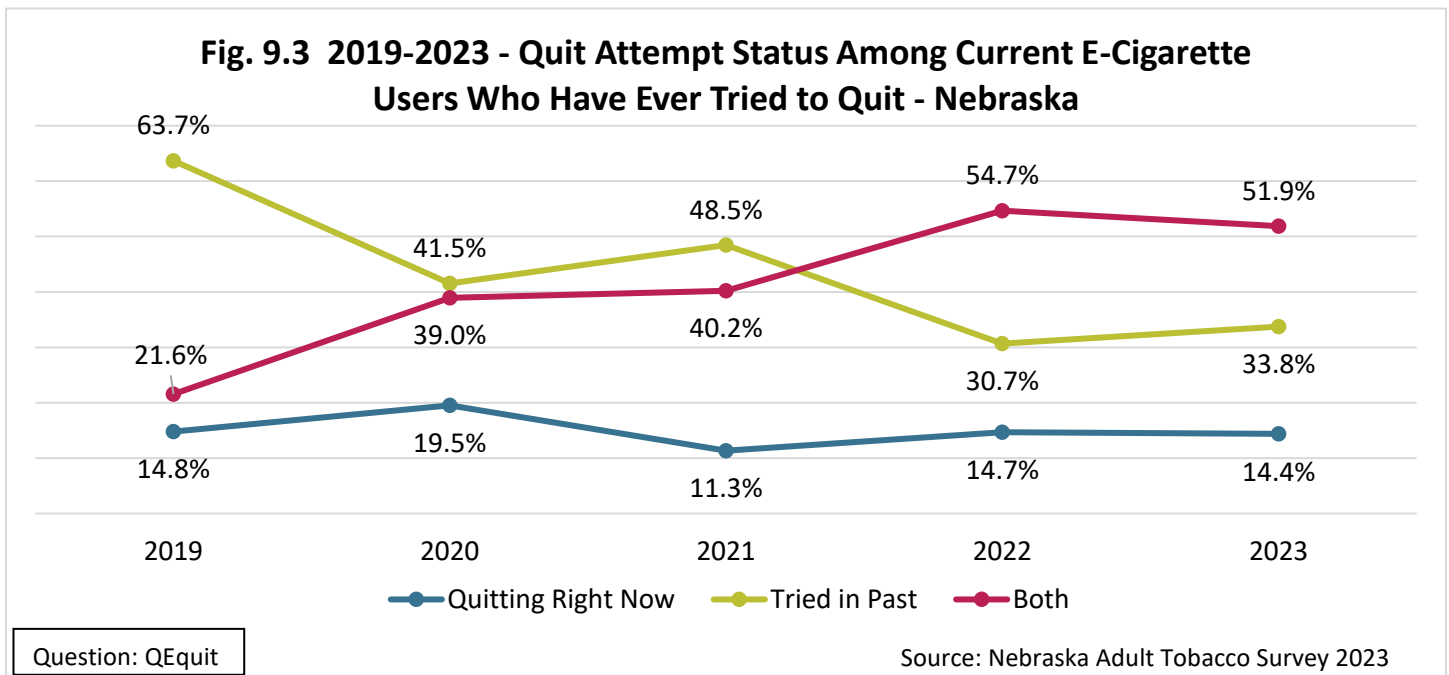
## Quit Attempt Status of E-cigarette Users 2019-2023

As seen in Table 9.2 below, quit attempts among the e-cigarette using population dropped substantially from 62.5% in 2022 to 54.9% in 2023, yet remained higher than quit attempt rates between 2019 (48.5%) and 2021 (44.5%).

Year	Ever Tried to Quit	Never Tried to Quit
2019	48.5%	51.5%
2020	49.4%	50.6%
2021	44.5%	55.5%
2022	62.5%	37.5%
2023	54.9%	45.1%

Source: Nebraska Adult Tobacco Survey 2023

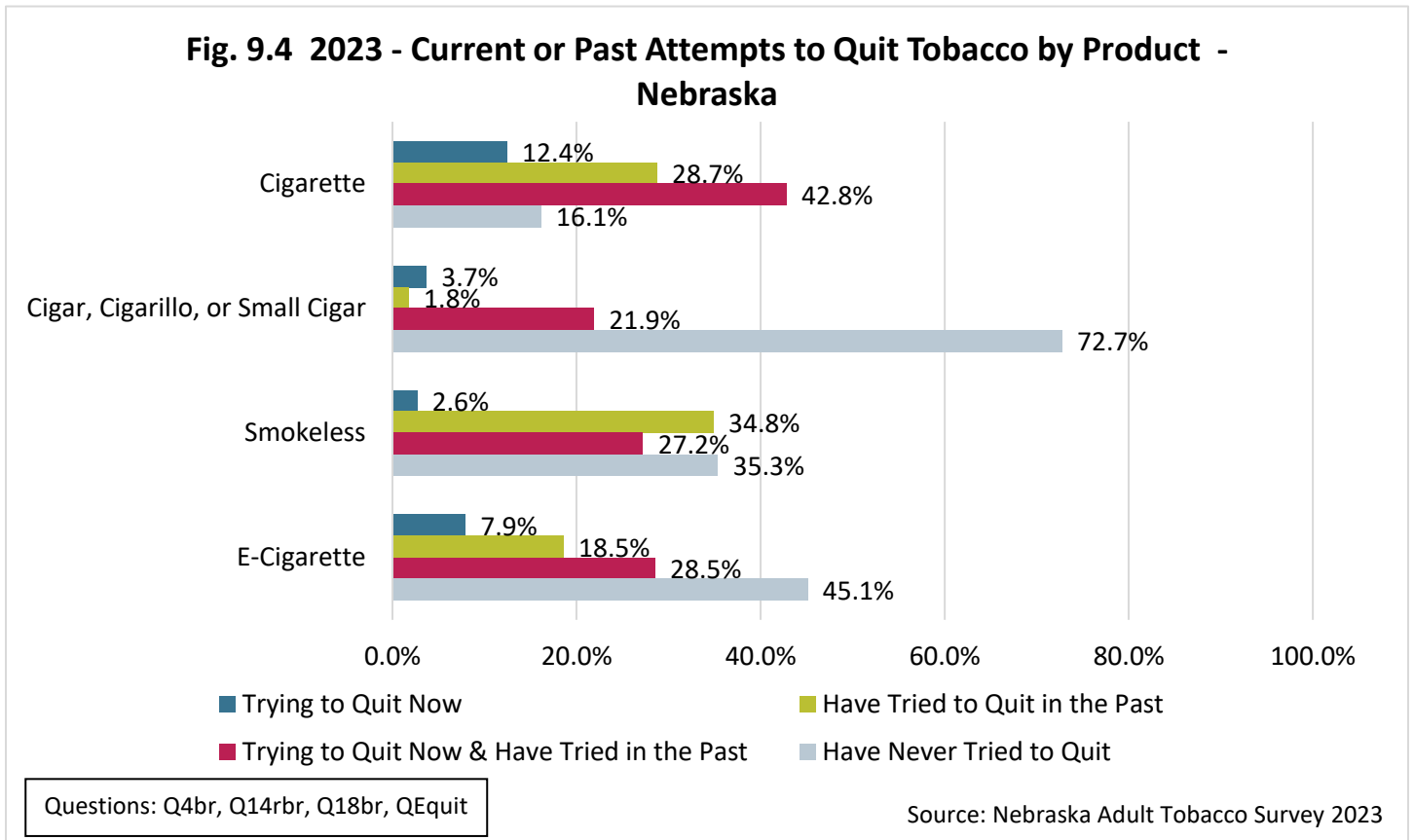
In 2023, the rate of cessation attempts among e-cigarette users dropped (Fig. 9.3).



From 2019 to 2021 e-cigarette users who have ever tried to quit using the product reported trying to quit in the past (63.7%, 41.5, and 48.5%, respectively) at higher rates than those who had both tried to quit in the past and were quitting at the time of the survey (21.6%, 39.0%, and 40.2%, respectively). The opposite was true in 2022 and 2023 where the rate of current e-cigarette users who had both tried to quit in the past and were quitting at the time of the survey (54.7% and 51.9%, respectively) exceeded the rate of those who had tried to quit in the past only (30.7% and 33.8%, respectively).

## Quitting Status of Tobacco Users

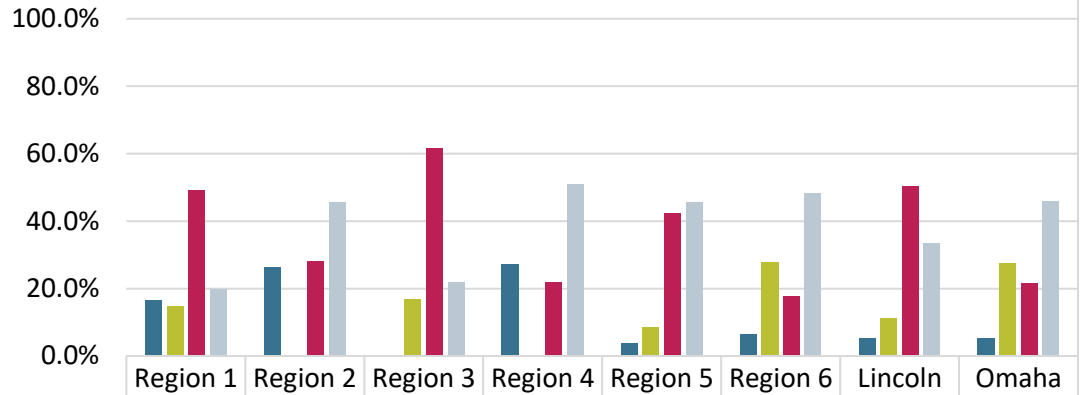
Cigar, cigarillo, or small cigar users reported never having tried to quit at higher rates than users of other tobacco products (Fig. 9.4).



For cigarette smokers, 42.8% reported having tried quitting in the past and were currently trying to quit. A majority of cigar, cigarillo, or small cigar smokers (72.7%), and close to half of e-cigarette users (45.1%), had never tried to quit.

Across all Nebraska regions, a large proportion of e-cigarette users were either trying to quit now and have tried to quit in the past or have never tried to quit (Fig. 9.5).

**Fig. 9.5 2023 - Current or Past Attempts to Quit Smoking E-Cigarettes - Region**



	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Lincoln	Omaha
Trying to Quit Now	16.4%	26.2%		27.3%	3.9%	6.3%	5.0%	5.4%
Have Tried in the Past	14.8%		16.8%		8.6%	27.8%	11.1%	27.3%
Trying to Quit Now & Have Tried in the Past	49.1%	28.1%	61.5%	21.9%	42.2%	17.8%	50.4%	21.4%
Have Never Tried to Quit	19.7%	45.7%	21.7%	50.8%	45.4%	48.2%	33.4%	45.9%

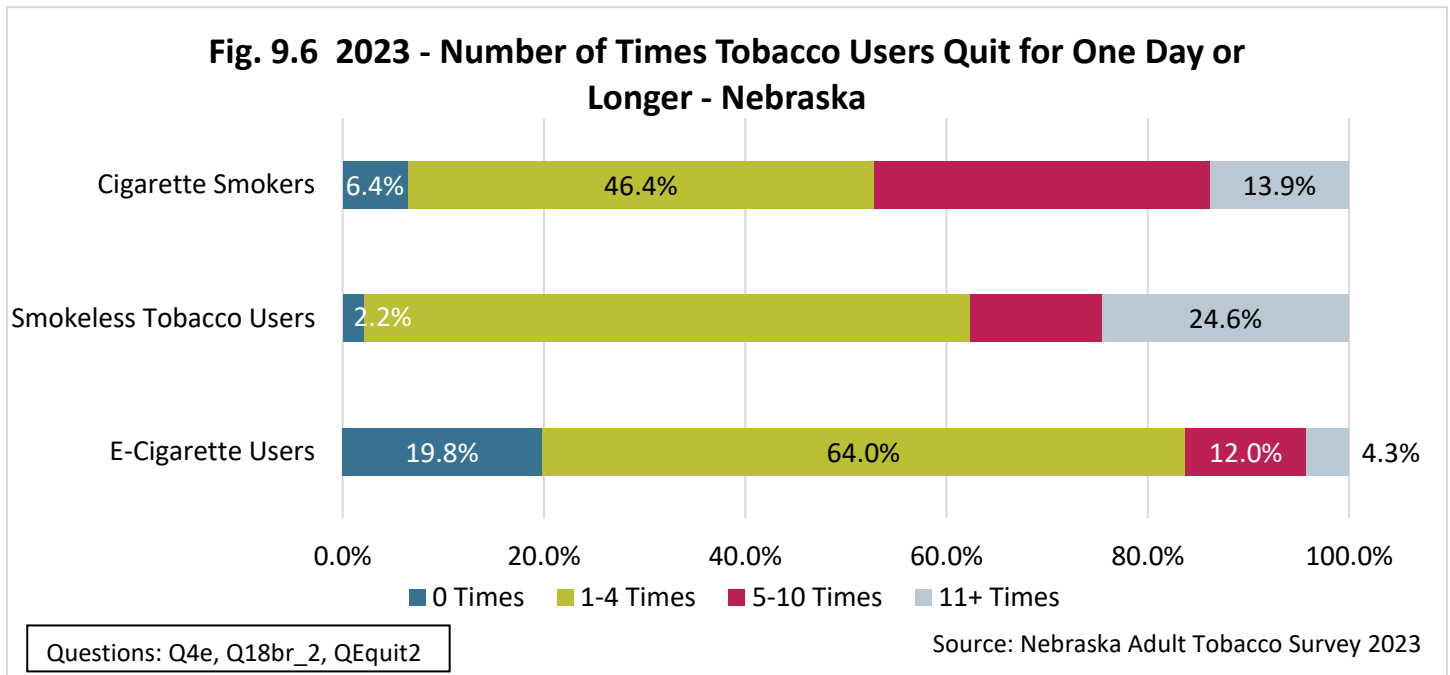
Questions: QEquit, QD\_zip

Source: Nebraska Adult Tobacco Survey 2023

When asked about their current and past attempts to quit using e-cigarettes, more respondents from Regions 1,3, and Lincoln reported that they were trying to quit at the time of the survey and have tried to quit in the past. As for current e-cigarette users from Regions 2, 4, 5, 6, and Omaha, more respondents reported that they have never tried to quit than those who were trying to quit at the time of the survey, have tried to quit in the past, or were both trying to quit now and have tried to quit in the past.

## Ever Quit for One Day or Longer

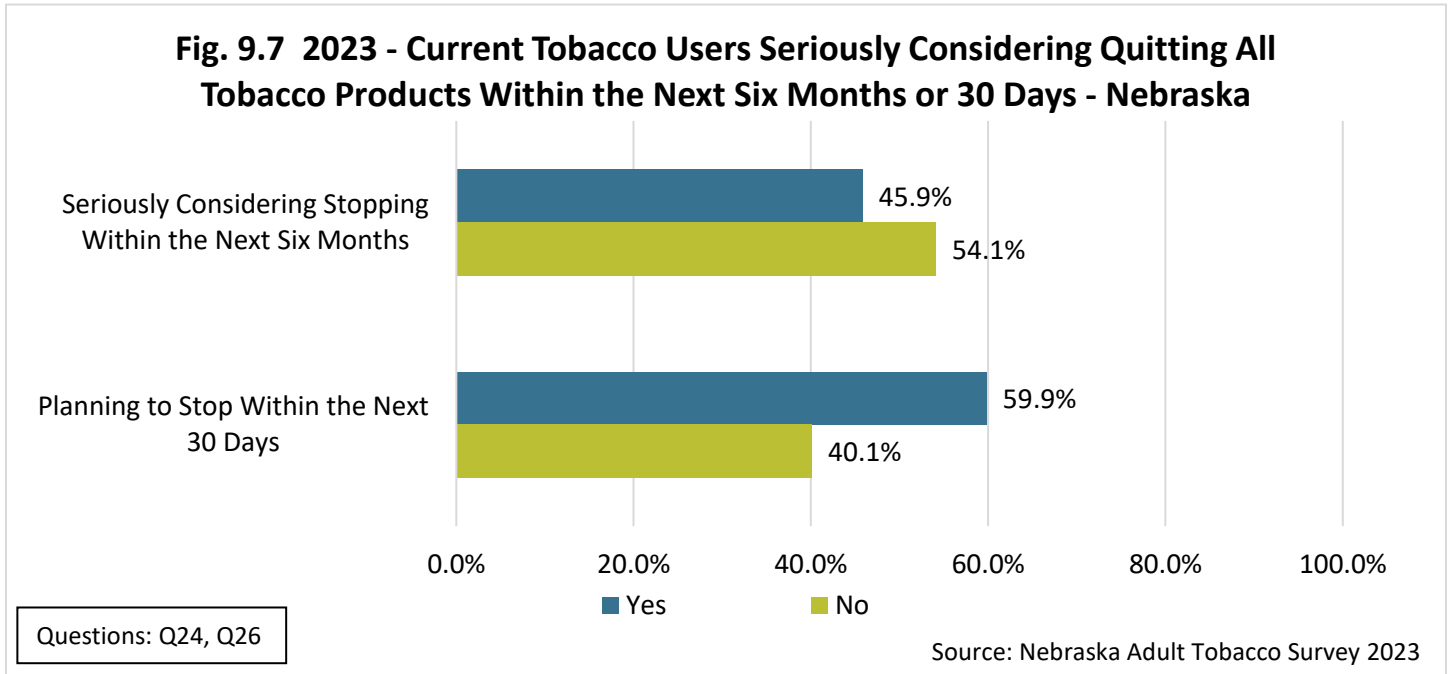
Cigarette smokers and smokeless tobacco users had the highest rate of trying to quit 11+ times, while e-cigarette users had the highest rate of never trying to quit (Fig. 9.6).



Smokeless tobacco users reported the highest proportion of 11+ instances of stopping the use of their respective tobacco product for one day or longer (24.6%), while e-cigarette users reported never trying to quit (19.8%) at higher rates than cigarette smokers (6.4%) and smokeless tobacco users (2.2%).

## Intent to Quit Within the Next Six Months or 30 Days

At the time of the survey, over two-fifths of current tobacco users were seriously considering quitting all tobacco products within the next six months, and over half (59.9%) were planning to quit all tobacco products within the next 30 days (Fig. 9.7).

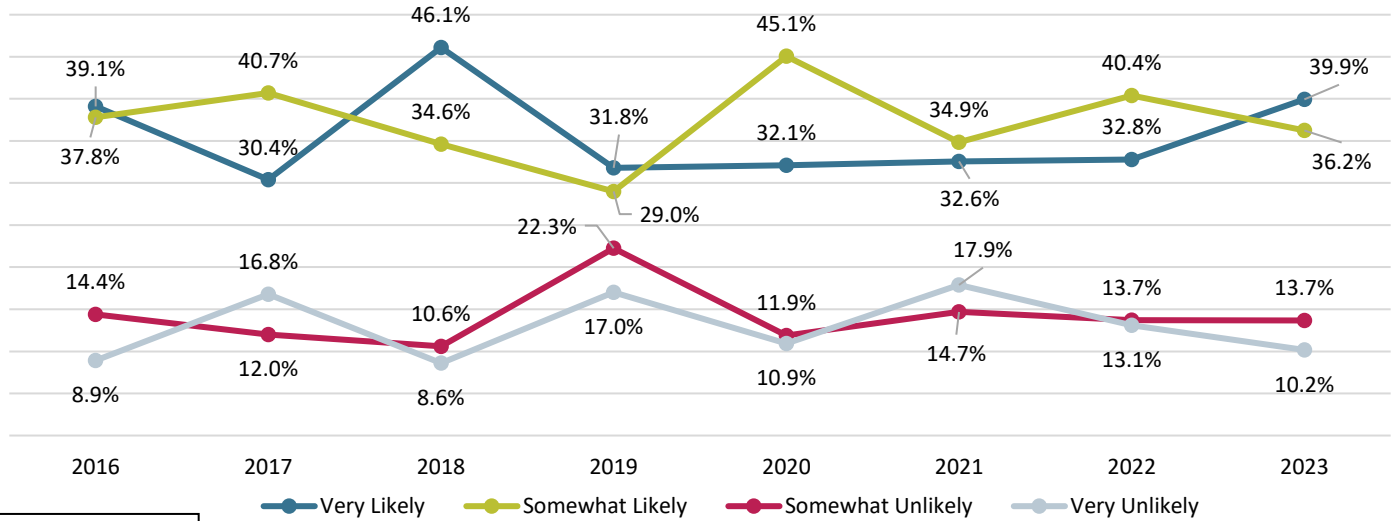


Among current tobacco users, nearly half (45.9%) were seriously considering quitting all tobacco products within the next six months at the time of the survey. Additionally, over half (59.9%) of them were planning to stop within the next 30 days.

## Likelihood of Quitting Successfully 2016-2023

Respondents appeared optimistic in their likelihood of successfully quitting tobacco products (Fig. 9.8).

### Fig. 9.8 2016-2023 - Likelihood the Tobacco User Will Successfully Quit - Nebraska



Question: Q27

Source: Nebraska Adult Tobacco Survey 2023

Throughout the years, tobacco users consistently reported their likelihood of successfully quitting tobacco products as somewhat likely or very likely at higher rates than somewhat unlikely and very unlikely.

Over three-fourths of tobacco users reported their likelihood of successfully quitting their use of tobacco products as very likely or somewhat likely (Fig. 9.9).

### Fig. 9.9 2023 - Likelihood the Tobacco User Will Successfully Quit - Nebraska



Question: Q27

Source: Nebraska Adult Tobacco Survey 2023

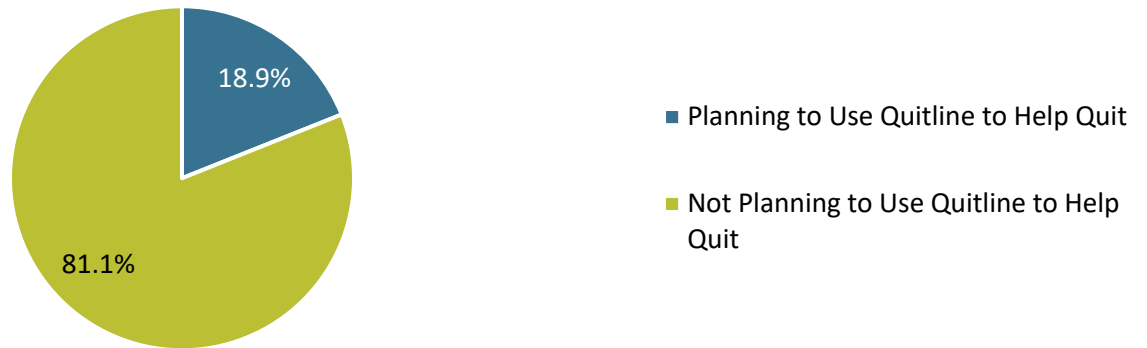
The likelihood in which respondents thought they would successfully quit using tobacco products is very high (76.2%) compared to those who believed success is unlikely (23.8%).



## Use Quitline to Help Quit

Around one-fifth of tobacco users planned to use a Quitline to help them quit smoking or using tobacco products (Fig. 9.10).

**Fig. 9.10 2023 - Planning to Use Quitline to Help Quit Smoking or Using Tobacco Products - Nebraska**



Question: QQLine2

Source: Nebraska Adult Tobacco Survey 2023

Around one-fifth (18.9%) of tobacco users planned to use a Quitline to help them quit smoking or using tobacco products while the majority (81.1%) did not plan to use a Quitline.

## Use Medications to Help Quit

The majority of former tobacco users did not use medications to help them quit (Fig. 9.11).

**Fig. 9.11 2023 - Use of Medication by Former Tobacco Users to Help Quit - Nebraska**



Question: Q20r

Source: Nebraska Adult Tobacco Survey 2023

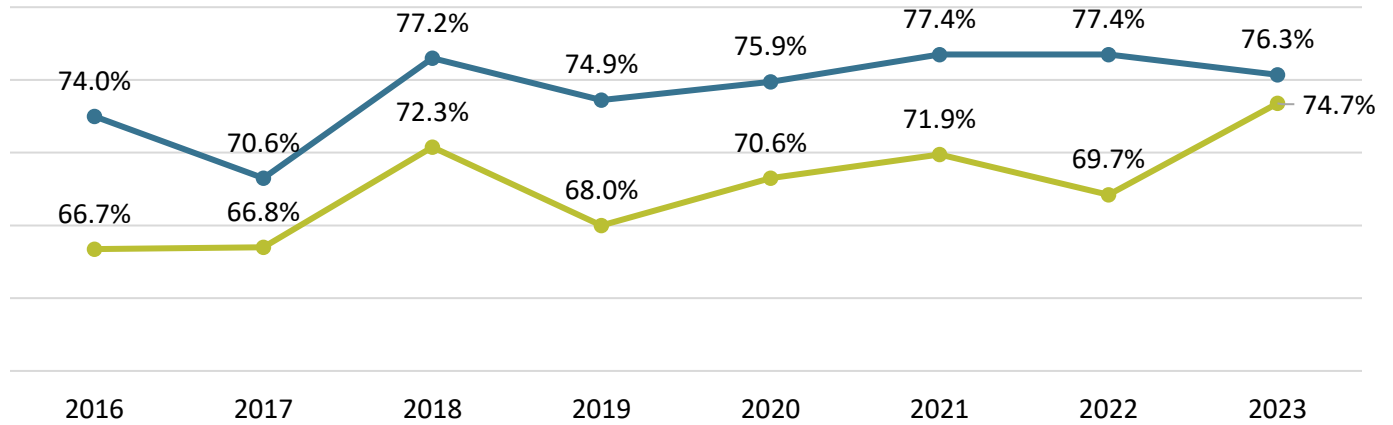
According to the U.S. Department of Health and Human Services, evidence-based treatments, including cessation medications approved by the U.S. Food and Drug Administration (FDA), significantly increase success in quitting tobacco. At the time of the survey, 18.9% of former tobacco users used medications to help them quit, whereas 81.1% of former tobacco users did not.

## Visits to Health Care Providers

### Visited a Medical Provider or Dentist 2016-2023

The percentage of Nebraskans who saw a medical provider or dentist within the last 12 months remained relatively unchanged in 2023 while the proportion of Nebraskans who saw a dentist rose (Fig. 10.1).

**Fig. 10.1 2016-2023 - Percentage of Nebraskans Who Saw a Medical Provider or a Dentist in Last 12 months**



Questions: Q28r, Q32

—●— Medical Provider

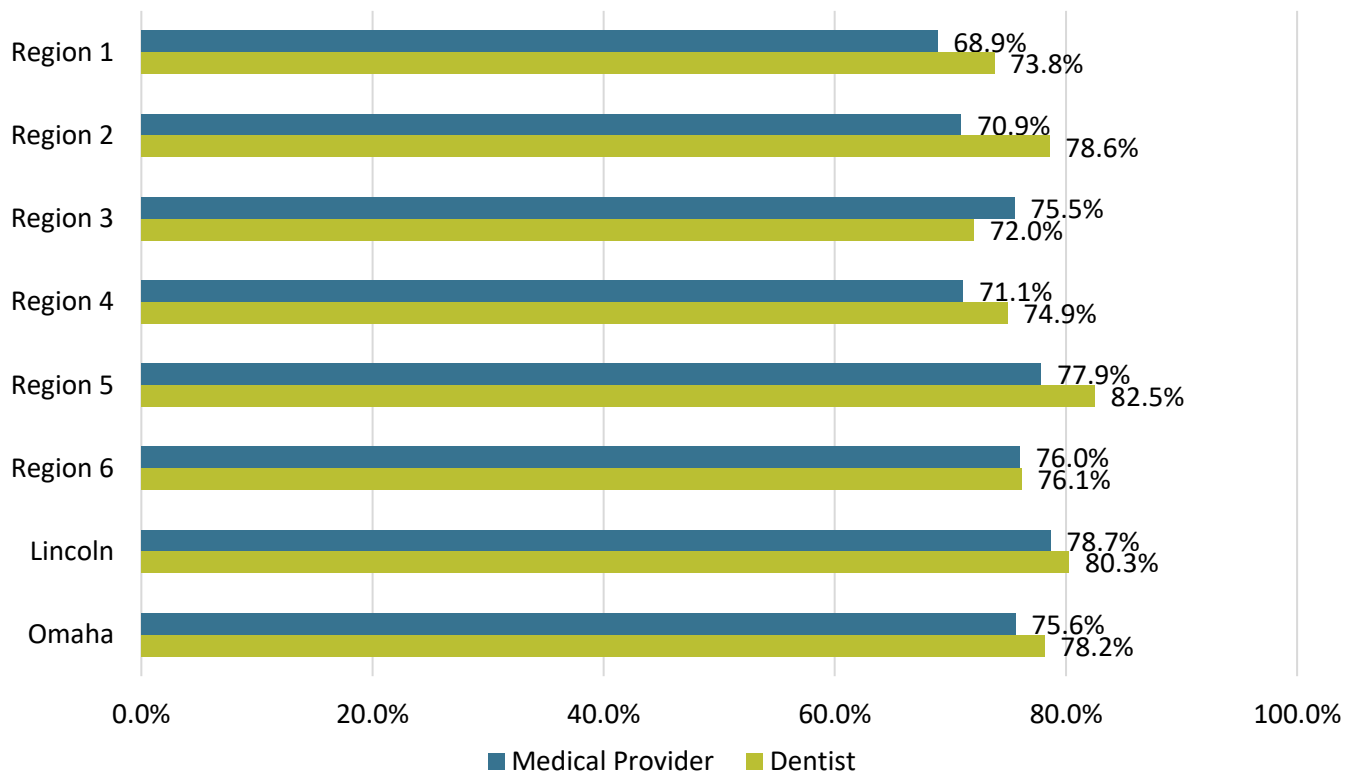
—●— Dentist

Source: Nebraska Adult Tobacco Survey 2023

More than three quarters of respondents (76.3%) indicated that they had seen a medical provider within the last 12 months, and nearly three quarters (74.7%) said that they had seen a dentist.

More than 70.0% of respondents in each Nebraska region reported having seen a dentist in the last 12 months and more than 70.0% of respondents in seven of the eight regions had seen a medical provider (Fig. 10.2).

**Fig. 10.2 2023 - Visited a Medical Provider or Dentist - by Region**



Questions: Q28r, Q32, QD\_zip

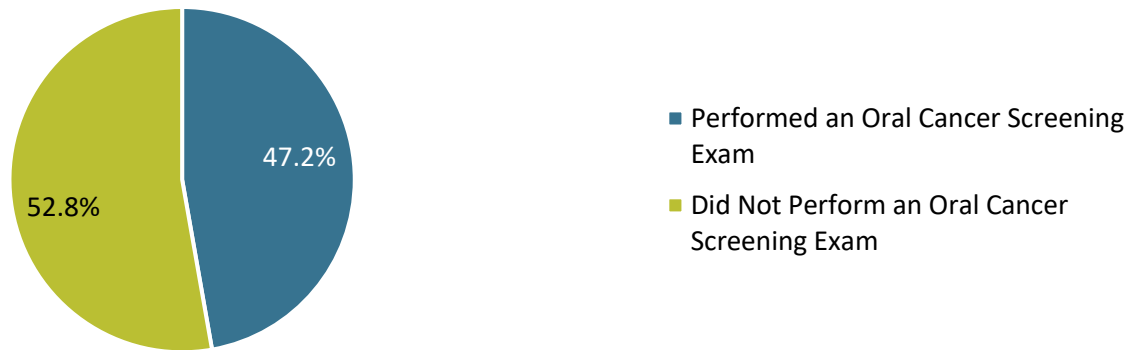
Source: Nebraska Adult Tobacco Survey 2023

Region 3 (72.0%) reported the lowest rate of respondents who had seen a dentist in the last 12 months, whereas Region 5 (82.5%) reported the highest rate of respondents who had seen a dentist in the last 12 months.

## Oral Cancer Screening Exam

Almost half of respondents who saw a dentist reported that their dentist performed an oral cancer screening exam (Fig. 10.3).

**Fig. 10.3 2023 - Dentist Performed an Oral Cancer Screen Exam - Nebraska**



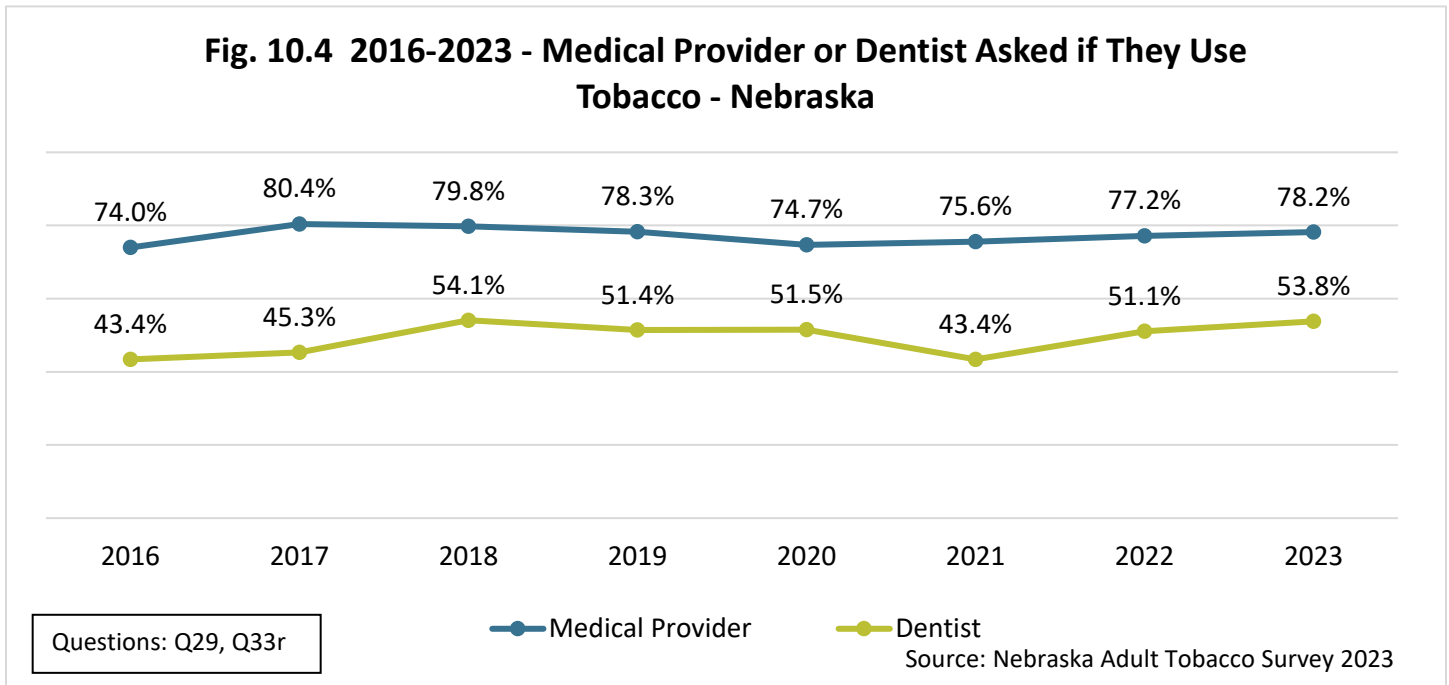
Question: OrCanSc

Source: Nebraska Adult Tobacco Survey 2023

Less than half (47.2%) of dentists performed an oral cancer screening exam.

## Medical Provider or Dentist Asked About Tobacco Use 2016-2023

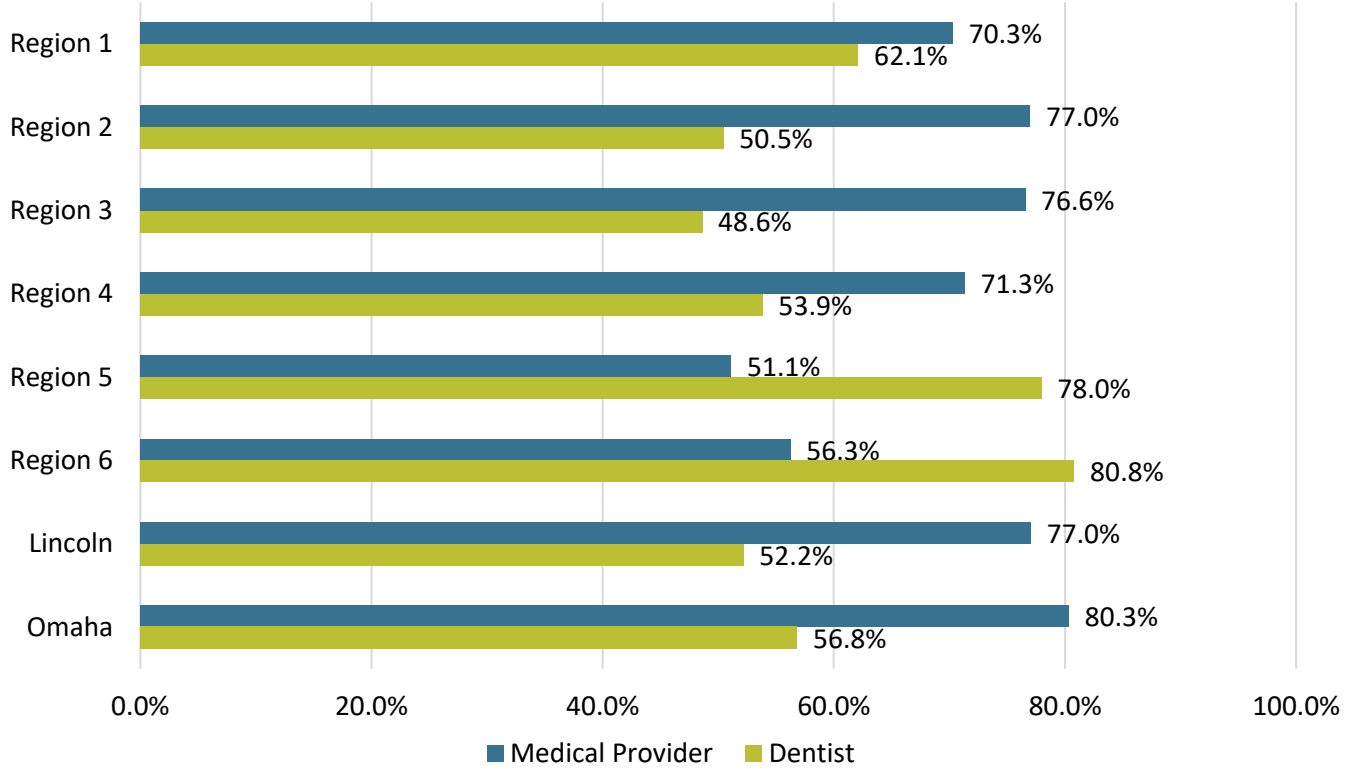
The percentage of medical providers and dentists who asked Nebraskans if they used tobacco remained relatively stable in 2023 (Fig. 10.4).



The percentage of respondents whose dentist asked them if they used tobacco increased slightly in 2023, from 51.1% to 53.8%. There was a small increase in the rate of respondents whose medical provider asked them about tobacco use from 2022 (77.2%) to 2023 (78.2%).

Medical providers asked their patients about tobacco use at higher rates than dentists in six of the eight Nebraska regions (Fig. 10.5).

**Fig. 10.5 2023 - Medical Provider or Dentist Asked if They Use Tobacco - by Region**



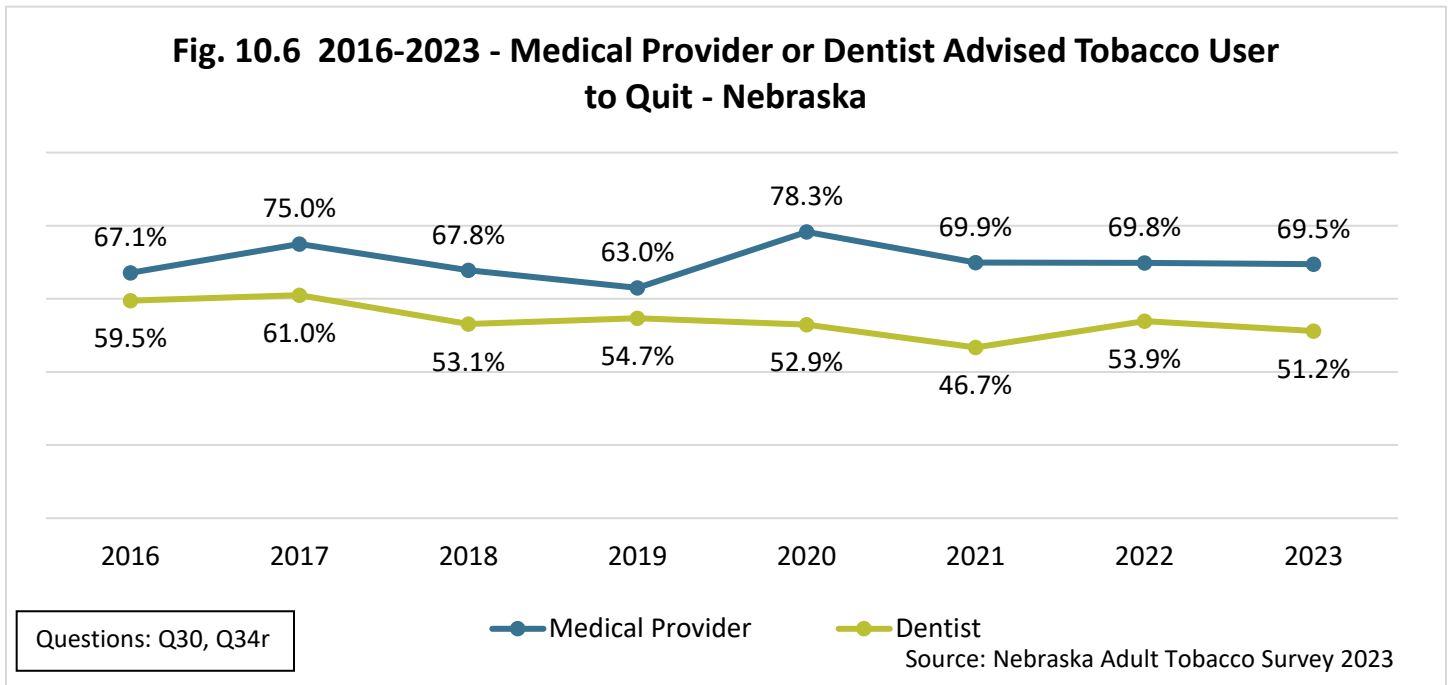
Questions: Q29, Q33r, QD\_zip

Source: Nebraska Adult Tobacco Survey 2023

Dentists in Regions 1, 2, 4, 5, 6, Lincoln, and Omaha asked their patients about tobacco use in over half of their reported interactions in most regions. However, Region 3 dentists only asked 48.6% of their patients about tobacco use. Medical providers asked their patients about tobacco use at higher rates than dentists in all regions except for Regions 5 and 6.

## Medical Provider or Dentist Advised Patient to Quit 2016-2023

The percentage of medical providers and dentists who advised tobacco users to quit remained consistent in 2023 (Fig. 10.6).

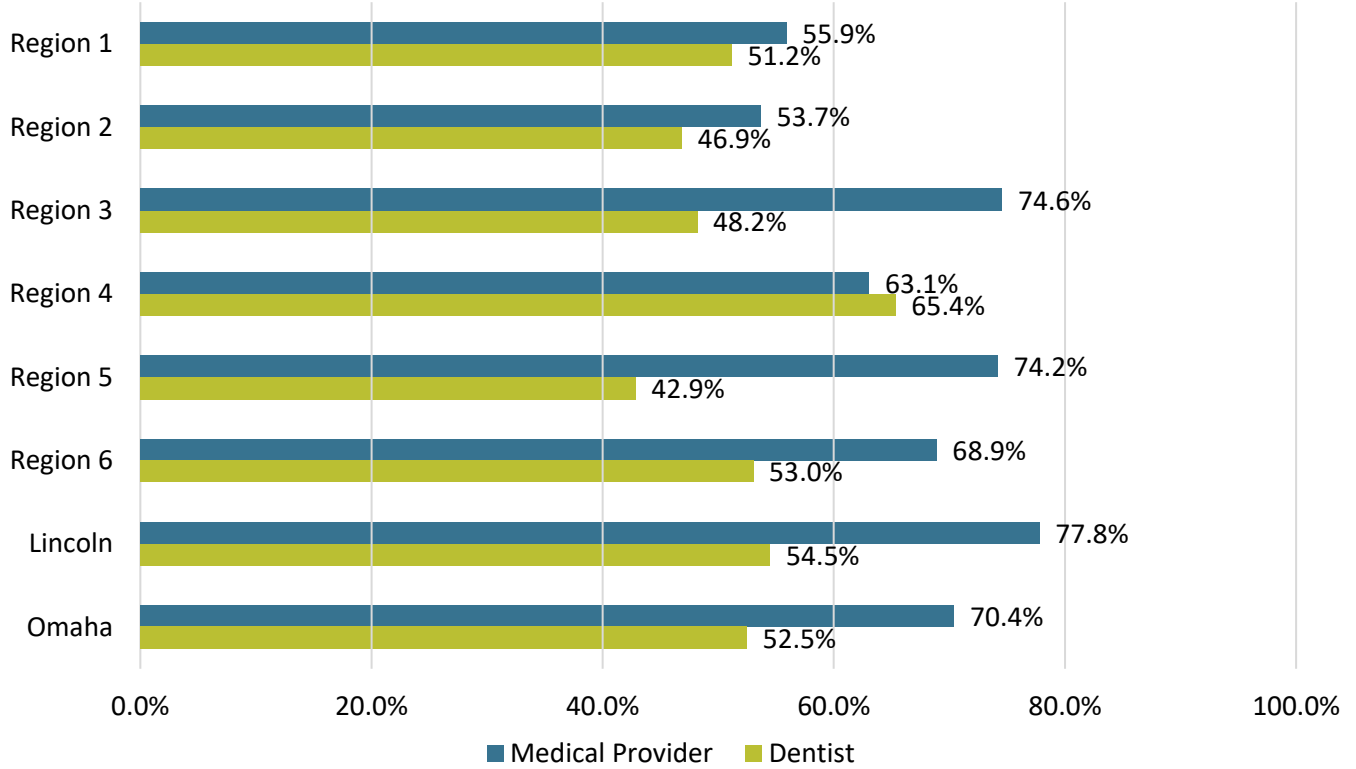


In 2023, just over half (51.2%) of respondents who used tobacco products at the time of the survey were advised by their dentist to quit, while 69.5% of tobacco users were advised by their medical providers to quit.



A higher proportion of medical providers advised tobacco users to quit using tobacco products than did dentists in seven of the eight regions (Fig. 10.7).

**Fig. 10.7 2023 - Medical Provider or Dentist Advised Tobacco User to Quit - by Region**



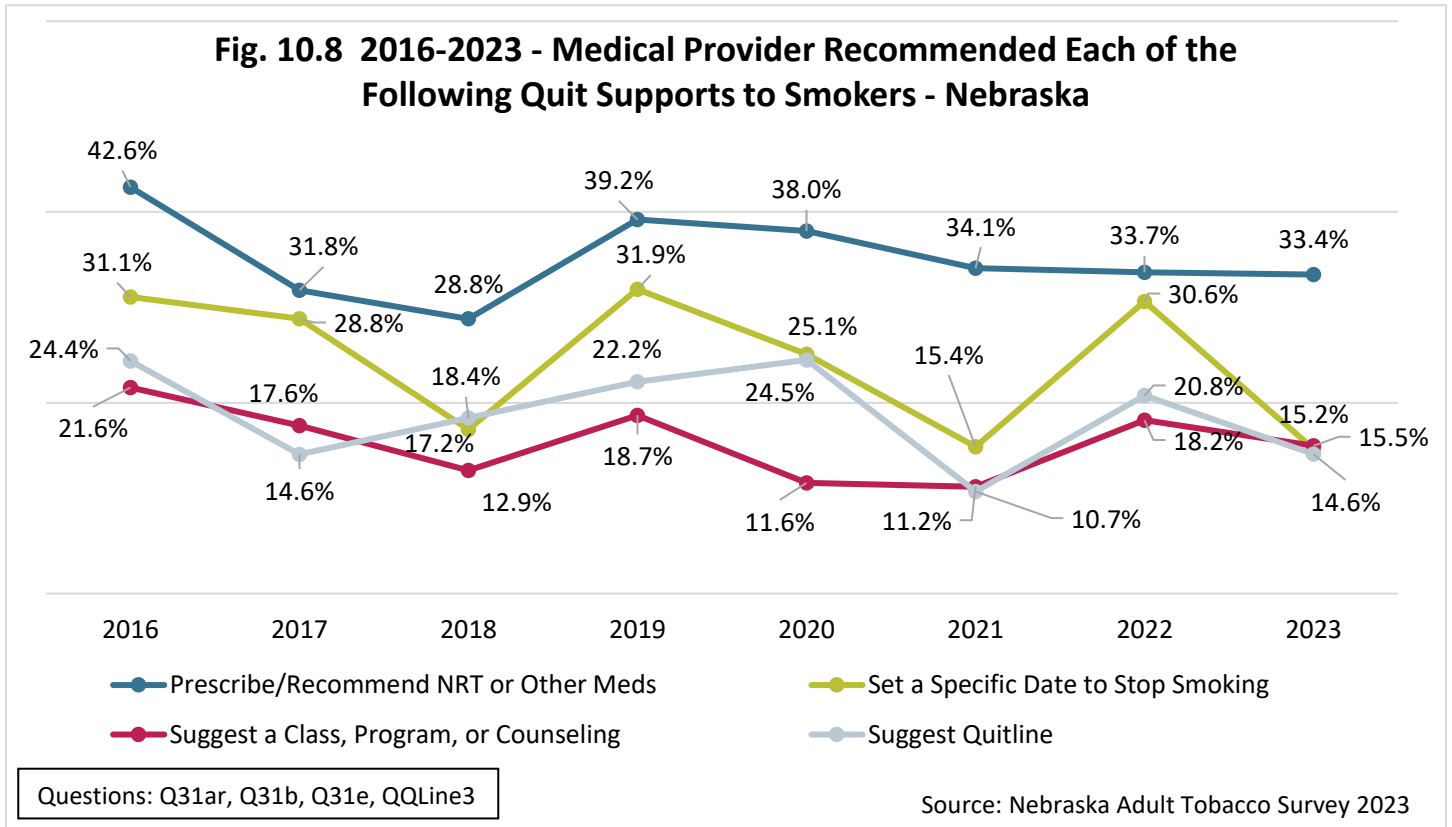
Questions: Q30, Q34r, QD\_zip

Source: Nebraska Adult Tobacco Survey 2023

Medical providers advised their patients to quit using tobacco products in over half of all interactions regardless of region. Dentists, overall, advised their patients to quit using tobacco products at lower rates than did medical providers, with the exception of Region 4.

## Provider Cessation Suggestions 2016-2023

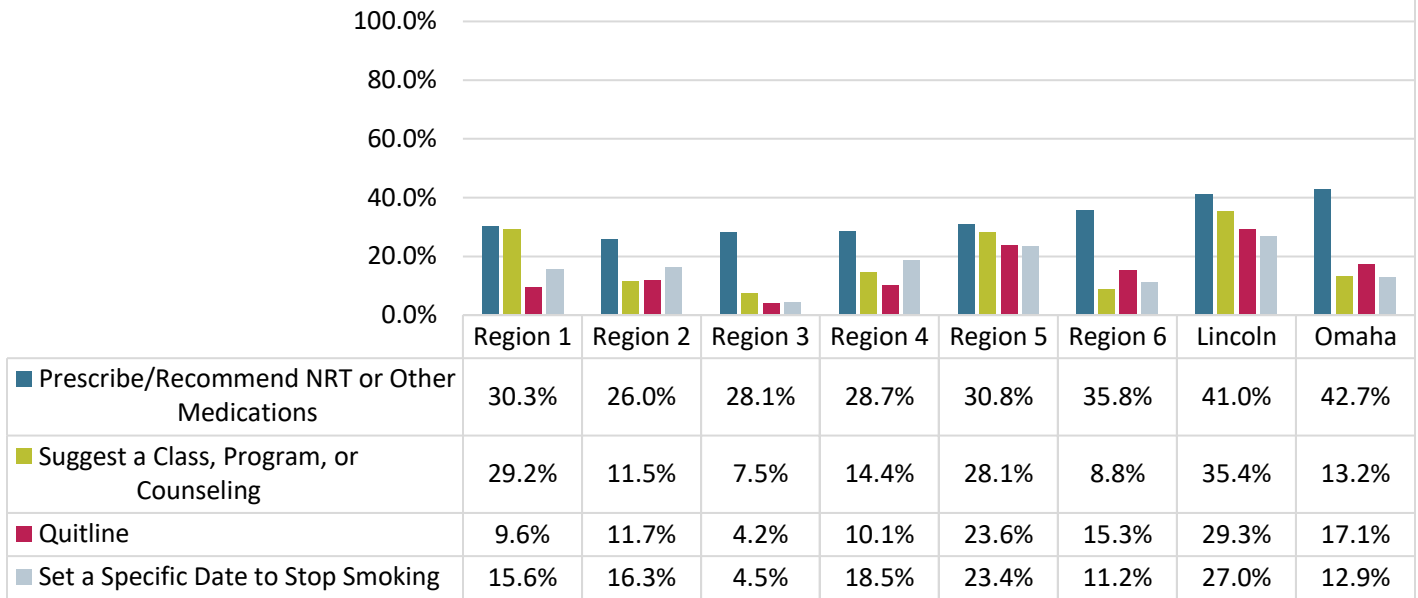
Medical providers' recommendations for quit supports varies year to year (Fig. 10.8).



Prescribing or recommending Nicotine Replacement Therapy (NRT) or other medications as quit supports to smokers remained the highest recommendation from medical providers at 33.4% in 2023. Setting a specific date to stop smoking rose from 15.4% in 2021 to 30.6% in 2022 and dropped again in 2023 to 15.2%.

The rate in which medical providers suggested a class, program, or counseling to smokers to help them quit varies across regions (Fig. 10.9).

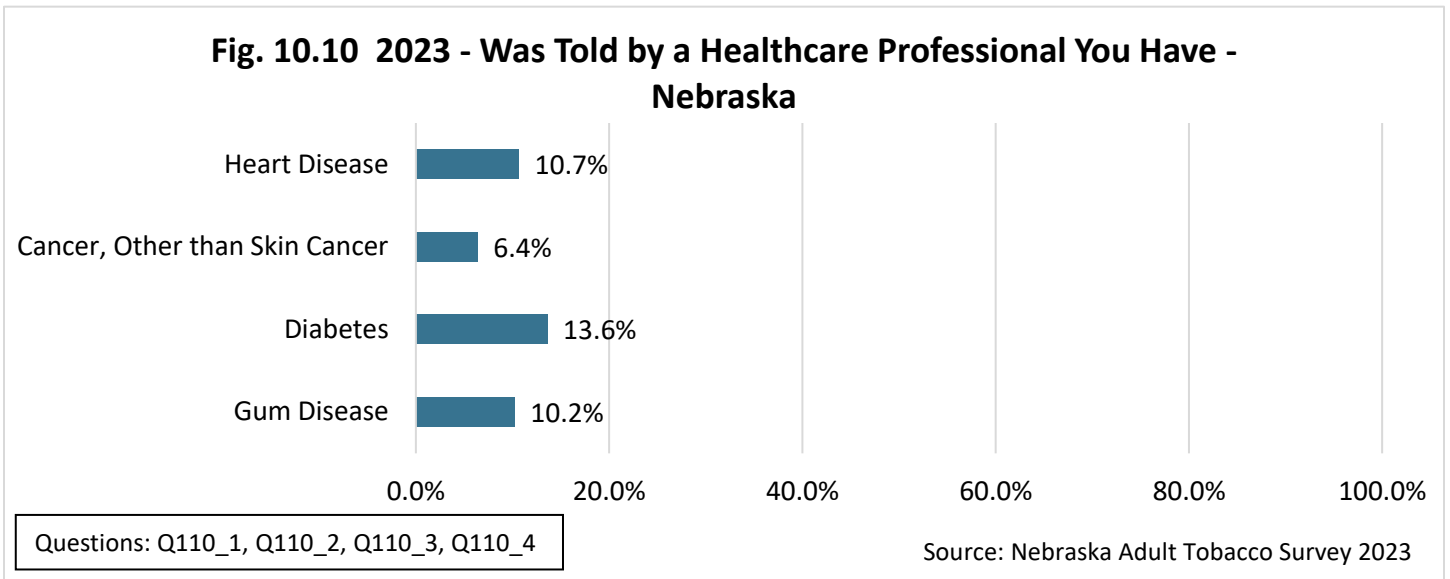
**Fig. 10.9 2023 - Medical Provider Recommended Each of the Following Quit Supports to Smokers - by Region**



Questions: Q31ar, Q31b, Q31e, QQLine3, QD\_zip Source: Nebraska Adult Tobacco Survey 2023

Medical providers prescribed or recommended NRT or other medications to stop smoking at higher rates than other tobacco cessation supports in all regions.

A higher proportion of Nebraskans have diabetes than other tobacco related ailments (Fig. 10.10).

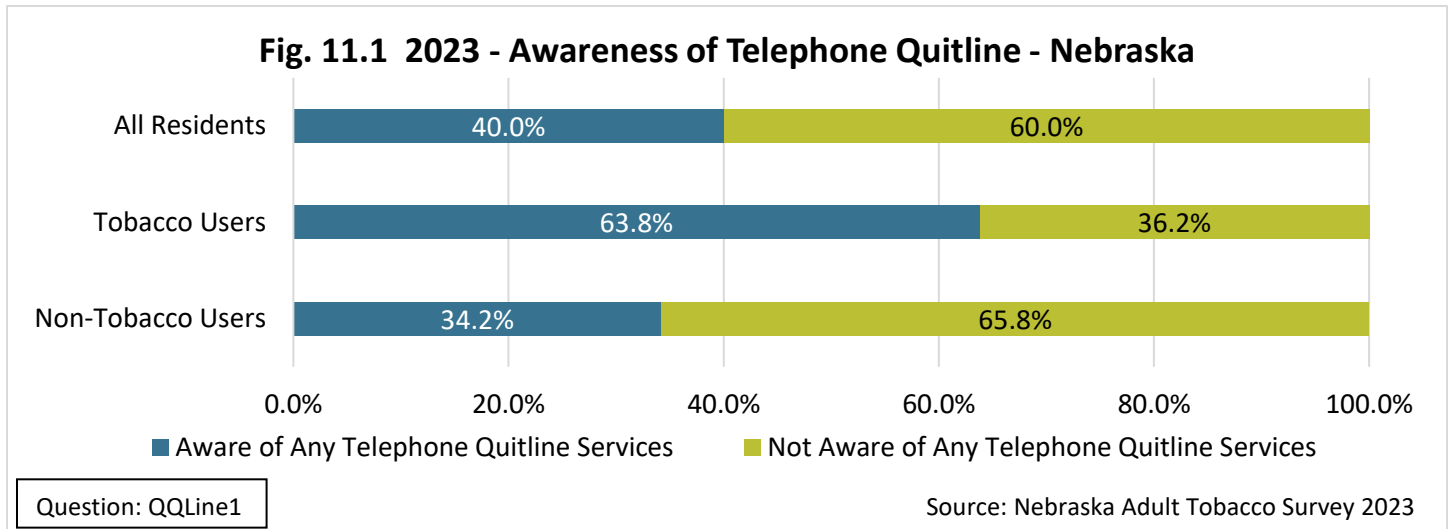


In 2023, 13.6% of respondents were told by a healthcare professional that they have diabetes, 10.7% heart disease, 10.2% gum disease, and 6.4% cancer (excluding skin cancer).

## Telephone Quitline

### Awareness of a Telephone Quitline

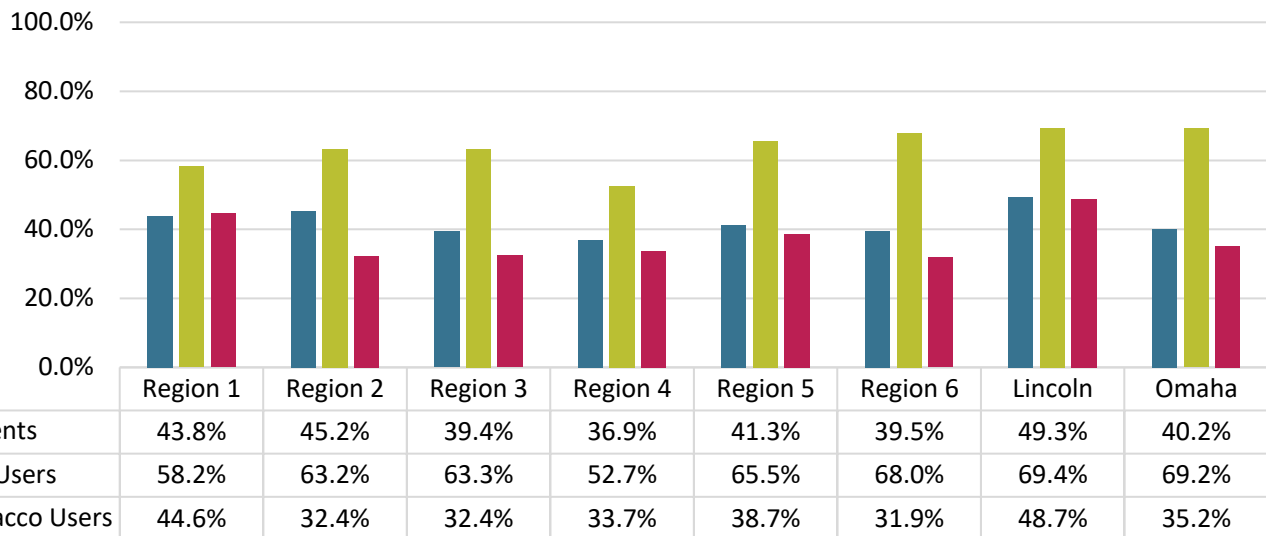
Two-fifths of all respondents and nearly two-thirds of tobacco users reported being aware of some telephone Quitline services (Fig. 11.1).



Out of all respondents, 40.0% indicated awareness of some types of telephone Quitline services. Close to two-thirds (63.8%) of tobacco users were aware of these services, while 34.2% of non-tobacco users were aware of these services.

Tobacco users indicated awareness of some telephone Quitline services more than non-tobacco users across all Nebraska regions (Fig. 11.2).

**Fig. 11.2 2023 - Awareness of Telephone Quitline - by Region**



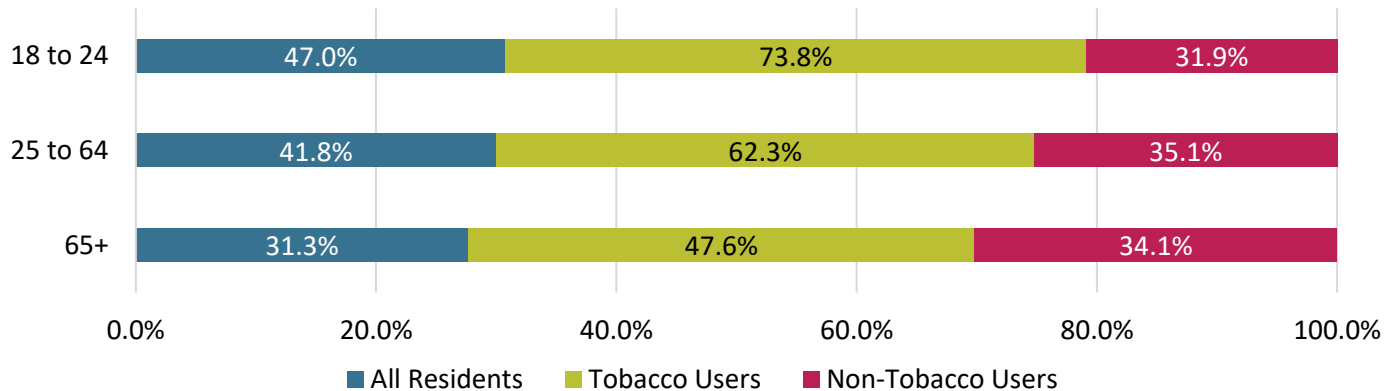
Questions: QQLine1, QD\_zip

Source: Nebraska Adult Tobacco Survey 2023

Tobacco users indicated higher rates of awareness of some telephone Quitline services than non-tobacco users in each of the eight Nebraska regions.

Tobacco users aged 18 to 24 years reported more awareness of some Quitline services than older tobacco users (Fig. 11.3).

**Fig. 11.3 2023 - Awareness of Telephone Quitline - by Age**

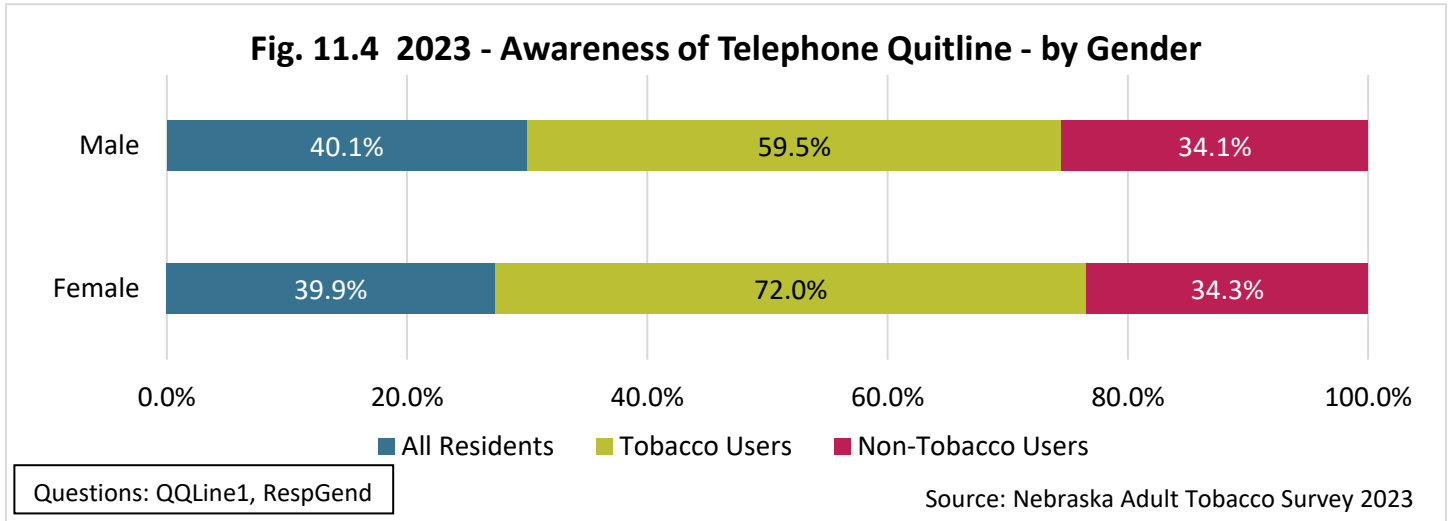


Questions: QQLine1, QD1

Source: Nebraska Adult Tobacco Survey 2023

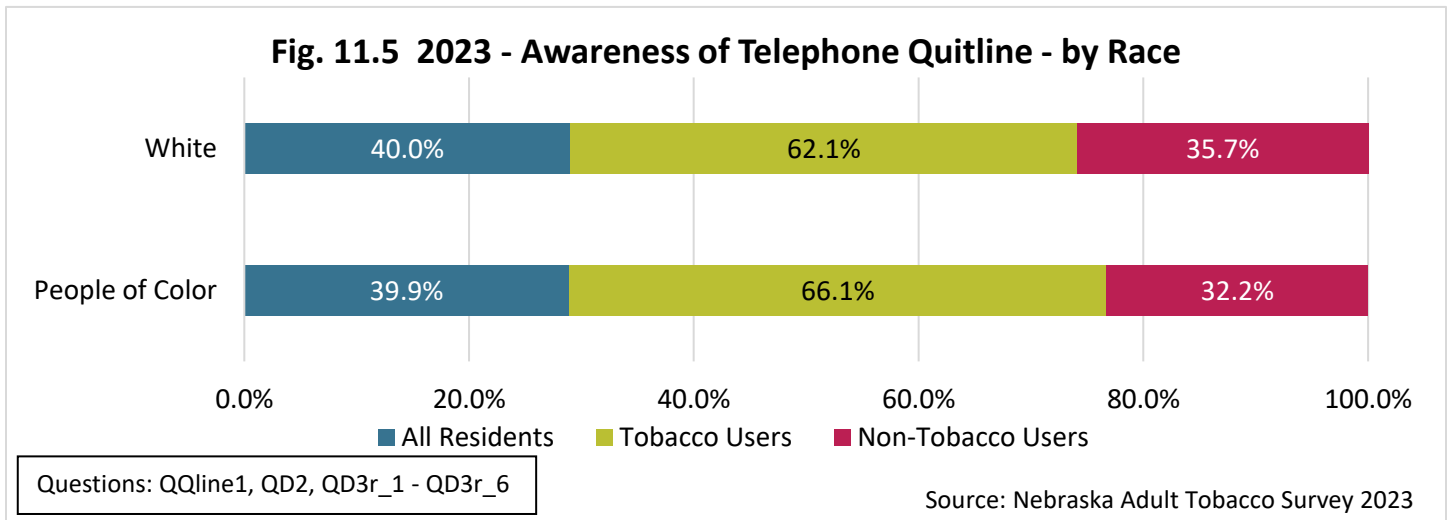
Tobacco users aged 18 to 24 years reported the highest rate of awareness of some telephone Quitline services (73.8%) across all age groups and tobacco-use statuses.

Female tobacco users are exceedingly more likely to report awareness of some Quitline services than male tobacco users (Fig. 11.4).



Female tobacco users reported the highest rate of awareness of some Quitline services (72.0%) across gender and tobacco-use status.

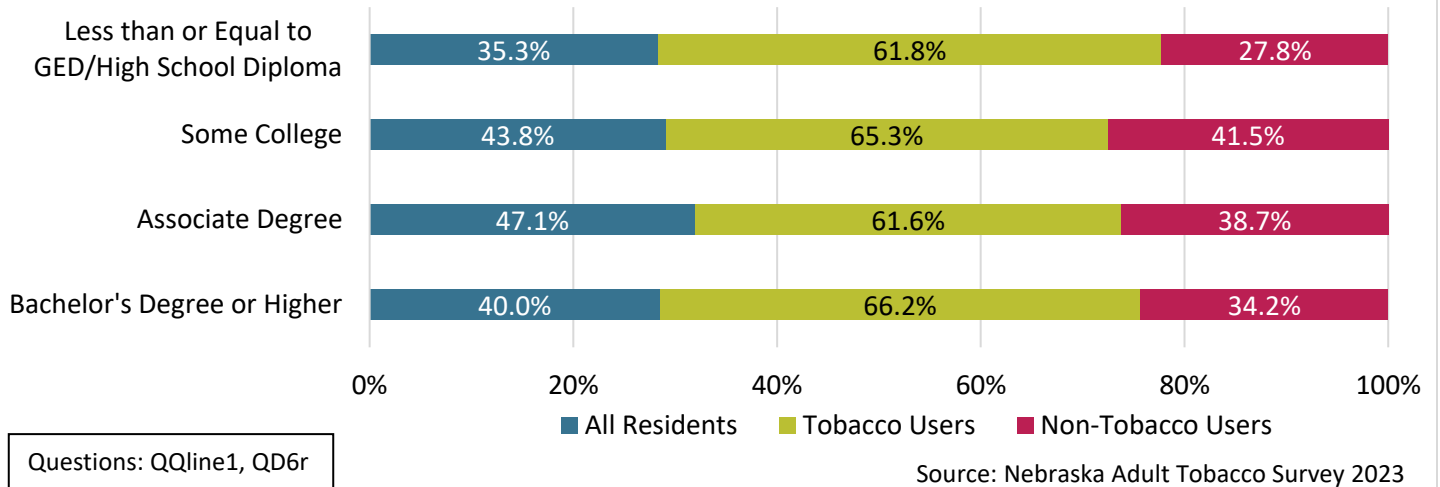
Awareness of Quitline services appeared at similar rates regardless of race (Fig. 11.5).



Out of all respondents, 40.0% of White respondents and 39.9% of Respondents of Color reported awareness of some Quitline services. People of Color who use tobacco reported a slightly higher awareness rate of telephone Quitline services (66.1%) than White tobacco users (62.1%), while White non-tobacco users reported a slightly higher awareness rate of telephone Quitline services (35.7%) than non-tobacco users of Color (32.2%).

Across all residents, awareness of some Quitline services rose with education level, until dropping among respondents with a bachelor’s degree or higher (Fig. 11.6).

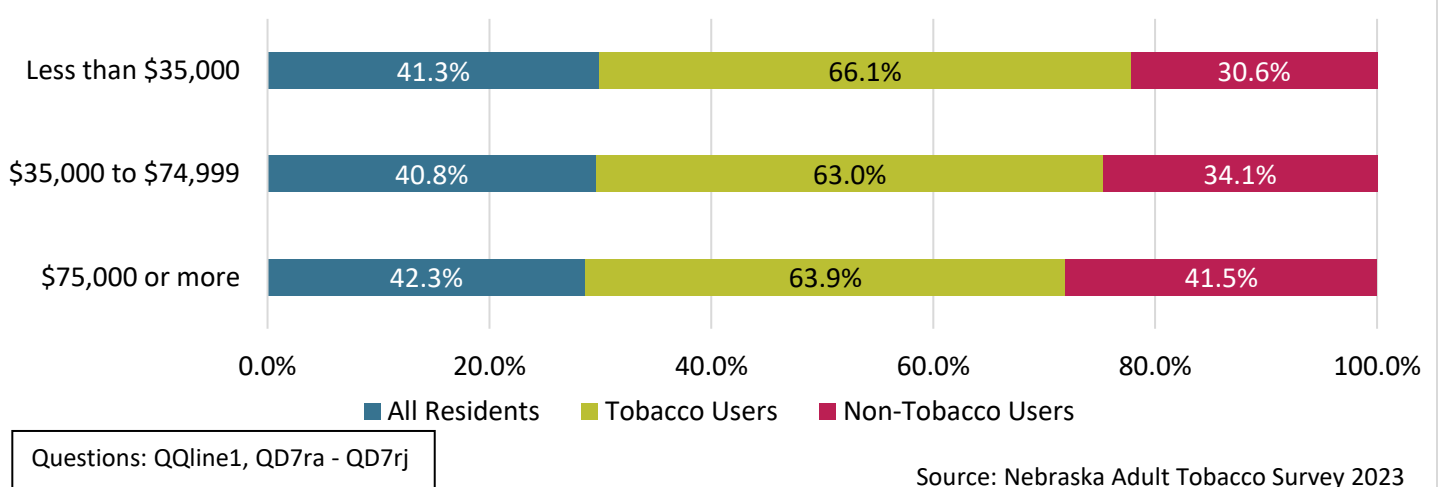
**Fig. 11.6 2023 - Awareness of Telephone Quitline - by Education**



Tobacco users reported higher awareness of Quitline services than non-tobacco users regardless of education level.

Tobacco users with an annual household income less than \$35,000 reported higher rates of awareness of Quitline services than tobacco users with an annual household income of \$35,000 or more (Fig. 11.7).

**Fig. 11.7 2023 - Awareness of Telephone Quitline - by Income**

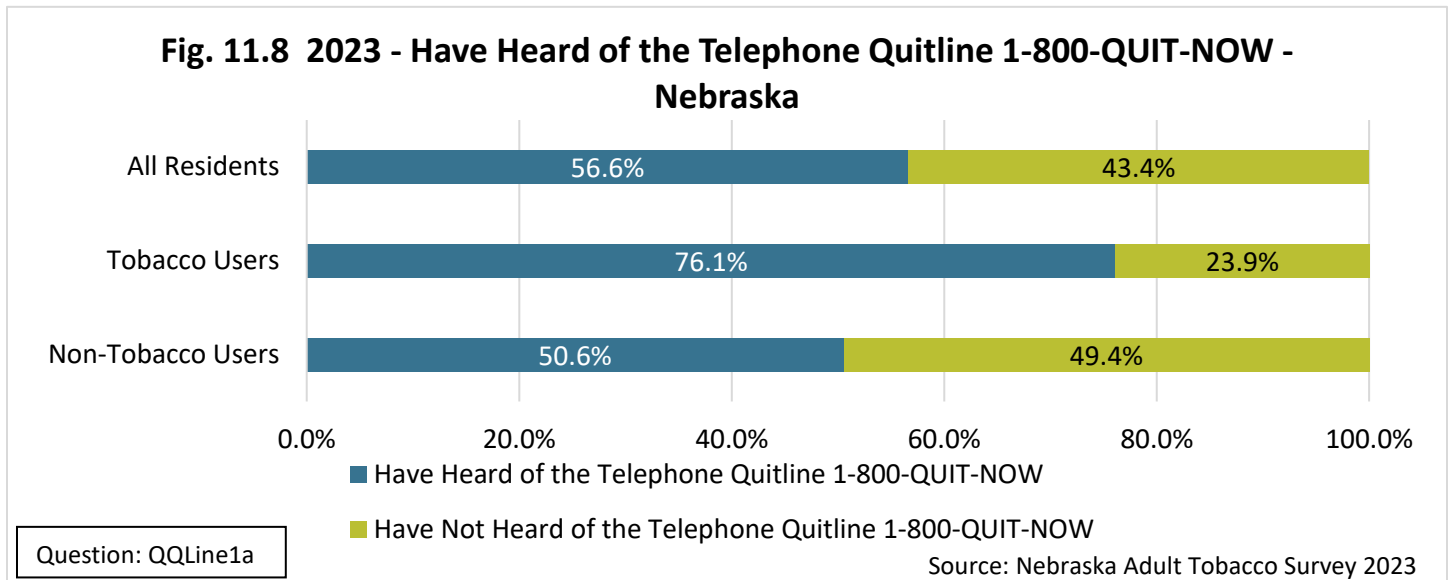


Among all residents, those with an annual household income of \$75,000 or more reported slightly higher rates of awareness of some Quitline services (42.3%) than those with an annual household income of \$35,000 to \$74,999 (40.8%) and less than \$35,000 (41.3%). Tobacco users reported awareness of some Quitline services at higher rates than non-tobacco users regardless of annual household income.



## Heard of 1-800-QUIT-NOW or 1-855-DEJÉLO-YA

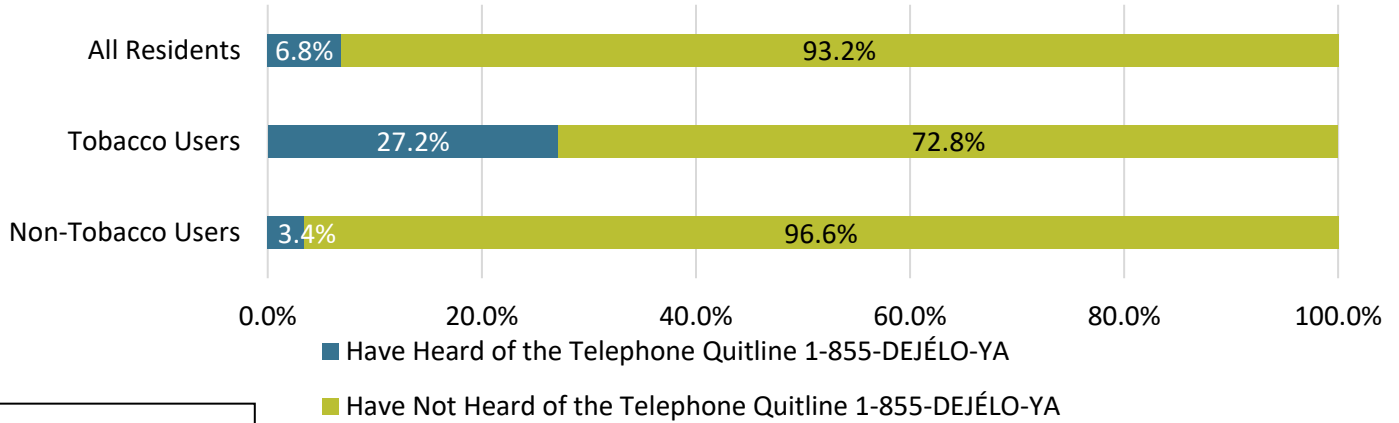
Over half (56.6%) of Nebraskans have heard of the telephone Quitline 1-800-QUIT-NOW (Fig. 11.8).



Tobacco users (76.1%) showed a much higher rate of awareness of the telephone Quitline 1-800-QUIT-NOW than non-tobacco users (50.6%). Interestingly, 40.0% of all respondents indicated awareness of some telephone Quitline services (Fig. 11.1), while a higher rate (56.6%) of all respondents heard of the telephone Quitline 1-800-QUIT-NOW. This is possibly because when asked about telephone Quitline services, the respondents failed to recall 1-800-QUIT-NOW, were not sure 1-800-QUIT-NOW is also a telephone Quitline service, or the phrase “1-800-QUIT-NOW” is simply more recognizable.

Tobacco users reported having heard of the telephone Quitline 1-855-DEJÉLO-YA at higher rates than non-tobacco users (Fig. 11.9).

**Fig. 11.9 2023 - Have Heard of the Telephone Quitline 1-855-DEJÉLO YA - Nebraska**



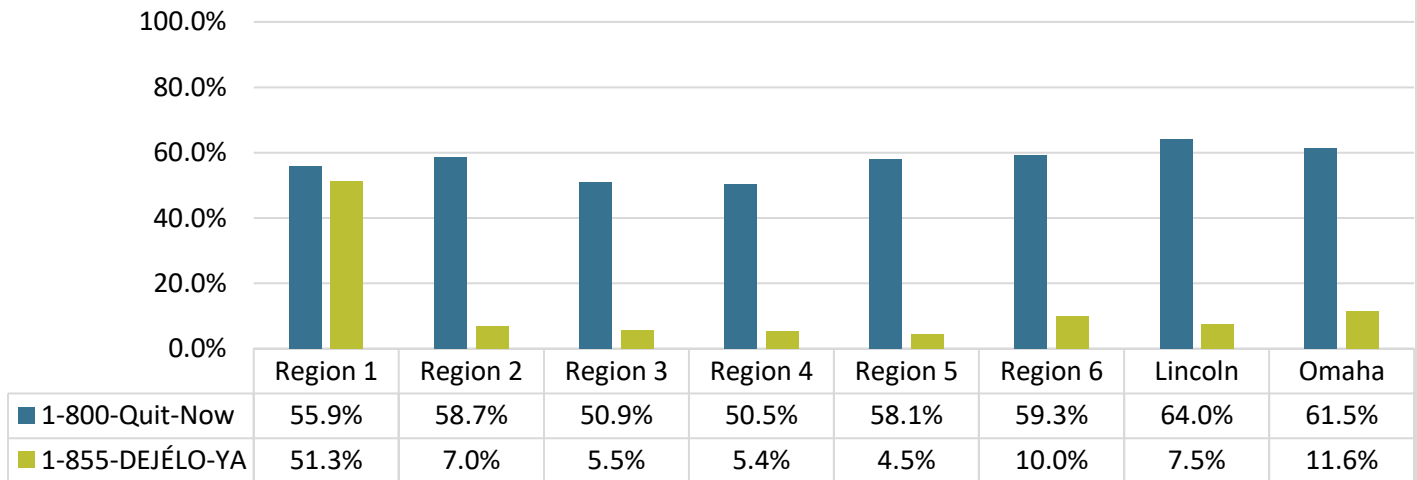
Question: QQLineSp

Source: Nebraska Adult Tobacco Survey 2023

Tobacco users (27.2%) showed a higher rate of awareness of the telephone Quitline 1-855-DEJÉLO-YA than non-tobacco users (3.4%).

Awareness of 1-800-QUIT-NOW outperforms awareness of 1-855-DEJÉLO-YA in every region (Fig. 11.10).

**Fig. 11.10 2023 - Have Heard of 1-800-QUIT-NOW or 1-855-DEJÉLO YA - by Region**

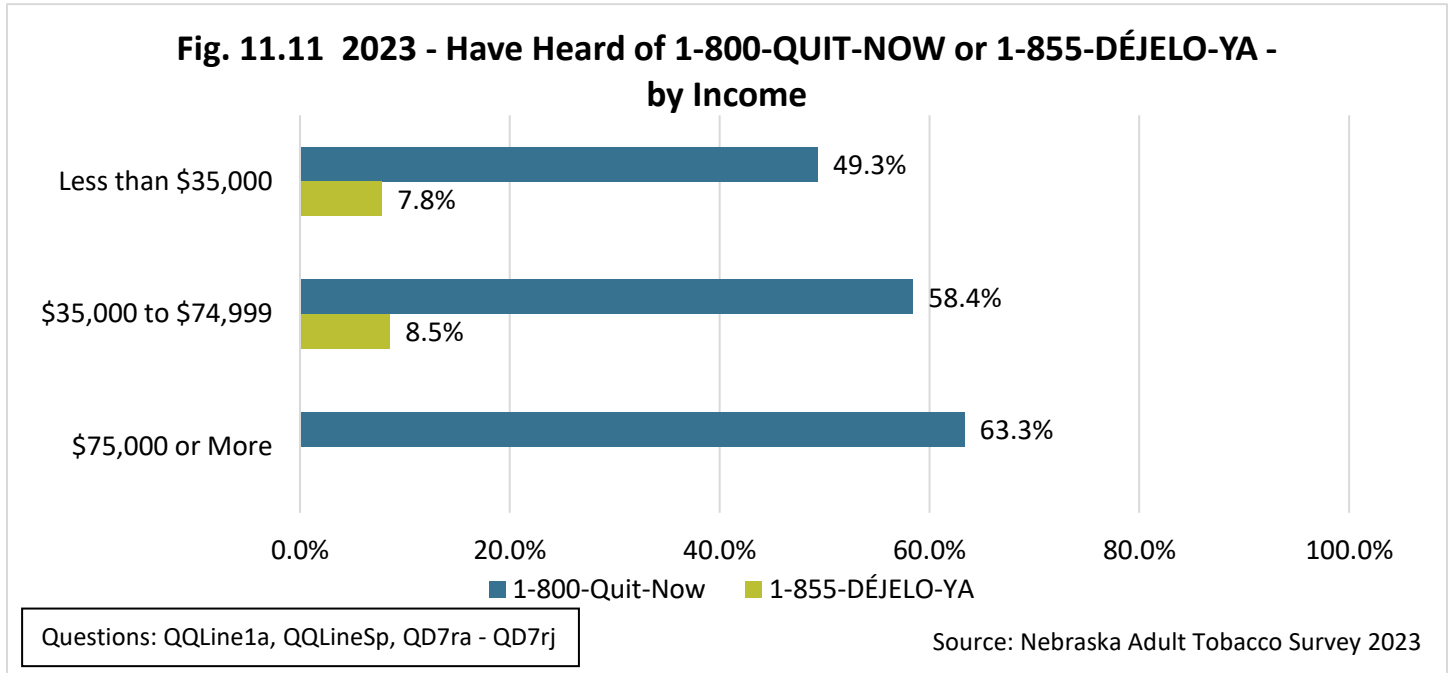


Questions: QQLine1a, QQLineSp, QD\_zip

Source: Nebraska Adult Tobacco Survey 2023

Awareness of 1-800-QUIT-NOW consistently outperformed awareness of 1-855-DÉJELO-YA across all Nebraska regions. The largest difference in rates of awareness between the English and Spanish language telephone Quitlines (56.5%) comes from Lincoln.

Among English-speaking respondents, awareness of 1-800-QUIT-NOW rises as annual household income increases. (Fig. 11.11).

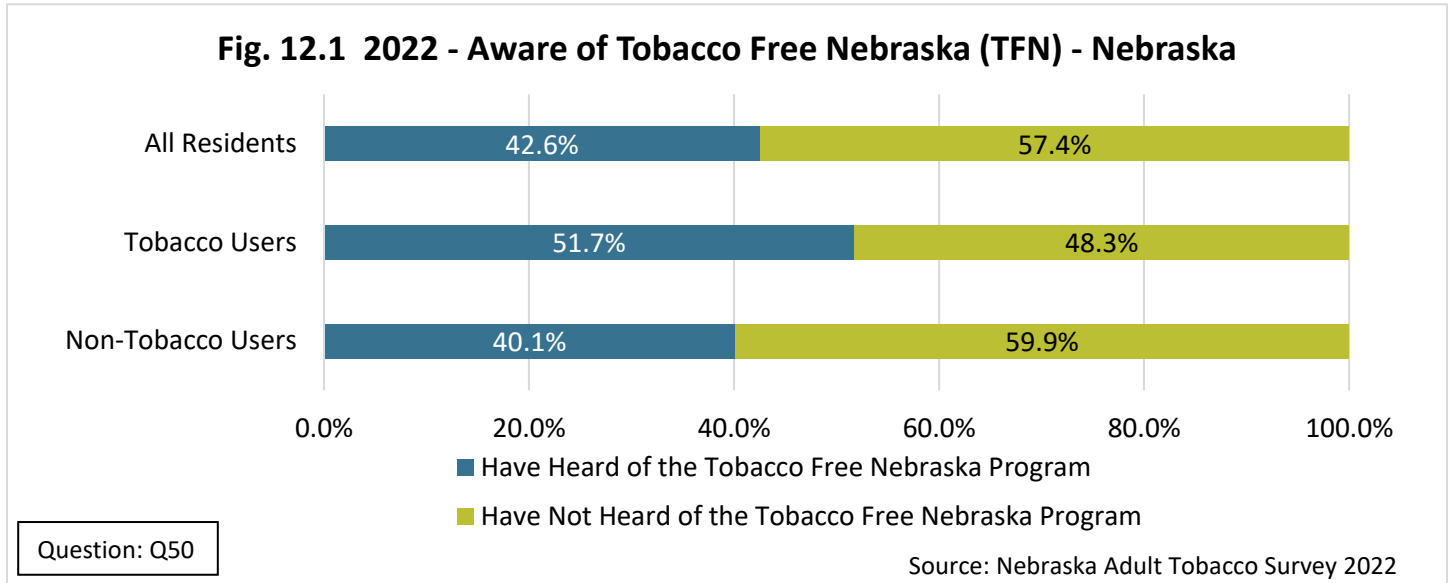


Among English-speaking respondents, awareness of the Quitline service 1-800-QUIT-NOW rises as annual household income increases, rising from 49.3% among those with an annual household income of less than \$35,000 to 58.4% among those with an annual household income between \$35,000 and \$74,999, to 63.3% among those with an annual household income of \$75,000 or more. Among Spanish-speaking respondents, 7.8% of those with an annual household income of less than \$35,000, and 8.5% of those with an annual household income of \$35,000 to \$74,999 reported awareness of 1-855-DÉJELO-YA. Spanish-speaking respondents with an annual household income of \$75,000 or more were excluded from this analysis due to low frequency.

## Tobacco Free Nebraska (TFN)

### Awareness of Tobacco Free Nebraska (TFN)

Tobacco users reported awareness of Tobacco Free Nebraska at higher rates than non-tobacco users (Fig. 12.1).



\*Question last asked in 2022

About half (51.7%) of tobacco users reported awareness of Tobacco Free Nebraska (TFN) whereas only 40.1% of non-tobacco users and 42.6% of all residents reported awareness of TFN.

## Secondhand Smoke and Aerosol

### Number of Smokers in the Household

The majority (85.5%) of households do not have smokers, excluding the respondent (Fig. 13.1).

**Fig. 13.1 2022 - Number of People Within Household Who Smoke Cigarettes, Cigars/Cigarillos/Small Cigars, or Pipes (Not Including the Respondent) - Nebraska**



Question: Q35

Source: Nebraska Adult Tobacco Survey 2022

\*Question last asked in 2022

The majority (85.5%) of respondents reported the number of people (excluding their self) within their household who smoke cigarettes cigars, cigarillos, small cigars, or pipes as zero, while 13.8% reported one to two people, and only 0.7% reported three or more.

## Number of Days Tobacco Used in the Household

Most respondents reported that tobacco was never used in their household within the past seven days (Fig. 13.2).

**Fig. 13.2 2022 - Number of Days in the Past Seven Days Anyone Inside the Home Smoked Cigarettes, Cigars/Cigarillos/Small Cigars, or Pipes (Including the Respondent) - Nebraska**



Question: Q36r

Source: Nebraska Adult Tobacco Survey 2022

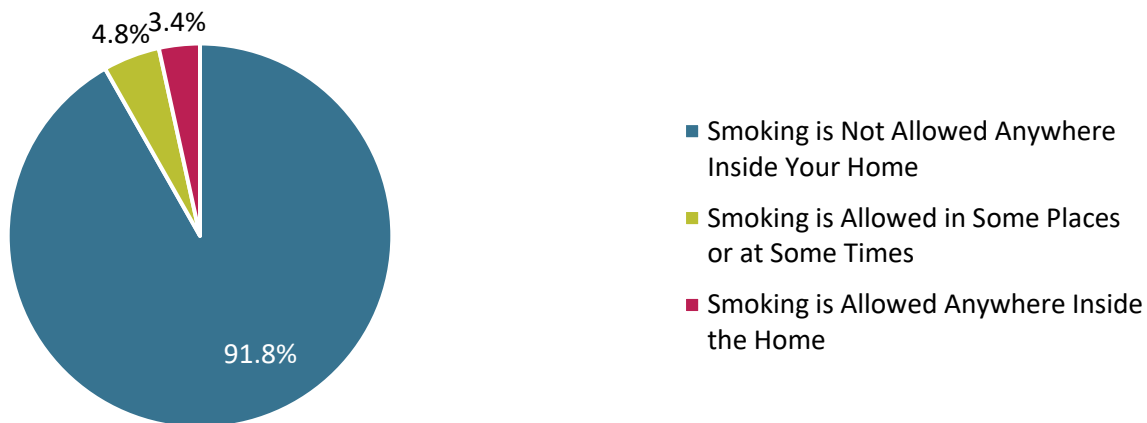
\*Question last asked in 2022

For 93.1% of households, there was no tobacco use inside the home in the past seven days. For 5.2% of households, tobacco was used indoors on three to seven days.

## Inside-Home Smoking Rules

The majority of households have rules against smoking inside the home (Fig. 13.3).

**Fig. 13.3 2022 - Rules About Smoking Inside Home - Nebraska**



Question: Q37

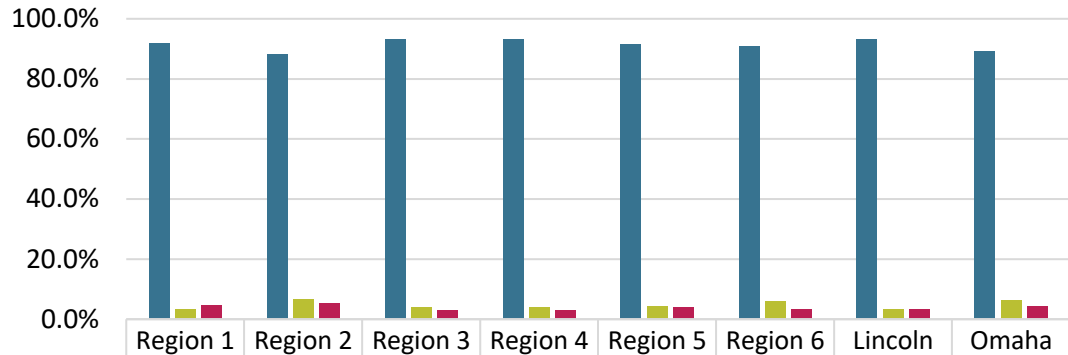
Source: Nebraska Adult Tobacco Survey 2022

\*Question last asked in 2022

Smoking is not allowed anywhere in the home by 91.8% of respondents. It is allowed in some places or at some times in 8.2% of households.

Across all Nebraska regions, the majority of respondents do not allow smoking anywhere inside the home (Fig. 13.4).

**Fig. 13.4 2022 - Rules about Smoking Inside Home - by Region**



	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Lincoln	Omaha
■ Smoking is Not Allowed Anywhere Inside Your Home	91.8%	88.1%	93.0%	93.3%	91.7%	90.9%	93.1%	89.2%
■ Smoking is Allowed in Some Places or at Some times	3.5%	6.7%	4.1%	3.9%	4.3%	5.8%	3.5%	6.5%
■ Smoking is Allowed Anywhere Inside the Home	4.7%	5.2%	2.9%	2.8%	4.1%	3.3%	3.5%	4.3%

Questions: Q37, QD\_zip

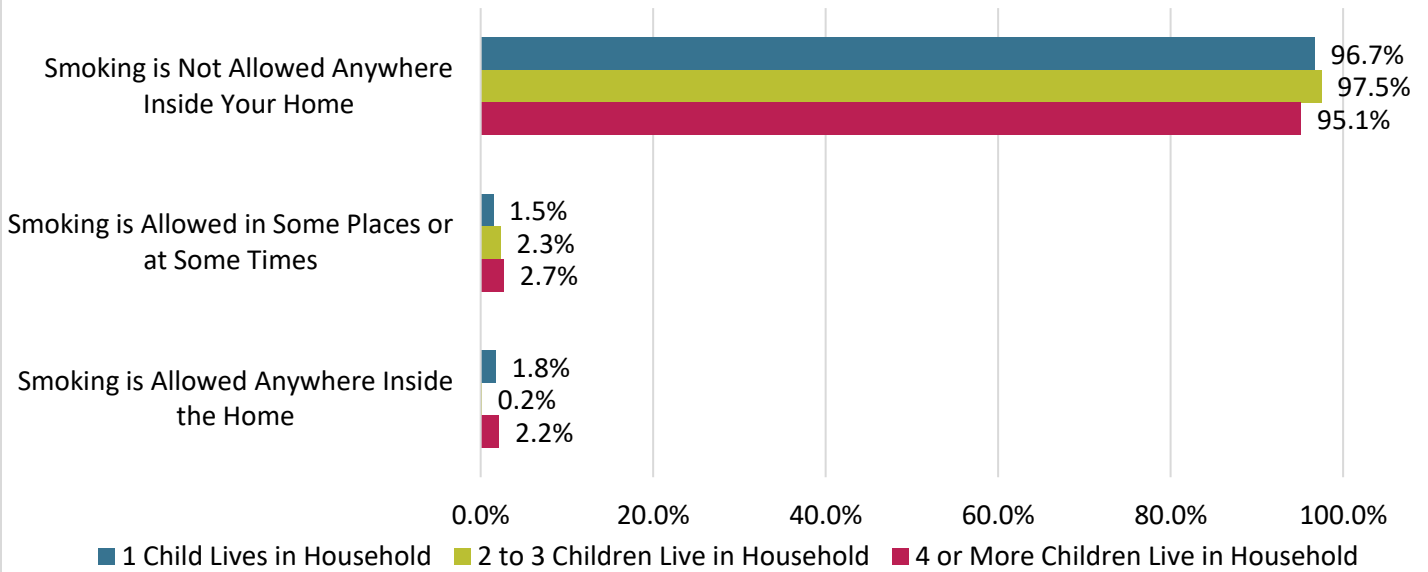
Source: Nebraska Adult Tobacco Survey 2022

\*Question last asked in 2022

Smoking is not allowed anywhere inside the home for most Nebraska households regardless of region. Region 4 (93.3%) has the highest rate of households that do not allow smoking anywhere inside the home, while Region 2 (11.9%) has the highest rate of households that allow smoking in some or all places inside the home.

The majority of households with children have rules against smoking inside the home (Fig. 13.5).

**Fig. 13.5 2022 - Rules About Smoking Inside Home at Households with Children - Nebraska**



Questions: Q37, Child

Source: Nebraska Adult Tobacco Survey 2022

\*Question last asked in 2022

Households where smoking is not allowed anywhere inside the home make up 96.7% of households where 1 child is present, 97.5% of households where 2 or 3 children are present, and 95.1% of households where 4 or more children are present.



## Number of Days of Exposure to Secondhand E-Cigarette Aerosol or Vapor

The majority of respondents were not exposed to secondhand e-cigarette aerosol or vapor in the past seven days (Fig. 13.6).

**Fig. 13.6 2022 - Number of Days Exposed to Vapors from Other People Using Electronic Vaping Products During Past 7 Days - Nebraska**



Question: QSdEcig1

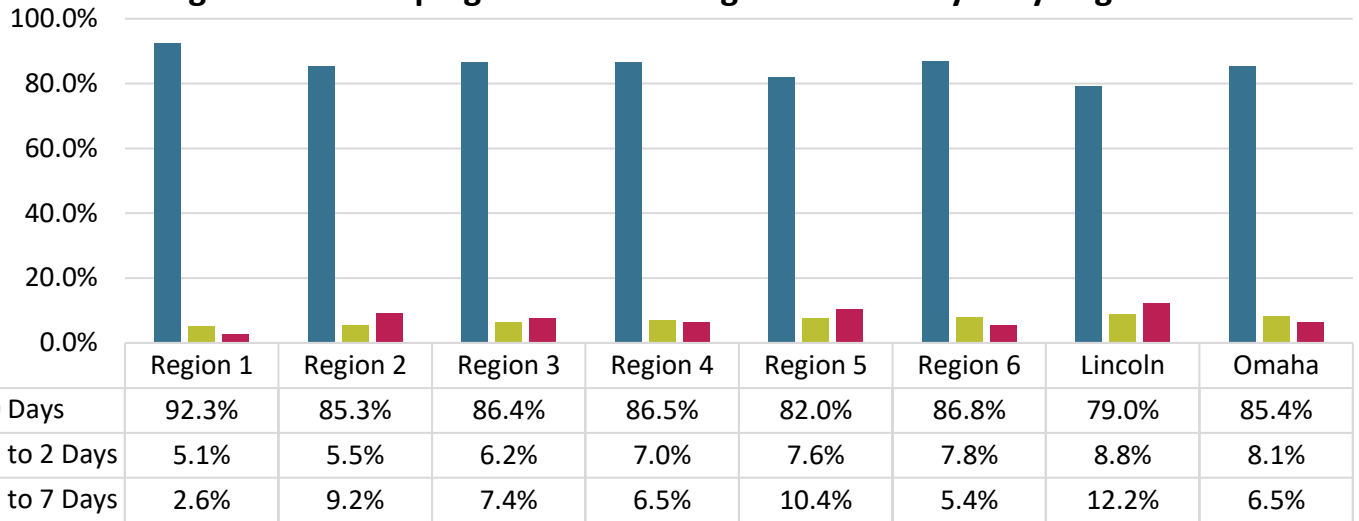
Source: Nebraska Adult Tobacco Survey 2022

\*Question last asked in 2022

The majority of respondents (85.9%) were not exposed to secondhand e-cigarette aerosol or vapor in the last seven days, while 7.1% were exposed one to two days, and 7.0% were exposed three to seven days.

The rate in which respondents were exposed to secondhand e-cigarette aerosol or vapor in the past seven days varies across regions (Fig. 13.7).

**Fig. 13.7 2022 - Number of Days Exposed to Vapors from Other People Using Electronic Vaping Products During the Past 7 Days - by Region**



Questions: QSdEcig1, QD\_zip

Source: Nebraska Adult Tobacco Survey 2022

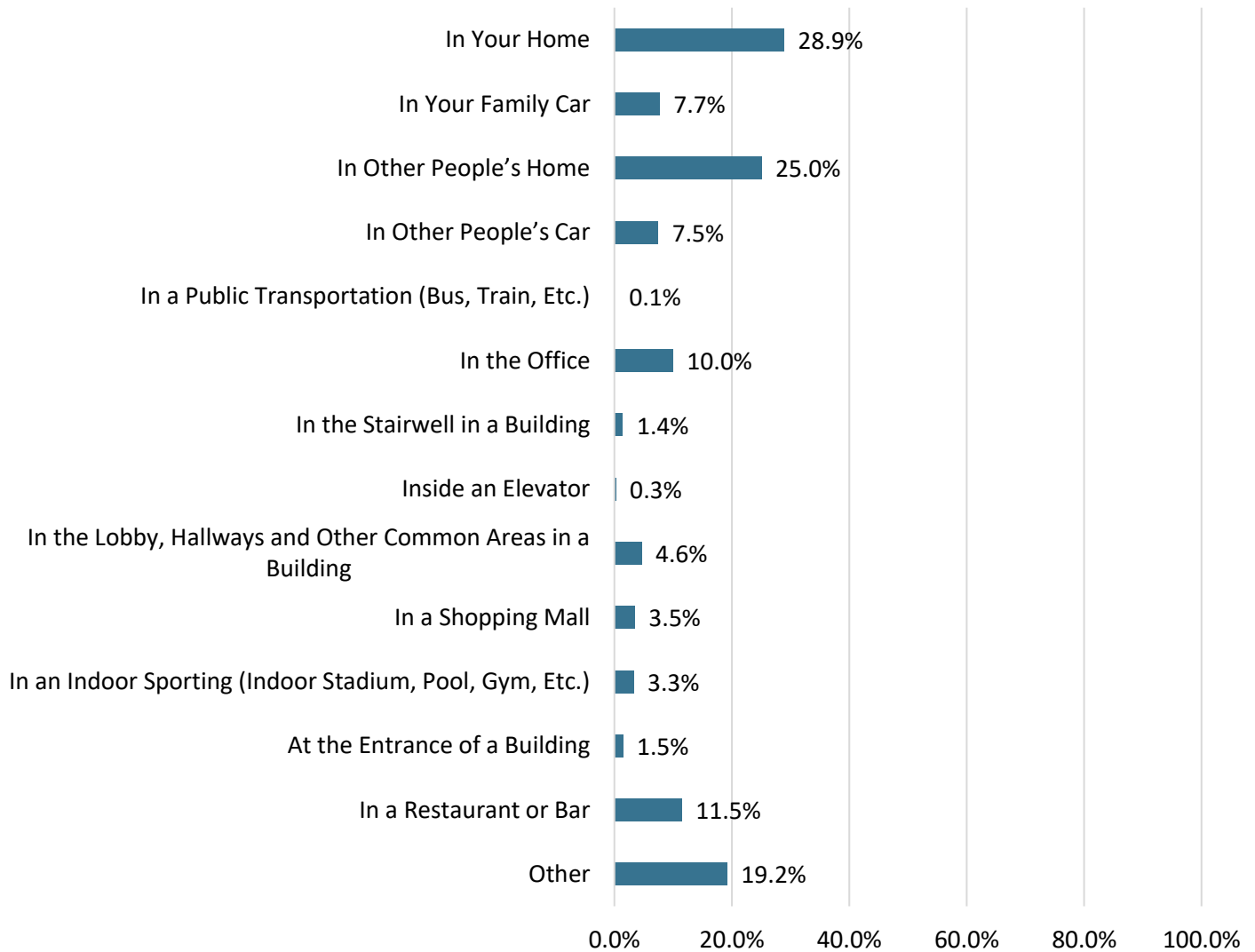
\*Question last asked in 2022

While the majority of respondents across all regions reported zero days of exposure to secondhand e-cigarette aerosol or vapor during the past seven days, respondents from Lincoln reported the highest rate of exposure, with only 79.0% reporting zero days of exposure. The least reported amount of secondhand e-cigarette aerosol or vapor comes from Region 1, where 92.3% of respondents report zero days of exposure.

## Location of Exposure to Secondhand E-Cigarette Aerosol or Vapor

Respondents were exposed to secondhand e-cigarette aerosol or vapor in their homes or in other people’s homes at higher rates than other locations (Fig. 13.8).

**Fig. 13.8 2022 - Places Where Nebraskans Were Exposed to Secondhand Vapor from Other People Using E-Cigarettes During the Past 7 Days - Nebraska**



Questions: QSdEcig2.1 - QSdEcig2.13

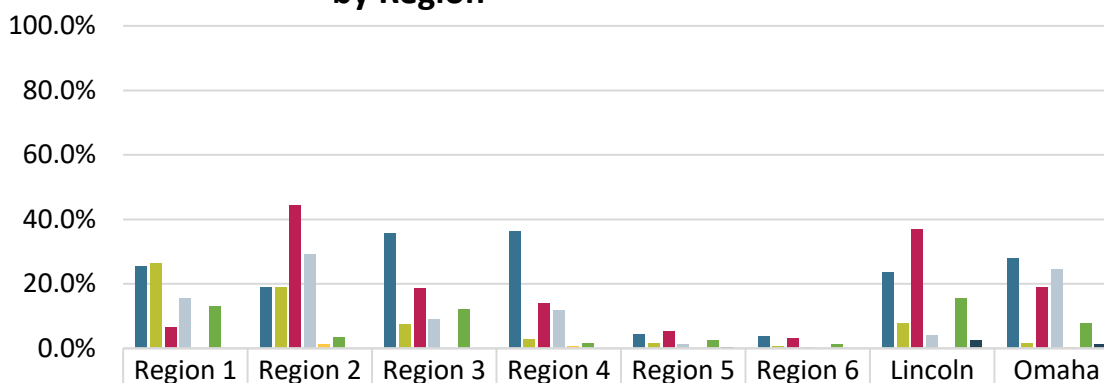
Source: Nebraska Adult Tobacco Survey 2023

\*Question last asked in 2022

Among respondents who were exposed to secondhand e-cigarettes aerosol or vapor, 28.9% of them reported exposure in their own homes, 25.0% in other people’s homes, and 19.2% in locations other than the ones listed.

Respondents' own homes, other people's homes, and locations other than the ones listed remained common locations of exposure to secondhand e-cigarette aerosol or vapor across regions (Fig. 13.9a/b).

**Fig. 13.9a 2022 - Places Where Nebraskans Were Exposed to Secondhand Vapor from Other People Using E-Cigarettes During the Past 7 Days - by Region**



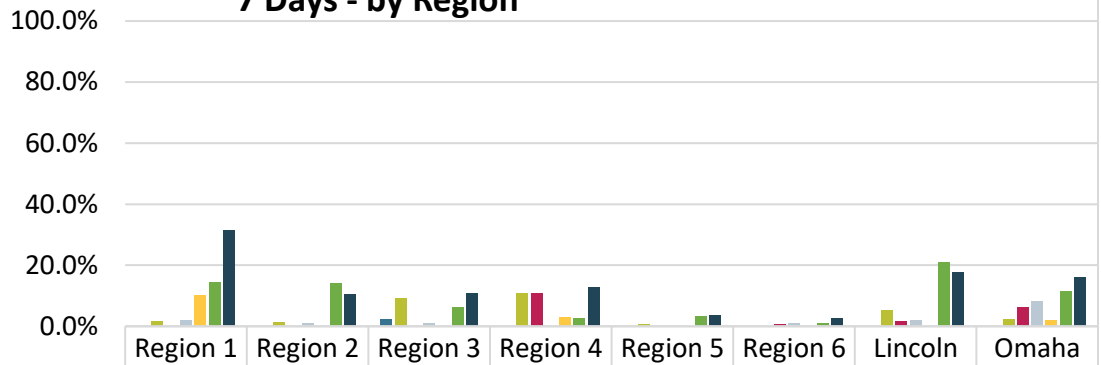
	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Lincoln	Omaha
In Your Home	25.6%	18.8%	35.6%	36.2%	4.5%	3.9%	23.5%	27.8%
In Your Family Car	26.5%	18.8%	7.6%	2.8%	1.5%	0.8%	7.9%	1.6%
In Other People's Home	6.5%	44.4%	18.7%	14.0%	5.4%	3.1%	37.1%	18.8%
In Other People's Car	15.6%	29.3%	8.9%	12.0%	1.3%	0.4%	4.2%	24.5%
In a Public Transportation (Bus, Train, Etc.)	0.0%	1.3%	0.0%	0.6%	0.0%	0.0%	0.0%	0.4%
In the Office	13.1%	3.3%	12.1%	1.7%	2.4%	1.2%	15.5%	7.9%
In the Stairwell in a Building	0.0%	0.0%	0.0%	0.0%	0.4%	0.1%	2.7%	1.4%

Questions: QSdEcig2.1 - QSdEcig2.13, QD\_zip

Source: Nebraska Adult Tobacco Survey 2022

\*Question last asked in 2022

**Fig. 13.9b 2022 - Places Where Nebraskans Were Exposed to Secondhand Vapor from Other People Using E-Cigarettes During the Past 7 Days - by Region**



	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Lincoln	Omaha
Inside an Elevator	0.0%	0.0%	2.4%	0.0%	0.0%	0.0%	0.0%	0.0%
In the Lobby, Hallways and Other Common Areas in a Building	1.6%	1.3%	9.4%	10.9%	0.7%	0.3%	5.1%	2.4%
In a Shopping Mall	0.4%	0.0%	0.0%	10.8%	0.3%	0.6%	1.6%	6.2%
In an Indoor Sporting (Indoor Stadium, Pool, Gym, Etc.)	1.9%	1.2%	0.8%	0.0%	0.3%	0.8%	2.1%	8.3%
At the Entrance of a Building	10.1%	0.0%	0.0%	2.8%	0.0%	0.3%	0.3%	2.1%
In a Restaurant or Bar	14.4%	14.3%	6.3%	2.8%	3.1%	1.2%	21.1%	11.5%
Other	31.5%	10.6%	10.8%	12.8%	3.7%	2.6%	17.7%	16.0%

Questions: QSdEcig2.1 - QSdEcig2.13, QD\_zip

Source: Nebraska Adult Tobacco Survey 2022

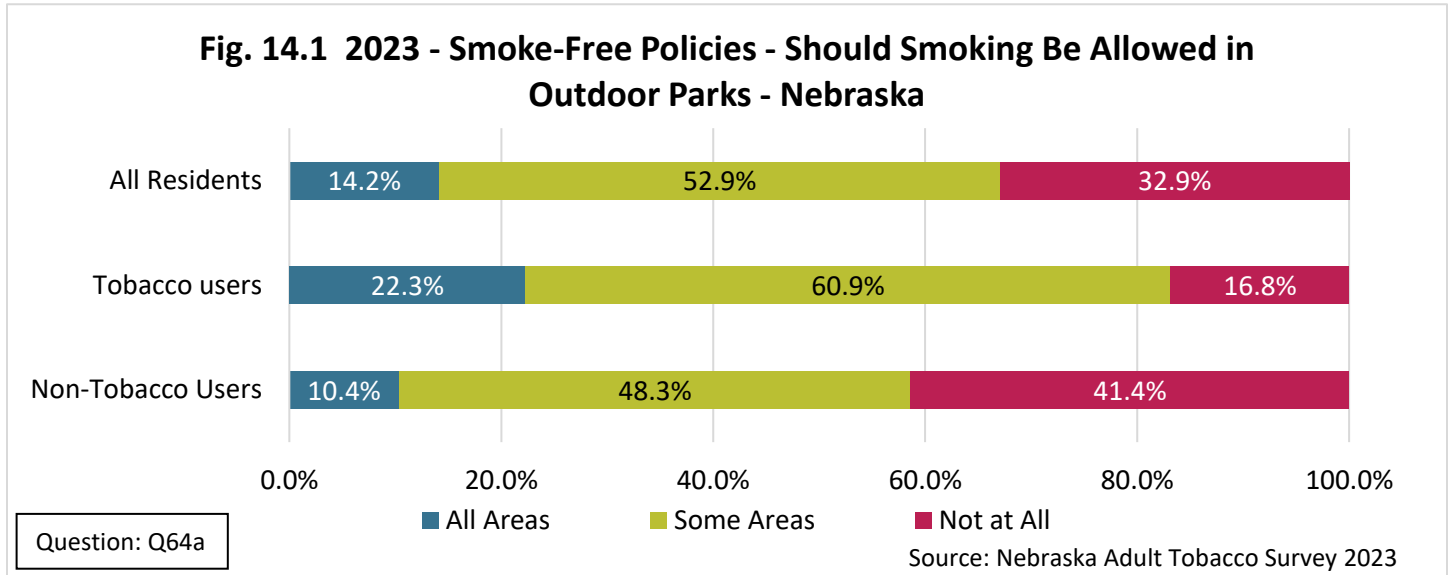
\*Question last asked in 2022

Similarly, respondents' own homes, other people's homes, and locations other than the ones listed remain the most frequently cited locations of exposure to secondhand vapor from other people using e-cigarettes across regions.

## Smoke Free Policies

### Opinions on Smoking in Outdoor Parks

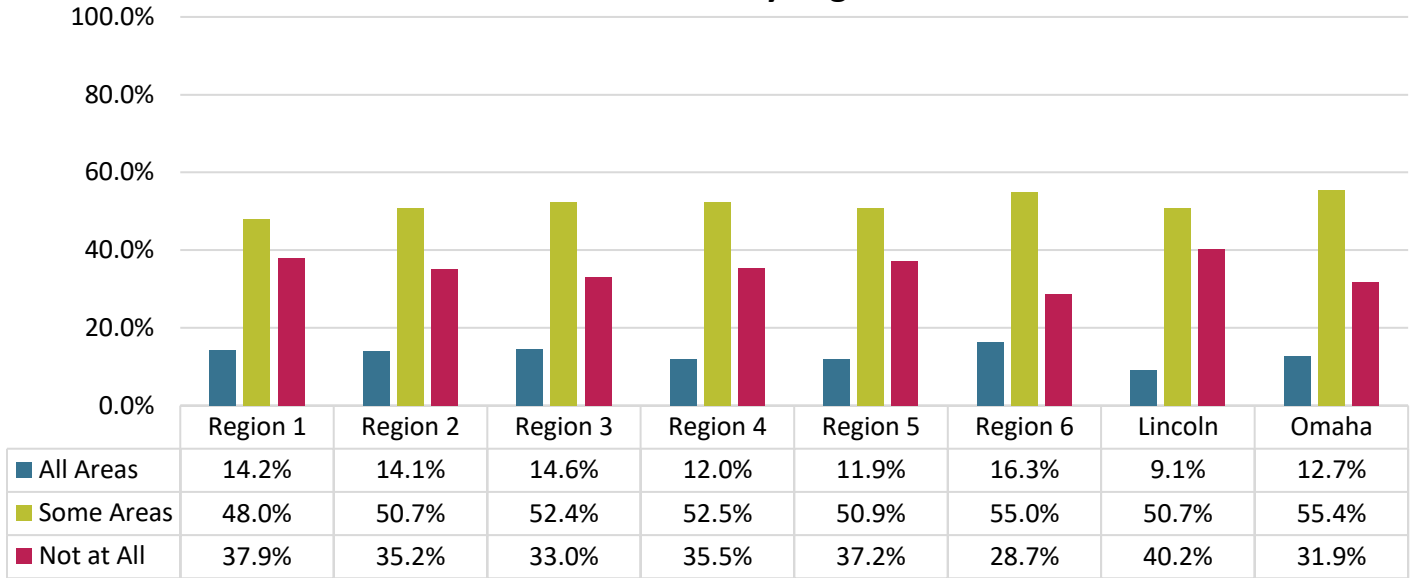
About one-third of all respondents believed that smoking should not be allowed in outdoor parks (Fig. 14.1).



Among all respondents, 32.9% believed that smoking in outdoor parks should not be allowed at all. For tobacco users, 16.8% felt this way, as did 41.4% of non-tobacco users.

With some variation, opinions regarding the acceptability of smoking in outdoor parks across regions is similar to those across all Nebraska residents (Fig. 14.2).

**Fig. 14.2 2023 - Smoke-Free Policies - Should Smoking Be Allowed in Outdoor Parks - by Region**



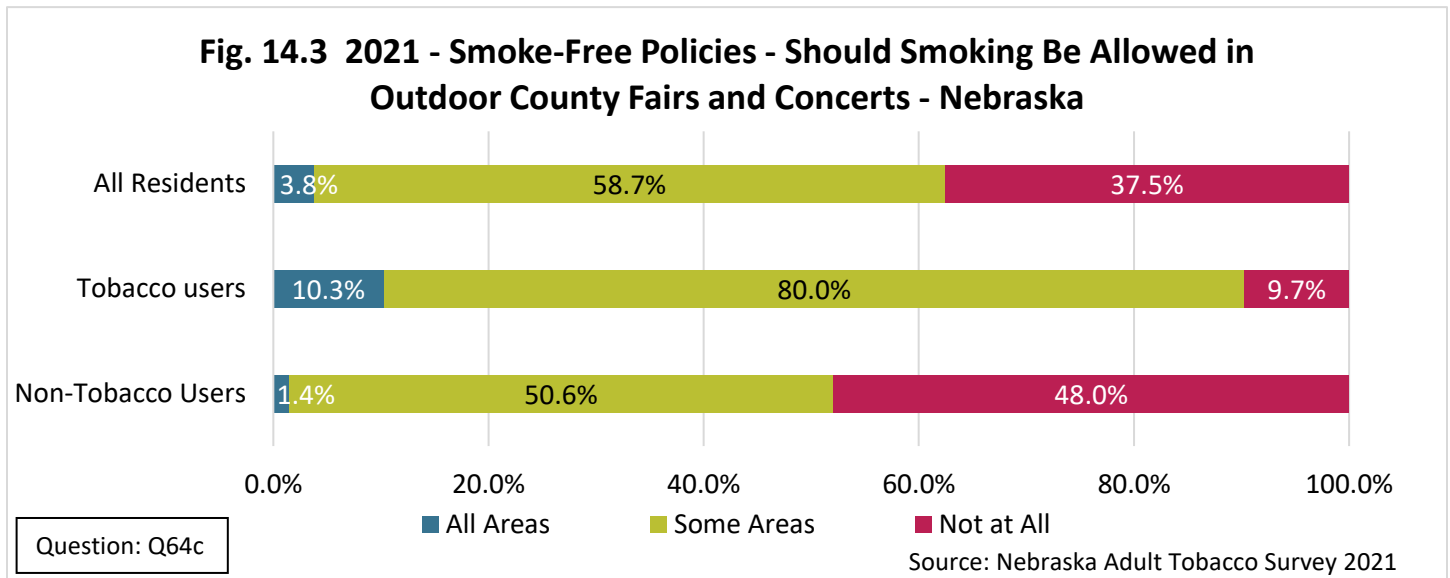
Questions: Q64a, QD\_zip

Source: Nebraska Adult Tobacco Survey 2023

Similarly, about one-third of all respondents across Regions 2, 3, 4, 6, and Omaha believed smoking should not be allowed at all in outdoor parks. This opinion reached a rate closer to two-fifths among respondents in Regions 1, 5, and Lincoln.

## Opinions on Smoking in Outdoor Fairs and Concerts

Nearly half of non-tobacco users did not think smoking should be allowed at all in outdoor county fairs and concerts (Fig. 14.3).



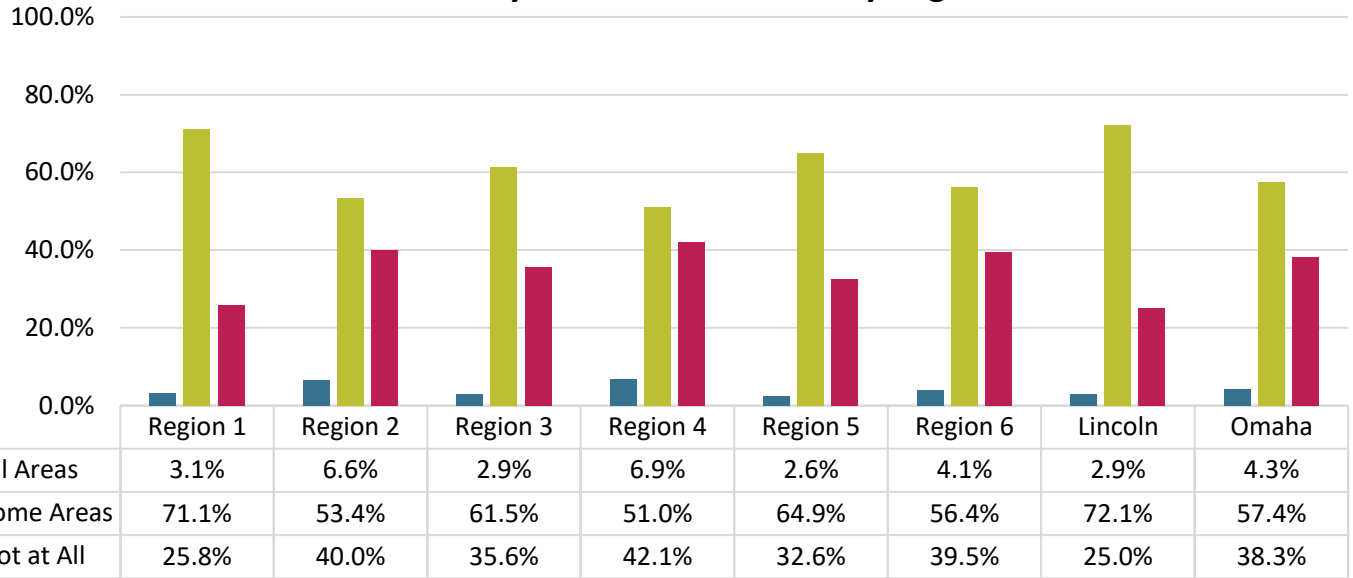
\*Question last asked in 2021

Among tobacco users, 80.0% believed smoking should be allowed in some areas in outdoor county fairs and concerts, whereas only 50.6% of non-tobacco users felt the same way. Almost half (48.0%) of non-tobacco users felt smoking should not be allowed at all in outdoor county fairs and concerts, while only 9.7% of tobacco users reported the same sentiment.



Over 50.0% of respondents in each region believed that smoking should be allowed in some areas in outdoor county fairs and concerts (Fig. 14.4).

**Fig. 14.4 2021 - Smoke-Free Policies - Should Smoking Be Allowed in Outdoor County Fairs and Concerts - by Region**



Questions: Q64c, QD\_zip

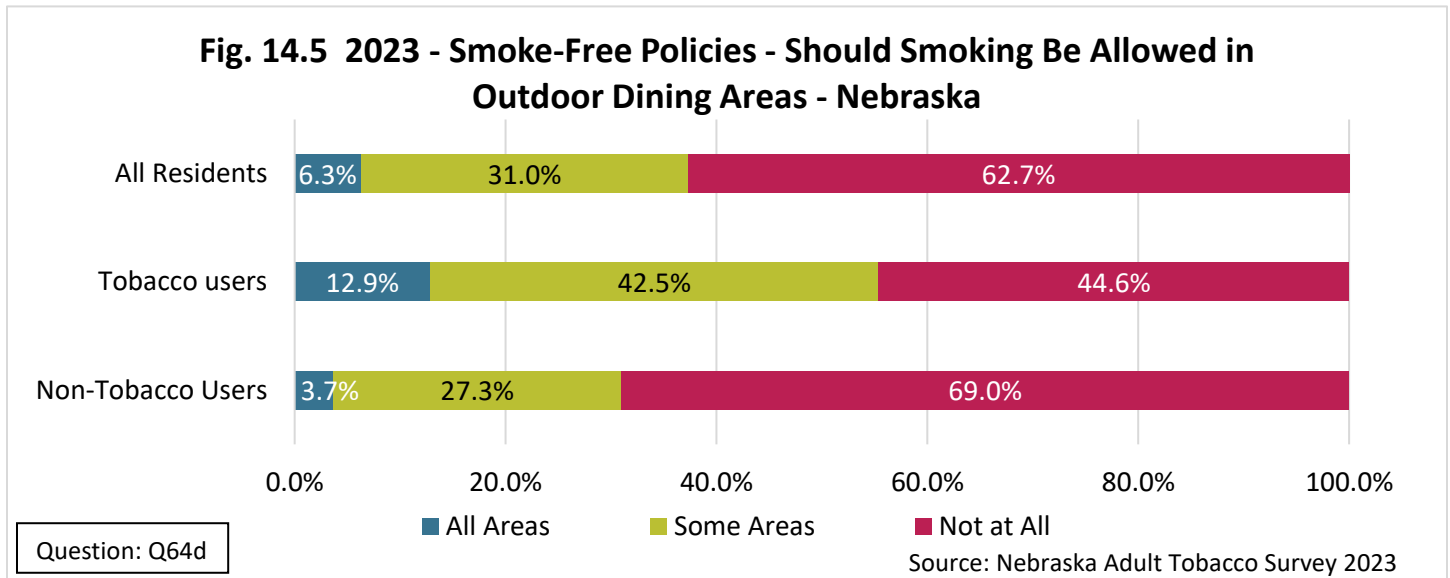
Source: Nebraska Adult Tobacco Survey 2021

\*Question last asked in 2021

In 2021, over half of respondents in each region believed smoking should be allowed in some areas during outdoor county fairs and concerts. Region 4 (6.9%) had the highest acceptability rate of smoking in outdoor county fairs and concerts in all areas. Interestingly, Region 4 also had the highest rate of respondents who did not believe smoking should be allowed at all (42.1%).

## Opinions on Smoking in Outdoor Dining Areas

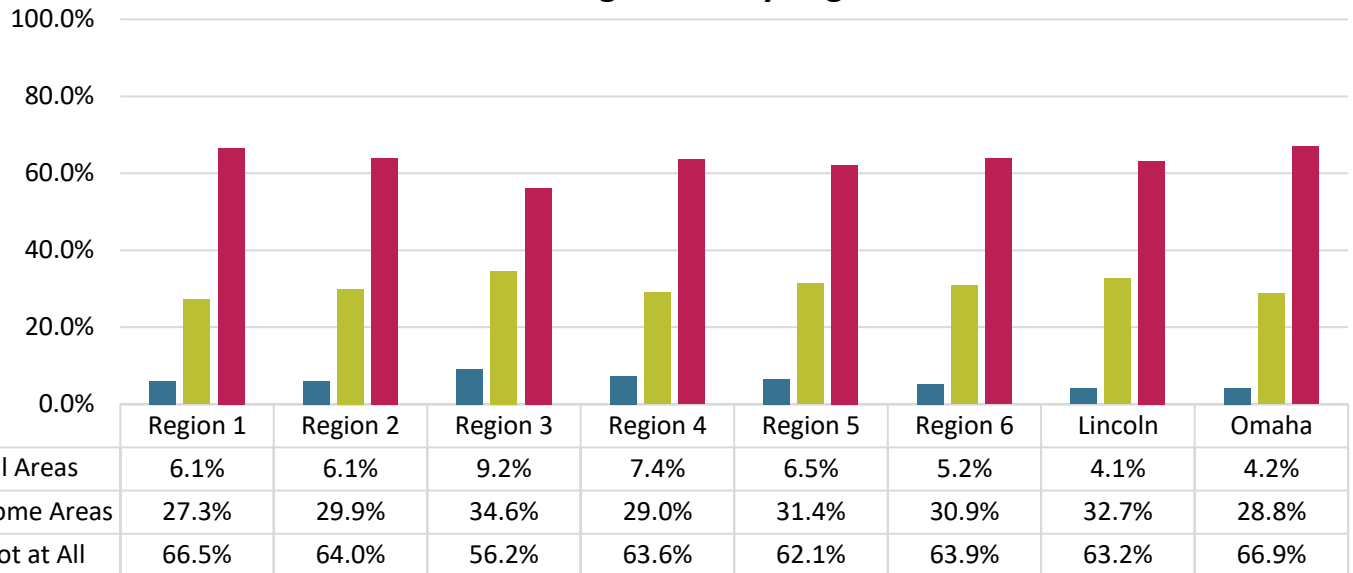
About two-thirds of all residents felt that smoking should not be allowed at all in outdoor dining areas (Fig. 14.5).



Among all respondents, 62.7% felt that smoking in outdoor dining areas should not be allowed at all. For tobacco users, 44.6% felt it should not be allowed at all and 69.0% of non-tobacco users felt this way.

Over half of all residents across all Nebraska regions believed that smoking in outdoor dining areas should not be allowed at all. (Fig. 14.6).

**Fig. 14.6 2023 - Smoke-Free Policies - Should Smoking Be Allowed in Outdoor Dining Areas - by Region**



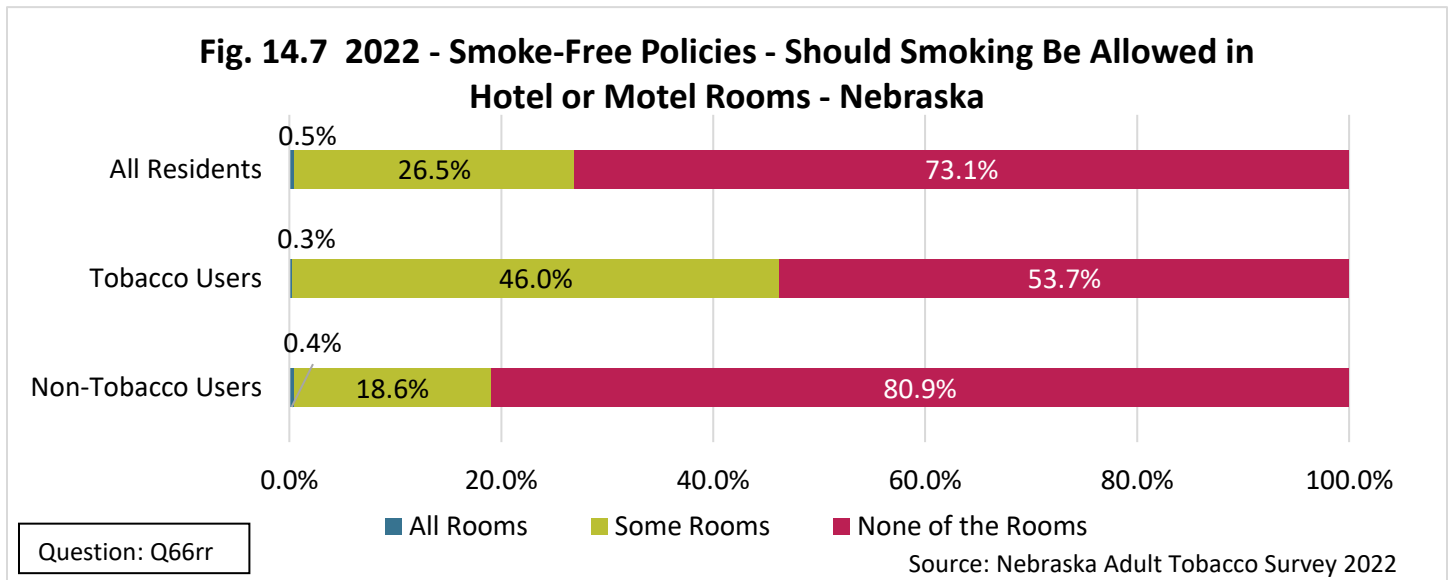
Questions: Q64d, QD\_zip

Source: Nebraska Adult Tobacco Survey 2023

While over half of all residents across all Nebraska regions believed that smoking in outdoor dining areas should not be allowed at all, 9.2% of residents in Region 3 believed smoking should be allowed in all outdoor dining areas, which is the highest rate of acceptability of smoking in all outdoor dining areas across all Nebraska regions.

## Opinions on Smoking in Hotel or Motel Rooms

Nearly three-fourths of all respondents believed that smoking should not be allowed at all in hotel or motel rooms (Fig. 14.7).

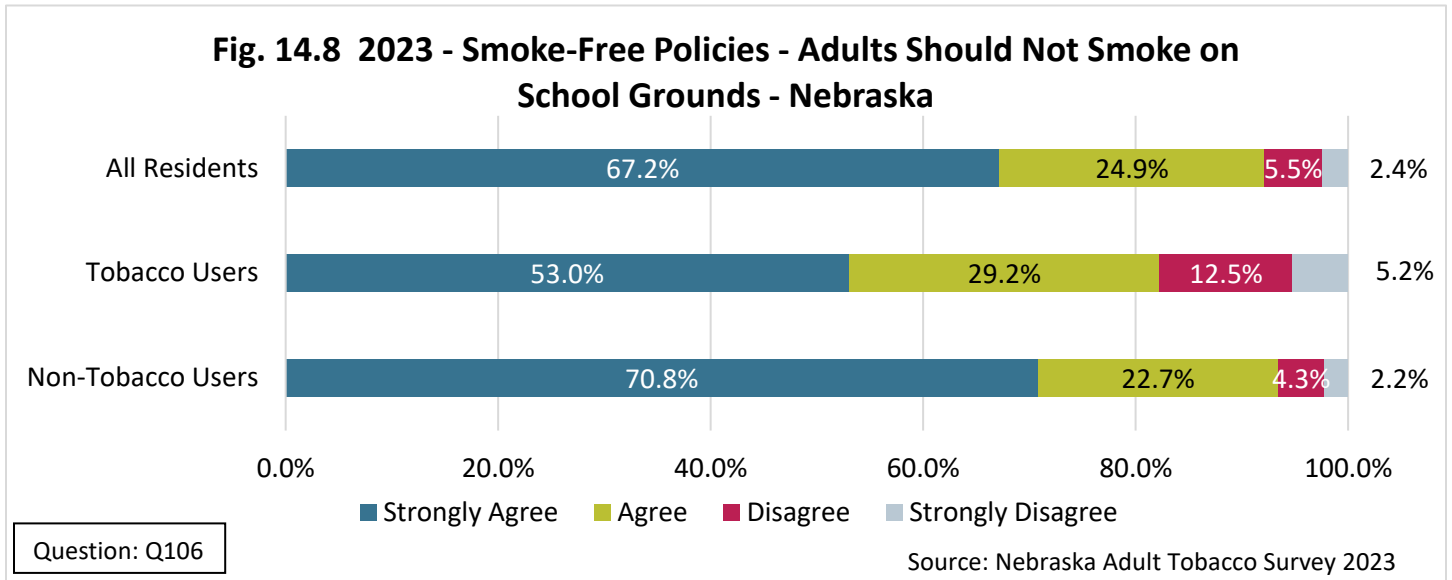


\*Question last asked in 2022

Among all residents, 73.1% believed smoking should not be allowed at all in hotel or motel rooms, while just over half (53.7%) of tobacco users felt this way. Additionally, a majority (80.9%) of non-tobacco users felt that smoking should not be allowed at all in hotel or motel rooms.

## Opinions on Smoking on School Grounds

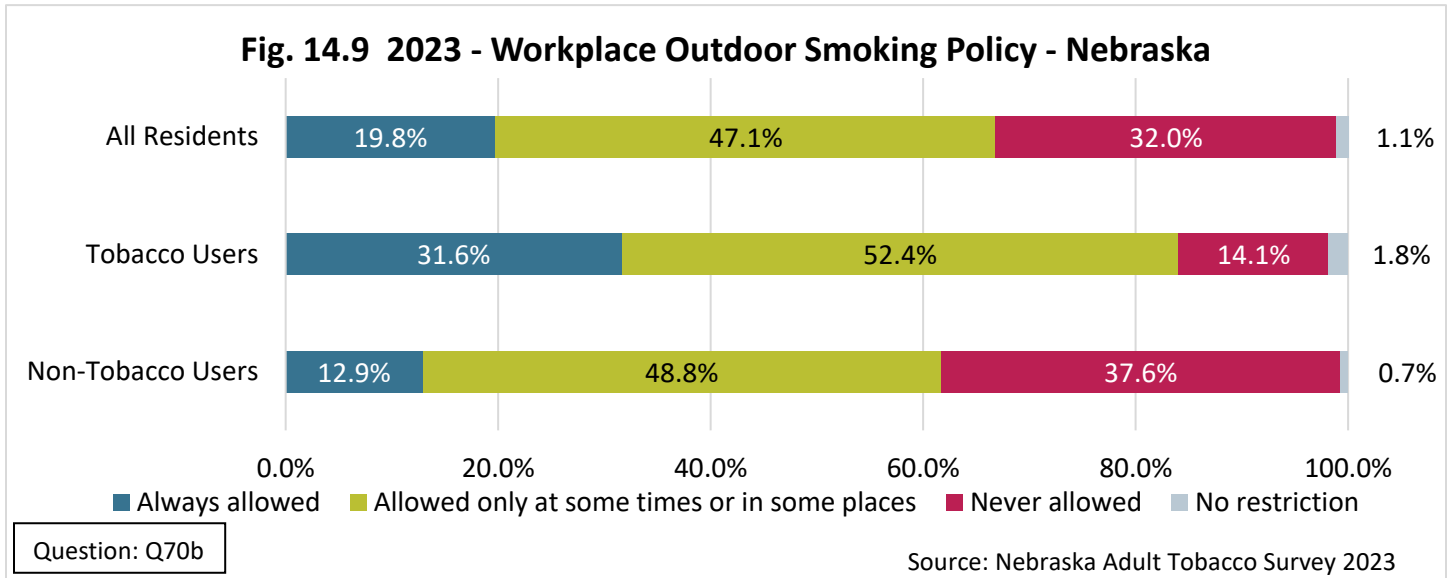
The majority of respondents across all response groups agreed or strongly agreed that adults should not smoke on school grounds (Fig. 14.8).



Non-tobacco users (70.8%) strongly agreed that adults should not smoke on school grounds at higher rates than tobacco users (53.0%). Regardless of this difference between tobacco users and non-tobacco users, the majority (67.2%) of all respondents strongly agreed that adults should not smoke on school grounds.

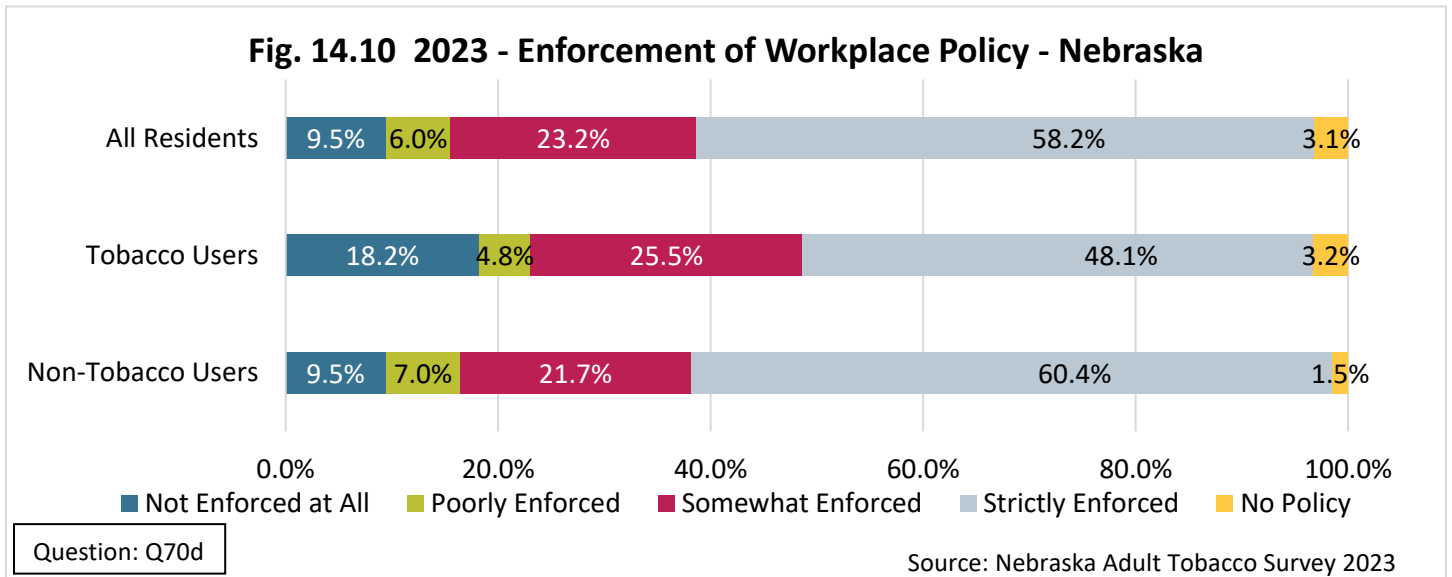
## Workplace Smoking Policy

Non-tobacco users were more than twice as likely to state that outdoor smoking is never allowed at their workplace than tobacco users (Fig. 14.9).



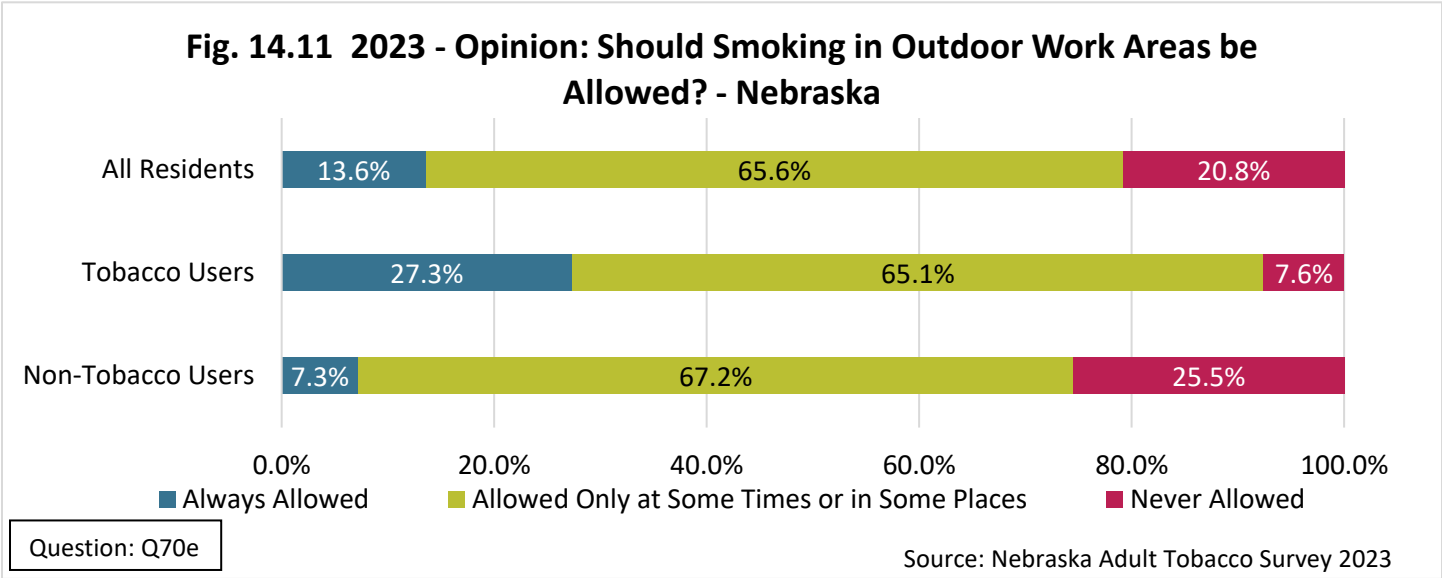
Non-tobacco users (37.6%) stated that outdoor smoking is never allowed at their workplace at a much higher rate than tobacco users (14.1%).

Non-tobacco users reported their workplace smoking policy as “Strictly enforced” at higher rates than tobacco users (Fig. 14.10).



Non-tobacco users reported that their workplace smoking policy is strictly enforced (60.4%) at much higher rates than tobacco users (48.1%). Additionally, tobacco users reported that their workplace does not have a smoking policy (3.2%) at higher rates than non-tobacco users (1.5%).

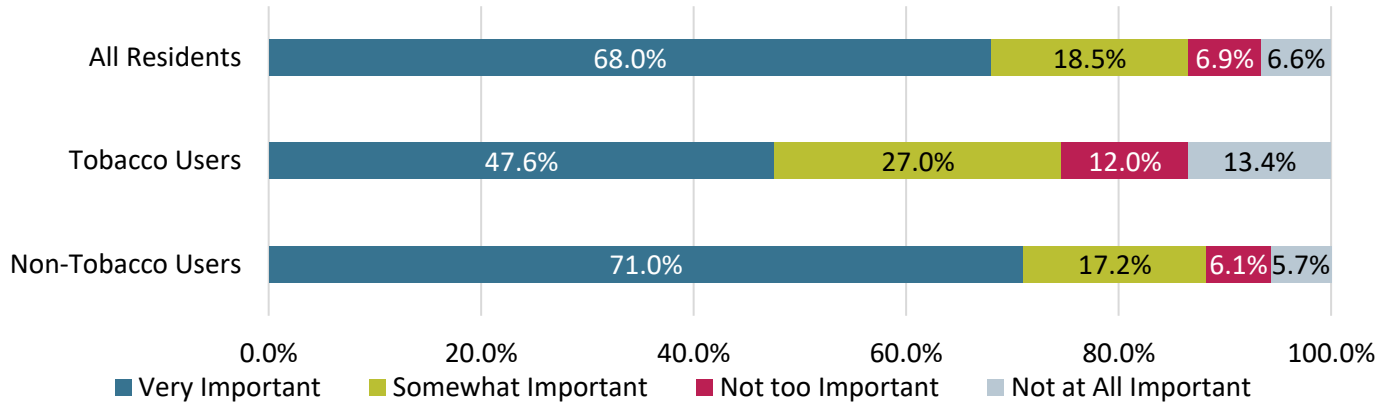
The majority of respondents across all response groups felt that smoking in outdoor work areas should be allowed only at some times or in some places (Fig. 14.11).



Roughly one-fourth of (27.3%) of tobacco users believed that smoking in outdoor work areas should always be allowed. On the other hand, about one-fourth (25.5%) of non-tobacco users felt that smoking in outdoor work areas should never be allowed.

Less than half of tobacco users believed that it is very important to lawfully prohibit smoking inside most public buildings (Fig. 14.12).

**Fig. 14.12 2023 - How Important is a Law Prohibiting Smoking Inside Most Public Buildings? - Nebraska**

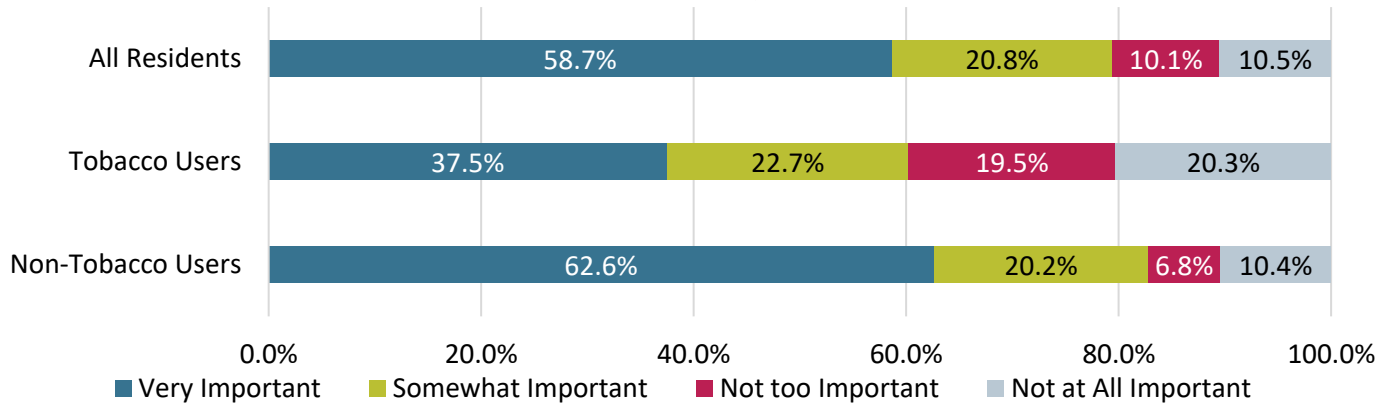


Question: Q82b Source: Nebraska Adult Tobacco Survey 2023

Nearly three-fourths of non-tobacco users (71.0%) placed a law prohibiting smoking inside most public buildings as very important, whereas less than half (47.6%) of tobacco users did the same.

The majority of all residents believed that it is very important to lawfully prohibiting e-cigarettes inside most public buildings (Fig. 14.13).

**Fig. 14.13 2023 - How Important is a Law Prohibiting E-cigarettes Inside Most Public Buildings? - Nebraska**



Question: Q82b\_3 Source: Nebraska Adult Tobacco Survey 2023

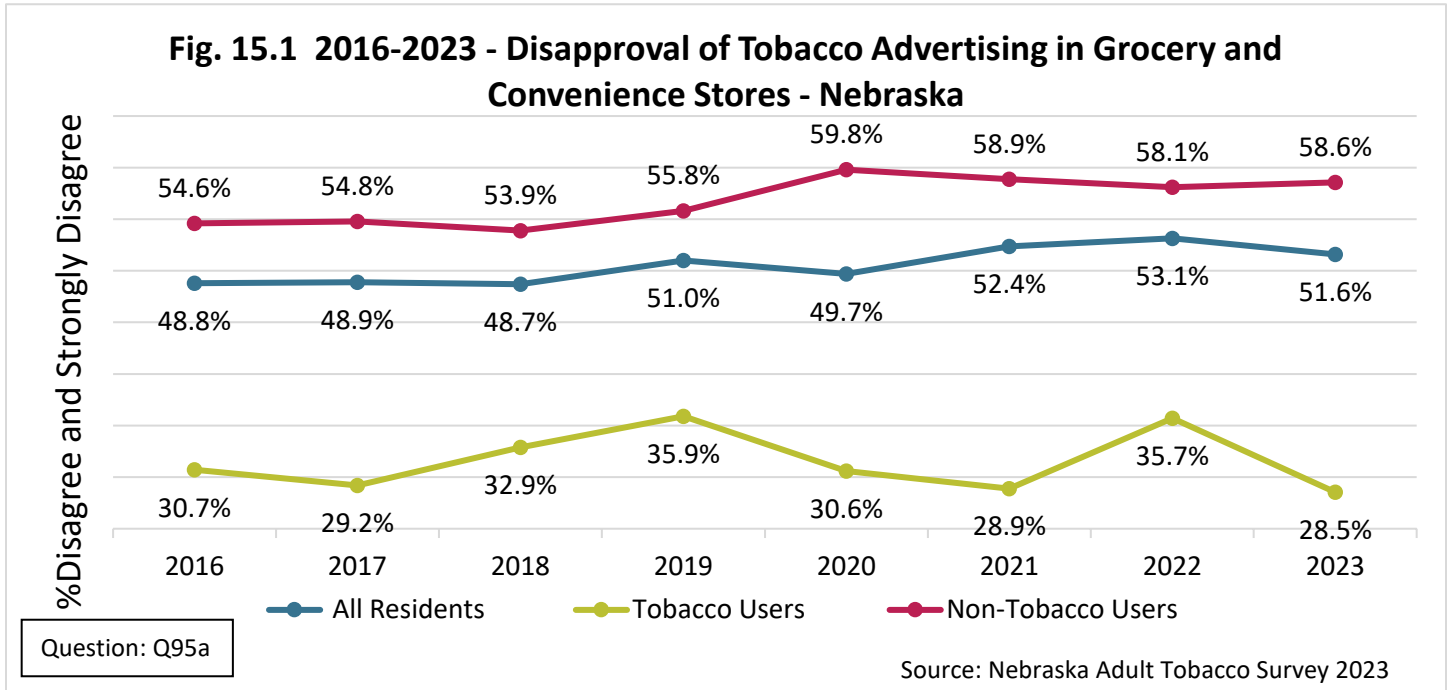
While nearly two-thirds (62.6%) of non-tobacco users believed a law prohibiting e-cigarettes inside most public buildings is very important, just over one-third (37.5%) of tobacco users felt the same. Additionally, just over one fifth (20.3%) of tobacco users believed that a law prohibiting e-cigarettes inside most public buildings is not at all important, whereas only 10.4% of non-tobacco users felt the same.



## Tobacco Sales and Marketing

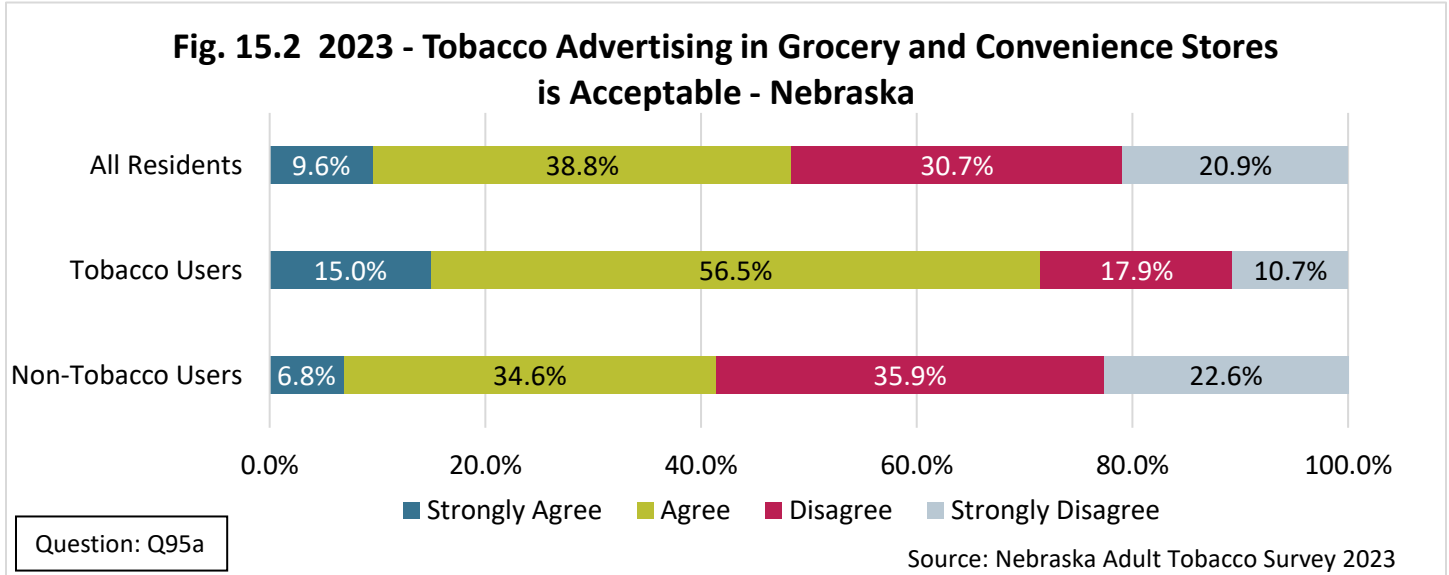
### Acceptability of Tobacco Advertising in Grocery and Convenience Stores 2016-2023

The percentage of all residents who believed that tobacco advertising in grocery and convenience stores is not acceptable has remained almost unchanged over time, with a consistently higher disapproval rate among non-tobacco users compared to tobacco users (Fig. 15.1).



Disapproval of tobacco advertising in grocery and convenience stores has remained almost unchanged over time, with more variation appearing among tobacco-users.

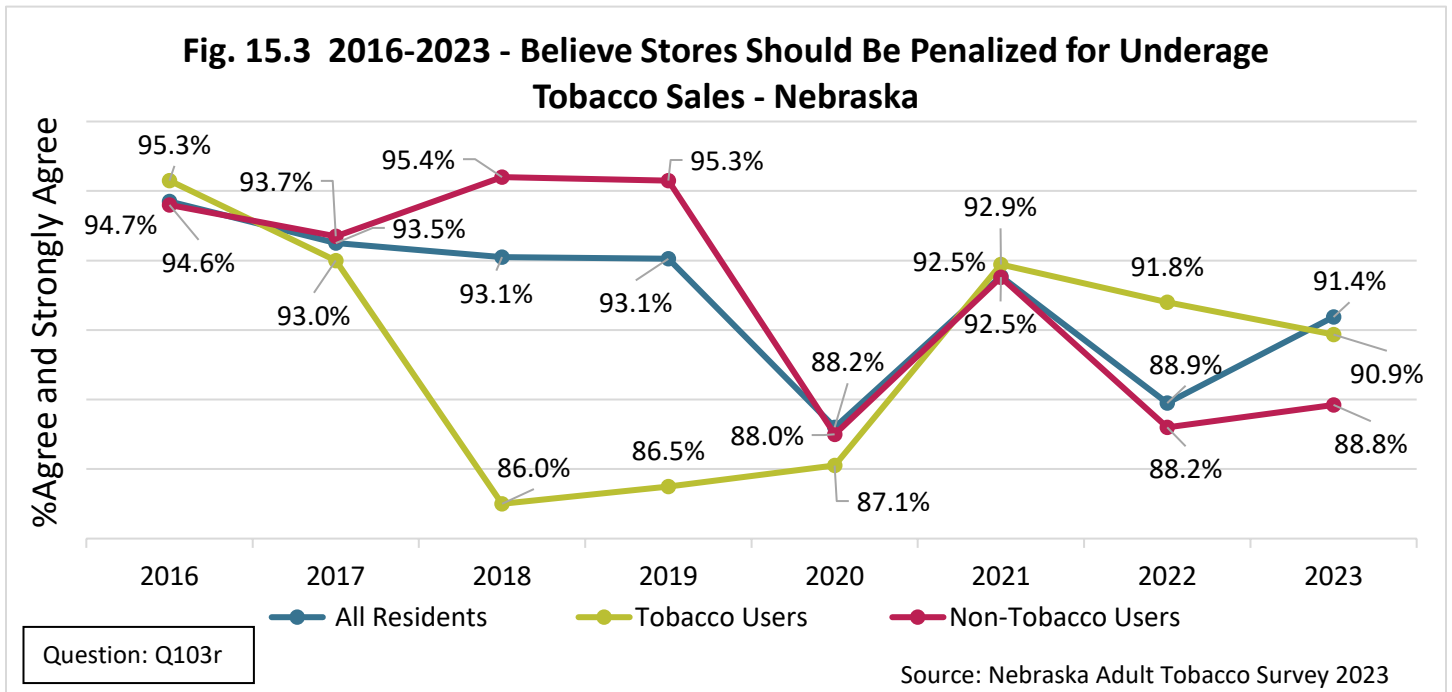
Non-tobacco users disagreed and strongly disagreed with tobacco advertising in grocery and convenience stores at higher rates than tobacco users (Fig. 15.2).



The majority of tobacco users either strongly agreed (15.0%) or agreed (56.5%) that tobacco advertising in grocery and convenience stores is acceptable, whereas only 6.8% of non-tobacco users strongly agreed and 34.6% agreed with such advertising.

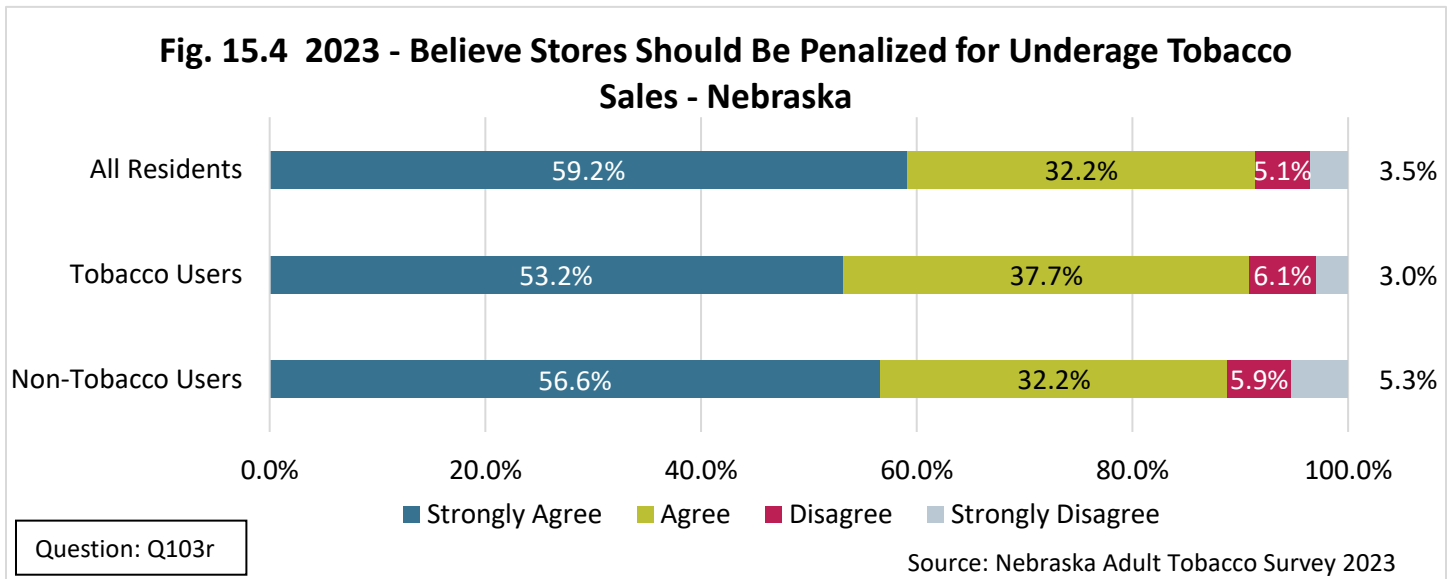
## Opinions on Penalizing Stores for Underage Tobacco Sales 2016-2023

In 2023, a higher proportion of tobacco users believed that stores should be penalized for underage tobacco sales than non-tobacco users (Fig. 15.3).



In 2016, 2021, 2022, and 2023 the proportion of tobacco users who agreed or strongly agreed that stores should be penalized for underage tobacco sales exceeded the proportion of non-tobacco users who felt the same.

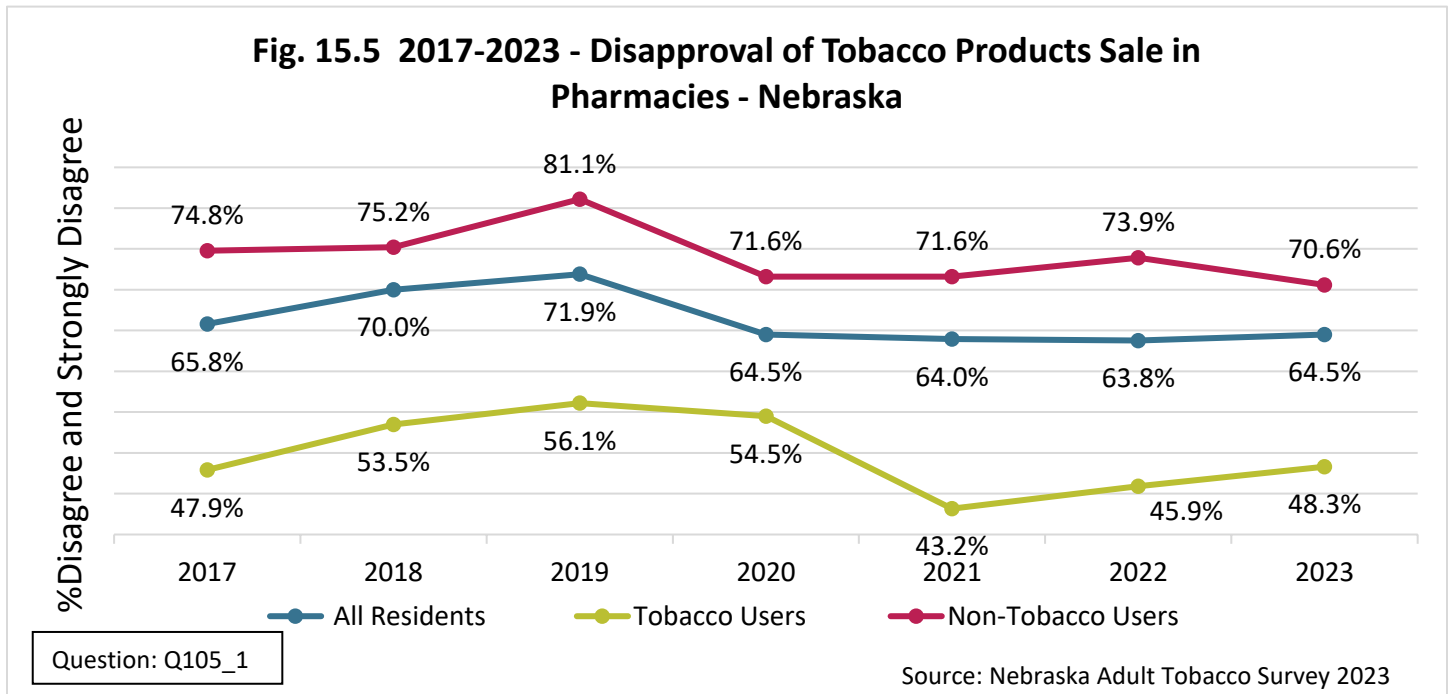
A higher proportion of tobacco-users strongly agreed or agreed that stores should be penalized for underage tobacco sales than non-tobacco users (Fig. 15.4).



In 2023, while the proportion of non-tobacco users who agreed that stores should be penalized for underage tobacco sales (56.6%) exceeded the proportion of tobacco users (53.2%) who felt the same, the inverse is true when the overall agreement rate (strongly agree or agree) is considered.

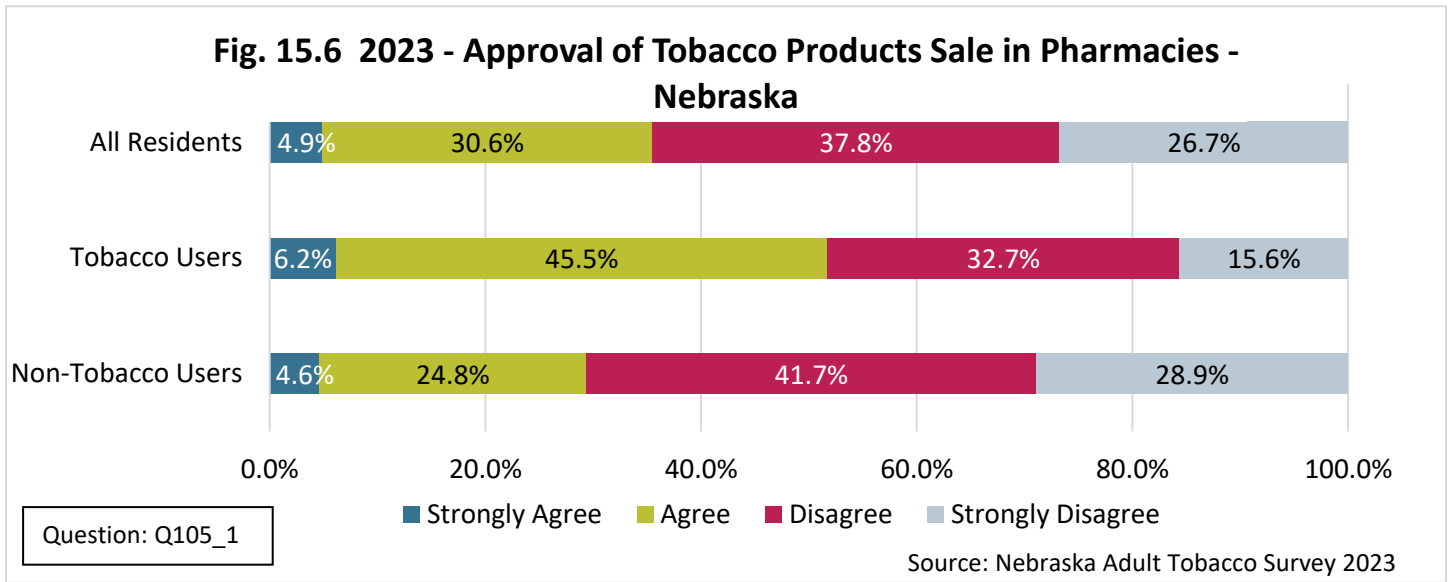
## Opinions on Tobacco Sales at Pharmacies 2017-2023

Tobacco users have lower disapproval rates for pharmacies selling tobacco products than non-tobacco users (Fig. 15.5).



Non-tobacco users have consistently disagreed and strongly disagreed that it is acceptable to sell tobacco products in pharmacies at higher rates than tobacco users. The rate in which tobacco users disapproved of this practice dropped from 54.5% in 2020 to 43.2% in 2021 and has been steadily rising since.

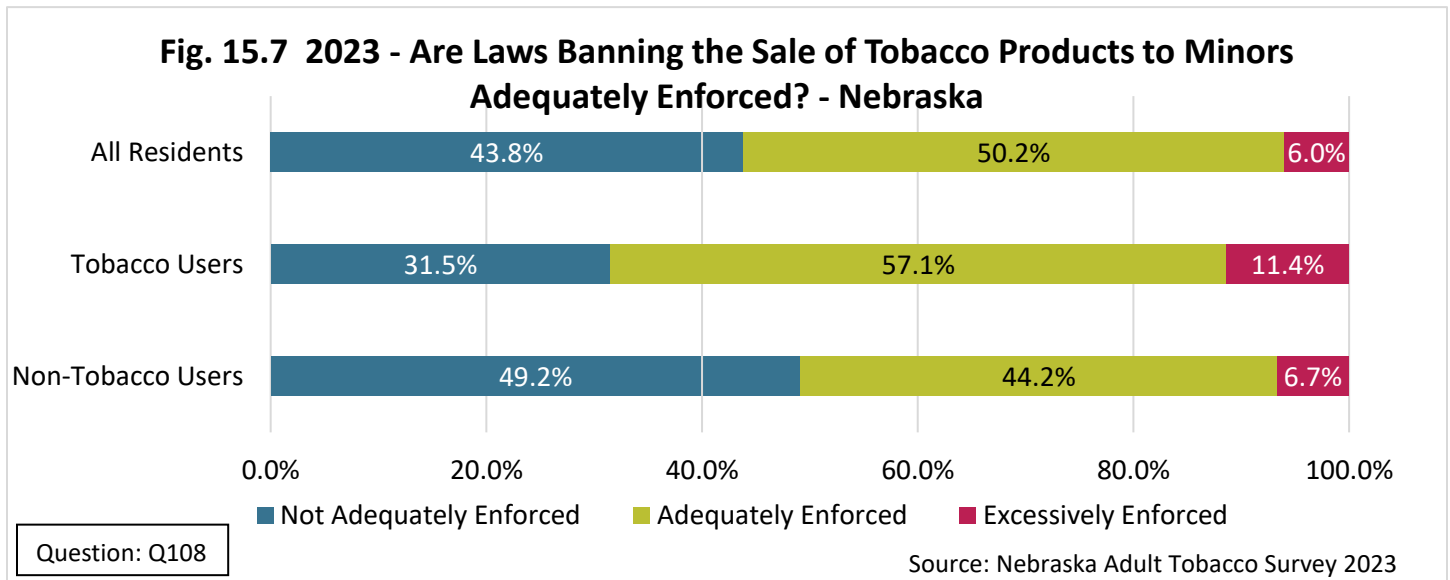
Less than half of tobacco users disapproved of the sale of tobacco products in pharmacies (Fig. 15.6).



Non-tobacco users were much more likely to disapprove of the sale of tobacco products in pharmacies than tobacco users. While 41.7% of non-tobacco users disagreed and 28.9% strongly disagreed with the practice, only 32.7% and 15.6% of tobacco users disagreed and strongly disagreed, respectively.

## Opinions on Banning the Sale to Minors

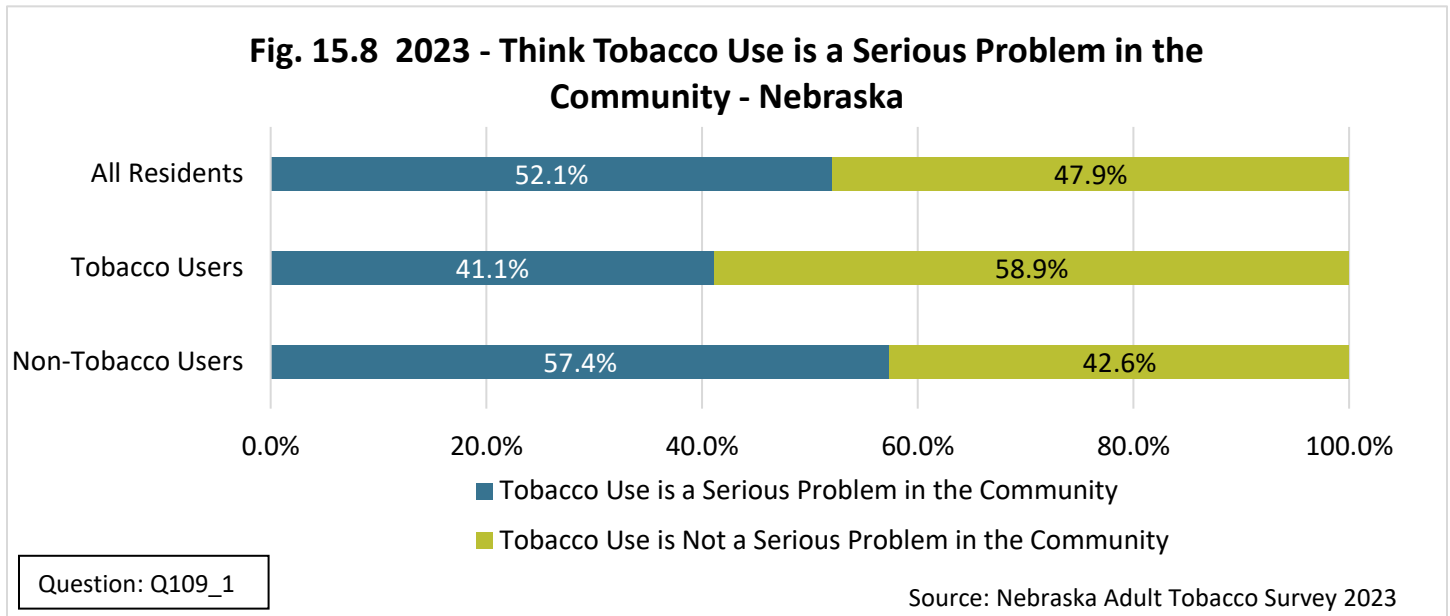
A sizable portion of respondents felt that laws banning the sale of tobacco products to minors are not adequately enforced (Fig. 15.7).



Nearly one half (49.2%) of non-tobacco users felt that laws banning the sale of tobacco products to persons under the legal age is not adequately enforced, while less than one-third (31.5%) of tobacco users felt the same.

## Tobacco Use as a Problem in the Community

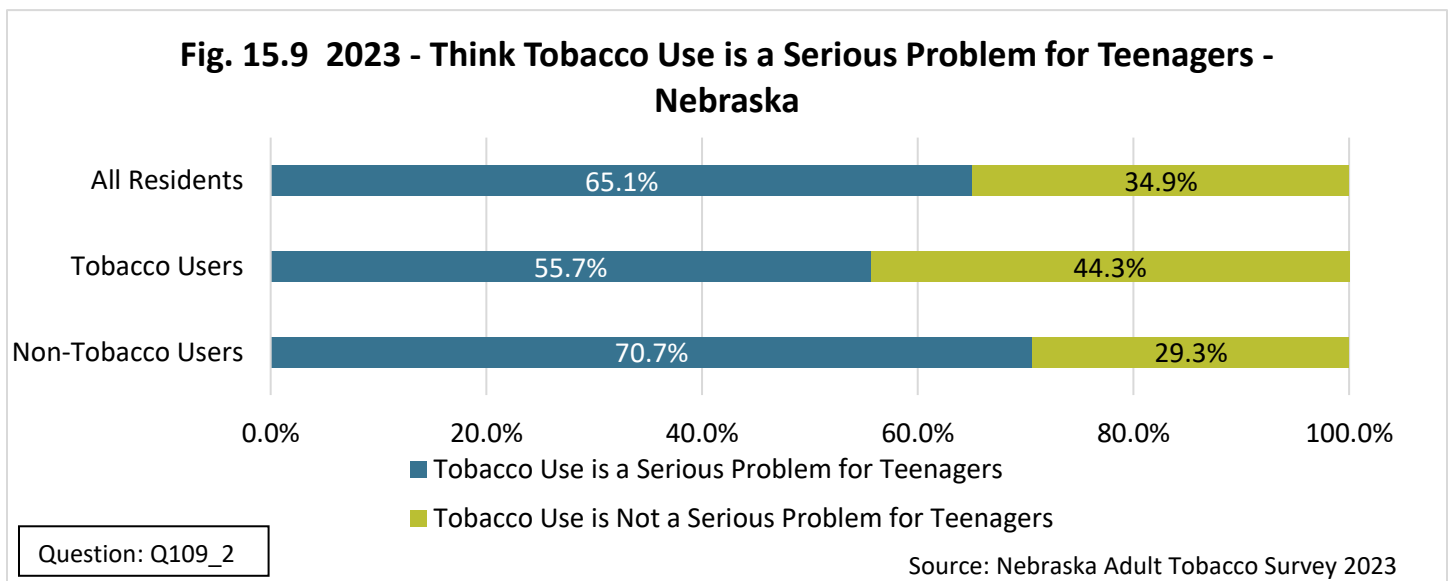
A lower proportion of tobacco users viewed tobacco use as a serious problem in the community compared to non-tobacco users (Fig. 15.8).



Over half (52.1%) of all residents believed that tobacco use is a serious problem in the community. While 57.4% of non-tobacco users felt this way, only 41.1% of tobacco users did.

## Tobacco Use as a Problem for Teenagers

About two-thirds of all residents thought that tobacco use is a serious problem for teenagers (Fig. 15.9).





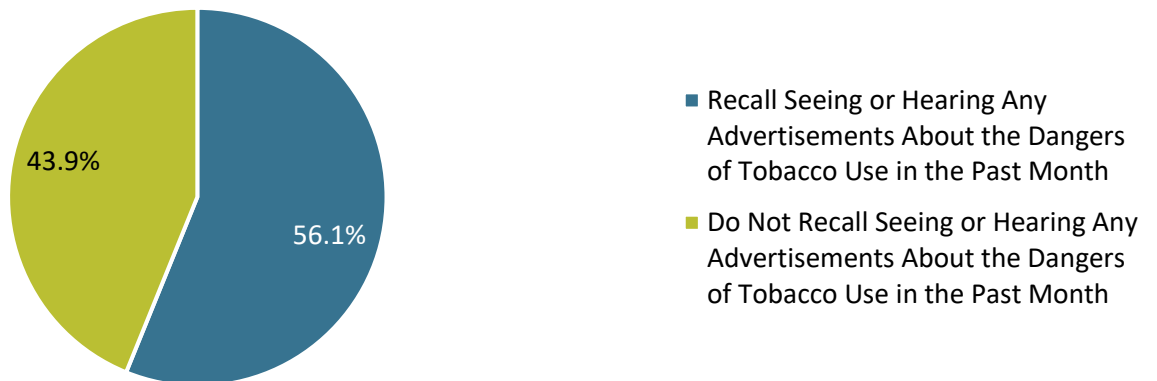
The majority (65.1%) of all residents thought that tobacco use is a serious problem for teenagers. However, tobacco users (55.7%) viewed tobacco use as a serious problem for teenagers at much lower rates than non-tobacco users did (70.7%).

## Media

### Recall of Advertisements About the Dangers of Tobacco Use

Over half of Nebraskans recalled seeing or hearing advertisements about the dangers of tobacco use in the past month (Fig. 16.1).

**Fig. 16.1 2023 - Recall Seeing or Hearing Any Advertisements About the Dangers of Tobacco Use in the Past Month - Nebraska**



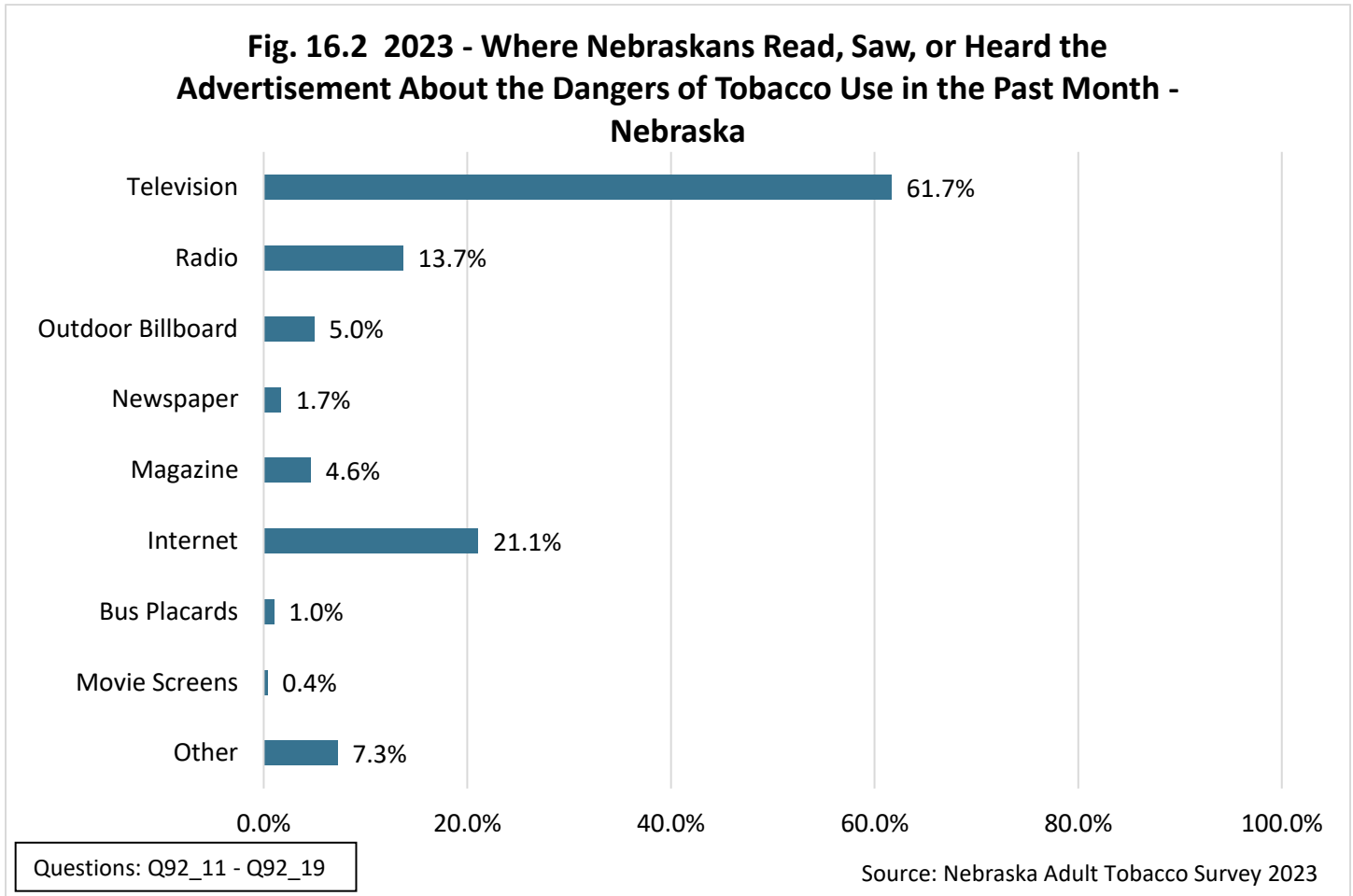
Question: Q91a

Source: Nebraska Adult Tobacco Survey 2023

Over half (56.1%) of Nebraskans recalled seeing or hearing advertisements about the dangers of tobacco use during the month prior to taking the survey, leaving 43.9% who did not recall seeing or hearing such advertisements.

## Media Sources of Prevention Ad

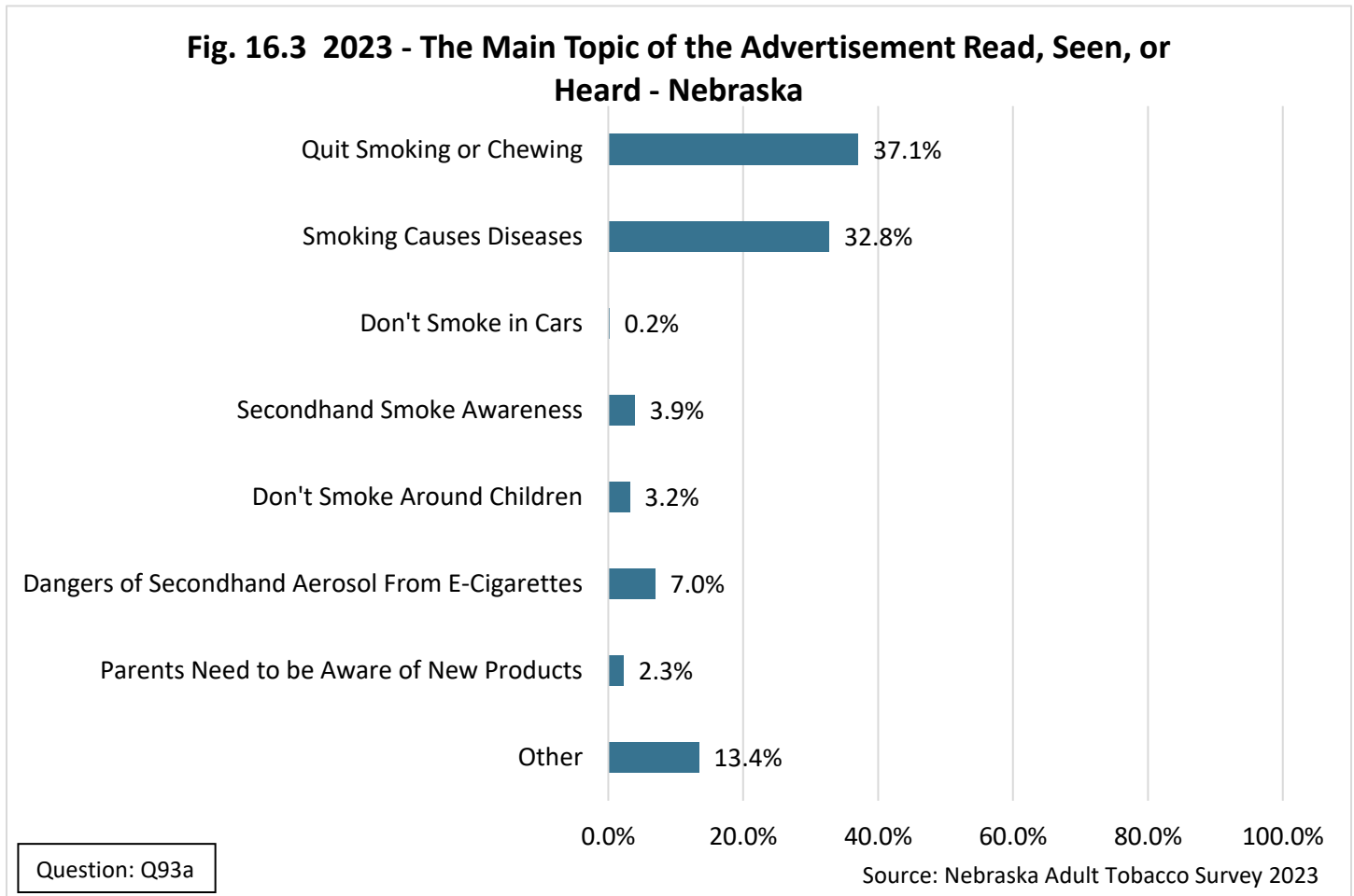
The most common advertisement recalls were television, internet, and radio (Fig. 16.2).



The majority of respondents recalled reading, seeing, or hearing advertisements about the dangers of tobacco on television (61.7%). Another 21.1% recalled the advertisement from the internet, and another 13.7% recalled hearing an advertisement on the radio.

## Topics of Prevention Ad

Around two-fifths of respondents read, saw, or heard ads about smoking or chewing cessation, and about one-third read, saw, or heard ads related to diseases caused by smoking (Fig. 16.3).

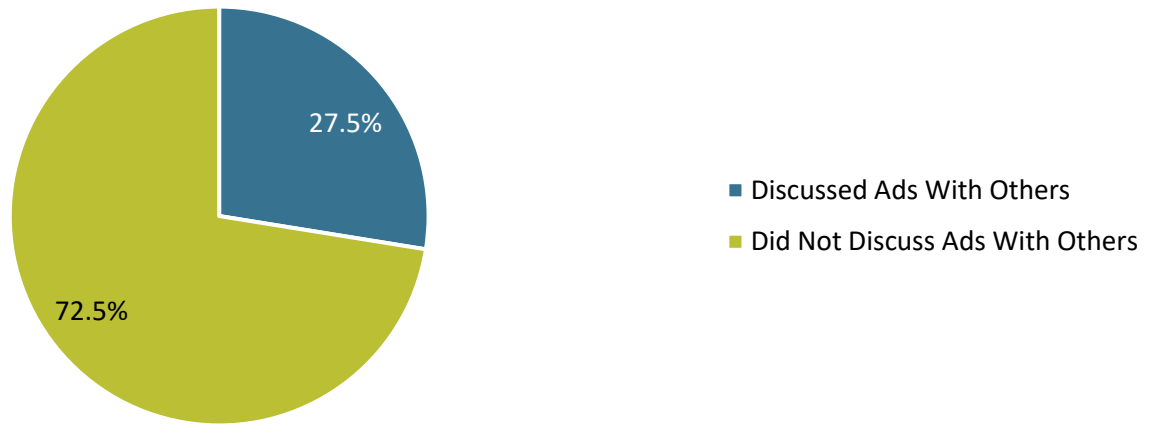


Among the respondents who heard, saw, or read tobacco prevention ads, slightly below two-fifths (37.1%) recalled ads to quit smoking or chewing tobacco, just under one-third (32.8%) recalled ads about smoking causing diseases, and 13.4% read, saw or heard a type of ad other than the ones listed.

## Discussion of Prevention Ad

Just over one-fourth of Nebraskans who read, saw, or heard any ads about the dangers of tobacco use in the past month discussed the ads with others (Fig. 16.4).

**Fig. 16.4 2023 - Have Discussed Ads with Others - Nebraska**



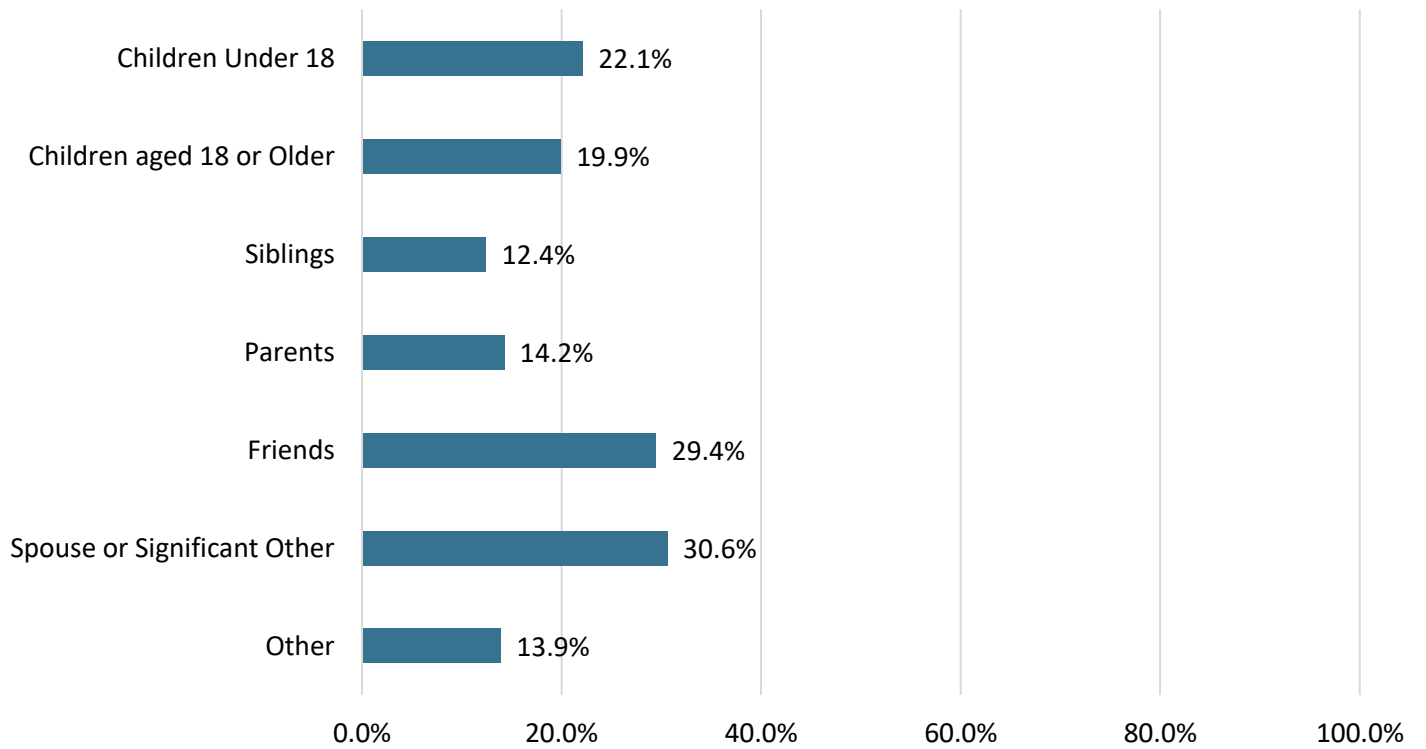
Question: Q94a

Source: Nebraska Adult Tobacco Survey 2023

Just above one-fourth (27.5%) of respondents who heard, saw, or read tobacco ads during the past month discussed them with others, while 72.5% did not.

Of those who discussed the ads with others, most respondents discussed them with their spouse or significant other, friends, or children (Fig. 16.5).

**Fig. 16.5 2023 - With Whom Nebraskans Who Read, Saw, or Heard the Advertisement Discussed It - Nebraska**



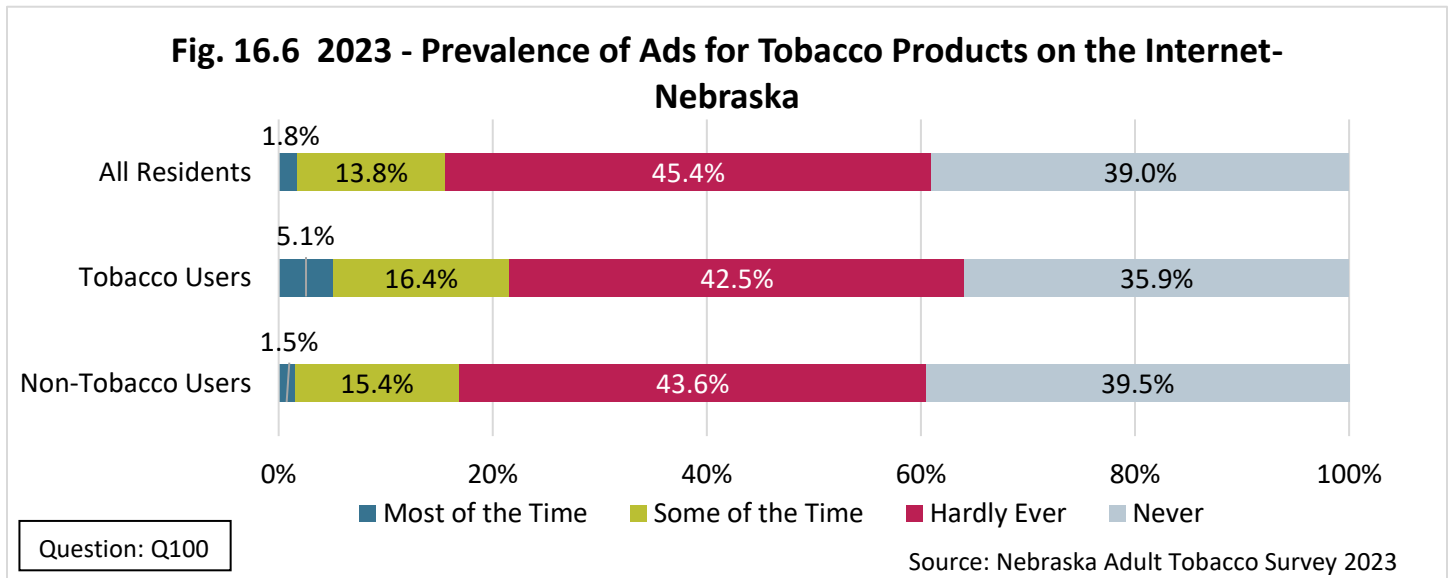
Questions: Q94a\_1.1 - Q94a\_1.7

Source: Nebraska Adult Tobacco Survey 2023

Of those who discussed the ads with others, 30.6% discussed them with their spouse or significant other, 29.4% with friends, 22.1% with children under 18 years of age, and 19.9% discussed them with children aged 18 years or older.

## Frequency of Ads for Tobacco Products Seen on the Internet

The number of ads for tobacco products seen on the internet was relatively similar across respondent groups (Fig. 16.6).

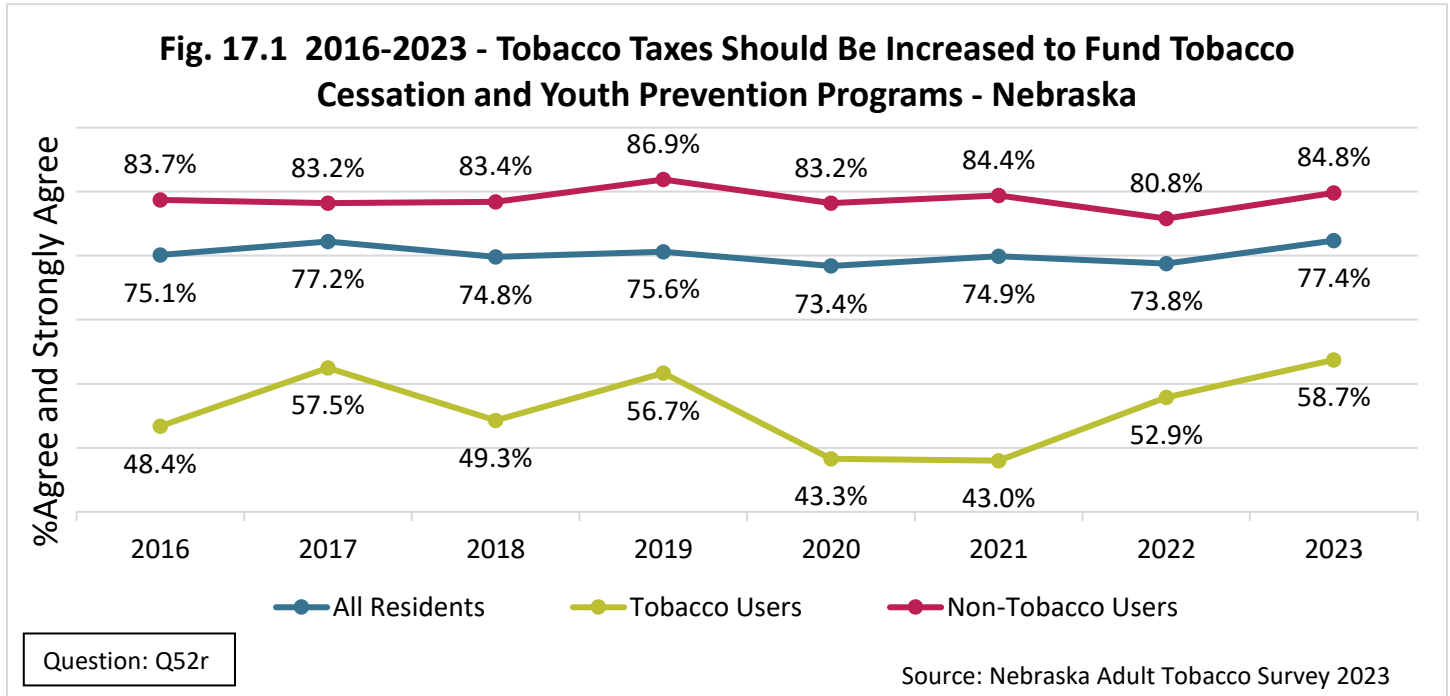


Non-tobacco users (43.6%) were slightly more likely to report hardly ever seeing ads for tobacco products on the internet than were tobacco users (42.5%).

## Support for Tobacco Tax and Use of Revenue

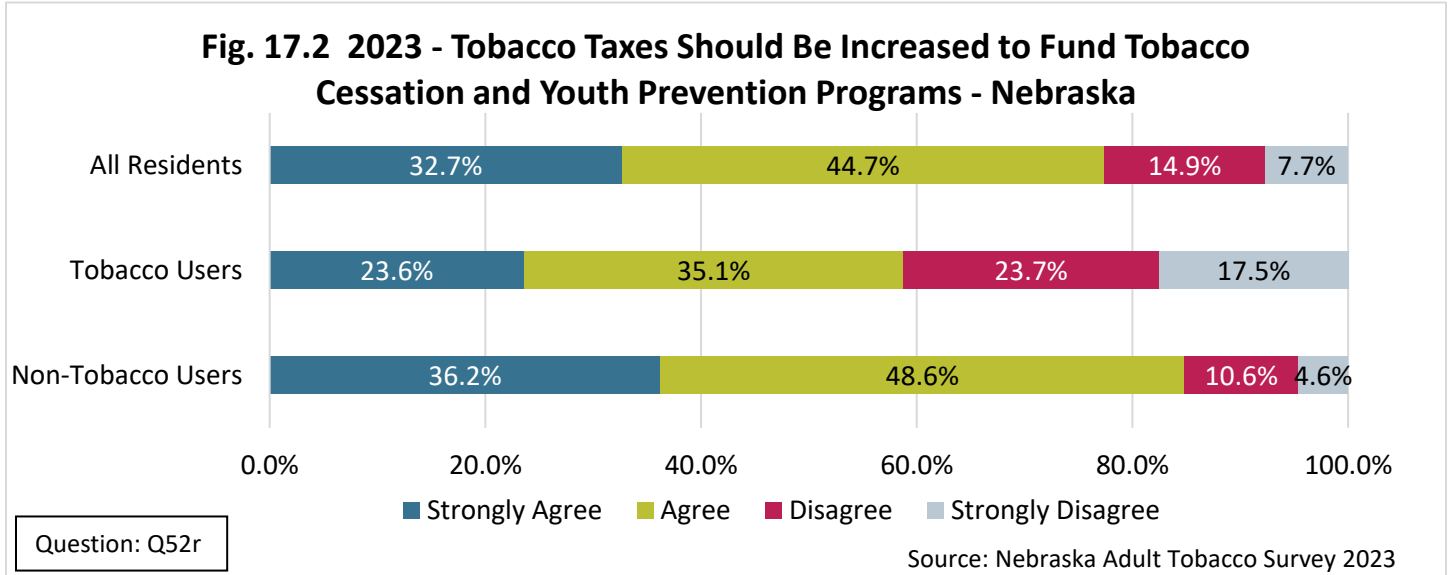
### Opinions on Funding Tobacco Prevention 2016-2023

Among all residents and non-tobacco users, the overall support for increasing tobacco taxes to fund tobacco cessation and youth prevention remains relatively high (Fig. 17.1).



Among all residents and non-tobacco users, the overall support for increasing tobacco taxes to fund tobacco cessation and youth prevention programs remains high, with 84.8% of non-tobacco users and 77.4% of all residents agreeing or strongly agreeing in 2023. Support from tobacco users rose from 52.9% in 2022 to 58.7% in 2023.

A higher proportion of tobacco users disagreed or strongly disagreed that tobacco taxes should be increased to fund tobacco cessation and youth prevention programs (Fig. 17.2).

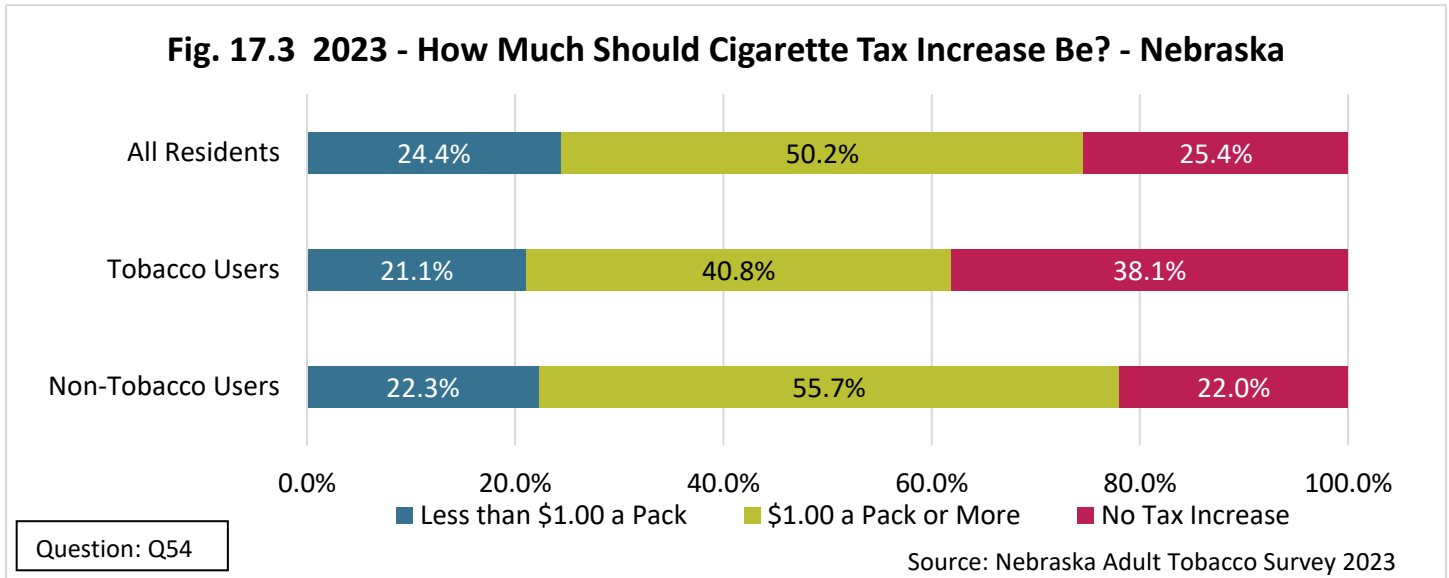


In 2023, tobacco users disagreed or strongly disagreed (41.2%) that tobacco taxes should be increased to fund tobacco cessation and youth prevention programs at higher rates than non-tobacco users (15.2%).



## Opinions on Cigarette Tax Increase

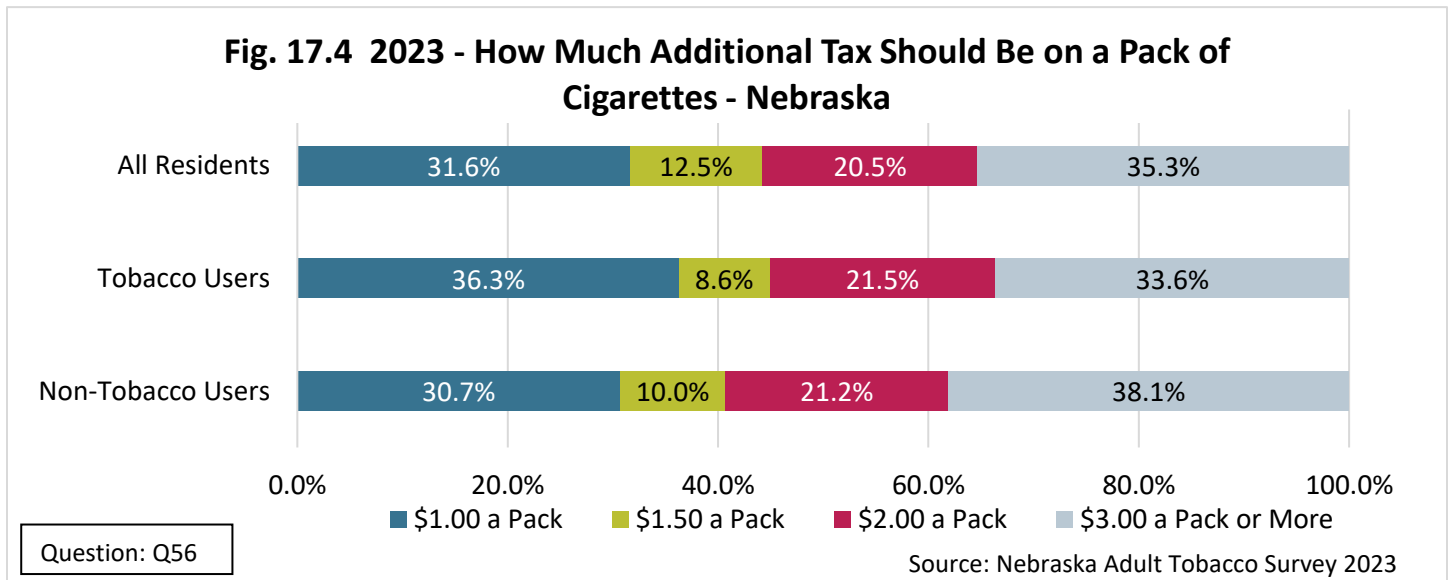
Roughly half of all respondents felt that cigarette taxes should be increased by \$1.00 or more per pack to fund tobacco prevention programs (Fig. 17.3).



Most Nebraska residents and non-tobacco users felt that there should be a tax increase on cigarette packs to fund tobacco prevention programs. About one-quarter (24.4%) of all residents were in favor of increasing the tax by less than \$1.00 and 50.2% favored increasing the tax by \$1.00 or more. About one-fifth (21.1%) of tobacco users showed support for increasing the tax by less than \$1.00, 40.8% supported a tax increase of \$1.00 or more, and 38.1% were not in favor of any tax increase. Over half (55.7%) of non-tobacco users supported a tax increase of \$1.00 or more.

## Opinions on Additional Tax on a Pack of Cigarettes

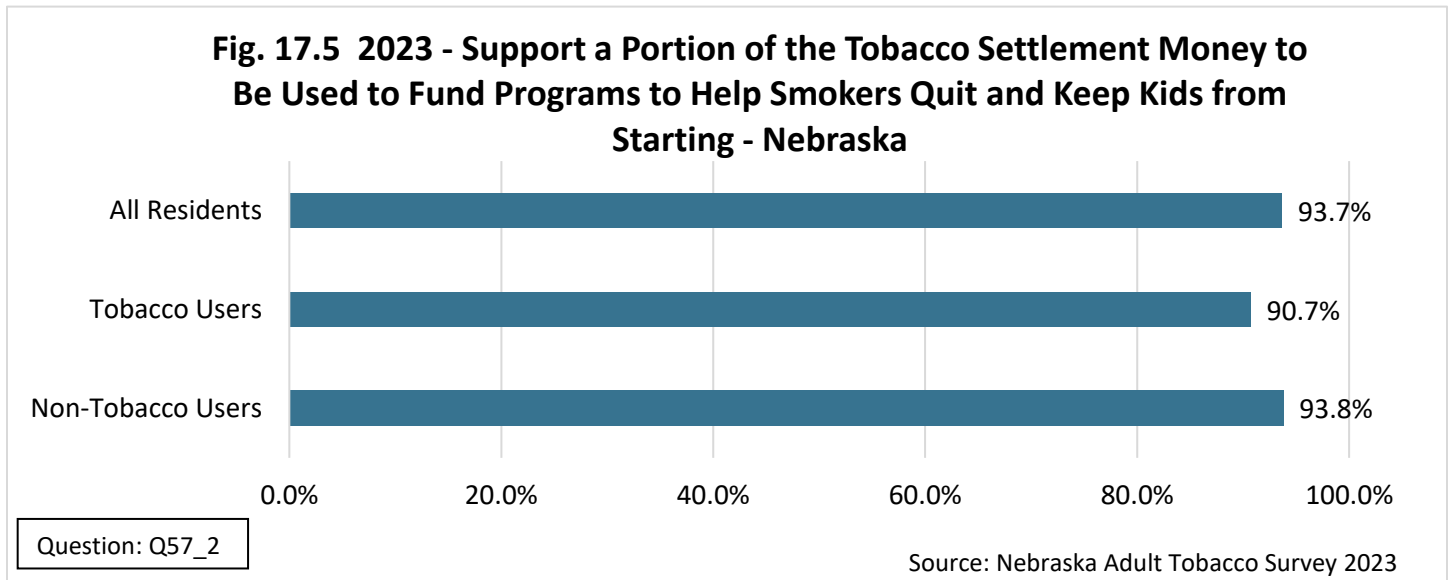
Among all residents who supported a cigarette tax increase of \$1.00 or more per pack, about one-third felt the tax increase should be \$3.00 or more per pack (Fig. 17.4).



Around one-third (31.6%) of all respondents who supported a cigarette tax increase of \$1.00 or more per pack felt that an additional tax of \$1.00 is sufficient, while 36.3% of tobacco-users and 30.7% of non-tobacco users felt the same.

## Support for Funding Tobacco Prevention Programs

Respondents showed strong support for a portion of the national tobacco settlement money being used for tobacco prevention programs (Fig. 17.5).



Nearly all residents (93.7%) indicated their support for a portion of money from the nationwide tobacco settlement being used to fund tobacco prevention programs, while 90.7% of tobacco users and 93.8% of non-tobacco users also support this.

## Conclusion

As shown in this report, cigarettes are the most commonly used tobacco product, with a 9.3% current use prevalence in 2023. Cigarettes were closely followed by e-cigarettes, with a current use rate of 8.6%. It is striking that 62.3% of the respondents reported having ever tried cigarettes, which is much higher than any other product (ATS 2023). Roughly one out of every ten of those respondents (9.3%, ATS 2023) became regular cigarette smokers and remained current smokers at the survey time. Once the smoking behavior has been established, the majority of cigarette smokers (72.0%, ATS 2023) indicated smoking daily. These results suggest a strong correlation between ever trying a cigarette, even one or two puffs, and daily cigarette smoking. Another interesting finding is that the start of regular cigarette smoking peaks at 16 and 18 years of age and a majority of regular smokers (94.6%, ATS 2023) started smoking cigarettes at or before 24 years old. Thus, it is apparent that the prevention of ever trying a cigarette, even one or two puffs, is critical in tobacco control, especially among youth and young adults.

Studies show that flavors increase the appeal of tobacco and possibly decrease the chances of smoking cessation. According to this survey, in Nebraska, about two-fifths (43.7%) of cigarette smokers reported having ever used menthol cigarettes for six months or more and roughly one-third (31.0%) of them reported having smoked menthol cigarettes in the past 30 days.

E-cigarettes emerged in the U.S. market in 2007. While the use of e-cigarettes increased slowly among the whole adult population, its popularity grew rapidly in youth and young adults. This survey showed that e-cigarettes are more commonly used among young adults (age 18-24, 24.5% use rate, ATS 2023). About two-fifths of young adults (43.4%) who have tried both cigarettes and e-cigarettes, tried e-cigarettes first. The main reason for trying e-cigarettes was to quit cigarettes or other tobacco products (26.9%), followed closely by curiosity (24.6%, ATS 2023). These results made it clear that reducing e-cigarette initiation and use needs to remain a focus of tobacco prevention and control efforts.

Secondhand smoke is a proven cause of numerous diseases and is responsible for tens of thousands of deaths in the U.S. each year. The survey results suggest that support for smoke-free policies, less tolerance to secondhand smoke, and stricter inside-home smoking rules is prevalent among non-tobacco users. For instance, 44.6% of tobacco users and 69.0% of non-tobacco users felt that smoking should not be allowed in outdoor dining areas (ATS 2023); more than 90.0% of all respondents do not allow smoking anywhere inside the home (ATS 2023).

Increasing the price of tobacco products is demonstrated to be effective in preventing tobacco initiation, reducing consumption, and promoting cessation. In this survey, about half (50.2%) of all respondents felt cigarette taxes should be increased by \$1.00 or more per pack, among which 35.3% indicated the tax increase should be \$3.00 or more per pack.

Different tobacco use prevalence and trends were seen among different groups of Nebraskans based on characteristics such as age, gender, educational level, race, or socioeconomic status. For instance, the rate of cigarette smokers who have usually smoked menthol cigarettes during the past 30 days is higher among those with an annual household income less than \$35,000 (43.2%) than those with an annual household income between \$35,000 to \$74,999 (26.6%) and those with an annual household income at or above \$75,000 (23.2%, ATS 2023). Many other tobacco-related disparities may exist beyond what is described in the report.

## Appendices

### Appendix A: 2023 Nebraska Adult Tobacco Survey Questionnaire

## 2023 NEBRASKA ATS SURVEY QUESTIONNAIRE

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### Landline Introduction:

**IntroQst.** Hello, I'm calling for the Nebraska Department of Health. My name is \_\_\_\_\_. We are gathering information about the health of Nebraska residents. This project is conducted by the health department. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices. Is this (Phone number)?

1. Yes → [Go to PrivRes](#)
2. No → [Go to Wrongnum](#)

**Wrongnum.** Thank you very much, but I seem to have dialed the wrong number. It's possible that your number may be called at a later time.

**PrivRes.** Is this a private residence?

1. Yes → [Go to LLState](#)
2. No, continue → [Go to CollegeH](#)
3. No, Business phone only → [Go to LLNotPR](#)

**LLNotPR.** Thank you very much, but we are only interviewing persons on residential phone lines at this time.

**CollegeH.** Do you live in college housing?

1. Yes → [Go to LLAdult](#)
2. No → [Go to NonRes](#)

**LLAdult.** Are you 18 years of age or older?

**NonRes.** Thank you very much, but we are only interviewing persons who live in a private residence or college housing at this time.

**LLState.** Do you reside in Nebraska?

1. Yes → [Go to IsCell](#)
2. No → [Go to LLNotST](#)

**LLNotST.** Thank you very much, but we are only interviewing persons who live in the state of Nebraska at this time.

**IsCell.** Is this a cellular telephone?

1. Yes, a cellular telephone → [Go to CellYes](#)
2. No, not a cellular telephone, continue. → [Go to Adults](#)



**CellYes:** Thank you very much, but we are only interviewing by land line telephones at this time.

**Adults.** I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, including yourself, are 18 years of age or older?

**Men.** How many of these adults are men?

**Women.** How many of these adults are women?

**OneAdult.** (If there is only one adult) Are you the adult?

1. Yes and the respondent is male → **Go to Yourthe1**
2. Yes and the respondent is female → **Go to Yourthe1**
3. No → **Go to Ask Gendr**

**AskGendr.** Is the Adult a man or woman?

**GetAdult.** May I speak with \_\_\_\_\_?

**Yourthe1.** Then you are the person I need to speak with.

## Cell Phone Introduction:

**CPIntroQ.** Hello, I'm calling for the Nebraska Department of Health. My name is \_\_\_\_\_. We are gathering information about the health of Nebraska residents. This project is conducted by the health department. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.

**CPSafe.** Is this a safe time to talk with you?

1. Yes → [Go to CPConTel](#)
2. No → [Go to CPUUnsafe](#)

**CPUnsafe.** Thank you very much, we will call you back at a more convenient time.

**CPConTel.** Is this (phone number)?

1. Yes → [Go to CPIsCell](#)
2. No → [Go to CPWrongN](#)

**CPWrongN.** Thank you very much, but I seem to have dialed the wrong number. It's possible that your number may be called at a later time.

**CPIsCell.** Is this a cellular telephone?

1. Yes → [Go to CPAdult](#)
2. No → [Go to CPCellNo](#)

**CPCellNo.** Thank you very much, but we are only interviewing cell telephones at this time.

**CPAdult.** Are you 18 years of age or older?

1. Yes and the respondent is male → [Go to CPPvtRes](#)
2. Yes and the respondent is female → [Go to CPPvtRes](#)
3. No → [Go to CPNoAdlt](#)

**CPNoAdlt.** Thank you very much, but we are only interviewing persons aged 18 or older at this time.

**CPPvtRes.** Do you live in a private residence?

1. Yes → [Go to CPState](#)
2. No → [Go to CPColleg](#)

**CPColleg.** Do you live in college housing?

1. Yes → [Go to CPState](#)
2. No → [Go to CPNonRes](#)

**CPNonRes.** Thank you very much, but we are only interviewing persons who live in private residence or college housing at this time.

**CPState.** Are you a resident of Nebraska?

1. Yes → [Go to CPLandLi](#)
2. No → [Go to CPNotST](#)



**CPNotST.** Thank you very much, but we are only interviewing persons who live in Nebraska at this time.

**CPLandLi.** Do you also have a landline telephone in your home that is used to make and receive calls?

1. Yes
2. No

**CPNumAdlt.** How many members of your household, including yourself, are 18 years of age or older?



I will not ask for your last name, address, or other personal information that can identify you. You do not have to answer any question you do not want to, and you can end the interview at any time. Any information you give me will not be connected to any personal information. If you have any questions about the survey, please call 1-877-791-7359.

## Section 1: General Health Status

Q1

**1.1 Would you say that in general your health is excellent, very good, good, fair, or poor?**

1. Excellent
2. Very good
3. Good
4. Fair
5. Poor
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Section 2: Cigarette Smoking

Q2

**2.1 Have you ever smoked a cigarette, even 1 or 2 puffs?**

1. YES
2. NO → [Go to Q13ra](#)
  
7. DON'T KNOW/NOT SURE → [Go to Q13ra](#)
9. REFUSED → [Go to Q13ra](#)

Q3

**2.2 Have you smoked at least 100 cigarettes in your entire life?**

NOTE: 5 packs = 100 cigarettes

1. YES
2. NO → [Go to Q13ra](#)
  
7. DON'T KNOW/NOT SURE → [Go to Q13ra](#)
9. REFUSED → [Go to Q13ra](#)

Q3\_1

**2.3 How old were you when you first started smoking regularly?**

\_\_\_\_\_ Enter age in years (**000-099**)

- 777. DON'T KNOW/NOT SURE
- 888. I NEVER SMOKED REGULARLY
- 999. REFUSED

Q4

**2.4 Do you now smoke cigarettes every day, some days, or not at all?**

- 1. Every day → Go to Q4br
- 2. Some days → Go to Q4br
- 3. Not at all → Go to Q8
  
- 7. DON'T KNOW/NOT SURE → Go to Q4br
- 9. REFUSED → Go to Q4br

**Section 3: Cigarette Smoking - Cessation**

Q4br

**3.1 Are you trying to quit smoking cigarettes now or have you tried to quit in the past, or both?**

- 1. Trying to quit now → Go to Q4e
- 2. Have tried to quit in the past → Go to Q4e
- 3. Both → Go to Q4e
- 4. No, you have never tried to quit smoking cigarettes. → Go to Q6r
  
- 7. DON'T KNOW/NOT SURE → Go to Q6r
- 9. REFUSED → Go to Q6r

Q4e

**3.2 In your whole life, how many times have you stopped smoking for one day or longer because you were trying to quit smoking cigarettes for good?**

\_\_ NUMBER OF TIMES (VERIFY IF > 20)

- 88. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

## Section 4: Cigarette Smoking – Use of Cigarettes

Q6r

**4.1 On the average, on days when you smoked during the past 30 days, about how many cigarettes did you smoke a day?**

NOTE: 1 pack = 20 cigarettes

\_\_\_\_\_ Number of cigarettes (0-50) → [Go to Q6\\_1](#)

- 55. More than 50 a day → [Go to Q6\\_1](#)
- 66. None → [Go to Q8](#)
- 88. Less than one cigarette a day → [Go to Q6\\_1](#)
- 77. DON'T KNOW/NOT SURE → [Go to Q6\\_1](#)
- 99. REFUSED → [Go to Q6\\_1](#)

Q6\_1

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

\_\_\_\_\_ Number of days (1-30, 77 or 99)

- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

Q7

**4.3 How soon after you wake up do you have your first cigarette?**

- 1. WITHIN 5 MINUTES
- 2. 6-30 MINUTES
- 3. 31-60 MINUTES
- 4. AFTER 60 MINUTES
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

[Go to MentReg](#)

Q8

**4.4 About how long has it been since you last smoked cigarettes regularly?**

Read only if necessary

- 01. WITHIN THE PAST MONTH (ANYTIME LESS THAN 1 MONTH AGO)
- 02. WITHIN THE PAST 3 MONTHS (1 MONTH BUT LESS THAN 3 MONTHS AGO)
- 03. WITHIN THE PAST 6 MONTHS (3 MONTHS BUT LESS THAN 6 MONTHS AGO)
- 04. WITHIN THE PAST YEAR (6 MONTHS BUT LESS THAN 1 YEAR AGO)
- 05. WITHIN THE PAST 5 YEARS (1 YEAR BUT LESS THAN 5 YEARS AGO)

- 06. WITHIN THE PAST 10 YEARS (5 YEARS BUT LESS THAN 10 YEARS AGO)
- 07. 10 OR MORE YEARS AGO
  
- 77. DON'T KNOW/NOT SURE
- 88. I NEVER SMOKED REGULARLY
- 99. REFUSED

If Answer>01, go to Q13ra

## Section 5: Cigarette Smoking – Type/Brand Preferences

MENTREG (MENTHOL6)

### 5.1 Have you ever smoked menthol cigarettes for 6 months or more?

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

MENTH30 (CGT\_MENTHOL)

### 5.2 During the past 30 days, were the cigarettes that you usually smoked menthol?

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

CGTBRND

### 5.3 During the past 30 days, what brand of cigarettes did you smoke most often?

- 01. AMERICAN SPIRIT (NATURAL AMERICAN SPIRIT)
- 02. BASIC (BRANDED DISCOUNT)
- 03. CAMEL
- 04. DORAL (BRANDED DISCOUNT)
- 05. FORSYTH (PRIVATE LABEL)
- 06. GPC (BRANDED DISCOUNT)
- 07. KOOL
- 18. MARLBORO GOLD
- 19. MARLBORO MENTHOL
- 20. MARLBORO RED
- 08. MARLBORO (OTHER)
- 09. MISTY (BRANDED DISCOUNT)
- 21. NEWPORT MENTHOL BLUE
- 22. NEWPORT MENTHOL GOLD

- 23. NEWPORT BOX
- 10. NEWPORT (OTHER)
- 11. PALL MALL
- 12. PARLIAMENT
- 13. SALEM
- 14. SONOMA (BRANDED DISCOUNT)
- 15. USA GOLD (BRANDED DISCOUNT)
- 16. VIRGINIA SLIMS
- 17. WINSTON
- 96. OTHER (SPECIFY - Brand2ot)
  
- 66. DID NOT SMOKE A USUAL BRAND DURING THE PAST 30 DAYS
- 77. DON'T KNOW/NOT SURE
- 88. DID NOT BUY ANY CIGARETTES DURING THE PAST 30 DAYS
- 99. REFUSED

## Section 6: Cigarette Smoking – Purchasing Cigarettes

### BuyCig (CGT\_BUY)

#### 6.1 Have you bought any cigarettes for yourself in the past 30 days?

- 1. YES → Go to CgtPlc1
- 2. NO → Go to 13ra
  
- 7. DON'T KNOW/NOT SURE → Go to 13ra
- 9. REFUSED → Go to 13ra

### CgtPlc1

#### 6.2 Where did you buy cigarettes for yourself during the past 30 days most often?

(Read only if necessary)

- 01. At a convenience store or gas station
- 02. At a supermarket
- 03. At a liquor store
- 04. At a drug store
- 05. At a tobacco discount store
- 06. On an Indian Reservation
- 07. From a vending machine
- 08. On the internet
- 09. From another person
- 11. At a volume discount store like Wal-Mart, Sam's Club or Costco
- 10. Other (Specify - CgPl1ot)
  
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

CgtPrc1 (CGT\_PACK\_OR\_CARTN)

**6.3 Do (Did) you buy cigarettes by the pack or by the carton?**

- 1. By the pack → [Go to CgtPrc2](#)
- 2. By the carton → [Go to CgtPrc3](#)
  
- 7. DON'T KNOW/NOT SURE → [Go to Q12\\_1r](#)
- 9. REFUSED → [Go to Q12\\_1r](#)

CgtPrc2 (CGT\_PRC\_PACK)

**6.4 The last time you bought a pack of cigarettes for yourself, what price did you pay?**

Note: IF RESPONDENT ASKS ABOUT DISCOUNTS OR COUPONS, READ: Please report the cost after discounts or coupons.

\$\_\_\_\_\_.\_\_\_\_\_ (amount paid for last pack of cigarettes)

77.77 DON'T KNOW/NOT SURE

99.99 REFUSED

[Go to Q12\\_1r](#)

CgtPrc3 (CGT\_PRC\_CART)

**6.5 The last time you bought a carton of cigarettes for yourself, what price did you pay?**

Note: IF RESPONDENT ASKS ABOUT DISCOUNTS OR COUPONS, READ: Please report the cost after discounts or coupons.

\$\_\_\_\_\_.\_\_\_\_\_ (amount paid for last carton of cigarettes)

777.77 DON'T KNOW/NOT SURE

999.99 REFUSED

[Go to Q12\\_1r](#)

Q12\_1r (CGT\_BUY\_OSTATE)

**6.6 How often do you purchase cigarettes from a state other than Nebraska? Would you say all the time, sometimes, rarely or never?**

- 1. All the time
- 2. Sometimes
- 3. Rarely
- 4. Never
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Q12\_2r (CGT\_BUY\_INDIANR)

**6.7 How often do you purchase cigarettes from an Indian reservation? Would you say all the time, sometimes, rarely or never?**

1. All the time
2. Sometimes
3. Rarely
4. Never
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q12\_4r (COUPON)

**6.8 In the past 12 months have you ever taken advantage of coupons, rebates, buy 1 get 1 free, or any other special promotions for cigarettes?**

1. YES → Go to Q12\_4br
2. NO → Go to Q13ra
  
7. DON'T KNOW/NOT SURE → Go to Q13ra
9. REFUSED → Go to Q13ra

Q12\_4br (COUPON\_FROM)

**6.9 Where do you usually get the coupons you use?**

DO NOT READ LIST UNLESS NECESSARY.

1. FROM THE STORE/CASHIER WHERE CIGARETTES ARE PURCHASED
2. IN THE MAIL FROM THE CIGARETTE COMPANY
3. SENT IN A TEXT MESSAGE FROM THE CIGARETTE COMPANY.
4. SENT IN AN E-MAIL FROM THE CIGARETTE COMPANY
5. PRINTED FROM A WEB SITE
6. FROM THE CIGARETTE PACKAGE
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Section 7: Cigar, Cigarillo, or Small Cigar Smoking

Q13ra (EVR-TRY\_CGR)

**7.1 Have you ever smoked a cigar, cigarillo or small cigar, even 1 or 2 puffs?**

Note: Cigarillo sounds like sig-uh-ril-oh

Note: Cigarillos are small, regular cigars. They are usually sold individually or in packs of 5 or 8. Some common brands are *Black and Mild's*, *Swisher Sweets Cigarillos*, and *Phillies Blunts*, but there are others.



Note: Small Cigars look like cigarettes that are usually brown in color and have a spongy filter like a cigarette. They are about the same size as cigarettes and are often sold in packs of 20. Some common brands are *Prime Time* little filter cigars and *Winchester* little filter cigars, but there are others.

1. YES → [Go to Q13rb](#)
2. NO → [Go to QChew1](#)
  
7. DON'T KNOW/NOT SURE → [Go to QChew1](#)
9. REFUSED → [Go to QChew1](#)

Q13rb (EVR\_CGR\_LIFE50)

**7.2 Have you smoked at least 50 cigars, cigarillos or small cigars in your entire life?**

1. YES → [Go to Q14r](#)
2. NO → [Go to QChew1](#)
  
7. DON'T KNOW/NOT SURE → [Go to QChew1](#)
9. REFUSED → [Go to QChew1](#)

Q14r (CGR\_EDAY)

**7.3 Do you now smoke cigars, cigarillos or small cigars every day, some days, or not at all?**

1. Every day → [Go to Q14rbr](#)
2. Some days → [Go to Q14rbr](#)
3. Not at all → [Go to Q14rd](#)
  
7. DON'T KNOW/NOT SURE → [Go to QChew1](#)
9. REFUSED → [Go to QChew1](#)

Q14rbr (CGR\_QUIT\_TRY)

**7.4 Are you trying to quit smoking cigars now or have you tried to quit in the past, or both?**

1. Trying to quit now
2. Have tried to quit in the past
3. Both
4. No, you have not tried to quit smoking cigars
  
7. DON'T KNOW/NOT SURE
9. REFUSED

[Go to Q14rer](#)

Q14rd (CGR\_HLONG\_LUSE)

**7.5 About how long has it been since you last smoked cigars, cigarillos or small cigars regularly?**

Read only if necessary



01. WITHIN THE PAST MONTH (ANYTIME LESS THAN 1 MONTH AGO)
02. WITHIN THE PAST 3 MONTHS (1 MONTH BUT LESS THAN 3 MONTHS AGO)
03. WITHIN THE PAST 6 MONTHS (3 MONTHS BUT LESS THAN 6 MONTHS AGO)
04. WITHIN THE PAST YEAR (6 MONTHS BUT LESS THAN 1 YEAR AGO)
05. WITHIN THE PAST 5 YEARS (1 YEAR BUT LESS THAN 5 YEARS AGO)
06. WITHIN THE PAST 10 YEARS (5 YEARS BUT LESS THAN 10 YEARS AGO)
07. 10 OR MORE YEARS AGO
  
77. DON'T KNOW/NOT SURE
88. I NEVER SMOKED CIGARS REGULARLY
99. REFUSED

If Answer>1, go to QChew1

Q14rer (CGR\_FLAV)

**7.6 Were any of the cigars, cigarillos, or small cigars that look like cigarettes that you smoked in the past 30 days flavored to taste like candy, fruit, chocolate, or other sweets?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Section 8: Smokeless Tobacco

QChew1 (EVR\_TRY\_SML)

**8.1 Have you ever used or tried any chewing tobacco, dip, snuff, or snus, even just one time?**

NOTE: Smokeless tobacco is tobacco that is not burned but placed inside the mouth. It comes in many forms including

- Chewing tobacco, which is placed between the cheek and gums,
- Dip, moist snuff used like chewing tobacco,
- Snuff, which can be sniffed if dried, and
- Snus, a small pouch of moist snuff

1. YES → Go to QChew2
2. NO → Go to QEcig2rrr
  
7. DON'T KNOW/NOT SURE → Go to QEcig2rrr
9. REFUSED → Go to QEcig2rrr

QChew2 (EVR\_SML\_LIFE20)

**8.2 Have you used chewing tobacco, dip, snuff, or snus at least 20 times in your entire life?**

1. YES → Go to QChew3

2. NO → [Go to QEcig2rrr](#)
7. DON'T KNOW/NOT SURE → [Go to QEcig2rrr](#)
9. REFUSED → [Go to QEcig2rrr](#)

QChew3 (SML\_EDAY)

**8.3 Do you currently use chewing tobacco, dip, snuff, or snus, every day, some days, or not at all?**

1. Every day → [Go to QSmlAlt](#)
2. Some days → [Go to QSmlAlt](#)
3. Not at all → [Go to Q18d](#)
7. DON'T KNOW/NOT SURE → [Go to QEcig2rrr](#)
9. REFUSED → [Go to QEcig2rrr](#)

QSmlBrnd (SML\_BRND)

**8.4 During the past 30 days, what brand of chewing tobacco, dip, snuff, or snus did you use most often?**

01. BEECH-NUT REGULAR
02. COPENHAGEN
16. GOLD RIVER
03. GRIZZLY
17. KAYAK
04. KODIAK
05. LEVI GARRETT
06. LONGHORN
07. MORGAN'S
08. RED MAN
09. RED MAN GOLDEN BLEND
10. RED SEAL
11. SKOAL
12. SOUTHERN PRIDE
13. STOKER CHEW
14. TAYLOR'S PRIDE
15. TIMBER WOLF
96. OTHER (SPECIFY - smlbrdot)
66. DID NOT USE ONE BRAND MOST OFTEN DURING THE PAST 30 DAYS
77. DON'T KNOW/NOT SURE
99. REFUSED

Q18br (SML\_TRY\_QUIT)

**8.5 Are you trying to quit using smokeless tobacco now or have you tried to quit in the past, or both?**

1. Trying to quit now → [Go to Q18br\\_2](#)
2. Have tried to quit in the past → [Go to Q18br\\_2](#)
3. Both → [Go to Q18br\\_2](#)
4. No, you have not tried to quit smoking cigars (new response option) → [Go to QEcig2rrr](#)

- 7. DON'T KNOW/NOT SURE → [Go to QEcig2rrr](#)
- 9. REFUSED → [Go to QEcig2rrr](#)

Q18br\_2 (SML\_NUM\_QUIT)

**8.6 In your whole life, how many times have you stopped using smokeless tobacco for one day or longer because you were trying to quit using smokeless tobacco for good?**

\_\_\_ NUMBER OF TIMES

- 88. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

Q18d (ML\_HLONG\_LUSE)

**8.7 About how long has it been since you last used smokeless tobacco regularly?**

Read only if necessary

- 01. WITHIN THE PAST MONTH (ANYTIME LESS THAN 1 MONTH AGO)
- 02. WITHIN THE PAST 3 MONTHS (1 MONTH BUT LESS THAN 3 MONTHS AGO)
- 03. WITHIN THE PAST 6 MONTHS (3 MONTHS BUT LESS THAN 6 MONTHS AGO)
- 04. WITHIN THE PAST YEAR (6 MONTHS BUT LESS THAN 1 YEAR AGO)
- 05. WITHIN THE PAST 5 YEARS (1 YEAR BUT LESS THAN 5 YEARS AGO)
- 06. WITHIN THE PAST 10 YEARS (5 YEARS BUT LESS THAN 10 YEARS AGO)
- 07. 10 OR MORE YEARS AGO
  
- 77. DON'T KNOW/NOT SURE
- 88. I'VE NEVER USED SMOKELESS TOBACCO REGULARLY
- 99. REFUSED

## Section 9: Electronic Cigarette or E-cigarette Use

For these next questions, the term e-cigarette includes all electronic smoking devices. E-cigarettes come in many shapes and sizes and are known by different names, such as e-cigs, e-hookah, mods, vape pens, vapes, tank systems, and electronic nicotine delivery systems (ENDS).

QEcig2rrr (EVR\_TRY\_ECGT)

**9.1 Have you ever used an e-cigarette or other electronic smoking devices, even just one time, in your entire life?**

- 1. YES → [Go to QEcigDay](#)
- 2. NO → [Go to QEcig2\\_1](#)
  
- 7. DON'T KNOW/NOT SURE → [Go to QHeatTob](#)
- 9. REFUSED → [Go to QHeatTob](#)

EcigDay

**9.2 In total, on how many days have you used e-cigarettes in your entire life?**

1. 1 day
2. 2 to 10 days
3. 11 to 20 days
4. 21 to 50 days
5. 51 to 100 days
6. Over 100 days
  
7. DON'T KNOW/NOT SURE
9. REFUSED

QE cigTry

**9.3 You said you have at least TRIED cigarettes and e-cigarettes. Which did you use first?**  
(Asked only if respondent says they have tried both cigarettes and e-cigarettes)

1. Cigarettes
2. E-Cigarettes
  
7. DON'T KNOW/NOT SURE
9. REFUSED

QE cig2\_1 (ECGT\_CUR\_2TRY)

**9.4 Have you ever been curious about using an e-cigarette? Would you say definitely yes, probably yes, probably not, or definitely not?**

1. Definitely yes
2. Probably yes
3. Probably not
4. Definitely not
  
7. DON'T KNOW/NOT SURE
9. REFUSED

[Go to QHeatTob](#)

QE cig2\_2 (ECGT\_TRY\_AGE)

**9.5 How old were you when you first tried an e-cigarette, even once or twice?**

\_\_\_\_\_ Enter age in years (00-99)

777. DON'T KNOW/NOT SURE
999. REFUSED

QE cig3r (ECGT\_EDAY)

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

1. Every day → [Go to QEcigRer](#)
2. Some days → [Go to QEcigRer](#)
3. Not at all → [Go to EcgLast](#)
  
7. DON'T KNOW/NOT SURE → [Go to QEcigRer](#)
9. REFUSED → [Go to QEcigRer](#)

#### EcgLast

### 9.7 When was the last time you used an e-cigarette, even one or two times?

Interviewer: Choose the first answer that fits

01. EARLIER TODAY
02. WITHIN THE PAST 7 DAYS (NOT TODAY, BUT SOMETIME DURING THE PAST 7 DAYS)
03. WITHIN THE PAST 30 DAYS (NOT DURING THE PAST 7 DAYS, BUT SOMETIME DURING THE PAST 30 DAYS)
04. WITHIN THE PAST 6 MONTHS (NOT DURING THE PAST 30 DAYS, BUT SOMETIME DURING THE PAST 6 MONTHS)
05. WITHIN THE PAST YEAR (NOT DURING THE PAST 6 MONTHS, BUT SOMETIME DURING THE PAST YEAR)
06. WITHIN THE PAST 5 YEARS (1 YEAR BUT LEST THAN 5 YEARS AGO)
07. 5 OR MORE YEARS AGO
  
77. DON'T KNOW/NOT SURE
79. REFUSED

#### QEcigRer

### 9.8 What is the MAIN reason you tried an e-cigarette?

Read only if necessary

Mark only ONE

01. BECAUSE I WAS CURIOUS
02. I THOUGHT IT WOULD BE SAFER THAN TRYING CIGARETTES/SOMETHING ELSE
03. AS PART OF A SOCIAL ACTIVITY/FOR FUN/SOMEONE INVITED ME TO TRY
04. I WANTED TO CUT BACK ON CIGARETTES OR OTHER TOBACCO
05. I WANTED TO QUIT CIGARETTES AND/OR OTHER TOBACCO
06. I WANTED TO USE INDOORS/OTHER PLACES WHERE SMOKING IS NOT ALLOWED
07. I WANTED TO SAVE MORE MONEY (CHEAPER OR LONG TERM COST SAVINGS)
08. IT DOESN'T HAVE DISTINCTIVE ODOR WHILE USING IT OR AFTER.
09. IT DOESN'T LEAVE ASH OR LITTER LIKE CIGARETTE BUTTS.
10. THE FLAVOR SOUNDED GOOD.
11. OTHER REASON (SPECIFY - [QEcROt](#))
  
77. DON'T KNOW/NOT SURE
99. REFUSED

#### QEcigMen

### 9.9 Currently, when you use e-cigarettes, do you usually use menthol e-cigarettes?

(skip if QEcg3r >=3)

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

QEquit (ECGT\_TRY\_QUIT)

**9.10 Are you trying to quit using e-cigarettes now or have you tried to quit in the past, or both?**  
 (skip if EcigDay > 1 and QEcg3r >=3 – Used Ecig 1 day and say they now use not at all)  
 (asked if EcigLast <=3 – within the past 30 days)

1. Trying to quit now → Go to QEQuit2
2. Have tried to quit in the past → Go to QEQuit2
3. Both → Go to QEQuit2
4. No, you have not tried to quit smoking e-cigarettes → Go to QHeatTob
  
6. NOT APPLICABLE/NEVER A REGULAR E-CIG USER
7. DON'T KNOW/NOT SURE → Go to QHeatTob
9. REFUSED → Go to QHeatTob

QEquit2 (ECGT\_QUIT\_NUM)

**9.11 In your whole life, how many times have you stopped using e-cigarettes for one day or longer because you were trying to quit using e-cigarettes for good?**

- \_\_ NUMBER OF TIMES (65 = 65 OR MORE)
88. NONE
  
  66. NOT APPLICABLE/NEVER A REGULAR E-CIG USER
  77. DON'T KNOW/NOT SURE
  99. REFUSED

## Section 10: Heated Tobacco Product Use

The next section is about “heated tobacco products.” These products heat tobacco sticks to produce an aerosol. They are different from e-cigarettes, which heat a liquid to produce an aerosol. Right now they are sold in some places with the brand name iQOS (eye-kose) or Marlboro Heatsticks, and might be referred to as “heat-not-burn tobacco products”.

QHEATTOB

**10.1 Before today, had you heard of “heated tobacco products?”**

1. YES → Go to QTryHeat
2. NO → Go to QOtTobrrr
  
7. DON'T KNOW/NOT SURE → Go to QOtTobrrr

9. REFUSED → Go to QOtTobrrr

#### QTRYHEAT

### 10.2 Have you ever tried a “heated tobacco product,” even just one time?

1. YES → Go to QHeatDay
2. NO → Go to QOtTobrrr
7. DON'T KNOW/NOT SURE → Go to QOtTobrrr
9. REFUSED → Go to QOtTobrrr

#### QHEATDAY

### 10.3 During the past 30 days, on how many days did you use a heated tobacco product?

- \_\_ NUMBER OF DAYS
0. NONE
  77. DON'T KNOW/NOT SURE
  99. REFUSED

## Section 11: Other Tobacco Product Use

#### QOtTobrrr

### 11.1 Have you ever used or tried any other tobacco product I haven't asked about, even just one time?

**Other kinds of tobacco products could be tobacco pipe, roll-your-own, hookah or waterpipe, bidis, kreteks, orbs or something else with nicotine and/or tobacco.**

1. YES → Go to QOtSperr
2. NO → Go to QQLine1
7. DON'T KNOW/NOT SURE → Go to QQLine1
9. REFUSED → Go to QQLine1

#### QOtSperr

### 11.2 What other types of tobacco product have you used?

01. Roll-your-own
02. Bidis
03. Kreteks
05. Hookah or waterpipe
06. Tobacco pipe
07. Orbs
04. Something else (specify - QOTobOth)
07. DON'T KNOW/NOT SURE
09. REFUSED

QOTob30rr

**11.3 Which of these other types of tobacco have you used in the past 30 days?**

01. Roll-your-own
02. Bidis
03. Kreteks
05. Hookah or waterpipe
06. Tobacco pipe
07. Orbs
04. Something else (Specify - QOTb300t)
88. NONE
77. DON'T KNOW/NOT SURE
99. REFUSED

**Section 12: Cessation for All Tobacco Products**

QQLine1 (LINE\_AWARE)

**12.1 A telephone Quitline is a free telephone-based service that connects people who smoke cigarettes or use other tobacco products with someone who can help them quit. Technology-mediated services, such as text messages and web-based options, might also be provided. Are you aware of any telephone Quitline services that are available to help people quit using tobacco?**

1. YES
2. NO
7. DON'T KNOW/NOT SURE
9. REFUSED

QQLine1a.

**12.2 Have you ever heard of the telephone quitline 1-800-quit-now?**

1. YES
2. NO
7. DON'T KNOW/NOT SURE
9. REFUSED

QQLineSp (Spanish version only)

**12.3 Have you ever heard of the telephone quit line 1-855-DEJELO YA?****(¿Ha oído alguna vez acerca de la línea de teléfono Quitline 1-855-DEJELO YA?)**

1. YES
2. NO
7. DON'T KNOW/NOT SURE
9. REFUSED

Q24 (QUIT\_NEXT\_6MON)



**12.4 Are you seriously considering stopping smoking or using other tobacco products within the next six months? (asked of current smokers)**

1. YES → Go to Q26
2. NO → Go to Q27
  
7. DON'T KNOW/NOT SURE → Go to Q27
9. REFUSED → Go to Q27

Q26 (QUIT\_NEXT\_30DAYS)

**12.5 Are you planning to stop smoking or using other tobacco products within the next 30 days?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q27 (QUIT\_LIKELY)

**12.6 If you decided to give up smoking or using other tobacco products altogether, how likely do you think you would be to succeed? Would you say very likely, somewhat likely, somewhat unlikely or very unlikely?**

1. Very likely
2. Somewhat likely
3. Somewhat unlikely
4. Very unlikely
  
7. DON'T KNOW/NOT SURE
9. REFUSED

If Q24 = 2, 7, 9 → Go to Q32

If Q24 = 1 → Go to QQLine2

QQLine2 (QLINE\_QUIT)

**12.7 When you try to quit smoking or using other tobacco products, do you plan to use a Quitline to help you quit?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q20r (QMEDS)

**12.8 When you quit smoking or using any other tobacco product did you use any of the following medications: a nicotine patch, nicotine gum, nicotine lozenges, nicotine nasal spray, a nicotine inhaler, or pills such as Wellbutrin, Zyban, bupropion, Chantix, or varenicline to help you quit?**  
(Asked of former smokers only)

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Pronunciations:

Wellbutrin = well-byoo-trin

Bupropion = byoo-pro-pee-on

## Section 13: Cessation Assistance by Dentists

Q32 (DEN\_SEEN)

**13.1 In the past 12 months, have you seen a dentist?**

1. YES → Go to OrCanSc
2. NO → Go to Q28r
  
7. DON'T KNOW/NOT SURE → Go to Q28r
9. REFUSED → Go to Q28r

OrCanSc (DEN\_CAN)

**13.2 In the past 12 months, did a dentist perform an oral cancer screening exam?**

Note: Oral cancer screening is an examination performed by a dentist or doctor to look for signs of cancer or precancerous conditions in your mouth. A dentist will feel for any lumps or irregular tissue changes in the neck, head, face, and oral cavity. When examining the mouth, a dentist should look for any sores or discolored tissue. This means a thorough look at parts of the mouth, including the lips, both outside and inside, the tongue from all sides and underneath, the insides of the cheeks, the roof of the mouth, and back of the throat.

If wearing dentures, they will have to be taken out so the dentist can check the tissue underneath them. The dentist may put one finger in the mouth under the tongue and a couple of fingers on the skin under the chin and move them around to feel the tissue between them.

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q33r (DEN\_ASK\_SMK)

**13.3 In the past 12 months, did a dentist ask if you smoke or use any tobacco product?**

1. YES

- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Q34r (DEN\_ADV\_QSMK)

**13.4 In the past 12 months, did a dentist advise you to quit smoking or using tobacco?**  
(Current smokers or those who have smoked in the past year)

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

## Section 14: Cessation Assistance by Health Care Providers

Q28r (DOC\_SEEN\_R)

**14.1 In the past 12 months, have you seen a doctor, nurse, or other health professional to get any kind of care for yourself? Do not include visits to a dentist.**

- 1. YES → Go to Q29
- 2. NO → Go to Q35 / Go to QChild on odd years
- 7. DON'T KNOW/NOT SURE → Go to Q35 / Go to QChild on odd years
- 9. REFUSED → Go to Q35 / Go to QChild on odd years

Q29 (DOC\_ASK\_SMK)

**14.2 During the past 12 months, did any doctor or other health professional ask if you smoke?**

- 1. YES → Go to Q30
- 2. NO → Go to Q35 / Go to QChild on odd years
- 7. DON'T KNOW/NOT SURE → Go to Q35 / Go to QChild on odd years
- 9. REFUSED → Go to Q35 / Go to QChild on odd years

Q30 (DOC\_ADV\_QSMK)

**14.3 During the past 12 months, did any doctor or other health professional advise you to not smoke?**

- 1. YES → Go to Q31ar
- 2. NO → Go to Q35 / Go to QChild on odd years
- 7. DON'T KNOW/NOT SURE → Go to Q35 / Go to QChild on odd years
- 9. REFUSED → Go to Q35 / Go to QChild on odd years

Q31ar (DRMED)

**14.4 In the past 12 months, when a doctor, or other health professional advised you to quit smoking, did they also do any of the following?**

**Prescribe or recommend a patch, nicotine gum, nasal spray, an inhaler or pills?**

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Q31b (DOC\_ADV\_SPDATE)

**14.5 Suggest that you set a specific date to stop smoking?**

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Q31e (DOC\_ADV\_CLASS)

**14.6 Suggest that you use a smoking cessation class, program, or counseling?**

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

QQLine3 (QLINE\_DOCTOR)

**14.7 Suggest that you use a Quitline, with telephone or web counseling services?**

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Child (Every Year)

**15.4 How many children less than 18 years of age live in your household?**

\_\_\_ Enter number of children (Verify >= 7)

- 88. NONE → [Go to QSdEcig1](#)
- 99. REFUSED → [Go to QSdEcig1](#)

Q49 (AF\_HMUCH\_BOTH\_OTH\_SMK)

**15.16 How much does it bother you when you are exposed to other people's cigarette smoke? Would you say it bothers you not at all, a little, moderately or very much?**

1. Not at all
2. A little
3. Moderately
4. Very much
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q49\_Ecig (AF\_HMUCH\_VAP)

**15.17 How much does it bother you when you are exposed to other people's e-cigarette aerosol or vapor? Would you say it bothers you not at all, a little, moderately or very much?**

1. Not at all
2. A little
3. Moderately
4. Very much
  
7. DON'T KNOW/NOT SURE
8. HAVE NEVER BEEN EXPOSED TO E-CIGARETTE AEROSOL OR VAPES
9. REFUSED

## Section 17: Cigarette Taxes

Q52r (TAXUSE\_HELP\_ADULT\_QUIT)

**Next, please tell me how strongly you feel about the following statement.**

**17.1 “State tobacco taxes should be increased to fund programs to help smokers quit and keep kids from starting” Do you strongly agree, agree, disagree or strongly disagree?**

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q54 (HMUCH\_ADDTAX\_TPP1)

**17.2 How much additional tax on a pack of cigarettes would you be willing to support if some or all of the money raised was used to fund tobacco prevention programs?**

1. Less than \$1.00 a pack → [Go to Q57\\_2](#)
2. \$1.00 a pack or more → [Go to Q56](#)
3. No tax increase → [Go to Q57\\_2](#)
  
7. DON'T KNOW/NOT SURE → [Go to Q57\\_2](#)

- 9. REFUSED → [Go to Q57\\_2](#)

Q56 (H MUCH\_ADDTAX\_TPP2)

**17.3 Do you think it should be:**

- 1. \$1.00 a pack
- 2. \$1.50 a pack
- 3. \$2.00 a pack or
- 4. \$3.00 a pack or more
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Q57\_2 (STMFUNUSE\_QLINE)

**17.4 In 1998 Nebraska was awarded its share of the nationwide tobacco settlement. Do you feel that a portion of this money should be used yearly to fund programs to help smokers quit and keep kids from starting?**

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

## Section 18: Smoke Free Policy

Q64a (SF\_OUTDOOR\_PARK)

**18.1 Next, please tell me about smoking in the following places in your community.**

**In outdoor parks do you think smoking should be allowed in all areas, some areas or not at all?**

- 1. All areas
- 2. Some areas
- 3. Not at all
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Q64d (SF\_OUTDOOR\_DINING)

**18.2 In outdoor dining areas, do you think smoking should be allowed in all areas, some areas or not at all?**

- 1. All areas,
- 2. Some areas
- 3. Not at all
  
- 7. DON'T KNOW/NOT SURE

9. REFUSED

Q67 (EMPLOYED)

**19.1 Are you currently: Employed for wages, Self-employed, Out of work for more than 1 year, Out of work for less than 1 year, a Homemaker, a Student, Retired, or Unable to work ?**

1. Employed for wages → Go to Q70b
2. Self-employed → Go to Q82b
3. Out of work for more than 1 year → Go to Q82b
4. Out of work for less than 1 year → Go to Q82b
5. A Homemaker → Go to Q82b
6. A Student → Go to Q82b
7. Retired → Go to Q82b
8. Unable to work → Go to Q82b
9. REFUSED → Go to Q82b

## Section 19: Secondhand Smoking at Work

Q70b (WK\_OUTDOOR\_WKAREA) (Rotating Core – Odd Years)

**19.2 At your workplace, is smoking in outdoor work areas always allowed, allowed only in some places or at some times or never allowed?**

1. Always allowed
2. Allowed only in some places or at some times
3. Never allowed
4. NO RESTRICTION
7. DON'T KNOW/NOT SURE
9. REFUSED

Q70d (WK\_ENFORCEMENT) (Rotating Core – Odd Years)

**19.3 Would you say that the smoking policy is not enforced at all, poorly enforced, somewhat enforced or strictly enforced?**

1. Not enforced at all
2. Poorly enforced
3. Somewhat enforced
4. Strictly enforced
5. NO POLICY
7. DON'T KNOW/NOT SURE
9. REFUSED

Q70e (WK\_OUTDOOR\_SHOULD) (Rotating Core – Odd Years)

**19.4 Do you think smoking in outdoor work areas should be always allowed, allowed only in some places or at some times, or never allowed?**

1. Always allowed
2. Allowed only in some places or at some times
3. Never allowed
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Section 20: Nebraska Smoke-free Law

Q82b (AF\_IMPORTANT\_LAW) (Rotating Core – Odd Years)

**20.1 How important is it to you to have a law prohibiting smoking inside most public buildings including restaurants and bars? Is it very important, somewhat important, not too important or not at all important?**

1. Very important
2. Somewhat important
3. Not too important
4. Not at all important
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q82b\_3 (Rotating Core – Odd Years)

**20.2 How important is it to you to have a law prohibiting the use of e-cigarettes, vapes, and other electronic smoking devices inside most public buildings including restaurants and bars? Is it very important, somewhat important, not too important or not at all important?**

1. Very important
2. Somewhat important
3. Not too important
4. Not at all important
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Section 21: Chronic Diseases

Q110\_1 (CD\_HEART) (Rotating Core – Odd Years)

**The following questions are about medical conditions.**

**21.1 Have you ever been told by a doctor or other health professional that you have heart disease?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED



Q110\_2 (CD\_CANCER) (Rotating Core – Odd Years)

**21.2 Have you ever been told by a doctor or other health professional that you have cancer, other than skin cancer?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q110\_3 (CD\_DIABETES) (Rotating Core – Odd Years)

**21.3 Have you ever been told by a doctor or other health professional that you have diabetes?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q110\_4 (CD\_GUMD) (Rotating Core – Odd Years)

**21.4 Have you ever been told by a dentist or other health professional that you have gum disease?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Section 22: Demographic Information

**Read if necessary: I will ask you some questions about yourself in the next section. We include these questions so we can compare health indicators by groups**

QD8r (PHONE)

**22.1 Not including cell phones or numbers used for computers, fax machines or security systems, do you have more than one telephone number in your household?**

1. YES → [Go to QD9](#)
2. NO → [Go to D\\_Cellr](#)
  
7. DON'T KNOW/NOT SURE → [Go to D\\_Cellr](#)
9. REFUSED → [Go to D\\_Cellr](#)

QD9 (NUMPHONE2)

**22.2 How many of these are residential numbers?**

1. ONE
2. TWO

- 3. THREE
- 4. FOUR
- 5. FIVE
- 6. SIX OR MORE
  
- 7. DON'T KNOW/NOT SURE
- 8. NONE
- 9. REFUSED

QD\_Cellr.

**22.3 How many cell phones do you have for personal use?**

Note: Include cell phones used for both business and personal use.

- \_\_\_ Enter number (1-5)
- 6 Six or more
- 7 DON'T KNOW/NOT SURE
- 8 NONE
- 9 REFUSED

QD1 (AGE)

**22.4 What is your age?**

- \_\_\_\_\_ Enter age in years
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

QD2 (HISPANIC)

**22.5 Are you Hispanic or Latino?**

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

QD3r

**22.6 Which one or more of the following would you say is your race? Would you say White, Black or African American, American Indian or Alaska Native, Asian or Pacific Islander?**

Note: Check all that apply

- 1. White
- 2. Black or African American
- 5. American Indian or Alaska Native
- 3. Asian

- 4. Pacific Islander
- 6. OTHER:(SPECIFY - QD3ot)
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

SexOr

**22.7 Do you consider yourself to be gay, lesbian, bisexual, and/or transgender?**

- 1. YES → Go to SOSpec
- 2. NO → Go to D5
- 7. DON'T KNOW/NOT SURE → Go to D5
- 9. REFUSED → Go to D5

SOSpec

**22.8 Thank you, please indicate all of the following which apply to you: a) Bisexual, b) Gay or [for a woman] Lesbian, c) Queer, d) Transgender or gender variant**

- 1. Bisexual
- 2. Gay or [for a woman] lesbian
- 3. Queer
- 4. Transgender or gender variant
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

QD5.

**22.9 Are you: Married, Divorced, Widowed, Separated, Never married, or a member of an unmarried couple?**

- 1. Married
- 2. Divorced
- 3. Widowed
- 4. Separated
- 5. Never married
- 6. A member of an unmarried couple
- 9. REFUSED

QD6r.

**22.10 What is the highest grade or year of school you completed or the highest degree you received?**

{Read only if necessary}

- 01. LESS THAN HIGH SCHOOL
- 02. HIGH SCHOOL GRADUATE

- 03. GED
- 04. SOME COLLEGE (NO DEGREE)
- 05. ASSOCIATE'S DEGREE
- 06. BACHELOR'S DEGREE
- 07. GRADUATE OR PROFESSIONAL DEGREE
  
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

QD7r.

**22.11 Is your annual household income from all sources:**

- (QD7rj) Less than \$200,000?
- (QD7ri) Less than \$150,000?
- (QD7rh) Less than \$100,000?
- (QD7rg) Less than \$75,000?
- (QD7rf) Less than \$50,000?
- (QD7re) Less than \$35,000?
- (QD7rd) Less than \$25,000?
- (QD7rc) Less than \$20,000?
- (QD7rb) Less than \$15,000?
- (QD7ra) Less than \$10,000?

- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

QD7i.

**22.12 INTERVIEWER: Annual household income is \_\_\_\_\_**

Is this correct?

- 1. NO, re-ask question
- 2. Yes, correct as is

QD\_rent.

**22.13 Do you own or rent your home?**

- 1. Own
- 2. Rent
- 3. OTHER ARRANGEMENT
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

QD\_hTypeR.

**22.14 In what type of living space do you currently reside?**

Probe: A house, an apartment, or something else?"

IF HOUSE: A one-family house detached from any other house or a one-family house attached to one or more houses?

IF APARTMENT: How many apartments or living units?

- 1. A one-family house detached from any other house.
- 2. A one-family house attached to one or more houses, such as a townhouse or a duplex.
- 3. A small apartment building with 2-9 apartments.
- 4. An apartment building with 10 or more apartments
- 5. A mobile home, boat, RV, or van
- 6. Some other type of living space
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

QD\_Cnty.

**22.15 In what county do you currently live?**

Enter the county name: \_\_\_\_\_

R = REFUSED

(CntyFIPS – County FIPS/ANSI Code \_\_\_\_ )

QD\_zip.

**22.16 What is the ZIP Code where you live?**

____	____	____	____	____	Zip Code
7	7	7	7	7	DON'T KNOW/NOT SURE
9	9	9	9	9	REFUSED

QD\_Vetr.

**22.17 Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit?**

INTERVIEWER NOTE: Active duty DOES NOT include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

QMhCon1

**22.18 Have you ever been told by a doctor or other health professional that you have any mental health conditions, such as an anxiety disorder, depression disorder, bipolar disorder, schizophrenia?**

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

QMhCon2

**22.19 Which condition? Select all that apply**

- 1. Anxiety Disorder
- 2. Depression Disorder
- 3. Bipolar Disorder
- 4. Schizophrenia and Schizoaffective Disorders
- 5. Other (go to QMH\_oth)
  
- 7. Don't know/not sure
- 9. Refused

QDrMore

**22.20 In the last year, have you ever drunk or used drugs more than you meant to?**

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

QCutDr

**22.21 Have you felt you wanted or needed to cut down on your drinking or drug use in the last year?**

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

## Section 23: Knowledge of Tobacco-Related Health Impacts

Q84 (Rotating Core – Odd Years)

**23.1 Please tell me how strongly you feel about the following statement.**

**“If a person has smoked a pack of cigarettes a day for more than 20 years, there are immediate benefits if they stop smoking.” Do you strongly agree, agree, disagree or strongly disagree?**

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly disagree
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q84\_1. (Rotating Core – Odd Years)

**23.2 I am going to read you a list of diseases that may or may not be caused by smoking cigarettes. Based on what you know or believe, does smoking cause...**

**Stroke in smokers?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q84\_2. (Rotating Core – Odd Years)

**23.3 Heart disease in smokers?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q84\_4. (Rotating Core – Odd Years)

**23.4 Gum disease in smokers?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q85. (Rotating Core – Odd Years)

**23.5 Now I am going to ask about smoke from other people's cigarettes. Do you think that breathing smoke from other people's cigarettes is very harmful to one's health, somewhat harmful to one's health, not very harmful to one's health or not harmful at all to one's health?**

1. Very harmful to one's health
2. Somewhat harmful to one's health
3. Not very harmful to one's health
4. Not harmful at all to one's health
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q89. (Rotating Core – Odd Years)

**23.6 Would you say that breathing smoke from other people's cigarettes causes respiratory problems in children?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q90. (Rotating Core – Odd Years)

**23.7 Would you say that breathing smoke from other people's cigarettes causes sudden infant death syndrome?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q90\_1 (Rotating Core – Odd Years)

**23.8 Do you think using e-cigarettes is very harmful to one's health, somewhat harmful to one's health, not at all harmful to one's health?**

1. Very harmful to one's health
2. Somewhat harmful to one's health
3. Not at all harmful to one's health
  
7. DON'T KNOW/NOT SURE
9. REFUSED



Q90\_2 (Rotating Core – Odd Years)

**23.9 Compared to smoking cigarettes, how harmful do you think using e-cigarettes are to a person's health? Would you say much less harmful than cigarettes, somewhat less harmful, about the same, somewhat more harmful, or much more harmful than cigarettes?**

1. Much less harmful than cigarettes
2. Somewhat less harmful
3. About the same
4. Somewhat more harmful
5. Much more harmful than cigarettes
7. DON'T KNOW/NOT SURE
9. REFUSED

## Section 24: Media Campaign

Q91a.

**24.1 In the past month, do you recall seeing or hearing any advertisements about the dangers of tobacco use?**

1. YES → Go to Q92
2. NO → Go to Q95a
7. DON'T KNOW/NOT SURE → Go to Q95a
9. REFUSED → Go to Q95a

Q92.

**24.2 Where did you read, see or hear this advertisement?**

Select all that apply  
Read only if necessary

11. TELEVISION
12. RADIO
13. OUTDOOR BILLBOARD
14. NEWSPAPER
15. MAGAZINE
16. INTERNET
17. BUS SIGNS
18. MOVIE SCREENS
19. OTHER (SPECIFY - Q92\_oth)
77. DON'T KNOW/NOT SURE
99. REFUSED

Q93a.

**24.3 What was the main topic of the advertisement?**

Read only if necessary

- 01. QUIT SMOKING OR CHEWING
- 02. SMOKING CAUSES DISEASES
- 03. DON'T SMOKE IN CARS
- 04. SECONDHAND SMOKE AWARENESS
- 05. DON'T SMOKE AROUND CHILDREN
- 07. DANGERS OF SECONDHAND AEROSOL FROM E-CIGARETTES
- 08. PARENTS NEED TO BE AWARE OF NEW PRODUCTS
- 06. OTHER (SPECIFY - Q93a\_oth)
  
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

Q94a.

**24.4 Have you ever discussed any of these ads with anyone else?**

- 1. YES → [Go to Q94a\\_1](#)
- 2. NO → [Go to Q95a](#)
  
- 7. DON'T KNOW/NOT SURE → [Go to Q95a](#)
- 9. REFUSED → [Go to Q95a](#)

Q94a\_1.

**24.5 Who have you discussed these ads with?**

Select all that apply

Read only if necessary

- 01. CHILDREN UNDER 18
- 02. CHILDREN AGED 18 OR OLDER
- 03. SIBLINGS
- 04. PARENTS
- 05. FRIENDS
- 08. SPOUSE OR SIGNIFICANT OTHER
- 06. OTHER (SPECIFY - Q94a1oth)
  
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

Q95a.

**24.6 Please tell me how strongly you feel about the following statement.**

**“Tobacco advertising is acceptable in grocery and convenience stores.” Do you strongly agree, agree, disagree or strongly disagree?**

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly disagree
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q100.

**24.7 When you are on the Internet, how often do you see ads for tobacco products? Would you say most of the time, some of the time, hardly ever, or never?**

1. I DON'T USE THE INTERNET
2. Most of the time
3. Some of the time
4. Hardly ever
5. Never
6. DON'T OWN A COMPUTER
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Section 25: Tobacco Purchase and Related Policy

Q103r.

**25.1 Next please tell me how strongly you feel about the following statements.**

**“Stores should be penalized for the sale of tobacco products to persons under the minimum legal sales age .” Do you strongly agree, agree, disagree or strongly disagree?**

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly disagree
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q105\_1.

**25.2 Next please tell me how strongly you feel about the following statements.**

**“The sale of tobacco products is acceptable in pharmacies.” Do you strongly agree, agree, disagree or strongly disagree?**

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly disagree
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q106.

**25.3 “Tobacco use by adults should not be allowed on school grounds or at any school events.” Do you strongly agree, agree, disagree or strongly disagree?**

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly disagree
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q108.

**25.4 Do you think the laws banning the sale of tobacco products to youth and young adults under the legal age to purchase have not been adequately enforced, have been adequately enforced, or excessively enforced?**

1. Not adequately enforced
2. Adequately enforced
3. Excessively enforced
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q109\_1.

**25.5 Overall, do you think that tobacco use is a serious problem in your community?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED



Q109\_2.

**25.6 Overall, do you think that tobacco use by teenagers is a serious problem in your community?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Appendix B: Past Nebraska Adult Tobacco Survey Questions\*

**2021 NEBRASKA ATS SURVEY QUESTIONNAIRE**

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Q45r (AF\_INHALE)

**15.13 “Inhaling smoke from a cigarette harms the health of babies and children.” Would you say you strongly agree, agree, disagree or strongly disagree?**

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly disagree
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q64c (SF\_OUTDOOR\_PUBLICE)

**18.3 At outdoor public events such as county fairs and outdoor concerts, do you think smoking should be allowed in all areas, some areas or not at all?**

1. All areas,
2. Some areas
3. Not at all
  
7. DON'T KNOW/NOT SURE
9. REFUSED

Q84\_3.

**23.4 Blindness in smokers?**

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

---

\*Appendix B provides the questions from the 2021 and 2022 ATS that appear in this report. It does not provide the 2021 and 2022 ATS questionnaires in full and should be used for reference only.

## 2022 NEBRASKA ATS SURVEY QUESTIONNAIRE

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Q35 (NUM\_HHOLD\_TUSERS) (Rotating Core – Even Years)

**15.1 Not including yourself, how many of the people who live in your household smoke cigarettes, cigars or pipes? (Interviewer: Children 5 and older in household are included.)**

\_\_\_\_\_ # of persons in household who smoke (0 to 12)

- 0. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

Q36r (NUM\_DAYS\_SMK\_HOME\_R) (Rotating Core – Even Years)

**15.2 During the past seven days how many days did anyone, including yourself, smoke cigarettes, cigars or pipes anywhere inside your home?**

\_\_\_\_\_ # of days (1 to 7)

- 0. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

Q37 (SFRULE\_HOME) (Rotating Core – Even Years)

**15.3 Which statement best describes the rules about smoking inside your home? Do not include decks, garages or porches. Would you say smoking is not allowed anywhere inside your home, smoking is allowed in some places or at some times, or smoking is allowed anywhere inside the home?**

- 1. Smoking is not allowed anywhere inside your home
- 2. Smoking is allowed in some places or at some times
- 3. Smoking is allowed anywhere inside the home
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Child (Every Year)

**15.4 How many children less than 18 years of age live in your household?**

\_\_\_\_\_ Enter number of children (Verify >= 7)

- 88. NONE → Go to QSdEcig1
- 99. REFUSED → Go to QSdEcig1

Q43 (AF\_SMK\_INFRONT\_CHILD) (Rotating Core – Even Years)

Now I am going to read several statements. Please tell me how strongly you feel about each statement.

**15.13 “It is acceptable for parents to smoke in front of children.” Would you say you strongly agree, agree, disagree or strongly disagree?**

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly disagree
7. DON’T KNOW/NOT SURE
9. REFUSED

QSdEcig1 (DAYS\_EXP\_2VAP) (Rotating Core – Even Years)

**15.5 During the past seven days, how many days were you exposed to vapors from other people using e-cigarettes or other electronic vaping products in indoor places?**

\_\_\_\_\_ # of days (1 to 7)

0. NONE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

QSdEcig2 (PLC\_EXP\_OTH) (Rotating Core – Even Years)

**15.6 Where did it happen?**

Select all that apply.

Prompt “anywhere else?” until not productive.

01. IN YOUR HOME
02. IN YOUR FAMILY CAR
03. IN OTHER PEOPLE’S HOME
04. IN OTHER PEOPLE’S CAR
14. IN A RESTAURANT OR BAR
05. IN A PUBLIC TRANSPORTATION (BUS, TRAIN, ETC.)
06. IN THE OFFICE
07. IN THE STAIRWELL IN A BUILDING
08. INSIDE AN ELEVATOR
09. IN THE LOBBY, HALLWAYS AND OTHER COMMON AREAS IN A BUILDING
10. IN A SHOPPING MALL
11. IN AN INDOOR SPORTING PLACE (INDOOR STADIUM, POOL, GYM, ETC.)
12. AT THE ENTRANCE OF A BUILDING
13. OTHER : SPECIFY
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED.



QSdEc2ot

Other (Specify) \_\_\_\_\_

Q46 (AF\_INHALE\_ANY\_TOB\_HARM) (Rotating Core – Even Years)

**15.14 “Inhaling smoke from any tobacco product harms the health of adults and children.” (Would you say you strongly agree, agree, disagree or strongly disagree?)**

- 1. Strongly Agree
- 2. Agree
- 3. Disagree
- 4. Strongly disagree
  
- 7. DON’T KNOW/NOT SURE
- 9. REFUSED

Q47 (AF\_PAR\_SMK\_CHLD\_SMK) (Rotating Core – Even Years)

**15.15 “Children are more likely to smoke if their parents are smokers.” (Would you say you strongly agree, agree, disagree or strongly disagree?)**

- 1. Strongly Agree
- 2. Agree
- 3. Disagree
- 4. Strongly disagree
  
- 7. DON’T KNOW/NOT SURE
- 9. REFUSED

Q50 (TFN\_HEARD) (Rotating Core – Even Years)

**16.1 Have you heard of the Tobacco Free Nebraska Program?**

- 1. YES
- 2. NO
  
- 7. DON’T KNOW/NOT SURE
- 9. REFUSED

Q66rr (SF\_HOTEL) (Rotating Core – Even Years)

**18.3 In hotel or motel rooms, do you think smoking should be allowed in all rooms, some rooms, or none of the rooms.**

- 1. All rooms
- 2. Some rooms
- 3. None of the rooms



7. DON'T KNOW/NOT SURE.
9. REFUSED

### Appendix C: Estimate of Sampling Error

Table 1 presents margins of sampling error for some of the most likely sample sizes *not* taking the design effect from the weighting into account. Exact margins of error for alternative specifications of sample size and reported percentages can be easily computed by using the following formula for the 95% confidence level:

$$\text{Margin of error} = 1.96 * \text{square root } (p(1-p)/n)$$

p = the expected proportion selecting the answer  
n = number of responses

**Table 1. Approximate Margins of Error of Percentages by Selected Sample Size NOT Accounting for Design Effect**

Reported Percentage	Full Sample* n=3185	75% Sample n=2388	50% Sample n=1592	33.3% Sample n=1061	25% Sample n=796	10% Sample n=318
50	1.74%	2.01%	2.46%	3.01%	3.47%	5.50%
40 or 60	1.70%	1.96%	2.41%	2.95%	3.40%	5.38%
30 or 70	1.59%	1.84%	2.25%	2.76%	3.18%	5.04%
20 or 80	1.39%	1.60%	1.96%	2.41%	2.78%	4.40%
10 or 90	1.04%	1.20%	1.47%	1.81%	2.08%	3.30%
5 or 95	0.76%	0.87%	1.07%	1.31%	1.51%	2.40%

\* 95% confidence interval states that in 95 out of 100 samples drawn using the same sample size and design, the interval will contain the population value

When accounting a design effect, the adjusted sampling error will be increased as is shown when comparing Table 1 to Table 2 where the sampling design effect is incorporated:

$$\text{Margin of error} = \text{square root } (deff) * 1.96 * \text{square root } (p(1-p)/n)$$

deff = design effects  
p = the expected proportion selecting the answer  
n = number of responses

**Table 2. Approximate Margins of Error of Percentages by Selected Sample Size Accounting for the Design Effect of Sampling**

Reported Percentage	Full Sample* n=3185	75% Sample n=2388	50% Sample n=1592	33.3% Sample n=1061	25% Sample n=796	10% Sample n=318
50	2.10%	2.43%	2.97%	3.64%	4.21%	6.66%
40 or 60	2.06%	2.38%	2.91%	3.57%	4.12%	6.52%
30 or 70	1.93%	2.23%	2.73%	3.34%	3.86%	6.10%
20 or 80	1.68%	1.94%	2.38%	2.92%	3.37%	5.32%
10 or 90	1.26%	1.46%	1.78%	2.19%	2.52%	3.99%
5 or 95	0.92%	1.06%	1.30%	1.59%	1.83%	2.90%

\* 95% confidence interval states that in 95 out of 100 samples drawn using the same sample size and design, the interval will contain the population value

The same is true when accounting for the design effect due to weighting, as is shown when comparing Table 1 to Table 3.

**Table 3. Approximate Margins of Error of Percentages by Selected Sample Size Accounting for the Design Effect of Weighting**

Reported Percentage	Full Sample* n=3185	75% Sample n=2388	50% Sample n=1592	33.3% Sample n=1061	25% Sample n=796	10% Sample n=318
50	3.08%	3.56%	4.36%	5.34%	6.17%	9.76%
40 or 60	3.02%	3.49%	4.27%	5.23%	6.04%	9.56%
30 or 70	2.83%	3.26%	4.00%	4.90%	5.65%	8.94%
20 or 80	2.47%	2.85%	3.49%	4.27%	4.93%	7.81%
10 or 90	1.85%	2.14%	2.62%	3.20%	3.70%	5.85%
5 or 95	1.34%	1.55%	1.90%	2.33%	2.69%	4.25%

\* 95% confidence interval states that in 95 out of 100 samples drawn using the same sample size and design, the interval will contain the population value

## Appendix D: AAPOR Transparency Initiative Immediate Disclosure Items

1. Describe the data collection strategies employed (e.g. surveys, focus groups, content analyses).  
**Study Design and Method and Data Collection and Process**
2. Name the sponsor of the research and the party(ies) who conducted it. If the original source of funding is different than the sponsor, this source will also be disclosed.  
**Introduction and Study Design and Method**
3. The exact wording and presentation of any measurement tool from which results are reported as well as any preceding contextual information that might reasonably be expected to influence responses to the reported results and instructions to respondents or interviewers should be included.  
**Appendices A and B**
4. A definition of the population under study, including location, age, other social or demographic characteristics (e.g., persons who access the internet), time (e.g., immigrants entering the US between 2015 and 2019).  
**Study Design and Method**
5. Dates of data collection.  
**Data Collection and Process**
6. Explicitly state whether the sample comes from a frame selected using a probability-based methodology (meaning selecting potential participants with a known non-zero probability from a known frame) or if the sample was selected using non-probability methods (potential participants from opt-in, volunteer, or other sources).  
**Study Design and Method**
7. Probability-based sample specification should include a description of the sampling frame(s), list(s), or method(s). If a frame, list, or panel is used, the description should include the name of the supplier of the sample or list and nature of the list (e.g., registered voters in the state of Texas in 2018, pre-recruited panel or pool). If a frame, list, or panel is used, the description should include the coverage of the population, including describing any segment of the target population that is not covered by the design.  
**Study Design and Method**
8. Provide a clear indication of the method(s) by which participants were contacted, selected, recruited, intercepted, or otherwise contacted or encountered, along with any eligibility requirements and/or oversampling. Describe any use of quotas.  
**Study Design and Method and Data Collection and Process**
9. Provide details of any strategies used to help gain cooperation (e.g., advance contact, letters and scripts, compensation or incentives, refusal conversion contacts) whether for participation in a survey, group, panel, or for participation in a particular research project. Describe any compensation/incentives provided to research subjects and the method of delivery (debit card, gift card, cash).  
**Study Design and Method, Data Collection and Process, and Appendices A and B**
10. A description of all mode(s) used to contact participants or collect data or information (e.g., CATI, CAPI, ACASI, IVR, mail survey, web survey) and the language(s) offered or included.  
**Data Collection and Process**
11. Sample sizes (by sampling frame if more than one was used) and (if applicable) a discussion of the precision of the results. Provide sample sizes for each mode of data collection (for surveys include sample sizes for each frame, list, or panel used). For probability samples, report estimates of sampling error (often described as “the margin of error”), and discuss whether or not the reported sampling error or statistical analyses have been

adjusted for the design effect due to weighting, clustering, or other factors. Reports of non-probability sample surveys will only provide measures of precision if they are defined and accompanied by a detailed description of how the underlying model was specified, its assumptions validated and the measure(s) calculated.

**Data Collection and Process, Design Effects, and Appendix C**

12. A description of how the weights were calculated, including the variables used and the sources of weighting parameters, if weighted estimates are reported.

**Data Cleaning and Weighting**

13. Describe validity checks, where applicable, including but not limited to whether the researcher added attention checks, logic checks, or excluded respondents who straight-lined or completed the survey under a certain time constraint, any screening of content for evidence that it originated from bots or fabricated profiles, re-contacts to confirm that the interview occurred or to verify respondent's identity or both, and measures to prevent respondents from completing the survey more than once. Any data imputation or other data exclusions or replacement will also be discussed.

**Data Cleaning and Weighting**

14. Contact for obtaining more information about the study.

**Questions**

15. A general statement acknowledging the limitations of the design and data collection.

**Limitations**