



**Tobacco Attitudes and Media Survey  
2009**

**prepared for**

**Delaware Department of Health and Social Services  
Division of Public Health**

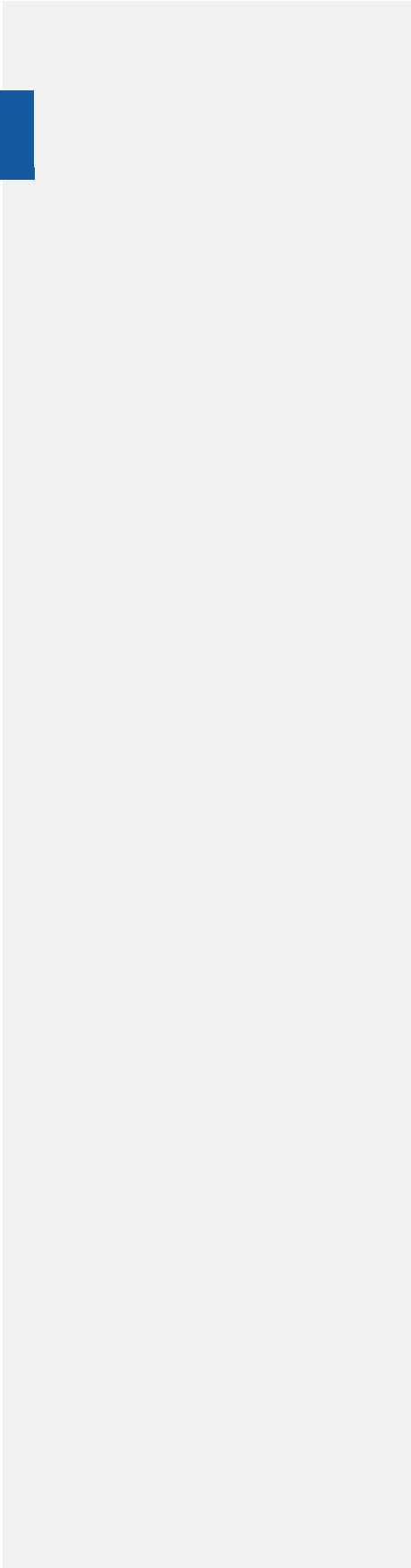
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## Introduction

The Delaware Division of Public Health, together with its partners in government, education, the not-for-profit community, health advocates and healthcare industry, has developed and implemented a comprehensive Tobacco Prevention and Control Program. The program includes school and community-based prevention initiatives; a tobacco prevention social marketing campaign designed to educate Delawareans about tobacco; and cessation services that include a telephone Quitline and website which provide information and assistance to current smokers in their efforts to quit smoking.

The purpose of the Adult Tobacco Survey is to provide independent evaluation data that are used to assess Delaware's progress in attaining the goals of *A Plan for a Tobacco-free Delaware*. The 2009 study replicates, in large part, annual studies conducted in 2002 through 2008.

The survey was administered by the Center for Applied Demography & Survey Research (CADSR) located at the University of Delaware and had three primary objectives. First, the survey measured the prevalence of cigarette smoking and other forms of tobacco use within the state, and information about tobacco users' efforts and methods utilized to quit. Second, data were gathered about exposure to other people's tobacco smoke, and respondents' opinions about the impact of the Clean Indoor Air Act restricting smoking in indoor public places. Finally, questions were asked to determine the reach of several media campaigns and assess public attitudes toward tobacco use.

This report has four major sections following this brief introduction. In the first section, the sampling methodology and demographic characteristics of the sample are discussed. The second section explores the current status of tobacco use in Delaware. The following section provides information about exposure to second-hand smoke. Finally, the fourth section focuses on data gathered about the public's awareness of current media campaigns and reaction to tobacco advertisements. The report concludes with some general observations garnered from the results of the 2009 survey.

## Methodology

The survey was conducted in the spring of 2009 with the majority of the data collected during the month of June. A total of 1,255 adult Delawareans living in households with land line telephones were interviewed. The telephone numbers were generated randomly to insure that both listed and unlisted numbers had an equal chance of being selected to participate. This is commonly referred to as random digit dialing (RDD) and includes both published and non-published telephone numbers. Up to 15 attempts were made to contact a potential respondent at each telephone number. Once it was ascertained that the number connected to a private residence, one adult was selected randomly from among all adults in the household and that person was asked to participate. Adults living in institutional settings or group home environments such as prisons, college dormitories and nursing homes were excluded from the study.

Screening interviews were conducted among 1,943 households throughout the state. Approximately 2.9% of households screened did not qualify (i.e., had a mental/physical illness or the telephone number reached a line dedicated for the use of a child under the age of 18). Among the remaining 1,886 households qualified to complete the survey, almost 65% of selected respondents were willing to participate and complete the survey as shown in Table 1-1.

**Table 1-1 Sample Statistics for the 2009 State of Delaware Tobacco Attitudes and Media Survey**

<b>Sample Records</b>	<b>Number</b>	<b>Percent</b>
Useable records	6,128	46.6
Unusable records (disconnected/business/fax/cell phone)	7,022	53.4
<b>Total sample</b>	<b>13,150</b>	<b>100.0</b>
<b>Households Screened</b>		
Completed Interviews	1,255	64.5
Qualified Households – Interview not completed	631	32.4
Non-Qualified Households (Mental or Physical Illness/Teen line)	57	2.9
<b>Total number of Households Screened</b>	<b>1,943</b>	<b>31.7</b>
<b>Households not Screened</b>		
Refusals	1,084	25.9
No Contact (no answer/answering machine/busy signal/call back)	3,082	73.6
Language Barrier	19	< 1%
<b>Total Number of Households not Screened</b>	<b>4,185</b>	<b>68.3</b>
<b>Total Number of Useable Records</b>	<b>6,128</b>	<b>100.0</b>



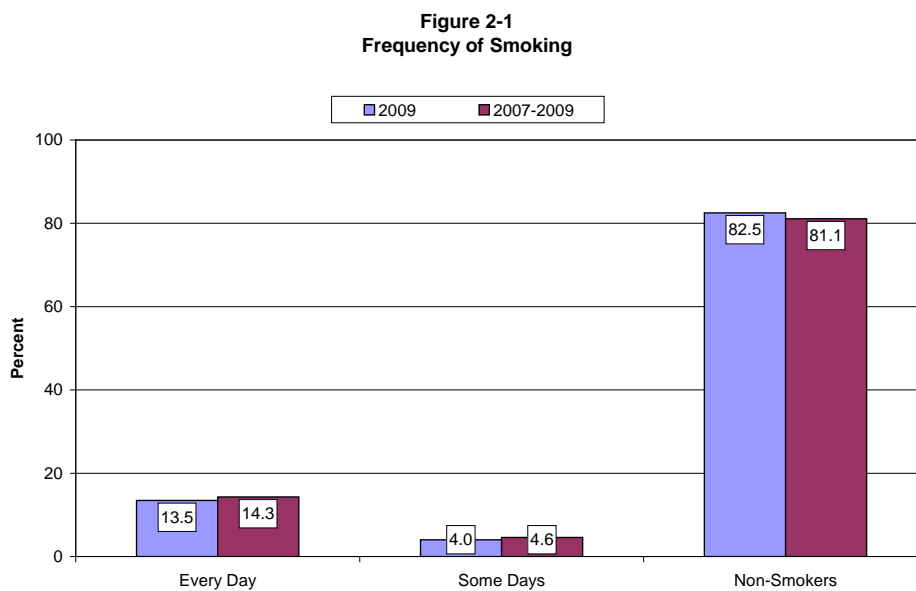
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The sample was a simple random sample of each of Delaware's three counties. Overall, the unweighted distribution was similar to that of the households reported in the 2008 American Community Survey (ACS) with a few exceptions. Female respondents comprised 63% of the sample, whereas the estimated number of females in Delaware is about 52.3%. Respondents who were 65 years of age or older accounted for nearly 30.4% of the sample in contrast to 13.8% reported by the ACS. Conversely, respondents in the 18-24 year-old sub-population were under-represented in the sample, with 18-24 year olds comprising making up about 4.9% compared to the 9.9% reported by the ACS. To account for these differences, the data were weighted to reflect the number of adults by age, gender, and county within the state's estimated population. The analyses presented in this document were conducted utilizing the weighted data so that the sample data more accurately correspond to the state population. Sample demographics are included in Appendix B.

Given the sample size of 1,255 and assuming that only sampling error is at issue, the confidence interval around the estimates for the full sample using a yes-no response will average +/-2.76% at the 95% confidence level. Since the sub-sample of smokers is substantially smaller, the confidence intervals will average +/-6.9%. For county level analysis, the confidence interval for a yes-no response at the 95% confidence level for Kent County is +/- 4.72%. Comparable intervals for each New Castle and Sussex counties are +/- 4.82%.

## Prevalence of Tobacco Use in Delaware

Respondents were asked how often they currently smoked. This question separates people into one of three groups: (1) everyday smokers, (2) some day smokers, and (3) current non-smokers. The results are summarized in Figure 2-1.

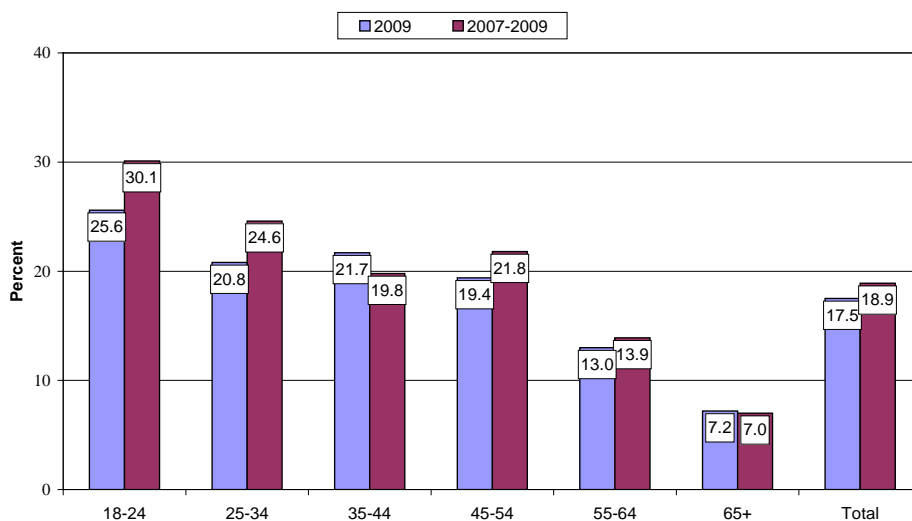


Source: Center for Applied Demography & Survey Research, University of Delaware

About 46% of all adult Delawareans have smoked at some point in their lives but only about 17.5% of all adult Delawareans currently smoke with 13.5% smoking cigarettes daily and 4.0% smoking only some days. “Some day” smokers, in general, smoke on average three days per week. The 2009 data show a slight decrease in the proportion of adult Delawareans who smoke compared with the three-year average (2007-2009)<sup>1</sup>. However, this change is not significantly significant.

Understanding which segment(s) of the population have the greatest incidence of smoking is important for purposes of tobacco control legislation and targeting media campaigns. Of particular interest is age. Figure 2-2 below shows that smoking is greatest among young adults (i.e., 18-24 years old) and steadily declines with age. The 2009 data reflect a slightly lower incidence rate of smoking amongst all age groups when compared to the three year average with the exception being for those persons 35-44 and 65 years of age. However, none of these differences is statistically significant.

**Figure 2-2  
Percentage Smoking by Age Group**

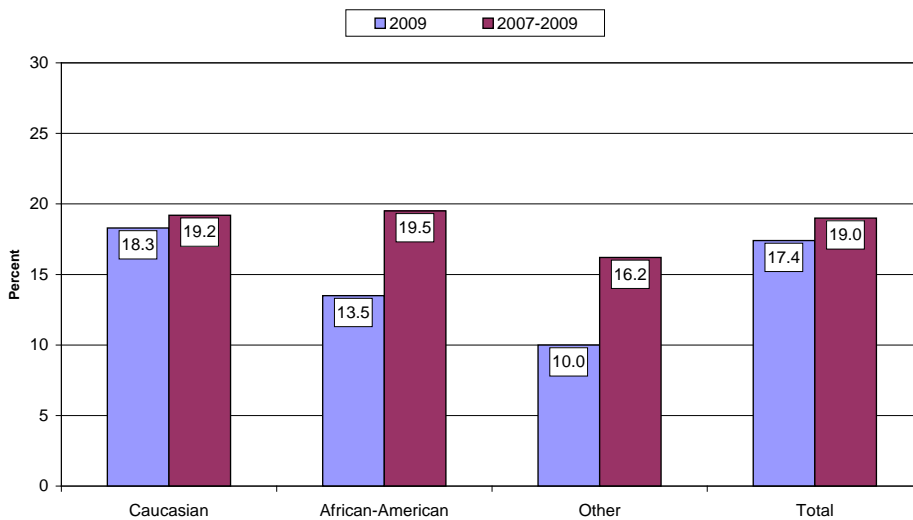


Source: Center for Applied Demography & Survey Research, University of Delaware

Figure 2-3 and Figure 2-4 below, examine the proportion of the population that smoke by race and gender. The slight decrease in the percentage of the population smoking in general also transcends all racial groups as well with the largest reflected decrease among Delaware’s adult African American population; the 2009 survey reflects that about 13.5% of adult African Americans in Delaware are current smokers wherein the 2007-2009 average shows an incidence rate of roughly 20%.

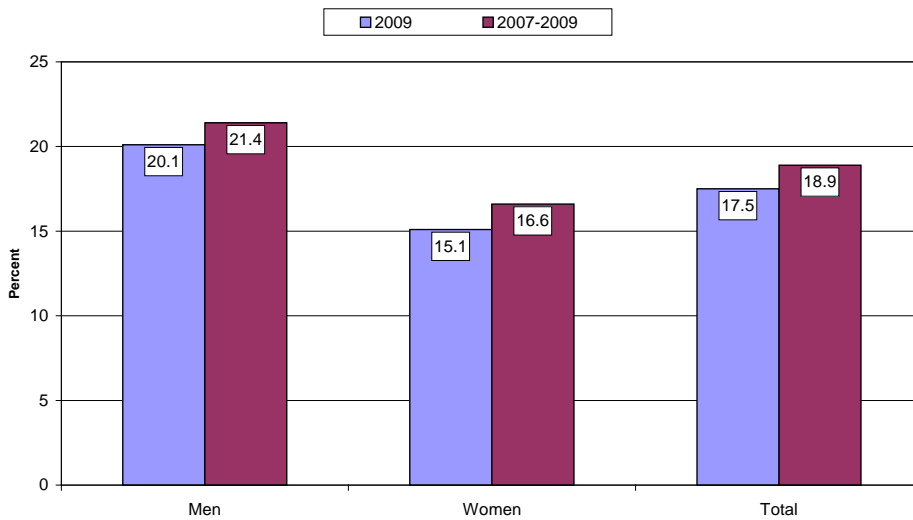
<sup>1</sup> Data were aggregated from the last three Adult Tobacco Surveys (2007, 2008, and 2009) to produce a very stable estimate to compare against the current year. These estimates are labeled 2007-2009 in the tables.

**Figure 2-3**  
**Percentage Smoking by Race**



Source: Center for Applied Demography & Survey Research, University of Delaware

**Figure 2-4**  
**Percentage Smoking by Gender**



Source: Center for Applied & Survey Research, University of Delaware

Consistent with the overall trend, there is a slight decrease in the smoking prevalence among both men and women. However, men are still more likely to smoke than women. More than 20% of adult men reported smoking cigarettes in comparison with about 15% of adult women as shown in Figure 2-4 above. In previous years, this difference was much greater and, in fact, the gap between male smokers and female smokers has decreased from 6.8% (2006-2008 average) to 4.8% (2007-2009 average).

The 2009 data indicates a decrease in smoking across the board regardless of age, race or gender. Variations from year to year can be attributed to the differences in characteristics of any given year's sample. However, we can be fairly confident that the percentage of the population smoking in Delaware is indeed declining<sup>2</sup>.

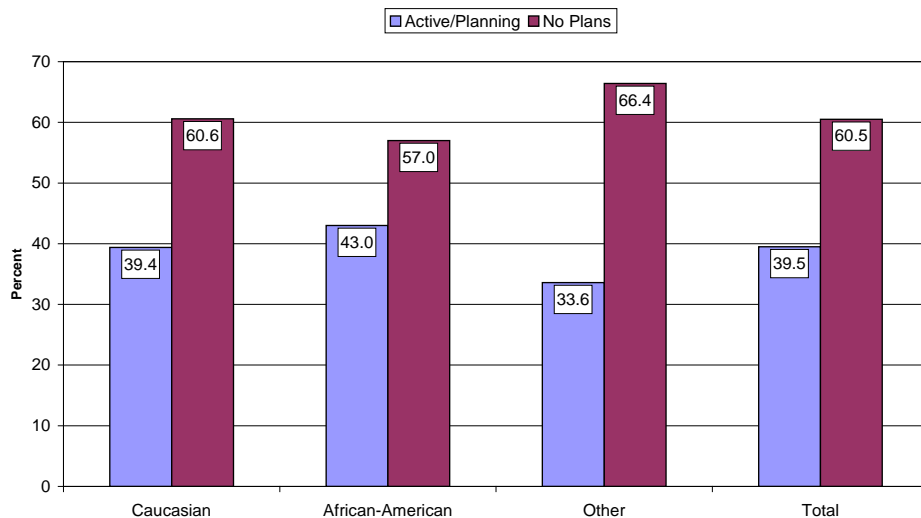
As shown in Figure 2-5 below, about 42% of smokers are trying to quit or planning to quit smoking or other tobacco use within the next 30 days. However, "every-day" smokers (39%) are considerably less likely to report that they are trying to quit or are planning to quit than some-day smokers (~51%).

Figure 2-6 shows the distribution of current smokers who are actively trying to quite or plan on quitting in the next 30 days by race. Wherein roughly 40% of current smokers report current efforts/plans to quit smoking, African Americans appear to be slightly more inclined to discontinue smoking than other racial groups with about 43% of African American smokers actively trying or planning on quitting with the next 30 days compared to around 39% of Whites and only 34% of other racial groups.

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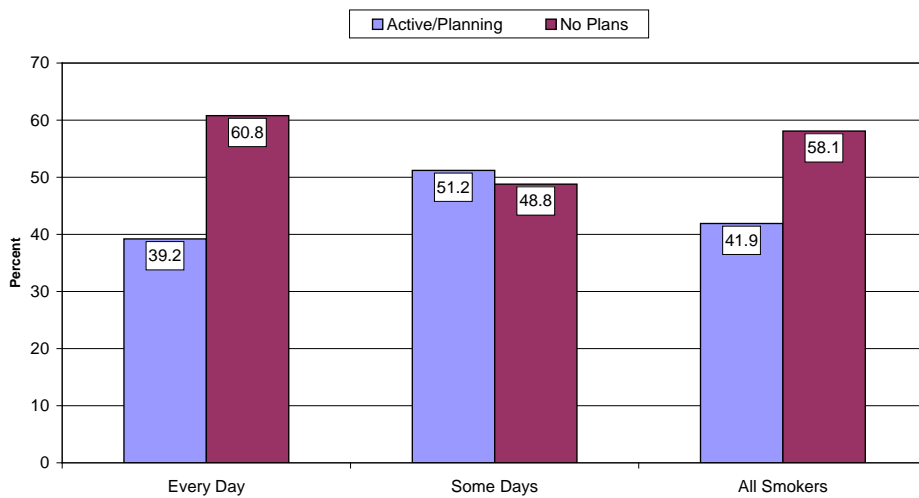
<sup>2</sup> One factor which is not accounted for in this study is the relationship between cell-phone-only households, which are not included in the survey, and tobacco use. Recent studies indicate a higher prevalence of smoking and other tobacco use among cell-phone only households, which could influence the findings.

**Figure 2-5**  
**Actively Trying or Planning to Quit Smoking in the Next 30 Days by Race**



Source: Center for Applied Demography & Survey Research, University of Delaware

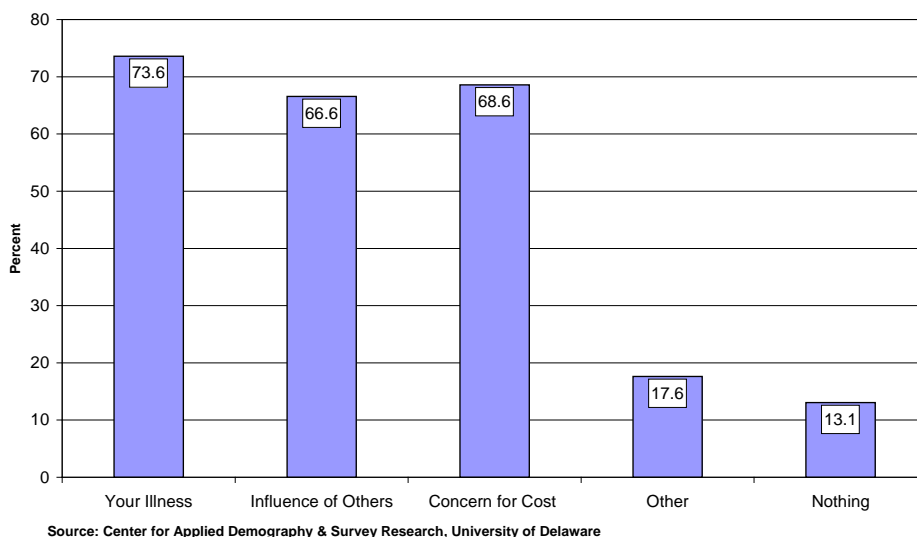
**Figure 2-6**  
**Actively Trying or Planning to Quit Tobacco Use in the Next 30 Days by Frequency of Smoking**



Source: Center for Applied Demography & Survey Research, University of Delaware

Current smokers who are not actively trying to quit nor have plans to quit within the next 30 days were asked what factors would be influential in encouraging them to stop smoking. These results are shown in Figure 2-7, below. As seen in previous years, smoking-related illness ranks as the strongest motivation for quitting smoking; close to 75% of current smokers who are not actively trying to quit, nor have plans of quitting within the next 30 days indicate that they would quit if they were diagnosed with a major smoking related illness. Concerns about cost is the second leading motivational factor for quitting smoking, wherein more than half of current smokers would quit if smoking became cost prohibitive and about 40% who would consider quitting if they were provided with free nicotine patches and/or gum. The third major motivational factor comes from the influence of others<sup>3</sup> (~67%). Thirteen percent of current smokers said that nothing would motivate them to think about quitting.

**Figure 2-7**  
**Which Conditions Would Motivate You to Stop Smoking?**



<sup>3</sup> Influence of others includes friend’s illness, pregnancy and family pressure.

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Respondents were also asked if their health insurance or their prescription benefits would help defray the cost of tobacco cessation services/products. Less than 23% of smokers were confident about either and over 50% of smokers simply had no knowledge about their coverage. Policy should be developed to encourage health insurance companies to educate policy holders on options available to them to assist them in quitting smoking. Also, given that over 17% of smokers do not have health insurance or prescription benefits to cover the cost of either services or the cost of tobacco cessation products, proactive steps should be taken to ensure that those without health insurance are made aware of the availability of free cessation services and free/reduced –cost product. These are pro-active steps that, in the long run, may avert the health care costs associated with long term tobacco use.

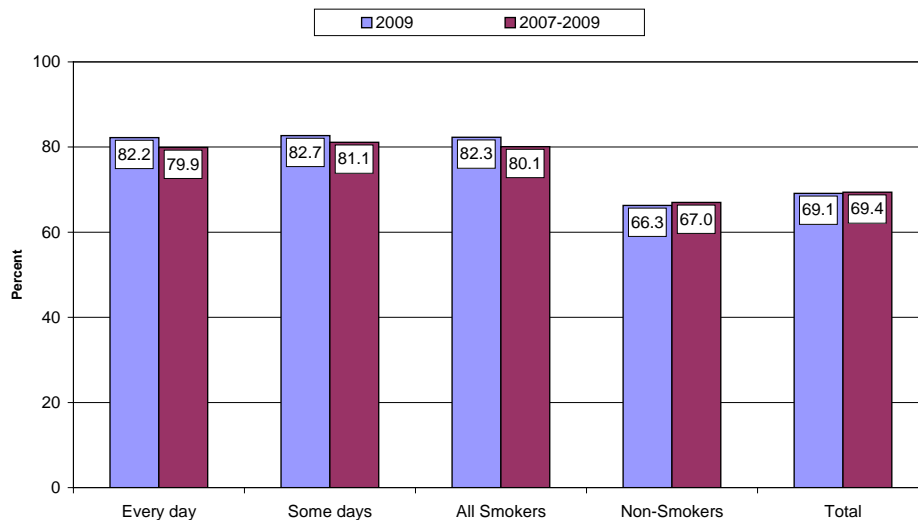
The State of Delaware does offer support services to persons seeking to quit smoking via the “Delaware Quitline”. This innovative program combines national expertise with local knowledge and service, and is made possible through the Delaware Health Fund. This service is provided through a toll-free telephone number through which residents can request tobacco education materials and receive personal support sessions with trained specialist. The program also features a voucher program to help qualifying low-income participants obtain effective pharmaceutical cessation aids.

The expansive efforts on behalf of the State to inform the public of the Quitline’s services have not gone unnoticed. 2009 reflects a saturation rate of about 82% in the percentage of current smokers who are aware of the Quitline and its various services. However, these figures have remained relatively stable over the past three years as shown in Figure 2-8 below. Approximately 70% of Delaware’s total adult population (smokers and non-smokers alike) are



aware of this program.

**Figure 2-8**  
**Aware of "Quitline" Message by Frequency of Smoking**

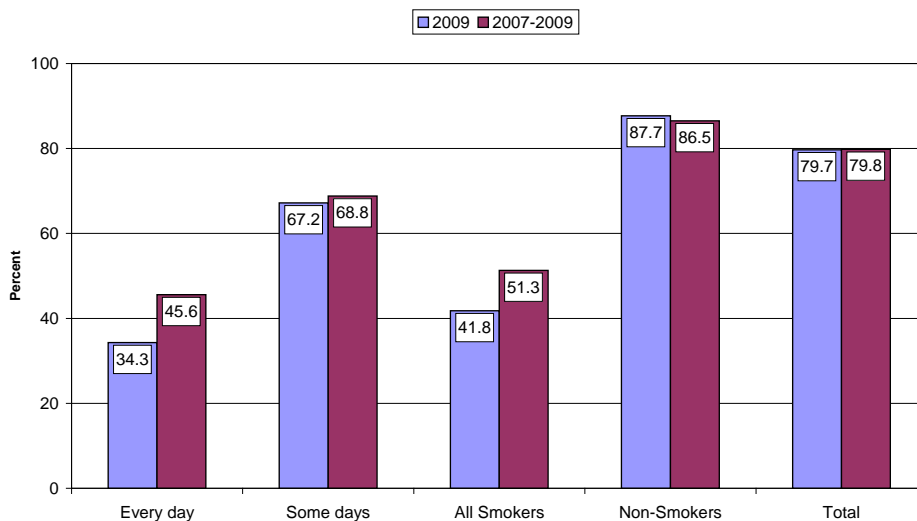


Source: Center for Applied Demography & Survey Research, University of Delaware

### Second-Hand Smoke

During the past decade, health agencies have focused attention on the prevalence and health risks of second-hand smoke in work places, homes, and public facilities. In the past several years, the focus has been on developing policies that protect employees and the public in places such as restaurants, nightclubs, bars and casinos. The Delaware Clean Indoor Air Act that went into effect on November 27, 2002 prohibiting smoking indoors in all public places and other places of work within the state has had a direct effect on exposure to second-hand smoke. This year’s survey addressed exposure to second-hand smoke at home and in other areas not covered by the legislation. The key findings are provided in this section.

**Figure 3-1**  
**Percent with No Other Smokers at Home by Frequency of Smoking**

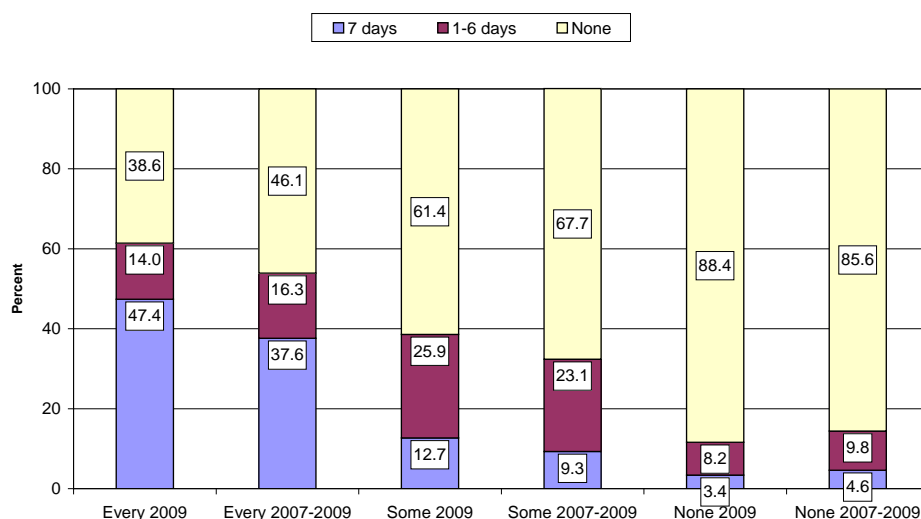


Source: Center for Applied Demography & Survey Research, University of Delaware

Figure 3-1 shows that about 42% of current smokers are the only persons in their households that smoke while 88% of non-smokers live without a smoker in the household. Overall, close to 80% of the households in Delaware are smoke-free, at least from the occupants, i.e. not considering visitors. All of these data are comparable to those in the 2007-2009 trend data.

In order to get some idea of the magnitude of the exposure, respondents were asked how many days per week they were exposed to other people’s tobacco smoke. Those results are found in Figure 3-2 below. The figure shows that the 47.4% of “everyday” smokers who live with another smoker are exposed to other people’s tobacco smoke seven days a week. By comparison, only about 3.5% of non-smokers are exposed to other people’s tobacco smoke 7 days per week, a slight decrease from the 2007-2009 average. The majority of non-smokers (88.4%) report no exposure to other people’s tobacco smoke, suggesting efforts are taken to avoid exposure. Thus, “everyday” smokers are also frequently exposed to second-hand smoke in addition to their own, wherein “some day” smokers and non-smokers have considerably lower risk to exposure to other people’s tobacco smoke.

**Figure 3-2**  
**Days per Week of Exposure to Other’ Smoke at Home by Frequency of Smoking**



Source: Center for Applied Demography & Survey Research, University of Delaware

Using these data it is possible to arrive at an estimate of exposure to smoke in the home. The estimates are shown in Table 3-1, below. About 32% of the total population is exposed to smoke at home. This is similar to the estimate of 30% of the households that have someone who smokes.

**Table 3-1**  
**Upper Estimates of Exposure to Smoking at Home**  
**by Age Group**

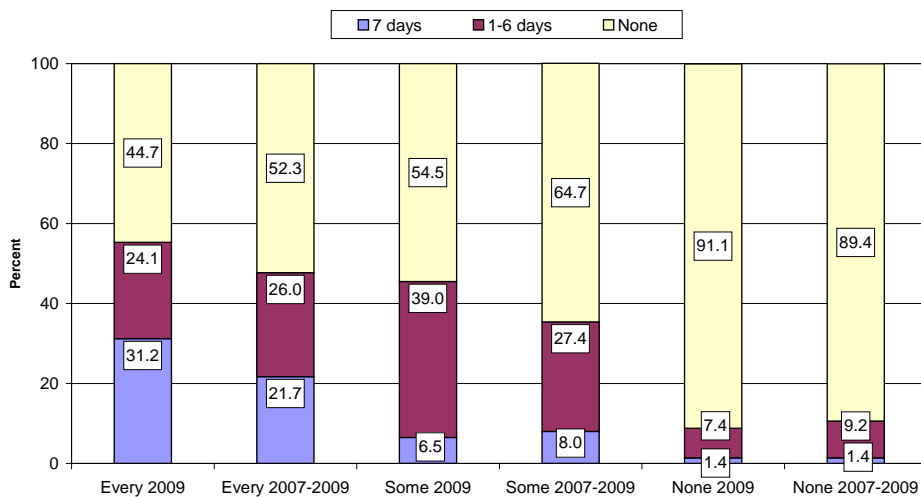
Age Group	Exposed	Not Exposed	Total	Percent Exposed
0-4	15,000	43,000	58,000	26.5%
5-9	16,000	40,000	56,000	28.7%
10-14	20,000	35,000	55,000	36.4%
15-17	13,000	23,000	36,000	35.7%
18+ (non-smokers)	88,000	446,000	534,000	16.5%
18+ (smokers)	126,000	0	126,000	100.0%
Total	278,000	587,000	865,000	32.1%

Source: Center for Applied Demography & Survey Research, University of Delaware

Respondents were also asked about the number of children in their households. Smokers are less likely to live with children (29%) than non-smokers (40.1%). In fact, some 64,000 children (31.2%) are likely to be exposed to second-hand smoke at home. However, all of these estimates should be considered as upper limits. Over half (55.2%) of all respondents who smoked said that they did not allow smoking in their homes. Non-smokers were much more likely to rule out smoking at home (87.1%).

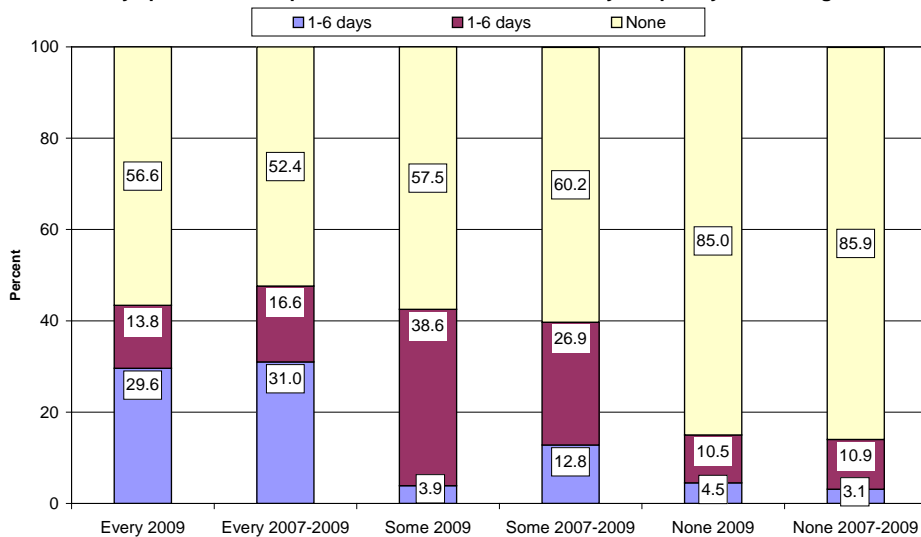
Respondents were also asked about exposure to other people's tobacco smoke while in a motor vehicle during the past seven days. The results found in Figure 3-3 below indicate that about 31% of "everyday" smokers were exposed to other people's tobacco smoke everyday in the past week while in a motor vehicle compared to only 6.5% of "some day" smokers and 1.4% of non-smokers. However, "some day" smokers are still subject to a considerable amount of second hand smoke while in a motor vehicle; almost 40% of "some day" smokers report that they were exposed to other people's tobacco smoke at least 1-6 days out of the previous week. For "some day" smokers, 2009 data shows the category who were exposed to other's tobacco smoke in a motor vehicle 1-6 days a week increases substantially compared to the three year average. Exposure to second hand smoke among non-smokers decreased slightly. 2009 data shows "everyday" smokers have tendency to be exposed to other's tobacco smoke in a motor vehicle everyday of any given week while "some day" smokers and non-smokers are typically only be exposed some days during any given week if at all.

**Figure 3-3**  
Days per Week of Exposure to Smoke in a Motor Vehicle by Frequency of Smoking



Source: Center for Applied Demography & Survey Research, University of Delaware

**Figure 3-4**  
Days per Week of Exposure to Other' Smoke at Work by Frequency of Smoking

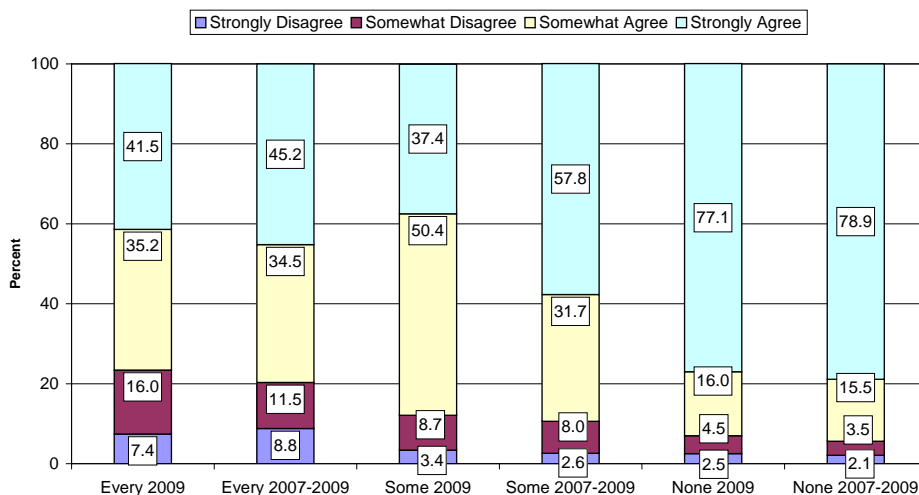


Source: Center for Applied Demography & Survey Research, University of Delaware

Another location where people may be exposed to second-hand smoke is at work. Respondents were asked how many days in the past week they were exposed to other people’s tobacco smoke while at work. In total, 18.2% of respondents reported being exposed to other people’s tobacco smoke while at work during the previous week. Of these, 64.3% were exposed in an outside work area, and 22.5% were exposed from smokers near a building entrance. Little change is reflected in exposure to other people’s tobacco smoke while at work among current “everyday” smokers and non-smokers over the past few years. However, “some day” smokers report fewer days per week which they are subjected to other people’s tobacco smoke while at work.

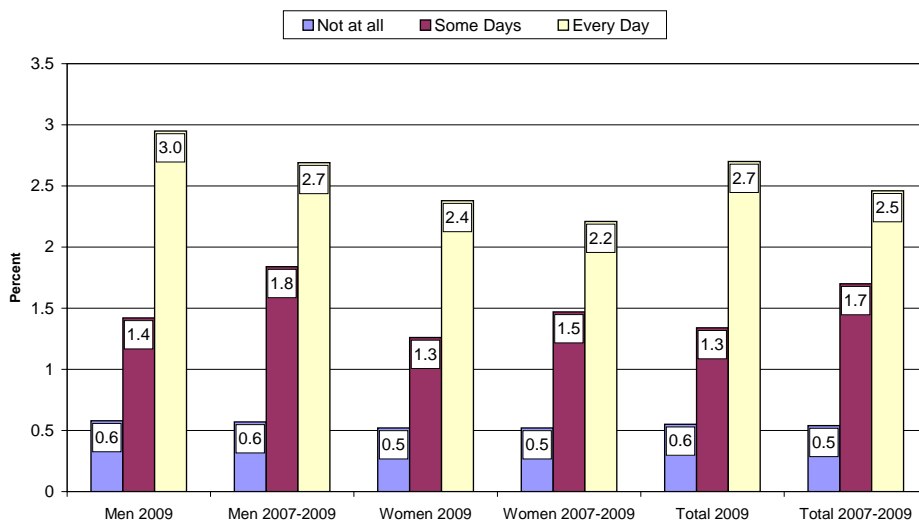
In addition to being asked about personal exposure to other people’s tobacco smoke, respondents were asked if people should be protected from second-hand smoke. Overall, smokers and non-smokers alike believe that people should be protected from second hand smoke. Almost than 93% of all non-smokers who participated in this survey agreed with this proposition, about 77% of “everyday” smokers also agreed along with approximately 88% of “some day” smokers. These estimates have remained fairly stable over the past three years as is shown in Figure 3-5 below.

**Figure 3-5**  
**People Should be Protected from Second-hand Smoke by Frequency of Smoking**



Source: Center for Applied Demography & Survey Research, University of Delaware

**Figure 3-6**  
**Number of Friends Who Smoke (0-4) by Frequency of Smoking**



Source: Center for Applied Demography & Survey Research, University of Delaware

Smokers are more likely to have friends that smoke than non-smokers (see Figure 3-6 above). Smokers on average have 2.7 smoking friends compared to non-smokers who average 0.5 smoking friends. These findings vary little by gender and are consistent across all three years as is clearly shown in the graph.

In summary, the data presented in this section show that a significant number of Delawareans are exposed to second-hand smoke at home, in a vehicle, or at work. Fortunately, both smokers and non-smokers are in agreement that people should be protected from second-hand smoke.

## **Tobacco and the Media**

The final objective of the Tobacco Attitudes and Media Survey was to assess the degree to which current media campaigns were reaching adult Delawareans. While awareness does not necessarily translate into action, it is a necessary first step. A primary purpose of this study is to assess the visibility of various media campaigns and to learn how people obtain information about health issues and services. In addition, the reaction of respondents to various tobacco advertisements is addressed.

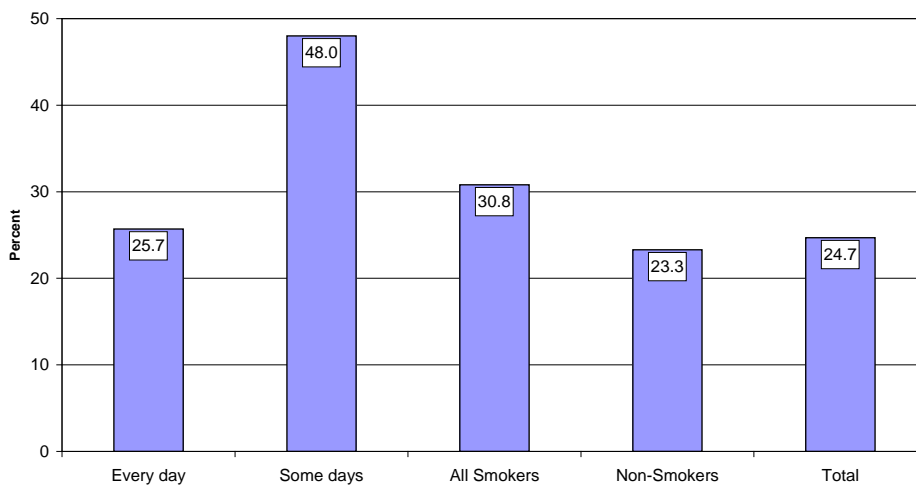
The Delaware Division of Public Health's Tobacco Prevention and Control Program launched a social marketing campaign raising awareness of certain health implications of second-hand smoke and encouraging people not to smoke inside their homes because of the increase risk of illness and other health problems associated with exposure to second-hand smoke. This particular campaign involved the impact second-hand smoke has on the increased likelihood of ear infections among children and implications for asthmatic children.

As shown in Figure 4-1 below, about 25% of all adult Delawareans have seen or heard one or both of these messages during the past month. Smokers, who are the primary target population for this campaign, are more aware of than non-smokers; approximately 31% of all smokers have seen or heard one or both advertisements compared to roughly 23% of non-smokers. Among current smokers, "some day" (48%) smokers are more likely to report greater awareness of this particular media campaign than "everyday" smokers (~26%). This may be due to the increased desire among "some day" smokers to discontinue current tobacco use all together.

While the respondents reported hearing the messages about smoking indoors from a variety of sources, the majority of respondents report seeing the message on television (~74%). Exposure to this advertisement for all other media outlets was less than 15%. In fact, 70% only seen/heard the messages on television, while the remaining 30% heard the messages heard them from a source other than television. The pervasiveness of television explains this difference. It also suggests that while the costs are higher, television advertising is the most effective means of reaching most Delawareans. More than 30% of those who viewed the advertisement and currently allow some smoking in their homes considered changing their current policy.

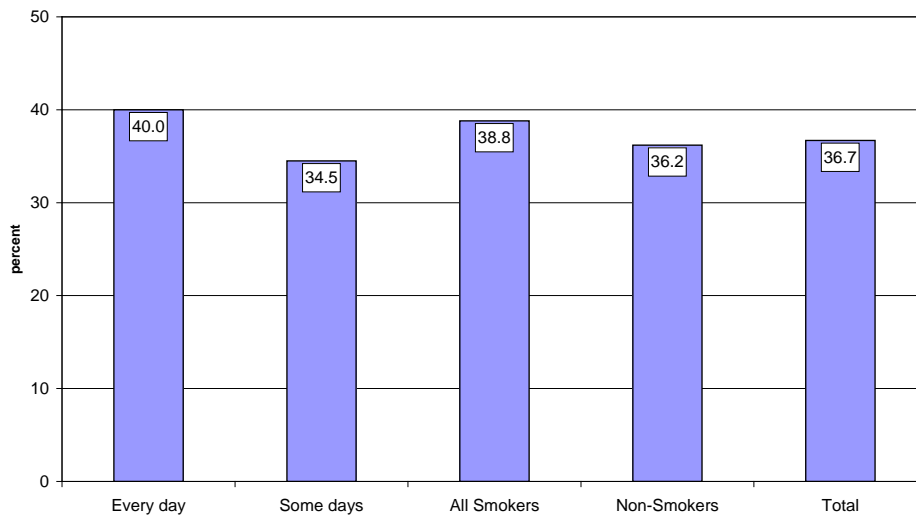


**Figure 4-1**  
**Seen or Heard Advertisement 1: A Child's Ear Infection or Asthma Linked to the Cigarette Smoking of an Adult Relative or Friend**



Source: Center for Applied Demography & Survey Research

**Figure 4-2**  
**Seen or Heard Advertisement 2: A girl refuses a classmate's smoking invitation because of her mother's conversation**



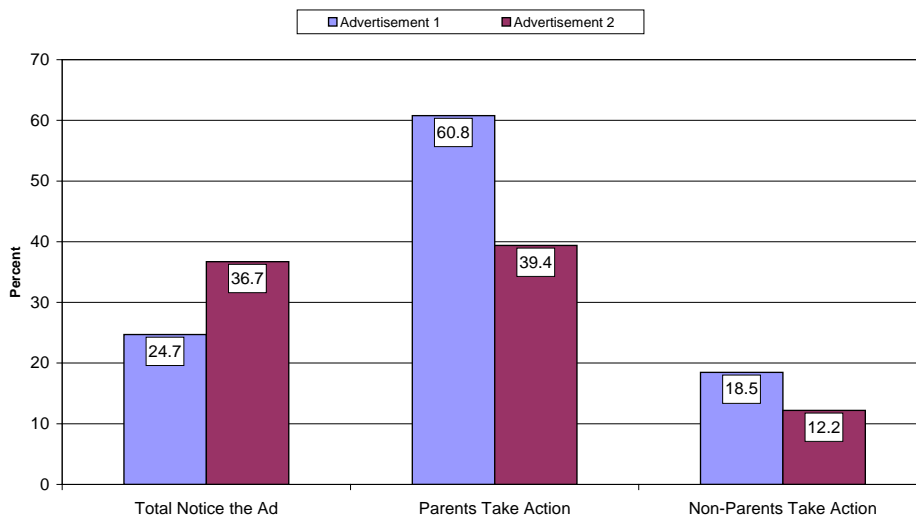
Source: Center for Applied Demography & Survey Research

Respondents were also asked if they had “seen or heard an advertisement that begins with a mother and daughter, where the girl hears her mother’s conversation as “Blah, blah, blah, blah, blah”? Later, when a classmate invites the girl to smoke with her, she refuses.” Almost 37% of adult Delawareans have seen or heard the messages during the past month (see Figure 4-3 below), with smokers being slightly more aware of this advertisement than non-smokers (~38.8% compared to ~36.2%).

As shown below (Fig 4-3), non-smoking parents (36.4%) are more aware this advertisement than parents who smoke (35.2). Non-parent smokers are most aware of the advertisement (40.2%) but they are the least to talk about this advertisement to the youth (9.2%). None-smokers without children represent the same trend (36% noticed this advertisement but only 13% talked about it). Over 50% smoker parents (51.6%) talked to their children or other youth about smoking when they saw this advertisement which is more than none-smoker parents (37.6%). Over all, parents were prone to talk about smoking to their children or other youth after they saw this advertisement.

More than 10 % of adult Delawareans have seen or heard the second advertisement compared with the first one (See figure 4-3 below), the purpose was to encourage parents to talk to their children about not using tobacco. 8% of smokers are more aware of the second advertisement. Over 60% parents would consider not allowing smoking inside of their home after they saw the first advertisement while 18.5% non-parents would. Around 40% parents would tell their children or youth about smoking while 12% non-parents would. There is big difference between parents and non-parents’ attitudes after they saw these smoking related advertisements.

**Figure 4-3**  
**Parents and Non-Parents' Attitudes between Advertisement 1 and Advertisement 2**

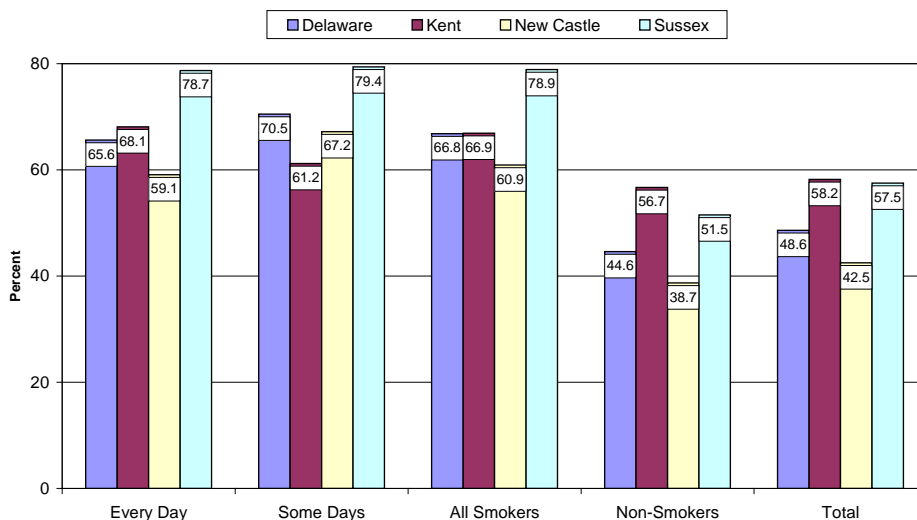


Source: Center for Applied Demography & Survey Research, University of Delaware

In the first section of this report, it was reported that more than 69% of adult Delawareans had heard of the Delaware Quitline. Furthermore, smokers are more familiar with the program than non-smokers. In addition, respondents were asked if they had seen or heard any advertisements promoting the Delaware Quitline in the past month. Overall, as shown in Figure 4-5 below, about 47% of Delaware residents have heard advertisements pertaining to the Delaware Quitline in the past 30 days with approximately 67% of smokers being aware of such advertisements. However, regardless of smoking status, residents of Kent and Sussex counties are more likely to have seen or heard that specific ad campaign than those living in New Castle County.

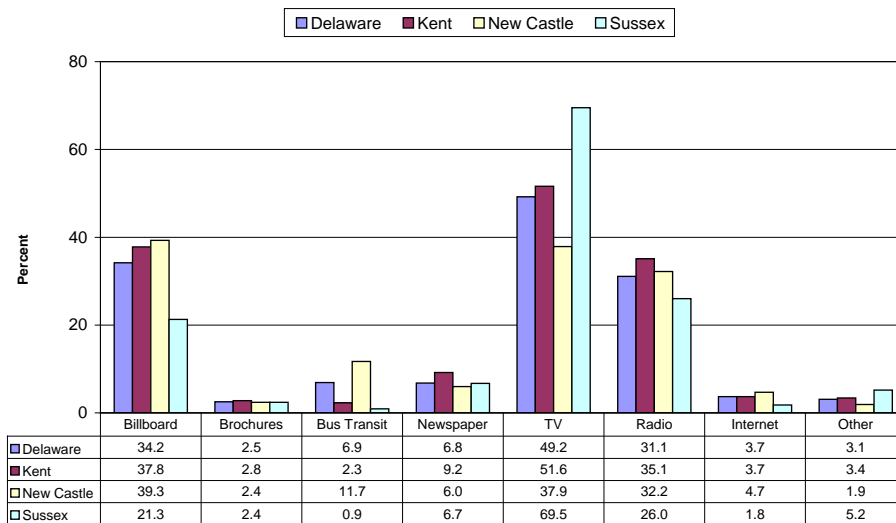
Respondents who had heard or seen the “Delaware Quitline” message, were asked where they had heard or seen the material. Although television was the most likely source as is shown in Figure 4-6, radio (31%) and billboards (34%) were also identified as significant sources.

**Figure 4-4**  
**Heard "Delaware Quitline" Message by Frequency of Smoking**



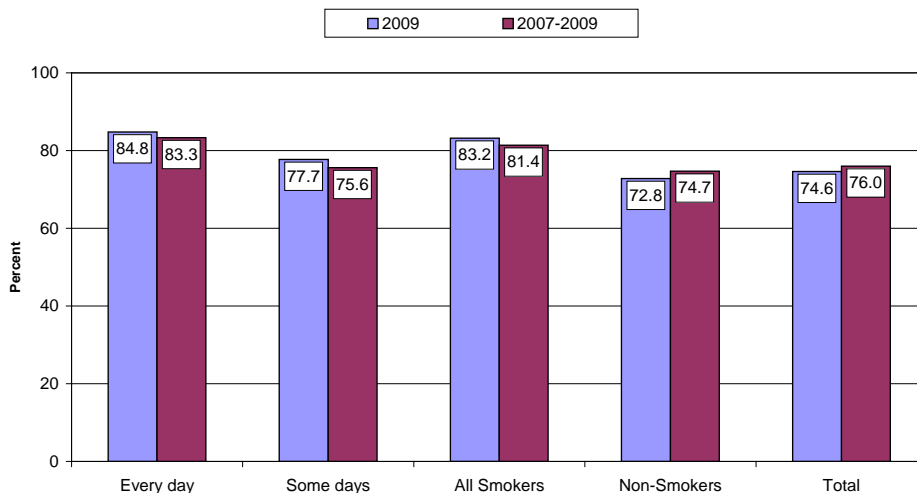
Source: Center for Applied Demography & Survey Research, University of Delaware

**Figure 4-5**  
**Source of "Delaware Quitline" Message**



Source: Center for Applied Demography & Survey Research, University of Delaware

**Figure 4-6**  
**What Percent of Delaware's Adults Think**  
**That 30% or More of Delaware's Adults Smoke?**



Source: Center for Applied Demography & Survey Research, University of Delaware

In order to determine the public perception of normalcy of smoking, respondents were asked to estimate the percentage of adult Delawareans that smoke. The results herein suggest that estimate to be 17.5% (comprised of both every day and some day smokers). In Figure 4-7, above, it is clear that the respondents have a different perception.

Although only 17.5% of adult Delawareans currently smoke, around 75% of the respondents think that 30% or more of the adult population smokes, while less than 8% underestimate smokers. Smokers are the furthest off the mark suggesting that they think their numbers are much larger than they actually are. It is important to remember that smokers are more likely to live with someone who smokes and has many more friends that smoke. Men and women were equally off the mark.

Finally, respondents were asked to express an opinion about two smoking-related issues. The findings suggest that about 72% of non-smokers do not like to be around people who are smoking. Second, 38% of Delaware residents and 80% of Delaware smokers mistakenly think that smoking helps to relieve stress.

## Observations

This research had three primary objectives. First, the survey was to measure the prevalence of smoking within the state. Second, it was to gather information about exposure to second-hand smoke. Finally, it was to measure both the reach of the media campaign that stresses the danger of second-hand smoke and attitudes toward tobacco-company advertising. All three objectives were accomplished. The highlights from the 2009 survey are provided below:

- Just 18% of adult Delawareans reported smoking.
- Prevalence of overall tobacco use is 23% (including cigarettes/chewing tobacco/snus /snuff/cigarillos/small cigars/ pipes/regular cigars/bidis/kreteks)
- More than 20% of adult men reported smoking in comparison with 15% of adult women.
- About 46% of all adult Delawareans have smoked at some point in their lives, but only 18% are currently smoking.
- Of those that are currently smoking, 42% are trying to quit or have plans to quit. Among “everyday” smokers 39% are trying or planning to quit. Those most likely to be planning to quit smoking are the “some day” smokers (51%). These figures are lower than past 3 years.
- More than 10% Delawareans (smokers and non-smokers alike) reported awareness of the Delaware Quitline than last year. According to the 3 year trend data, smokers are more aware of the Quitline than non-smokers.
- Almost 66% of “everyday” smokers live in a house where one or more other people smoke. This contrasts with 12% for people who report being non-smokers.
- Approximately 9% of adult non-smokers are exposed to second-hand smoke in a motor vehicle.
- About 20% of adult Delawareans are exposed to second-hand smoke at work. However this exposure rate has fallen from 32% in 2002. The vast majority of exposure is in outdoor work sites and entry-ways, although some exposure at indoor settings is still occurring, despite the state law. Exposure at work is far higher for smokers than for non-smokers.
- In general, smokers are more likely to live with other people that smoke, be exposed to SHS at work, and have a greater number friends that smoke than non-smokers.
- Over 90% of adult Delawareans feel that people should be protected from second-hand smoke. This includes 80% of smokers who agree with this position.
- About 25% of adult Delawareans reported seeing or hearing about the dangers of indoor smoke.

- Almost 49% of adults in Delaware reported hearing/seeing the Delaware Quitline message in the past month.
- The principal sources of this information were television, radio, and billboards.
- In general, people tend to over estimate the proportion of adult Delawareans who smoke. Around three quarters of the population and substantially more smokers think that more than 30% of adult Delawareans smoke when the actual percentage is around 18%.

## **APPENDIX A**

### **TOBACCO ATTITUDES AND MEDIA SURVEY 2009**

Questionnaire



**TOBACCO ATTITUDES AND MEDIA SURVEY  
2009**

Hello, I'm [interviewer name] calling from the University of Delaware. We are conducting a survey of Delaware residents on behalf of the Delaware Division of Public Health about tobacco-related behavior, attitudes and issues. Your phone number was chosen randomly by the computer to be included in our study.

Is this [phone number]?

Yes

No [interviewer redials the phone number]

Is this a cell phone?

Yes

No ["Thank you but we are only interviewing land line telephones and private residences."]

Is this a private residence?

Yes

No ["Thank you but we are only interviewing private residences."]

We 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?

How many of these adults are men?

How many of these adults are women?

[number of men and number of women are tabulated and the CATI software randomly selects one individual from among all adults in the household]

The person in your household I need to speak with is the [selected respondent – e.g., oldest female], are you the [selected respondent]?

We really appreciate your participation in this study. The survey will last only about ten minutes. Your answers will be completely confidential and no response will be identified with you personally. You may refuse to answer any question in the survey. The interview may be monitored for quality assurance purposes, but all information obtained in this study will be confidential.

S1) In what county do you live?

Kent

New Castle

Sussex

**SECTION A**

QA1) Have you smoked at least one hundred cigarettes in your entire life?

Yes (Skip to AQ2)

No (Go to QA1a)

DK (Go to QA 1a)

Refused (Go to QA1a)

QA1a Do you now smoke cigarettes everyday, some days, or not at all?

Everyday (Go to QA2a)

Some days (Go to QA2b)

Not at all [Skip to A7]

**Comment [e1]:** How difficult would it be to add a cell phone component to the survey, perhaps for 2010?

DK [Skip to A7]  
 Refused [Skip to A7]

QA2) Do you now smoke cigarettes everyday, some days, or not at all?

Everyday  
 Some days  
 Not at all [Skip to A6]  
 DK  
 Refused

If everyday:

QA2a ) On average, how many cigarettes do you smoke a day?

Enter value \_\_\_\_\_  
 DK

Refused

If some days:

QA2b) In the past week, on how many days did you smoke?

Enter value \_\_\_\_\_  
 DK

Refused

QA2c) On the days that you smoked, what is the average number of cigarettes you smoked per day?

Enter value \_\_\_\_\_  
 DK  
 Refused

QA3) How long have you smoked cigarettes?

Under 6 months  
 6 months to a year  
 1 to 2 years  
 2-10 years  
 more than 10 years  
 DK  
 Refused

QA4) In the past 6 months, would you say you have been smoking . . . :

Fewer cigarettes [Go to A5]  
 About the same number [Skip to A8]  
 More cigarettes [Skip to A8]  
 DK [Skip to QA8]  
 Refused [Skip to QA8]

QA5) Why are you smoking less now?

Personal Health  
 Cost  
 Policies that restrict smoking [Do not read choices]  
 Family/friends health  
 Pressure from family/friends  
 Pregnant  
 Role model  
 Trying to Quit  
 DK  
 Refused

[Skip to QA8]

## FORMER SMOKERS:

QA6) Do you currently use chewing tobacco, snus or snuff everyday, some days or not at all?

- Everyday
- Some days
- Not at all
- DK
- Refused

QA6b) Do you currently smoke cigarillos or small cigars?

- Everyday
- Some Days
- Less than once a month
- Not at all
- DK
- Refused

QA6c) Do you currently use any other tobacco product such a pipe, regular cigars, hookah pipe, bidis, or kreteks,?

- Everyday
- Some Days
- Less than once a month [ & if QA6 & if QA6b are “Not at all” or “Less than once a month “  
READ: “You said that you used to smoke cigarettes..... go to QA9,]
  - Not at all month [ & if QA6 & if QA6b are “Not at all” or “Less than once a month “  
READ: “You said that you used to smoke cigarettes..... go to QA9,]
- DK
- Refused

QA6d) Are you actively trying to quit or planning to quit tobacco in the next 30 days?

- Yes
- No
- DK
- Refused

[Interviewer READ: “You said that you used to smoke cigarettes”...and continue reading .. QA9]

## NEVER SMOKERS:

QA7) Do you currently use chewing tobacco, snus or snuff everyday, some days or not at all?

- Everyday
- Some days
- Not at all
- DK
- Refused

QA7b) Do you currently smoke cigarillos or small cigars?

- Everyday
- Some Days
- Less than once a month
- Not at all

DK  
Refused

QA7c) Do you currently use any other tobacco product such a pipe, regular cigars, hookah pipe, bidis, or kreteks,?

Everyday  
Some Days  
Less than once a month [ & if QA7 & if QA7b are “Not at all” or “Less than once a month “ go to QA10,]  
Not at all [ & if QA7 & if QA7b are “Not at all” or “Less than once a month “go to QA10,]  
DK  
Refused

QA7d) Are you actively trying to quit or planning to quit tobacco in the next 30 days?

Yes [Go to QA9]  
No [Go to QA 10]  
DK [Go to QA 10]  
Refused [Go to QA 10]

**CURRENT SMOKERS:**

QA8) Do you currently use chewing tobacco, snus or snuff everyday, some days or not at all?

Everyday  
Some days  
Not at all

DK  
Refused

QA8b) Do you currently smoke cigarillos or small cigars?

Everyday  
Some Days  
Less than once a month  
Not at all  
DK  
Refused

QA8c) Do you currently use any other tobacco product such a pipe, regular cigars, hookah pipe, bidis, or kreteks,?

Everyday  
Some Days  
Less than once a month  
Not at all  
DK  
Refused

QA8d) Are you actively trying to quit or planning to quit tobacco in the next 30 days?

Yes [Skip to QA9]

No

DK

Refused

QA8e) Have you ever tried to quit smoking or stop using any tobacco product?

Yes [Skip to QA9]

No

DK

Refused

QA8f) Would any of the following motivate you to think about quitting? [*Check a response for each item below*]

Yes No Don't Know Refused or Not Applicable

You were diagnosed with a major smoking-related illness such as heart attack, emphysema, or cancer.

Someone close to you had major smoking-related illness

If the cost of cigarettes became too expensive

If you or someone you live with became pregnant

Pressure from family or friends

If someone offered you free nicotine patches or gum

You purchased a new car or home.

Other \_\_\_\_\_

[*INTERVIEWER: If no to all above, read:*]

Nothing would motivate me to think about quitting

QA9) What method or methods did you use/ are you using to help you quit? [Do not read response options] [Check all methods mentioned.]

**By my self**

Stopped all at once-**Cold turkey**

Switched to a lower tar or nicotine cigarettes

Gradually cut back on cigarettes

Switched to smokeless tobacco (i.e., chew, snuff, snus)

Switched to e\_cigarettes (vaporized nicotine in a plastic dispenser that looks like a cigarette)

Followed instructions in a pamphlet or a book

**Counseling**

Delaware quitline

Other telephone counseling

Cessation class

Stop smoking clinic

Individual counseling by a health professional

Other personal counseling

**Doctor's advice (tips)**

**Group support**

**Internet support**

DE Quitnet

**Prescription or medication**

Chantix

Bupropion, Wellbutrin or Zyban

---

Nicotine replacement,  
Nicorette lozenge  
Nicotine gum,  
Nicotine inhaler  
Nicotine nasal spray,  
Nicotine patch  
**Used other methods**  
Acupuncture  
Hypnosis  
Other: specify \_\_\_\_\_

QA10) Does your health insurance cover the cost of services such as counseling or classes to help quit smoking?

Yes  
Yes, Partly  
No  
I don't have health insurance  
DK  
Refused

QA11) Does your prescription benefit cover the cost of tobacco cessation products such as Nicotine gum, patch, Chantix or Wellbutrin? [If asked to clarify, "Other tobacco cessation products may include Nicotine inhaler or nasal spray, Nicorette lozenges, Bupropion or Zyban but not hypnosis or acupuncture."]

Yes  
Yes, Partly  
No  
I don't have prescription benefits  
DK  
Refused

QA12) Have you ever used your health insurance or prescription benefit to cover tobacco cessation services or products for yourself or a family member?

Yes  
No, my request was denied  
No  
DK  
Refused

QA13) Do you know about the Delaware "Quitline" program with a toll-free number to help quit smoking?

Yes  
No  
DK  
Refused

QA14) Do you know about the Delaware "Quitnet" website?

Yes  
No  
DK  
Refused

**SECTION B**  
**ENVIRONMENTAL TOBACCO SMOKE (ETS) EXPOSURE**

QB1) NOT including yourself, how many members of your household currently smoke?

Enter a value \_\_\_\_

DK

Refused

QB2) During the past SEVEN DAYS, when you were at HOME, how many days were you exposed to other family members' or visitors' tobacco smoke?

Enter a value \_\_\_\_

DK

Refused

QB3) Which statement best describes the rules about smoking inside your home?

Please Read:

Smoking is not allowed anywhere inside your home

Smoking is allowed in some places or at some times

Smoking is allowed anywhere inside the home

OR

There are no rules about smoking inside the home

Don't Read:

Don't know/not sure

Refused

QB4 ) During the past SEVEN DAYS, when you were in a motor vehicle, how many days were you exposed to other people's tobacco smoke?

Enter a value

DK

Refused

QB5) During the past SEVEN DAYS, when you were at WORK, how many days were you exposed to other people's tobacco smoke?

Enter a value [If 0, skip to QB6]

DK

N/A – I do not work

Refused

QB5A) You said you were exposed to other's people smoke at work, was your exposure in Delaware?

Yes [Go to QB5B]

No [Go to QB6]

DK [Go to QB6]

Refused [Go to QB6]

QB5B) Was your primary exposure to other people's tobacco smoke...

Please read:

In an outdoors work area

From smokers near a building entrance

Indoors

At home because that is where I work

Other \_\_\_\_\_

DK

Refused

QB6) How strongly do you agree or disagree with the following statement: "people should be protected from second-hand smoke". Do you . . .

- Strongly disagree
- Somewhat disagree
- Somewhat agree
- Strongly agree
- DK
- Refused

Delaware's Clean Indoor Air Act –which prohibits smoking in indoor public places such as bars, restaurants and workplaces was established in November 2002. The purpose of the law was to protect Delaware residents from secondhand smoke.

QB7) Would you agree or disagree with the following statement: "The law has helped protect people from second hand smoke."?

- Strongly disagree
- Somewhat disagree
- Somewhat agree
- Strongly agree
- DK
- Refused

QB8) Would you say the overall impact of the Clean Indoor Air Act on your quality of life has been:

- Very positive
- Somewhat positive
- None/ No impact
- Somewhat negative
- Very Negative
- DK
- Refused

QB9) How many of your four best friends are smokers?

- Enter a value \_\_\_\_
- DK
- Refused

## **SECTION C DEMOGRAPHICS**

QC1) I just need to verify, are you male or female?

- Male
- Female
- Refused

QC2) Please tell me your age.

- Enter a value \_\_\_
- 99+
- Refused

QC3) Do you have children under 18 years of age, living in your household?

- Yes
- No (Skip to C5)
- DK (Skip to C5)
- Refused (Skip to C5)



QC4) How many children are there in this household under 18 that are . . .

- Less than 5 years old
- 5 to 9 years old
- 10 to 14 years old
- 15 to 17 years old
- Refused

QC5) What is the highest grade or year of school you have completed?

- Eighth grade or less
- Some high school (grades 9-11)
- Grade 12 (High School grad or GED)
- Some technical school
- Technical school graduate
- Some college
- College graduate
- Postgraduate or professional degree
- Refused

EMPLOY What is your current employment status? I am going to read a list of alternatives. Please choose the first that applies. Are you currently... [after first option is selected, skip to Q6]

- A student employed for wages part-time or full time?
- A student?
- Employed for wages part-time or full time?
- Self-employed?
- Out of work for more than a year?
- Out of work for less than a year?
- A homemaker?
- Retired? or
- Unable to work?
- DK
- Refused

QC6) Are you Hispanic or Latino?

- Yes
- No
- DK/Not sure
- Refused

QC7) Which one or more of the following would you say is your race?

- White
- Black or African American
- Asian
- Native Hawaiian or Other Pacific Islander
- American Indian, Alaska Native, or
- Other [specify:] \_\_\_\_\_
- Don't Know/Not Sure
- Refused

If more than one response to QC7 or QC7=Other, DK/NS or Refused:

QC7a) Which one of these groups would you say best represents your race?

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

---

Other [specify:] \_\_\_\_\_  
Don't Know/Not Sure  
Refused

QC8) How long have you lived in Delaware?

All my life  
Less than 12 months  
1 - 2 years  
3 - 4 years  
5 - 9 years  
10 or more years  
DK  
Refused

QC9) Is your annual household income from all sources?

Under \$15,000  
\$15,000 to \$24,999  
\$25,000 to \$34,999  
\$35,000 to \$44,999  
\$45,000 to \$54,999  
\$55,000 to \$74,999  
\$75,000 to \$99,999  
\$100,000 or more  
DK  
Refused

QC10) Do you have more than one residential telephone number in your household? (Do not include cell phones or numbers that are only used by a computer or fax machine.)

Yes  
No  
DK  
Refused

QC10 Value) If yes to QC10, how many residential (not business, computer or fax lines) telephone numbers do you have?

Enter a value \_\_\_\_

#### **SECTION D MASS MEDIA AND TOBACCO**

The next set of questions is about your exposure to media advertising related to tobacco. By media, we mean radio, television, newspapers and billboards.

QD1) In the past month, have you seen or heard any advertisements where a child's ear infection or asthma is linked to the cigarette smoking of an adult relative or friend?

Yes  
No [Go to QD4]  
DK [Go to QD4]  
Refused [Go to QD4]

QD2) Where did you see or hear these messages? [Check all that apply]

Newspaper ads or special inserts  
Heard radio ads  
Seen TV ads

---

Billboards  
Bus transit  
Brochure

QD3) If smoking is currently allowed in your home, after seeing this advertisement did you consider not allowing smoking inside of your home?

Yes  
No  
NA

QD4) In the past month, have you seen or heard an advertisement where a mother is talking to her daughter and all you hear is “Blah, blah, blah, blah, BLAH”? Later, when a classmate invites the girl her to smoke, she remembers her mother's words loud and clear.

Yes  
No [Go to QD4]  
DK [Go to QD4]  
Refused [Go to QD4]

QD5) As a result of this advertisement, did you talk to your children or other youth about smoking?

Yes  
No, I spoke with them about ... (any other prevention issues such as sex, drugs, bullying or school violence, etc.)  
No  
DK  
Refused

QD4) In the past month, have you seen or heard any advertisements promoting the Delaware Quitline ?

Yes  
No (Skip to QD6)  
DK (Skip to QD6)  
Refused (Skip to QD6)

QD5) Where have you seen or heard it? On a . . . [check all that apply]

Billboard  
Brochure  
Bus transit  
Newspaper ads or special inserts  
TV  
Radio  
Internet  
Other

QD5Other) If said OTHER to QD4: Where did you see or hear about it?

Enter response \_\_\_\_\_

QD9) In your opinion, what percent of Delaware adults currently smoke cigarettes:

Enter Percentage \_\_\_\_\_%  
DK  
Refused

Do you agree or disagree with the following statements:

QD10a) I personally don't mind being around people who are smoking?

- Agree
- Disagree
- Don't Know
- Refused

QD10b) Cigarette smoking helps reduce stress?

- Agree
- Disagree
- Don't Know
- Refused

That's all the questions we have. Thank you for your time and effort.

## APPENDIX B

**Table A-1 Sample Demographic Characteristics of the 2009 State of Delaware Tobacco Attitudes and Media Survey**

	N	%
<b>County</b>		
Kent	429	34.2
New Castle	413	32.9
Sussex	413	32.9
<b>Gender</b>		
Male	464	37.0
Female	791	63.0
<b>Race/Ethnicity</b>		
White – NH	1036	82.5
Black – NH	127	10.1
Other – NH	43	3.4
Hispanic	33	2.6
<b>Age</b>		
18 – 24	62	4.9
25 – 34	127	10.1
35 – 44	182	14.5
45 – 54	245	19.5
55 – 64	257	20.5
65 +	382	30.4

Source: Center for Applied Demography & Survey Research, University of Delaware