

Tobacco is the single most preventable cause of death and disease in the nation. In the United States alone, tobacco kills more people each year than alcohol, car accidents, suicide, AIDS, murder, illegal drugs, and fire – combined. Studies vary, but smoking rates for LGBT people are two to three times as high as the general population.

1. **Please select the county in which you live**

- | | |
|--------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Douglas Co, NE | <input type="checkbox"/> Cass Co, NE |
| <input type="checkbox"/> Sarpy Co, NE | <input type="checkbox"/> Pottawattamie Co, IA |
| <input type="checkbox"/> Washington Co, NE | <input type="checkbox"/> Mills Co, IA |
| <input type="checkbox"/> Lancaster Co, NE | <input type="checkbox"/> Other _____ |

2. **What is your gender identification?***

- | | |
|-----------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Male | <input type="checkbox"/> Transgender – Male to Female |
| <input type="checkbox"/> Female | <input type="checkbox"/> Transgender – Female to Male |
| <input type="checkbox"/> Intersex | <input type="checkbox"/> Questioning |

3. **Please select age range**

- | | |
|-----------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> 19-34 years | <input type="checkbox"/> 50 years to 64 years |
| <input type="checkbox"/> 35 to 49 years | <input type="checkbox"/> 65 years and older |

4. **Which of the following racial groups do you most identify with?**

- | | |
|-------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Asian/Pacific Islander |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> Mixed |
| <input type="checkbox"/> Native American | <input type="checkbox"/> White/Caucasian |
| <input type="checkbox"/> Other _____ | |

5. **How do you define your sexual orientation? (Check all that apply)**

- | | | |
|--------------------------------------------------|-------------------------------------|----------------------------------|
| <input type="checkbox"/> Gay | <input type="checkbox"/> Homosexual | <input type="checkbox"/> Lesbian |
| <input type="checkbox"/> Bisexual | <input type="checkbox"/> Queer | |
| <input type="checkbox"/> Straight (Heterosexual) | <input type="checkbox"/> Pansexual | |
| <input type="checkbox"/> Other _____ | | |

6. **Do you smoke?**

- | | |
|------------------------------------|----------------------------------------|
| <input type="checkbox"/> Every day | <input type="checkbox"/> Not at all |
| <input type="checkbox"/> Some days | <input type="checkbox"/> Former smoker |

7. **Have you smoked at least 100 cigarettes (5 packs) in your life?**

- | | | |
|------------------------------|-----------------------------|-------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Don't Know |
|------------------------------|-----------------------------|-------------------------------------|

8. **If given the resources and support, would you be interested in cutting down or quitting tobacco?**

☐ Yes

☐ No

☐ N/A (non-smoker)

9. **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

☐ Don't know

10. **I think it is important to learn about the dangers of tobacco use.**

☐ Yes ☐ No

11. **I believe I have the right to breathe clean air.**

☐ Yes ☐ No

12. **I have an understanding of how tobacco companies target my community.**

☐ Yes ☐ No

13. **I live in:**

☐ Single- family house

☐ Own

☐ Multi-unit housing (i.e., apartment)

☐ Rent

14. **Which statement best describes the rules about smoking inside your home? Do not include decks, garages, or porches.****

☐ Smoking is not allowed anywhere inside my home

☐ Smoking is allowed in some places or at some times

☐ Smoking is allowed anywhere inside the home

15. **Does your partner or someone living in your home smoke?****

☐ Yes ☐ No

16. **I usually vote in local elections.**

☐ Yes ☐ No

17. **I support making PRIDE a smoke-free event.**

☐ Yes ☐ No ☐ Not Sure

18. **I would vote in favor of a smoke-free parks policy.**

☐ Yes ☐ No ☐ Not Sure

19. **I would vote in favor of a smoke-free recreation areas policy.**

☐ Yes ☐ No ☐ Not Sure

20. **What are the benefits of a smoke-free policy? (Check all that apply)**

☐ Reduce the effects of smoking on people's health

☐ Reduce exposure to secondhand smoke

☐ Reduce children's exposure to tobacco smoke

☐ Encourage smokers to quit

☐ Discourage youth from smoking

Comments:

* Arkansas Department of Health Tobacco Prevention and Cessation Program (2011), *LGBT / HIV and Tobacco Survey Report*.

** Arizona Department of Health Services (2006), *Tobacco Use and Interventions Among Arizona Lesbian, Gay, Bisexual, and Transgender People*.