

QUESTIONNAIRE ID NUMBER \_\_\_\_\_ [USE PRE-PRINTED LABEL IF APPLICABLE]

Region \_\_\_\_\_

City/Village \_\_\_\_\_

URBAN/RURAL \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

Name of the respondent \_\_\_\_\_

Respondent's phone number \_\_\_\_\_

District \_\_\_\_\_

**Household:**

1. Panel respondent

2. New respondent from the original household (use-randomized table to select)

3. New respondent from the new household (use-randomized table to select)

Sampling point # \_\_\_\_\_

## INTRODUCTION AND CONSENT

Hello. My name is \_\_\_\_\_. The Institute of Social Studies and Analyses is conducting an important international survey of adult tobacco use.

The survey usually takes about 20 minutes. All of the answers you give will be confidential and will not be shared with anyone other than members of our survey team. The researchers will not attempt to identify you or name you as a participant in the study, nor will they facilitate anyone else's doing so. We are in no way linked to any state authority or any commercial enterprise. There are no known risks or dangers to you associated with this study.

In case you need more information about the survey, you may contact Ms Lali Sutiasvili, who is the project coordinator in the Institute of Social Studies and Analyses. Her mobile number is 599 506143.

Do you have any questions? May I begin the interview now with previously interviewed respondent?

*I acknowledge that I am participating in this study of my own free will. I understand that I may refuse to participate or stop participating at any time without penalty.*

INTERVIEWER ID \_\_\_ \_\_\_

Consent has been read to participant

1. Yes
2. No

*If no, read consent*

Consent has been obtained

1. Yes
2. No

*If 'No': Can you tell me why not?*

- a. I am not a smoker (if so, then please ask them to continue with the survey)
- b. I do not have time
- c. I do not want to
- d. Other
- e. Refuse to answer
- f. I don't know

*After recording response, end interview (if required) and replace the household*

Interview result [How was interview finished]

1. Interview conducted completely
2. Interview not conducted (even not started)
3. Interview interrupted (respondent doesn't smoke)
- [77.] Don't know

## Household Questionnaire

TIME HH INTERVIEW STARTED [24 HOUR CLOCK]	____ : ____ HRS      MINS
--	------------------------------

HQ.1 Is there anyone in this household that smokes cigarettes or uses tobacco of any kind?

- |                       |                             |
|-----------------------|-----------------------------|
| YES .....             | <input type="checkbox"/> 1  |
| NO .....              | <input type="checkbox"/> 2  |
| DON'T KNOW.....       | <input type="checkbox"/> 77 |
| REFUSE TO ANSWER..... | <input type="checkbox"/> 99 |

IF HQ1 = 2, or 77, or 99 (I.E. NO TOBACCO USER IN THE HOUSEHOLD) END THE INTERVIEW AND RECORD TIME INTERVIEW ENDED OTHERWISE CONTINUE WITH INTERVIEW

HQ.2 (if yes) Which type/s of product is/are used in the household?

- |                               |                             |
|-------------------------------|-----------------------------|
| Cigarette with filter.....    | <input type="checkbox"/> 1  |
| Cigarette without filter..... | <input type="checkbox"/> 2  |
| Snuff.....                    | <input type="checkbox"/> 3  |
| Water-pipe / hookah.....      | <input type="checkbox"/> 4  |
| Roll your own (RYO).....      | <input type="checkbox"/> 5  |
| E-cigarettes.....             | <input type="checkbox"/> 6  |
| Cigars.....                   | <input type="checkbox"/> 7  |
| Cigarillos.....               | <input type="checkbox"/> 8  |
| Pipe tobacco.....             | <input type="checkbox"/> 9  |
| Other SPECIFY:_____.....      | <input type="checkbox"/> 10 |

HH1. In total, how many persons live in this household?

INCLUDE ANYONE WHO CONSIDERS THIS HOUSEHOLD THEIR PRIMARY PLACE OF RESIDENCE LAST NIGHT

		PERSONS
--	--	---------

HH2. How many (male/female) household members are 18 years of age or older?

Male	Female	Adults (Total)

**Interviewer:** HH3 refers only to a panel respondent

HH3 Has the number of adults in your household changed after the last interview?

- 1. Yes, increased
- 2. Has not changed
- 3. Decreased
- 77. I DON'T KNOW
- 99. REFUSE TO ANSWER

I now would like to collect information about the males/females that live in this household, who's age is 18 years and older. Let's start listing the males/females from oldest to youngest.

ASK THE FOLLOWING QUESTIONS AND RECORD ANSWERS IN TABLE BELOW

HH4. What are these persons' household statuses?

HH5. What are these persons' age? IF RESPONDENT DOESN'T KNOW, PROBE FOR AN ESTIMATE

HH6. RECORD GENDER

HH7. Does this person currently smoke cigarettes/use tobacco?

HH8. If she/he is a smoker/uses tobacco, mention which kind of tobacco product he / she uses. (Multiple choice)

- |                                       |                          |    |
|---------------------------------------|--------------------------|----|
| Filtered cigarettes.....              | <input type="checkbox"/> | 1  |
| Unfiltered cigarettes.....            | <input type="checkbox"/> | 2  |
| Snuff.....                            | <input type="checkbox"/> | 3  |
| Water-pipe / hookah.....              | <input type="checkbox"/> | 4  |
| Roll your own/ cut tobacco (RYO)..... | <input type="checkbox"/> | 5  |
| E-cigarettes.....                     | <input type="checkbox"/> | 6  |
| Cigars.....                           | <input type="checkbox"/> | 7  |
| Cigarillos.....                       | <input type="checkbox"/> | 8  |
| Pipe tobacco.....                     | <input type="checkbox"/> | 9  |
| Other SPECIFY: _____.....             | <input type="checkbox"/> | 10 |
| DON'T KNOW.....                       | <input type="checkbox"/> | 77 |
| REFUSE TO ANSWER.....                 | <input type="checkbox"/> | 99 |

	HH4. Status in the Household (e.g. Mother, Father, Sister, Brother, Grandmother, Grandfather, Uncle, etc.)	HH5. Age	HH6. Gender		HH7. Current cigarette/tobacco user?			HH8. The type of tobacco (Type code)
			M	F	YES	NO	DK	
1	_____	___	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	
2	_____	___	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	
3	_____	___	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	
4	_____	___	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	
5	_____	___	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	
6	_____	___	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	
7	_____	___	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	
8	_____	___	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	
9	_____	___	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	
10	_____	___	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	

**INTERVIEWER:** RANDOMIZATION TABLE BELOW IS USED ONLY IN CASE IF ORIGINAL HOUSEHOLD HAS BEEN REPLACED BY A NEW ONE

**INTERVIEWER:** USE RANDOMIZATION TABLE BELOW TO SELECT INDIVIDUAL SMOKERS AND WRITE THE SELECTED NUMBER IN HH9 BELOW (eligibility means the individual should be 18+ and a cigarette smoker)

-IF ONLY ONE ELIGIBLE MALE/FEMALE LIVES IN THE HOUSEHOLD, WRITE "1" IN HH9

-IF MORE THAN 10 MALE/FEMALE SMOKERS LIVE IN THE HOUSEHOLD, END THE INTERVIEW AND CONSULT WITH YOUR SUPERVISOR BEFORE SELECTING ANYONE FOR THE INDIVIDUAL INTERVIEW

**SELECTION OF INDIVIDUAL SMOKERS USING RANDOMIZATION TABLE:**

NUMBER OF ELIGIBLE MALES/FEMALES IN HOUSEHOLD	LAST DIGIT OF QUESTIONNAIRE ID NUMBER									
	0	1	2	3	4	5	6	7	8	9
0	END INTERVIEW									
1	1	1	1	1	1	1	1	1	1	1
2	1	2	1	2	1	2	1	2	1	2
3	3	1	2	3	1	2	3	1	2	3
4	1	2	3	4	1	2	3	4	1	2
5	1	2	3	4	5	1	2	3	4	5
6	6	1	2	3	4	5	6	1	2	3
7	5	6	7	1	2	3	4	5	6	7
8	1	2	3	4	5	6	7	8	1	2
9	8	9	1	2	3	4	5	6	7	8
10	9	10	1	2	3	4	5	6	7	8

HOUSEHOLD ROSTER NUMBER OF THE SELECTED ELIGIBLE MALE/FEMALE

HH9. Please tell me whether this household or any person who lives in the household has the following:

READ EACH ITEM	YES	NO	DON'T KNOW	REFUSED
a. Holiday house	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	<input type="checkbox"/> 99
b. Satellite dish	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	<input type="checkbox"/> 99
c. Computer	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	<input type="checkbox"/> 99
d. Take vacation abroad?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	<input type="checkbox"/> 99
e. Car	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	<input type="checkbox"/> 99
f. Cash assistance for socially vulnerable people	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 77	<input type="checkbox"/> 99

HH10. What is your household monthly income from all sources?

DON'T KNOW.....  77  
 REFUSE TO ANSWER.....  99

**INTERVIEWER:** ANSWER HH13 FOR EACH RANDOMLY SELECTED INDIVIDUAL FROM THE HOUSEHOLD.

HH13. Was the interview conducted

1. Yes
2. No

*If no, reason why interview was not done*

1. The chosen respondent was not at home
2. The chosen respondent refused

TIME HH INTERVIEW ENDED  
[24 HOUR CLOCK]

\_\_\_\_ : \_\_\_\_  
HRS MINS

**End Household Questionnaire**

## Individual Questionnaire

QUESTIONNAIRE ID NUMBER \_\_\_\_\_ - \_\_\_\_\_

### READ INTRO:

You have been selected to participate in a smoking behavior survey conducted by the University of Cape Town. All of the information you give us will be kept confidential. The interview is completely voluntary and if we should come to any question that you don't want to answer, just let me know and we'll go on to the next question. The interview will take about 10 to 20 minutes. I would like to start now, is that okay?

### FILL IN THE FOLLOWING INFORMATION:

<b>CONSENT HAS BEEN READ TO PARTICIPANT</b>	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO  <i>IF NO, READ CONSENT</i>
<b>CONSENT HAS BEEN OBTAINED [VERBAL]</b>	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO  <i>IF NO, END INTERVIEW</i> <i>IF YES, SIGNATURE OF INTERVIEWER:</i> _____
<b>INTERVIEW LANGUAGE [INSERT LANGUAGE]</b>	<input type="checkbox"/> 1 Georgian <input type="checkbox"/> 2 Russian
<b>TIME INTERVIEW BEGAN [24 HOUR CLOCK]</b>	____ : ____ HRS MINS

## Section A General features

A1. After the last interview with you, have you got any additional education?

1. Yes
2. No

A2. What additional education have you got/what is the highest level of education completed?

- |   |                          |   |
|---|--------------------------|---|
| No formal schooling .....                 | <input type="checkbox"/> | 1 |
| Less than primary school completed .....  | <input type="checkbox"/> | 2 |
| Primary school completed.....             | <input type="checkbox"/> | 3 |
| Less than secondary school completed..... | <input type="checkbox"/> | 4 |
| Professional education completed .....    | <input type="checkbox"/> | 5 |
| Secondary school completed.....           | <input type="checkbox"/> | 6 |
| College/university incomplete .....       | <input type="checkbox"/> | 7 |
| College/university completed .....        | <input type="checkbox"/> | 8 |
| Post graduate degree completed.....       | <input type="checkbox"/> | 9 |

A3. Which of the following best describes your main work status over the past 12 months?

1. State sector employee
2. Private sector employee
3. NGO employed
4. Self-employed (including subsistence farming)
5. Student
6. Homemaker
7. Retired
8. Unemployed, able to work
9. Unemployed, unable to work
77. DON'T KNOW
99. REFUSE TO ANSWER

A4. If employed, (answers 1, 2 and 3 in A3) do you get paid daily, weekly, monthly or quarterly?

- |                       |                          |    |
|-----------------------|--------------------------|----|
| Daily.....            | <input type="checkbox"/> | 1  |
| Weekly.....           | <input type="checkbox"/> | 2  |
| Monthly.....          | <input type="checkbox"/> | 3  |
| Quarterly .....       | <input type="checkbox"/> | 4  |
| Other .....           | <input type="checkbox"/> | 5  |
| DON'T KNOW .....      | <input type="checkbox"/> | 77 |
| REFUSE TO ANSWER..... | <input type="checkbox"/> | 99 |

**SECTION B. SMOKING CIGARETTES/TOBACCO**

B1. Have you tried to give up smoking since we last spoke to you?

- 1. Yes, I tried to give up
- 2. No, I did not

If 'Yes', have you successfully given up smoking since we last spoke to you?

- 1. Yes, I gave up (Move to question #B2 and move to the section D)
- 2. No, I did not (Move to question #B3)

B2. Why have you quitted smoking?

- 1. It's expensive (I cannot effort to buy it)
- 2. Due to the health problems
- 3. Other reason (Indicate) -----
- 77. DON'T KNOW
- 99. REFUSE TO ANSWER

B3. Currently, do you smoke cigarettes/tobacco on a daily basis, or less than daily?

DAILY.....  1  
 LESS THAN DAILY .....  2

[IF B3 = 2 SKIP TO B5]

B4. On average, how many of the following do you currently smoke each day?

INTERVIEWER: IF RESPONDENT REPORTS DOING THE ACTIVITY, BUT LESS THAN ONCE PER DAY, LEAVE THE FIELD BLANK AND CHECK THE BOX (888) TO THE RIGHT

INTERVIEWER: IF RESPONDENT REPORTS IN PACKS OR CARTONS, PROBE TO FIND OUT HOW MANY ARE IN EACH AND CALCULATE TOTAL NUMBER

LESS THAN 1  
PER DAY BUT  
MORE THAN 0

READ EACH ITEM:

a. Cigarettes with filter? .....				PER DAY	<input type="checkbox"/> 888
b. Cigarettes without filter/papirosi? .....				PER DAY	<input type="checkbox"/> 888
c. Hand-rolled cigarettes? .....				PER DAY	<input type="checkbox"/> 888
d. E-cigarettes? .....				PER DAY	<input type="checkbox"/> 888
e. Cigars or cigarillos? .....				PER DAY	<input type="checkbox"/> 888
f. Any others? .....				PER DAY	<input type="checkbox"/> 888

→ Specify type: \_\_\_\_\_

[SKIP TO C1]

B5. How many of the following do you currently smoke during a usual week?

INTERVIEWER: IF RESPONDENT REPORTS DOING THE ACTIVITY, BUT LESS THAN ONCE PER WEEK, LEAVE THE FIELD BLANK AND CHECK THE BOX (888) TO THE RIGHT

INTERVIEWER: IF RESPONDENT REPORTS IN PACKS OR CARTONS, PROBE TO FIND OUT HOW MANY ARE IN EACH AND CALCULATE TOTAL NUMBER

LESS THAN 1  
PER WEEK BUT  
MORE THAN 0

READ EACH ITEM:

<p>a. Cigarettes with filter? .....</p> <p>b. Cigarettes without filter? .....</p> <p>c. Hand-rolled cigarettes? .....</p> <p>d. E-cigarettes? .....</p> <p>e. Cigars or cigarillos? .....</p> <p>f. Any others? .....</p>	<table border="1" style="width: 100%; height: 100%; border-collapse: collapse;"> <tr><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td></tr> <tr><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td></tr> <tr><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td></tr> <tr><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td></tr> <tr><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td></tr> <tr><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td><td style="width: 33%; height: 20px;"></td></tr> </table>																			<p>PER week <input type="checkbox"/> 888</p> <p>.....</p>

→ Specify type: \_\_\_\_\_

**SECTION C. BUYING CIGARETTES/TOBACCO**

INTRO: The next few questions are about the last time you purchased tobacco for yourself.

C1. Did you buy cigarettes/tobacco for yourself the last time?

1. Yes
2. No (I never bought any tobacco for myself)

If 'Yes', the last time you bought cigarettes/tobacco, how many cigarettes did you buy?

a. SINGLE CIGARETTES.....	<input type="checkbox"/> 1	→ How many single cigarettes?	_____
b. PACKS .....	<input type="checkbox"/> 2	→ How many packs?	_____
		How many single cigarettes per pack?	_____
c. CARTONS.....	<input type="checkbox"/> 3	→ How many cartons?	_____
		How many single cigarettes per carton?	_____
d. EMPTY CIGARETTE TUBES.....	<input type="checkbox"/> 4	→ How many boxes?	_____

How many cigarette tubes per box? \_\_\_\_\_

e. RAW TOBACCO..... 5 → How much [in ml]? \_\_\_\_\_

f. E-CIGARETTE LIQUID ..... 6 → How much [in ml]? \_\_\_\_\_

g. NEVER BOUGHT CIGARETTES..... 6 → SKIP TO SECTION D

h. REFUSE TO ANSWER..... 99

i. DON'T KNOW ..... 77

C2. If C1.a. How much money did you pay for per cigarette?

DON'T KNOW ..... 77

REFUSE TO ANSWER..... 99

C3. If C1.b. How much money did you pay for per pack of cigarette?

DON'T KNOW ..... 77

REFUSE TO ANSWER..... 99

C4. If C1.c. How much money did you pay for per carton of cigarette?

DON'T KNOW ..... 77

REFUSE TO ANSWER..... 99

C5. If C1.d. How much money did you pay for per empty cigarette tube?

DON'T KNOW ..... 77

REFUSE TO ANSWER..... 99

C6. If C1.e. How much money did you pay per 100g of raw tobacco?

DON'T KNOW .....  77  
REFUSE TO ANSWER.....  99

C7. If C1.f. How much money did you pay per 5ml of E-Cigarette Liquid?

DON'T KNOW .....  77  
REFUSE TO ANSWER.....  99

C8. Do you share your cigarettes/smoking tobacco with other members of your household?

YES.....  1  
NO.....  2  
REFUSE TO ANSWER.....  99

C9. What brand did you buy the last time you purchased cigarettes/smoking tobacco for yourself?

Specify the brand name .....  
(Add roll your own tobacco brands/ e-cigarette liquid brands to the list)

DON'T KNOW .....  77  
REFUSE TO ANSWER.....  99

C10. The last time you purchased cigarettes/smoking tobacco for yourself, where did you buy them?

Kiosk .....  1  
Supermarket/Store.....  2  
Street stand/on street .....  3  
House shop (sales of goods within people's homes) .....  4  
Internet .....  5  
From family/friend .....  6  
Other.....  7 → SPECIFY: \_\_\_\_\_  
DON'T KNOW .....  77  
REFUSE TO ANSWER.....  99

C11. Why did you buy them there? (choose all that apply)

- It is convenient – close to home .....  1
- It is convenient – close to work.....  2
- It has the cheapest price.....  3
- Needed other things from the shop.....  4
- I like the shop .....  5
- Other (specify) [                    ].....  6
- DON'T KNOW .....  77
- REFUSE TO ANSWER.....  99

C12. Do you have information about the amount of tar in the cigarette/smoking tobacco you smoke?

- 1. Yes, I do have information
- 2. I do not have information
- 99. REFUSE TO ANSWER

C13. Can you show a cigarette/tobacco box/pack?

- 1. Yes
- 2. Do not have (threw it away) → (go to C18)
- 3. Do not have (I bought roll your own)
- 4. Do not have (I bought singles)
- 99. Refuse to request → (Go to C15)

C14. If answer 3 or 4 for C13, Can you show me any cut tobacco/single sticks?

- 1. Yes – ask for brand
- 2. No
- 99. Refuse to answer
- 77. Do not know

C15. If answer 2 'No' for C14, Why do not you want to show a cigarette/tobacco box/pack/tobacco ?

To INTERVIEWER: Please indicate a reason)

\_\_\_\_\_

- 77. DO NOT KNOW
- 99. REFUSE TO ANSWER

INTERVIEWER: RECORD

C16.1 ARE CIGARETTES IN PACKS?

- 1. YES .....  1
- 2. NO.....  2

C16.2. TYPE OF CIGARETTES:

- 1. FILTERED.....  1
- 2. NOT FILTERED.....  2
- 3. HAND ROLLING.....  3
- 4. OTHER (SPECIFY) \_\_\_\_\_.....  4

C16.3. THE BRAND .....

C16.4. PRESENCE OF A TAX STAMP (Please mark)

- 1. GEORGIAN TAX STAMP.....  1
- 2. OTHER COUNTRY TAX STAMP (note which country) .....  2
- 3. NO TAX STAMP.....  3
- 4. DIFFICULT TO TELL.....  77

C16.5 PRESENCE OF HEALTH WARNING (Please mark)

- 1. GEORGIAN HEALTH WARNING .....  1
- 2. OTHER COUNTRY HEALTH WARNING (note which country) .....  2
- 3. NO HEALTH WARNING AT ALL.....  3

C17. How much did you pay for this pack?

- DON'T KNOW .....  77
- REFUSE TO ANSWER.....  99

C18. Is this the only pack in the house that is currently available?

- YES.....  1 [GO TO D1]
- NO.....  2
- DON'T KNOW.....  77 [GO TO D1]
- REFUSE TO ANSWER.....  99 [GO TO D1]

C19. Could you show me the other open cigarette pack?

- YES.....  1
- Does not have one .....  2
- REFUSED.....  99 [GO TO D1]

INTERVIEWER: RECORD

C20.1 ARE CIGARETTES IN PACKS?

- 1. YES .....  1
- 2. NO.....  2

C20.2 TYPE OF CIGARETTES:

- 1. FILTERED.....  1
- 2. NOT FILTERED.....  2
- 3. HAND ROLLING.....  3
- 4. OTHER (SPECIFY) \_\_\_\_\_.....  4

C20.3 THE BRAND .....

C20.4 PRESENCE OF A TAX STAMP (Please mark)

- 1. GEORGIAN TAX STAMP.....  1
- 2. OTHER COUNTRY TAX STAMP (note which country) .....  2
- 3. NO TAX STAMP.....  3
- 77. DIFFICULT TO TELL.....  77

C20.5 PRESENCE OF HEALTH WARNING (Please mark)

- 1. GEORGIAN HEALTH WARNING .....  1
- 2. OTHER COUNTRY HEALTH WARNING (note which country) .....  2
- 3. NO HEALTH WARNING AT ALL.....  3

C21. How much did you pay for this pack?

- DON'T KNOW .....  77
- REFUSE TO ANSWER.....  99

**SECTION D. KNOWLEDGE, ATTITUDES & PERCEPTIONS**

D1. Have you changed your behaviour after the tax increase in January, and if so how?

- 1. I do not know about the tax increase
- 2. No I have not changed behaviour
- 3. Gave up tobacco
- 4. Consume less tobacco
- 5. Buy tobacco in different place
- 6. Buy different type of smoking tobacco (If so, which type -----)
- 7. Buy a different brand of smoking tobacco
- 8. Other change -----
- 77. Don't know
- 99. Refuse to answer

D2. Have you changed your behaviour after the tobacco laws changed last year (making smoking illegal in public places, pictures on packs, no advertising etc), and if so how? (MULTIPLE CHOICE)

- 1. I do not know about the tobacco law change.....  1
- 2. I have not changed behaviour, I still smoke in public places.....  2
- 3. I have not changed behaviour, I never smoked in public places.....  3
- 4. I have not changed behaviour, I smoke the same amount .....  4
- 5. I have not changed behaviour, I smoke the same type of tobacco.....  5
- 6. I gave up tobacco.....  6
- 7. I consume less tobacco.....  7
- 8. I started smoking other type of tobacco (e.g. E-cigarette, roll your own).....  8
- 9. I consume tobacco at home instead of in public places.....  9
- 10. Other \_\_\_\_\_.....  10
- 77. DON'T KNOW.....  77
- 99. REFUSE TO ANSWER.....  99

D3. Which of the following do you think, are the most important when people speak about illicit cigarettes?  
(check all that apply)

- No tax paid.....  1
- Low price.....  2
- Poor quality.....  3
- Sold at an unregistered outlet .....  4
- No health warning.....  5
- Health warning in not in Georgian language.....  6
- No indication of tar and nicotine.....  7
- Others, specify.....  8
- DON'T KNOW.....  77
- REFUSE TO ANSWER.....  99

D4. Are you aware of the sale of illicit/smuggled tobacco products in your area?

- I am unaware.....  1
- I am aware .....  2
- DON'T KNOW .....  77
- REFUSE TO ANSWER.....  99

D5. Has illicit trade increased, decreased or remained the same since we last asked?

- Increased.....  1
- Remained the same .....  2
- Decreased.....  3

D6. How important issue is an illegal (Contraband) trade of tobacco?

- 1. Very insignificant
- 2. Minor
- 3. Average
- 4. Important
- 5. Very important
- 77 DON'T KNOW
- 99. REFUSE TO ANSWER

D7. In which type of outlet can you find illegal cigarettes in your area?

Specify the type\_\_\_\_\_

- DON'T KNOW .....  77
- REFUSE TO ANSWER.....  99

D8. If people know that certain cigarettes were illegal (e.g. had not paid taxes), would they still buy them?

- YES.....  1
- NO.....  2
- DON'T KNOW .....  77
- REFUSE TO ANSWER.....  99

**INTERVIEWER:** QUESTIONNAIRE RESULT (CODE).

**End Individual Questionnaire**

Those are all of the questions I have. Thank you very much for participating in this important survey. Do you have any questions?

TIME INTERVIEW ENDED [24 HOUR CLOCK]	_____	:	_____	
	HRS		MINS	

