

## Survey questions

### Nicotine use among Australian teens

#### Questionnaire for parents

The next few questions are about nicotine, including oral nicotine pouches.

1. Which of the following products do you think your teenager might have **ever** used or tried, even if it was only one time? {BY CHILD}

Yes/No/Not sure

Cigarettes

E-cigarettes (vapes)

Oral nicotine pouches or snus (e.g. Zyns)

2. Which of the following products has your teenager used in the **last 30 days**?

Yes/ No/ Not sure

{only offer items selected as 'yes' in Q1}

Cigarettes

E-cigarettes (vapes)

Nicotine pouches or snus (e.g. Zyns)

3. How confident are you that you could recognize the signs and symptoms of nicotine dependence in your teenager?

Very confident

Somewhat confident

Not confident

4. If your teenager had a problem with nicotine use, do you think you could help them cut back or quit?

Yes/No/Not sure

5. Where would you go to find information to help your teenager reduce or quit using nicotine products?

Select all that apply:

A website (e.g. Quit, Cancer Council, VicHealth)

A hotline (e.g. Quitline)

A doctor (e.g. GP, family doctor)

Someone from my child's school (e.g. teacher, counsellor, school nurse)  
Social media  
Not sure

## Questionnaire for children aged 12 to 17 years

The next few questions are about nicotine, including oral nicotine pouches/ snus (Zyns).

1. Have you **ever** used or tried any of the following products, even if it was only one time?

Yes/No

Cigarettes  
E-cigarettes (vapes)  
Oral nicotine pouches or snus (e.g. Zyns)

2. Have you used any of the following products in the **last 30 days**?

Yes/No

{only offer options selected as 'yes' in Q1}  
Cigarettes  
E-cigarettes (vapes)  
Oral nicotine pouches or snus (e.g. Zyns)

3. Are you thinking about trying any nicotine products either again or for the first time (e.g. cigarettes, vapes, oral nicotine pouches/snus/Zyns, etc.) in the next 12 months?

Yes/No/Not sure

4. Tell us how much you agree or disagree with the following statements

Strongly disagree/ Disagree/ Agree/ Strongly agree/ Not sure

4.1 Nicotine pouches/snus help people relax

4.2 Using nicotine pouches/snus make people look good

4.3 Nicotine pouches/snus are easier (or cheaper) to buy than e-cigarettes or regular cigarettes

4.4 Oral nicotine pouches/snus are not as bad for you as e-cigarettes (vapes)

4.5 Oral nicotine pouches/snus are not as bad for you as regular cigarettes

4.6 Using nicotine pouches/snus makes people feel good

5. Have you ever tried to cut down or quit using nicotine products?

Yes/No

6. Do you want to cut down or quit using nicotine products now or in the future?

Yes/ No/ Not sure

7. Tell us how much you agree or disagree with the following statements

Strongly disagree/ Disagree/ Agree/ Strongly agree/ Not sure

7.1 I feel like I can't get through the day without using a nicotine product

7.2 It would be difficult for me to stop using a nicotine product

7.3 I use a nicotine product most days

7.4 I have tried to cut down on nicotine use in the past, but it hasn't worked

7.5 If I **don't** use a nicotine product, I feel bad (e.g. headaches, hard time focusing, irritable, anxious)

7.6 I use a nicotine product when I first wake up in the morning

7.7 I use a nicotine product every day

8. If you or a friend wanted to quit using a nicotine product, where would you go for help, or advice or information?

Select all that apply:

My parents

A friend or peer

Somone at my school (e.g. teacher, counsellor, school nurse, coach)

A doctor or health care provider (e.g. GP, family doctor)

A website (e.g. Quit, Cancer Council, VicHealth)

A telephone helpline (e.g. Quitline)

Social media

Not sure