

Supplementary Material

Table S1. Questionnaire for parents and teachers

1. **Sex:**
 - Man
 - Women
2. **Age: years**
3. **Civil status:**
 - Single
 - Married
 - Separated
 - Divorced
 - Widower
 - Other
4. **Who do you currently live with? (multiple choice):**
 - Alone
 - Spouse
 - Partner
 - Father
 - Mother
 - Offspring
 - Brothers
 - Grandparents
 - Other
5. **What is the highest level of education you have completed or passed?:**
 - No studies
 - Primary education
 - Secondary education
 - University studies
 - Other
6. **Have you born in Spain?:**
 - Yes
 - No
 -
7. **What country were you born in?:**
8. **How many years have you been living in Spain?:**
9. **What were the main sources through which you received information about tobacco?:**
 - Internet
 - Social networks
 - Parents
 - Family members
 - Friends
 - Coworker

- Healthcare professionals
- Courses
- Professionals
- Official bodies
- Books and/or leaflets
- Mass media
- Police
- Other

10. What are the main sources through which you would like to receive better and more objective information about tobacco consumption, and tobacco-associated effects and problems and forms of consumption?:

- Internet
- Social networks
- Parents
- Family members
- Friends
- Coworker
- Healthcare professionals
- Courses
- Professionals
- Official bodies
- Books and/or leaflets
- Mass media
- Police
- Other

11. In your opinion, do you think that the fact that the father or mother smokes can influence the child to do so?:

- Strongly disagree
- Disagree
- Agree
- Strongly agree

12. How much do you think the following factors influence young people starting to smoke? (very influential, somewhat influential, slightly influential, not at all influential):

- The parents smoke
- The friends smoke
- Do not practice sport
- The images or appearance of tobacco packs
- Alcohol consumption
- The additives added to tobacco
- Subliminal advertising

13. Do you know or believe that your child/student smokes?:

- Yes, I know
- I don't think he/she smokes
- I don't know

14. If your child/students smokes, what do you think?:

- I see it well
- I see it wrong
- I don't care

15. You are currently:

- Non-smoker
- Occasional smoker
- Regular smoker
- Ex-smoker (how long have you been without smoking: days ... months... years...)

16. At what age did you start smoking?: ... years

17. How many cigarettes do you smoke a day?:

18. If you are an occasional smoker: Number of cigarettes per week ...

19. If you have ever tried to quit smoking: number of previous attempts ...

20. Why did you stop smoking?:

- Starting of having unpleasant symptoms
- Advice from your family environment
- Advice from healthcare professional
- To save money
- To protect your health
- To set a good example
- To not disturb your surroundings

21. Do you think that smoking is harmful for your health?:

- Yes
- No

22. Do you think that smoking is harmful to the people around you?:

- Yes
- No

23. Has a healthcare professional advised you to quit smoking or have you ever received help from a professional to quit smoking?: Yes (from whom)

- Family physician
- Healthcare center nurse
- Hospital physician
- Pharmacist
- Odontologist
- Other healthcare professional ...

24. Mark those statements with which you agree:

- The doctor must convince people to stop smoking
- The smoker can give up cigarettes willingly
- It is unpleasant to be around a person who is smoking

- Doctors should lead by example and should not smoke
- You are aware of the risks of cigarettes
- Most smokers would not quit cigarettes even if their doctors advised them to

25. Regarding cigarette advertisements, please select those statement with which you agree:

- Warnings about dangers of cigarettes should be on packages
- Pro-cigarette advertising should be forbidden
- People who wish to smoke should do so in places prepared from them
- The price of cigarettes should be considerably increased

26. Would you like your child/student to smoke?

- Yes
- No
- It's his/her decision
- I am indifferent

27. Do you think that electronic cigarettes are harmful to health?:

- Yes
- No
- Unknown/no answer

28. Do you think that electronic cigarettes can influence young people to start smoking?:

- Strongly disagree
- Disagree
- Agree
- Strongly agree

29. Do you think that tobacco consumption encourages young people to consume cannabis or other drugs?:

- Strongly agree
- Agree
- I doubt
- Disagree
- Strongly disagree

30. Do you believe that the use of cannabis (marijuana, hashish) among young people is:

- Uncommon
- Frequent
- Very frequent

31. Do you think that among adolescents the consumption of tobacco and cannabis at the same time is:

- Uncommon
- Frequent
- Very frequent

32. Which of the two products do you consider that is more harmful to health?:

- Cannabis
- Tobacco
- Both to the same extent
- None of them

33. Do you think that tobacco consumption in the car should be regulated?:

- Yes
- No
- Only when there are children inside

34. What do you think are risk factors for tobacco use for your child?:

- Accessibility to consumption
- Influence of the groups of friends
- Lack of information
- Other (please specify)

35. If you child/student smoke, what do you think he/she does it?:

- For friends
- Because smoking at home
- For personal reasons
- Because he/she tried it and liked it
- Other (please specify)

36. Which do you think is the most addictive substance?:

- Tobacco
- Marijuana
- Cocaine
- Alcohol

37. Do you consider than communication with your child/student is?:

- Good
- Very good
- Insufficient

38. Do you have a meeting place with your child/student to discuss topics such as problematic drug use?:

- Never
- Sometimes
- Always

QUESTIONNAIRE FOR TEACHERS

Sex:

- Man
- Women

Age: years

ESO grade:

- First
- Second
- Third
- Fourth

1. Your current smoking status is:

- Daily smoker
- Occasional smoker, some days or during the weekend
- Ex-smoker
- Never smoker

2. If you smoke or have smoked, how old were you the first time you tried tobacco (even if it was just a puff)? _____ years

3. Have you ever given advice or recommendations to your students to prevent or discourage tobacco use?

- Yes
- No

4. Do you think that tobacco advertising in the media (television, radio, cinemas, street signs, nightclubs, bars) influences people to start smoking?

- Yes
- No
- I don't know

5. What reason do you think is most important for not smoking?

- My health
- Fashion
- Saving
- Do not disturbed
- Other

Knowledge about electronic cigarettes

6. In relation to electronic cigarettes you are:

- Non-consumer
- Ex-consumer
- Occasional consumer
- Regular consumer

7. Do you think that the electronic cigarette is harmful to health?

- Yes
- No
- Unknown/no answer

8. **Do you think that electronic cigarettes can influence young people to start smoking?**
- Strongly disagree
 - Disagree
 - Strongly agree
9. **Do you think that tobacco consumption encourages young people to consume cannabis or other drugs?**
- Strongly agree
 - Agree
 - I doubt
 - Disagree
 - Strongly disagree
10. **Do you believe that the use of cannabis (marijuana, hashish) among young people is:**
- Uncommon
 - Frequent
 - Very frequent

Answer only current smokers

11. **Your current tobacco consumption is:**
- Occasional (less than once a week)
 - Weekly (I smoke at least once a week but not daily)
 - All days from 1 to 10 cigarettes
 - All days from 11 to 20 cigarettes
 - All days from 21 to 30 cigarettes
 - All days more than 30 cigarettes
12. **When did you smoke the first cigarette?**
- Before 10 years of age
 - From 10 to 12 years
 - From 13 to 15 years
 - From 16 to 18 years
13. **When did you start to smoke daily?**
- Not yet
 - Before 10 years of age
 - From 10 to 12 years
 - From 13 to 15 years
 - From 16 to 18 years
14. **Which were the reasons for starting smoking? (multiple choice)**
- Influence to imitate my best friends
 - Try to imitate my idols (soccer, music, ...)
 - To imitate elders (parents and/or relatives, teachers...)
 - Desire to establish relationships or social acceptance with other people
 - Due to the influence of tobacco advertising
 - Out of curiosity (to know what it feels like to smoke)
 - Because they prohibited me
 - Other reasons (write): _____

- 15. If you decide to quit smoking, what do you think will be the main reasons (multiple choice)**
- I have no specific reasons
 - Do not contract possible diseases
 - Own decision due to health problems
 - Family/social prohibition/recommendation
 - Respect to non-smokers
 - High price of tobacco
 - My doctor recommends it to me
 - Other: _____
- 16. What has been the longest time that you have been without smoking?**
- I haven't left smoking
 - From 24 to 48 hours
 - From 3 to 7 days
 - More than 1 week
 - From 7 to 30 days
- 17. Do you smoke in places in which smoking is not allowed within the high school?**
- Yes
 - Occasionally
 - Never
- 18. Answer YES or NO to the following questions:**
- Do you think you smoke more or have been smoking for longer, what you originally wanted?
 - Have you tried to quit smoking or would like to quit smoking?
 - Did you have reduced or stopped sports or another activity due to tobacco consumption?
- 19. How long does it take from when you wake up until you smoke your first cigarette?**
- Less than 5 minutes
 - From 6 to 30 minutes
 - From 31 to 60 minutes
 - More than 60 minutes (write the time):
- 20. When do you smoke more often in the morning or afternoon?**
- In the morning
 - In the afternoon
- 21. Which cigarette gives you the most satisfaction or would be more difficult for you to quit?**
- The first of the day
 - The one after meals
 - Any other
- 22. Do you smoke when you are sick?**
- Yes
 - No

23. Do you smoke in forbidden places (movies, bus, school, hospitals, ...)?

- Yes
- No

24. How do you foresee your behaviour in the coming years?

- I will continue smoking daily
- I will not smoke daily
- I will quit