

**Table S1.** Materials and procedures

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- a. **School tobacco policy on smoke-free school hours where students, staff, and visitors are not allowed to smoke during school specified by a fixed time span (e.g., between 7 a.m.-5 p.m.)**  
The school management was responsible for composing and implementing the policy. An implementation manual was developed by the researchers. Each intervention school was visited by the researchers to discuss the program and implementation. The meeting with school manager(s) and staff were in-person and follow-up was delivered electronically or by phone.
- b. **Course for school staff on short motivational counselling about smoking aimed at professionals working with young people.**  
A two-day course was provided to up to four staff members to (i) develop their skills, knowledge, and confidence to enter into dialogues with students about smoking and (ii) creating innovative ways of implementing smoke-free school day, e.g., enjoyable activities in breaks.
- c. **Edutainment session on tobacco products.**  
The session, named ‘Act on it’, lasted for about an hour and was developed in conjunction between the researchers and a professional actor targeting VET students. The purpose of the session was to address the influence from the tobacco industry, to give information about risks and consequences of using tobacco products and addressing the addictive nature of nicotine.
- d. **Classroom-based teaching based on themes about attitudes, beliefs, and social influence as well as wellbeing at school.**  
Each teacher was provided with a compendium with material for eight sessions covering the following themes:
- i. Establishing class ethos; Providing opportunities for students to discuss how to build positive interpersonal peer relationships.
  - ii. Creating enjoyable, social activities in breaks and alternatives to cigarette smoking
  - iii. Absenteeism and truancy, with perspectives on own and others’ responsibility and possibilities for support.
  - iv. “Reality check”: Prejudice about smoking at VET schools and professions; correcting common misperceptions of overestimation of smoking prevalence.
  - v. Beliefs about health and smoking: Addressing immediate health consequences, nicotine dependence, use of other tobacco products (e.g., e-cigarettes) etc.
  - vi. Stress and loneliness: Addressing beliefs about social and psychological benefits of smoking and how to tackle stress and loneliness; recognizing high-risk situations.
  - vii. Environmental influences: Addressing how smoking is influenced by, e.g., family, friends, school, the tobacco industry; discussing the responsibility of being a role model for younger students.
  - viii. Internship and work life: Dilemmas regarding smoking in the workplace.
- The researchers presented the material to involved teachers in a meeting at each intervention school and entered into a dialogue about the material. The component was designed to allow flexibility to meet schools’ individual needs and for them to be feasible deliver it.
- e. **Class-based quit and win competition based on measurements of carbon monoxide (CO) levels.**  
Students participate in a competition with the rest of their class by getting their CO levels in their breath measured at baseline and ten weeks later. The class with the overall highest reduction or maintenance of CO levels win a prize (i.e., a bowling trip for the class). The student was informed about their measured CO level, and the individual results were otherwise kept confidential.
- f. **Information about and easy access to smoking cessation support offered by the national quitline.**  
The national quitline adapted their offer comprising services to VET students and staff who want to quit or reduce smoking. Information about the offer is provided by posters and in the edutainment session where it was possible to register by putting a note with name and phone number in a placed
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mailbox to get called up by the quitline. All students who text message the quitline or put their phone number in the mailbox at the edutainment session received a phone call by the quitline the following two weeks. They were offered three sessions of telephone counselling. Moreover, the counsellor could refer students to smoking cessation programmes in their municipality or at the school.

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