

CTP - ADOLESCENT SCREENER

Project Specs:

- A total of three, two hour focus groups - Recruiting 8 to seat 7-8; total of 24 recruits
- One group of teens per market, specifics in the Table 1
- Recruit 8 teens ages 15-17 – Mix of Ages
- Range of ethnicities
- Range of education
- All Classify as “At Risk” - To qualify as AT RISK – must either currently use cigarettes, chewing tobacco, dip, snuff, smokeless products, etc., at least once-a-week or do not say “Definitely Not” to any of questions 8a, 8b or 8c asking about future likelihood of smoking a cigarette.

Table 1

	Louisville, KY	Portland, OR	New York, NY
Age	15-17 years old	15-17 years old	15-17 years old
Gender	Males	Females	Males
Ethnicity	Mix	Mix	Mix
Education	Mix	Mix	Mix

Parent Introduction:

Hello Mr. /Ms. _____, my name is _____ and I would like to talk to you about a focus group study we plan to conduct for a health promotion agency. We are recruiting for an upcoming focus group in which participants will be asked to share their thoughts and feelings about information regarding health, health products, tobacco, advertising and marketing. We believe it is particularly important to talk with teens about this issue. Can we speak to _____ **[teen’s name]** to see if they are able to participate in the study? If he/she is able to participate, we will need you to sign a consent form and have him/her bring it to the focus group.

SCREENER QUESTIONS

(ASK TO SPEAK TO ADULT HEAD OF HOUSEHOLD.)



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1. Do you or does anyone in your family work for any of the following?

YES NO

A manufacturer or distributor of toys.....().....()
and/or games

An advertising agency.....().....()

A shoe manufacturer or retailer.....().....()

A public relations firm.....().....()

A candy company.....().....()

A government health agency.....().....()

A marketing or market research firm.....().....()

An airline.....().....()

A tobacco manufacturer, retailer or distributor.....().....()

A tobacco advocacy or control group.....().....()
of tobacco products

(THANK AND END INTERVIEW IF ANY OF THE 'YES' BOXES ARE CHECKED ABOVE.)

2.A. What is the sex, age and grade in school for each child between the ages of 15 and 17 currently living in your household?

SEX.....AGE.....GRADE

1. Male Female.....1.....1.....

2. Male Female.....2.....2.....

3. Male Female.....3.....3.....

RECRUIT A MIX OF GIRLS & BOYS; MIX OF AGES 15-17 (only one per household)

2.B. What is the name of your (SON/DAUGHTER) who is (SELECTED AGE) years old?

3. Which of the following statements would you say best describes (INSERT TEEN'S NAME) when meeting other people for the first time? Does (HE/SHE)...

() ...tend to be open, outgoing and talkative..... (CONTINUE)

or

() ...tend to be somewhat shy, quiet and reserved (THANK AND END INTERVIEW)

4. I have just a few short questions to ask your **(SON/DAUGHTER)**. Is **(HE/SHE)** home right now? May I speak to **(HIM/HER)**? **(IF TEEN IS NOT HOME, ASK WHEN YOU COULD CALL BACK.)**

DATE: _____

CALL BACK TIME: _____

[WHEN TEEN COMES TO THE PHONE, BE SURE TO INTRODUCE YOURSELF FIRST AND THANK HIM/HER FOR TALKING WITH YOU.]

My name is _____ and I'm with a national research organization. I'm conducting a survey and would like to include your opinions. Can I ask you a few questions? Try and answer as honestly as possible, our answers will be kept confidential to the fullest extent allowed by law and no one will know how you answered.

****RECORD GENDER**

MALE _____

FEMALE _____

4.A. How old are you? What grade are you in?

5.A. Have you **ever** participated in any research studies where you went to a research facility and answered questions from an interviewer?

Yes..... **(CONTINUE TO Q.6)**

No..... **(SKIP TO Q.7)**

6. And what did you talk about in that group?

[THANK AND END INTERVIEW IF ANY PREVIOUS TOBACCO, TOBACCO PRODUCTS RELATED RESEARCH.

7A. Have you ever smoked a cigarette, chewing tobacco, dip, snuff etc.

Yes _____ **(CONTINUE TO Q.7B)**

No _____ **(CONTINUE TO Q.8)**

7B. Do you currently smoke a cigarette, chewing tobacco, dip, snuff etc., at least once a week

Yes _____ **(CONTINUE TO Q.7C)**

No _____ **(CONTINUE TO Q.8)**

7C. Thinking about a normal week during the school year, how many times would you say you have used tobacco in an average week? **(DO NOT READ LIST. RECORD ONLY ONE RESPONSE.) ALL MUST BE CATEGORIZED AS HIGH RISK. Skip to Q.9**



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1 or 2 ()

3-4 ()

5 or more ()

- 8A. Do you think you will use a tobacco product in the next year?
- A. Definitely yes
 - B. Probably yes
 - C. Probably not
 - D. Definitely not
- 8B. Do you think that you will try a tobacco product soon?
- A. Definitely yes
 - B. Probably yes
 - C. Probably not
 - D. Definitely not
- 8C. If one of your best friends were to offer you a tobacco product, would you use it?
- A. Definitely yes
 - B. Probably yes
 - C. Probably not
 - D. Definitely not

[ALL RESPONDENTS ARE TO BE CONSIDERED “AT RISK” AND MUST ANSWER ALL 3 QUESTIONS A, B, OR C. NO RESPONDENT CAN ANSWER D “DEFINITELY NOT” TO ANY QUESTION. IF RESPONDENT ANSWERS “D – DEFINITELY NOT” TO ANY QUESTION, THANK AND END INTERVIEW.]

9. I have a number of statements and I would like you to tell me whether you strongly agree, agree somewhat, neither agree nor disagree, disagree somewhat or strongly disagree with each statement. **(READ STATEMENT, THEN READ SCALE. REPEAT SCALE AS NECESSARY.)**

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE
I make friends easily.....	()	()			
.....	()	()			
.....	()				
My friends often come to me for advice.....	()	()			
.....	()	()			
.....	()				
Among my friends I am usually the first to try new products, music or clothes.....	()	()			
.....	()	()			
.....	()				
A lot of kids admire me.....	()	()			
.....	()	()			
.....	()				

[RESPONDENT MUST HAVE AT LEAST 3 CHECKS IN THE BOX ABOVE IN ORDER TO CONTINUE. OTHERWISE, THANK AND END INTERVIEW.]

10. Do any of your family members at home smoke or use tobacco?

- () Yes **(CONTINUE TO Q. 11)**
- () No **(SKIP TO Q. 12)**

11. What is their relation to you? What do they use?

- Brother/Sister _____
- Parent _____
- Uncle/Aunt _____
- Cousin _____
- Other (since the adolescent may live with a grandparent, guardian, etc. _____)

Again, please know that all your answers will remain completely confidential to the fullest extent allowed by law for the next few questions, just try to answer as honestly as you can.

12. Are you of Hispanic/Latino Origin?

- a. Yes []
- b. No []

13. Which of the following best describes your ethnic background? (Record)



- Caucasian q
- African American q
- Native Hawaiian/Pacific Islander q
- American Indian/Alaskan Native..... q
- Asian q
- Other q

QUOTA: 50% CAUCASIAN, 25% AFRICAN AMERICAN, 25% OTHER ETHNICITY

[THE NEXT QUESTIONS ARE USED TO ESTABLISH ARTICULATENESS. RECORD RESPONSES VERBATIM. IF RESPONDENT SEEMS INARTICULATE, UNWILLING TO ANSWER FULLY, OR OFFERS ONLY EXTREMELY BRIEF ANSWERS, THANK AND END INTERVIEW. IF OPEN AND TALKATIVE—MEANING RESPONDENT GIVES AT LEAST ONE COMPLETE SENTENCE OF A MINIMUM OF 9 WORDS—CONTINUE.]

13A. Do you think there is too much violence on TV shows for kids? Why or why not? If they took out some of the fighting, would you still watch those shows? Why or why not?

[DETERMINE IF RESPONDENT IS HESITANT TO SPEAK. IF HE/SHE IS OVERLY SHY ON THE TELEPHONE OR HAS A HEAVY ACCENT, THANK AND END INTERVIEW. [RECRUITER: THIS IS ABSOLUTELY CRITICAL TO THE SUCCESS OF THIS PROJECT. OTHERWISE, CONTINUE.]

14. You can tell from the questions I've been asking, the subject matter of this research is somewhat personal. Would you be comfortable talking to an interviewer about your thoughts regarding tobacco use?

- () Yes..... (CONTINUE)
- () No..... (THANK AND END INTERVIEW)

Invitation to youth:

From what you told me it looks like you are eligible to participate in the study. I would like to invite you to join about 8 other teens that also use tobacco products in a group discussion. The discussion will last no more than two hours, will be video- and audio-taped, and observed by the focus group staff. As I said earlier, your participation and everything you say during the discussion will remain confidential. You will receive \$TBD for participating. Additionally, we will serve you snacks and beverages before the group discussion starts. Are you interested in participating in this focus group?

- [YES] Continue
- [NO] TERMINATE



Because you are under age 18, we will need a parent or guardian's permission for you to be in the focus group. Will you be able to have a parent or a guardian sign a form giving you permission to attend?

[YES] Continue
[NO] TERMINATE

You will need to bring the consent form that I will provide to you. The form must have your parent or guardian's signature when you come to the focus group. If you don't have this consent form, you will not be able to participate.

I'm glad that you will be able to join us! The focus group will take place on **[Day], [Date], at [6:00 or 8:00 p.m.] at [site location]**. If you normally wear corrective lenses, contacts, or glasses to read please remember to have them with you during the focus group.

Will you be available to participate at this time?

[YES] Continue
[NO] TERMINATE

I will send you a confirmation letter and directions to the facility. In order to do so, could you please tell me your mailing address (or fax number, e-mail address) and a phone number where you can be reached:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
Email: _____
Date of focus group: _____ Time: _____

We are only inviting a few people, so it is very important that you notify us as soon as possible if for some reason you are unable to attend. Please call **[recruiter]** at **[telephone number]** if this should happen. We look forward to seeing you on **[date]** at **[time]**.



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Great! That's all the questions I have.

[Speak to parent/guardian]

We're conducting a research discussion with young people on _____ (date/time) at _____ (location), and we would like (insert teen's name) to participate. We are conducting this research on behalf of a non-profit health organization which educates teens about tobacco use and urges them to make healthy choices. He/ she will be part of a discussion and share his/her opinions and attitudes on health and lifestyle habits with a professional interviewer. The discussion will last about 2 hours. This experience should be both fun and educational for your teen. Your son/ daughter will be paid _____. Do you give your teen permission to participate?

- Yes..... **(CONTINUE)**
- No..... **(THANK AND END INTERVIEW)**

[THANK THEM AGAIN. END OF SCREENER. WHEN CALLING TO CONFIRM THE APPOINTMENT, PLEASE REMIND RESPONDENTS TO ARRIVE 15 MINUTES BEFORE START TIME.]