**Form Approved**

**OMB No. 0920-xxxx**

**Exp. Date xx/xx/xxxx**

**MUH RESIDENT FOCUS GROUP GUIDE – PROCESS-ORIENTED**

**Public reporting burden of this collection of information is estimated to average one hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-xxxx)**

|  |  |
| --- | --- |
| Focus Group Number: |  |
| Date: |  |
| Time: |  |
| Location:  |  |
| Number of Participants: |  |

**Introduction**

Thank you for agreeing to join us for our discussion today. My name is \_\_\_\_\_\_\_\_\_\_\_\_ and I’ll be guiding you through this focus group.

A focus group is a small group discussion of a particular topic. The purpose of today’s group is to hear your opinions on what you think about the smoke-free policies in your apartment complexes. We’re bringing together people from several different complexes in the area to get a variety of opinions. I’m not an expert on smoke-free policies. I’m here to listen and learn from your thoughts.

Please be honest and open with your answers – there are no right or wrong answers. From past experience in groups like this, we know that some people like to talk a lot, and some people don’t say much. It’s important that we hear from all of you because you’ve had different experiences and we want to hear a wide range of opinions. So, if you are talking a lot, I may interrupt you, and if you aren’t saying much, I may call on you. All of your answers will be maintained in a secure manner and your name will not be linked with your answers in any of our reports. We will be audio-recording this session to help us write our report. This recording will not be shared with anyone outside of the research team.

1. **Warm-Up**
	1. To start us off, please tell us your first name and the reason you’re here today. I’ll start.
2. **Housing Preferences**
	1. Now let’s talk about how you decided to live in your apartment complex. What information was most important to you when you were deciding where to live?
	2. What were your experiences with smoke-free policies in other apartment complexes?
	3. How did your apartment complex’s smoking policy influence your decision to live there?
3. **Involvement in Creating Smoke-Free Policies**

Now we’re going to talk more specifically about the smoke-free policy in your apartment complex.

3.1 For those of you **who were living here** when the smoke-free policy was created, how did you feel about the residence going smoke-free?

3.1.1 What kind of input or feedback did the property manager ask for from you and other residents?

3.1.2 Who do you think participated?

3.1.3 How do you think management took resident comments into account when creating the policy?

3.1.4 What problems did residents or others who wanted to put a smoke-free policy in place at the complex face **at the time**?

3.1.4.a What do you think was the biggest problem?

3.2 **If you weren’t involved** in getting a smoke-free policy adopted in your building, or you moved in after it was in place, how did you hear about the policy?

3.2.1 What kind of information did the property manager give you when you moved in?

3.2.2. How persuasive was the information about why the apartment has smoke-free policies?

3.2.3. How did you feel about the way they told you about the policy?

3.2.4. What did other residents tell you about the policy?

1. ***Opinions About MUH Smoke-Free Policies***

Now I’d like to ask **all of you** to tell me a bit about how you think the policy is working.

4.1 What do you think your housing manager should do to make sure that the policy is working?

* + 1. What do you think about a “grandfather clause” that lets smoking residents who already lived here continue to smoke in non-smoking areas?
		2. How would you like to be involved in seeing that this policy is carried out?
		3. How would you like to see management involved in enforcing the smoke-free policy?
	1. Think back on your experience with the smoke-free policy in your apartment complex.

4.2.1 What do you think some of the benefits are of your complex’s smoke-free policy? What do you think some of the drawbacks are?

4.2.2 Overall, how do you like living in a smoke-free apartment complex? What do you like most? What do you like least?

4.2.3 In general,what do you think are the most common problems encountered by people trying to get a smoke-free policy put in place in their apartment complex?

 4.2.3.1 What do you think are the hardest problems to overcome?

 4.2.3.2 Do you have any suggestions on ways to overcome these problems?

* 1. Would you recommend your complex to people because of the policy?
1. **Close**

5.1 Before we end, do you have any thoughts or ideas about your complex’s smoking policy that we haven’t already discussed?

Thanks very much for your input today on behalf of the Centers for Disease Control and Prevention.