**SCREENER TO RECRUIT FOR FOCUS GROUPS**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **INTRODUCTION**  Hello, my name is \_\_\_\_\_\_\_\_\_\_\_\_ and I am calling on behalf of **Opinions Ltd.**, a professional marketing research company. We will be conducting focus groups to test some ad campaign strategies aimed at youth. Please be assured that this research does not involve sales of any kind, we are just interested in your opinions. The research will be at [INSERT LOCATION] during the week of [INSERT DATE] and will take approximately 90 minutes. Those who participate will receive up to $75 as a thank you for takingpart in the study.. May I please speak with a parent or guardian over the age of 18 to see if someone in your household is qualified to participate in the study?  **[CONFIRM THAT YOU ARE NOW SPEAKING WITH THE HEAD OF THE HOUSEHOLD. REPEAT INTRO IF CALL WAS TRANSFERED]**  May I ask you a few questions to see if anyone in your household is qualified to participate in the study?   |  |  |  | | --- | --- | --- | | Yes | ( ) | [CONTINUE] | | No | ( ) | **[THANK AND END]** |   Great! Before we begin, you should know that there are no right or wrong answers to the questions I’m going to ask you. You also don’t have to answer some questions if you don’t want to. If an answer leads to me ending the call, this doesn’t mean that there was anything wrong with the answer you provided.  **SECTION 1: PARENT SCREENER QUESTIONS** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1A. | To begin, I have several demographic questions to ensure that we speak to a variety of households. We aim to talk to households in specific geographic areas. Can you please confirm the county you live in? **WRITE IN SPECIFIC COUNTY:** | | | |
|  | |  |  |  |
|  | |  |  |  |
|  | |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1B. | Have you lived in INSERT COUNTY or a neighboring county for the last 5 years? **RECORD ONE ANSWER** | | | |
|  | |  |  |  |
|  | | Yes | [ ] | **> CONTINUE** |
|  | | No | [ ] | **> TERMINATE** |

|  |
| --- |
| **TERMINATION LANGUAGE:** Thank you for taking the time to answer these questions. Unfortunately, based on the responses you provided, you do not meet the specifications we are looking for this study. I appreciate your time and have a good morning/afternoon/evening. |

|  |  |  |  |
| --- | --- | --- | --- |
| 2. Are there any boys between the ages of 12 and 17 currently living in your household? | | | |
|  | Yes | [ ] | **> CONTINUE** | |
|  | No | [ ] | **> TERMINATE** | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 3. | Could you please tell me their name, age, and grade? **ENTER INFO FOR EACH BOY**   |  |  |  | | --- | --- | --- | | **CHILD NAME** | **AGE** | **GRADE** | |  |  |  | |  |  |  | |  |  |  | |

**HIGHLIGHT THE BOY WHO QUALIFIES TO PARTICIPATE. IF MORE THAN ONE BOY QUALIFIES, CHOOSE OLDEST BOY UNLESS YOUNGER AGE GROUP QUOTAS ARE NOT FILLED.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 4. | Which of the following best describes your son’s racial or ethnic background? | | | |
|  | |  |  |  |
|  | | White or Caucasian | [ ] | **> CONTINUE** |
|  | | Black or African American | [ ] | **> TERMINATE** |
|  | | Asian | [ ] |
|  | | Hispanic or Latino | [ ] |
|  | | Native American or Alaska Native | [ ] |
|  | | Native Hawaiian or Other Pacific Islander | [ ] |
|  | | Mixed or Other | [ ] |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 5. | Which of the following categories includes your total annual household income? **READ & RECORD BELOW** | | | |
|  | |  |  |  |
|  | | Under $49,999 | [ ] | **> IF Paducah OR Charleston** |
|  | | $50,000 - $99,999 | [ ] | **> IF Wichita OR Oklahoma City** |
|  | | $100,000 or higher | [ ] | **> TERMINATE** |

**READ:** As I mentioned earlier, our research study is to test strategies for a public health campaign being developed by the FDA that is aimed at youth growing up in your area and we are setting up focus groups. If your son qualifies and participates, he will receive $40 as a token of appreciation for taking part in the focus group and $10 for completing a homework assignment prior to the focus group. The homework will help facilitate some of the focus group activities; it will be administered online and will take your son about 15 minutes to complete. You or another parent/guardian would also receive an additional $25 for as a token of appreciation, which includes telephone screening time, travel to and from the focus group facility, and participating in (or waiting during the) 90-minute focus group session.. This particular public health campaign concerns smokeless tobacco usage. We will not share your son’s responses regarding smokeless tobacco with you. We want to hear a range of thoughts and opinions and just because your son may be eligible to participate doesn’t mean he is a smokeless user.

There will be no attempt to sell you or your child anything. Any personal information collected will be used for research purposes only and kept private to the extent allowable by law. All personal information, including information collected during screening, will be kept for a period of three years and stored on a password-protected computer or in a locked cabinet, and accessible only by limited study personnel. Upon completion of the study, all personal information will be destroyed either by the secure shredding of documents or the permanent deletion of electronic information.

Before we go on, do you have any questions for me?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 6. | If your son qualifies, do you consent to him taking part in a focus group? | | | |
|  | |  | | |
|  | | Yes | [ ] | **> CONTINUE** |
|  | | No | [ ] | **> TERMINATE** |

**READ:** We have a few more questions for you, and then we will need to talk briefly with your son, too.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 7. | Have you, or has any member of your immediate family or a close friend, now or in the past five years, worked for or had any special knowledge of any of the following types of businesses? **READ LIST AND RECORD BELOW** | | | |
|  | |  |  |  |
|  | | an advertising or public relations firm? | [ ] | **> TERMINATE IF YES TO ANY** |
|  | | a marketing or market research firm or department? | [ ] |
|  | | a marketing or market research consultant? | [ ] |
|  | | any kind of media company – like a TV or radio station or newspaper? | [ ] |
|  | | the federal government or a federal government agency? | [ ] |
|  | | a manufacturer or representative of tobacco? | [ ] |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 8. | Please answer the following questions about your son, INSERT NAME who is INSERT AGE years old. Would you say that he would be comfortable meeting new people, or is he more on the quiet side? **RECORD ONE ANSWER** | | | |
|  | |  | | |
|  | | Comfortable meeting new people or | [ ] | **> CONTINUE** |
|  | | On the quiet side. | [ ] | **> TERMINATE** |

9. When, if ever, was the last time INSERT NAME participated in a marketing research study, such as a consumer interview or a group discussion? **DO NOT READ LIST**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | | | |
|  | | Within the past six months | [ ] | **> TERMINATE** |
|  | | Over six months ago | [ ] | **> CONTINUE** |
|  | | Never | [ ] | **> SKIP TO Q11** |

10. Please think about the market research studies your child has participated in. What were the topics of the market research that he participated in? **RECORD BELOW**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | | | |
|  | | 1) | | 2) |
|  | |  |  | |
|  | | 3) | | 4) |

**IF RESPONDENT IS UNABLE TO RECALL TOPIC(S) OR IF PREVIOUS PARTICIPATION IS ANYTHING RELATED to TOBACCO >TERMINATE. OTHERWISE, CONTINUE.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 11. | Thank you for your time. As a final step in determining if your son qualifies for this research, may I please ask INSERT NAME a few quick questions about his opinions on health-related behaviors? | | | | |
|  |  | | |  |  |
|  | | Yes | | [ ] | **> CONTINUE** |
|  | | No | | [ ] | **> TERMINATE** |
|  |  | | |  |  |
|  | **IF CHILD IS NOT AT HOME, ARRANGE FOR A CALL-BACK TIME WHEN THE CHILD AND PARENT WILL BE AVAILABLE** | | | | |
|  | **CALL BACK TIME:** | |  | | |

|  |
| --- |
| **SECTION 2: CHILD SCREENER QUESTIONS**  **WHEN THE CHILD IS ON THE PHONE, PLEASE INTRODUCE YOURSELF AND SAY:** Hi[CHILD NAME]**!** I was just talking with your [mom/dad/guardian] and they said it would be okay if I ask you a few questions to see if you qualify to take part in a focus group research study. May I ask you a few questions? |

|  |  |  |
| --- | --- | --- |
| Yes | ( ) | [CONTINUE] |
| No | ( ) | **[THANK AND END]** |

**READ:** Great! The focus groups are going to test ideas for public health advertisements that are being developed by the FDA and are aimed youth like you. Before we begin, you should know that there are no right or wrong answers to the questions I’m going to ask you. You also don’t have to answer any questions if you don’t want to. If an answer leads to me ending the call, this doesn’t mean that there was anything wrong with the answer you provided. I also might be asking you some questions about smokeless tobacco. Just so you know, I will not be sharing your responses with your mom/dad/guardian, and I already told them that.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | | | | |
| 12. | Have you ever tried chewing tobacco, snuff or dip? **READ:** Remember we will not share your responses with your parent(s)/guardian(s). | | | |
|  |  | |  |  |
|  | | Yes | [ ] | **> CONTINUE** |
|  | | No | [ ] |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 13. | Do you think you will use chewing tobacco, snuff or dip soon? | | | |
|  | |  |  |  |
|  | | Definitely yes | [ ] | **> CONTINUE** |
|  | | Probably yes | [ ] |
|  | | Probably not, or | [ ] |
|  | | Definitely not | [ ] |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 14. | Do you think you will use chewing tobacco, snuff or dip in the next year? Would you say… | | | |
|  | |  |  |  |
|  | | Definitely yes | [ ] | **> CONTINUE** |
|  | | Probably yes | [ ] |
|  | | Probably not, or | [ ] |
|  | | Definitely not | [ ] |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 15. | Do you think in the future you might experiment with chewing tobacco, snuff or dip? Would you say… | | | |
|  | |  |  |  |
|  | | Definitely yes | [ ] | **> CONTINUE** |
|  | | Probably yes | [ ] |
|  | | Probably not, or | [ ] |
|  | | Definitely not | [ ] |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 16. | If one of your best friends were to offer you chewing tobacco, snuff or dip, would you use it?Would you say… | | | |
|  | |  |  |  |
|  | | Definitely yes | [ ] | **> CONTINUE** |
|  | | Probably yes | [ ] |
|  | | Probably not, or | [ ] |
|  | | Definitely not | [ ] | **> IF Q13, Q14, Q15 & Q16 are “DEFINITELY NOT” TERMINATE** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 17. | Do you have any \_\_\_\_\_\_ who use chewing tobacco, snuff or dip? | | | | | | |
|  |  | | |  |  |  |
|  | | Family members | [Yes ] [ No ] | | **> IF “NO” OR “N/A” TO ALL TERMINATE** | |
|  | | Friends | [Yes ] [ No ] | |
|  | | Teammates | [Yes ] [ No ] [N/A] | |

18. Now for a fun question. What is your favorite food? Why do you like it so much? Where do you usually eat it? **PROBE** What else? **RECORD BELOW**

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  | Anything else? |
|  |  |
|  | **[THIS QUESTION WILL BE USED TO ESTABLISH ENGLISH PROFICIENCY AND ARTICULATENESS. RECORD RESPONSES VERBATIM. IF RESPONDENT 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.]** |
|  |  |

**SMOKELESS GROUP CATEGORIZATION**

**[ASSIGN RESPONDENT TO GROUP BASED ON AGE AND SMOKELESS GROUP ACCORDING TO RESPONSE PATTERNS BELOW]**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **SLT EXPERIMENTER** | **AT-RISK FOR SLT USE** | **NOT SUSCEPTIBLE TO USE: TERMINATED** |
| **Q12** | Yes | No | Yes / No |
| **Q13** | Probably Not / Probably Yes / Definitely Yes | Probably Not / Probably Yes / Definitely Yes | Definitely Not |
| **Q14** | Probably Not / Probably Yes / Definitely Yes | Probably Not / Probably Yes / Definitely Yes | Definitely Not |
| **Q15** | Probably Not / Probably Yes / Definitely Yes | Probably Not / Probably Yes / Definitely Yes | Definitely Not |
| **Q16** | Probably Not / Probably Yes / Definitely Yes | Probably Not / Probably Yes / Definitely Yes | Definitely Not |

**SECTION 3: INVITATION TO TEEN TO PARTICIPATE IN FOCUS GROUP**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Thank you for your time today. We would like to invite you to participate in a focus group. The focus group will take place at **LOCATION** and we will be asking your reactions to several public health advertising concepts. Portions of the interview will be audio recorded.  The interviews are being held on **DATE** and will last **approximately 90 minutes.**  Your opinions are very important to us. You will be paid up to **$50** to participate, including **$40 for the focus group and an additional $10 for you to complete an activity before the focus group.** You will be given a check (or an alternative form of payment, such as a gift card THAT FUNCTIONS AS A PRE-PAID DEBIT CARD, if a check is not acceptable) will be issued upon completion of the session.  People who have been invited to participate in this type of project have found the experience to be enjoyable and informative. | | | |
| 19. | Are you interested in participating in this study? | | | |
|  |  | | | |
|  | | Yes | [ ] | **> CONTINUE** |
|  | | No | [ ] | **> TERMINATE** |

In order to prepare for the interview, there is a short activity for you to complete. We ask that you complete the activity before the interview to receive the additional $10. You will need to complete a short online questionnaire, which will take about 15 minutes. We will send you a link to access the questionnaire.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 20. | Are you able to complete the activity by **DATE**? | | | |
|  |  | | | |
|  | | Yes | [ ] | **> CONTINUE** |
|  | | No | [ ] | **> TERMINATE** |

21. What is your email address so we can send you an assent form and link to the homework questionnaire to complete and submit before the focus group?

Record email address:

|  |
| --- |
|  |

**READ:** Okay, great! Before I ask you to put your [mom/dad/guardian] back on the phone, do you have any questions for me?

[ANSWER CHILD’S QUESTIONS, IF ANY]

**READ:** Now can you please put your [mom/dad/guardian] back on the phone so that we can schedule a time that works for everyone.

**SECTION 4: SCHEDULING THE FOCUS GROUP (WITH PARENT)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **ONCE THE [PARENT/GUARDIAN] IS ON THE PHONE READ:** Your son has been selected to participate in our focus group.The focus group will take place at **LOCATION** and we will be asking his reactions to several public health ad concepts.  Your son’s opinions are very important to us. You will be paid $25to accompany your son to/from the focus group location. Your son will receive $40 for participating in the focus group and an additional $10 if he completes his homework activity. You and your son will be given a check (or an alternative form of payment, such as a gift card THAT FUNCTIONS AS A PRE-PAID DEBIT CARD, if a check is not acceptable) will be issued upon completion of the session.  22. The interviews are being held on **DATE/TIME.** Does your son have your permission to participate? | | | | |
|  | |  | | | |
|  | | | Yes | [ ] | **> SCHEDULE INTERVIEW** |
|  | | | No | [ ] | **> TERMINATE** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | 23. Can you arrange to provide transportation to the focus group location on the day of the session? | | | |
|  |  | | | |
|  | | Yes | [ ] | **> CONTINUE** |
|  | | No | [ ] | **> TERMINATE** |
|  |  | | | |

1. What is your email address so we can send you a consent form to complete and submit before the focus group?

Record email address:

|  |
| --- |
|  |

**READ:** Great! I am going to give you the address and contact information for the facility. Do you have a pen and paper?

**[FACILITY ADDRESS & CONTACT INFORMATION]**

|  |  |
| --- | --- |
| **NAME OF CHILD FOR CHECK** |  |
|  |  |

**NOTE:** If a check is unacceptable, participant will be offered a gift card that functions as a pre-paid debit card. PLEASE NOTE IF PRE-PAID DEBIT CARD IS REQUESTED.

**READ:** We will be emailing a link to consent forms for you and your son to complete and submit prior to the interview.

Please complete and submit the consent forms within 24 hours of receiving them. Your son will not receive his pre-interview activity instructions until we have received both consent forms. He will need to complete the assignment by **DATE** in order to receive the $10 incentive for completing the homework activity.

|  |  |
| --- | --- |
| **CHILD’S EMAIL FOR CONSENT FORM** | [VERIFY FROM ABOVE] |
|  |  |
| **PARENT’S EMAIL FOR CONSENT FORM** |  |

**ADVISE PARENT/GUARDIAN**

* Thank them for agreeing to participate in focus groups. Remind them to write down the [day, date, time of interview: *give info here*].
* Advise that they will receive a confirmation letter, consent forms, as well as a reminder phone call of the focus group.
* Remind them to submit assent/consent forms electronically within 24 hours of receiving them
* Remind them that their child needs to complete an activity prior to the focus group in order to be paid the additional $10.
* Request that the child complete the activity on his own to ensure only his ideas, thoughts, and opinions are captured.
* Please be sure there are no scheduling conflicts.

**READ:** Before we end the call, do you have any questions for me?

**[ANSWER QUESTIONS, IF ANY. THANK AND END]**