

# PATH Wave 4 Focus Groups Electronic Nicotine Products Recruitment Screener

Westat, a research firm located in Rockville, MD, is doing research for the National Institutes of Health in partnership with the Food and Drug Administration for a study about tobacco use. If you are eligible and you agree to participate, we will give you \$50 as a thank you to participate in a focus group discussion that should last about an hour and a half. In order to find out if you are eligible to be interviewed, I need to ask you a few questions. Your answers to these questions will only be used to determine whether you are eligible to participate in the interview. Some of these questions are personal. We will keep your answers confidential, but if you would prefer not to answer any of the questions, just let me know.

1. May I go ahead?

- YES
- NO → **TERMINATE**

2. How old are you?

- UNDER 18 → **INELIGIBLE**
- \_\_\_\_\_

3. How many individual interviews or focus groups have you participated in at survey research companies in the past year?

- 0
- 1-2
- MORE THAN 2 → **TERMINATE**

Public reporting burden for this collection of information is estimated to average 10 minutes 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: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0675). Do not return the completed form to this address.

4. Which of the following tobacco products do you currently use?

- Cigarettes
- Cigars or cigarillos  
*examples: Black & Milds, Swisher Sweets, Dutch Masters, White Owl, Phillies Blunts*
- Chewing tobacco, snuff, or dip  
*examples: Skoal, Copenhagen, Grizzly, Levi Garrett, Red Man, Day's Work*
- Snus  
*pronounced to rhyme with goose*
- Pipe
- Hookah
- Do not use any tobacco products

5. Do you currently use any of the following electronic nicotine products?

**CHOOSE ALL THAT APPLY.**

- E-Cigarettes, including vape pens, personal vaporizers, and mods
- E-Cigars
- E-Hookahs and hookah pens
- E-Pipes
- Other electronic nicotine products

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DO NOT USE ELECTRONIC NICOTINE PRODUCTS → **INELIGIBLE**

6. Do you currently use a disposable electronic nicotine product? [These are products that you can only use once and are not rechargeable.](#)

- YES
- NO

7. Do you currently use an electronic nicotine product that is rechargeable and has a tank you can refill?

- YES
- NO

8. Do you currently use an electronic nicotine product that is rechargeable and has a cartridge you can replace?

YES

NO

9. Do you currently use an electronic nicotine product with a cartomizer or a clearomizer?

YES

NO

10. Have you modified or rebuilt your electronic nicotine product in any way?

YES

NO

11. Are you male or female?

MALE

FEMALE

12. Are you Hispanic, Latino, Latina, or of Spanish origin?

YES

NO

13. What is your race? **CHOOSE ALL THAT APPLY.**

- AMERICAN INDIAN OR ALASKA NATIVE
- ASIAN
- BLACK OR AFRICAN AMERICAN
- NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
- WHITE

14. What is the highest level of education you have completed?

- LESS THAN HIGH SCHOOL
- COMPLETED 12<sup>TH</sup> GRADE/HIGH SCHOOL GRADUATE
- SOME COLLEGE/2-YEAR COLLEGE/TECHNICAL SCHOOL
- COLLEGE DEGREE
- GRADUATE OR PROFESSIONAL SCHOOL

**IF INELIGIBLE**

Thank you very much for your interest, but you are not eligible for this study. Thank you very much for your time. We will destroy the information you have provided.

**IF ELIGIBLE**

Thank you for answering all my questions. We will contact you if you are selected to participate in an hour-and-a-half-long focus group. We will ask you to bring your electronic nicotine product with you to the group. [For modifications focus group: Please bring the electronic nicotine product you have modified.] You will receive \$50 as a thank you.

Can I have your name, address, phone number and/or email so that we can get in touch with you?

COLLECT RESPONDENT NAME, ADDRESS, AND PHONE NUMBER/EMAIL.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_