OMB No.:

### RTI/FDA Tobacco Focus Groups - Adults Screening Questionnaire Nicotine Knowledge

Hello, this is \_\_\_\_\_\_ from [FACILITY NAME], a local market research firm. May I please speak to\_\_\_\_\_\_?

(Hello, this is \_\_\_\_\_\_\_ from [FACILITY NAME], a local market research firm.) We are working with RTI International, a nonprofit research organization, and the Food and Drug Administration (FDA) on a research study about tobacco products, and would like to include your opinions. I want to assure you that we are not from a tobacco company or a company that sells quit-smoking aids.

We are holding a group discussion on [DATE] with approximately 9 other people like you. The discussion group starts at [TIME] and will last no longer than 90 minutes. For study purposes, the group discussion will be audio recorded, and FDA project team members may observe the discussion.

In appreciation for your participation, you will be reimbursed for your time, effort, and travel expenses. Participation in the groups is completely voluntary and your responses will be kept confidential. Would it be OK if I ask you a few questions now in order to see if you are eligible to be in one of the groups?

Yes – Continue. No – Thank and end call.

1. What is your current age? \_\_\_\_\_

18–20	Recruit for YA group.
21–25	Recruit for YA group.
26–29	Recruit for Adult group.
30–34	Recruit for Adult group.
35–39	Recruit for Adult group.
40–45	Recruit for Adult group.
46–49	Recruit for Adult group.
50–59	Recruit for Adult group.
60–65	Recruit for Adult group.
Over 65	Recruit for Adult group.

Exp. Date:

2. Do you currently smoke cigarettes ...? (*Read list.*)

Every day	Continue, recruit for "Current".
Some days	Continue, recruit for "Intermittent"
Not at all	Thank the respondent and terminate.

3. **[Some days only.]** On average, when you smoked during the past 30 days, about how many cigarettes did you smoke a day? Would you say...? *(Read list.)* 

Fewer than 10	Continue.
10 or more but less than	30 Continue.
30 or more	Continue.

4. Do you typically smoke menthol cigarettes?

Yes	Continue, eligible for Menthol group
No	Continue, eligible for to "Current" group

5. Do you currently use any other tobacco product in addition to smoking cigarettes?

Yes	Continue, assign to "Dual" group	
If yes: Why types of tobacco products do you use?		
	Cigars, little cigars, or cigarillos	
	Pipes	
	Snus	
	Hookah	
	Chew tobacco, dip, or snuff	
	Dissolvable tobacco products	
	Electronic cigarettes (e-cigarettes)	
	Other:	
No	Continue	

6. In the past 5 years, have you or any member of your household worked for any of the

#### following? (Read list. If yes to any, thank the respondent and terminate.)

- A tobacco or cigarette company A public health or community organization involved in communicating the dangers of smoking or the benefits of quitting A marketing, advertising, or public relations agency or department The Federal Government (Read list. If yes to any, thank the respondent and terminate.) The U.S. Food and Drug Administration (FDA) The National Institutes of Health (NIH) The Centers for Disease Control and Prevention (CDC) The Substance Abuse and Mental Health Services Administration (SAMHSA) The Centers for Medicare & Medicaid Services (CMS) 7. Have you or any member of your household ever lobbied on behalf of the tobacco industry? Thank the respondent and terminate. Yes No Continue. Have you or any member of your household personally represented or worked on behalf 8. of a tobacco company in connection with a tobacco lawsuit? Thank the respondent and terminate. Yes No Continue.
- 9. Have you participated in any paid market research in the past 6 months?

Yes	Thank the respondent and terminate.
No	Continue.

10. On a scale of 1-5, how comfortable are you understanding and speaking English? 1 is very uncomfortable, 3 is somewhat comfortable, and 5 is very comfortable. \_\_\_\_\_

### [TERMINATE if 3 or lower]

Q11. On a scale of 1-5, how comfortable are you talking in a group of people your age? 1 is very uncomfortable, 3 is somewhat comfortable, and 5 is very comfortable. \_\_\_\_\_

# [TERMINATE if 3 or lower]

12. What is your sex? (Recruit equal numbers of males and females per group)

Male
Female

13. What is the highest level of education that you have completed? *(Read list. Recruit a mix to show per group. No more than two postgraduates per group.)* 

Less than high school diploma	Continue.
High school graduate or GED	Continue.
Some college or 2-year degree	Continue.
College degree	Continue.
Postgraduate degree	Continue.

14. Are you Hispanic, Latino/a, or of Spanish origin? Choose all that apply.

- □ No, not of Hispanic, Latino/a, or Spanish origin
- □ Yes, Mexican, Mexican American, Chicano/a
- □ Yes, Puerto Rican
- Yes, Cuban
- □ Yes, Another Hispanic, Latino/a, or Spanish origin
- 15. What is your race? Choose all that apply.
  - □ White
  - □ Black or African American
  - American Indian or Alaska Native
  - Asian Indian
  - □ Chinese
  - □ Filipino
  - □ Japanese
  - □ Korean
  - □ Vietnamese
  - □ Other Asian
  - Native Hawaiian
  - **Guamanian or Chamorro**
  - □ Samoan
  - Other Pacific Islander

Great! You qualify for our study. The discussion group will be held on [DATE] at [TIME] and will last no longer than 90 minutes. For your time and opinions, you will receive \$75 at the end of the session.

16. Would you like to participate in the group discussion at [TIME] on [DATE]?

Yes	Continue.
No	Thank the respondent and terminate.

Great! May I please have your mailing and/or e-mail address to send you a confirmation letter with directions? *[Verify address and phone number.]* We are asking for your contact information only for the purpose of sending you a reminder letter and giving you a call to remind you of the discussion group. We will destroy all contact information at the conclusion of the groups.

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]. If you normally wear corrective lenses, contacts, or glasses to read please remember to have them with you during the focus group.

# **\*\*NOTE\*\* THIS PAGE MUST BE STORED SEPARATELY FROM THE SCREENER** AND FOCUS GROUP DATA. PLEASE DESTROY UPON COMPLETION OF FOCUS GROUP.

NAME:	_
ADDRESS:	-
CITY:	
ZIP CODE:	
E-MAIL	
What is the best time to reach you? What is the best telephone number to reach yo	u at that time?
BEST TIME TO BE REACHED:	_
BEST PHONE NUMBER:	
Is there another time and number we can try if we miss you?	
ALTERNATE TIME:	
ALTERNATE PHONE NUMBER:	

Thank you. That's all the questions I have today. Please try to arrive at least 15 minutes before the starting time. If you have any questions or find that you are unable to attend, please call [facility's phone number] as soon as possible. Thank you again for your time. We look forward to seeing you at [TIME] on [DATE].

### Read if necessary:

If you have any questions about the study, you may contact Denise Dickinson of RTI at 1-800-334-8571, ext. 25594 (toll free). If you have concerns about how participants are being treated in the study, you may contact RTI's Office of Research Protection toll-free at 1-866-214-2043.