

RTI/FDA Tobacco Focus Groups - Adolescents
Screening Questionnaire
Tobacco Discussion

Parent Introduction:

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. I want to assure you that we are not from a tobacco company or a company that sells quit-smoking aids. I would like to talk to you about a study we plan to conduct for the Food and Drug Administration. We are recruiting for an upcoming group discussion in which participants will be asked to discuss their knowledge and beliefs related to cigarettes. We believe it is particularly important to talk with teens about this issue. Can we speak to _____ [teen's name] to see if he/she is able to participate in the study? If he/she is able to participate, we will need you to sign a permission form prior to his/her participation in the study. If your child qualifies for the study, I will ask to speak to you again at the end of the call so that I can give you more information. Before I ask to speak with _____ [teen's name], I'd like you to ask [him/her] to go sit somewhere that's quiet and private, where no one else can hear [his/her] answers.

IF PARENT QUESTIONS THE NEED FOR PRIVACY, SAY:

We have a rule that everyone who participates in our research is given privacy, including children. Every effort will be made so that that no one will be able to know how your child answered the questions.

Adolescent Introduction:

Hello _____, my name is _____. I'm with [FACILITY NAME]. We're working with RTI International, a nonprofit research organization, and the Food and Drug Administration (FDA) on a research study about tobacco products, and we're interested in talking to teens about cigarette smoking.

We are holding a focus group discussion on [DATE] with approximately 9 other teens like you. The discussion group starts at [TIME] and will last approximately 90 minutes. For study purposes, the group discussion will be audio recorded, and other staff will also observe the discussion via video-streaming. In appreciation for your participation, you will be reimbursed for your time, effort, and travel expenses. Participation in the group is completely voluntary, and your responses will be kept private to the extent allowable by law. 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? Your answers to these questions will also be kept private to the extent allowable by law.

[YES] **Continue.**

Great! Please find a comfortable place where you like to sit, where it is quiet and you can talk by yourself and where you are the only person who can hear my questions and nobody else can hear your answers. Have you found a good place? (Do you want to take a minute to find a place where you can talk by yourself?)

[NO] **THANK AND END CALL**

Screening Questions

Q1. Before I start, how old are you?

If < 16 → **Thank and end call**

If ≥ 18 → **administer Adult Screener**

If 16 → **Continue**

If 17 → Will you turn 18 before [Date of group]?

[YES] **Thank and end call.**

[NO] **Continue**

Q2. What is your first language? (*recruit a mix / aim for 2 ESL per group*).

English **Continue.**

Something Else

What is your first language? _____ **Continue.**

Q3. a. On a scale of 1-5, how comfortable are you talking in a group of people your age in English? 1 is very uncomfortable and 5 is very comfortable. _____

[TERMINATE if 3 or lower] Thank the respondent and terminate.

Q3b. During the focus group discussion, you may be asked to review written materials and offer your opinions. On a scale of 1-5, how comfortable are you reading and understanding materials written in English? 1 is very uncomfortable and 5 is very comfortable. _____

[TERMINATE if 3 or lower] Thank the respondent and terminate.

Q4. Have you participated in a focus group discussion* or interview within the past 6 months?

- [YES] **Thank and end call.**
- [NO] **Continue**

* If the respondent doesn't know what a "focus group" is or needs clarification, say "a focus group is just another name for a group discussion. It involves a group of individuals who talk about a particular topic such as tobacco use."

Q5. Have you ever smoked a cigarette, even one puff?

- [YES] **Continue for CURRENT SMOKER GROUP**
- [NO] **Continue for SUSCEPTIBLE– Skip to Q7**

Q6. In the past 30 days, have you smoked a cigarette?

- [YES] **ASSIGN TO CURRENT SMOKER GROUP, -- Skip to Q10**
- [NO] When did you smoke your last cigarette?

IF ≤ 90 days ago, say "we are not sure yet if you will be eligible to be in one of our groups. We may contact you later if we have a spot for you. I would like to ask you a few more questions before we hang up though. **Skip to Q 10.**"
IF ≥ 90 days ago, **Thank and end call.**

Q7. Do you think you will smoke a cigarette soon? (*Select one.*)

- 1) Definitely Not
- 2) Probably Not
- 3) Probably Yes
- 4) Definitely Yes

Q8. If one of your best friends offered you a cigarette, would you smoke it? (*Select one.*)

- 1) Definitely Not
- 2) Probably Not
- 3) Probably Yes
- 4) Definitely Yes

Q9. Do you think you will smoke a cigarette at any time in the next year? (*Select one.*)

- 1) Definitely Not
- 2) Probably Not
- 3) Probably Yes
- 4) Definitely Yes

IF Q7 = 1 and Q8 = 1 and Q9 = 1, NOT ELIGIBLE. TERMINATE. Thank and end call.
Otherwise assign to SUSCEPTIBLE GROUP

Q10. In the past 5 years, has 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)

Q11. For study purposes, if you participate, the focus group discussion will be audio recorded. Are you okay with us audio recording your focus group?

- Yes **Continue.**
- No **Thank the respondent and terminate.**

Demographic Questions

Q12. What is your gender? (**Recruit equal numbers of males and females per group**)

- Male
- Female
- Other

Q13. What grade are you in?

- 7th grade
- 8th grade
- 9th grade
- 10th grade
- 11th grade
- 12th grade
- No longer attending school
- Other _____

Q14. Are you Hispanic, Latino/a, or of Spanish origin?

- No, not of Hispanic, Latino/a, or Spanish origin
- Yes

Q15. What is your race or ethnicity? Choose all that apply.
(**Read list. Recruit a mix to show per group.**)

- 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
- Other

From what you told me it looks like you are eligible to participate in the study. I would like to invite you to participate in a group discussion with about 9 other people your age. The discussion will last approximately 90 minutes, will be audio-taped, and watched by the study group. You will also be asked to fill out a worksheet about these pictures and sentences. As I said earlier, your participation and everything you say during the discussion will remain private to the extent allowable by law and won't be shared with your parent or guardian. You will receive \$40 for participating and your parent who comes with you will receive \$35 for helping with transportation. Are you interested in participating in this study?

- [YES] Continue
- [NO] **Thank and end call**

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] **Thank and end call**

I'm glad that you will be able to join us! The focus group discussion will take place on **[Day], [Date], at [Time.] at [site location].**

Will you be available to participate at this time?

- [YES] Continue
- [NO] **Thank and end call**

You will need to bring the permission form I will send you with your parent or guardian's signature when you come to the focus group. If you don't have this permission form, you won't be able to participate. I would also like to send you a confirmation letter and directions to the place where we will

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hold the focus group. In order to do so, please verify your mailing address and phone number where you can be reached. We are asking for your contact information only to send you a reminder letter and giving you a call to remind you of the discussion group. We will destroy all contact information when we are finished with all the focus groups.

We are only inviting a few people, so it is very important that you let us know 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.

Parent Information for Adolescents Scheduled to Participate:

Now, I would like to give your parent/guardian this information that I just gave you about the focus group. I will not share your answers to the questions I asked you.

Instructions to the Parent/Guardian

Your child is eligible to participate in the focus group or group discussion and has been scheduled to participate on [DAY], [DATE] at [TIME]. Because your child is under 18, we must get written permission from you in order for him/her to participate. We will be sending you a permission form to review and sign if you consent to your child's participation. If you will be accompanying your child to his/her session, please bring this completed for with you. If you are unable to accompany your child, he/she must bring the signed permission form with him/her in order to participate. Your child will be given \$40 for his/her participation. If you accompany your child, you will receive \$35.