

**Parents' Perceptions of Public Service Announcement Concepts
on Electronic Nicotine Delivery Systems
Focus Group Screener**

Parents of one or more children 12-17 years of age

Hello, my name is _____. I am calling from [FACILITY NAME]. We are working with the Centers for Disease Control and Prevention (or CDC) to develop messages for the public focusing on preventing nicotine use by youth. I am calling to invite you to take part in discussion groups to get your opinions about these messages. Your participation would help us to gain a better understanding of how to effectively communicate messages to adults about how to talk with youth about preventing the use of products containing nicotine such as e-cigarettes.

We are holding a group discussion on [DATE] with 9 other persons like you. The discussion group starts at [TIME] and will last approximately 1.5 hours. For study purposes, the focus group discussion will be audio recorded; however, your participation in the group discussion will remain private as all audio files of the discussion will be stored by ICF on a secure share drive and password-protected computers. Transcripts and reports will not include any identifiable information. The recordings will be used to help the focus group moderator generate a combined report with non-identifying comments. Only your first name will be used. The focus group will be streamed live on the internet through a password-protected site for project staff from the Centers for Disease Control and Prevention and ICF. A recording will not be made of the stream. If you qualify for this project and participate in our focus group, you will receive \$75.00 as an appreciation for your time and expenses. Your opinions will help to contribute to current messages being developed as part of nationwide public service announcements about youth use of e-cigarettes.

1. May I ask you a few questions to see if you are eligible to participate in this study?

- Yes [Continue]
- No [Thank you; end call]

2. Are you or is anyone in your household an employee of an ad agency, market research firm, the Centers for Disease Control and Prevention, also known as the CDC, or a company involved in the manufacture or retail sale of tobacco or electronic-cigarette products.

- Yes [Thank you; end call]

Public reporting burden of this collection of information is estimated to average 5 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 CDC/ATSDR Information Collection Review Office; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0910)

No [Continue]

3. **Have you participated in a focus group within the last six months?**

Yes [Thank you; end call]

No [Continue]

4. **Are you the parent/guardian of one or more children who lives with you between the ages of 12 and 17?**

Yes [Continue]

No [Thank you; end call]

Enter child/ren age(s): _____, _____, _____, _____

5. **Are you between the ages of 30 and 60?**

Yes [Continue]

No [Thank you; end call]

6. **Which of the following groups includes your total annual household income?**

[Note: recruit a mix of participants from low to mid-levels; do not include highest two ranges.]

\$19,999 or less [Continue]

\$20, 000-34,999 [Continue]

\$35, 000-59,999 [Continue]

\$60,000-99,999 [Thank you; end call]

\$100,000 and over [Thank you; end call]

7. **What gender do you identify as?** [Gather information; not an exclusive criterion.]

Male [Continue to Q13]

Female [Continue to Q12]

Other [Continue to Q13]

The next questions are about electronic vapor products, which include e-cigarettes or electronic cigarettes. For the purposes of this study, we will use the word “e-cigarette.” An electronic vapor product looks like a conventional cigarette, but it runs on a battery and produces vapor instead of smoke. You may also know them as e-cigs, vape-pens, hookah-pens, electronic hookahs (e-hookahs), electronic cigars (e-cigars), electronic pipes (e-pipes), or e-vaporizers. Some brand examples are Blu, NJOY, Vuse, LOGIC, MarkTen, and Starbuzz.

8. **Have you ever used e-cigarettes, such as NJOY, Blu or LOGIC, even one time?**

- Yes [Continue to Q10]
- No [Continue to Q11; this person is either a “smoker” or “non-smoker”]

9. **Do you now use e-cigarettes ...**

- Every day [Continue to Q11; this person is an “e-cig user exclusively” or “e-cig and conventional cigarette user”]
- Some days [Continue to Q11; this person is an “e-cig user exclusively” or “e-cig and conventional cigarette user”]
- Rarely [Continue to Q11; this person is an “e-cig user exclusively” or “user of e-cigarettes and conventional cigarettes”]
- Not at all [Continue to Q11; this person is either a “smoker” or “non-smoker”]

The next questions are about conventional cigarettes which are tobacco wrapped in paper.

10. **Do you smoke conventional cigarettes now?**

- Yes [Continue to Q12]
- No [Continue to Q13; this person is a “e-cig user exclusively” or “non-smoker”]

11. **How often do you smoke conventional cigarettes?**

- Every day [Continue to Q13; this person is a “smoker of conventional cigarettes (No ENDS use)” or “user of e-cigarettes and conventional cigarettes”]
- Some days [Continue to Q13; this person is a “smoker of conventional cigarettes (No ENDS use)” or “user of e-cigarettes and conventional cigarettes”]
- Rarely [Continue to Q13; this person is a “smoker of conventional cigarettes (No ENDS use)” or “user of e-cigarettes and conventional cigarettes”]

Qualified Respondent Category	SCREENING LOGIC
Non-Smoker (Group 1)	<i>Answers No to 9 Answers Not at All to 10 Answers No to 11</i>
Conventional Cigarette Smoker Only (Group 2)	<i>Answers No to 9 Answers Not at All to 10 Answers Yes to 11 Answers Every day, Some days, or Rarely to 12</i>
ENDS User (Group 3)	<i>Answers Yes to 9 Answers Every day, Some days, or Rarely to 10</i>

12. **Please indicate your race or ethnic background. You may select more than one option. Are you...?** [Note: recruit a mix of various racial/ethnic groups.]

- Hispanic or Latino [Continue]

- Not Hispanic or Latino [Continue]
- Refused to answer [For interviewer use only; not a response option.]

Which of the following best describes your race? You may select more than one option.

- American Indian or Alaska Native [Continue]
- Asian [Continue]
- Black or African American [Continue]
- Native Hawaiian or Other Pacific Islander [Continue]
- White [Continue]
- Refused to answer [For interviewer use only; not a response option.]

The focus group will take place on:

_____ Day

_____ Date

_____ Time

_____ Place

Will you be available to participate at this time?

_____ Yes [Continue]

_____ No [Thank you; end call]

Note: If respondent can participate, please make sure to place individual in the appropriate group.

- Adult parent of 12-17 year olds who do not smoke conventional cigarettes and do not use ENDS. This individual is a “non-smoker” and should be placed in Group 1.
- Adult parent of 12-17 year olds who smokes conventional cigarettes only (no ENDS use). This individual is a “smoker” and should be placed in Group 2.

- Adult parent of 12-17 year olds who uses ENDS exclusively or in combination with conventional cigarettes. This individual is primarily an “ENDS user” and should be placed in Group 3.

I am pleased that you can join us. I would like to send you a confirmation letter. In order to participate in the focus group, you will need to sign a consent form. Please share with me your contact information which not shared with anyone.

If you wear glasses or a hearing aid, please bring them to the group.

Adult Name _____

Address _____

City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____

Cell Phone _____ FAX _____

Email _____

Confirm:

Date of Focus Group _____ Time _____

Thank you very much. I appreciate you taking time to respond to my questions and look forward to your participation in this focus group.