

ATTACHMENT 3: LGBT YOUNG ADULT SCREENER

Form Approved
OMB No. 0910-080
Exp. Date 01/31/2019

Research and Evaluation Survey for the Public Education Campaign on Tobacco among LGBT (RESPECT)

Subjects for Screener:

Section AA: Interviewer selections and informed consent

Section A: Demographic items

Section B: Contact Information

Section AA Interviewer selections and informed consent

[AA1 and AA2 are for in-person recruits only. All others will skip to AA3.]

AA1. INTERVIEWER, SELECT CITY

AA2. INTERVIEWER, SELECT BAR

[GPS COORDINATES CAPTURED AT THIS SCREEN FOR AUTHENTICATION PURPOSES.]

AA3.

[SCREENER INFORMED CONSENT TEXT WILL BE DISPLAYED HERE.]

IF SOCIAL MEDIA AND AA3 [SCREENER CONSENT] = NO

REFSCRN. Thank you for your time.

COS. [IF INTERCEPT AND AA3=2(NO)]

Thank you for your consideration. Please give the tablet back to the interviewer.

INTERVIEWER: ENTER A PASSWORD TO CONTINUE.

EXIT

Section A: Demographic Items

The first part of the survey asks you some general questions about yourself.

[AO is for social media participants only. In person interviews skip to A1.]

- A0.** How did you find out about this survey?
- ₁ Facebook ad/Sponsored NewsFeed story
 - ₂ Twitter ad/Promoted Tweet
 - ₃ Someone sent it to me on Facebook
 - ₄ Someone sent it to me on Twitter
 - ₅ Someone sent it to me in another way
 - ₆ Another way (Specify)
 - ₉ Prefer not to answer

- A1.** What is the 5-digit zip code where you **CURRENTLY** live?

__ __ __ __ __ (5-digit, numeric responses only)

- A2.** What is your age?

_____ (Range: 15 to 80)

- A3.** What is your current gender identity?

- ₁ Male
- ₂ Female
- ₃ Trans male/Trans man
- ₄ Trans female/Trans woman
- ₅ Genderqueer/Gender non-conforming
- ₆ Different identity (please state): _____
- ₉ Prefer not to answer

- A4.** What sex were you assigned at birth, on your original birth certificate?

- ₁ Female
- ₂ Male
- ₉ Prefer not to answer

[If A3= 1 or 3 (male or trans male) display A5, ELSE display A6]

- A5.** Which of the following best represents how you think of yourself?

- ₁ Gay
- ₂ Straight, that is, not gay
- ₃ Bisexual
- ₄ Something else
- ₅ I don't know the answer
- ₉ Prefer not to answer

[If A5= 4, go to A7, if A5= 5 go to A8, else go to A9]

A6. Which of the following best represents how you think of yourself?

- ₁ Lesbian or gay
- ₂ Straight, that is, not lesbian or gay
- ₃ Bisexual
- ₄ Something else
- ₅ I don't know the answer
- ₉ Prefer not to answer

[If A6= 4, go to A7, if A6= 5 go to A8, else go to A9]

A7. What do you mean by something else?

- ₁ You are not straight, but identify with another label such as queer, trisexual, omnisexual, or pansexual
- ₂ You are transgender, transsexual, or gender variant
- ₃ You have not figured out or are in the process of figuring out your sexuality
- ₄ You do not think of yourself as having sexuality
- ₅ You do not use labels to identify yourself
- ₆ You mean something else
- ₉ Prefer not to answer

[All Skip to A9]

A8. What do you mean by don't know?

- ₁ You don't understand the words
- ₂ You understand the words, but you have not figured out or are in the process of figuring out your sexuality
- ₃ You mean something else
- ₉ Prefer not to answer

A9. Have you attended an LGBT pride event in the past 12 months?

- ₁ Yes
- ₂ No
- ₉ Prefer not to answer

A10. Have you ever tried cigarette smoking, even one or two puffs?

- ₁ Yes
- ₂ No
- ₉ Prefer not to answer

A11. [IF A10=1] About how many cigarettes have you smoked in your entire life? Your best guess is fine.

- ₁ 1 or more puffs but never a whole cigarette
- ₂ 1 cigarette
- ₃ 2 to 5 cigarettes
- ₄ 6 to 15 cigarettes (about 1/2 a pack total)
- ₅ 16 to 25 cigarettes (about 1 pack total)
- ₆ 26 to 99 cigarettes (more than 1 pack, but less than 5 packs)
- ₇ 100 or more cigarettes (5 or more packs)
- ₉ Prefer not to answer

A12. [IF A10=1] During the past 30 days, on how many days did you smoke cigarettes?

[_][_] days [RANGE: 0-30, 99]

A13. Have you ever received money or gift cards from a company for sharing your opinions about LGBT health in a discussion group, interview, or survey?

- ₁ Yes, within the past 9 months
- ₂ Yes, more than 9 months ago
- ₃ No
- ₄ I'm not sure

Eligibility Criteria

SET ELIGFLAG. IF [A1= VALID **AND** A2= 18 to 24-years-old] **AND** [A3= 3 to 5 **OR** A5= 1 or 3 **OR** A6= 1 or 3 **OR** A7= 1 or 2] THEN ELIGFLAG=1. ELSE ELIGFLAG=2.

C1S_social media. [IF ELIGFLAG=2 AND SOCIAL MEDIA] **Thank you for your responses. We have no further questions at this time.**

C1S. [IF ELIGFLAG=2 AND INTERCEPT] **Thank you for your responses. We have no further questions at this time. The interviewer will now give you \$10 for answering these questions.**

[IF ELIGFLAG=1 AND INTERCEPT]

TRANS Based on your answers to our questions, you meet our criteria to complete our web survey for a \$20 digital gift card. We would like to collect your contact information and want to keep it secure. Please hand the tablet back to the interviewer. They will open another questionnaire and hand it right back.

Please give the tablet back to the interviewer.

INTERVIEWER: ENTER A PASSWORD TO CONTINUE

[DISPLAY DISPOSITION]

Response has been recorded.

[INTERVIEW OPEN **Section B (Intercept): Contact Information for Intercept Respondents** AND HAND TABLET TO PARTICIPANT]

[IF ELIGFLAG=1 AND SOCIAL MEDIA DISPLAY Section B (Social Media): Contact Information for Social Media Respondents]

Section B (Social Media): Contact Information for Social Media Respondents

[IF ELIGFLAG=1 AND SOCIAL MEDIA]

SMEML. Based on your answers to our questions, you may be eligible to complete our survey for a \$20 electronic gift card. Please provide your first name, email address and cell phone number. If you are eligible we will use this information to send you your \$20 incentive electronic gift card after you complete the full survey.

First name _____

Primary Email address (please provide an email address that you check regularly to ensure that you receive the survey link): _____

Confirm Email address _____

Cell phone number ___-___-___

Confirm Cell Phone Number _____-_____-_____

[PROGRAMMER NOTE: EMAIL ADDRESS WILL BE A REQUIRED FIELD, BUT CELL PHONE NUMBER IS OPTIONAL]

How would you prefer to be contacted?

₁ via email

₂ via SMS text message on your smartphone and email

[NEW SCREEN]

Thank you, we will verify your eligibility to continue with the survey now.

C1_social media. Ineligible due to survey responses:

Thank you for your responses. We have no further questions at this time. Your responses have been recorded.

C2_social media. Ineligible due to duplicate email address

[IF EMAIL IS ALREADY ENROLLED] Thank you for your responses. Our records indicate that we already have your email address on file. Thank you for completing the follow-up survey if you already have. If not, you will receive a reminder email with the survey link to complete and receive your incentive.

C3_socialmedia. Eligible [IF SOCIAL MEDIA AND EMAIL IS NOT ALREADY ENROLLED]

Congratulations! You are eligible and are invited to complete our web survey for a \$20 electronic gift card. Please click Next to continue to the survey.

Section B (Intercept): Contact Information for Intercept Respondents

B1. [IF ELIGFLAG=1 AND INTERCEPT] **Congratulations!** Based on your answers to our questions, you may be eligible to complete our survey for a \$20 electronic gift card. Please provide your first name, email address and cell phone number so that we can send you a link to the web survey that you will complete on your own. You can choose whether you want to receive the link via email or text message. If you complete the survey within 48 hours of receiving the link you will receive an added \$5 for a total of \$25.

First name. _____

Please provide your contact information so that we can send you the survey. We will only use this information to contact you about the survey.

Primary Email address (please provide an email address that you check regularly to ensure that you receive the survey link) _____

Confirm Email address _____

Cell phone number ___-___-___

Confirm phone number _____

[If email address and/or cell phone number is already in our records go to C2, if new go to B3]

PROGRAMMER: VALIDATE EMAIL ADDRESS AND CELL PHONE NUMBER FOR CORRECT FORMAT. EMAIL ADDRESS IS REQUIRED TO MOVE FORWARD.

B3. [IF ELIGFLAG=1 AND INTERCEPT] The survey can be taken on a computer, tablet or on the web on a smart phone, like an iPhone or an Android. How would you prefer to receive the survey link?

₁ via email

₂ via SMS text message on your smartphone and email

[IF ELIGFLAG=1 AND DUPLICATE FLAG=2 AND INTERCEPT]

C1_intercept. Ineligible due to survey responses:

Thank you for your responses. Our records indicate that we already have your email address or cell phone number on file. Thank you for completing the survey if you already have. If not, you will receive a reminder email or text message with the survey link to complete and receive your incentive. We have no further questions at this time.

C2_intercept. Ineligible due to duplicate email address or cell phone number

Thank you for your responses. Our records indicate that we already have your email address or cell phone number on file. Thank you for completing the survey if you already have. If not, you will receive a reminder email or text message with the survey link to complete and receive your incentive. We have no further questions at this time.

C3_intercept. Eligible

Congratulations! You meet our criteria and are invited to complete our survey for a \$20 electronic gift card. Within the next few days, if you have not previously been invited, we will send you an email or text message with a link to the web survey that you will complete on your own.

If you complete the survey within 48 hours of receiving the link you will receive an added \$5 for a total of \$25.

The interviewer will now give you \$10 for answering these questions.

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Paperwork Reduction Act Statement: The public reporting burden for this collection of information has been estimated to average 5 minutes per response. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing burden to PRASstaff@fda.hhs.gov

LAST [IF INTERCEPT] Please give the tablet back to the interviewer.

**PASS [IF INTERCEPT] INTERVIEWER: ENTER A PASSWORD TO CONTINUE.
PROGRAMMER: THIS SCREEN CANNOT MOVE FORWARD UNTIL PASSWORD IS ENTERED.
PASSWORD IS EXIT
Response has been recorded.**