

## Appendix B. FDA CTP Exchange Lab Online Survey Instrument—CURRENT USERS

Title: FDA CTP Exchange Lab Syndication Study—Current Users

Note: The survey respondent will *not* see any text in blue.

[Screening Questions]

Our records indicate that you are a registered user of the Food and Drug Administration (FDA) Center for Tobacco Products (CTP) Exchange Lab (<https://digitalmedia.hhs.gov/tobacco/>).

The FDA CTP Exchange Lab allows users like you to syndicate, or place, digital content (for example, text for webpages, images, and other media) from FDA CTP on your website, blog, or digital channels. Content syndication involves copying and pasting a small section of code from the CTP Exchange Lab website to your website or digital channels. When FDA CTP updates its syndicated content, the updates automatically appear on your website or digital channels, ensuring that all content stays up-to-date.

The purpose of this survey is to learn about you and your organization's interest and experience in using digital content through the FDA CTP Exchange Lab website.

The results of this survey will be used to improve the syndication (placement) services for the content offered through the FDA CTP Exchange Lab website.

a. Would you like to participate in this survey?

- Yes [GO TO YEAR OF BIRTH QUESTION]
- No [TERMINATE SURVEY; GO TO TERMINATION TEXT 1]

[TERMINATION TEXT 1:] You have indicated that you do not want to participate in the FDA CTP Exchange Lab Survey and will now exit the survey. If you decide later that you would like to participate, use the same email invitation to access the survey. Thank you for your time!

b. What year were you born?

[Drop-down menu]

[TERMINATE SURVEY AND GO TO TERMINATION TEXT 2 IF RESPONDENT WAS BORN IN 2002 OR LATER]

[TERMINATION TEXT 2:] Based on your answer, you do not qualify for this survey. Thank you very much for your time.

c. Are you currently an employee or a contractor working for FDA's Center for Tobacco Products (CTP)?

- Yes [TERMINATE SURVEY; GO TO TERMINATION TEXT 2]
- No

[TERMINATION TEXT 2:] Based on your answer, you do not qualify for this survey. Thank you very much for your time.

[Landing Page/Introduction]

[INSERT APPENDIX C, INFORMED CONSENT INFORMATION, HERE]

**1. How did you first learn about the Food and Drug Administration (FDA) Center for Tobacco Products (CTP) Exchange Lab? [SELECT ONE.]**

- FDA CTP website
- FDA CTP e-newsletter or email
- Colleague
- Conference or meeting
- Email from non-FDA organization
- Promotional flyer or postcard
- Social media
- I am not sure
- Other (please specify): \_\_\_\_\_ [Open-ended text box]
  
- Prefer not to answer

**2. What type of organization do you work for? [SELECT ONE.]**

- Academic
- Government [GO TO QUESTION 2a]
- NGO/Non-profit
- For-profit company/corporation
- Not applicable (retired, self-employed, or unemployed)
- Other (please specify): \_\_\_\_\_ [Open-ended text box]
  
- Prefer not to answer

**2a. Please select the level of government that you work in: [These options will only appear if the respondent checks "Government" in Q2]**

- i. Federal  
Please select the agency you work for: [These options will only appear if the respondent checks "Federal"]
  - 1. CDC (Centers for Disease Control and Prevention)
  - 2. A center at FDA (Food and Drug Administration) OTHER THAN the Center for Tobacco Products (CTP)
  - 3. Other (please specify): \_\_\_\_\_ [open-ended text box]
- ii. State
- iii. Local (County or City)
- iv. Tribal
  
- Prefer not to answer

**3. Which of the following best describes you?**

**b. Public health professional**

Please select the role that best describes you: [These options will only appear if the respondent checks "Public health professional"]

- i. Scientific researcher/research scientist
- ii. Public health advocate/activist/organizer
- iii. Public health communicator
- iv. Public health educator/trainer
- v. Other (please specify): \_\_\_\_\_ [Open-ended text box]
  

**c. Health care professional**

Please select the role that best describes you: [These options will only appear if the respondent checks "Health care professional"]

- i. Physician
- ii. Nurse
- iii. Physician Assistant/Nurse Practitioner
- iv. Administrator
- v. Other (please specify): \_\_\_\_\_ [Open-ended text box]

**d. Tobacco industry representative**

Please select the role that best describes you: [These options will only appear if the respondent checks "Tobacco industry representative"]

- i. Manufacturer
- ii. Retailer (such as a gas station, a convenience store, a supermarket, a tobacco outlet, etc., including shop owner, manager, or employee)
- iii. Wholesaler or Distributor
- iv. Importer
- v. Grower
- vi. Trade Association Representative
- vii. Other (please specify): \_\_\_\_\_ [Open-ended text box]

**e. Media professional**

Please select the role that best describes you: [These options will only appear if the respondent checks "Media professional"]

- i. Member of the press/reporter
- ii. Other (please specify): \_\_\_\_\_ [Open-ended text box]

**f. Educator/Trainer**

Please select the role that best describes you: [These options will only appear if the respondent checks "Educator"]

- i. Elementary/primary school teacher or administrator
- ii. Middle school teacher or administrator
- iii. High school teacher or administrator
- iv. College/university professor/instructor or administrator
- v. Other (please specify): \_\_\_\_\_ [Open-ended text box]

**g. General public**

- h. Other (please specify): \_\_\_\_\_ [Open-ended text box]

**i. Prefer not to answer**

**4. The FDA Center for Tobacco Products provides tobacco-related materials to organizations using several different delivery methods. Please rate on a scale of 1 to 5 which delivery method would be most useful to your organization.**

	1 – Extremely useful	2 – Very useful	3 – Somewhat useful	4 – Slightly useful	5 – Not at all useful	6 - Prefer not to answer
Printed materials delivered for free to your organization.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Downloadable files that you can print.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Website content that you can embed on your website through our syndication engine.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CTP social media content that you can share through your social media channels.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
CTP's Twitter feed embedded on your organization's website.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**5. You are currently a registered user of the FDA CTP Exchange Lab (<https://digitalmedia.hhs.gov/tobacco/>). Have you EVER used the FDA CTP Exchange Lab to syndicate (place) content on your organization's website, blog, or other digital channels?**

- Yes [[GO TO QUESTION 5a](#)]
- No [[GO TO QUESTION 5c](#)]
- I am not sure [[GO TO QUESTION 6](#)]
- Prefer not to answer [[GO TO QUESTION 6](#)]

**5a. How often do you use the FDA CTP's Exchange Lab to syndicate content?**

- Very frequently (at least once a week) [[GO TO QUESTION 5ai](#)]
- Frequently (at least once a month) [[GO TO QUESTION 5ai](#)]
- Occasionally (every few months) [[GO TO QUESTION 5ai](#)]
- Rarely (at least once every 6 months) [[GO TO QUESTION 5ai](#)]
- Very rarely (at least one time) [[GO TO QUESTION 5ai](#)]
- Never [[GO TO QUESTION 5c](#)]
- Prefer not to answer [[GO TO QUESTION 5b](#)]

**5ai. Please describe HOW you have used the FDA CTP Exchange Lab to syndicate content:** \_\_\_\_\_ [[Open-ended text box](#)] [[GO TO QUESTION 5b](#)]

**5b. How would you rate your experience with the following aspects of using the FDA CTP Exchange Lab to syndicate content for your organization's website or digital channels?**

	1 – Very satisfied	2 – Somewhat satisfied	3 – Neither satisfied nor dissatisfied	4 – Somewhat dissatisfied	5 – Very dissatisfied	6 – Prefer not to answer
Ease of use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of content	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Available formats (e.g., text, images)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Available topics (e.g., health effects, cessation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to customize the content	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**5c. Why have you NOT syndicated content from FDA CTP Exchange Lab? [SELECT ALL THAT APPLY.]**

- I have not had the time to do so.
- I have not seen content that I want to (place) yet.
- The content is not relevant for my organization.

- It is too difficult to syndicate content from the CTP Exchange Lab. [\[GO TO QUESTION 5cii\]](#)
- I do not know how to syndicate content from the CTP Exchange Lab. [\[GO TO QUESTION 5cii\]](#)
- I experienced technical difficulties when I tried to syndicate content from the CTP Exchange lab. [\[GO TO QUESTION 5ci\]](#)
- Other (please specify): \_\_\_\_\_ [\[Open-ended text box\]](#)
- Prefer not to answer

**5ci. What technical difficulties did you experience? [SELECT ALL THAT APPLY.]**

- The syndication code is not supported on our website or digital channels.
- The content does not fit well on our website or digital channels (e.g., issues with dimensions, rendering, customization, etc.).
- Other (please specify): \_\_\_\_\_ [\[Open-ended text box\]](#)
- Prefer not to answer

**5cii. Would you be interested in receiving training on how to syndicate content from the FDA CTP Exchange Lab?**

- Yes [\[GO TO QUESTION 5ciii\]](#)
- No [\[GO TO QUESTION 6\]](#)
- Prefer not to answer [\[GO TO QUESTION 6\]](#)

**5ciii. In what format(s) would you like the training to be provided? [SELECT ALL THAT APPLY]**

- Webinar
- In-person
- Online manual/step-by-step instructions
- Other (please specify) \_\_\_\_\_
- Prefer not to answer

**6. How would you rate your ability/comfort level with the following?**

	1 – Very capable	2 – Somewhat capable	3 – Neither capable nor incapable	4 – Somewhat incapable	5 – Very incapable	6 - Prefer not to answer
Writing or editing/manipulating HTML code	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using a website content management system (CMS)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**7. Are you currently involved in managing your organization's website content?**

- Yes [\[GO TO QUESTION 7a\]](#)
- No [\[GO TO QUESTION 8\]](#)
  
- Prefer not to answer [\[GO TO QUESTION 8\]](#)

**7a. In what capacity are you involved? [SELECT ALL THAT APPLY.]**

- I write or edit content for the website.
- I am involved in making decisions about what content to have on my organization's website.
- I upload content to the website using a content management system or some other tool. [\[GO TO QUESTION 7ai\]](#)

**7ai. In the content management system you use, do you have access to the following? [SELECT ALL THAT APPLY.]**

- WYSIWYG view
- HTML view
  
- Other (please specify): \_\_\_\_\_ [\[Open-ended text box\]](#)
  
- Prefer not to answer

**8. What tobacco-related TOPICS would you like to syndicate (place) from the FDA CTP Exchange Lab? [SELECT ALL THAT APPLY.]**

- E-cigarettes/vaping
- Health effects of tobacco use
- Nicotine
- Science and research
- Statistics and facts
- Tobacco products (including novel products)
- Tobacco regulation and policy
- Retailer education
- Tobacco use cessation
- Tobacco use prevention
- I am not sure
- Other (please specify): \_\_\_\_\_ [\[Open-ended text box\]](#)
  
- Prefer not to answer

**9. Would you be interested in syndicating content in other languages?**

- Yes [\[GO TO QUESTION 9a\]](#)
- No [\[GO TO QUESTION 10\]](#)
  
- Prefer not to answer

**9a. Please specify the language(s). List language(s) here:** \_\_\_\_\_  
[\[Open-ended text box\]](#)

- Prefer not to answer

**10. In what types of FORMATS would you like to syndicate content from the FDA CTP Exchange Lab? [SELECT ALL THAT APPLY.]**

- Videos
- Data visualizations (such as infographics, bar charts, or graphs)
- Fact sheets
- Animated GIFs
- A single image
- A slideshow that rotates multiple images
- Full web pages with text and images
- Full web pages that are text only
- Short snippets of text to embed
- Other (please specify): \_\_\_\_\_ [Open-ended text box]
- Prefer not to answer

**11. How likely are you go to the FDA CTP Exchange Lab to look for content to share directly to your social media channels?**

- Extremely likely [GO TO QUESTION 11a]
- Very likely [GO TO QUESTION 11a]
- Neither likely nor unlikely [GO TO QUESTION 12]
- Very unlikely [GO TO QUESTION 12]
- Extremely unlikely [GO TO QUESTION 12]
- Prefer not to answer [GO TO QUESTION 12]

**11a. Which channel(s) would you share it on? [SELECT ALL THAT APPLY.]**

- Facebook
- Instagram
- LinkedIn
- Twitter
- Other (please specify) \_\_\_\_\_
- Prefer not to answer

**12. How interested are you in being able to request that specific FDA CTP web content be made available for content syndication (for content that is currently not available for syndication)?**

- Extremely interested
- Somewhat interested
- Neither interested or uninterested
- Somewhat uninterested
- Extremely uninterested
- I don't know
- Not applicable
- Prefer not to answer



**13. How interested are you in being able to customize syndicated content and formats so that they are tailored to your needs and preferences? (For example, content is automatically populated with statistics on a particular topic, and/or the color of an image changes, based on the user's preference.)**

- Extremely interested
- Somewhat interested
- Neither interested or uninterested
- Somewhat uninterested
- Extremely uninterested
- I don't know
- Not applicable
  
- Prefer not to answer

**14. Who is the intended audience for your organization's website or digital channels? [RANK IN ORDER OF IMPORTANCE FOR YOUR ORGANIZATION'S MISSION USING NUMBERS WHERE "1" IS THE MOST IMPORTANT, "2" IS THE SECOND MOST IMPORTANT, ETC.] You do NOT have to number/rank all of the items.**

- Educators/teachers
- General public
- Health care professionals
- LGBTQI
- Media professionals
- Military
- Public health professionals
- Racial/ethnic minorities [[GO TO QUESTION 14a](#)]
- Tobacco industry representatives (for example, retailers, manufacturers, or marketers)
- Tobacco consumers
- Young adults
- Youth/teens
  
- Other (please specify): \_\_\_\_\_ [[Open-ended text box](#)]

**14a. You selected racial/ethnic minorities as one of the intended audiences for your website. Which group(s) do you serve? [SELECT ALL THAT APPLY.]**

- American Indian or Alaska Native
- Asian
- Black or African American
- Hawaiian or Other Pacific Islander
- White
- Prefer not to answer

**The next few questions tell us more about you.**

**15. In what country do you live? [[Drop down menu of countries](#)]**

- Prefer not to answer

15a. [For those who responded "United States"] What state do you work in? [Drop down menu of states]

- Prefer not to answer

16. Which of the following categories best describes your level of education?

- Some high school
- High school diploma or GED
- Trade or technical school
- Some college
- Associate's degree
- Bachelor's degree
- Graduate or professional degree (e.g., M.A., Ph.D., Psy.D., J.D., M.D.)
  
- Prefer not to answer

17. Please feel free, here, to make suggestions for how FDA CTP can improve its Exchange Lab website (<https://digitalmedia.hhs.gov/tobacco/>): \_\_\_\_\_ [Open-ended text box]

#### FUTURE ONLINE USABILITY TEST SESSION OPPORTUNITY

We are planning to conduct a 60-minute online (virtual) usability session with 9 participants to test the FDA CTP Exchange Lab website. We will conduct this online test session to help improve the Exchange Lab website. Each participant will be given \$75 in exchange for their participation. [Note: Not everyone who expresses interest in participating will be able to participate, as there are limited slots for this usability test session.]

18. Are you interested in participating in an online session to test the FDA CTP Exchange Lab website at a later date?

- Yes

[This follow-up question will appear only if the respondent checks "Yes"]:

Please provide your contact information so that we can contact you. Your contact information will only be used for the purpose of contacting you for the future study and will not be shared with others.

- Name: \_\_\_\_\_ [open-ended text box]
- Email: \_\_\_\_\_ [open-ended text box]
  
- No
  
- Prefer not to answer

#### HOW TO RECEIVE YOUR \$5 E-GIFT CARD FOR COMPLETING THIS SURVEY

19. We are giving all respondents who completed this survey a \$5 e-gift card to thank you for your time and participation. Would you like to receive this \$5 e-gift card?

- Yes

[This follow-up question will only appear if the respondent checks "Yes"]:

Please provide your email so that we can send you the \$5 e-gift card. Your email will only be used to send you the e-gift and will not be shared with others. Please expect to receive the incentive via email within a few days after you submit the completed survey.

- Email: \_\_\_\_\_ [\[open-ended text box\]](#)
- No
- Prefer not to answer

**Thank you very much for taking the time to complete our survey! You may now close your web browser.**

**—The FDA CTP Team**

**Paperwork Reduction Act Statement:** The public reporting burden for this information collection has been estimated to average 9 minutes per response (the time estimated to read, review, and complete). Send comments regarding this burden estimate or any other aspects of this information collection, including suggestions for reducing burden, to [PRASStaff@fda.hhs.gov](mailto:PRASStaff@fda.hhs.gov).

[\[End of survey\]](#)