Attachment 14\_R: Notifications Related to the Rural Smokeless Tobacco Education Campaign (RuSTEC) Evaluation

*Interview—Unable to Contact*

Form Approved

OMB No. 0910-0753

Exp. Date 09/30/2019

RIHSC No. 15-101CTP

[CASE ID]

The Parents of [CHILD’S FIRST NAME OR INITIALS] [Date]

[Address1]

[Address2]

[City], [State] [Zip]

Dear Parents of [CHILD’S FIRST NAME OR INITIALS]:

Recently, a Field Interviewer from RTI International came to your home and asked you and your child to take part in the U.S. Food and Drug Administration Health and Media Study. Your child could not complete the interview at that time and has been away or was not free each time the interviewer has come back since then. Your help in this study is important—this is why we keep trying to reach you and your child.

A limited number of people were randomly chosen to represent the population of the United States. You and your child cannot be replaced. If you choose not to take part, your experiences and views—as well as the thousands of people you represent—will not be heard.

Your child’s answers to the survey questions are combined with the answers of thousands of other people and reported only as overall numbers. To further protect your privacy, the survey is set up so that your child records most of your child’s own answers—the interviewer never sees or hears them. Also, your child can always refuse to answer any question.

To ensure the accuracy of survey results, we need to interview as many eligible youth aged 11 to 17 as we can. The results of this study will help policy makers and researchers understand media use among today’s youth as well as their attitudes and beliefs about tobacco use.

Your help is critical to the success of this study, and we are happy to work around your schedule so that your child can be included. Please feel free to call me to set up an interview time—the interview can also be done at another location such as a public library.

We know that your time is important. To thank you for your time, your child will be given a $20 incentive at the end of the interview.

Thank you for your time. I hope you and your child will choose to take part in this very important and useful study.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions or would like to set up an appointment, call me toll-free at [TOLL-FREE NUMBER].

*Interview Call Me-Youth*

Form Approved

OMB No. 0910-0753

Exp. Date 09/30/2019

RIHSC No. 15-101CTP

[CASE ID]

The Parents of [CHILD’S FIRST NAME OR INITIALS] [Date]

[Address1]

[Address2]

[City], [State] [Zip]

Dear Parents of [CHILD’S FIRST NAME OR INITIALS]:

Recently, an interviewer from RTI International came to your home and asked your child to take part in the ***U.S. Food and Drug Administration Health and Media Study.* His help in this study is important—which is why we keep trying to reach you.**

We want to give you more information about the study:

* A limited number of people—including your child—were randomly chosen to take part.
* As a thank you, he will be given a $20 incentive at the end of the interview.
* All information provided is kept completely confidential and will be used only for statistical purposes.

We are happy to work around your family’s schedule so that your child can be included. Please call our supervisor for your area, [FIRST & LAST NAME], to set up an appointment.

|  |
| --- |
| Please call:  **[FIRST & LAST NAME]**  **[PHONE NUMBER] (toll free)** |

If [MR./MS. LAST NAME] is not available when you call, please leave your phone number, address, and the time you want to be visited for your child’s interview. [HE/SHE] will call you to confirm the appointment.

Thank you for your time. Your call to [MR./MS. LAST NAME] is very important to the success of this study, and I thank you in advance for your help.

Sincerely,

National Field Director

*Interview —"Nothing in it for me"/Uncooperative*

Form Approved

OMB No. 0910-0753

Exp. Date 09/30/2019

RIHSC No. 15-101CTP

[CASE ID]

The Parents of [CHILD’S FIRST NAME OR INITIALS] [Date]

[Address1]

[Address2]

[City], [State] [Zip]

Dear Parents of [CHILD’S FIRST NAME OR INITIALS]:

Recently, a Field Interviewer from RTI International came to your home and asked you and your child to take part in the U.S. Food and Drug Administration Health and Media Study. At the time, you did not want to participate. We are writing this letter to ask you to reconsider.

The results of this study will help policy makers and researchers understand youth awareness of and exposure to campaign ads—including their knowledge, attitudes, and beliefs about health behaviors—so that informed decisions about policies and programs can be made. By taking part in this study, you and your child will make a direct impact on important tobacco-related education activities.

A limited number of people were randomly chosen to represent the population of the United States—and you were one of them! You cannot be replaced. If you choose not to take part, your experiences and views—as well as the thousands of people you represent—will not be heard.

We know that your time is important. To thank you for your time, your child will be given a $20 incentive at the end of their interview.

Thank you for your time. I hope you’ll reconsider and choose to take part in this very important and useful study.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, call me toll-free at [TOLL-FREE NUMBER].

*Interview—Too Busy/No Time*

Form Approved

OMB No. 0910-0753

Exp. Date 09/30/2017

RIHSC No. 15-101CTP

[CASE ID]

The Parents of [CHILD’S FIRST NAME OR INITIALS] [Date]

[Address1]

[Address2]

[City], [State] [Zip]

Dear Parents of [CHILD’S FIRST NAME OR INITIALS]:

Recently, a Field Interviewer from RTI International came to your home and asked you and your child to take part in the U.S. Food and Drug Administration Health and Media Study. At the time, you were reluctant to let your child spend the time needed to do the interview.

A limited number of youth were randomly chosen to represent the population of the United States. Your child cannot be replaced. If your child chooses not to take part, their experiences and views—as well as the thousands of people they represent—will not be heard.

As you know, this country is made up of all kinds of people, and so we are interviewing all kinds of people—including busy people like you and your child. If we only interviewed people who have a lot of free time, then active people like you would not be fairly represented. You and your child’s participation is critical to the success of this study, and we are happy to work around your schedule so that they can be included.

We know that your time is important. To thank you for your time, your child will be given a $20 incentive at the end of the interview.

We combine your child’s answers with the answers of thousands of other youth and report them only as overall numbers. The survey is set up so that you record most of your own answers—the interviewer never sees or hears them. Also, you can always refuse to answer any question.

The results of this study will help policy makers and researchers understand media use among today’s youth as well as their attitudes and beliefs about health and health behaviors. By taking part in this study, you and your child will make a direct impact on important education activities to reduce tobacco use.

Thank you for your time. I hope you’ll reconsider and choose to take part in this very important study.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions or would like to set up an appointment, call me toll-free at [TOLL-FREE NUMBER].

*Controlled Access Letter*

Form Approved

OMB No. 0910-0753

Exp. Date 09/30/2017

RIHSC No. 15-101CTP

[CASE ID]

The Parents of [CHILD’S FIRST NAME OR INITIALS] [Date]

[Address1]

[Address2]

[City], [State] [Zip]

Dear Parents of [CHILD’S FIRST NAME OR INITIALS]:

Recently, one of our field interviewers, [FIRST & LAST NAMES], tried to contact specific residences within [COMPLEX/COMMUNITY NAME] that were randomly chosen to participate in a national study conducted by RTI International for the U.S. Food and Drug Administration (FDA). So far, [MR./MS.] [LAST NAME] has been unable to [GAIN ACCESS/GAIN FULL ACCESS] to [NAME OF COMPLEX/COMMUNITY], and we are asking for your help.

We understand your responsibility to protect your residents and want to provide you with more information about the study:

* We are not selling anything. This is not a marketing survey.
* The FDA Health and Media Study provides valuable information about important health-related issues, including experiences with and opinions about media awareness and health behaviors among youth.
* A limited number of household addresses were randomly chosen to take part. We do not have any information about the residents other than an address.
* The RTI interviewer only needs a few minutes of the residents’ time to see if someone in the household will be asked to participate in an interview. If selected, those completing the interview receive a cash incentive.
* All information provided is kept private to the fullest extent allowed by law.

By helping our interviewer access the selected households in [NAME OF COMPLEX/COMMUNITY], you will make a direct contribution to this important research effort. [FIRST & LAST NAMES], our supervisor in your area, will contact you soon to address any questions, or you may call [HIM/HER] toll-free at [**TOLL FREE NUMBER**].

Your assistance is very important to the success of this study, and I thank you in advance for your help.

Sincerely,

National Field Director, RTI

***Online Survey Login Credentials Card***

**The FDA Health and Media Study is online!**

**If your child would like to take the survey online, please visit [PROJECT WEBSITE]. Your child will receive $20 for participating.**

1. **Type in the username and password exactly as shown below:**

**Username:**

**Password:**

1. **You will see instructions for completing this round of the study. A parent or legal guardian must follow the steps to provide permission for the child to complete the survey.**

Research Triangle Institute (RTI)

Research Triangle Park, NC 27709-2194

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***No Response – Reminder Letter***

Form Approved  
OMB No. 0910-0753  
Exp. Date 09/30/2019

RIHSC No. 15-101CTP



[CASE ID]

The Parents of [CHILD’S FIRST NAME OR INITIALS] [Date]

[Address1]

[Address2]

[City], [State] [Zip]

Dear Parents of [CHILD’S FIRST NAME OR INITIALS]:

This is a reminder to have your child **[child’s first name]** complete the third follow-up survey for the **FDA Health and Media Study**.

Your child’s participation is important and will contribute to valuable research related to youth attitudes toward health, health behaviors, and advertisements they may have seen on TV, online, or heard on the radio.

To complete the on-line questionnaire on a personal computer, laptop, or tablet (the questionnaire cannot be accessed on a phone):

1. **Open your web browser and type in the study website address: [RUSTEC WEBSITE]**
2. **Once you have reached the study website, type in the username and password exactly as shown below:**

**Username: [Case ID]**

**Password: [Password]**

1. **Once you’ve typed in your username and password, you will see instructions for completing this round of the study. A parent or legal guardian must follow the steps to provide permission for the child to complete the survey.**

Those who complete the survey on-line will receive a check for $20 for completing the survey. If your child completes the survey with one of our field interviewers, he will be offered $20 in cash.

Your help with this round of the study is voluntary. All information provided by your child will be kept private to the fullest extent allowable by law and used only for statistical purposes. You or your household will never be identified in any analysis, reports, or publications, and no one will try to sell you anything.

For more information about the study, you can call our project assistance line toll-free at (866) 214-2039, or email us at mediastudy@rti.org. If you have a question about your rights as a study participant, you can call RTI’s Office of Research Protection toll-free at (866) 214-2043. Thank you in advance for your help.

Sincerely,

Matthew Farrelly, PhD

RTI International

**OMB No: 0910-0753 Expiration Date: 09/30/2019**

**Paperwork Reduction Act Statement: The public reporting burden for this collection of information has been estimated to average 3 minutes per response. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing burden to PRAStaff@fda.hhs.gov**

***SORRY I MISSED YOU CARD***

**Sorry I Missed You**

**Dear Resident:**

I stopped by today to talk to you about an important research study being conducted by RTI International.

I am sorry that I did not find you at home. I will return to talk with you in the next few days.

If you have any questions, please call 1-866-214-2039.

Thank you in advance for your cooperation.

**Sincerely*, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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RTI International

Research Triangle Park, NC 27709

RTI International is a trade name of Research Triangle Institute

***Incentive Receipt***

**Interview Incentive Receipt**

**U.S. Food and Drug Administration**

and

**RTI International**

Thank you for participating in the FDA Health and Media Study.

In appreciation of your participation in this important study, you are eligible to receive $20 in cash.

Since maintaining the privacy of your information is important to us, your name will not be entered on this form. However, the interviewer must sign and date this form to certify you received (or declined) the cash incentive.

RTI Project # 0215534.004.001.004.002

Disposition: Send original to supervisor; retain yellow copy; pink copy to respondent.

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□ Accepted Cash Incentive □ Declined Cash Incentive