

Attachment P7: Cognitive Testing Participant Screener
Understanding Use of Electronic Vapor Devices (EVDS) among Youth

RECRUITMENT SCRIPT

Parent Introduction:

Hello Mr. /Ms. _____, my name is _____ from [INSERT MARKET RESEARCH FACILITY NAME]. Previously you provided us with your name and telephone number for our directory and asked us to contact you about any market research opportunities. I would like to talk to you about a project we plan to conduct for the Centers for Disease Control and Prevention (the CDC). We are recruiting youth for an upcoming project that seeks to better understand how youth think about and discuss tobacco-related issues; this interview will last for approximately 45 minutes. This project will help ensure that the way we ask teens questions about tobacco use behavior in surveys is in a manner they can understand and provide the correct information. The findings from this activity will be used to improve a future survey given to youth in schools and other settings about tobacco. The interview will be observed by project staff and will be audiotaped.

Can we speak to _____ [teen's name] in private to see if he/she is able to participate in the project? If he/she is able to participate, we will need you to review a permission form and give your consent prior to their participation in the interview.

Youth Introduction:

Hello _____, my name is _____. I'm with XXX and we're interested in talking to teens about tobacco products and electronic vaping devices (including the substances that are used in these devices, like nicotine and marijuana). This information is being collected for the Centers for Disease Control and Prevention (the CDC). If you participate in the interview, we will ask you different questions related to your thoughts and opinions on tobacco related topics. Nothing you share in the interview will be shared with anyone outside of the interview, including your parents. Would you be willing to answer a few questions to see if you are able to participate in the project? [If NO, thank and terminate. If YES:] Are you in a location where you are alone and will not be overheard by others? [If YES, continue. If NO:] Can you move to a private place where my questions will not be overheard by others?

Screening Questions

Q1a. Are you home schooled?

[NO] Continue

[YES] **TERMINATE**

Q1b. YOUTH What grade are you in?

[A] 6th grade

[B] 7th grade

[C] 8th grade

[D] 9th grade

[E] 10th grade

[F] 11th grade

[G] 12th grade

[H] Other

[6th-12th grade] Continue

[Anything else] **TERMINATE**

Q2. How old are you?

[A] 12 years old

[B] 13 years old

[C] 14 years old

[D] 15 years old

[E] 16 years old

[F] 17 years old

[G] 18 years old

[H] Other

[12 to 18 years] Continue

[Anything else] **TERMINATE**

The next questions are about electronic vaping devices. Electronic vaping devices are products that usually contain a nicotine-based liquid that is aerosolized and inhaled. You may also know them as vape-pens, hookah-pens, juuls, electronic hookahs (e-hookahs), electronic cigars (e-cigars), electronic pipes (e-pipes), or e-vaporizers. Some look like cigarettes and others look like pens or small pipes. These are battery-powered devices that produce aerosol instead of smoke. Some brands examples are NJOY, Blu, VUSE, MarkTen, Finiti, Starbuzz, and Fantasia.

Q3. Have you ever used an electronic vaping device like an electronic cigarette for example, even once or twice?

- [NO] – Continue to Q6
- [YES] – Continue to Q4

Q4. During the past 30 days, that is since [insert date], on how many days did you use an electronic vaping device?

- [A] 0 days
- [B] 1-2 days
- [C] 3-5 days
- [D] 6-9 days
- [E] 10-19 days [F] 20-29 days
- [G] All 30 days

- [A] CONTINUE if < 8 non-users recruited; **TERMINATE if 8 non-users already recruited**
- [B-G] **CONTINUE**

Q5. In total, on how many days have you used an electronic vaping device in your entire life?

- [A] 0 days
- [B] 1 day
- [C] 2 to 10 days
- [D] 11 to 20 days
- [E] 21 to 50 days
- [F] 51 to 100 days
- [G] Over 100 days

Q6. Have you ever tried any of the following tobacco products, even just one time? (select all that apply)

- [A] Cigarettes
- [B] Cigars or big cigars
- [C] Cigarillos
- [D] Little cigars
- [E] Chewing tobacco, snuff, or dip
- [F] Electronic cigarettes or E-cigarettes [compare to Q3]
- [G] Electronic hookahs (e-hookahs), hookah pens, vape pens, or some other electronic vapor devices such as electronic cigars (e-cigars) or electronic pipes (e-pipes) [compare to Q3]
- [H] Juuls
- [I] Pipes filled with tobacco
- [J] Water pipes, also known as hookahs
- [K] Roll-your-own cigarettes
- [L] Snus
- [M] Dissolvable tobacco products
- [N] Some other tobacco product
- [WRITE IN AND CHECK]** _____

[I] I have never tried any of these products

Q7. Have you used any of those products in the past 30 days?

[A] Yes

If yes, which product(s): _____

On how many days of the past 30 days did you use each product? **[Ask for each product used in the past 30 days]**

[A] 0 days

[B] 1-2 days

[C] 3-5 days

[D] 6-9 days

[E] 10-19 days

[F] 20-29 days

[G] All 30 days

[B] No

Demographic Questions

Q8. Are you male or female?

[A] Male

[B] Female

[C] Transgender

[D] Don't know

[E] Prefer not to answer

Q9. Are you Hispanic, Latino, Latina, or of Spanish origin?

[A] Yes

[B] No

Q10. What is your race? I am going to read several categories of race. You may choose one or more categories as they apply. Are you...

[A] White

[B] Black or African American

[C] Asian

[D] Native Hawaiian or other Pacific Islander

[E] American Indian or Alaska Native

[F] Other [WRITE IN] _____

If eligible:

From what you told me it looks like you are eligible to participate in the project and we invite you to participate in an interview to discuss tobacco issues and products, including electronic vaping devices. The interview will last about 45 minutes, will be audio recorded, and observed by the project staff.

[YOUTH] Your participation is voluntary and nothing you share in the interview will be shared with anyone outside of the interview, including your parent or guardian. You will receive \$40 compensation to cover time and transportation costs.

Are you interested in participating in this project?

- [YES] Continue
[NO] TERMINATE [Read termination script.]

[YOUTH] If under 18

Because you are under age 18 years, we will need a parent or guardian's permission for you to be in the project. Will you be able to have a parent or a guardian provide permission verbally for you to attend?

- [YES] Continue
[NO] TERMINATE [Read termination script.]

You will need to have your parent review the permission form when you come to the interview. If they don't review the form, you won't be able to participate.

I'm glad that you will be able to join us! The interview will take place on **[Day], [Date], at [] at [site location]**. If you normally wear contacts, or glasses to read please remember to bring them with you.

Termination Script:

I'm sorry but you are not eligible to participate in the project. There are many reasons why individuals are not eligible to participate. The participation criteria were set prior to our call today. However, CDC would like to remind you that there is no safe tobacco product, including the products I asked you about today.

Form Approved

OMB No. 0920-0621

Expiration Date: xx/xx/xxxx

Participant permission recorded by _____ on ___/___/20__