

2020  
Center for Tobacco Products,  
Food and Drug Administration  
Funded Trainee/Scholar Survey

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# 2020 Center for Tobacco Products, Food and Drug Administration Funded Trainee/Scholar Survey

The following are definitions for key terms found throughout the survey:

## What is TCORS?

Tobacco Centers of Regulatory Science (TCORS) grants are designated funding through the Food and Drug Administration (FDA) Center for Tobacco Products (CTP) to support research to inform the regulation of tobacco products.

## What is a K Award?

A K award is a research career development award to provide individual and institutional research training opportunities (including international) to trainees at the undergraduate, graduate, and postdoctoral levels. K awards include K01, K02, K05, K07, K08, K12, K18, K22, K23, K24, K25, K26, K43, K76, and K99/R00 awards.

## What is CTP-funded?

Both TCORS and other CTP-funded National Institutes of Science (NIH) grants and projects, including K awards.

## What qualifies as tobacco regulatory science (TRS) training?

Any tobacco regulatory science (TRS) training activity, program, or experience that has been supported by either a TCORS training grant (e.g., a formal or informal TCORS training program) or other TRS-related training supported through an individual K award. Examples include TRS-related seminars, webinars, conferences, and mentor programs.

## What about formal structured or semi-structured TCORS training programs?

This refers to TRS training resulting from a TCORS grant (TCORS grants include a training and career enhancement core to help facilitate career development of future generations of tobacco regulatory science researchers).

## Am I a CTP-funded trainee/scholar?

For the purpose of this survey, trainee/scholar refers to individuals identified as currently being funded (in part or wholly) through a Center for Tobacco Products (CTP) TCORS project or K award.

### 1. Please check the box that best describes your role as a trainee/scholar in tobacco regulatory science.

- Graduate student
- Post-doctoral Fellow
- Other: (please specify) \_\_\_\_\_

2. Please check one box that **best** describes your current funding status. [Programming instruction: allow just one checked box]

- Fully funded on TCORS grant
- Partially funded on TCORS grant
- Not funded on TCORS grant, but work with TCORS research team, TCORS research project, or use TCORS data, etc.
- Fully funded on a CTP-funded K award
- Partially funded on a CTP-funded K award
- Not funded on a CTP-funded K award, but work with CTP-funded research team, CTP-funded research project, or use CTP data, etc.
- Other (please specify): \_\_\_\_\_
- Don't know

3. (For TCORS funded trainees only) Please indicate when you started your TCORS training. **(mm/YYYY)**

4. (For TCORS funded trainees only) Please indicate when you completed your TCORS training. **(mm/YYYY)**

5. Are you funded on more than one TCORS or CTP-funded K award? [programming instruction: allow just one checked box]

- Yes
- No
- I don't know
- Not Applicable, I'm not funded on a TCORS or CTP-funded K award

6. Please indicate how long you have received CTP funding. [programming instruction, allow continuation if this is left unanswered]

- Less than 1 year
- 1 to 2 years
- More than 2, but less than 5 years
- More than 5 years
- I don't know

**4. Please check the box that best describes your current tobacco regulatory science (TRS) training activities. [programming instruction: allow just one checked box]**

**Over the past 12 months have you participated in a formal TRS training program?**

- Yes, I participated in a formal TCORS training program through my institution
- Yes, I participated in a formal TRS training program (not under TCORS)
- No, I did not participate in a formal TRS training program

**5. Other than participation in a formal training program, over the past 12-months, what other tobacco regulatory science (TRS) trainings have you attended? [Please select all that apply] [programming instruction: allow any checked box]**

- TRS training activities at my institution
- TRS training activities at another institution (not my primary institution)
- Tobacco Regulatory Science Program (TRSP) meeting at NIH
- Center for Coordination of Analytics, Science, Enhancement, and Logistics (CASEL) webinar/events
- TCORS meeting
- I have not attended TRS training activities
- Other, please specify \_\_\_\_\_

**6. Have you participated in any of the following activities as part of your TRS training experience? For those activities in which you have participated, please rate their usefulness for your professional development and intended career. [programming instruction: only display the usefulness options for participants who choose yes]**

	Did you participate?		Very useful	Somewhat useful	Not useful
	Yes	No			
a. Classes and formal coursework	1	2	1	2	3
b. Online courses, webinars, and training	1	2	1	2	3
c. Research projects	1	2	1	2	3
d. Internships	1	2	1	2	3
e. Work with mentors	1	2	1	2	3
f. TRS-related conferences and workshops organized by NIH/FDA	1	2	1	2	3
g. TRS-related conferences and workshops NOT organized by NIH/FDA	1	2	1	2	3
h. TCORS working groups	1	2	1	2	3
i. Journal clubs	1	2	1	2	3

	Did you participate?		Very	Somewhat	Not useful
	1	2	useful	useful	useful
j. Mentored grant writing	1	2	1	2	3
k. Presentations	1	2	1	2	3
l. Scientific writing (e.g. writing journal articles, abstracts, dissertation)	1	2	1	2	3
m. Other, specify: _____	1	2	1	2	3

7. Have you participated in or utilized any of the following Center for Coordination of Analytics, Science, Enhancement, and Logistics (CASEL)-supported activities or resources as part of your training experience? For those that you participated in or utilized, please rate their usefulness for your professional development and intended career. [programming instruction: only display the usefulness options for participants who choose yes]

	Did you participate/ utilize?		Very useful	Somewhat useful	Not useful
	Yes	No			
a. CASEL webinars	1	2	1	2	3
b. TRS Knowledge Center	1	2	1	2	3
c. CASEL trainee events	1	2	1	2	3
d. Other, specify: _____	1	2	1	2	3

8. Have you had the opportunity to learn about any of the following topics either through coursework or other training activity related to your CTP funding? For those topics you had the opportunity to learn about, please indicate the extent to which your knowledge increased as a result of the training program. [programming instruction: only display the extent of knowledge increase options for participants who choose yes]

	Opportunity to learn about topic		Increased knowledge greatly	Increased knowledge somewhat	Did not increase knowledge
	Yes	No			
a. Health consequences of tobacco use and population health impact	1	2	3	2	1
b. Tobacco Control Act/FDA regulatory framework	1	2	3	2	1
c. Tobacco control policies and programs	1	2	3	2	1
d. Tobacco and nicotine product diversity	1	2	3	2	1
e. Vulnerable populations	1	2	3	2	1
f. Skills: research, dissemination, testimony	1	2	3	2	1

	Opportunity to learn about topic		Increased knowledge greatly	Increased knowledge somewhat	Did not increase knowledge
	1	2	3	2	1
g. Addiction	1	2	3	2	1
h. Litigation and disclosure	1	2	3	2	1
i. Marketing/Communication	1	2	3	2	1
j. Toxicology	1	2	3	2	1
k. Economics: costs and benefits	1	2	3	2	1

**9. Using a scale of 1 (Not at all), to 3 (Very well), please indicate how well the CTP-funded training has prepared you for the following research and policy related activities.**

	Not at all	Somewhat	Very well
a. Identifying and developing research questions in tobacco regulatory science	1	2	3
b. Identifying and understanding CTP authority and FDA policy priorities	1	2	3
c. Using FDA priorities and proposed regulatory policies to inform and develop innovative research questions	1	2	3
d. Designing and conducting research studies to inform policy and population level health	1	2	3
e. Participating in FDA docket submissions	1	2	3
f. Participating in FDA public workshops	1	2	3

**10. Using a scale of 1 (Not at all) to 3 (Very well) please indicate how well CTP-funded training has prepared you to communicate research findings to various audiences and to participate in professional development activities.**

	Not at all	Somewhat	Very well
a. Communicating TRS findings to the scientific community (e.g., publishing in peer review journals, presenting at scientific meetings/conferences)	1	2	3
b. Communicating TRS findings to policymakers and regulatory staff (e.g., submitting to FDA docket, presenting at FDA public workshops)	1	2	3
c. Communicating TRS findings to the general public (e.g., communication with the press or through social media platforms)	1	2	3
d. Engaging in active career planning	1	2	3
e. Participating in leadership activities	1	2	3
f. Identifying funding sources and apply for research funding/grants	1	2	3
g. Developing an active professional network	1	2	3

**11. How much has the CTP-funded training increased your overall interest in a career involving tobacco regulatory science? [programming instruction: allow just one checked box]**

- No increase in my interest
- Very little increase in my interest
- Some increase in my interest
- Great increase in my interest
- Not sure if my interest has increased

**12. How much has the CTP-funded training increased your knowledge of tobacco regulatory science? [programming instruction: allow just one checked box]**

- No increase in my knowledge
- Very little increase in knowledge
- Some increase in knowledge
- Great increase in knowledge
- Not sure if my knowledge increased

**13. During your time as a trainee in the past year, how many times have you engaged in the following?**

Activity	Never	Once	Two or more times
a. Submitted for publication, peer-reviewed journal articles related to tobacco regulatory science	1	2	3
b. Accepted for publication, peer-reviewed journal articles related to tobacco regulatory science	1	2	3
c. Submitted comments to FDA/CTP tobacco regulatory science dockets	1	2	3
d. Presented work at conferences or meetings related to tobacco regulatory science	1	2	3
e. Other ( <i>specify</i> ): _____	1	2	3

**14. How many mentors do you have in your CTP-funded TRS training program?**

\_\_\_\_\_ Number [If zero, skip to Q16 "Have you submitted any funding applications..."]

**15. How effective have your primary mentor(s) been during your training experience?**

My mentor(s):	Not at all	Slightly	Somewhat	Moderately	Extremely
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	effective	effective	effective	effective	effective
a. Provides support for my professional growth	1	2	3	4	5
b. Helps me make connections with scientists in the tobacco regulatory science field.	1	2	3	4	5
c. Helps me make connections with scientists outside of the tobacco regulatory science field	1	2	3	4	5
d. Helps me develop research projects	1	2	3	4	5
e. Helps me apply for research funding/submit grants	1	2	3	4	5
f. Helps me manage research projects	1	2	3	4	5
g. Helps me develop conference presentations	1	2	3	4	5
h. Helps me develop publications (e.g., shares authorship on papers, suggests journals)	1	2	3	4	5

**16. Have you submitted (as principal investigator, co-principal investigator, or co-investigator) any funding applications and/or received research funding individually or in collaboration with faculty members since starting work on the CTP-funded project? [programming instruction: allow just one checked box]**

- Yes, competitive funding application
- Yes, non-competitive funding application
- No ---GO TO QUESTION 18

**17. Please provide information for the grant application/funding award referenced in Question 16. For each grant/award, use the drop-down menus to respond to each item. [programming instruction: create dropdowns]**

	Role (PI, co-PI, co-I)	Funding agency (gov't, industry, etc.)	Status (funded, not funded, pending)	TRS related	
				Yes	No
Grant/ Award 1				1	2
Grant/ Award 2				1	2
Grant/ Award 3				1	2

**18. Before you became involved/enrolled in the CTP-funded work, what was the highest degree you held? Please indicate the year you received the degree. [programming instruction: allow just one checked box]**



Degree	Year received (yyyy)
<input type="checkbox"/> High School	
<input type="checkbox"/> Bachelor's	
<input type="checkbox"/> Master's	
<input type="checkbox"/> Professional Doctorate (i.e., MD, JD)	
<input type="checkbox"/> Research Doctorate (i.e., PhD, ScD)	
<input type="checkbox"/> Other ( <i>specify</i> ): _____	

**19. Please use the drop-down menu to indicate your discipline for the highest degree you held before you became involved/enrolled in the CTP-funded work? (SELECT ALL THAT APPLY)**  
 [programming instruction: create a drop-down and allow select all that apply]

- Biochemistry
- Bioengineering
- Biophysics
- Biotechnology
- Cell & Developmental Biology
- Chemistry
- Environmental Sciences
  
- Genetics
- Immunology
- Microbiology and Infectious Disease
- Molecular Biology
- Neuroscience
- Public Health
- Nutritional Sciences
- Pharmacology/Toxicology
- Physiology
- Plant Biology
- Psychology
- Physics
- Social Sciences
- Statistics and/or Research Methods and/or Informatics
- Other (please specify) \_\_\_\_\_

**20. Before you became involved/enrolled in CTP-funded work, was your research focus related to tobacco regulatory science?** [programming instruction: allow just one checked box]

- Yes
- No

**21. Is your current research focus related to tobacco regulatory science?** [programming instruction: allow just one checked box]

- Yes  
 No

**22. Please indicate the degree you are currently seeking and the anticipated year of graduation if known.** [programming instruction: allow just one checked box]

Degree	Expected Year (yyyy)
<input type="checkbox"/> Not seeking a degree (e.g., postdocs)---GO TO QUESTION 26	
<input type="checkbox"/> Bachelor's	
<input type="checkbox"/> Master's	
<input type="checkbox"/> Professional Doctorate (i.e. MD, JD)	
<input type="checkbox"/> Research Doctorate (i.e. PhD, ScD)	
<input type="checkbox"/> Other ( <i>specify</i> ): _____	

**23. Please use the drop-down menu to indicate your discipline for the degree you are currently seeking. (SELECT ALL THAT APPLY)** [Programming instruction: create drop-down and enable select all that apply]

- Biochemistry
- Bioengineering
- Biophysics
- Biotechnology
- Cell & Developmental Biology
- Chemistry
- Environmental Sciences
  
- Genetics
- Immunology
- Microbiology and Infectious Disease
- Molecular Biology
- Neuroscience
- Public Health
- Nutritional Sciences
- Pharmacology/Toxicology
- Physiology
- Plant Biology
- Psychology
- Physics
- Social Sciences
- Statistics and/or Research Methods and/or Informatics
- Other (please specify) \_\_\_\_\_

**24. What is your gender?** [programming instruction: allow just one checked box]

- Male

Female

**25. Are you of Hispanic or Latino origin?** [programming instruction: allow just one checked box]

Yes

No

**26. What is your race?** (Select all responses that apply.) [programming instruction: allow check all that apply]

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

**Thank you very much for your participation.**