

## SMOKER SURVEY

BASE: If DOV\_SMOKER=1

**OMB\_SMOKER [DISP]**

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Extended Evaluation of the National Tobacco Prevention and Control Public Education Campaign Smoker Questionnaire

Public reporting burden of this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1083).

BASE: If A3=2 or ((DOV\_SURVEY\_1R=1 and ALL\_S5=2) or (DOV\_SURVEY\_1R NE 1 and ABS\_S3D=2)) (R is a some day smoker)

**A5 [N with range 0-30]**

The next few questions are about tobacco use and smoking cessation.

During the **past 30 days**, that is since [DOV\_DATE1], on how many days did you smoke cigarettes?

\_\_\_\_ Number of days

*Scripter: If A3=1 or ((DOV\_SURVEY\_1R=1 and ALL\_S5=1) or (DOV\_SURVEY\_1R NE 1 and ABS\_S3D=1)) (R is an every day smoker), autofill A5=30*

BASE: If DOV\_SMOKER=1

**B1 [N with range 1-200]**

On the average, about how many cigarettes a day do you now smoke? Enter '1' if less than 1 cigarette.

\_\_\_\_ Number of cigarettes

BASE: If DOV\_SMOKER=1

**B2 [S]**

On the days that you smoke, how soon after you wake up do you usually have your first cigarette? Would you say...

1. Within 5 minutes
2. 6-30 minutes
3. From more than 30 minutes to 1 hour
4. After more than 1 hour

BASE: If DOV\_SMOKER=1

**C2 [N with range 0-999]**

The next few questions ask about your attempts to quit smoking regular cigarettes at different times over the past year. In answering, please think specifically about the timeframe for each question.

During the **past 3 months**, that is, since [DOV\_DATE2], how many times have you stopped smoking for one day or longer because you were trying to quit smoking cigarettes for good?

\_\_\_\_ Number of times

BASE: If DOV\_SMOKER=1

**C2a [N with range C2 value-999]**

During the **past 6 months**, that is since [DOV\_DATE4], how many times have you stopped smoking for one day or longer because you were trying to quit smoking cigarettes for good?

\_\_\_\_ Number of times

BASE: If DOV\_SMOKER=1

**C1 [N with range C2a value-999; if C2a is refused, range C2 value-999]**

During the **past 12 months**, that is, since [DOV\_DATE3], how many times have you stopped smoking for one day or longer because you were trying to quit smoking cigarettes for good?

\_\_\_\_ Number of times

BASE: If DOV\_SMOKER=1

**C3c [S]**

In the **past 12 months**, have you used any of the following medications to help you quit smoking: nicotine skin patch, nicotine gum, nicotine lozenges, nicotine nasal spray, a nicotine inhaler, or pills such as Wellbutrin, Zyban, bupropion, Chantix, or varenicline?

1. Yes
2. No

BASE: If C1>0 or C2>0 or C2a>0

**C4 [Grid, S Across]**

When you last tried to quit smoking, did you do any of the following?

*Statements in row (randomize and record response order):*

- C4\_1. Give up cigarettes all at once
- C4\_2. Gradually cut back on cigarettes
- C4\_3. Switch completely to vaping (using e-cigarettes, vape pens, JUULs, mods, or other personal vaporizers)
- C4\_4. Substitute some of your regular cigarettes with vaping (using e-cigarettes, vape pens, JUULs, mods, or other personal vaporizers)
- C4\_5. Switch to mild or some other brand of cigarettes
- C4\_6. Use nicotine replacements like the nicotine patch, nicotine gum, nicotine lozenges, nicotine nasal spray, or nicotine inhaler
- C4\_7. Use medications like Wellbutrin, Zyban, bupropion, Chantix, or varenicline
- C4\_8. Get help from a telephone quit line
- C4\_9. Get help from a website such as Smokefree.gov or CDC.gov/Tips
- C4\_10. Get help from a doctor or other health professional
- C4\_11. Get help from a pharmacist
- C4\_12. Use a mobile App to help you quit smoking

C4\_13. Use a texting program to help you quit smoking

Answers in columns:

1. Yes
2. No

BASE: If C1>0 or C2>0 or C2a>0

**C5 [Grid, S Across]**

When you last tried to quit smoking, did any of the following motivate you to try to quit?

Statements in row:

- C5\_1. A family member or friend encouraged me to try to quit
- C5\_2. Anti-tobacco television commercials, online ads or videos, radio ads, or other types of advertisements that focus on the health consequences of smoking
- C5\_3. My doctor or other health professional advised me to quit smoking
- C5\_4. Workplace restrictions on smoking
- C5\_5. Cost of cigarettes is too high
- C5\_6. Concern about COVID-19
- C5\_7. Other, please specify: [O] \_\_\_\_\_

Answers in columns:

1. Yes
2. No

Scripter: If C5\_5 = "Yes" but nothing is entered in the verbatim, prompt with "Please tell us what else motivated you to quit smoking."

BASE: If DOV\_SMOKER=1

**C6a [S]**

Do you want to quit smoking cigarettes for good?

1. Yes
2. No

BASE: If C6a=1

**C7b [S]**

How much do you want to quit smoking? Would you say you want to quit...

1. Not at all
2. A little
3. Somewhat
4. A lot

Scripter: If C6a=2, autopunch C7b=1 (not at all)

BASE: If C6a=1

**C9 [S]**

Do you plan to quit smoking for good...

1. In the next 7 days
2. In the next 30 days
3. In the next 6 months
4. In the next 1 year
5. More than 1 year from now

6. I do not plan to quit smoking cigarettes for good
7. Not sure/Uncertain

*Scripter: If C6a=2, autopunch C9=6 (I do not plan to quit smoking cigarettes for good)*

BASE: If DOV\_SMOKER=1

**C10 [S]**

If you decided to give up smoking altogether in the **next 12 months**, how likely do you think you would be to succeed? Would you say...

1. Extremely likely
2. Very likely
3. Somewhat likely
4. Very unlikely
5. Extremely unlikely

BASE: If DOV\_SMOKER=1

**B8 [S]**

The next questions are about vaping (using e-cigarettes, vape pens, JUULs, mods, other personal vaporizers). Vaping products are battery-powered and produce vapor instead of smoke. They typically use a nicotine liquid, although the amount of nicotine can vary and some may not contain any nicotine at all. Some common brands are JUUL, Vuse, MarkTen, Logic, and Blu.

These questions concern electronic vaping products for nicotine use. The use of electronic vaping products for marijuana use is not included in these questions. Some examples of vaping products are pictured below.

**[SHOW IMAGE "NEW\_VAPE\_IMAGE.JPG" centered on screen]**

Have you ever vaped, even one time?

1. Yes
2. No

BASE: If B8=1

**B8a [S]**

During the past 30 days, on how many days did you vape?

1. 0 days
2. 1 or 2 days
3. 3 to 5 days
4. 6 to 9 days
5. 10 to 19 days
6. 20 to 29 days
7. All 30 days

BASE: If B8=1

**B9 [S]**

Do you now vape...

1. Every day
2. Some days
3. Not at all

BASE: If B9=1 or B9=2

**B9a [S]**

On the days that you vape, how often do you vape?

1. Rarely
2. Sometimes
3. Often
4. Very often

BASE: If B9=1 or B9=2

**B9b [S]**

Do you usually vape with disposable devices, rechargeable devices that use pods or cartridges or rechargeable devices that use large refillable tanks?

Please indicate the type of e-cigarette that you **use the most**.

1. Disposable devices that are not rechargeable or refillable
2. Rechargeable devices that use pods or cartridges, like JUULS
3. Rechargeable devices that have large refillable tanks
4. Unknown device type

BASE: If B9=1 or B9=2

**B9b\_1 [S]**

When you vape, does the liquid/contents usually contain nicotine?

1. Yes
2. No
3. Don't know

BASE: If B8=1 and B9 not refused

**B10 [M]**

Are any of the following a reason why you [B9=3: first tried / B9=1 or 2: currently use] electronic vapor products?

*Randomize and record response order, with B10\_15 always last*

- B10\_1. I can vape when or where smoking cigarettes is not allowed
- B10\_2. Vaping might be less harmful to me than smoking cigarettes
- B10\_3. I like the flavors
- B10\_4. Vaping can help me quit or cut back on smoking cigarettes
- B10\_5. Vaping helps me deal with cravings to smoke
- B10\_6. A friend or family member suggested I vape as a way to quit smoking
- B10\_7. A friend or family member [B9=3: shared / B9=1 or 2: shares] their vaping device with me
- B10\_8. Vaping is popular among people my age
- B10\_9. I [B9=3: was / B9=1 or 2: am] curious about vaping
- B10\_10. Other, specify: [O] \_\_\_\_\_ [anchor]

BASE: If B9=1 or B9=2

**B13 [Grid; S Across]**

In your opinion, regularly vaping and smoking cigarettes is....

*Scripter: Show numbers before answer text.*

1. Much less harmful to one's health than only smoking cigarettes
2. Slightly less harmful to one's health than only smoking cigarettes
3. Equally harmful to one's health as only smoking cigarettes
4. Slightly more harmful to one's health than only smoking cigarettes
5. Much more harmful to one's health than only smoking cigarettes

BASE: If B9=1 or B9=2

**B14**

Do you want to quit vaping for good?

1. Yes
2. No

BASE: If DOV\_SMOKER=1

**C20 [S]**

A telephone quitline is a free telephone-based service that connects people who smoke cigarettes with someone who can help them quit. Have you heard of 1-800-QUIT-NOW?

1. Yes
2. No

BASE: If C20=1

**C20a [S]**

Have you called 1-800-QUIT-NOW or any other telephone quit line in the **past 3 months** since [DOV\_DATE2]?

1. Yes
2. No

BASE: If C20a=1

**C22 [S]**

In the **past 3 months**, did you receive any of the following medications for free from the 1-800-QUIT-NOW smokers' quitline: nicotine patches, gum, lozenges, nasal spray, inhaler, or pills such as Wellbutrin, Zyban, bupropion, Chantix, or varenicline?

1. Yes
2. No

BASE: If DOV\_SMOKER=1

**D18\_19 [Grid, S across]**

The next few questions will ask about your opinions related to smoking, tobacco use, and cessation.



BASE: If DOV\_ SMOKER=1

**E8a [S]**

In your opinion, how likely is it that regularly breathing secondhand tobacco smoke from cigarettes would worsen asthma or cause infections or lung damage among nonsmokers?

1. Extremely likely
2. Very likely
3. Somewhat likely
4. Very unlikely
5. Extremely unlikely

BASE: If DOV\_ SMOKER=1

**F1 [S]**

The next few questions are about media use.

On an average day, how much television do you watch?

1. None
2. Less than one hour
3. About 1 hour
4. About 2 hours
5. About 3 hours
6. About 4 hours
7. 5 hours or more

BASE: If DOV\_ SMOKER=1

**F2 [S]**

On an average day, how many hours do you listen to the radio?

1. None
2. Less than one hour
3. About 1 hour
4. About 2 hours
5. About 3 hours
6. About 4 hours
7. 5 hours or more

BASE: If DOV\_ SMOKER=1

**F3 [S]**

On an average day, how many hours do you use the Internet for personal reasons?

1. None
2. Less than one hour
3. About 1 hour
4. About 2 hours
5. About 3 hours
6. About 4 hours
7. 5 hours or more

BASE: If DOV\_ SMOKER=1

**F13 [S]**

Have you heard of the Website [www.cdc.gov/Tips](http://www.cdc.gov/Tips)?



1. Yes
2. No

BASE: If F13=1

**F13a [S]**

Have you visited [www.cdc.gov/Tips](http://www.cdc.gov/Tips) in the **past 3 months**, since [DOV\_DATE2]?

1. Yes
2. No

BASE: If DOV\_SMOKER=1

**F14 [S]**

In the **past 3 months**, that is since [DOV\_DATE2], have you seen or heard advertisements for medications or products to help people quit smoking such as Chantix, Wellbutrin, Zyban, varenicline, bupropion, nicotine patches, or nicotine gums?

1. Never
2. Rarely
3. Sometimes
4. Often
5. Always

BASE: If DOV\_SMOKER=1

**F17 [GRID; S ACROSS]**

In the **past 3 months**, that is since [DOV\_DATE2], have you seen or heard of any ads on television or radio with the following themes or slogans?

*Statements in row (randomize and record response order):*

- F17\_1. Tips from Former Smokers
- F17\_2. Truth
- F17\_3. Every Try Counts
- F17\_4. This Free Life
- F17\_5. Fresh Empire
- F17\_6. The Real Cost

*Answers in columns:*

1. Yes
2. No

BASE: If DOV\_SMOKER=1

**F20\_1 [S]**

Have you seen the following Facebook page or group when you have been online in the **past 3 months**, since [DOV\_DATE2]?

*[SHOW IMAGE "Tips Facebook.png" centered on screen]*

1. Yes
2. No

BASE: If DOV\_SMOKER=1

**F20\_2 [S]**

Have you seen the following YouTube channel or page when you have been online in the **past 3 months**, since [DOV\_DATE2]?

[SHOW IMAGE "Tips Youtube.png" centered on screen]

1. Yes
2. No

BASE: If DOV\_SMOKER=1

**F20\_3 [S]**

Have you seen the following Twitter page when you have been online in the **past 3 months**, since [DOV\_DATE2]?

[SHOW IMAGE "Tips Twitter.png" centered on screen]

1. Yes
2. No

BASE: If DOV\_SMOKER=1

**F21 [Grid, S Across]**

Sometimes people use the Internet specifically for health-related reasons. In the **past 30 days**, have you used the Internet for any of the following reasons?

Statements in row (randomize and record response order):

- F21\_1. Looked for information about quitting smoking
- F21\_2. Looked for information vaping (e.g., e-cigarettes or other vaping products)
- F21\_3. Looked for information about nicotine replacement therapies (e.g., patches, gum, lozenges)
- F21\_4. Downloaded a mobile App to help you quit smoking
- F21\_5. Signed up for a texting program to help you quit smoking
- F21\_6. Created an online plan to help you quit smoking

Answers in columns:

1. Yes
2. No

SMOKER AD SECTION STARTS HERE.

BASE: If DOV\_SMOKER=1

**SMOKER\_VID\_INTRO [DISP]**

Now, we would like you to view a series of advertisements that have been shown on television and online in the U.S. Please make sure your computer's volume is set to an appropriate level. If the videos do not work, you'll still be able to see images and descriptions of the advertisements.

When you are ready, please click the "Next" button below to view the first advertisement. Click or tap on each video to begin playback; the "Next" button will appear once the entire video has been shown.

There is a total of [PPETHM<>4 and DOV\_PPETHM\_ABS<>4 and ABS\_NQRACE1\_FRESH=1 (non-Hispanic): 7 ads / PPETHM=4 or DOV\_PPETHM\_ABS=4 or ABS\_NQRACE1\_FRESH=2-5 (Hispanic): 8 ads] to view. After you view each ad, there will be a few questions that ask about your opinions of the ad.

BASE: If DOV\_SMOKER=1

Scripter: Show all respondents ads 1-5:

- 1=MICHEAL LIES\_15SEC
- 2=REBECCA BOOT\_15SEC
- 3=ASAAD AND LEAH\_15SEC
- 4=TONYA\_15SEC
- 5=CHRISTINE HEAD OF HOUSEHOLD\_15SEC

Scripter: Randomly select and show 2 of ads 6-9:

- 6=DENISE AND BRIAN\_15SEC
- 7=GERI TEXTING\_15SEC
- 8=SHAWN\_15SEC
- 9=SHARON TREADMILL\_15SEC

Scripter: If PPETHM=4 or DOV\_PPETHM\_ABS=4 or ABS\_NQRACE1\_FRESH=2-5 (R is Hispanic), randomly select and show one of ads 10-12:

- 10=BRETT & FELICITA\_30SEC
- 11=JESSICA\_15SEC
- 12=ROSE\_15SEC

Scripter: Add “\_X” to variable names below that map to ad ID# above. For example:

- F21\_1 indicates “Were you able to view this video” for MICHAEL LIES.
- F21\_2 indicates “Were you able to view this video” for REBECCA BOOT .
- F21\_3 indicates “Were you able to view this video” for ASAAD AND LEAH.
- Etc.

BASE: If DOV\_SMOKER=1

**F21\_x [S; prompt once]**

Were you able to view this video?

- 1. Yes
- 2. No

BASE: If F21\_x=2 or refused

**F23\_x [DISP]**

Now we would like to show you some screen shots from a television advertisement that has been shown in the U.S. Please click the arrow to the right of each image to move to the next image.

Once you have viewed all the images, please click the "Next" button below to continue with the survey.

BASE: If F21\_x=2 or refused

[DISPLAY STORYBOARD IMAGES FOR AD\_X]

BASE: If DOV\_SMOKER=1

**F24\_x [S; prompt once]**

Have you seen this ad on television or online in the **past 6 months**, since March 23, 2020?

- 1. Yes
- 2. No

BASE: If F24\_x=1

**F24a\_x\_TV [S]**

In the **past 6 months**, since March 23, 2020, how frequently have you seen this ad on television?

1. Never
2. Rarely
3. Sometimes
4. Often
5. Very often

BASE: If F24\_x=1

**F24a\_x\_COMPUTER [S]**

In the **past 6 months**, since March 23, 2020, how frequently have you seen this ad on a laptop or desktop computer?

1. Never
2. Rarely
3. Sometimes
4. Often
5. Very often

BASE: If F24\_x=1

**F24a\_x\_MOBILE [S]**

In the **past 6 months**, since March 23, 2020, how frequently have you seen this ad on a tablet or smartphone?

1. Never
2. Rarely
3. Sometimes
4. Often
5. Very often

Scripter: Show F25\_x – F28\_3x for 4 randomly selected ads from ads 1-9

BASE: If DOV\_SMOKER=1

**F25\_x [GRID; S Across]**

Please tell us if you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with the following statements.

Statements in row (randomize and record response order):

- F25a\_x. This ad is worth remembering.
- F25b\_x. This ad grabbed my attention.
- F25c\_x. This ad is powerful.
- F25d\_x. This ad is informative.
- F25e\_x. This ad is meaningful to me.
- F25f\_x. This ad is convincing.

Answers in columns:

1. Strongly disagree
2. Disagree
3. Neither agree nor disagree
4. Agree
5. Strongly agree

BASE: If DOV\_SMOKER=1

**F26\_x [GRID; S ACROSS]**

On scale of 1 to 5, where 1 means “not at all” and 5 means “very”, please indicate how much this ad made you feel...

*Statements in row (randomize and record response order):*

- F26a\_x. Sad
- F26b\_x. Afraid
- F26d\_x. Ashamed
- F26f\_x. Hopeful
- F26g\_x. Motivated
- F26h\_x. Understood

*Answers in columns:*

- 1. Not at all
- 2.
- 3.
- 4.
- 5. Very

**BASE: if DOV\_SMOKER=1**

**NEXT\_AD [DISP]**

Now, we would like you to watch another ad.

*Scripter: Repeat the sequence of questions (F21\_X through F28\_3X) for each of the remaining ads per assignment protocol above*

**BASE: if DOV\_SMOKER=1**

Now, we would like you to listen to a streaming radio advertisement that you may have heard online in the U.S. Please make sure your computer’s volume is set to an appropriate level. You may be prompted by your computer to download a program enabling audio playback. When you are ready, please click on the link below to listen to the ad. After you listen to the ad, there will be a few questions that ask about your recent recall of the ad.

[RANDOMLY ASSIGN ALL RESPONDENTS TO LISTEN TO ONE OF THE FOLLOWING ADS]

- 1=Christine Eating Tip.mp3
- 2=Brian Heart Attack.mp3
- 3=Roosevelt Heart Tip.mp3
- 4=Rebecca Tip.mp3

**[PLAY RADIO AD CHOSEN]**

**[ADD “\_x” TO VARIABLE NAMES BELOW THAT MAP TO AD ID # ABOVE. FOR EXAMPLE:**

- F32\_1 indicates “Were you able to listen to this ad” for Christine Radio.
- F32\_2 indicates “Were you able to listen to this ad” for Brian Radio.
- F32\_3 indicates “Were you able to listen to this ad” for Roosevelt Radio.
- F32\_4 indicates “Were you able to listen to this ad” for Rebecca Radio.

**[SP]**

**F35\_x.** Have you heard this ad streaming or online in the **past 3 months**, since **March 23, 2020**?

1. Yes
2. No

[IF F35\_x=1, ASK F35A\_x]

[SP]

**F35a\_x**. In the **past 3 months**, since **March 23, 2020** how frequently have you heard this ad streaming or online?

1. Rarely
2. Sometimes
3. Often
4. Very Often

BASE: If DOV\_SMOKER=1

**SMOKER\_PRINT\_WEB1 [DISP]**

Next, you will see some advertisements that have recently appeared on websites. There is 1 set of images to view, followed by a question about whether you have seen these ads before. When you are ready to view them, please click "Next."

BASE: If DOV\_SMOKER=1

**SMOKER\_PRINT\_WEB2 [DISP]**

[SHOW IMAGE "Tips 2020 Digital Collage.png" centered on screen]

Please click "Next" to proceed to the next set of questions.

BASE: If DOV\_SMOKER=1

**F36 [S]**

In the **past 3 months**, since March 23, 2020, have you seen any of these ads on websites or other places online?

1. Yes
2. No

BASE: If F36=1

**F37 [S]**

Did you see these ads on digital devices such as a smartphone or tablet?

1. Yes
2. No

SMOKER AD SECTION ENDS HERE.

BASE: If DOV\_SMOKER=1

**F38 [S]**

When you go to a convenience store, supermarket, or gas station, how often do you see ads or promotions for vaping products?

1. I never go to a convenience store, supermarket, or gas station
2. Never
3. Rarely
4. Sometimes
5. Most of the time
6. Always

**Demographic Section**

BASE: All respondents

**G1 [N with range 0-10; prompt once]**

Next, how many children aged 17 or younger currently live in your household at least 50% of the time? If none, enter "0".

Include babies and small children.

Type in the number of children 17 years of age or younger.

*Custom refusal prompt: Your answer will help represent the entire U.S. population and will be kept confidential. Thank you!*

BASE: If OFFPANEL=1

**QEDUC [S]**

What is the highest level of school you have completed?

1. Some high school or less – no diploma or GED
2. High school graduate – high school diploma or the equivalent (GED)
3. Some college, no degree
4. Associate degree
5. Bachelor's degree
6. Master's degree
7. Professional or Doctorate degree

BASE: If QEDUC=15

**QEDUCa [S]**

What is the highest level of school you have completed?

1. No formal education
2. 1st, 2nd, 3rd, or 4th grade
3. 5th or 6th grade
4. 7th or 8th grade
5. 9th grade
6. 10th grade
7. 11th grade
8. 12th grade NO DIPLOMA

SCRIPTER: Create data-only variables:

Variable name: PPEDUC [S]

Variable Text: Education - categorical

Response list:

1. No formal education
2. 1st, 2nd, 3rd or 4th grade
3. 5th or 6th grade
4. 7th or 8th grade
5. 9th grade
6. 10th grade
7. 11th grade
8. 12th grade NO DIPLOMA
9. HIGH SCHOOL GRADUATE – high school diploma or the equivalent (GED)
10. Some college, no degree
11. Associate degree
12. Bachelor's degree

13. Master's degree

14. Professional or Doctorate degree

QEDUC	QEDUCa	PPEDUC
	1	1
	2	2
	3	3
	4	4
	5	5
	6	6
	7	7
	8	8
9		9
10		10
11		11
12		12
13		13
14		14

Variable name: PPEDUCAT [S]

Variable Text: Education - categorical

Response list:

1. Less than HS
2. HS
3. Some college
4. Bachelor or higher

QEDUC	PPEDUCAT
15	1
9	2
10-11	3
12-14	4

BASE: IF OFFPANEL=1ALL RESPONDENTS

**QINC [S; prompt once]**

How much is the combined income of all members of YOUR HOUSEHOLD for the **past 12 months**?

Please include your income PLUS the income of all members living in your household (including cohabiting partners and armed forces members living at home). Please count income BEFORE TAXES and from all sources (such as wages, salaries, tips, net income from a business, interest, dividends, child support, alimony, and Social Security, public assistance, pensions, or retirement benefits).

1. Below \$50,000
2. \$50,000 or more
3. Don't know [only show with the prompt if question is refused initially]

Custom refusal prompt: We realize that this is personal information. We will ONLY ASK the range of your household income, NOT the exact amount.

BASE: QINC=1

**QINC2 [S]**

We would like to get a better estimate of your total HOUSEHOLD income in the **past 12 months** before taxes. Was it...



1. Less than \$5,000
2. \$5,000 to \$7,499
3. \$7,500 to \$9,999
4. \$10,000 to \$12,499
5. \$12,500 to \$14,999
6. \$15,000 to \$19,999
7. \$20,000 to \$24,999
8. \$25,000 to \$29,999
9. \$30,000 to \$34,999
10. \$35,000 to \$39,999
11. \$40,000 to \$49,999

BASE: QINC=2

**QINC3 [S]**

We would like to get a better estimate of your total HOUSEHOLD income in the past 12 months before taxes. Was it...

3. \$50,000 to \$59,999
4. \$60,000 to \$74,999
5. \$75,000 to \$84,999
6. \$85,000 to \$99,999
7. \$100,000 to \$124,999
8. \$125,000 to \$149,999
9. \$150,000 to \$174,999
10. \$175,000 to \$199,999
11. \$200,000 to \$249,999
12. \$250,000 or more

SCRIPTER: Create data-only variable:

Variable name: PPINCIMP [S]

Variable Text: HH income – profile and imputed

Response list:

1. Less than \$5,000
2. \$5,000 to \$7,499
3. \$7,500 to \$9,999
4. \$10,000 to \$12,499
5. \$12,500 to \$14,999
6. \$15,000 to \$19,999
7. \$20,000 to \$24,999
8. \$25,000 to \$29,999
9. \$30,000 to \$34,999
10. \$35,000 to \$39,999
11. \$40,000 to \$49,999
12. \$50,000 to \$59,999
13. \$60,000 to \$74,999
14. \$75,000 to \$84,999
15. \$85,000 to \$99,999
16. \$100,000 to \$124,999
17. \$125,000 to \$149,999
18. \$150,000 to \$174,999
19. \$175,000 to \$199,999
20. \$200,000 to \$249,999
21. \$250,000 or more

QINC2	QINC3	PPINCIMP
1		1

2		2
3		3
4		4
5		5
6		6
7		7
8		8
9		9
10		10
11		11
	3	12
	4	13
	5	14
	6	15
	7	16
	8	17
	9	18
	10	19
	11	20
	12	21

**BASE: if OFFPANEL=1**

**QMARIT [S]**

Are you now...?

1. Married
2. Widowed
3. Divorced
4. Separated
5. Never married

**BASE: if QMARIT=2 to 5 or refused**

**QPRTR [S]**

Are you currently living with a partner to whom you are not married?

1. Yes
2. No

*SCRIPTER: Create data-only variable PPMARIT by using the below logic involving responses to QMARIT AND QPRTR.*

*Create numeric variable, PPMARIT, range [1,6]  
 compute PPMARIT=QMARIT.  
 if (QPRTR=1 and QMARIT=5) PPMARIT=6 (living with partner)*

**BASE: if OFFPANEL=1**

**E100 [S; prompt once]**

Do any of the following currently describe you?

*Statements in row:*

1. Employed full time (35 hours or more per week) for pay with an organization or company
2. Employed part time (less than 35 hours per week) for pay with an organization or company

3. Self-employed full time (35 hours or more per week)
4. Self-employed part time (less than 35 hours per week)

Answers in columns:

1. Yes
2. No

SCRIPTER: Create DOV\_EMPLOYED

If E100\_1=1 or E100\_2=1 or E100\_3=1 or E100\_4=1 DOV\_EMPLOYED=1.

If E100A=2 and E100B=2 and E100C and E100D=2 DOV\_EMPLOYED=2.

Else DOV\_EMPLOYED=3.

1. Employed
2. Not employed
3. Refused

BASE: If DOV\_EMPLOYED=2

**E102 [GRID, S Across]**

Do any of the following currently describe you?

Statements in row:

1. Looking for work
2. Unable to work due to a disability
3. On temporary layoff from a job

Answers in columns:

1. Yes
2. No

BASE: If OFFPANEL=1

**E104 [GRID, S Across]**

Do any of the following currently describe you?

Statements in row:

1. Retired
2. A student
3. A stay-at-home spouse or partner
4. Working in an unpaid job, such as an internship or volunteer position

Answers in columns:

1. Yes
2. No

SCRIPTER: Create data-only variable:

Variable name: QWORK [S]

Variable Text: Current employment status

Response list:

1. Working – as a paid employee
2. Working – self-employed
3. Not working – on temporary layoff from a job
4. Not working – looking for work
5. Not working – retired
6. Not working – disabled
7. Not working – other

Values must be assigned in the order below so that codes at the bottom of the table overwrite codes at the top:

E100	DOV_EMPLOYED	E102	E104	QWORK
	3			Refused
	2			7
			E104_2=1	7
			E104_3=1	7
			E104_4=1	7
		E102_2=1		6
			E104_1=1	5
		E102_1=1		4
		E102_3=1		3
E100_4=1				2
E100_2=1				1
E100_3=1				2
E100_1=1				1

BASE: If PPWORK=1 or 2 or QWORK=1 or 2

**QWORK2 [S]**

Altogether, how many jobs do you have?

1. One
2. Two
3. Three
4. Four or more

BASE: If (OFFPANEL=1 and (QWORK=1 or 2)) or ((PPWORK=1 or 2) and XIND1=MISSING)

**IND1 [S]**

Think about the industry in which you currently work. Which of the following kinds of industries is it?

[Alternate text if QWORK2=2, 3, or 4]

Think about the industry in which you currently work at your MAIN job. Which of the following kinds of industries is it?

11. Agriculture, Forestry, Fishing and Hunting
21. Mining, Quarrying, and Oil and Gas Extraction
22. Utilities
23. Construction
- 31-33. Manufacturing
42. Wholesale Trade
- 44-45. Retail Trade
- 48-49. Transportation and Warehousing
51. Information
52. Finance and Insurance
53. Real Estate and Rental and Leasing
54. Professional, Scientific, and Technical Services
55. Management of Companies and Enterprises
56. Administrative and Support and Waste Management and Remediation Services
61. Educational Services
62. Health Care and Social Assistance
71. Arts, Entertainment, and Recreation
72. Accommodation and Food Services

81. Other Services and Community/Non-Profit Organizations (except Public Administration)
92. Public Administration
93. Armed Forces
94. Utilities, Waste Management, and Remediation Services
95. Administrative and Support Services (such as Call Centers, Security, Landscaping, and Janitorial)
96. Child Day Care Services
97. Repairs and Maintenance
98. Personal Services (including Beauty, Pet Care, and Household)
100. Community/Non-Profit Organizations (including Religious and Political Organizations)

BASE: All respondents

**G9 [S]**

How many smoking or tobacco related web surveys like this have you completed during the past year?

1. None
2. 1 survey
3. 2 surveys
4. 3 surveys
5. 4 surveys
6. 5 or more surveys

BASE: All respondents

**G10 [S]**

Please indicate your current military service status.

1. Active duty
2. Reserves
3. National Guard
4. Veteran or Armed Services Retiree
5. Veteran or Retiree with a service connected disability
6. Civilian: NO military service record

BASE: All respondents

**G11 [GRID, S Across]**

Are you CURRENTLY covered by any of the following types of health insurance or health coverage plans? Mark "yes" or "no" for each type of coverage.

*Statements in row:*

- G11\_1. Insurance through a current or former employer or union
- G11\_2. Insurance purchased directly from an insurance company
- G11\_3. Medicare, for people age 65 and over, or people with certain disabilities
- G11\_4. Medicaid, or any kind of government assistance plan for those with low incomes or disability
- G11\_5. TRICARE or other military health care
- G11\_6. VA (including those who have ever enrolled for or use VA health care)
- G11\_7. Indian Health Service
- G11\_8. Any other type of health insurance or health coverage plan

*Answers in columns:*

1. Yes
2. No

BASE: All respondents

**G15 [GRID; S Across]**

Have you been diagnosed by a physician or other qualified medical professional with any of the following medical conditions?

You may choose not to answer the question by simply clicking "Next".

*Statements in row (randomize and record response order, with G15\_25 always last):*

- G15\_1. Acid reflux disease
- G15\_2. ADHD or ADD
- G15\_3. Anxiety disorder
- G15\_4. Asthma, chronic bronchitis, or COPD
- G15\_5. Cancer (any type except skin cancer)
- G15\_6. Chronic pain (such as low back pain, neck pain, or Fibromyalgia)
- G15\_7. Depression
- G15\_8. Diabetes
- G15\_9. Heart attack
- G15\_10. Heart disease
- G15\_11. High blood pressure
- G15\_12. High cholesterol
- G15\_13. HIV/AIDS
- G15\_14. Kidney disease
- G15\_15. Mental health condition
- G15\_16. Multiple sclerosis
- G15\_17. Osteoarthritis, joint pain or inflammation
- G15\_18. Osteoporosis or osteopenia
- G15\_19. Rheumatoid arthritis
- G15\_20. Seasonal allergies
- G15\_21. Skin cancer
- G15\_22. Sleep disorders such as sleep apnea or insomnia
- G15\_23. Stroke
- G15\_24. COVID-19**
- G15\_25. Something else [anchor]

*Answers in columns:*

- 1. Yes
- 2. No

BASE: If OFFPANEL=1 and DOV\_RECONTACT=1

**G20. [S]**

Do you or anyone in this household connect to the Internet from home?

- 1. Yes
- 2. No

BASE: If OFFPANEL=1 and DOV\_RECONTACT=2

**G21 [S]**

Do you live in a metro or non-metro area?

- 1. Non-Metro (Rural)
- 2. Suburban
- 3. Urban

BASE: If OFFPANEL=0

**KP\_THANKS [DISP]**

Thank you for completing today's survey. Your input will greatly help researchers assess the factors that impact quitting smoking.

You will be awarded 15,000 bonus points credited to your KnowledgePanel account for completing the survey.

**BASE: If OFFPANEL=1 and DOV\_RECONTACT=1**

**ADD0 [S]**

Those are all of our questions. Thanks so much for your participation in our survey. As a token of our appreciation, we would like to send you \$[IF SAMPLE=KP WITHDRAWN, \$15; IF SAMPLE=ABS, INSERT INCENTIVE VALUE FROM LOOKUP TABLE based on MNO; IF SAMPLE=ABS and incentive value is missing from lookup table, insert: \$20].

On the next screen, we would like to confirm your mailing information so that we may send you the check. This information will only be used to send you the check and will only be retained until November 2019. We'll never sell or distribute this information. By completing the following information, you consent to the use of your personal information for the purpose described above.

1. I agree
2. No thank you

*If ADD0=2, end survey.*

**BASE: If OFFPANEL=1 and DOV\_RECONTACT=1**

*Scripter: Prompt if refused with custom text: "Complete and accurate information is needed in order to successfully mail your check"*

*Scripter: Show MP box next to the NAME\_FINAL, ADDRESS\_FINAL, CITY\_FINAL, STATE\_FINAL and ZIP\_FINAL fields below*

**ADD1 [M]**

Please verify your name and mailing address so that we can put the check in the mail. To ensure that you will be able to deposit or cash the check, please be sure to provide us with your full first AND last name. If you provide incomplete or inaccurate information, you may not be able to deposit the check. This information will not be connected with your survey responses in any way.

Please select the field(s) that you'd like to update. If all of the information is correct, please select "All of the above are correct".

1. Name: [Insert NAME\_FINAL from lookup table based on MNO. If NAME\_FINAL in look up table is blank, insert: "not provided"]  
[SPACE]
2. Mailing Address: [If any part of Address in lookup table (ADDRESS\_FINAL, CITY\_FINAL, STATE\_FINAL, or ZIP\_FINAL) is blank, insert: "not provided"]  
[Insert ADDRESS\_FINAL from lookup table based on MNO]  
[Insert CITY\_FINAL from lookup table based on MNO]  
[Insert STATE\_FINAL from lookup table based on MNO]  
[Insert ZIP\_FINAL from lookup table based on MNO]  
[SPACE]
3. All of the above are correct [S]  
[SPACE]

4. Prefer not to receive an incentive. [S]

BASE: If Add1=1 or name is missing from spreadsheet and DOV\_RECONTACT=1

Scripter: Prompt if refused with custom text "Complete and accurate information is needed in order to successfully mail your check."

**ADD1\_1 [O]**

Please type in the name to whom you'd like us to send the incentive check:

Name (First/Last): [TEXTBOX]

BASE: If ADD1=2 or any part of address (address\_final, city\_final, state\_final, or zip\_final) is missing from spreadsheet and recontact=1

Scripter: Prompt if refused with custom text "Complete and accurate information is needed in order to successfully mail your check."

**ADD1\_2 [O]**

Please type in the address to where we should send the incentive check:

Street Address (If applicable, include unit number): [TEXTBOX]

City: [TEXTBOX]

State: [TEXTBOX]

Zip Code : [TEXTBOX]

BASE: [If ADD1=1-2]

Scripter: Prompt if refused with custom text "Complete and accurate information is needed in order to successfully mail your check."

**ADD2. [S]**

Is the contact information below now up-to-date?

Name: [If asked Add1\_1, insert name from Add1\_1. If asked Add1\_1 and Add1\_1= refused, insert: Not provided. If not asked Add1\_1, insert Name\_Final from look up table based on MNO.]

Mailing Address:

[If not asked Add1\_2, insert address from look up table based on MNO]

[If asked Add1\_2, insert Street Address from Add1\_2. If asked Add1\_2 and Street Address=refused, insert: Street address: Not provided]

[If asked Add1\_2, insert City from Q1\_2. If asked Add1\_2 and Add1\_2\_City=refused, insert: City: Not provided], [If asked Add1\_2, insert State from Add1\_2. If asked Add1\_2 and Add1\_2\_State=refused, insert: State: Not provided] [If asked Add1\_2, insert zip code from Add1\_2. If asked Add1\_2 and Add1\_2\_zip=refused, insert: Zip Code: Not provided]

1. Yes
2. No

Scripter: if Add2=refused after prompt, record answer as if respondent had selected 2 (no)

Scripter: if Add2=2; Loop back to Add1

BASE: If sample=abs and DOV\_RECONTACT=2



**ADD0\_NEW [S]**

Those are all of our questions. Thanks so much for your participation in our survey. As a token of our appreciation, we would like to send you [IF SAMPLE=KP WITHDRAWN, \$15; IF SAMPLE=ABS AND ABS\_G20=1 or -1, \$20; IF SAMPLE=ABS and ABS\_G20=2: \$40].

On the next screen, we would like to confirm your mailing information so that we may send you the check. This information will only be used to send you the check and will only be retained until [FILL DATE]. We'll never sell or distribute this information. By completing the following information, you consent to the use of your personal information for the purpose described above.

1. I agree
2. No thank you

*If ADD0\_NEW=2, end survey.*

**BASE: If sample=abs and DOV\_RECONTACT=2**

*Scripter: Prompt if refused with custom text "Complete and accurate information is needed in order to successfully mail your check."*

**ADD1\_NEW. [O]**

Please provide your name and mailing address so that we can put the check in the mail. To ensure that you will be able to deposit or cash the check, please be sure to provide us with your full first AND last name; if you provide incomplete or inaccurate information, you may not be able to deposit the check. This information will not be connected with your survey responses in any way.

After you have entered your information, please make sure to click "Next".

Name (First/Last): [TEXTBOX]  
Street Address (If applicable, include unit number): [TEXTBOX]  
City: [TEXTBOX]  
State: [TEXTBOX]  
Zip Code : [TEXTBOX]

Prefer not to receive an incentive. [S]

**BASE: If OFFPANEL=1**

**CONTACT\_A [S]**

Thank you for your participation in this important study! If you entered your address information on the previous question, your check for participation will arrive in the next 4 – 6 weeks.

The CDC will also have the opportunity to do at least one more survey in the future, with additional rewards and prizes for participation. Would you be willing to participate in another survey for the CDC?

1. Yes
2. No

**BASE: If CONTACT\_A=1**

**CONTACT\_A1 [S]**

Is this the address where you would like us to send your next CDC survey invitation?

[Insert Address\_Final from look up table based on MNO]  
[Insert City\_final from look up table based on MNO], [Insert State\_final from look up table based on MNO] [Insert Zip\_final from look up table based on MNO]

1. Yes
2. No

**BASE: If CONTACT\_A1=2 or refused**

**CONTACT\_A2. [0]**

Please provide us with the address that you would like us to use to send you your next CDC survey invitation.

Street Address (If applicable, include unit number): [TEXTBOX]

City: [TEXTBOX]

State: [TEXTBOX]

Zip Code : [TEXTBOX]

**Omit KP closing question QF1**