

## Change Request

### Proposed Changes to the National Tobacco Education Campaign Survey (OMB No. 0920-1083 Exp. Date 3/31/2023)

#### Summary

This is to request OMB approval of non-substantive modifications to the 2020-2022 National Tobacco Education Campaign survey. Specifically, we request the inclusion of COVID-19 as an option in three currently approved questions.

#### Attachments

- Attachment K\_NonSub\_Change\_Crosswalk\_2020\_to\_2023\_NTEC\_Evaluation\_(OMB\_0920-1083)
- Attachment L1\_Waves A-I Smoker NTEC Survey Modification \_English
- Attachment L2\_Waves A-I Smoker NTEC Survey Modification \_Spanish
- Attachment M 1\_Waves A-I Nonsmoker NTEC Survey Modification \_English
- Attachment M 2\_Waves A-I Nonsmoker NTEC Survey Modification \_Spanish

#### Background and Justification

This request is to make non-substantive changes to an existing OMB approved (#0920-1083) online survey that is used to collect information to evaluate the CDC’s *Tips From Former Smokers*® campaign. To consider the potential impact of COVID-19 on cigarette smoking cessation and the potential impact on campaign outcomes (e.g. calls to the quitline (1-800-QUIT-NOW), smoking cessation behaviors), we are proposing to add one additional response related to COVID-19, to 3 existing questions, e.g. “When you last tried to quit smoking, did any of the following motivate you to try to quit?”(among 7 options, “concerns about COVID-19”, is an option); 'Do you believe cigarette smoking is related to...' (there are 20 choices and “COVID-19” is included); 'Have you been diagnosed by a physician or other qualified medical professional with any of the following medical conditions?' (there are 25 choices and “COVID-19” is included in the list). The proposed modifications are included in the supporting information immediately below in Table 1. These are the only changes that are being requested in this change request. The table below illustrates where in the questionnaire changes are proposed under each section.

Table 1 List of Changes to the NTEC Evaluation			
Section	Previously Approved Text	New Text	Reason For Change
SECTION C: Smoking Cessation	C5 (smoker survey); NB5 (nonsmoker survey). When you last tried to quit smoking, did any of the following motivate you to try to quit? <i>Statements in row:</i> C5_1. A family member or friend encouraged me to try to quit	C5 (smoker survey); NB5 (nonsmoker survey) When you last tried to quit smoking, did any of the following motivate you to try to quit? <i>Statements in row:</i> C5_1. A family member or friend encouraged me to try to quit	To consider the potential impact of COVID-19

	<p>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</p> <p>C5_3. My doctor or other health professional advised me to quit smoking</p> <p>C5_4. Workplace restrictions on smoking</p> <p>C5_5. Cost of cigarettes is too high</p> <p>C5_6. Other, please specify: [O] _____</p>	<p>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</p> <p>C5_3. My doctor or other health professional advised me to quit smoking</p> <p>C5_4. Workplace restrictions on smoking</p> <p>C5_5. Cost of cigarettes is too high</p> <p><b>C5_6. Concern about COVID-19</b></p> <p>C5_7. Other, please specify: [O] _____</p>	<p>on cigarette smoking cessation.</p>
<p><b>SECTION D:</b> Attitudes And Beliefs Related To Cessation</p>	<p><b>D21</b> (smoker survey); <b>NC1</b> (nonsmoker survey).</p> <p>Do you believe cigarette smoking is related to:</p> <p><i>Statements in row (randomize and record response order):</i></p> <p>D21_1. Lung Cancer</p> <p>D21_2. Cancer of the mouth or throat</p> <p>D21_3. Heart Disease</p> <p>D21_4. Diabetes</p> <p>D21_5. Emphysema</p> <p>D21_6. Stroke</p> <p>D21_7. Hole in throat (stoma or tracheotomy)</p> <p>D21_8. Buerger’s Disease</p> <p>D21_9. Amputations (removal of limbs)</p> <p>D21_10. Asthma</p> <p>D21_11. Gallstones</p> <p>D21_12. COPD or Chronic bronchitis</p> <p>D21_13. Periodontal or Gum Disease</p> <p>D21_14. Premature birth</p> <p>D21_15. Colorectal Cancer</p> <p>D21_16. Macular degeneration or blindness</p> <p>D21_17. Depression</p> <p>D21_18. Anxiety Disorder</p> <p>D21_19. Colon Cancer</p> <p><i>Answers in columns:</i></p> <p>1. Yes</p> <p>2. No</p>	<p><b>D21</b> (smoker survey); <b>NC1</b> (nonsmoker survey)</p> <p>Do you believe cigarette smoking is related to:</p> <p><i>Statements in row (randomize and record response order):</i></p> <p>D21_1. Lung Cancer</p> <p>D21_2. Cancer of the mouth or throat</p> <p>D21_3. Heart Disease</p> <p>D21_4. Diabetes</p> <p>D21_5. Emphysema</p> <p>D21_6. Stroke</p> <p>D21_7. Hole in throat (stoma or tracheotomy)</p> <p>D21_8. Buerger’s Disease</p> <p>D21_9. Amputations (removal of limbs)</p> <p>D21_10. Asthma</p> <p>D21_11. Gallstones</p> <p>D21_12. COPD or Chronic bronchitis</p> <p>D21_13. Periodontal or Gum Disease</p> <p>D21_14. Premature birth</p> <p>D21_15. Colorectal Cancer</p> <p>D21_16. Macular degeneration or blindness</p> <p>D21_17. Depression</p> <p>D21_18. Anxiety Disorder</p> <p>D21_19. Colon Cancer</p> <p><b>D21_20. COVID-19</b></p> <p><i>Answers in columns:</i></p> <p>1. Yes</p> <p>2. No</p>	<p>To consider perceptions of the relationship of COVID-19 and cigarette smoking.</p>
<p><b>SECTION G:</b> Closing Questions</p>	<p>G15. Have you been diagnosed by a physician or other qualified medical professional with any of the following medical conditions?</p> <p>You may choose not to answer the question by simply clicking “Next”.</p>	<p><b>G15</b></p> <p>Have you been diagnosed by a physician or other qualified medical professional with any of the following medical conditions?</p> <p>You may choose not to answer the question by simply clicking “Next”.</p>	<p>To consider the potential association of COVID-19 on</p>

	<p>Statements in row (randomize and record response order, with G15_24 always last):</p> <p>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. Something else [anchor]</p> <p>Answers in columns:  1. Yes  2. No</p>	<p>Statements in row (randomize and record response order, with G15_24 always last):</p> <p>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  <b>G15_24. COVID-19</b>  G15_25. Something else [anchor]</p> <p>Answers in columns:  1. Yes  2. No</p>	<p>cigarette smoking cessation.</p>
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**Effect of Proposed Changes on the Burden Estimate**

No increases are anticipated in the currently approved estimated burden, (Table A.12.1. Estimated Annualized Burden Hours) presented below in Table 2.

Table 2					
Original: Table A.12.1. Estimated Annualized Burden Hours					
(Type of Respondents)	Form Name	Number of Respondents	Number of Responses per Respondent	Average Burden per Response	Total Burden (in

				(in Hours)	Hours)
General Population	Screening & Consent (English)	16,167	1	5/60	1,347
	Screening & Consent (Spanish)	500	1	5/60	42
Adult Smokers, ages 18-54, in the United States	Smoker Survey Wave A (English)	2,587	1	20/60	862
	Smoker Survey Wave A (Spanish)	80	1	20/60	27
	Smoker Survey Wave B (English)	1,617	1	20/60	539
	Smoker Survey Wave B (Spanish)	50	1	20/60	17
	Smoker Survey Wave C (English)	1,617	1	20/60	539
	Smoker Survey Wave C (Spanish)	50	1	20/60	17
	Smoker Survey Wave D (English)	1,617	1	20/60	539
	Smoker Survey Wave D (Spanish)	50	1	20/60	17
	Smoker Survey Wave E (English)	1,617	1	20/60	539
	Smoker Survey Wave E (Spanish)	50	1	20/60	17
	Smoker Survey Wave F	1,617	1	20/60	539

	(English)				
	Smoker Survey Wave F (Spanish)	50	1	20/60	17
	Smoker Survey Wave G (English)	1,617	1	20/60	539
	Smoker Survey Wave G (Spanish)	50	1	20/60	17
	Smoker Survey Wave H (English)	1,617	1	20/60	539
	Smoker Survey Wave H (Spanish)	50	1	20/60	17
	Smoker Survey Wave I (English)	1,617	1	20/60	539
	Smoker Survey Wave I (Spanish)	50	1	20/60	17
Adult Nonsmokers, ages 18-54, in the United States	Nonsmoker Survey Wave A (English)	1,000	1	20/60	333
	Nonsmoker Survey Wave A (Spanish)	100	1	20/60	33
	Nonsmoker Survey Wave B (English)	808	1	20/60	269
	Nonsmoker Survey Wave B (Spanish)	25	1	20/60	8
	Nonsmoker Survey Wave C (English)	808	1	20/60	269
	Nonsmoker Survey Wave C	25	1	20/60	8

	(Spanish)				
	Nonsmoker Survey Wave D (English)	808	1	20/60	269
	Nonsmoker Survey Wave D (Spanish)	25	1	20/60	8
	Nonsmoker Survey Wave E (English)	808	1	20/60	269
	Nonsmoker Survey Wave E (Spanish)	25	1	20/60	8
	Nonsmoker Survey Wave F (English)	808	1	20/60	269
	Nonsmoker Survey Wave F (Spanish)	25	1	20/60	8
	Nonsmoker Survey Wave G (English)	808	1	20/60	269
	Nonsmoker Survey Wave G (Spanish)	25	1	20/60	8
	Nonsmoker Survey Wave H (English)	808	1	20/60	269
	Nonsmoker Survey Wave H (Spanish)	25	1	20/60	8
	Nonsmoker Survey Wave I (English)	808	1	20/60	269
	Nonsmoker Survey Wave I (Spanish)	25	1	20/60	8
	Total				9,311

## Effect of Proposed Changes on Currently Approved Instruments and Attachments

The following table describes those attachments which have the requested changes to the National Tobacco Education Campaign Survey (OMB No. 0920-1083 Exp. Date 3/31/2023). All updates are highlighted in yellow in Table 1 of this document.

Change Request Attachment Title
Attachment K Crosswalk of Non-Substantive Questionnaire Changes, 2020 to 2023 NTEC
Attachment L1 Waves A-I Smoker NTEC Survey Modification _English
Attachment L2 Waves A-I Smoker NTEC Survey Modification _Spanish
Attachment M1 Waves A-I Nonsmoker NTEC Survey Modification _English
Attachment M2 Waves A-I Nonsmoker NTEC Survey Modification _Spanish