
**Formative Research to Inform a National Education Initiative on Nicotine:
Screener and Survey Instrument**

[SECTION 5. SCREENER]

[SCNR_INTRO]

Welcome to the Bright Insights Survey!

This research study is sponsored by the U.S. Food and Drug Administration (FDA) and led by RTI International (RTI). This research study asks people about nicotine and tobacco products.

You are being asked to answer a few questions to see if you are eligible for a survey of approximately 2,004 youth and young adults in the United States.

- You may only answer these questions one time. Your participation is voluntary.
- If you are eligible and complete the survey, you will receive a \$5 gift card at the email address you provide within 1-2 weeks as a token of our appreciation. If you stop participating before you complete the survey, you will not receive a gift card. If we find that you have completed the survey more than once, you may not receive a gift card.
- Please read our privacy policy [hyperlink to <https://rti-co7.com/privacy/privacypolicy.html>] before continuing.
- If you have any questions about the survey, you can contact us at brightinsights@rti.org.

[SCNR_CONSENT OR ASSENT]

Do you agree to answer a few questions to see if you are eligible for the survey?

-
1. Yes, I agree
 2. No, I do not want to answer questions

[ALL QS QUESTIONS ARE REQUIRED TO DETERMINE ELIGIBILITY; SKIPS ARE NOT ALLOWED.]

[SHOW TO FB RESPONDENTS ONLY]

[FB AUTH] An organization called RTI is doing a survey to learn more about people like you. RTI wants to make sure that the person who is taking the survey is who they say they are. We also want to make sure that people take the survey only once. Facebook will be helping us do this by making sure that you have a real Facebook account. This document will explain what kinds of information we or Facebook may learn about you if you click on the “agree” button.

When you click on “agree” you are allowing Facebook and RTI to collect certain information about you. The information will help Facebook check that you have a real account. We also collect information about you to help us make sure that one person is not taking the survey more than once. If you do not agree to allow Facebook and RTI to collect this information, you should not take this survey.

We will protect the information we collect about you as best as we can, but since this survey is online, there is a chance that other people may see information about you. This is a risk that comes along with using the Internet. We will do our best to make sure this does not happen.

1. I have read the Authorization Statement and agree to provide my information for such purposes.
2. I decline to provide my information for such purposes.

[IF FB_AUTH = 2]

Thank you for your time.

QS_1. What is your age?

___ [PROGRAMMER NOTE: whole numbers only]

QS_2. Have you ever smoked a cigarette, even 1 or 2 puffs?

- 1 Yes
- 2 No

[Source: NY ATS]

[ASK IF QS_2 = 1]

QS_3. In the past 30 days, on how many days did you smoke cigarettes?

Number of days_____ [PROGRAMMER NOTE: whole numbers only, range: 0-30]

[Source: PATH W4 Youth]

[ASK IF QS_2 = 2]

QS_4. Do you think you will smoke a cigarette in the next year?

- 1 Definitely yes
- 2 Probably yes

- 3 Probably not
- 4 Definitely not

[Source: PATH W4 Youth]

[ASK IF QS_2 = 2]

QS_5. Do you think that you will try a cigarette soon?

- 1 Definitely yes
- 2 Probably yes
- 3 Probably not
- 4 Definitely not

[Source: PATH W4 Youth]

[ASK IF QS_2 = 2]

QS_6. If one of your best friends were to offer you a cigarette, would you smoke it?

- 1 Definitely yes
- 2 Probably yes
- 3 Probably not
- 4 Definitely not

[Source: PATH W4 Youth]

QS_7_INTRO. The next questions are about vaping products like e-cigarettes, vape pens, JUULs, mods, or other personal vaporizers. These products are battery-powered and produce vapor or aerosol instead of smoke. Vapes typically use a nicotine liquid, although the amount of nicotine can vary, and some may not contain any nicotine at all.

Please do NOT include vapes with marijuana, THC, or CBD when answering these questions.



[NEXT SCREEN]

QS_8. Have you ever vaped nicotine, even just one time in your life?

- 1 Yes
- 2 No

[Source: NY ATS]

[ASK IF QS_8 = 1]

QS_9. In the past 30 days, on how many days did you vape nicotine?

Number of days_____ [Programmer note: Range: 0-30]

[ASK IF QS_8 = 2]

QS_10. Do you think you will try vaping nicotine in the next year?

- 1 Definitely yes
- 2 Probably yes
- 3 Probably not
- 4 Definitely not

[Source: Adapted from PATH]

[ASK IF QS_8 = 2]

QS_11. Do you think that you will try vaping nicotine soon?

- 1 Definitely yes
- 2 Probably yes
- 3 Probably not
- 4 Definitely not

[Source: Adapted from PATH]

[ASK IF QS_8 = 2]

QS_12. If one of your best friends were to offer you a vape with nicotine, would you try it?

- 1 Definitely yes
- 2 Probably yes
- 3 Probably not
- 4 Definitely not

[Source: Adapted from PATH]

QS_13_INTRO. The next questions are about little **cigarillos** and **little cigars**. These products go by lots of different names, so please use these descriptions and photos to understand what they are.

Little cigars are wrapped in brown paper and resemble cigarettes. **Cigarillos** are longer and slimmer versions of large cigars. They can come with plastic or wooden tips (such as Black & Mild) or untipped (such as Backwoods or Swisher Sweets).

Please do NOT include marijuana or blunt use when answering these questions.



[NEXT SCREEN]

QS_14. Have you ever smoked little cigars or cigarillos, even 1 or 2 puffs?

- 1 Yes
- 2 No

[Source: NY ATS]

[ASK IF QS_14 = 1]

QS_15. In the past 30 days, on how many days did you smoke little cigars or cigarillos?

Number of days _____ [Programmer note: Range: 0-30]

[ASK IF QS_14 = 2]

QS_16. Do you think you will try smoking little cigars or cigarillos in the next year?

- 1 Definitely yes
- 2 Probably yes
- 3 Probably not
- 4 Definitely not

[Source: Adapted from PATH]

[ASK IF QS_14 = 2]

QS_17. Do you think that you will try smoking little cigars or cigarillos soon?

- 1 Definitely yes
- 2 Probably yes
- 3 Probably not
- 4 Definitely not

[Source: Adapted from PATH]

[ASK IF QS_14 = 2]

QS_18. If one of your best friends were to offer you a little cigar or cigarillo, would you try it?

- 1 Definitely yes
- 2 Probably yes
- 3 Probably not
- 4 Definitely not

[Source: Adapted from PATH]

QS_19. The following question is designed to ensure that people are at a high attention level throughout the survey. Please select "Some days" as your answer to this question.

- 1 Every day
- 2 Some days
- 3 Rarely
- 4 Not at all

[Source: RTI social media recruitment team attention check]

QS_20. In the past 30 days, on how many days did you use **any nicotine or tobacco product**, such as cigarettes, vapes, little cigars, and cigarillos?

Number of days _____ [Programmer note: Range: 0-30]

QS_24. What is your date of birth?

Please use the following format: mm/dd/yyyy

___/___/____

[Source: RTI social media team (to check for consistency with reported age)]

QS_25. Please enter your email address:

[OPEN TEXT] _____

The email address you provide will only be used for the purpose of sending you a \$5 Amazon gift card if you qualify and complete the survey in full. It will not be sold or shared with anyone outside of the survey team. Please make sure your email address is correct.

[Source: RTI social media team]

QS_26. Please confirm your email address:

[OPEN TEXT] _____

[Source: RTI social media recruitment requirement]

[IF TERMINATED, DISPLAY NEW SCREEN]

You do not qualify for the longer survey. Thank you for your time.

Paperwork Reduction Act Statement: The public reporting burden for this information collection has been estimated to average 5 minutes per response to complete the screener (the time estimated to read, review, respond). Send comments regarding this burden estimate or any other aspects of this information collection, including suggestions for reducing burden, to PRASStaff@fda.hhs.gov.

[IF ELIGIBLE, DISPLAY NEW SCREEN]

You have qualified for the longer survey. You will get a \$10 Amazon gift card if you complete it as a token of our appreciation. Please click the "Continue" button below to continue.

Paperwork Reduction Act Statement: The public reporting burden for this information collection has been estimated to average 5 minutes per response to complete the screener (the time estimated to read, review, respond). Send comments regarding this burden estimate or any other aspects of this information collection, including suggestions for reducing burden, to PRASStaff@fda.hhs.gov.

[WHEN CONTINUE IS CLICKED, GO TO SURVEY]

[ALL QUESTIONS FROM THIS POINT ON WILL ALLOW SKIPS. IF A PARTICIPANT SKIPS A QUESTION, THE FOLLOWING POP-UP REMINDER WILL SHOW: "There is 1 unanswered question on this page. Would you like to continue?" Options include: "Continue without answering" or "Answer this question".]

[SECTION 1. HISTORY OF USE OF TOBACCO USE]

[ASK IF (QS_3 ≥ 1) OR (QS_2 = 1 AND QS_3=0)]

Q1_1_INTRO. The next questions are about **smoking cigarettes**.

[DISPLAY NEW SCREEN]

[ASK IF (QS_3 ≥ 1) OR (QS_2 = 1 AND QS_3=0)]

Q1_1. How old were you when you first tried cigarette smoking, even one or two puffs?
__ years old

[Source: PATH W4 Youth]

[ASK IF QS_3 ≥ 1]

Q1_2. Do you usually smoke menthol or non-menthol cigarettes?

- 1 Menthol
- 2 Non-menthol
- 3 No usual type

[Source: NY ATS]

[ASK IF QS_3 ≥ 1]

Q1_3. In the next 3 months, do you think you will...

- 1 Smoke the same amount of cigarettes that you do now
- 2 Increase the amount of cigarettes that you smoke

3 Decrease the amount of cigarettes that you smoke

4 Stop smoking cigarettes altogether

[Source: TCS Study C]

[ASK ALL]

Q1_11_INTRO. In this survey, we will be asking questions about vaping products like e-cigarettes, vape pens, JUULs, mods, or other personal vaporizers. These products are battery-powered and produce vapor or aerosol instead of smoke. Vapes typically use a nicotine liquid, although the amount of nicotine can vary, and some may not contain any nicotine at all.

Please do NOT include vapes with marijuana, THC, or CBD when answering.



[NEXT SCREEN]

[RANDOMIZE ORDER OF RESPONSE OPTIONS]

Q1_11. In this survey, what do we mean when we ask about “vapes”? Select all that apply.

- 1 Vaping products with nicotine
- 2 Vaping products with marijuana, THC, or CBD

[IF Q1_11 = 1 AND Q1_11 ≠ 2: SHOW THE FOLLOWING PROMPT] That’s correct! Please answer only about vapes with nicotine in them.

[ALL ELSE, SHOW THE FOLLOWING PROMPT] That is not correct. Please do NOT include vapes with marijuana, THC, or CBD when answering these questions. Please answer **only** about vapes with nicotine.

[DISPLAY NEW SCREEN]

[ASK IF (QS_9 ≥ 1) OR (QS_8 = 1 AND QS_9=0)]

Q1_4. How old were you when you first tried vaping nicotine, even one or two times?

__ years old

[Source: Adapted from PATH W4 Youth]

[ASK IF QS_9 ≥ 1]

Q1_5. In the next 3 months, do you think you will...

- 1 Vape nicotine as much as you do now
- 2 Increase how much you vape nicotine
- 3 Decrease how much you vape nicotine
- 4 Stop vaping nicotine altogether

[Source: Adapted from TCS Study C]

[ASK ALL] Q1_12 INTRO. In this survey, we will be asking questions about little **cigarillos** and **little cigars**. These products go by lots of different names, so please use these descriptions and photos to understand what they are.

Little cigars are wrapped in brown paper and resemble cigarettes. **Cigarillos** are longer and slimmer versions of large cigars. They can come with plastic or wooden tips (such as Black & Mild) or untipped (such as Backwoods or Swisher Sweets).

Please do NOT include marijuana or blunt use when answering.



[NEXT SCREEN]

[RANDOMIZE ORDER OF RESPONSE OPTIONS]

Q1_12. In this survey, what do we mean by "little cigars or cigarillos"? Select all that apply

- 1 Little cigars or cigarillos that only have tobacco
- 2 Little cigars or cigarillos that only have marijuana

3 Little cigars or cigarillos that have marijuana added to tobacco

[IF Q1_12 = 1 & Q1_12 ≠ 2 & Q1_12 ≠ 3: SHOW THE FOLLOWING PROMPT] That's correct! Please answer about little cigars or cigarillos with only tobacco in them.

[FOR ALL ELSE, SHOW THE FOLLOWING PROMPT: That is not correct. Please do NOT include marijuana or blunt use when answering these questions. Please answer about little cigars or cigarillos with only tobacco in them.]

[ASK IF (QS_15 ≥ 1) OR (QS_14 = 1 AND QS_15=0)]

Q1_6. How old were you when you first tried a cigarillo or little cigar, even one or two puffs?
__ years old

[Source: PATH W4 Youth]

[ASK IF QS_15 ≥ 1]

Q1_7. In the next 3 months, do you think you will...

- 1 Smoke the same amount of cigarillos and little cigars that you do now
- 2 Increase the amount of cigarillos and little cigars that you smoke
- 3 Decrease the amount of cigarillos and little cigars that you smoke
- 4 Stop smoking cigarillos and little cigars altogether

[Source: Adapted from TCS Study C]

[PROGRAMMING INSTRUCTIONS: RANDOMIZE RESPONSE OPTIONS]

Q1_8. Which of the following products have you **ever used**, even just one time? (Select all that apply)

- 1 Roll-your-own cigarettes
- 2 Tobacco in a hookah or waterpipe
- 3 Pipes filled with tobacco
- 4 Snus, such as Camel Snus, Marlboro Snus, or General Snus
- 5 Dissolvable tobacco products such as Velo lozenges
- 6 Heated tobacco products like IQOS, glo, or Eclipse
- 7 Nicotine pouches like Zyn, ON!, Rogue, or Velo pouches
- 8 Chewing tobacco, snuff, or dip

[Source: Adapted from NYTS 2020 with updated brands]

[PROGRAMMING INSTRUCTIONS: POPULATE Q1_9 WITH OPTIONS SELECTED IN Q1_8]

Q1_9. In the **past 30 days**, which of the following products have you used on **at least one day**? (Select all that apply)

- 1 Roll-your-own cigarettes
- 2 Tobacco in a hookah or waterpipe
- 3 Pipes filled with tobacco
- 4 Snus, such as Camel Snus, Marlboro Snus, or General Snus
- 5 Dissolvable tobacco products such as Velo lozenges
- 6 Heated tobacco products like IQOS, glo, or Eclipse
- 7 Nicotine pouches like Zyn, ON!, Rogue, or Velo pouches

8 Chewing tobacco, snuff, or dip

[Source: Adapted from NYTS 2020 with updated brands]

Q1_10. Have you ever heard of nicotine patches, gum, inhalers, nasal sprays, or lozenges?

- 1 Yes
- 2 No
- 3 Not sure

Nicotine patches, gum, inhalers, nasal sprays, or lozenges are products that contain nicotine and are designed to help people stop using tobacco.

[SECTION 2. DEPENDENCE ON SMOKING AND VAPING NICOTINE]

[ASK IF QS_3 ≥ 1]

Q2_1_INTRO. The next questions are about **smoking cigarettes**.

Q2_1. Right now, how much do you want to smoke cigarettes?

- 1 Extremely
- 2 Very
- 3 Somewhat
- 4 Slightly
- 5 Not at all

[Source: Adapted from Walker et al.]

[ASK IF QS_3 ≥ 1]

Q2_2. How much of the time have you felt the urge to smoke cigarettes in the past 24 hours?

- 1 All the time
- 2 Almost all of the time
- 3 A lot of the time
- 4 Some of the time
- 5 A little of the time
- 6 Not at all

[Source: Adapted from West & Hajek]

[ASK IF QS_9 ≥ 1]

Q2_3_INTRO. The next questions are about **vaping nicotine**.

[ASK IF QS_9 ≥ 1]

Q2_3. Right now, how much do you want to vape nicotine?

- 1 Extremely
- 2 Very
- 3 Somewhat
- 4 Slightly
- 5 Not at all

[Source: Adapted from Walker et al.]

[ASK IF QS_9 ≥ 1]

Q2_4. How much of the time have you felt the urge to smoke vape nicotine in the past 24 hours?

- 1 All the time
- 2 Almost all of the time
- 3 A lot of the time
- 4 Some of the time
- 5 A little of the time
- 6 Not at all

[Source: Adapted from West & Hajek]

[SECTION 3. CESSATION ATTEMPTS]

[ASK IF QS_3 ≥ 1]

Q3_1. During the past 12 months, have you stopped smoking cigarettes for one day or longer because you were trying to quit smoking?

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

[Source: NY ATS]

[ASK IF QS_3 ≥ 1]

Q3_2. How many times during the past 12 months have you stopped smoking cigarettes for 1 day or longer because you were trying to quit smoking?

_____ times [Programmer note: allow only whole numbers]

[Source: NY ATS]

[ASK IF QS_9 ≥ 1]

Q3_3. During the past 12 months, have you stopped vaping nicotine for one day or longer because you were trying to quit vaping nicotine?

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

[Source: Adapted from NY ATS]

[ASK IF QS_9 ≥ 1]

Q3_4. How many times during the past 12 months have you stopped vaping nicotine for 1 day or longer because you were trying to quit vaping nicotine?

_____ times [Programmer note: allow only whole numbers]

[Source: Adapted from NY ATS]

[SECTION 4. KNOWLEDGE AND PERCEPTIONS OF NICOTINE IN TOBACCO PRODUCTS]

Q4_1_INTRO. The next questions are about what you think or believe. There are no right or wrong answers.

First, please think about **nicotine, on its own**.

Q4_1. How harmful do you think **nicotine, on its own**, is to health?

- 1 Not at all harmful
- 2 Slightly harmful
- 3 Somewhat harmful
- 4 Very harmful
- 5 Extremely harmful
- 6 Don't know

[Source: Adapted from PATH Wave 4]

Q4_2_INTRO. In the next questions, please think **only about the nicotine** in each of the products.

Q4_2. How harmful do you think the **nicotine in cigarettes** is to health?

- 1 Not at all harmful
- 2 Slightly harmful
- 3 Somewhat harmful
- 4 Very harmful
- 5 Extremely harmful
- 6 Don't know

[Source: PATH Wave 4]

Q4_3. How harmful do you think the **nicotine in vapes** is to health?

- 1 Not at all harmful
- 2 Slightly harmful
- 3 Somewhat harmful
- 4 Very harmful
- 5 Extremely harmful
- 6 Don't know

[Source: Adapted from PATH Wave 4]

Q4_4. How harmful do you think the **nicotine in nicotine patches, gum, inhalers, nasal sprays, or lozenges** is to health?

- 1 Not at all harmful
- 2 Slightly harmful
- 3 Somewhat harmful
- 4 Very harmful
- 5 Extremely harmful
- 6 Don't know

[Source: Adapted from PATH Wave 4]

Q4_5. For the next set of questions, please think about [NIC_TYPE].

PROGRAMMING INSTRUCTIONS: RANDOMIZE "NIC_TYPE" TO 1 OF 4 CONDITIONS:

1. **"All nicotine"**
2. **"Just the nicotine in cigarettes"**
3. **"Just the nicotine in vapes"**
4. **"Just the nicotine in nicotine patches, gum, inhalers, nasal sprays, or lozenges"**

Please say how much you disagree or agree. [NIC_TYPE] ...

- a. causes addiction
- b. causes birth defects
- c. causes lung cancer
- d. causes mouth or throat cancer
- e. causes increased wrinkling of the skin
- f. causes heart attacks
- g. impairs brain development in young people
- h. relieves stress
- i. helps with concentration
- j. is calming
- k. worsens anxiety

- 1 Strongly disagree
- 2 Disagree
- 3 Agree
- 4 Strongly agree
- 5 Don't know

Q4_6. You just gave your answers to a list of perceived harms and benefits of [NIC_TYPE]. Thinking about your answers overall, how certain are you that your beliefs on the harms and benefits of [NIC_TYPE] are correct?

- 1 Not at all certain
- 2 Not very certain
- 3 Somewhat certain
- 4 Very certain
- 5 Extremely certain

Q4_7. Do you believe nicotine is the main substance in tobacco that makes people want to use tobacco products?

- 1 Definitely Yes
- 2 Probably yes
- 3 Probably not
- 4 Definitely not

[Source: [PATH Wave 3 adult](#), [PATH Wave 3 youth/parent](#), and [PATH Wave 4](#)]

Q4_8. Where do you think the nicotine in cigarettes and cigarette smoke comes from? Select **all that apply**.

-
- 1 Tobacco before it is made into cigarettes
 - 2 Added to tobacco
 - 3 Burning the cigarettes
 - 4 Don't know [EXCLUSIVE]

[Source: Adapted from Jeong et al.]

Q4_9. Where do you think the nicotine in *most* vapes comes from? Select **one**.

- 1 Extracted from tobacco plants
- 2 Made artificially from chemicals
- 3 From some other source
- 4 Don't know

[Source: Adapted from Pepper et al.]

Q4_10_INTRO. Please indicate how much you agree or disagree with the following statements.

Q4_10. If you use nicotine, you will become addicted.

- 1 Strongly disagree
- 2 Disagree
- 3 Agree
- 4 Strongly agree

[Source: Adapted from ExPECTT]

Q4_11. Using nicotine just a little can make you crave more.

- 1 Strongly disagree
- 2 Disagree
- 3 Agree
- 4 Strongly agree

[Source: Adapted from ExPECTT]

Q4_12. If you use nicotine, cravings can take control of you.

- 1 Strongly disagree
- 2 Disagree
- 3 Agree
- 4 Strongly agree

[Source: Adapted from ExPECTT]

Q4_13. Addiction to nicotine is unavoidable once someone starts using products with nicotine.

- 1 Strongly disagree
- 2 Disagree
- 3 Agree
- 4 Strongly agree

[Source: Adapted from FDA scale in development]

Q4_14. A nicotine addiction is something to take seriously.

- 1 Strongly disagree

-
- 2 Disagree
 - 3 Agree
 - 4 Strongly agree

[Source: Adapted from FDA scale in development]

Q4_15. Have you ever heard of “synthetic nicotine”?

- 1 Yes
- 2 No
- 3 Don’t know

Q4_15_INTRO. These next few questions are going to ask you about synthetic nicotine. Synthetic nicotine is nicotine that is developed in a lab and does not come from tobacco leaves, like naturally occurring nicotine. Please answer the following questions with synthetic nicotine in mind.

[Source: definition adapted from truth initiative webpage]

Q4_16. Do you think that **synthetic nicotine is...**

- 1 Much less harmful to health than nicotine that comes from a tobacco plant
- 2 Less harmful to health than nicotine that comes from a tobacco plant
- 3 Equally harmful to health as nicotine that comes from a tobacco plant
- 4 More harmful to health than nicotine that comes from a tobacco plant
- 5 Much more harmful to health than nicotine that comes from a tobacco plant

Q4_17. Do you think that **synthetic nicotine is...**

- 1 Much less addictive than nicotine that comes from a tobacco plant
- 2 Less addictive than nicotine that comes from a tobacco plant
- 3 Equally addictive as nicotine that comes from a tobacco plant
- 4 More addictive than nicotine that comes from a tobacco plant
- 5 Much more addictive than nicotine that comes from a tobacco plant

Q4_18. Sometimes a company will say that its tobacco products are made with “clean” or “pure” nicotine.

If a product said it was made with “clean” or “pure” nicotine, how likely would you be to use that product?

- 1 Very likely
- 2 Somewhat likely
- 3 Somewhat unlikely
- 4 Very unlikely

Q4_19. The following question is designed to ensure that people are at a high attention level throughout the survey. Please select ‘Agree’ as your answer to this item.

- 1 Strongly disagree
- 2 Disagree
- 3 Agree
- 4 Strongly agree

[Source: RTI social media team attention check]

[SECTION 5. PERCEIVED HARM OF TOBACCO PRODUCTS]

Q5_1. How much do you think people harm themselves when they...

	No harm	A little harm	Some harm	A lot of harm
a. smoke cigarettes?				
b. vape nicotine?				
c. smoke little cigars or cigarillos?				
d. use chewing tobacco, snuff, or dip?				
e. smoke tobacco in a hookah or waterpipe?				
f. use heated tobacco products like IQOS, glo, or Eclipse?				
g. use nicotine pouches like Zyn, ON!, Rogue, or Velo pouches?				
h. use nicotine patches, gum, inhalers, nasal sprays, or lozenges?				

[Source: Adapted from PATH Wave 4 youth]

[SECTION 6. PERCEPTIONS ABOUT FDA, GOVERNMENT, AND THE TOBACCO INDUSTRY]

Q6_1. Who do you believe regulates tobacco products in the U.S.? (Please select all that apply.)

- 1 Centers for Disease Control and Prevention (CDC)
- 2 Federal Trade Commission (FTC)
- 3 Food and Drug Administration (FDA)
- 4 National Institutes of Health (NIH)
- 5 Surgeon General
- 6 Tobacco industry/tobacco companies
- 7 None of the above

[Source: Tobacco User Panel Study C]

Q6_2. In general, how much do you trust information about the health effects of tobacco from ...

	Not at all	A little	Some	A lot
a. a doctor?				
b. the FDA, which regulates tobacco products in the U.S.?				
c. scientists and researchers?				
d. cigarette companies?				
e. vaping (e-cigarette) companies?				
f. companies that make nicotine patches, gum, inhalers, nasal sprays, or lozenges?				

g. companies that make medications to help people stop smoking, like Chantix, varenicline, Wellbutrin, Zyban, or bupropion?				
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[Source: stem modified from HINTS 2015, 2017]

Q6_10. How much of the time do you think you can trust the government in Washington to do what is right?

- 1 Just about always
- 2 Most of the time
- 3 Only some of the time
- 4 Never

[Source: Pew Research]

Q6_11. How would you describe your political views?

- 1 Very conservative
- 2 Conservative
- 3 Moderate
- 4 Liberal
- 5 Very liberal

[Source: Gallup]

[SECTION 7. PERSONAL CHARACTERISTICS]

Q7_1. Which of the following best describes how you think of yourself?

- 1 Smoker
- 2 Social smoker
- 3 Occasional smoker
- 4 Ex-smoker
- 5 Someone who tried smoking
- 6 Nonsmoker

[Source: Villanti et al.]

Q7_2. Which of the following best describes how you think of yourself?

- 1 Vaper
- 2 Social vaper
- 3 Occasional vaper
- 4 Ex-vaper
- 5 Someone who tried vaping
- 6 Nonvaper

[Source: Adapted from Villanti et al.]

Q7_3. Does anyone who lives with you now use **any nicotine or tobacco product**, such as cigarettes, vapes, little cigars, and cigarillos?

- 1 Yes

2 No

Q7_4. How many of your four closest friends use **any nicotine or tobacco product**?

_____ [PROGRAMMER NOTE: whole numbers only, range: 0-4]

[Source: Adapted from Monthly Monitoring (MM) Study]

Q7_5_INTRO. Please say how much you disagree or agree.

Q7_5. My family would disapprove if I use nicotine or tobacco.

1 Strongly disagree

2 Disagree

3 Agree

4 Strongly agree

[Source: Adapted from Promising Themes]

Q7_6. My friends would disapprove if I use nicotine or tobacco.

1 Strongly disagree

2 Disagree

3 Agree

4 Strongly agree

[Source: Adapted from Promising Themes]

Q7_7. Out of every 10 people your age, how many do you think use nicotine or tobacco?

_____ [PROGRAMMER NOTE: whole numbers only, range: 0-10]

[Source: Adapted from Promising Themes]

Q7_8. In general, how would you rate your mental health, which includes stress, depression, and problems with emotions?

1 Poor

2 Fair

3 Good

4 Very good

5 Excellent

[Source: PATH Youth W4]

Q7_9. What is your current gender identity?

1 Female

2 Male

3 Genderqueer/ Non-conforming

[Source: M&M]

Q7_10. Are you Hispanic or of Spanish origin?

1 Yes

2 No

[Source: TCS Panel Screener]

[PROTOCOL TITLE: Nicotine Education Project

RTI PRINCIPAL INVESTIGATOR: Youn Lee

Version 10-22-21]

OMB# 0910-0810
EXP: 12/31/2024

Q7_11. What is your race? Please select one or more.

1 American Indian or Alaska Native

2 Asian

3 Black or African American

4 Native Hawaiian or Other Pacific Islander

5 White

[Source: [FDA Implied Claims Questionnaire](#)]

Thank you for taking this survey. If you are a tobacco user or have a friend or family member who is a tobacco user, and you would like information on how to quit, please visit <https://smokefree.gov/>.

Paperwork Reduction Act Statement: The public reporting burden for this information collection has been estimated to average 15 minutes per response to complete the survey (the time estimated to read, review, respond). Send comments regarding this burden estimate or any other aspects of this information collection, including suggestions for reducing burden, to PRASStaff@fda.hhs.gov.