**QUESTIONNAIRE FOR COMMUNITY WEB-PANEL SURVEY[[1]](#footnote-3)** Form Approved

OMB No. 0920-xxxx

Expiration Date: XX/XX/XXXX

**Overview of Questionnaire Sections**

1. Background/demographics
2. General Tobacco Use
3. General tobacco quit attempts/Switching
4. Menthol FTP Use
5. Purchasing behaviors/Access
6. Menthol quit attempts/Switching
7. Perceptions/Belief
8. Sites with Implemented Policies
9. Comparison Sites

**Survey Questionnaire**

**Introduction**

Thank you for your interest in taking this online survey. This questionnaire is being administered on behalf of the Centers for Disease Control and Prevention (CDC). This survey will ask about your tobacco-related knowledge, attitudes and behaviors.

Your survey answers will help inform public health practice and improve commercial tobacco-related policies. “Commercial tobacco” means harmful products that are made and sold by tobacco companies. It does not include “traditional tobacco” used by Indigenous groups for religious or ceremonial purposes.

This survey is voluntary and is designed to protect your privacy. We do not collect your name or other identifying information on the survey and results will only be reported collectively to preserve anonymity. The entire survey will take approximately 15 minutes to complete.

Thank you!

**Section I: Background/demographics**

Message to participant: This survey will begin with demographic questions before asking about knowledge, perceptions, and behaviors related to menthol and non-menthol tobacco.

|  |  |  |  |
| --- | --- | --- | --- |
| **#** | **Reference** | **Question** | **Responses** |
|  | BRFSS 2021, General demographic question | What is your age? | [--] age in years1. Don’t know
2. Prefer not to say
 |
|  | [Office of the Chief Statistician of the U.S.](https://www.whitehouse.gov/wp-content/uploads/2023/01/SOGI-Best-Practices.pdf)SPD-15 | What sex were you assigned at birth, on your original birth certificate? | 1. Female
2. Male
3. Prefer not to say
 |
|  | [[Office of the Chief Statistician of the U.S.](https://www.whitehouse.gov/wp-content/uploads/2023/01/SOGI-Best-Practices.pdf)](https://www.whitehouse.gov/wp-content/uploads/2023/01/SOGI-Best-Practices.pdf), [CDC](https://www.cdc.gov/hiv/clinicians/transforming-health/health-care-providers/collecting-sexual-orientation.html), and [NIH](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwjZ_5fGmJSCAxU0FlkFHSf9DVQQFnoECA4QAQ&url=https%3A%2F%2Fwww.ncbi.nlm.nih.gov%2Fbooks%2FNBK64806%2F&usg=AOvVaw3gNmTyu09ukYXb4I4vG0Hr&opi=89978449), SPD-15 | How do you currently describe yourself (mark all that apply)? | 1. Female
2. Male
3. Transgender
4. I use a different term [free-text]
5. Prefer not to say
 |
|  | SOGI, General demographic question. [[Office of the Chief Statistician of the U.S.](https://www.whitehouse.gov/wp-content/uploads/2023/01/SOGI-Best-Practices.pdf)](https://www.whitehouse.gov/wp-content/uploads/2023/01/SOGI-Best-Practices.pdf)SPD-15 | Which of the following best represents how you think of yourself? | 1. Gay (lesbian or gay)
2. Straight; that is not gay (or lesbian or gay)
3. Bisexual
4. Something else
5. I don’t know
6. Prefer not to say
 |
|  | new, General demographic question | How long have you lived in your current city? | 1. Less than 6 months
2. 6 months to < 1 year
3. 1 year to < 2 years
4. 2 years to < 3 years
5. 3 years to < 4 years
6. 4 years to < 5 years
7. 5 years to < 6 years
8. 6+ years
9. Don’t know/Not sure
10. Prefer not to say
 |
|  | new, General demographic question | What was your total household income in the past 12 months? | 1. Less than $30,000
2. Between $30,000 and $65,000
3. Between $65,001 and $100,000
4. More than $100,000
5. I don’t know
6. Prefer not to say
 |
|  | 2023 NHIS | What is the highest degree or year of school you completed? | 1. Never attended/kindergarten only
2. Grade 1–11
3. 12th grade, no diploma
4. GED or equivalent
5. High school graduate
6. Some college, no degree
7. Associate degree; occupational, technical, or vocational program
8. Associate degree; academic program
9. Bachelor’s degree (Example: BA, AB, BS, BBA)
10. Master’s degree (Example: MA, MS, MEng, MEd, MBA)
11. Professional school degree (Example: MD, DDS, DVM, JD)
12. Doctoral degree (Example: PhD, EdD)
13. I don’t know
14. Prefer not to say
 |
|  |  [OMB](https://www.federalregister.gov/documents/2024/03/29/2024-06469/revisions-to-ombs-statistical-policy-directive-no-15-standards-for-maintaining-collecting-and) | What is your race and/or ethnicity? Select all that apply and enter additional details in the free text space. | 1. American Indian or Alaska Native

*For example: Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.*[free-text] 1. Asian
	1. Chinese
	2. Asian Indian
	3. Filipino
	4. Vietnamese
	5. Korean
	6. Japanese
	7. *Enter, for example, Pakistani, Hmong, Afghan, ect.*
		1. [free-text]
2. Black or African American
	1. African American,
	2. Jamaican
	3. Haitian
	4. Nigerian
	5. Ethiopian
	6. Somali
	7. Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, etc.
		1. [free-text]
3. Hispanic or Latino
	1. Mexican
	2. Puerto Rican
	3. Salvadoran
	4. Cuban
	5. Dominican
	6. Guatemala
	7. Enter, for example, Columbian, Honduran, Spaniard, etc.
		1. [free-text]
4. Middle Eastern or North African
	1. Lebanese
	2. Iranian
	3. Egyptian
	4. Iranian
	5. Syrian
	6. Iraqi
	7. Israeli
	8. Enter, for example, Moroccan, Yemeni, Krudish, etc.
		1. [free-text]
5. Native Hawaiian or Other Pacific Islander
	1. Native Hawaiian
	2. Samoan
	3. Chamorro
	4. Tongan
	5. Fijian
	6. Marshallese
	7. Enter, for example, Chuukese, Palauan, Tahitian, etc.
		1. [free-text]
6. White
	1. English
	2. German
	3. Irish
	4. Italian
	5. Polish
	6. Scottish
	7. Enter, for example, French, Swedish, Norweigian, etc.
		1. [free-text]
7. I don’t know
8. Prefer not to say
 |

**Section II: General Tobacco Use**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Reference** | **Question** | **Responses** | **Indicator** |
|  | New | Have you **ever** used any of the following tobacco products fairly regularly (select all that apply)?*Fairly regularly is defined as using a product on a routine basis rather than trying a tobacco product only a few times.* | 1. Cigarettes
	1. *This category does not include electronic cigarettes (e-cigarettes, njoy, bluetip, JUUL), herbal cigarettes, cigars, cigarillos, little cigars, pipes, water pipes (hookahs), or marijuana.*
2. Electronic cigarettes or e-cigarettes
	1. *You also may know these products as vapes, mods, e-cigs, e-hookahs, or vape-pens.*
3. Cigars, cigarillos, or little filtered cigars
	1. *Cigarillos are medium cigars that sometimes are sold with plastic or wooden tips. Common brands include Black & Milds, Swisher Sweets, Dutch Masters and Phillies Blunts. Little filtered cigars look like cigarettes and are usually brown in color. Common brands include Prime Time and Winchester.*
4. Chewing tobacco, snuff, or dip
	1. *Common brands include Skoal, Copenhagen, Grizzly, Levi Garrett, Red Man, and Day’s Work.*
5. A regular pipe filled with tobacco
6. A hookah or waterpipe
7. Nicotine pouches
	1. *This product is a small bag that contains nicotine but not tobacco leaf. One common brand is Zyn.*
8. Don’t know/Not sure
9. Prefer not to say
 | Number of people who use tobacco products (all)Number of people who use tobacco product by typeDifference in prevalence of [all types of] tobacco product use |
|  | New | How old were you when you first started using tobacco products fairly regularly? | [--] age in years1. Don’t know
2. Prefer not to say
 | Difference in length of tobacco product use |
|  | New | Have you completely stopped using all tobacco products?*(To stop "completely" refers to permanently quitting use of tobacco products without relapse.)* | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Difference in cessation rate for tobacco products (This question was added for skip logic purposes) |
|  | New | *[If “Yes” to Q11]*Please enter the month and year in which you stopped using tobacco products completely | [Free text] | Difference in length of cessation of tobacco productsNumber of people who quit tobacco products post-policy implementation |
|  | New | *[If “Yes” to Q12]*Before successfully quitting tobacco products, how many quit attempts of one day or longer did you have? | 1. 0–9
2. 10–19
3. 20–29
4. 30–39
5. 40–49
6. 50 or more
7. Don’t know/Not sure
8. Prefer not to say
 | Difference in number of quit attempts made for tobacco products |
| 14.-20. | New, based on 2023 NHIS | [*For those who selected at least one tobacco product in Q9 and where Q11 is not yes, list the corresponding products in the question below]*Do you **now** use any of the following tobacco products “every day,” “some days,” “rarely,” or “not at all”?1. Cigarettes
2. Electronic cigarettes or e-cigarettes (you also may know them as vapes, mods, e-cigs, e-hookahs, or vape-pens)
3. Cigars, cigarillos, or little filtered cigars
4. Chewing tobacco, snuff, or dip
5. A regular pipe filled with tobacco
6. A hookah or waterpipe
7. Nicotine pouches
 | 1. Every day
2. Some days
3. Rarely
4. Not at all
5. Don’t know/Not sure
6. Prefer not to say
 | Number of people who use tobacco products (all) Number of people who currently use tobacco products by type Number of people who report regularity of tobacco product useDifference in prevalence of [all types of] tobacco product use |

**Section III: General Tobacco Quit Attempts / Switching**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Reference** | **Question** | **Responses** | **Indicators** |
|  | New, based on TUS-CPS 2018–19 | [For those who *DID NOT* select “No” for Q11]Have you **ever** tried to quit using tobacco products completely? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Difference in [all types of] tobacco product quit attempts |
|  | New, based on TUS-CPS 2018–19 | *[If “Yes” to “Have you ever tried to quit using tobacco products completely?”]*During the **past 12 months**, have you tried to quit using tobacco products completely? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Difference in [all types of] tobacco product quit attempts |
|  | New, based on TUS-CPS 2018–19 | *[If “Yes” to “During the past 12 months, have you ever tried to quit using tobacco products completely?”]*During the **past 6 months**, have you tried to quit using tobacco products completely? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who use non-menthol products who have at least one quit attempt in the past six monthsDifference in [all types of] tobacco product quit attempts |
|  | New, based on TUS-CPS 2018–19 | *[If “Yes” to “During the past 6 months, have you tried to quit using tobacco products completely?”]*During the **past 6 months**, have you stopped using tobacco products for **one day or longer** because you were trying to quit? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who use non-menthol products who have at least one quit attempt in the past six monthsDifference in [all types of] tobacco product quit attempts |
|  | New, based on TUS-CPS 2018–19 | *[If “Yes” to “During the past 6 months, have you stopped using tobacco products for one day or longer because you were trying to quit?”]*During the **past 6 months**, have you stopped using tobacco products for **3 months or longer** because you were trying to quit? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who use non-menthol products who have at least one quit attempt in the past six monthsNumber of people who have a sustained non-menthol product quit for three months or longerDifference in sustained quits for 3 months or longer for [all types of] tobacco products |
|  | New, based on TUS-CPS 2018–19 | *[For those who selected at least one tobacco product in Q14–Q20]*Are you seriously considering quitting use of tobacco products within the **next 6 months**? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who have the intention to quitDifference in [all types of] tobacco product quit attempts |
|  | New | [*For those who selected at least one tobacco product in Q9, list the corresponding products in the question below]*In the **past six months**, have you permanently switched from using any of the following tobacco products (column on the left) to another tobacco product (listed in the top row)? (List products selected in Q10) | 1. Cigarettes
2. Electronic cigarettes or e-cigarettes (you also may know them as vapes, mods, e-cigs, e-hookahs, or vape-pens)
3. Cigars, cigarillos, or little filtered cigars
4. Chewing tobacco, snuff, or dip
5. A regular pipe filled with tobacco
6. Hookah or waterpipe
7. Nicotine pouches
8. I have not switched from using this product
9. Don’t know/Not sure
10. Prefer not to say
 | **Added due to request by the FDA**Difference in switching behavior between types of tobacco product |

**Section IV: Menthol Use**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Reference** | **Question** | **Responses** | **Indicator** |
| 28.-34.  | New | [*For those who selected at least one tobacco product in Q9, list the corresponding products in the question below]***The previous questions in the survey were about your general tobacco use. We will now ask you questions that focus on your use of menthol-flavored tobacco products (hereafter referred to as menthol tobacco products).**Have you **ever** used any of the following **menthol-flavored tobacco products** fairly regularly?1. Menthol cigarettes
2. Menthol electronic cigarettes or e-cigarettes (you also may know them as vapes, mods, e-cigs, e-hookahs, or vape-pens)
3. Menthol cigars, cigarillos, or little filtered cigars
4. Menthol chewing tobacco, snuff, or dip
5. A regular pipe filled with menthol tobacco
6. A hookah or waterpipe with menthol-flavored shisha or hookah tobacco
7. Menthol nicotine pouches
 | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who use menthol-flavored tobacco productsNumber of people who use menthol tobacco products by typeDifference in prevalence of [all types of] menthol tobacco product use |
|  | New | [*If “Yes” to one or more products in Q28–Q34]*How old were you when you first started using **menthol tobacco products** fairly regularly? | [--] age in years1. Don’t know
2. Prefer not to say
 | Difference in length of menthol tobacco product use |
|  | New | *[If “Yes” to one or more products in Q28–Q34]*Have you completely stopped using all **menthol tobacco products**? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Difference in cessation rate of menthol tobacco products(This question was added for skip logic purposes) |
|  | New | *[If “Yes” to Q36]*Did you completely stop using **menthol tobacco products** more than **six months ago**? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | This question was added for skip logic purposes only |
|  | New | *[If “Yes” to Q36]*In what month and year did you stop using **menthol tobacco products** completely? | 1. [Free text]
 | Difference in length of cessation of menthol tobacco productsNumber of people who quit menthol tobacco products post-policy implementation |
|  | New | *[If “Yes” to Q36]*Before successfully quitting **menthol tobacco products**, how many quit attempts of one day or longer did you have?*Note: This question refers to attempts to quit menthol tobacco products specifically and not all tobacco products.*  | 1. 0–9
2. 10–19
3. 20–29
4. 30–39
5. 40–49
6. 50 or more
7. Don’t know/Not sure
8. Prefer not to say
 | Difference in number of quit attempts made for menthol tobacco products |
| 40.-46.  |  New, based on NATS 2013-14 | *[For those who selected at least one menthol-flavored tobacco product in Q28–Q34 and Q36 not=”Yes”, list the corresponding products in the question below]*Do you **now** use any of the following **menthol tobacco products** “every day,” “some days,” “rarely,” or “not at all”? 1. Menthol cigarettes
2. Menthol electronic cigarettes or e-cigarettes (you also may know them as vapes, mods, e-cigs, e-hookahs, or vape-pens)
3. Menthol cigars, cigarillos, or little filtered cigars
4. Menthol chewing tobacco, snuff, or dip
5. A regular pipe filled with menthol tobacco
6. A hookah or waterpipe with menthol-flavored shisha or hookah tobacco
7. Menthol nicotine pouches
 | 1. Every day
2. Some days
3. Rarely
4. Not at all
5. Don’t know/Not sure
6. Prefer not to say
 | Number of people who use menthol tobacco productsNumber of people who currently use menthol tobacco product by typeNumber of people who report regularity of menthol tobacco use Difference in prevalence of [all types of] menthol tobacco product use |

**Section V: Purchasing Behavior / Access**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Reference** | **Question** | **Responses** | **Indicator** |
|  | New | *[For those who said “No” to Q36 or selected at least one menthol-flavored tobacco product in Q28–Q34, list the corresponding products in the question below]*During the **past 6 months**, where did you get your **menthol tobacco products**? (Select all that apply.) | 1. I bought them from a physical store\* within the limits of my city
2. I bought them from a physical store outside the limits of my city
3. I bought them online
4. I got or bought them from somewhere/someone else Please specify [free text]
5. I have not bought any menthol tobacco products in the past 6 months
6. Don’t know/Not sure
7. Prefer not to say

*\*Store is defined as a tobacco shop, vape shop, convenience store, supermarket, discount store, gas station, vending machine, shopping mall, shopping center kiosk, or stand* | Number of people who have purchased menthol tobacco products from a physical store within their city limitsNumber of people who have purchased menthol tobacco products from a physical store outside their city limitsNumber of people who obtained menthol tobacco products from a source other than a storeDifference in self-reported purchasing behaviors related to menthol tobacco products Difference in self-reported access to menthol tobacco products |
|  | New | *[For those who indicated that they have purchased menthol tobacco products in the last six months]*During the **past 6 months**, did you travel to another city or state for *the main purpose of* purchasing a **menthol tobacco product?** | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who traveled to a different city or state to purchase menthol tobacco products after the policy passedDifference in self-reported purchasing behaviors related to menthol tobacco products Difference in self-reported access to menthol tobacco products |
|  | New | *[For those who selected response options 1, 2, 3, or 4 for Q47]* Do you agree or disagree with this statement? In the **past 6 months** it has been relatively easy for me to obtain **menthol tobacco products.** | 1. Agree
2. Disagree
3. Neither agree nor disagree
4. Don’t know/Not sure
5. Prefer not to say
 | Number of people who report that it has been relatively easy to obtain menthol tobacco productsDifference in self-reported access to menthol tobacco products |

**Section VI: Menthol Quit Attempts / Switching**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Reference** | **Question** | **Responses** | **Indicators** |
|  | New | *[For those who selected “Yes” for Q28–Q34 AND “No” for Q36]*Have you **ever** tried to quit using **menthol tobacco products** completely? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Difference in [all types of] menthol tobacco product quit attempts  |
|  | New, based on TUS-CPS 2018–19 | *[If “Yes” to “Have you ever tried to quit using menthol tobacco products completely?”]*During the **past 12 months**, have you tried to quit using **menthol tobacco products** completely? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Difference in [all types of] menthol tobacco product quit attempts |
|  | New | *[If “Yes” to “During the past 12 months, have you ever tried to quit using menthol flavored tobacco products completely?”]*During the **past 6 months**, have you tried to quit using **menthol tobacco products** completely? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Difference in in [all types of] menthol tobacco product quit attempts  |
|  | New | *[If “Yes” to “During the past 6 months, have you tried to quit using menthol-flavored tobacco products completely?”]*During the **past 6 months**, have you stopped using **menthol tobacco products** for **one day or longer** because you were trying to quit? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who use menthol products who have at least one quit attempt in the past six monthsDifference in in [all types of] menthol tobacco product quit attempts  |
|  | New | *[If “Yes” to “During the past 6 months, have you stopped using menthol flavored tobacco products for one day or longer because you were trying to quit?”]*During the **past 6 months**, have you stopped using **menthol tobacco products** for **3 months or longer** because you were trying to quit? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who use menthol products who have at least one quit attempt in the past six monthsNumber of people who have a sustained menthol tobacco product quit for three months or longerDifference in sustained quits for 3 months or longer for [all types of] menthol tobacco products |
|  | New, based on TUS-CPS 2018–19 | *[For those who selected at least one menthol tobacco product in Q40–Q46]*Are you seriously considering quitting use of **menthol tobacco products** within the **next 6 months**? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who have the intention to quitDifference in [all types of] menthol tobacco product quit attempts  |
|  | New | *[For those who selected ”Yes” for Q28–Q34]* Have you **ever** switched from using any **menthol tobacco product** to using any **non-menthol-tobacco product**?  | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who report switching from a menthol- tobacco product to a non-menthol tobacco productDifference in switching to non-menthol tobacco products |
| 1.
 | New | *[If “yes” to Q56]*At any time during the **past 6 months**, did you switch from using any **menthol tobacco product** to using any **non-menthol tobacco product**? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who report switching from a menthol tobacco product to a non-menthol tobacco productNumber of people who switched to a non-menthol product that had similar menthol packaging after the policy passedDifference in switching to non-menthol tobacco products |
|  | Truth Initiative | *[If yes to Q57]**[Show pictures of new “non-menthol” cigarettes, see appendix]*At any time during the **past 6 months**, did you switch from **using menthol tobacco products** to **one of the pictured “non-menthol” cigarette products**? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who report switching from a menthol tobacco product to a non-menthol tobacco productNumber of people who switched to a non-menthol product that had similar menthol packaging after the policy passedDifference in switching to non-menthol tobacco products |
|  | New | *[If “Yes” Q56]*Why did you switch from using a menthol tobacco product to using *any type* of non-menthol tobacco product (select all that apply)? | 1. Trying to quit using tobacco products
2. Cost of product
3. Unable to access menthol tobacco products
4. Other [free text]
5. Don’t know/Not sure
6. Prefer not to say
 | Difference in motivation to switch from menthol tobacco products to non-menthol tobacco products |

**Section VII: Perceptions/Beliefs**

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| --- | --- | --- | --- | --- |
|  | **Reference** | **Question** | **Responses** | **Indicators** |
| 60.-62.  | New, based on [2018 Minnesota Adult Tobacco Surve[y](http://y)](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7723815/) | Do you agree or disagree with the following statements?1. **Menthol tobacco products** are better for a sore throat than **non-menthol tobacco products.**
2. **Menthol tobacco products** are healthier than **non-menthol tobacco products.**
3. **Menthol tobacco products** contain fewer chemical additives than **non-menthol tobacco products.**
 | 1. Agree
2. Disagree
3. Neither agree nor disagree
4. Don’t know/Not sure
5. Prefer not to say
 | Number of people who believe that menthol tobacco products are better for a sore throat than non-menthol tobacco productsNumber of people who believe that menthol- tobacco products are healthier than non-menthol tobacco productsNumber of people who believe that menthol- tobacco products contain fewer chemical additives than non-menthol tobacco productsNumber of people who believe that menthol tobacco products are less harmful than non-menthol tobacco productsNumber of people who believe that non-menthol tobacco products are harder to quit than menthol tobacco productsDifference in perceived harms of menthol tobacco products (e.g., belief menthol is healthier, belief that it is harder or easier to quit, etc.) |
|  | New, based on 2023 Spring Styles Survey | Do you believe **menthol tobacco products** are less harmful, equally harmful, or more harmful to a person’s health than **non-menthol tobacco products**? | 1. Less Harmful
2. Equally Harmful
3. More Harmful
4. Don’t know/Not sure
5. Prefer not to say
 | Difference in perceived harms of menthol tobacco products (e.g., belief menthol is healthier, belief that it is harder or easier to quit, etc.) |
|  | New, based on 2023 Spring Styles Survey | Which type of tobacco products do you believe are harder to quit using – **menthol tobacco products** (such as menthol cigarettes or menthol e-cigarettes) or **non-menthol/regular tobacco products** (such as non-menthol cigarettes or non-menthol e-cigarettes)? | 1. Menthol tobacco products
2. Non-menthol tobacco products
3. Both are equally hard to quit
4. Don’t know/Not sure
5. Prefer not to say
 | Number of people who believe that non-menthol tobacco products are harder to quit than menthol tobacco productsDifference in perceived harms of menthol tobacco products (e.g., belief menthol is healthier, belief that it is harder or easier to quit, etc.) |

**Section VIII: Sites with Implemented Sales Restrictions**

Supplement to be adapted to each intervention site’s unique policy landscape.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Reference** | **Question** | **Responses** | **Indicator** |
|  | New | Are you aware of [insert name of policy/ordinance in relevant locality and brief overview of it, date implemented]? | 1. Yes
2. Somewhat
3. No
4. Don’t know/Not sure
5. Prefer not to say
 | Number of people aware of the policy |
|  | New | *[If “yes” or “Somewhat”]*How did you hear about the passage of [insert policy name and date]? Select all that apply. | 1. Local news
2. A friend, family member, acquaintance
3. From a tobacco retailer
4. Other [free text]
5. Don’t know/Not sure
6. Prefer not to say
 | Ways in which people learned about the policy |
|  | New | To what extent do you agree with the passage of [insert policy name and date], which restricts sales of all **flavored tobacco products, including menthol tobacco products**? | 1. Agree
2. Disagree
3. Neither agree nor disagree
4. Don’t know/Not sure
5. Prefer not to say
 | Number of people who agree with the policy |
|  | New | Do you agree or disagree with the following statement?[insert policy name and date] was passed to improve the health of people living in our city. | 1. Agree
2. Disagree
3. Neither agree nor disagree
4. Don’t know/Not sure
5. Prefer not to say
 | Number of people who agree that the policy was enacted to improve the health of people living in the city  |
|  | New | *[If “Yes” to “Did you ever try to quit using tobacco products completely? OR If “Not at all” for Q14–Q20 AND If “Yes,” “Somewhat,” or “Prefer not to say” is selected for Q65]*Did the implementation of [insert policy name and date]contribute to your decision to attempt to quit using **non-menthol tobacco products**? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who say policy contributed to tobacco product quit attempt |
|  | New | *[If “Yes” to “Did you ever try to quit using tobacco products completely? OR If “Not at all” for Q40–Q46 AND If “Yes,” “Somewhat,” or “Prefer not to say” is selected for Q65]*Did the implementation of [insert policy name and date] contribute to your decision to attempt to quit using **menthol tobacco products**? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who say policy contributed to menthol tobacco product quit attempt |
|  | New | *[If “Yes” to “Have you ever switched from using a menthol tobacco product to using a non-menthol-tobacco product?” AND If “Yes,” “Somewhat,” or “Prefer not to say” is selected for Q65]* Did the implementation of [insert policy name and date] contribute to your decision to switch from a **menthol tobacco product** to a **non-menthol tobacco product**? | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who say policy contributed to switching behavior |
|  | New | *[If “Yes” to “During the past 6 months, did you travel to another city or state for the purpose of purchasing a menthol tobacco product?” AND If “Yes,” “Somewhat,” or “Prefer not to say” is selected for Q65]*Did the implementation of [insert policy name and date] contribute to your decision to travel to a different city or state to purchase **menthol tobacco products**?  | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who say policy contributed to decision to travel to purchase menthol tobacco |
|  | New | *[If “Every day,” “Some days,” or “Rarely” to Q40–Q46?]*Since the implementation of [insert policy name and date], have you used **menthol tobacco products** less frequently? *[For example: you used to menthol tobacco products every day, but now you only use them rarely]* | 1. Yes
2. No
3. Don’t know/Not sure
4. Prefer not to say
 | Number of people who used menthol tobacco products less frequently after policy passage |

**Section IX: Comparison Sites**

Supplement for survey respondents located in comparison sites (Atlanta, GA; Baltimore, MD; Cleveland, OH; Detroit, MI; Milwaukee, WI) only.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Reference** | **Question** | **Responses** | **Indicator** |
|  | New | Do you believe removing **menthol tobacco products** from stores will help or encourage people who use these products to quit? | 1. Yes
2. Somewhat
3. No
4. Don’t know/Not sure
5. Prefer not to say
 | Number of people who believe a menthol sales restriction helps cessation |
|  | New | Do you believe restricting the sale of **menthol tobacco products** will negatively impact racial or ethnic minority groups? | 1. Yes
2. Somewhat
3. No
4. Don’t know/Not sure
5. Prefer not to say
 | Number of people who believe that a menthol sales restriction negatively impacts racial or ethnic minority groups |
|  | New | If there was a ban on the sale of **menthol tobacco products** in my city, I would: | 1. Not change my behavior because I do not use menthol tobacco products
2. Use menthol tobacco products less frequently
3. Use menthol tobacco products about the same amount
4. Use menthol tobacco products more frequently
5. Don’t know/Not sure
6. Prefer not to say
 | Number of people who indicate that they would use menthol products less frequently under a menthol banNumber of people who indicate that they would use menthol products more frequently under a menthol banNumber of people who indicate that they would use menthol products about the same amount under a menthol ban |

**Survey Completion Page**

Thank you for completing the questionnaire. Your response has been submitted. For more information on menthol tobacco products, visit the [CDC website](https://www.cdc.gov/tobacco/basic_information/menthol/index.html) on menthol tobacco. For resources on how to quit smoking, visit the [CDC "Quit Smoking" webpage](https://www.cdc.gov/tobacco/quit_smoking/index.htm).

1. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including 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, GA 30333, ATTN: PRA (0920-xxxx). [↑](#footnote-ref-3)