**Attachment 1: Questions to be cognitively tested**

 Form Approved

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**Proposed Questions:**

1. The next question asks about CBD products, that is, cannabis products that are not intended to get you “high.” These products are generally derived from hemp. Do not count cannabis products that are intended to get you “high” when answering this question.

During the past 30 days, on how many days did you use CBD products?

[0-30]

For the rest of the survey, we will refer to these types of cannabis products as “CBD products.”

1. When you used a CBD product during the past 30 days, how did you use it? (Check all that apply)

Did you:

* 1. Apply it to the skin (for example, in a lotion, gel, oil, balm, or bath salt)
	2. Smoke it (for example, in a joint, blunt, or cigar)
	3. Eat it or drink it, including drops, sprays, or tinctures (for example, in edibles like brownies or gummies or in capsules, or in tea, cola, or alcohol)
	4. Vaporize it (for example, in an e-cigarette-like vaporizer or another vaporizing device)
	5. Dab it (for example, using a dabbing rig, knife, or dab pen)
	6. Use it some other way
1. In the past 30 days, how did you get the CBD products you use? Do you: (Check all that apply)
	1. buy it from a medical or retail dispensary
	2. buy it from a smoke shop, grocery store, gas station, mall, or other convenience store
	3. buy it from a friend or acquaintance
	4. get it for free or share someone else's
	5. grow it yourself at home or have someone grow it for you
	6. have it delivered to you (from the internet, mail order, or delivery service)
	7. get it from somewhere else
	8. I did not obtain CBD products from any source in the past 30 days.
2. The next set of questions ask about marijuana, that is, the kind of cannabis that is intended to get you “high,” including products like delta-8 THC. During the past 30 days, on how many days did you use marijuana?

[0-30]

For the rest of the survey, we will refer to these types of cannabis products as “marijuana.”

1. In the past 30 days, how did you get the marijuana you use? Did you:  (Check all that apply)
	1. buy it from a medical or retail dispensary
	2. buy it from a grocery store, gas station, mall, or other convenience store

* 1. buy it from a dealer (in person) or friend
	2. get it for free or share someone else's
	3. grow it yourself at home or have someone grow it for you
	4. have it delivered to you (from the internet, mail order, or delivery service)
	5. get it from somewhere else
	6. I did not obtain marijuana from any source in the past 30 days.
1. When you used marijuana in the past 30 days, did you use any of the following substances at the same time or within a few hours? (Select all that apply)
	1. A tobacco or nicotine product like a cigarette, cigar, blunt, or vape
	2. Alcohol
	3. Prescription medications, including opioids taken as directed by your doctor
	4. Prescription opioids not prescribed to you or not used as directed by your doctor
	5. Psychedelics, such as LSD, acid, or mushrooms
	6. Other drugs, including heroin or illicit fentanyl
	7. I did not use marijuana with other substances
2. When you used marijuana in the past 30 days, did you try to replace your use of any of the following substances? Please include only substances that you began replacing within the past 30 days. (Select all that apply)
	1. A tobacco or nicotine product like a cigarette, cigar, blunt, or vape
	2. Alcohol
	3. Prescription medications, including opioids taken as directed by your doctor
	4. Prescription opioids not prescribed to you or not used as directed by your doctor
	5. Psychedelics, such as LSD, acid, or mushrooms
	6. Other drugs, including heroin or illicit fentanyl
	7. I did not use marijuana with other substances
3. During the past 30 days, have you driven a vehicle while high from marijuana use?
	1. Yes
	2. No
4. In the past 12 months, has a health professional, such as a doctor, nurse, or mental health professional, asked you about your marijuana use? Do not include office intake forms completed prior to an appointment.
	1. Yes
	2. No
	3. I haven’t seen a health professional in the past 12 months
5. In the past 12 months, has a health professional, such as a doctor, nurse, or therapist, done any of the following? Select all that apply.
	1. Told you to cut back on or not use marijuana
	2. Recommended medical marijuana or encouraged you to seek out marijuana for treatment purposes
	3. Told you to change the way you use marijuana, for example, from smoking to edibles
	4. Given you other advice about use of marijuana
	5. They did not provide any advice about marijuana use
	6. I have not seen a health professional in the past 12 months
6. During the past 12 months, were you able to cut down on or stop using marijuana every time you wanted to or tried to?
	1. Yes
	2. No
	3. I did not want or try to cut down on or stop using marijuana
	4. I rarely or never use marijuana
7. Does anyone who currently lives with you use marijuana?
	1. Yes
	2. No
	3. Don’t know
8. For the next two questions, please only consider marijuana, that is, the kind of cannabis that is intended to get you “high,” including products like delta-8 THC. Do not include CBD products.

During the past 30 days, how often have you seen or heard an advertisement for marijuana products or stores or seen a marijuana storefront? (Include TV, radio, signs and billboards, newspapers and magazines, pamphlets or flyers, streetside marketing like sign spinners or sandwich boards, online or cell phone advertisements, and dispensary newsletters or rewards programs.)

* 1. A few of the past 30 days
	2. About half of the past 30 days
	3. Nearly all of the past 30 days
	4. I have not seen or heard marijuana product advertising in the past 30 days
1. During the past 30 days, how often have you seen or heard an advertisement, message, or product label about preventing harmful marijuana use or avoiding marijuana use? (Include TV, radio, signs and billboards, newspapers and magazines, pamphlets or flyers, streetside marketing, and online or cell phone advertisements.)
	1. A few of the past 30 days
	2. About half of the past 30 days
	3. Nearly all of the past 30 days
	4. I have not seen or heard marijuana prevention advertising or messaging in the past 30 days
2. In the past 12 months, did you seek help for adverse or negative health effects caused by marijuana at any of these places? Select all that apply.
	1. Emergency department
	2. Poison control center
	3. Doctor or other health professional
	4. Walk-in clinic
	5. Telephone health service/helpline
	6. Addiction support service
	7. Other (please specify): \_\_\_\_\_\_\_
3. **Version 1:** [State name] [legalized/decriminalized] marijuana [for adult use/medical use] in [year]. Overall, how has [state name]’s [legalization] of [adult-use/medical-use] marijuana affected the quantity of marijuana you use, if at all?
	1. Legalization has not affected my use of marijuana
	2. My marijuana use has increased
	3. My marijuana use has decreased
	4. My marijuana use has stayed about the same
	5. I never or rarely use marijuana

**Version 2:** [State name] [legalized/decriminalized] marijuana [for adult use/medical use] in [year]. Overall, after [state name] [legalized] [adult-use/medical-use] marijuana, how has the quantity of marijuana you use changed, if at all?

1. My marijuana use has increased
2. My marijuana use has decreased
3. My marijuana use has stayed about the same
4. I never or rarely use marijuana
5. When you use CBD or marijuana products, which of the following best describes the product you use most often? Your best guess is fine.
	1. High THC, Low CBD
	2. High THC, High CBD
	3. Low THC, Low CBD
	4. Low THC, High CBD
	5. Other
	6. Not sure