

**Attachment 5b**  
**2026 NHIS Proposed New Content**  
**Concepts Measured, Duplication, and Proposed Uses of Data**

**Sponsored content:** Newly sponsored content on the sample adult questionnaire will include items on social functioning, use of nicotine pouches, and methods to quit smoking cigarettes. Newly sponsored content on the sample child questionnaire will include items on chronic fatigue syndrome.

**NEW SPONSORED CONTENT**

**SOCIAL FUNCTIONING – Sample Adult**

*Sponsor: HHS/ACL - Administration for Community Living*

Background/Rationale

This section is comprised of two new questions to assess if respondents need help with everyday tasks and have any difficulty learning new things. These questions are sponsored by the Administration for Community Living (ACL, HHS), which also has sponsored a question on age of disability onset since 2020.

Since 2019, ACL has worked with the National Center for Health Statistics (NCHS) to evaluate questions that may be used to identify adults with intellectual disability (IDD). To inform the creation of these items, a cognitive interview evaluation study of survey questions for adults with intellectual and developmental disabilities (IDD) was conducted by staff at the NCHS Collaborating Center for Questionnaire Design and Evaluation Research (CCQDER), in collaboration with staff in the NCHS Division of Analysis and Epidemiology, on behalf of the Department of Health and Human Services (HHS), Administration for Community Living (ACL), Administration on Disabilities (AoD). Full reports from this study are available on Q-Bank, a publicly accessible resource.

This evaluation study took place over two phases, the first being one-on-one interviews about functional difficulties with 56 respondents 18 years of age and older. In the second phase, ten respondents from the first phase were recontacted for another interview which had different questions asking about learning, independent living, disability group participation, and disability diagnosis.

In both testing phases, the areas of 'learning' and 'receipt of help or support' emerged as the most relevant in the respondent narratives, meaning they were understandable and important

topics for respondents when describing their functional difficulties. Ultimately, this testing informed the creation of two new items for the 2026 NHIS that are as follows:

*Because of a physical, mental or emotional condition, does someone help you with everyday tasks such as grocery shopping, paying bills, or visiting the doctor's office?*

*Do you have difficulty learning new things, for example, at school, work, or in other places?*

#### Concepts Measured

- Helped with everyday tasks due to health problem (SOCTASKS\_A)
- Difficulty learning new things due to health problem (SOCLEARN\_A)

#### Duplication and Previous NHIS

The annual core of the NHIS includes the extended set of functioning questions from the Washington Group on Disability Statistics, as well as additional functioning questions on difficulty doing errands alone and participating in social activities. Since 2020, ACL has also sponsored the inclusion of a question asking the age of onset of functioning difficulties. These new questions complement those existing questions.

#### Proposed Use of the Data

The purpose of the evaluation was to contribute to the development of questions to be used to identify adults with IDD on nationally representative, population-based data collections, which includes household surveys like the NHIS. The purpose of adding these two questions for 2026 is to produce national estimates of the prevalence of IDD and contribute to better understanding of the health status, factors influencing health, and health effects of people with IDD.

#### References

1. MacFadyen A, Weeks JD, Pleis JR and Lochner K. 2025. *Memo: Brief Findings from a Cognitive Interview Evaluation of Survey Questions for Adults with Intellectual and Developmental Disabilities*. Hyattsville, MD. National Center for Health Statistics Division of Research and Methodology and Division of Analysis and Epidemiology.
2. Havercamp SM, Krah G, Larson S, Weeks JD and the National Health Surveillance for IDD Workgroup. 2019. *Working Through the IDD Data Conundrum: Identifying People with Intellectual Disability and developmental Disabilities in National Population Surveys*. Washington, DC" Administration on Intellectual and Developmental Disabilities.

#### **OTHER TOBACCO (NICOTINE POUCHES) – Sample Adult**

*Sponsor: FDA/CTP - Center for Tobacco Products*

### Background/Rationale

In 2026, the OTB (Other Tobacco) section consists of seven questions; five questions returning from 2025 about cigar smoking and smokeless tobacco use, and two new questions on nicotine pouches. All seven questions are sponsored by the Federal Drug Administration's (FDA) Center for Tobacco Products (CTP).

The two new questions on nicotine pouches ask:

*Have you ever used nicotine pouches, even one or two times?*

*Do you now use nicotine pouches every day, some days, or not at all?*

Nicotine pouches are different from smokeless tobacco products because they do not contain any ground tobacco leaf, thus the sponsors wanted to collect data about the use of each kind of product separately.

The purpose of these new questions, like the other questions in the OTB section, as well as the annual core items on cigarette and e-cigarette use, is to collect information about the Sample Adult's tobacco habits that help researchers estimate the prevalence of product use.

### Concepts Measured

- Ever used nicotine pouches (NICPOUCHEV\_A)
- Currently uses nicotine pouches daily, some days, or not at all (NICPOUCHCR\_A)

### Duplication and Previous NHIS

In recent years, nicotine pouches have previously been grouped in with other smokeless tobacco products on the questionnaire (SMOKELSEV1\_A, SMOKELSCR1\_A).

## **CIGARETTES AND E-CIGARETTES (QUIT METHODS) - Sample Adult**

*Sponsor: NIH/NCI - National Cancer Institute, CDC/NCCDPHP - National Center for Chronic Disease Prevention and Health Promotion*

### Background/Rationale

Tobacco use is the leading cause of preventable disease, disability, and death in the United States. Cigarettes are the tobacco product most commonly used by U.S. adults, at nearly 10% of the population; over 16 million Americans live with at least one disease caused by smoking [1,2].

For decades, NHIS has been used as the data source for monitoring Healthy People tobacco use and cessation objectives [3], as well as for the NCI's National Cancer Trends Progress Report section on tobacco use and smoking cessation [4]. Its large sample size, representativeness and generalizability, and rigorous methods have made it the gold standard survey for understanding and monitoring tobacco use and cessation trends in the U.S.

In the current era of technological advancement, which has driven a deeper transformation in healthcare services, newer digital tobacco cessation modalities have emerged in the U.S., including interventions ranging from relatively low-tech approaches, such as mobile text messaging, smartphone apps and internet-based websites and programs, all the way to more complex approaches, such as those based on artificial intelligence (AI) [5-7]. Evidence on sustained participant adherence to these approaches, as well as even their fundamental effectiveness in helping people quit, is variable depending on the method used [5, 8-9].

Given the rapid development and proliferation of technology-assisted approaches to tobacco cessation in the U.S. over the past few years, as well as the patchwork understanding of their underlying effectiveness, there is a need to understand the relative prevalence of use of these methods as part of the overall landscape of tobacco cessation attempts in the U.S. population. The 2026 NHIS will focus on the use of these technology-assisted approaches specifically in the largest population of tobacco users: specifically, cigarette smokers.

#### Concepts Measured

Use of the following products to help quit smoking:

- A smartphone app, website, or web-based program (FQUITWEB\_A for former smokers and CQUITWEB\_A for current smokers)
- A text messaging stop smoking program (FQUITTEXT\_A for former smokers and CQUITTEXT\_A for current smokers)

#### Duplication and Previous NHIS

- As previously mentioned, NHIS has been used to track adult tobacco use in the U.S. as well as various cessation approaches for decades.
- The Tobacco Use Supplement to the Current Population Survey (TUS-CPS) [10] also fields certain questions about tobacco use. However, it is only collected every 3-4 years, the topics covered are different, and the instrument does not allow for the analyzing of data by insurance status, which critically impacts access to and use of cessation treatments. As such, NHIS and TUS-CPS are not duplicative in their efforts.

#### Proposed Use of the Data

- The data are intended to produce reliable national estimates of various smoking cessation behaviors for the U.S. adult population. Specifically, the newly proposed

questions will establish a baseline prevalence of the use of technology-associated quit approaches, with the intention to follow trends of use over time. Any important differences in the overall prevalence and specific forms of smoking cessation support used among various subpopulations of U.S. adults (e.g., rural versus urban, by age categories) will be assessed.

- Questions on the emerging use of technology for smoking cessation will expand our understanding of overall access to some form of cessation support program by the broader U.S. population, including in harder-to-reach rural areas, where the prevalence of tobacco use can be higher than the general population. Understanding how different methods of smoking cessation support might variably reach individual segments of the U.S. population will help optimize future program development.
- Based on prior available data, we expect that there will be sufficient sample sizes to conduct all the above analyses. Using the most recently available 2022 NHIS data, 11.6%, or 28.8 million U.S. adults, currently smoked cigarettes. Of these, approximately 53.3%, or 15.4 million people, tried to quit within the past 12 months, and 7.3% of these used a form of counseling to do so [2]. More specifically, in the 2022 survey, the prevalence was >2% for using one-on-one counseling, a phone help/quit line, or a clinic/class/support group to stop smoking: prevalence ranged from 2.8-5.5% among adults who tried to quit smoking in the past 12 months, and from 2.9-3.8% among adults who quit smoking in the prior 2 years [11].

## References

1. Centers for Disease Control and Prevention. Current Cigarette Smoking Among Adults in the United States. Accessed on November 17, 2025 at: <https://www.cdc.gov/tobacco/php/data-statistics/adult-data-cigarettes/index.html>.
2. VanFrank B, Malarcher A, Cornelius ME, et al. Adult smoking cessation—United States, 2022. *MMWR*. 2024; 73(29): 633-41.
3. Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services. Healthy People 2030 [Internet]. Tobacco Use, Data Methodology and Measurement. Accessed September 27, 2025 at: <https://health.gov/healthypeople/objectives-and-data/browse-objectives/tobacco-use/reduce-current-tobacco-use-adults-tu-01/data>
4. National Cancer Institute. Cancer Trends Progress Report. Accessed September 27, 2025 at: <https://progressreport.cancer.gov/>.
5. Puljevic C, Meciar I, Holland A, et al. Systematic review and meta-analysis of text messaging interventions to support tobacco cessation. *Tob Control*. 2025 Apr 1;34(2):228-238. doi: 10.1136/tc-2023-058323.
6. Di Palo MP, Di Spirito F, Garofano M, et al. Effectiveness and Adherence of Standalone Digital Tobacco Cessation Modalities: A Systematic Review of Systematic Reviews. *Healthcare (Basel)*. 2025 Aug 26;13(17):2125. doi: 10.3390/healthcare13172125.

7. Deepika V, Jodalli PS, Avinash BR. The role of chatbots and virtual assistants in enhancing tobacco cessation counselling. *Front Digit Health*. 2025 Apr 16:7:1503227. doi: 10.3389/fdgth.2025.1503227.
8. Wasnik M, Dave B, Vadher V. Effectiveness of Digital Intervention for Tobacco Cessation Among Adults: A Systematic Review. *Addict Health*. 2025 Jan:17:1566. doi: 10.34172/ahj.1566. Epub 2025 Mar 29.
9. Rushender R, Logaraj M, Krishnamoorthy Y. Effectiveness of mobile phone applications for tobacco cessation: An umbrella review. *Drug Alcohol Depend*. 2024 Oct 1:263:112425. doi: 10.1016/j.drugalcdep.2024.112425. Epub 2024 Aug 30.
10. National Cancer Institute. Tobacco Use Supplement to the Current Population Survey (TUS-CPS). Accessed September 27, 2025 at: <https://cancercontrol.cancer.gov/brp/tcrb/tus-cps>.
11. National Center for Health Statistics. 2022 National Health Interview Survey Codebook for Sample Adult File (Document Version: 05 June 2023; Public Use). Accessed November 17, 2025 at: [https://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NHIS/2022/adult-codebook.pdf](https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHIS/2022/adult-codebook.pdf).

## **CHRONIC FATIGUE SYNDROME – Sample Child**

**Sponsor:** CDC/NCEZID - National Center for Emerging and Zoonotic Infectious Diseases

### Background/Rationale

NCEZID sponsored the inclusion of questions on chronic fatigue syndrome for sample adults in 2021-2024. These questions are returning as sponsored content in 2026. Beginning with the 2026 cycle, the same questions will also be included in the sample child section to facilitate the production of population-wide estimates on the prevalence of chronic fatigue syndrome.

### Concepts Measured

- Ever had Chronic Fatigue Syndrome (CFSEV\_C)
- Still have Chronic Fatigue Syndrome (CFSNOW\_C)