Surveillance and Evaluation Data Resources for Comprehensive Tobacco Control Programs

June 2014



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| 2014. |

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About This Book

Surveillance and Evaluation Data Resources is an at-a-glance compilation of surveillance and evaluation resources for comprehensive tobacco control programs. This booklet is meant to be used by program managers and evaluators in planning and evaluating tobacco control programs. Its primary objective is to provide basic information on each data source to assist state tobacco control programs to identify sources that can help with planning, monitoring, and evaluation. A discussion of when and how to use these resources is addressed in other evaluation workbooks and manuals such as Key Outcome Indicators for Evaluating Comprehensive Tobacco Control Programs and Introduction to Process Evaluation in Tobacco Use Prevention and Control, and during technical assistance events. These and other resources are available at <a href="http://www.cdc.gov/tobacco/to

Users of this booklet are encouraged to review and assess the appropriateness of these resources in meeting their program's needs. The data sources listed here provide a wide variety of tobacco-related information. For example, restaurant and worksite surveys address environmental policies and indicators; the Youth Tobacco Survey, Adult Tobacco Survey, and media evaluation surveys address individual knowledge, attitudes, and behaviors; and the cancer registries and hospital discharge records address health outcomes. Given that the field of tobacco control continues to evolve over time, it is not possible to provide an exhaustive summary of currently available data sources. Therefore, this booklet outlines only the most relevant and comprehensive resources available for achieving state tobacco control program objectives.

Sources that are used frequently and are compatible across states are often employed to help states develop tobacco program objectives. Data from these sources can be used to compare program impact and outcomes with those of other states and the nation as a whole. Data from some of the listed resources are restricted and require purchase.

The data sources are organized by major categories: National and state surveys and tools, registries and vital statistics, topic-specific tools, and global surveys and tools. The columns in each table provide the following information:

Column 1: Purpose

■ Purpose(s) of the data source or tool.

Column 2: Topics Addressed

• Topics on which information is collected or available for the data source or tool, such as secondhand smoke, tobacco use, knowledge and attitudes, tobacco-related policies, or quit attempts.

Column 3: Sampling Frame and Data Collection

- Population from which the sample is taken, such as high schools, all visitors to a Web site, or US adults.
- Lead organization or agency for collecting and disseminating the data.

Column 4: Methodology

- Subject selection: How the sample population was selected (for example, random sampling or census) and the unit of analysis (for example, household, individual, or school).
- Survey delivery: How the survey or tool was administered (for example, self-administered survey or inperson interview).
- Number of core questions.

Column 5: Timing and Frequency

- Year the survey or data source was first used.
- How often the data source was used for data collection (for example, annually or periodically).
- Notes on population characteristics, optional questions, and specifics of methods used.

Not all of the data sources or tools are available in every state. Consequently, some states may want to consider investing funds to develop systems to address gaps in data. CDC guidelines state

All federally funded tobacco prevention and con¬trol programs are expected to engage in strategic surveillance and program evaluation activities. To accomplish this, best practices dictate that 10% of total annual tobacco control program funds be allocated for surveillance and evaluation.

It is important that tobacco control programs develop and maintain the appropriate infrastructure to enhance their surveillance and evaluation resources as needed. For example, conducting a detailed evaluation of a specific intervention, such as a cohort study to assess the effectiveness of a media campaign, can be resource intensive. Similarly, additional resources beyond the standard 10% of tobacco control program funds may also be required for developing increased technical capacity of local programs to perform process and outcome evaluation."

New data-collection systems should be relevant to specific state programmatic goals, objectives, and activities. However, prior to choosing data sources or investing program resources to develop new data systems, programs should consider some of the following issues: feasibility, timeliness, frequency, comparability, credibility, and available resources.

For more information on these considerations, states are encouraged to contact their Office on Smoking and Health (OSH) Project Officer or access OSH's surveillance and evaluation resources on the Centers for Disease Control and Prevention's Web site at http://www.cdc.gov/tobacco/tobacco control programs/surveillance evaluation/index.htm.

¹ Best Practices for Comprehensive Tobacco Control Programs—2014. Atlanta, GA: US Department of Health and Human Services; 2014: 61. Available at: http://www.cdc.gov/tobacco/stateandcommunity/best_practices/index.htm.

| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
|---|---|---|--|---|
| Adult Tobacco Survey (ATS | | | | |
| http://www.cdc.gov/mmw | r/PDF/ss/ss5903.pdf | | | |
| To provide state-level data on adult tobacco use, knowledge, attitudes, and on tobacco use prevention and control policies. To provide state-level data on long-term, intermediate, and short-term indicators key to the design, implementation, and evaluation of comprehensive tobacco control programs. | Cigarette, cigar, pipe, kretek, and smokeless tobacco use, secondhand smoke exposure, and policies. Cessation behaviors/quit attempts. Health care advice. Parental involvement. Media exposure. Risk perception and social influences. Emerging product use. | State level. Adults aged 18 years or older. Data collection: States, territories, districts. | Random-digit-dialed landline and cellular telephone survey. Questionnaire template has 49 questions for current smokers, 38 for former smokers, and 34 for never smokers. State-added questions optional. | Initiated in 1986 Frequency: Annually, dependent on funding. |
| Alaska Native Adult Tobaco | O Survey (AN ATS) | | | |
| | co/data statistics/surveys/alaska r | native/index.htm | | |
| • To enable villages, communities, and other organizations to assess the knowledge, beliefs, and attitudes of tribal members about the use of commercial tobacco. | Cigarette use and cessation. Use of other tobacco products (i.e., iqmik, chewing [spit], or snuff [dip] tobacco). Secondhand smoke exposure. Methods used in quit efforts. Workplace smoke-free policies. Knowledge and risk perceptions of tobacco use. | Village and community level. Alaska Native adults aged 18 years or older. Data collection: Villages or communities. | Census type, area-based sample or representative, random, population-based sample, depending on village or community size. Culturally sensitive face-to-face interviewing. 143 core questions. Village or community supplemental questions optional. | Initiated in 2007 Frequency: Dependent on Alaska Native community interest. |
| American Indian Adult Toba | acco Survey (Al ATS) co/data statistics/surveys/americal | n indian/index htm | | |
| To enable tribes, tribal organizations, and other organizations to assess the knowledge, beliefs, and attitudes of tribal members about the use of commercial tobacco. | Commercial cigarette use. Use of other tobacco products (i.e., pipe, chewing [spit], or snuff [dip] tobacco). Quit efforts. Methods used in quit efforts. Workplace policies on smoking. Secondhand smoke exposure. Knowledge and risk perceptions of commercial tobacco use. | Tribal level. American Indian adults aged 18 years or older. Data collection: Tribes. | Census type, area based sample or representative, random, population-based sample, depending on tribe size. Culturally sensitive face-to-face interviewing. Tribal supplemental questions optional. 160 core questions. | Initiated in 2005 Frequency: Dependent on tribal interest. |

| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
|---|---|--|---|---|
| Behavioral Risk Factor Sur http://www.cdc.gov/brfss | veillance System (BRFSS) | | | |
| To provide descriptive data about health-related risk behaviors and events, chronic health conditions, and use of preventive services. | The tobacco topics may vary by year and can include Cigarette and smokeless tobacco use. Age of initiation. Cessation behaviors. Secondhand smoke policies and rules. | State level. Adults aged 18 years or older. Data collection: CDC. | Random-digit-dialed landline and cellular telephone survey. Core survey has five questions related to tobacco use. Optional modules for smoking cessation and secondhand smoke. | Initiated in 1984 Frequency: Annually. |
| • | cco Survey Guide (H/L ATS) co/data statistics/surveys/hispanic | : latino ats guide/index.htr | <u>n</u> | |
| To measure the tobaccorelated behaviors, knowledge, attitudes, and opinions of Hispanic and Latino persons. | General health. Cobacco use. Cessation. Secondhand smoke exposure. Risk perceptions, social influences, and demographics among Hispanic and Latino adults. | All levels. Hispanic/Latino adults aged 18 years or older. Data collection: Institute that commissions the survey. | Standard list-assisted, random-digit-dial or area sampling, depending on community size. Telephone interview or in-person interview in English or Spanish. 56 core questions. Questions reflect experience and language of Hispanic/Latino persons. Spanish translation was carefully developed to be understood by Spanish-speakers from various countries of origin. Cognitively tested in Chicago, IL; Los Angeles, CA; Miami, FL; New York, NY; San Antonio, TX; El Paso, TX; and Washington, DC during 2004–2005. | Initiated in 2002 Frequency: Dependent on interest. |

| Table 1. National and State Surveys and Tools | | | | | | | |
|---|--|--|---|---|--|--|--|
| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency | | | |
| Monitoring the Future (MTF) | | | | | | | |
| http://monitoringthefuture. | 1 | | | l . | | | |
| To provide annual data on behaviors, knowledge, attitudes, and values related to the use of an array of psychoactive substances, both illicit and licit, among American secondary school students, college students, and young adults. | Cigarette use. Age of initiation. Cessation behavior. Brand preference. Youth access. Enforcement. Media awareness. | National level. Students in grades 8, 10, and 12, and young adults. Data collection: National Institute on Drug Abuse. | Random design, self-administered, school-based survey with follow-up survey mailed to cohort population. Number of questions: 3 to 64. | Initiated in 1975. Frequency: Annually. | | | |
| National Adult Tobacco Survey (NATS) http://www.cdc.gov/tobacco/data_statistics/surveys/nats | | | | | | | |
| To provide data on adult tobacco use, knowledge, attitudes, purchasing behaviors, and on tobacco use prevention and control policies. To provide national data on long-term, intermediate, and short-term indicators key to the design, implementation, and evaluation of comprehensive tobacco prevention and control programs. | Cigarette, cigar, pipe, hookah, kretek, e-cigarette, chewing tobacco, and smokeless tobacco use. Susceptibility to cigarette smoking initiation. Secondhand smoke exposure and smoke-free policies. Cessation behaviors/quit attempts. Health care advice. Parental involvement. Media exposure. Risk perception and social influences. New products used. Knowledge, attitudes, and perceptions. | National level. Noninstitutionalized adults aged 18 years or older. Data collection: CDC. | Stratified, random-digit-dialed landline and cellular telephone survey of adults. Interviews conducted in English and Spanish. 130–150 maximum path core questions. | • Initiated in 2009. • Frequency: 2009–2010, 2012– 2013, 2013–2014. | | | |

| Purpose | Topics Addressed | Sampling Frame and | Methodology | Timing and |
|---|---|--|---|--|
| | - | Data Collection | | Frequency |
| vational Health and Nutrition http://www.cdc.gov/nchs/n | on Examination Survey (NHANES) https://doi.org/10.1000/journal.com/ | | | |
| To estimate the proportion of persons in the US population and in designated subgroups with selected conditions, diseases, and risk factors. To monitor trends in the prevalence, treatment, and control of selected diseases. To explore relationships between diet, nutrition, and health. To explore emerging public health issues. To provide baseline health characteristics to link with mortality data from the National Death Index (http://www.cdc.gov/nchs/ndi.htm) and other administrative records. | Cigarette use (current and former). Age of initiation. Brand preference. Current smokeless tobacco and e-cigarettes use. Secondhand smoke exposure shown by serum cotinine and urinary NNAL biomarkers, and by self-report. | National level. Noninstitutionalized civilian US population; individuals, all ages. Data collection: National Center for Health Statistics (NCHS). | Complex, multistage cluster probability sample. Annual samples are nationally representative. Because of disclosure concerns and limited sample sizes, data are released in 2-year cycles. For small population groups and for less common diseases, conditions, and risk factors, several years of data may be needed to produce adequate estimates. Household interview and physical measurements in mobile examination center. | Initiated in early 1960s. Frequency: Continuous sinc 1999. |
| National Health Interview S | | , | | |
| nttp://www.cdc.gov/nchs/n | <u>ihis.htm</u> | | | |
| NHIS Adult Tobacco Use: <u>htt</u> | p://www.cdc.gov/nchs/nhis/tobacc | Ĭ | | |
| or To monitor the health of the US civilian, noninstitutionalized population including For all ages: » Health status. » Activity limitations. » Injuries. » Health insurance coverage. » Access and use of health care. For adults (18+), additional information on: » Health conditions. » Activity limitations. » Activity limitations. | Tobacco topics covered annually: Cigarette smoking status. Number of cigarettes smoked per day. Age of initiation. Time since quit. Quit attempt in past year. Tobacco topics covered in supplements (selected years): Non-cigarette smoked tobacco (i.e., cigars, pipes, etc.). Smokeless tobacco use. Cessation methods. Secondhand smoke policies. Secondhand smoke exposure. Medical advice to quit. Pregnancy and smoking. | National level. Full NHIS: All ages. Tobacco questions: Ages 18+. Data collection: NCHS. | Multistage cluster sample design with oversampling of black, Hispanic, and Asian populations. In-person household interview with telephone follow-up. Annual core and periodic supplement (special topic) questionnaires. Number of core questions: 8. | Initiated in 1957 Frequency: Continuous (annual data release). Cigarette smokir in selected years 1964–1965 (supplements) and annually sin 1997. Non-cigarette tobacco product in selected years since 1965 (supplements). |

| | Table 1. National ar | | and roots | |
|---|---|--|---|---|
| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
| National Survey on Drug L https://nsduhweb.rti.org | lse and Health (NSDUH) | | | |
| To provide data on the use of tobacco, alcohol, illicit drugs (including nonmedical use of prescription drugs) and mental health in the United States. Previously known as National Household Survey on Drug Abuse (NHSDA). | Cigarette, cigar, pipe, and smokeless tobacco use. Age of initiation. | National and state level. Data collection: Substance Abuse and Mental Health Services Administration (SAMHSA). | Multistage area probability sampling design. Household survey. People aged 12 or older. Number of questions: 6 to 12. | Initiated in 1972. Frequency: Annually. Estimates produced from the 1999, 2000, and 2001 surveys are not comparable to those produced from the surveys in 1998 and earlier. |
| National Youth Tobacco Su http://www.cdc.gov/tobac | ırvey (NYTS) co/data statistics/surveys/nyts/inde | ex.htm | | |
| To provide national data on long-term, intermediate, and short-term indicators key to the design, implementation, and evaluation of the National Tobacco Control Program (NTCP). To offer nationally representative data about middle and high school youth's tobaccorelated beliefs, attitudes, behaviors, and exposure to pro- and antitobacco influences. | Health risk perception and attitudes. Tobacco use behaviors (i.e., cigarette initiation, current use of cigarette, cigar, smokeless tobacco, and other tobacco products, including e-cigarettes). Peer product usage. Quit attempts. Tobacco promotional items. Antitobacco ads. Health care advice. Tobacco in the media. Secondhand smoke. Minor access to tobacco. School curriculum. Smoking rules in home and vehicle. Experience at home and community. Use of tobacco products for people who live with minors. | National level. Youth in grades 6–12. Data collection: CDC. | Public and private schools. Schools are selected with a probability proportional to enrollment size. Classes randomly selected from each selected school that chose to participate. Self-administered paper and pencil survey in classroom. 81 questions. Starting in 2011, during oddnumbered years, the NYTS focused more on the specific priorities of CDC/OSH. During evennumbered years, it focused more on the specific priorities of FDA's Center for Tobacco Products. | Initiated in 1999. Frequency: 1999, 2000, 2002, 2004, 2006, 2009, 2011, 2012, 2013. |
| Pregnancy Risk Assessments://www.cdc.gov/prams | nt Monitoring System (PRAMS) s/aboutprams.htm | | | |
| To provide ongoing population-based surveillance of selected maternal behaviors around the time of pregnancy, including tobacco use. | Cigarette use before and during pregnancy and in the child's early infancy. Secondhand smoke exposure. Cessation counseling. | State level. A sample of women who have had a recent live birth is drawn from the state's birth certificate file. Data collection: States. | Random design, mail survey with telephone follow-up. Number of questions: 6 to 9. | Initiated in 1987. Frequency: Annual. This is an ongoing survey. Availability of data depends on when individual states began participating. |

| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
|--|---|---|--|--|
| School Health Policies and http://www.cdc.gov/shpps | | | | Troquency |
| To assess school health policies and practices at the state, district, school, and classroom levels. | Health education. Physical education. Health services. Mental health and social services. Nutrition services. Healthy and safe school environment. Faculty and staff health promotion. | All 50 state education agencies, all school districts, all public and private schools, health and physical education classrooms. Data collection: CDC. | Census of all 50 state education agencies and a national sample of school districts that complete Web-based questionnaires. National sample of schools and classrooms that respond to onsite structured interviews. | Initiated in 1994 Frequency: Periodic. |
| School Health Profiles (Pronttp://www.cdc.gov/health | | | | |
| Using a system of surveys, to assess school health policies and practices in states, large urban school districts, and territories. | Monitors the status of School health education requirements and content. School health policies related to HIV infection/AIDS, tobacco-use prevention, and nutrition. Asthma management activities. Family and community involvement in school health programs. | All secondary schools in each jurisdiction. Data collection: States, large urban school districts, and territories. | Representative samples of secondary schools that respond to self-administered questionnaires. | Initiated in 1996 Frequency: Biennially. |
| Smoking-Attributable Morl https://apps.nccd.cdc.gov/ | bidity, Mortality, and Economic Cost /sammec/index.asp | s (SAMMEC) | | |
| • Internet application used to calculate the health and economic burden of smoking for adults (Adult SAMMEC) and infants (Maternal and Child Health [MCH] SAMMEC). | Adult SAMMEC calculates » Smoking-attributable mortality (SAM). » Years of potential life lost (YPLL). » Direct medical expenditures. » Indirect productivity costs associated with YPLL. The MCH SAMMEC calculates » SAM. » YPLL. » Smoking-attributable infant health care costs at delivery. | National and state level for Adult SAMMEC, national level for MCH SAMMEC. Data collection: Varies by data source. | Adults aged 35 or older (Adult SAMMEC) and infants aged 1 year or younger (MCH SAMMEC). SAMMEC requires a minimum population of a few hundred thousand to compute statistically valid estimates or estimates for population subgroups. SAMMEC is not a surveillance tool and is not designed for cost-effectiveness analysis. | Initiated by CDC in 1990. Frequency: Periodic. |

| | Table 1. National ar | nd State Surveys | and loois | |
|---|--|--|--|---|
| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
| | acking and Evaluation (STATE) Syste tatesystem/Default/Default.aspx | em | | |
| • To maintain a data warehouse that provides comparable measures on tobacco use prevention and control from many different types of data sources, including legislative tracking, agricultural and manufacturing, and health consequences and costs for all 50 states and the District of Columbia. | Adult and youth cigarette, cigar, pipe, and smokeless tobacco use. Smoke-free laws and policies. Youth access laws. Tobacco excise taxes. Smoking-attributable costs. Advertising restriction laws. Cigarette sales. Cessation. Appropriation and expenditure funding. Quitline state level. | Varies according to data source. Data collection: Varies by data source. | Varies by data source. | Varies by data source. |
| Tohacco Use Sunnlement t | to the Current Population Survey (TL | IS-CPS) | | |
| http://www.census.gov/cp | | 50 Of O ₁ | | |
| • To provide a comprehensive body of data on the employment and unemployment experience of the US population, classified by age, sex, race, and other characteristics. | Periodic measures have included Cigarette, pipe, cigar, and smokeless tobacco use. Age of initiation. Secondhand smoke exposure. Cessation behavior. | National and state levels. People aged 15 or older. Data collection: US Census Bureau. | Random design, household interview with telephone follow-up. | • 1992–1993, 1999 1996, 1998–1999 2000, 2001–2000 2003, 2006–2000 and 2010–2011. • Frequency: Periodic. |
| Periodic supplements have included tobacco- related measures. | | | | |
| Youth Risk Behavior Surve | illance System (YRBSS) | | | · |
| http://www.cdc.gov/yrbs • To provide data on health risk behaviors that contribute to leading causes of mortality, morbidity, and social problems among youth and adults in the United States. | Cigarette, cigar, and smokeless tobacco use. Age of initiation. Youth access. Cessation behavior. Alcohol and other drug use. Sexual behaviors that contribute to unintended pregnancy and sexually transmitted disease. Dietary behaviors. Physical activity. Behaviors that result in violence and unintentional injuries. | National YRBS—all public and private school students in grades 9–12 nationwide. State, territory, large urban school district YRBSS—public and private school students in grades 9–12 in the jurisdiction. Data collection: CDC owns the national YRBS data. Each state, territory, and large urban school district owns its | Schools are selected with a probability proportional to enrollment size. Classes randomly selected from each selected school that chose to participate. Self-administered paper and pencil survey in classroom. State, territory, and district surveys: 86–89 core questions. National survey: 89–92 core questions. | Initiated in 1991 Frequency: Biennially. |

| Purpose Youth Tobacco Survey (YTS) http://www.cdc.gov/tobacco/data statistics/s • To provide state-level data on long-term, intermediate, and short-term indicators key to the design, implementation, and evaluation of the National Tobacco Control Program (NTCP). • To offer state-level data about middle and high school youth's tobaccorelated beliefs, attitudes, behaviors, and exposure to pro- and antitobacco influences. Topics Addressec | surveys/yts/index.h | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
|--|---|--|--|--|
| To provide state-level data on long-term, intermediate, and short-term indicators key to the design, implementation, and evaluation of the National Tobacco Control Program (NTCP). To offer state-level data about middle and high school youth's tobaccorelated beliefs, attitudes, behaviors, and exposure to pro- and antitobacco Health risk perce attitudes. Tobacco use beh initiation, currer cigar/smokeless other tobacco pr Peer product usa Quit attempts. Tobacco promot Antitobacco ads. Health care advices other tobacco promot Tobacco in the new topro- and antitobacco Secondhand smo | | <u>htm</u> | | |
| implementation, and evaluation of the National Tobacco Control Program (NTCP). To offer state-level data about middle and high school youth's tobaccorelated beliefs, attitudes, behaviors, and exposure to pro- and antitobacco cigar/smokeless other tobacco preserved. Quit attempts. Tobacco promot Antitobacco ads. Health care advices to pro- and antitobacco. | aviors (cigarette | State, territory, and district level. Youth in grades 6–12. | Middle schools, high schools, or both. Schools selected with a probability | Initiated in 1998 Frequency: Dependent on state interest. |
| Minor access to a School curriculu Smoking rules in vehicle. Experience at ho community. Use of tobacco principles. | tobacco/ and roducts use). age. ional items ce. nedia. boke. tobacco. um. n home and | Data collection: States and territories. | proportional to enrollment size. Classes randomly selected from each selected school that chose to participate. Self-administered paper and pencil survey in classroom. 52 core questions. State-added questions optional. | |

| Table 2. Registries and Vital Statistics | | | | | |
|---|---|--|--|------------------------------------|--|
| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency | |
| | Cancer Registries (NPCR) ancer/npcr/about.htm | | | | |
| To collect, manage, and analyze data about cancer cases and cancer deaths. | Incidence data on smoking-related cancers. Comprehensive, timely, and accurate data about cancer incidence, stage at diagnosis, first course of treatment, and deaths. | State level. Adults and children. Data collection: States. | In each state, medical facilities (including hospitals, physicians' offices, therapeutic radiation facilities, freestanding surgical centers, and pathology laboratories) report these data to a central cancer registry. NPCR supports central cancer registries in 45 states, the District of Columbia, Puerto Rico, and the US Pacific Island jurisdictions. | Frequency: Dependent on state. | |
| National Vital Statistic | cs System (NVSS) | | | | |
| To provide birth certificate data on Tobacco use by pregnant women. Contribution of tobacco to death. | Indicators vary by state. International Classification of Disease codes. Smoking 3 months before and during pregnancy. Tobacco use status. | State level. Women who recently gave birth. Deceased adults and children. Data collection: States, several territories, and a few large cities. | Data collected through contracts by NCHS with vital records systems operating in the various jurisdictions. May be used at the sub-state level (i.e., counties, health districts). | Frequency: Annually. | |

| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
|--|--|--|---|---|
| | ss Data and Information Se EDISQualityMeasurement/F | | | , |
| • To provide a set of standardized performance measures designed to give purchasers and consumers the information they need to compare managed health care plans. | Cessation counseling. | National level. Commercial health plan members, Medicaid recipients, and Medicare recipients. Data collection: National Committee for Quality Assurance. | Commercial health plan members, Medicaid recipients, and Medicare recipients are surveyed. | The most recent data set is 2013. Frequency: Measurement developed yearly |
| To measure performance of the health care providers who advise smokers to quit smoking. | | | | |
| Hospital Discharge Dat State health departmen | | | | |
| • To provide background information on patients and morbidity through discharge diagnoses, number of days of hospitalization, and treatment. | Health effects. Length of stay. | Hospital records. Data collection: States. | Hospital records. | • Frequency: Varies. |
| _ | edical Care Survey (NAMCS | • | | |
| To provide national data on the use of ambulatory medical care services in the United States. | Patients' symptoms. Expected sources of payment. Physicians' diagnoses. Diagnostic and screening services. Health education. Medications ordered or provided. Tobacco screening. Tobacco counseling. | National. Patient records. Nonfederal employed office-based physicians who are primarily engaged in direct patient care. Starting in 2012 some state-based estimates are available. Data collection: NCHS. | NAMCS uses a multistage probability design with samples of primary sampling units (PSU), physicians within PSUs, and patient visits within practices. Physician randomly assigned to a 1-week reporting period. Data for a systematic random sample of visits are recorded by the physician, physician's office staff, or US Census | Initiated in 1973 Frequency: Annually. |

| | Topic-opecific it | ools: Health Syster | iis and Cillical Se | |
|---|---|--|---|------------------------------|
| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
| | latory Medical Care Survey | | | |
| http://www.cdc.gov/nc | hs/ahcd/about_ahcd.htm#N | <u>AMCS</u> | ı | |
| To provide national data on the use and provision of ambulatory care services in hospital emergency and outpatient departments and in ambulatory surgery centers. | Expected sources of payment. Patients' complaints. Diagnoses. Diagnostic/screening services. Procedures. Medication therapy. Disposition. Types of providers seen. Causes of injury (emergency departments and ambulatory surgery centers only). Tobacco screening during hospital outpatient visits. Tobacco counseling during hospital | Emergency department, outpatient departments, and ambulatory surgery locations in nonfederal, short stay, and general hospitals in the United States; and free-standing ambulatory surgery centers. Patient records. Data collection: NCHS. | four-stage probability design with samples of primary sampling units (PSU), hospitals within PSUs, clinics/emergency service areas within outpatient/emergency departments, and patient visits within clinics/ emergency service areas. • Systematic random sample of patient visits during a randomly assigned 4-week reporting period. | • Frequency: Annually. |
| | outpatient visits. | | | |
| | Services Survey (N-MHSS) | | | |
| http://findtreatment.sa | mhsa.gov/MHTreatmentLoca | ator/faces/about.jspx | 1 | |
| To collect information from all public and private specialty mental health facilities that provide services. To describe characteristics and composition of the mental health treatment delivery system. | Facility type, operation, and primary treatment focus. Facility treatment characteristics such as settings of care, mental health treatment approaches, supportive services and practices, special programs, crisis intervention team availability, and seclusion and restraint practices. Facility operating characteristics such as age groups accepted, services provided in non-English languages, and smoking policy. Facility management characteristics such as computer functionality; licensure, certification, and accreditation; standard operating procedures; and sources of payment and funding. Client demographic | National and state level. Types of mental health treatment facilities surveyed in the 2010 N-MHSS include Psychiatric hospitals. Nonfederal general hospitals with a separate psychiatric unit. VA medical centers. Outpatient, day treatment, or partial hospitalization mental health facilities. Residential treatment centers for children and adults. Multi-setting multi-service, nonhospital mental health facilities. Data collection: SAMHSA. | N-MHSS is a point-prevalence survey. It provides information on the mental health treatment system and its clients as of a preselected reference date. Provides a "snapshot" of mental health treatment facilities and clients on an average day or month. Collects data about facilities, not individual clients. Three data collection modes: A secure Webbased questionnaire, a questionnaire sent by mail, and a computerassisted telephone interview. | Starting in 2014 biennially. |

| Table 3. | Topic-Specific To | ools: Health Syster | ns and Clinical Se | ettings |
|--|---|---|--|--|
| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
| National Quitline Data V Look for quitline data ur | | cd.cdc.gov/statesystem/Defau | ılt/Default.aspx | |
| To assist in evaluating quitline activities. To serve as a continuing national resource for data on the use, success, and services of state quitlines. | Number of callers to quitline. Quitting success. Services provided by their quitlines. | State level. Data collection: CDC and states. | The NQDW collects standardized state and territory quitline data using the following tools: The NQDW Quitline Services Online Survey. The NQDW Intake Questionnaire. The NQDW 7-Month Follow-Up Questionnaire. | Initiated in 2010. Frequency: Ongoing. |
| | stance Abuse Treatment Selsa.gov/dasis2/nssats.htm | rvices (N-SSATS) | | |
| To collect information from all public and private facilities that provide substance abuse treatment. To assist with assessment of services provided in state-supported and other substance abuse treatment facilities. To forecast substance abuse treatment resource requirements. | Alcohol and drug abuse treatment facilities and services. Assessment and pre-treatment services, counseling, pharmacotherapies, testing, transitional services, and ancillary services. Screening for substance abuse. Screening for mental health disorders. Screening for tobacco use. Smoking cessation counseling, including pharmacotherapies such as nicotine replacement, bupropion, and varenicline. Facility's smoking policy. | All public and private facilities in the 50 states, the District of Columbia, and other US jurisdictions that provide substance abuse treatment. National and state level. Data collection: SAMHSA. | Three data collection modes: A secure Webbased questionnaire, a questionnaire sent by mail, and a telephone interview. For the 2011 survey, the field period was March 31–October 24. N-SSATS is a point-prevalence survey. It provides information on the substance abuse treatment system and its clients as of a preselected reference date. Number of questions may vary. 41 questions in 2011. | Before 2014, annually. Starting in 2014, biennially. |

| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
|---|---|---|--|--|
| Food and Drug Administration | (FDA) | Data Collection | | Frequency |
| Compliance checks: | (I DA) | | | |
| http://www.accessdata.fda.go | v/scripts/oce/inspections/oce | insp searching.cfm | | |
| • To provide data on retailers that complied with the prohibition of the sale of tobacco products to minors. | Ability of minors to purchase tobacco products. | National and state levels. Local tobacco retailers. | Random, unannounced visits by state or local officials authorized by the FDA. Methodology may vary | May vary by state. Frequency: Ongoing. |
| | | | by state. | |
| Information Resources, Inc. (IF http://www.iriworldwide.com/ | RI), formerly SymphonylRI Grou | p, Inc. | | |
| To provide consumer, shopper, and retail market intelligence and analysis focused on the consumer packaged goods industry. | Retail tracking data, convenience store tracking data, and consumer panelbased data. Predictive analytics. | National level. Data collection: User. | Proprietary. User dependent. | User dependent |
| | Offers Infoscan tracking service and Allscan convenience store tracking. Available in 58 countries. | | | |
| Scanner Data For example: http://nielsen.com/us/en.html | | | | |
| To provide market data on tobacco sales using Universal Product Code (UPC) numbers. | Dollar sales. Unit sales. Volume sales. Sales share. Average selling price. Average promoted price. Average list price. Percentage of stores selling each product. | State or local level. | Retailers using UPC scanners. | Varies, but typically available quarterly. |
| Substance Abuse and Mental Compliance checks: ttp://www.fda.gov/downloads/ | | | | |
| To provide data on tobacco sales to minors through unannounced, annual inspections (includes location of establishments). | Ability of minors to purchase tobacco products. | State and local levels. Tobacco retailers. | Random design. Unannounced visits. Methodology may vary by state. | • Frequency: Varies. |
| This monitoring research was authorized through the Synar Legislation, which mandated the reduction of tobacco sales to minors. | | | | |
| Tax Revenue Data State departments of revenue. | | | | |
| To provide sales information on tobacco products. | Sales (number of cigarette packs, cartons, and pounds of tobacco) per capita for cigarettes and smokeless tobacco. | State level. Wholesalers and distributors. | Receipts collected monthly. Usually begins the first year a state collects tobacco excise tax. | • Frequency: Varies. |

| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
|---|---|---|---|--|
| Worksite sample survey av | g/workplace-tobacco-cessati | | Census of worksite employees. Self-administered. 13 questions. | User dependent. |
| American College Health Anttp://www.acha-ncha.org | Association (ACHA) College Car Noverview.html | mpus Tobacco Cessation ar | nd Prevention Survey | |
| To track changes in health issues and trends among college students in order to Address their health concerns. Adequately identify factors affecting academic performance. Respond to questions and concerns about the health of the nation's students. Improve the health and welfare of those students. | Students' health habits, behaviors, and perceptions in relation to Alcohol, tobacco, and other drug use. Sexual health. Weight, nutrition, and exercise. Mental health. Personal safety and violence. | College students. Data collection: User. | Randomly selected class rooms or students. Self-administered questionnaire. 66 questions. | Initiated in 2000 Frequency: Annually. |
| American Lung Associatio State Legislated Actions o http://www.lungusa2.org/ | n Tobacco Issues (SLATI) | | | |
| To provide comprehensive and up-to-date information on state tobacco control laws and policies. | Restrictions on smoking in public places and workplaces. Smoke-free laws and policies. Tobacco taxes. Tobacco control laws. Tobacco cessation and prevention program | All 50 states and the District of Columbia. Data collection: ALA, made available publicly. | • All 50 states. | Frequency: Ongoing. |

| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
|--|--|---|---|---|
| | ights (ANR) Foundation: US To /goingsmokefree.php?id=519 | | ase | |
| To provide a comprehensive collection of state and local laws. | Smoke-free laws. Restrictions on youth access to tobacco. Tobacco advertising and promotion restrictions. Tobacco excise taxes. Conditional use permits. | All 50 states, District of Columbia, and US territories. Data collection: ANR Foundation, and made available publicly. | All 50 states, District of Columbia, and US territories. Mail solicitations; monitoring news services; advocates, colleagues, and elected officials; members. | Frequency: Updated quarterly |
| California Student Tobacc http://www.cdph.ca.gov/p | o Survey (CSTS) programs/tobacco/Pages/CTCF | EvaluationResources.aspx | | |
| To survey students about health-related behaviors and attitudes. | • Large-scale, in-school student survey of tobacco use among middle- (grades 6–8) and high- school (grades 9–12) students. | California middle- and high-school students. Data collection: California Department of Public Health. | Stratification by 12 regions in California, with sample sizes that allow for the calculation of regional and some individual county estimates. Self-administered questionnaire. 99 questions. | Initiated in 2007. Frequency: Biennially. |
| | evention Education Evaluation programs/tobacco/Documents. | | 1 | |
| To assess school-based tobacco use prevention activities. | Teachers' attitudes, beliefs, and knowledge about tobacco education program implementation and prevention efforts and policies at their schools, and about their personal tobacco-related attitudes and behaviors. | 191 randomly sampled California middle schools, plus 57 high schools that participated in the 2003–2004 survey. Data collection: California Department of Public Health. | Stratification by 12 regions in California, with sample sizes that allow for the calculation of regional and some individual county estimates. Self-administered questionnaire. 57 questions. | Initiated in 1995. Frequency: Biennially. |

| Table 5. Top | oic-Specific Tools: | National, State, | and Local Policy | Tracking |
|---|--|---|---|---|
| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
| CDC School Health Profile: http://www.cdc.gov/health | s (Profiles) nyyouth/profiles/index.htm | | | |
| To provide a system of surveys assessing school health policies and practices in states, large urban school districts, territories, and tribal governments. | Monitors the status of School health education requirements and content. Physical education requirements. School health policies related to HIV infection/AIDS, tobacco-use prevention, and nutrition. Asthma management activities. Family and community involvement in school health programs. | Middle- and highschool principals and lead health education teachers. Data collection: CDC. | Random sample of secondary schools in a state, large urban school district, territory, or tribal government. Self-administered questionnaire. Principals' questionnaire: 51 questions; lead health education teachers' questionnaire: 24 questions. | Initiated in 1996. Frequency: Biennially. |
| | Smoking Policy Questionnaires /tobaccoeval/restaurantsurve | | | |
| To provide guidance and sample worksite and restaurant policy questionnaires. | Institution characteristics. Presence of and compliance with policy. Employee attitudes towards secondhand smoke. | State, regional, or community restaurants or worksites. Data collection: State, region, or community. | Either sampling or census depending on availability of resources and purpose of data collection. Telephone or mail survey. Restaurant survey: 26 questions. Worksite survey: 32 questions. | Dependent on state, region, or community needs. |

| | | | Timing ord |
|--|--|---|---|
| Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
| viously known as Omniture) | | | |
| Identify the most profitable paths through a Web site. Segment traffic to spot high-value Web visitors. Determine where visitors are navigating away from the site. Identify critical success metrics for online marketing campaigns. | Web sites. Data collection: User. | Collects data on all user YouTube video viewers. Processes information collected automatically. | User dependent. |
| | | | |
| Time of day. Amount of time listened. Specific geographical locations. Listener demographics. | Based on county-level metropolitan markets. Data collection: User. | Has random design. Uses mail diary. | Ongoing since 1950s Frequency: The biggest metropolitan markets are surveyed four times a year. Smaller markets are surveyed twice a year. |
| | | | |
| Measures collected depend on user needs. | Audiences for user's TV, radio, social, and online media. Data collection: User. | Collects data on all user media audiences. Processes information collected automatically. | User dependent. |
| | | | |
| The Robot Report provides insights into Robot and Spider behavior on user's Web site. Provides integrated e-mail tracking to track e-mail campaigns from the click-through to the checkout. Generates and exports targeted mailing lists based | User Web site. Data collection: User. | Collects data on all user Web site visitors. Information is collected automatically. | User dependent. |
| | Viously known as Omniture) Identify the most profitable paths through a Web site. Segment traffic to spot high-value Web visitors. Determine where visitors are navigating away from the site. Identify critical success metrics for online marketing campaigns. Time of day. Amount of time listened. Specific geographical locations. Listener demographics. Measures collected depend on user needs. The Robot Report provides insights into Robot and Spider behavior on user's Web site. Provides integrated e-mail tracking to track e-mail campaigns from the click-through to the checkout. | Identify the most profitable paths through a Web site. Segment traffic to spot high-value Web visitors. Determine where visitors are navigating away from the site. Identify critical success metrics for online marketing campaigns. Time of day. Amount of time listened. Specific geographical locations. Listener demographics. Measures collected depend on user needs. Measures collected depend on user needs. Measures collected depend on user needs. The Robot Report provides insights into Robot and Spider behavior on user's Web site. Provides integrated e-mail tracking to track e-mail campaigns from the click-through to the checkout. Generates and exports targeted mailing lists based on label criteria, then Web sites. Data collection: User. User Web site. Data collection: User. | Measures collected depend on user needs. |

| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
|---|------------------|--|---|----------------------|
| DataSift | | <u> </u> | | <u> </u> |
| To help organizations improve their understanding and use of social media. Focused on producing state-of-the-art data-filtering technology and driving innovation in big data. | User dependent. | Data collection: User. | Filters, sorts, and reports data from Facebook, Google+ Business, Twitter, YouTube, Instagram, bitly, NewsCred, Amazon, reddit, Flickr, Wikipedia, DailyMotion, topix, IMDb, Japanese textboard 2channel, videos, and a wide variety of blogs and message boards. Provides trends from 2+ years of Twitter history, gender, Klout score, sentiment analysis, language detection, salience topics, entity analysis, and demographics. | User dependent. |
| Facebook Insights | | | | |
| • To provide Facebook platform developers and Facebook page owners with metrics (user growth and demographics, consumption of content, and creation of content) about their content. | User dependent. | User Facebook page viewers. Data collection: User. | Collects data on all visitors to user Facebook page. Processes information collected automatically from Web site. | User dependent. |
| Gnip | | | | |
| To provide access to raw social media data using both firehose and filtered streams from dozens of sources. | User dependent. | Data collection: User. | Collects data on keyword, username, and firehose streams (when available) from the following sources: bitly, DailyMotion, Delicious, Disqus, Facebook, Flickr, Google+, identi.ca, Instagram, IntenseDebate, Metacafe, NewsGator, Panoramio, Photobucket, Plurk, reddit, Stack Overflow, StockTwits, Tumblr, Twitter, vimeo, WordPress, and YouTube. | User dependent. |

| Purpose | Topics Addressed | Sampling Frame and | Methodology | Timing and |
|---|--|--|---|--|
| ruipose | Topics Addressed | Data Collection | Methodology | Frequency |
| Google Analytics | | | | |
| To collect data on the behavior of the visitors to a Web site. | Number of Web site visitors. Number of repeat visitors to a Web site. Referring traffic sources. Pages viewed. Geographic location of visitors. Option to customize reporting. | User Web site. Data collection: User. | Collects data on all visitors to user's Web site. Processes information collected automatically from Web site. | User dependent. |
| HootSuite | 1 0 | | | |
| To provide social media management using analytic tools and customizable reports. To communicate the volume, visibility, and perception of social initiatives. | User dependent. | Data collection: User. | Collects comprehensive data using Facebook insights, Google analytics, Twitter profile stats, Owly click stats, Google+ pages analytics, and organization analytics. | User dependent. |
| Legacy Media Tracking http://staging.legacyfor | 1 | edia Tracking Online (LM | • | |
| • To guide the American Legacy Foundation campaign's evolution and provide important information about the media environment in which truth* and other Legacy initiatives operate. | Levels of youth awareness of other antitobacco ads, campaigns, and organizations. Awareness of pro-tobacco advertising and other protobacco influences. General levels of exposure to broadcast media. Youth's tobacco-related beliefs, attitudes, and behaviors. | Nationally representative samples of youth aged 12–17 and young adults aged 18–24. Data collection: American Legacy Foundation. | Sampling varies by survey execution. For the 9th data collection, about 50% of respondents were drawn from listed samples while the remaining 50% were drawn from a random-digit-dialed telephone sample. Starting in 2005, an online survey was used. 239 questions. | Fall 1999 and select dates through 2004 Frequency: Biennually since 2005. |
| LexisNexis | | | | |
| To track media coverage on brand, issues, news stories, politics, and political candidates. | • User centered. | Available media. Track media coverage on brand, issues, news stories, politics, and political candidates. Analyze media datasets with easy- to-read graphs and charts based on criteria important to user. Data collection: | All user media audiences. Process information collected automatically. | User dependent. |

| _ | | Sampling Frame and | | Timing and |
|--|---|--|--|--|
| Purpose | Topics Addressed | Data Collection | Methodology | Frequency |
| Nielsen | | | | |
| To collect and report on purchasing and media use information. To study consumers in more than 100 countries and provide trends and habits worldwide. | Purchasing and media exposure data. | Panelists selected according to company standards. Data collection: User. | Subjects for specific inquiries are dependent on user needs. Survey delivery generally through online media. Number of questions dependent on panel. | Doing various types of market research since 1923. |
| Pinterest | | | | |
| To provide data on what people are pinning from user's Web site and how many people are pinning, seeing, and clicking on it. | Number of people pinning from user Web site. Number of people seeing user pins. Number of people clicking on user content. Specific timeframe. | User Web site. Data collection: User. | Collects data on all visitors to user Web site. Processes information collected automatically from Web site. | User dependent. |
| Radian6 | | | | <u> </u> |
| To deploy and monitor content on social networks, Web sites, and mobile devices. | Measures everything from campaigns to conversions. Gains insight into all social ad campaign metrics. | User social networks, Web sites, and mobile devices. Data collection: User. | Collects data on all visitors to user social networks, Web sites, and mobile devices. Processes information collected automatically from Web site. | User dependent. |
| Sysomos | | | | |
| To provide social media monitoring and analytics. | Measures collected are user dependent. | Consumers of user's social media. Data collection: User. | Collects data on all user social media users. Processes information collected automatically. | User dependent. |
| Topsy | | | | |
| To provide instant social insight. To count, index, and enrich Twitter and social Web data in real time. | User dependent. | Data collection: User. | With an index of the public social web, instantly analyzes any topic, term, hashtag, or @-name in real time or across years of conversations. Provides social media reach, sentiment scores, and geo-locations. | User dependent. |

| | Table 6. Topic S | pecific Tools: | Media Tracking | |
|--|--|--|--|----------------------|
| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
| Webalyzer | | | | |
| To produce software that generates a Web log analysis report. | Analyzes Web site traffic, including hits, visits, visitor, users' IP addresses, URL paths, processing times, user agents, and referrers, and groups them to produce HTML reports. | User Web site. Data collection: User. | Collects data on all user Web site visitors. Collects information automatically. | User dependent. |
| YouTube Analytics | | | | |
| To produce a self- service tool that provides detailed statistics on videos and viewers. | Viewership. Subscribers. Watch-time or time watched. Audience retention. Traffic sources. Annotations. Community actions. Demographics and geographics. | User YouTube video viewers. Data collection: User. | Collects data on all visitors to user YouTube videos. Processes information collected automatically from Web site. | User dependent. |

| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency |
|---|---|--|---|---|
| New Product Watch, funded by Tobacco Surveilla Site is restricted to participa | ance, Epidemiology, and Evaluants in New Product Watch. | tion Network of the Nati | onal Cancer Institute (NCI) | |
| • To monitor the availability of new oral tobacco products, and the marketing strategies being used by the tobacco industry to advertise, promote, and market these new products. | The availability of new oral tobacco products. The marketing strategies used by the tobacco industry to advertise, promote, and market new products. | National sample. Data collection: NCI and made available publically. | Convenience sample selected by volunteer participants. Web-based network. | Initiated in 2004. Frequency: Ongoing. |
| | e California Department of Pub co Control Program for further in | | 500. | |
| To provide data on events sponsored by tobacco companies. | Tobacco company sponsorship. | California state sample. Data collection: California Department of Public Health. | Data collection instruments and protocols are available. | No longer active. |
| Retail Advertising Tobacco S http://www.health.ny.gov/p | Survey (RATS) revention/tobacco_control/repo | orts brochures fact-she | eets.htm | |
| • To describe the extent of tobacco advertising and promotion activities in New York state. | Level of tobacco advertising and promotional activities in licensed tobacco retail stores. | New York state- licensed tobacco retail stores. Data collection: New York state. | Stratified random sample. On-site audit. Trained data collectors record the number and placement of tobacco advertising and price promotions. | Initiated in 2004. Frequency: Annually. |
| University of California at S http://www.library.ucsf.edu | an Francisco (UCSF) Tobacco C /tobacco | ontrol Archives | | |
| To provide an archive of historical tobacco documents. | Collections, including Legacy Tobacco Documents Library, paper and media collections, tobacco litigation documents. | Data collection: UCSF Library and Center for Knowledge Management. | Not applicable. | Not applicable |
| | Resources, including research into tobacco industry activity, tobacco documents bibliography, and history of smoking bibliography. | | | |

| Table 8. Global Surveys and Tools | | | | | |
|---|---|--|--|--|--|
| Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency | | |
| y (GATS) o/global/index.htm | | | | | |
| Tobacco use (smoking and smokeless). Cessation. Secondhand smoke. Economics. Media. Knowledge, attitudes, and perceptions. | Subjects: Adults aged 15 years or older. Nationally representative household survey. Conducted in 33 countries. Data collection: Country. | Multistage, geographically clustered sample. One individual aged 15 years or older randomly selected from each participating household. Survey information collected electronically using handheld devices in a face-to-face interview. 88 core questions. | Initiated in 2007. Frequency: Countries are encouraged to repeat the survey every 4–5 years. | | |
| rvey (GSPS) o/global/index.htm | | | | | |
| Tobacco use. Knowledge and attitudes. School policy and curriculum. School curriculum. | Subjects: All school personnel in schools selected for Global Youth Tobacco Survey. Conducted in 103 countries. Data collection: Country. | All schools selected for Global Youth Tobacco Survey; participation is voluntary. All school personnel in selected schools are eligible to participate. Confidential, selfadministered questionnaire. 45 core questions. | Initiated in 2000 Implemented from 2000–2011 (discontinued). Frequency: Countries are encouraged to repeat the survey every 4–5 years. | | |
| tudent Survey (GHPSS) | | ie core queensiis. | | | |
| Tobacco use. Exposure to secondhand smoke. Attitudes. Behavior/cessation. Curriculum/training. | Subjects: Third-year students pursuing advanced degrees in dentistry, medicine, nursing, or pharmacy. Conducted in 94 countries. Data collection: Country. | Multistage sample design: Schools selected with probability proportional to enrollment size. Classrooms chosen randomly within selected schools. Or, census of schools and students in countries with few health professional schools. All students in selected classes eligible to participate. Confidential, self- administered | Initiated in 2005. Implemented from 2005–2011 (discontinued). Frequency: Countries are encouraged to repeat the survey every 4–5 years. | | |
| | rvey (GSPS) b/global/index.htm Tobacco use (smoking and smokeless). Cessation. Secondhand smoke. Economics. Media. Knowledge, attitudes, and perceptions. rvey (GSPS) b/global/index.htm Tobacco use. Knowledge and attitudes. School policy and curriculum. School curriculum. Tobacco use. Attitudes. Exposure to secondhand smoke. Attitudes. Behavior/cessation. | Topics Addressed y (GATS) p/global/index.htm Tobacco use (smoking and smokeless). Cessation. Secondhand smoke. Economics. Media. Knowledge, attitudes, and perceptions. Tobacco use. Knowledge and attitudes. School policy and curriculum. School curriculum. Conducted in 103 countries. Data collection: Country. Subjects: All school personnel in schools selected for Global Youth Tobacco Survey. Conducted in 103 countries. Data collection: Country. Tudent Survey (GHPSS) p/global/index.htm Tobacco use. Exposure to secondhand smoke. Attitudes. Behavior/cessation. Curriculum/training. Conducted in 94 countries. Data collection: Conducted in 94 countries. Data collection: | Topics Addressed Sampling Frame and Data Collection (GATS) O/global/Index.htm - Tobacco use (smoking and smokeless) Cessation Secondhand smoke Economics Media Knowledge, attitudes, and perceptions. - Tobacco use Knowledge and attitudes Knowledge and attitudes School policy and curriculum School curriculum School curriculum School curriculum Tobacco use Conducted in 103 countries Data collection: Country All schools selected for Global Youth Tobacco Survey All school personnel in selected schools are eligible to participate Confidential, self-administered questionnaire 45 core questions. - Multistage, geographically clustered sample One individual aged 15 years or older randomly selected from each participating household Survey information collected electronically using handheld devices in a face-to-face interview 88 core questions. - All schools selected for Global Youth Tobacco Survey All school personnel in selected schools are eligible to participate Confidential, self-administered questionnaire 45 core questions. - Curriculum/training Subjects: All school selected for Global Youth Tobacco Survey Confidential, self-administered questionnaire 45 core questions. - Multistage sample design: Schools selected with probability proportional to enrollment size Classrooms chosen randomly within selected classes eligible to participate Confidential, self-administered classes eligible to participate Confidential, self-administered questionnaire Candouted in 94 countries Data collection: Country Maltistage sample design: Schools selected with probability proportional to enrollment size Classrooms chosen randomly within selected classes eligible to participate Confidential, self-administered classes eligible to participate Confidential, | | |

| Table 8. Global Surveys and Tools | | | | | | |
|--|---|--|--|--|--|--|
| Purpose | Topics Addressed | Sampling Frame and Data Collection | Methodology | Timing and Frequency | | |
| Global School-Based Student Health Survey (GSHS) http://www.cdc.gov/gshs/ | | | | | | |
| To help countries develop priorities, establish programs, and advocate for resources to aid school health and youth health programs and policies. To allow for comparisons across countries regarding the prevalence of health behaviors and protective factors. To establish trends in the prevalence of health behaviors and protective factors for use in evaluation of school health and youth health promotion. | Alcohol use. Dietary behaviors. Drug use. Hygiene. Mental health. Physical activity. Protective factors. Sexual behaviors. Tobacco use. Violence and unintentional injury. | Subjects: Students aged 13–17 years. Conducted in 86 countries. Data collection: Country. | Multistage sample design: Schools selected with probability proportional to enrollment size. Classrooms chosen randomly within selected schools. All students in selected classes eligible for participation. Confidential, self- administered questionnaire. 58 core questions. | Initiated in 2003. Frequency: Countries are encouraged to repeat the survey every 4–5 years. | | |
| Global Youth Tobacco Survey (GYTS) http://www.cdc.gov/tobacco/global/index.htm | | | | | | |
| To systematically monitor youth tobacco use and track key tobacco control indicators. To enhance countries' capacities to design, implement, and evaluate tobacco control interventions. To generate comparable data within and across countries. To track WHO Framework Convention on Tobacco Control and WHO MPOWER strategies. | Tobacco use. Cessation. Secondhand smoke. Economics. Media. Knowledge, attitudes, and perceptions. | Subjects: Students aged 13–15 years. Nationally representative school-based survey. Conducted in over 180 countries. 76 countries implementing revised GYTS protocol in 2012–2014. Data collection: Country. | Multistage sample design: Schools selected with probability proportional to enrollment size. Classrooms chosen randomly within selected schools. All students in selected classes eligible for participation. Confidential, self- administered questionnaire. 43 core questions. | Initiated in 1999. Frequency: Countries are encouraged to repeat the survey every 4–5 years. | | |

Abbreviations

| ACHA | American College Health Association |
|------------|---|
| ALATS | American Indian Adult Tobacco Survey |
| AN ATS | Alaska Native Adult Tobacco Survey |
| ANRA | American Nonsmokers' Rights Foundation |
| ATS | Adult Tobacco Survey |
| BRFSS | Behavioral Risk Factor Surveillance System |
| CDC | Centers for Disease Control and Prevention |
| CSTS | California Student Tobacco Survey |
| FDA | Food and Drug Administration |
| GATS | Global Adult Tobacco Survey |
| GHPSS | Global Health Professions Student Survey |
| GSHS | Global School-Based Student Health Survey |
| GSPS | Global School Personnel Survey |
| GYTS | Global Youth Tobacco Survey |
| H/L ATS | Hispanic/Latino Adult Tobacco Survey Guide |
| HEDIS | Healthcare Effectiveness Data and Information Set |
| 11-10 | Legacy Media Tracking Online |
| LMT0 | |
| LMTS | Legacy Media Tracking Survey |
| MCH SAMMEC | Maternal and Child Health Smoking-Attributable Morbidity, Mortality, and Economic Costs |
| MTF | Monitoring the Future |
| NAMCS | National Ambulatory Medical Care Survey |
| NATS | National Adult Tobacco Survey |
| NCHS | National Center for Health Statistics |
| NCI | National Cancer Institute |
| NHAMCS | National Hospital Ambulatory Medical Care Survey |
| NHANES | National Health and Nutrition Examination Survey |
| NHIS | National Health Interview Survey |
| NHSDA | National Household Survey on Drug Abuse |
| N-SSATS | National Survey of Substance Abuse Treatment Services |
| NPCR | National Program of Cancer Registries |
| NQDW | National Quitline Data Warehouse |
| NSDUH | National Survey on Drug Use and Health |
| N-MHSS | National Mental Health Services Survey |
| NTCP | National Tobacco Control Program |
| NVSS | National Vital Statistics System |
| NYTS | National Youth Tobacco Survey |
| PRAMS | Pregnancy Risk Assessment Monitoring System |
| Profiles | CDC School Health Profiles |
| RATS | Retail Advertising Tobacco Survey |
| SAM | Smoking-Attributable Mortality |
| SAMHSA | Substance Abuse and Mental Health Services Administration |
| SAMMEC | Smoking-Attributable Morbidity, Mortality, and Economic Costs |
| SHPPS | School Health Policies and Practices Study |
| SLATI | State Legislated Actions on Tobacco Issues |
| STATE | State Tobacco Activities Tracking and Evaluation (System) |
| TSEEN | Tobacco Surveillance, Epidemiology, and Evaluation Network |
| TUS-CPS | Tobacco Use Supplement-Current Population Survey |
| UCSF | University of California at San Francisco |
| YPLL | Years of potential life lost |
| YRBSS | Youth Risk Behavior Surveillance System |
| YTS | Youth Tobacco Survey |

