

Appendix B

Form Approved

OMB #0920-0

Expiration Date: _____

OCCUPATIONAL SAFETY AND HEALTH INFORMATION NEEDS AND USES BY TRADE ASSOCIATIONS AND LABOR UNIONS WITHIN EIGHT INDUSTRIAL SECTORS

Interviewer Name:

Computer Log Number:

Date:

Name of Association or Union:

Address:

Phone No.:

Fax No.:

Guidelines for Interviewers

A. First contact with Association or Union:

Hello, Is this _____ (*Name of association or union*)? My name is _____ (*Name of Interviewer*). I work for the Oak Ridge Institute for Science and Education (ORISE). We are working with the National Institute for Occupational Safety and Health or NIOSH (as it is commonly known) which is part of the Centers for Disease Control and Prevention. We are interested in obtaining information about the workplace (worker) safety and health resources you use in your association/union and/or disseminate to your **members**.

- (1) Could I speak with _____ (contact name from Association Unlimited Database)?
- (1a) No _____ (*Interviewer: If no one in this position go to (2)*)
 - (1b) Person no longer the contact _____
 - (1c) New contact name _____ (*Interviewer: If available go to Section B*)
 - (1d) If not available get date/time to call back _____
(*Interviewer: Say thank you and I will call back at the suggested time and date*)
 - (1e) Yes ____ (*Interviewer: If person available go to Section B*)
 - (1f) If person not available get the Name _____ and
 - (1g) get date/time to return call _____
(*Interviewer: Say thank you and I will call back at the suggested time and date*)

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(2) I am trying to reach the person who is responsible for handling the workplace (worker) safety and health issues for the **members** of your organization. Could I speak to the safety manager, or executive director?

(2a) No _____ (*Interviewer: Go to (3)*)

(2b) Yes _____ (*Interviewer: If person available go to Section B*)

(2c) If person not available get the name _____ and

(2d) date/time to return call _____

(Interviewer: Say thank you and I will call back at the suggested time and date)

(3) Is there anyone you could suggest I speak to who deals with the workplace (worker) safety and health issues of your **members**? (Suggest- the regulatory person, membership person, or marketing person or someone else)

(3a) No _____ (*Interviewer: If the person still says there is no one to speak to thank person and say good-bye. Secretaries are not eligible to answer the survey.*)

Non-Response Form

1. Before we say good-bye, may I ask you just two questions so that we can compare associations (unions) that do and do not take part in the survey?

1) No _____ (*Interviewer: Thank person and say good-bye*)

(2) Yes _____ (*Interviewer: Go to question 2*)

2. Does your association (union) distribute workplace (worker) safety and health information to your members?

(1) No _____ (*Interviewer:*

(2)

Go to question 3)

Yes _____ (*Interviewer: Go to question 3*)

Interviewer: If person available go to Section B)

available get name _____

back _____

and I will call back at the suggested time and date)

interviewed), my name is _____ (Name of

Institute for Science and Education (ORISE). We are

Occupational Safety and Health or NIOSH (as it is

Centers for Disease Control and Prevention. I am calling

you about the workplace (worker) safety and health issues of your

organization. I am calling you about the workplace (worker) safety and health resources

you use or send to members of your association (union). Participation in the survey is voluntary and you are free to skip any questions or stop participating at any time. Would you have a few minutes to answer some questions for me or may I call back later?

(1) No _____ (*Interviewer: Ask if you can call back, if refused ask questions in Blue Box in Appendix B1 below*)

(2) Call back _____ (*Interviewer: Get date, time and phone number*) _____

Thank you. I will call you back at _____ (time and date)

(Interviewer: Say thank you and I will call back at the suggested time and date)

(3) Yes _____

Beginning of Survey Questions

General Information

Interviewer: First, I would like to thank you for taking your valuable time to participate in this NIOSH survey. To start our interview I'd like to ask you about your job at your association (union)?

4. What is your job title? _____ (Interviewer: Go to question 5)

5. How many years have you worked in your current position? _____
(Interviewer: Go to question 6a)

6a. Are workplace (worker) safety and health issues part of your job responsibilities?

(1) No _____ (Interviewer: Go to question 7)

(2) Yes _____ (Interviewer: Go to question 6b)

6b. In an average week, what percentage of your time is spent on workplace (worker) safety and health issues?

(1) < 10 % of the time _____

(2) 10% - 50% of the time _____

(3) >50% of the time _____

(Interviewer: Go to question 7)

Interviewer: Next let's talk about your association (union).

7. How many members belong to your association (union)? _____ (interviewer: Go to question 8)

8. On a scale of 1-5, with 5 being very important and 1 being not at all important, how important are workplace (worker) safety and health issues to your association (union)?

1 2 3 4 5

(Interviewer: Go to question 9)

9. In your opinion, what are the 3 most important workplace (worker) safety and health issues for your members?

(1) _____

(2) _____

(3) _____

(Interviewer: Go to question 10a)

Communication

Interviewer: Now, I would like to ask about the communication materials your association (union) provides to its members.

10a. Does your association (union) have a website?

(1) No ____ (*Interviewer: Go to question 11*)

(2) Yes ____ (*Interviewer: Go to part 2a below*)

(2a) What is the address of your Website _____
(Interviewer: Go to question 10b)

(3) Don't Know ____ (*Interviewer: Go to question 11*)

10b. Does your website include any workplace (worker) safety and health information?

(1) No ____ (*Interviewer: Go to question 11*)

(2) Yes ____ (*Interviewer: Go to part 10c*)

(3) Don't Know ____ (*Interviewer: Go to question 11*)

10c. Does your website include any workplace (worker) safety and health information in languages other than English?

(1) No ____ (*Interviewer: Go to question 11*)

(2) Yes ____ (*Interviewer: Go to part 2a below*)

(2a) **If yes, please specify language(s)** _____

(Interviewer: Go to 11)

(3) Don't Know ____ (*Interviewer: Go to question 11*)

Interviewer: For the next set of questions, I am going to ask if you distribute information to your members in the following ways and then I will ask how frequently workplace (worker) safety and health information is included in the communication.

11. Do you provide your members any of the following forms of communication?

1a. Email Notices: No ____ Don't Know ____ Yes ____

1b. If yes, how often does your association (union) include workplace (worker) safety and health information?

Never ____ Sometimes ____ Often ____

2a. Magazine: No ____ Don't Know ____ Yes ____

2b. If yes, how often does your association (union) include workplace (worker) safety and health information?

Never ____ Sometimes ____ Often ____

3a Newsletter: No ____ Don't Know ____ Yes ____

3b. If yes, how often does your association (union) include workplace (worker) safety and health information?

Never ____ Sometimes ____ Often ____

4a Technical Journal: No ____ Don't Know ____ Yes ____

4b. If yes, how often does your association (union) include workplace (worker) safety and health information?

Never ____ Sometimes ____ Often ____

5a Other: No ____ Don't Know ____ Yes ____

5b. If yes, please specify _____

(Interviewer: If yes to part 2a, 3a, 4a, or 5a of question 11, go to question 12; otherwise go to question 13a)

12. Would you be willing to send us a recent copy of your technical journal, magazine or newsletter if we send you a self-addressed stamped envelope? (NIOSH will supply envelope.)

(1) No ____ *(Interviewer: Go to question 13a)*

(2) Yes ____ *(Interviewer: Go to part 2a)*

(2a) Address to send self-addressed stamped envelope

Name _____

Street _____

City _____

State (Drop down) _____ Zip _____

(Interviewer: Go to question 13a)

13a. Does your association (union) provide any workplace (worker) safety and health training courses?

(1) No ____ *(Interviewer: Go to question 14a)*

(2) Yes ____ *(Interviewer: Go to question 13b)*

(3) Don't Know ____ *(Interviewer: Go to question 14a)*

13b. Are any of the workplace (worker) safety and health training courses provided in languages other than English?

(1) No ____ *(Interviewer: Go to question 13c)*

(2) Yes ____ *(Interviewer: Go to part 2a)*

(2a) **If yes, please specify language(s) used for training courses**

_____ *(Interviewer: Go to question 13c)*

(3) Don't Know ____ *(Interviewer: Go to question 13c)*

13c. Which workplace (worker) safety and health training courses does your association (union) provide?

Topic	Training Course		
	Yes	No	Don't Know
(1) Electrical safety	_____	_____	_____
(2) Emergency preparedness	_____	_____	_____
(3) Equipment safety	_____	_____	_____
(4) Ergonomics	_____	_____	_____
(5) Exposure to hazardous substances	_____	_____	_____
(6) Explosives	_____	_____	_____
(7) Hearing loss/noise	_____	_____	_____
(8) Job stress management	_____	_____	_____
(9) Lifting safety	_____	_____	_____
(10) Musculoskeletal disorders	_____	_____	_____
(11) Occupational diseases (Asthma, Latex allergy, etc)	_____	_____	_____
(12) OSHA regulations	_____	_____	_____
(13) Personal protective equipment	_____	_____	_____
(14) Respirators	_____	_____	_____
(15) Slips, trips and falls	_____	_____	_____
(16) Health and safety programs	_____	_____	_____
(17) Special worker populations'	_____	_____	_____
(18) Violence in the workplace	_____	_____	_____
(19) Other, please specify below _____	_____	_____	_____
(20) Other, please specify below _____	_____	_____	_____

(Interviewer: Go to question 14a)

14a. Not including materials available through a formal training course, does your association (union) provide any other workplace (worker) safety and health information or training materials?

- (1) No _____ *(Interviewer: Go to question 15a)*
- (2) Yes _____ *(Interviewer: Go to question 14b)*
- (3) Don't Know _____ *(Interviewer: Go to question 15a)*

14b. Is any of this workplace (worker) safety and health information provided in languages other than English?

- (1) No _____ *(Interviewer: Go to question 14c)*
- (2) Yes _____ *(Interviewer: Go to question 2a)*

(2a) **If yes, please specify language used for training materials**

_____ *(Go to question 14c)*

- (3) Don't Know _____ *(Interviewer: Go to question 14c)*

14c. Are any of the following types of workplace (worker) safety and health materials offered to your members? **(Interviewer: For each resource listed below record one answer from the three choices provided.)**

Resources	No	Yes	Don't Know
(1) Brochures	_____	_____	_____
(2) Fact sheets	_____	_____	_____
(3) Safety manuals	_____	_____	_____
(4) Tool box talks	_____	_____	_____
(5) Videos	_____	_____	_____
(6) Other	_____	_____	_____

(6a) If yes, please specify _____

(Interviewer: Go to question 15a)

15a. Does your association (union) sponsor a conference(s)?

- (1) No _____ **(Interviewer: Go to question 16)**
- (2) Yes _____ **(Interviewer: Go to question 15b)**
- (3) Don't Know _____ **(Interviewer: Go to question 16)**

15b. Are workplace (worker) safety and health TRAINING COURSES provided at your conference(s)?

- (1) No _____
- (2) Yes _____
- (3) Don't Know _____

(Interviewer: Go to question 15c)

15c. Do the sessions at your conference(s) ever include any workplace (worker) safety and health presentations?

- (1) No _____
- (2) Yes _____
- (3) Don't Know _____

(Interviewer: Go to question 16)

16. When you have needed workplace (worker) safety and health information in the past, which of the following sources have you used? **(Interviewer: For each source listed below record one answer from the three choices provided.)**

Know	Yes	NO	Don't
Source	Source	Source	Source
(1a) Commercial publication	_____	_____	_____
(1b) Please specify name _____			
(2a) Government agency	_____	_____	_____

- (2b) Please specify name _____
- (3a) Industrial hygiene association _____
- (3b) Please specify name _____
- (4a) Insurance or loss control company _____
- (4b) Please specify name _____
- (5a) (Another) Professional association _____
(Another: If association being interviewed is a professional association)
- (5b) Please specify name _____
- (6a) Public health agency _____
- (6b) Please specify name _____
- (7a) (Another) Business association _____
(Another: If a business association is being interviewed)
- (7b) Please specify name _____
- (8a) (Another) Labor Union _____
(Another: If a union is being interviewed)
- (8b) Please specify name _____
- (9a) University or other academic institution _____
- (9b) Please specify name _____
- (10a) Other sources that we have not mentioned? _____
- (10b) Please specify name _____
(Interviewer: Go to question 17)

17. Does your association (union) have any unmet needs in the area of workplace (worker) safety and health?
- (1) No _____ *(Interviewer: Go to question 18a)*
- (2) Yes _____ *(Interviewer: Go to part 2a)*
- (2a) What are the unmet needs? _____

(Interviewer: Go to question 18a)
- (3) Don't Know _____ *(Interviewer: Go to question 18)*

Knowledge of the National Institute for Occupational Safety and Health (NIOSH)

Interviewer: In this last section, I'd like to ask you a few questions about the National Institute for Occupational Safety and Health or NIOSH.

18. Prior to this survey had you ever heard of the National Institute for Occupational Safety and Health or NIOSH as it is also known?
- (1) No _____ *(Interviewer: Go to question 25a)*
- (2) Yes _____ *(Interviewer: Go to question 19)*

19. I am going to read you a list of statements about NIOSH. Please tell me if you agree or disagree with the following statements.

	Agree	Disagree	Don't Know
19a. NIOSH is an institute that makes regulations	_____	_____	_____
19b. NIOSH is an institute that makes recommendations	_____	_____	_____
19c. NIOSH is part of the Occupational Safety and Health Administration (OSHA)	_____	_____	_____
19d. NIOSH is a research institute <i>(Interviewer: Go to question 20)</i>	_____	_____	_____

20. Please tell me how much you agree or disagree with the following statements? *(Interviewer: For each statement listed below record one answer from the five choices provided.)*

Agree	Statements	Strongly Agree	Strongly Agree nor Disagree	Disagree	Neither Disagree
	20a. NIOSH is a credible source for obtaining workplace safety and health information.	_____	_____	_____	_____
	20b. NIOSH is an important resource for the workplace safety and health community.	_____	_____	_____	_____

(Interviewer: Go to question 21a)

21a Have you ever used the NIOSH Website? (www.cdc.gov/niosh)

- (1) No _____ *(Interviewer: Go to question 21a)*
- (2) Yes _____ *(Interviewer: Go to question 20b)*
- (3) Don't Know _____ *(Interviewer: Go to question 21a)*

21b. Please indicate how strongly you agree or disagree with each of the following statements about the NIOSH Website? *(Interviewer: For each statement listed below record one answer from the five choices provided.)*

Statements	Strongly Agree	Agree	Neither Agree nor Disagree	Strongly Disagree	Disagree
The NIOSH Website has (is):					
(1) easy to read information	_____	_____	_____	_____	_____
(2) high-quality information	_____	_____	_____	_____	_____
(3) out-of-date information	_____	_____	_____	_____	_____
(4) difficult to navigate	_____	_____	_____	_____	_____

(5) a good OS&H resource _____

(Interviewer: Go to question 22a)

22a. Have you ever used or referred to a NIOSH publication?

- (1) No _____ *(Interviewer: Go to Question 23)*
- (2) Yes _____ *(Interviewer: Go to question 22b)*
- (3) Don't Know _____ *(Interviewer: Go to question 23)*

22b. Please indicate how strongly you agree or disagree with each of the following statements about NIOSH publications. *(Interviewer: For each statement listed below record one answer from the five choices provided.)*

Statements	Strongly Agree	Agree	Neither Agree nor Disagree	Strongly Disagree	Disagree
NIOSH publications:					
(1) are clearly written	_____	_____	_____	_____	_____
(2) are too technical	_____	_____	_____	_____	_____
(3) are readily available	_____	_____	_____	_____	_____
(4) are impartial	_____	_____	_____	_____	_____
(5) provide impractical recommendations	_____	_____	_____	_____	_____

(Interviewer: Go to question 23)

23. Have you ever called the NIOSH 800 Number? (1-800-356-4674)

- (1) No _____
- (2) Yes _____
- (3) Don't Know _____

(Interviewer: Go to question 24)

24. Have you ever used a NIOSH multimedia product (CD-ROM, DVD, Video, etc.)?

- (1) No _____ *(Interviewer: Go to question 25a)*
- (2) Yes _____ *(Interviewer: Go to part 2a below)*

(2a) Please specify which multimedia product(s) you have used:

(Interviewer: Go to question 25a)

- (3) Don't Know _____ *(Interviewer: Go to question 25a)*

25a. Would your association (union) be interested in receiving a NIOSH article about workplace (worker) safety and health that you could distribute to your members?

- (1) No _____ *(Interviewer: Go to question 26a)*

(2) Yes ____ (Interviewer: Go to question 25b)

(3) Don't Know ____ (Interviewer: Go to question 26a)

25b. Would your association (union) like to receive the article as a paper copy or in an electronic format or both?

(1) Print ____ (Interviewer: If participant provided address in question 12, do not ask again.)

Address: _____

(2) Electronic ____

Email address _____

(3) Both ____

(Interviewer: Go to question 25c)

25c. How would your organization distribute this article to your members?

(Interviewer: For each of the communication forms listed below record one answer from the three choices provided.)

Communication Forms	No	Yes	Don't Know
(1) Conference	_____	_____	_____
(2) Email	_____	_____	_____
(3) Magazine	_____	_____	_____
(4) Newsletter	_____	_____	_____
(5) Technical journal	_____	_____	_____
(6) Website	_____	_____	_____
(7) Other	_____	_____	_____

(7a) Please specify _____

(Interviewer: Go to question 26a)

26a. Would your association (union) be interested in having NIOSH contact your organization in the future about partnering on a workplace (worker) safety and health issue? (Interviewer: If asked "what do I have to do" answer "the level of involvement is your own choice".)

(1) No ____ (Interviewer: Go to question 27)

(2) Yes ____ (Interviewer: Go to question 26b)

(3) Don't Know ____ (Interviewer: Go to question 27)

26b. If you are interested in partnering with NIOSH, is there a **specific** workplace safety and health issue of interest to your association? (This may be different from the answers provided in question 10.)

(Interviewer: Go to question 27)

27. Is there anything that we have not discussed about workplace (worker) safety and health relevant to your association (union) that you would like to mention?

(Interviewer: Go to Close and Thank You Section)

Close and Thank You Section:

Interviewer: We would like to thank you for participating in this survey. We very much appreciate the time you have given us. The information you have provided is very important to the successful outcome of this study.

If you have any questions about this survey please contact:

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