# Gluten-Free Labeling of Food Products Focus Groups Participant Screener 

## Recruiting Goals

- Four focus groups, two groups in each location: Washington DC and North Carolina.
- Ages 18 and over, with a range of ages in each group.
- Most participants will be individuals a) with medically diagnosed (self-report) celiac disease whose diet includes packaged, processed food products and who follow a gluten-free diet or b) who either regularly purchase groceries or prepare foods for someone with medically diagnosed (self-report) celiac disease whose diet includes packaged food products and follows a gluten-free diet.
- Some participants (up to 3 per group) may have medically diagnosed (self-report) gluten intolerance whose diet includes packaged, processed food products and who follow a gluten-free diet or be adult consumers who purchases groceries or prepares foods for someone who has a gluten intolerance and whose diet includes packaged, processed food products and who follow a gluten-free diet.
- The groups will be segmented by level of education.
- The groups will have a mix of races and ethnicities. Please note that Asian and Caribbean Black individuals have no known incidence of celiac disease.
- All groups will be mixed gender with no more than 4 men in each group.
- All participants must be able to read, understand and speak English.
- All participants must have grocery shopped within the past month.
- 12 recruits per group in order to get 8-12 to participate.
- Participants will receive $\$ 75$ incentives.
- Each focus group will last approximately 120 minutes. Groups will be audio- and video-taped.
- Obtain participant's consent. The identity of the participants will remain confidential.
- Groups will be observed by staff from the Food and Drug Administration.
- Participants do not have to answer any questions that they do not want to, but are encouraged to participate.

Hello Mr./Ms. , my name is
$\qquad$ and I'm calling about a market research study in your area. We are recruiting for an upcoming focus group in which participants will be asked to share their thoughts and feelings about gluten-free food product labels. Would you mind answering a few questions?

## Screening Questions

1. Before I start, are you at least 18 years old?

- YES
- NO $\rightarrow$ Can I speak with someone at least 18 years old? If no, when would be a good time to call back and speak with someone at least 18 years old?

2. Do you or does someone from your immediate family work for any of the following:

- Market Research Firm politely]
- The Food and Drug Administration, U.S. Department of Agriculture, or State or local food agency $\quad \rightarrow$ eliminate [thank respondent politely]
$\square$ Food Industry or Food Retailer $\quad \rightarrow$ eliminate [thank respondent politely]
- Gastroenterologist or Gluten Interest Groups or Association $\rightarrow$ eliminate [thank respondent politely]

3. Do you shop for groceries for yourself or others?
$\square$ Yes $\rightarrow$ continue

- No $\rightarrow$ eliminate [thank respondent politely]

4. When was the last time you went grocery shopping?

- More than one month ago $\rightarrow$ eliminate

5. Do you have medically diagnosed celiac disease or a gluten intolerance, or do you regularly purchase groceries or prepare food for someone with a medically diagnosed celiac disease or a gluten intolerance?

- YES, I have medically diagnosed celiac disease $\quad \rightarrow$ go to 6
- YES, I purchase groceries or prepare food for someone with medically diagnosed celiac disease $\rightarrow$ go to 6
- YES, I have medically diagnosed gluten intolerance $\rightarrow$ go to 6
- YES, I purchase groceries or prepare food for someone with medically diagnosed gluten intolerance $\rightarrow$ go to 6
$\square$ NO $\rightarrow$ eliminate [thank respondent politely]

6. How was this diagnosis made? Please listen to all the options and then choose just one. Was the diagnosis made by:

- Removing foods with gluten from your or the person's diet [NOT APPROPRIATE FOR CELIAC DIAGNOSIS. ACCEPT UP TO 3 PER GROUPS FOR GLUTEN INTOLERANCE]
- Blood tests
- Biopsy of the small intestine.
- Blood tests and a biopsy of the small intestine
$\square$ None of the above. $\rightarrow$ eliminate [thank respondent politely]
- Don't know $\rightarrow$ eliminate [thank respondent politely]

7. Do you, or does someone for whom you regularly prepare food or buy groceries, follow a gluten-free diet?
$\square$ YES, I follow a gluten-free diet. $\quad \rightarrow$ continue

- YES, someone for whom I regularly prepare food or buy groceries for follows a gluten-free diet
$\rightarrow$ continue
$\square$ NO $\rightarrow$ eliminate [thank respondent politely]

8. Do you eat (or serve) packaged, processed foods?

- Yes $\rightarrow$ continue
- No $\rightarrow$ eliminate [thank respondent politely]

Demographic Questions
9. Determine gender

- Male
- Female

10. What is your age?

- [Specify] ___ [If the person refuses to report, go to 10a]

10a. I understand you don't want to tell me your age. Which of the following age categories are you in?
$\qquad$ 18-29
_ 30-39

- 40-49
_ $50-59$
_ 60-69
___ 70 and above?

11. What is the highest level of education that you have completed?
$\square$ Less than high school $\rightarrow$ lower education group

- High school graduate or GED $\quad \rightarrow$ lower education group
$\square$ Technical/vocational school $\rightarrow$ lower education group
$\square$ Community college $\rightarrow$ lower education group
- Some college (1-3 years towards Bachelor's degree) $\quad \rightarrow$ higher education group
$\square$ College (Bachelor’s degree) $\rightarrow$ higher education group
- Advanced degree (post graduate degree) $\rightarrow$ higher education group

12. Are you of Hispanic or Latino origin?Yes
$\rightarrow$ continueNo
$\rightarrow$ continue
13. What is your race? I am going to read several categories of race. You may choose one or more categories. Are you?

| $\square$ White | $\rightarrow$ continue |
| :--- | :--- |
| $\square$ Black or African American | $\rightarrow$ continue |
| $\square$ Asian | $\rightarrow$ continue |
| $\square$ Native Hawaiian or other Pacific Islander | $\rightarrow$ continue |
| $\square$ American Indian or Alaska Native | $\rightarrow$ continue |
| $\square$ [DON'T READ] Hispanic | $\rightarrow$ continue |
| $\square$ [DON'T READ] Other | $\rightarrow$ continue |

We would like to invite you to participate in a focus group to discuss issues relating to gluten-free labels on food products. The discussion will last approximately two hours and will be video- and audio-taped and observed by staff from the Food and Drug Administration, the FDA. Your participation and everything you say during the discussion will remain confidential. You will receive a $\$ 75$ incentive. Additionally, we will provide a light gluten-free meal before the group discussion starts. Are you interested in participating in this focus group?

- Yes $\rightarrow$ continue
- No $\rightarrow$ [Thank the person for his/her time]

I'm glad that you will be able to join us! The focus group will take place on (Day), (Date), at [6:00 or 8:00 p.m.] at [site location].

Will you be available to participate at this time?

- Yes
- No $\rightarrow$ [Thank the person for his/her time]

I would like to send you a confirmation letter and directions to the facility. In order to do so, could you please tell me your mailing address (or fax number, e-mail address) and a phone number where you can be reached:

Name: $\qquad$
Address:
City: $\qquad$ State: $\qquad$ Zip: $\qquad$
Phone: $\qquad$
Email: $\qquad$
Date of focus group: $\qquad$ Time: $\qquad$

We are only inviting a few people, so it is very important that you notify us as soon as possible if for some reason you are unable to attend. Please call [recruiter] at [telephone number] if this should happen. We look forward to seeing you on [date] at [time]. If you use reading glasses, please bring them with you to the focus group.

