

## **Attachment 18B: NCI Message Testing Focus Groups with the General Public**

### **Moderator's Guide**

Public reporting burden for this collection of information is estimated to average 110 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.** Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0046-17). Do not return the completed form to this address.

#### **I. WELCOME (15 minutes)**

Welcome everyone. My name is [MODERATOR NAME], and I work for FHI 360, a nonprofit organization, working on a research project for the National Cancer Institute or NCI. We are talking to people to get input on some areas of information, and the information itself that NCI thinks the American public should be more familiar with. Thank you for coming to this discussion.

Before we begin, I'd like to explain a few things about this room and how the discussion will work.

1. We are not selling or promoting any product or service to you.
2. There are **no right or wrong answers** -- We want to get your honest opinions.
3. I do not work for the people who are sponsoring this study and I was not personally involved in the development of any of the ideas that I am going to share with you today. If you have something negative to say, it is all right.
4. Don't feel like you need to answer every question. But if I haven't heard from you in awhile I may call on you occasionally.
5. There are microphones in this room that we are using to **audiotape** our discussion. I have to write a report afterwards, and the tapes it will help me remember what you've said

here today.

6. Because we are taping, it is important that you try to **speak one at a time**. I may occasionally interrupt you when two or more people are talking at once to be sure everyone gets a chance to talk and that responses are accurately recorded.
7. Behind me is a **one-way mirror**. Some of the people working on this project are watching this discussion so that they can hear your opinions directly from you. However, your identity and anything you personally say here will be kept secure. When I write my report, I will not refer to anyone by name.
8. The group will last for **1 hour and 30 minutes**. I will not keep you here any longer, so I may occasionally interrupt the discussion to move us along.
9. Please turn off your **cell phones**. Should you need to go to the restroom during the discussion, please feel free to leave, but I'd appreciate it if you would go one at a time.
10. Your feedback will be kept secure to the extent permitted by law. We will write a summary of what we've heard for the National Cancer Institute. We will not include anyone's names or other identifying information.

Do you have any questions before we get started?

## **II. INTRODUCTIONS (10 minutes)**

Let's go around the table and introduce ourselves:

- Please tell us your first name, and briefly
- Share with us a health issue that worries you at times.

## **III. GENERAL PERCEPTIONS OF NCI (10 minutes)**

The National Cancer Institute, or NCI, is part of the National Institutes of Health, which is one of 11 agencies that are part of the U.S. Department of Health and Human Services. The NCI coordinates the U.S. National Cancer Program and conducts and supports research, training, putting out health information, and other activities related to the causes, prevention, diagnosis, and treatment of cancer; supportive care of cancer patients and their families; and cancer survivorship.

1. Before coming to this group today, what did you know or what had you heard about NCI? [use flip chart to generate a list]

[Moderator will edit or augment list with things that NCI does in addition to what is listed. Moderator, when going through the list and if an item is incorrect will indicate that NCI does not undertake that activity.]

2. Let's look at this list and I would like to hear from you what you think about the items on the list – that is, how important it is - and what types of information you have or would like to have about each of them.
3. Have any of you ever turned to NCI for any reason?  
[Probe on use for finding disease information, funding, state of the science, other]

#### IV. FEEDBACK ON THEMES, SUB-THEMES, CONTENT (45 minutes)

NCI would like Americans like you to know more about cancer, cancer research, and about the organizations that play a role in it – like NCI.

So next we will look at some issues and ideas that people at NCI have proposed to stress when communicating with the public, health care professionals, and other key audiences. I would like to hear your feedback about these. After we read each one together I will ask you a few questions to get your reactions.

[Pass out and show boards with each of the three themes (called idea in guide) and sub-themes (called other points in guide) (see Appendix) separately. Ask questions for each theme].

1. How important is this idea? How many think this is **Very Important, Somewhat Important, Not Important**? Please write your response on the piece of paper we have given you.

How many of you feel that this is **very important** to know about cancer and cancer research? [Moderator asks for a show of hands. Moderator continues to ask for reactions and writes them on a flipchart.]

2. What are some of the reasons that made you say that – what makes this not important, somewhat important or very important?
3. Does thinking about the other points (sub-themes - read them out) make this more or less interesting or concrete?  
Probe: What, if anything, is confusing about this idea?
4. Why do you see NCI as being an appropriate or inappropriate source of information about [INSERT IDEA AND OTHER POINTS]?
5. How would you use the idea and other points personally?
6. How would you use the idea and other points in your role as someone [CHANGE WHAT YOU SAY DEPENDING ON FOCUS GROUP PARTICIPANTS] (1) very involved in activities to help fight for cancer causes OR (2) very active and engaged in the civic conversation on health OR (3) engaged on-line on issues of health?

7. Which particular groups or audiences do you feel need or would benefit from this type of information?
8. How would you disseminate it to them – or attempt to make certain that they received it (the information)?
9. Is there anything you would caution about NCI communicating information about [IDEA]?

NCI would like to let people know that [INSERT IDEA HERE] by giving examples and essentially telling stories that illustrate the main point [POINT TO THIS ON BOARD] and the sub-points [POINT TO OTHER POINTS ON BOARD].

10. [Use flip chart to capture ideas] Do you have any ideas for ways to personalize these points – or the types of stories that they should tell?

[PASS OUT LIST OF STORIES BY OTHER POINTS AND PUT UP BOARD WITH THEM IN FRONT OF ROOM]

11. Is this story relevant to you personally or to your interests concerning health (cancer)? [Probe: How so?]
12. Do you find this information interesting? [Probe: How so?] [Probe: Does anything seem to be missing?]
13. Does it raise concerns? [Probe: How so?] Does NCI communicating this raise any concerns or cause any kind of confusion?
14. How might you change it to make it more interesting or relevant to you in your role as someone [CHANGE WHAT YOU SAY DEPENDING ON FOCUS GROUP PARTICIPANTS] (1) very involved in activities to help fight for cancer causes OR (2) very active and engaged in the civic conversation on health OR (3) engaged on-line on issues of health?

Thank you, now let's move to IDEA2, IDEA3.

### **Summary discussion**

[Moderator passes out sheet with all other points listed and the generalized importance rating]

1. Let's look at all these ideas and other points together, now that we've seen them all. This is how you rated their importance before. Do you think these ratings still reflect what you think about each of them?

2. Which ones do you feel are more relevant or important to you in your role in health activism or leadership?

## V. CHANNELS (15 minutes)

I would now like to change the subject somewhat. Everyone here today is interested in health issues, including cancer. Thinking about this, let's talk a bit about where we go to get information about health and medical issues.

1. What are some of the ways you like to get health information of the sort we have just been discussing? [Probe: role of physician, word-of-mouth, disease associations, NCI, media.]
2. How does where you would go or some of the ways you would get information differ by idea? [Probe: Idea1, Idea2, Idea3?] Are there some places in particular that you would be most likely to pay attention to this information? [Probe: social media; libraries; NCI Web-site; trustworthiness of various sources mentioned] Are there places you would dismiss or ignore this information?
3. Would you be supportive of NCI playing a more active role in raising awareness about cancer, cancer research and why it is important? For what reasons?

## VI. REACTIONS TO NIH CLINICAL TRIAL AWARENESS RAISING IDEAS (10 minutes)

I have one last subject to raise. The National Institutes of Health has been doing some research to help them develop a campaign to raise awareness among the general population about clinical trials. I would like to show you one of the concepts and get your reaction to it. [SHOW BOARD OF ADVERTISING CONCEPT]

1. What is the main idea of this message? [**Probe:** What are they trying to say in this message?]
2. Does seeing this idea make you interested in seeing more of information? [**Probe:** Does it get your attention? Are you drawn to it in any way?]
3. How believable is the message? What additional information would you need in order to more strongly believe this message?
4. Is there anything confusing, unclear, or hard to understand? Are there any words that are unusual or unfamiliar? What other words can be used in their place?
5. Does it seem like this message is talking to you? Or someone else? What in the message suggested that?

6. What, if anything, is it asking you to do?
7. Does anything about it raise concerns?
8. What other comments do you have about this message?

## **VI. CONCLUSION (5 minutes)**

1. Before we conclude, is there anything else you would like to share, or do you have any questions for me?
2. Thank you for sharing your opinions and feedback on the ideas, stories, and clinical trials awareness concept that was shared with you today. NCI and NIH will be using your input to develop and refine their work.

**THANK YOU!**

## Appendix

### Themes, Sub-themes, and Content (proposed storylines)

Central Theme (Ideas)	Sub-Themes (Other Points)	Content(Proposed Storylines)
<p><b>THEME 1:</b> Our understanding of cancer biology has radically changed how we conceptualize both prevention and therapeutic options for controlling cancer.</p>	<p><b>Sub-theme 1A:</b> Controlling cancer is not a magic-bullet scenario.</p>	<p><u>Storyline 1A1:</u> Cancer is not a single disease, but a complex set of diseases that display some common characteristics (and biological processes).</p>
		<p><u>Storyline 1A2:</u> Cancers can be controlled in many different ways: Prevention, screening for early-stage cancers, more precise diagnostic tests, and better therapies are all essential strategies.</p>
		<p><u>Storyline 1A3:</u> Advances against cancer depend on science of many kinds: Molecular and cell biology, genetics, virology, immunology, chemistry, population sciences, human behavior, and many other avenues of research.</p>
	<p><b>Sub-theme 1B:</b> Advances in early diagnosis and better treatments over the past decade have led to substantial advances in controlling cancer.</p>	<p><u>Storyline 1B1:</u> Recent NCI-funded study shows that women with early-stage breast cancer can now safely undergo less invasive, lymph-node sparing surgery, which reduces often painful long-term side effects including swelling and numbness.</p>
		<p><u>Storyline 1B2:</u> The National Lung Screening Trial (NLST) found that 20 percent fewer lung cancer deaths occurred among current and former heavy smokers who were screened with low-dose spiral CT compared to chest X-ray due to more accurate early detection.</p>

Central Theme (Ideas)	Sub-Themes (Other Points)	Content(Proposed Storylines)
		<p><u>Storyline 1B3</u>: In neuroblastoma, a cancer found mostly in children, the addition of immunotherapy to standard therapy was found to greatly increase the percentage of patients with “high-risk” disease (most difficult to cure and most likely to relapse) who were alive and free of disease progression after two years.</p>
		<p><u>Storyline 1B4</u>: From 1975 through 2000, deaths from colorectal cancer declined by 26 percent in the U.S., due to changes in risk factors, increased screening, and advances in treatment. More than 50 percent of this decline can be attributed to screening tests that identify early-stage cancers and adenomatous polyps, which can be precursors to colorectal cancer, for removal.</p>
	<p><b>Sub-theme 1C:</b> Improvements in care and treatment have improved the quality of life for most people living with cancer</p>	<p><u>Storyline 1C1</u>: Use of new antiemetic drugs (which prevent nausea and vomiting) and chemotherapy I.V. ports have made treatment much easier for patients.</p>
<p><b>THEME 2:</b> We have new tools and vast computing power that enable us to find answers at a molecular level, with the potential for much more rapid advances in both science and care. Our understanding of cancer at the molecular level will allow doctors</p>	<p><b>Sub-theme 2A:</b> Cancer treatment for many cancers will involve targeted therapies and molecularly informed cancer care.</p>	<p><u>Storyline 2A1</u>: The Therapeutically Applicable Research to Generate Effective Treatments (TARGET) Initiative project team focusing on Acute Lymphoblastic Leukemia (ALL) is studying patients with early relapse in order to identify new genomic changes that are associated with treatment failure and to identify novel therapeutic targets.</p>



Central Theme (Ideas)	Sub-Themes (Other Points)	Content(Proposed Storylines)
to tailor appropriate cancer treatments to individual patients.		<p><u>Storyline 2A2</u>: The Cancer Genome Atlas (TCGA) has a goal of identifying the genomic changes in more than 20 types of human cancer over the next several years. With support from NCI and NHGRI, a robust collaborative network of institutions and investigators has been established to accrue and process specimens and generate comprehensive, multi-dimensional genomic data made rapidly available to the research community.</p>
		<p><u>Storyline 2A4</u>: Brain cancer: Analysis of data from The Cancer Genome Atlas (TCGA) revealed that glioblastoma multiforme, the most aggressive form of brain cancer, is not a single disease but has at least four molecular subtypes. This finding is paving the way for more informed selection of therapies for these patients.</p>
		<p><u>Storyline 2A5</u>: Lung cancer: Crizotinib, a drug that targets cancer-causing chromosomal rearrangements involving the gene ALK in patients with non-small cell lung cancer, was made possible through molecular tumor characterization that was conducted at NCI-designated cancer centers. More than half of patients in a clinical trial of Crizotinib had partial or complete shrinkage of their tumors.</p>

Central Theme (Ideas)	Sub-Themes (Other Points)	Content(Proposed Storylines)
		<p><u>Storyline 2A6</u>: Melanoma: In a phase 1 study of the drug PLX4032, designed to target a common genetic change in melanoma tumors, the vast majority of patients responded to treatment. Eighty-one percent of patients in the trial who received the recommended phase 2 dose of the drug had a partial or complete response.</p>
	<p><b>Sub-theme 2B</b>: The future of cancer care is not “a cure” or “the cure” but many treatment modalities with many different goals.</p>	<p><u>Storyline 2B1</u>: Cancer is an enormously complex disease and a single cure or treatment is simply not possible for the vast majority of cancers.</p> <p><u>Storyline 2B2</u>: The future we envision now for most cancers is for management by prevention before it occurs and as a chronic disease after it is diagnosed.</p>
<p><b>THEME 3</b>: At the end of the same decade that has brought the advent of much accelerated scientific discovery and improved cancer care and treatment, the NCI budget has essentially the same buying power as it did at the start of the decade, insufficient to fully realize the potential we see to reduce the Nation’s cancer burden.</p>	<p><b>Sub-theme 3A</b>: Our emerging understanding of cancer biology and cancer treatment has important ramifications for decision leaders, policy makers, and the public.</p> <p><b>Sub-theme 3B</b>: Progress against cancer requires sustained investment on a national level.</p>	<p><u>Storyline 3A1</u>: Public understanding of cancer research is based on perceptions formed 30 years ago.</p> <p><u>Storyline 3A2</u>: The national conversation about cancer needs to reflect sustained and accelerated support in order to realize the potential advances science is poised to make against cancer.</p> <p><u>Storyline 3B1</u>: Cancer presents a scientific problem of such complexity that a national strategy and national investment are essential to achieving progress.</p>

Central Theme (Ideas)	Sub-Themes (Other Points)	Content(Proposed Storylines)
		<p><u>Storyline 3B2</u>: In this new phase of cancer research, the National Cancer Institute's role as manager of the nation's investment in cancer research is more important than ever to identify research priorities and leverage the efforts of the private, academic and government sectors.</p>
		<p><u>Storyline 3B3</u>: Individual investigator grants remain a fundamental tool for knowledge growth and progress against cancer. Research teams and multi-institutional efforts are, however, an increasingly important part of the research portfolio.</p>
		<p><u>Storyline 3B4</u>: The health of NCI is tied to the health of NIH. NIH funding, which has been flat for nearly a decade, has not kept pace with inflation.</p>
	<p><b>Sub-theme 3C</b>: Dollars invested in the cancer research portfolio yield dividends both in preventing and controlling cancer and in economic benefits to the Nation.</p>	<p><u>Storyline 3C1</u>: The U.S. leads the world in biomedical research. It is a leading source of intellectual property, new products and technologies, new companies, and high-skill jobs.</p>
		<p><u>Storyline 3C2</u>: Controlling cancer is essential to managing the nation's long-term health care costs.</p>



OMB No. 0925-0046-17  
Expiration Date 2/28/13

**ATTACHMENT 18C:  
RECRUITMENT SCREENER  
TESTING OF MESSAGES FROM AND ABOUT NCI - FOCUS GROUP**

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Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0046-17). Do not return the completed form to this address.

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## Summary Table

Group	Location	Date/Time	Audience
#1	Chicago, IL	TBD	<b>Active on-line, including social media</b> in health issues (host, contribute to or regularly read a blog, twitter feed, or on-line column or chat)
#2	Chicago, IL	TBD	<b>Active and Engaged</b> in health issues (using elements of political activity question series)
#3	Chicago, IL	TBD	<b>Unofficial Advocates</b> for cancer prevention/treatment
#4	Location 2	TBD	<b>Active on-line, including social media</b> in health issues (host, contribute to or regularly read a blog, twitter feed, or on-line column or chat)
#5	Location 2	TBD	<b>Active and Engaged</b> in health issues (using elements of political activity question series)
#6	Location 2	TBD	<b>Unofficial Advocates</b> for cancer prevention/treatment

### Recruitment:

For each focus group recruit 10 for 8 participants to show

### [Request to speak with an adult in the household.]

Hello, I'm \_\_\_\_\_. I work for \_\_\_\_\_, an independent research firm. We are doing a study for the National Institutes of Health to find out what people think about some of the information that they plan to share with the public and to get input regarding messages about research on treatments for chronic and life-threatening diseases. We are looking for people to take part in discussion groups about these topics. Input and ideas from these discussions will help inform NIH about information that will be useful to the public. We are not selling any product or service. Everyone who is eligible and participates will be paid \$75 as a thank you for their time.

The discussion groups will be held on **[Dates]** at **[Place]** and will last about two hours. I would like to ask you some questions to see if there is a discussion group that you could join. These questions will only take a few moments to answer.

Some of the questions I am about to ask you are about your health. These questions may feel personal and sensitive. You do not have to answer any question if you don't feel comfortable, and you may stop at any time. Do you have time now to answer a few questions?

May I continue with my questions?

1. Are you an employee of the U.S. Department of Health and Human Services or any of its divisions?\*

**Terminate>>**

Yes \_\_\_\_\_

No \_\_\_\_\_

**\*See appendix of this screener for a list of divisions under the U.S. Dept. of Health and Human Services.**

2. Are you or is anyone in your household . . .

Employed in advertising, marketing, market research, public relations,  
public health, health promotion, or medical research? \_\_\_\_\_

A doctor, nurse or employed in any other fashion in the medical field? \_\_\_\_\_

Employed by a medical insurance organization or one that does medical review or medical  
claims adjudication? \_\_\_\_\_

**Terminate >>** If any YES

3. Do you work for the American Cancer Society or a similar organization that focuses on cancer, or does your work directly involve people with cancer or their families?

**Terminate>>** Yes \_\_\_\_\_

No \_\_\_\_\_

4. Which of the following statements best describes your personal experiences with cancer?  
**(Check all that apply.)**

**(Patient)** >> I have been diagnosed with cancer \_\_\_\_\_

**(Family)** >> A close family member, such as a parent, sibling,  
child, or grandparent, has or has had cancer \_\_\_\_\_

**(Friend)** >> A close friend has or has had cancer \_\_\_\_\_

**(Other)** >> No one I am close with has cancer \_\_\_\_\_

**Recruit note: Recruit a mix if otherwise eligible**

5. Within the past year or so have you done any of the following? (Ask as many of these as necessary to see if the person fits into any of the three categories. As soon as they answer in a fashion that makes them eligible for a focus group, stop asking about their activities and move to Question 6)

Item	Activities	Did This?		Was This Related to a National Health Issue?		Was this Cancer-Related	
		No	Yes ▶	No	Yes ▶	No	Yes
<b>A</b>	Actively use Facebook, MySpace, LinkedIn, Twitter?					Do not ask	Do not ask
<b>B</b>	Regularly read, typically every day, any blogs, chats, or twitter feeds?					Do not ask	Do not ask
<b>C</b>	Written blogs, chats, or twitter feeds?					Do not ask	Do not ask
<b>D</b>	Regularly comment on any blogs, chats, or twitter feeds?					Do not ask	Do not ask
<b>E</b>	Posted substantive commentary to online articles or blog postings?					Do not ask	Do not ask
<b>F</b>	Written an article for a newspaper, magazine or newsletter? (ONLINE)					Do not ask	Do not ask
<b>(GROUPS 1 &amp; 4) IF YES TO ANY OF A THROUGH F AND THIS IS RELATED TO A NATIONAL HEALTH ISSUE IN AT LEAST ONE INSTANCE SKIP TO Q6; IF NO CONTINUE</b>							
<b>G</b>	Attended a rally or speech? (e.g., against breast cancer, regarding health care access)?						
<b>H</b>	Attended a public meeting?						



Item	Activities	Did This?		Was This Related to a National Health Issue?		Was this Cancer-Related	
		No	Yes ▶	No	Yes ▶	No	Yes
<b>I</b>	Been a member/joined a group interested in a national health issue or advancing a health policy issue?						
<b>J</b>	Written a letter/sent an email to a newspaper or TV station?						
<b>K</b>	Personally written to your local public officials, congressman, senator, state representative or governor? <i>(not a blast email or fax)</i>						
<b>L</b>	Written an article for a newspaper, magazine or newsletter? (PRINT)						
<b>M</b>	Made a speech?						
<b>N</b>	Invited by an organization or signed up to be an advocate (e.g., someone who will circulate petitions, lobby officials)?						
<b>O</b>	Served on a committee for a local organization?						
<b>P</b>	Served as an officer of a club or organization?						
<b>Q</b>	Worked for a political candidate or party because of their stand on an issue?						
<b>(GROUPS 2 &amp; 5) IF YES TO ANY OF G THROUGH Q AND THIS IS RELATED TO A NATIONAL HEALTH ISSUE OR CANCER, SKIP TO Q6. IF NO, CONTINUE.</b>							
<b>R</b>	Signed up on a Web-site to get regular information about a			Do not ask	Do not ask		

Item	Activities	Did This?		Was This Related to a National Health Issue?		Was this Cancer-Related	
		No	Yes ▶	No	Yes ▶	No	Yes
	particular issue or organization of interest?						
<b>S</b>	Donated money to an organization?			Do not ask	Do not ask		
<b>T</b>	Volunteered your time because this was a good way to contribute to a cause you feel is important			Do not ask	Do not ask		
<b>U</b>	Participated in a major event (such as Relay for Life, Race for the Cure) – BECAUSE this was a good way to contribute to a cause you feel is very important NOT because of its competitive or exercise potential?			Do not ask	Do not ask		
<b>V</b>	Organized a team for an event like Relay for Life, Race for the Cure, or the Lymphoma Research Ride?			Do not ask	Do not ask		
<b>(GROUPS 3 &amp; 6) IF YES TO ANY OF R THROUGH V AND THIS IS RELATED TO CANCER IN AT LEAST ONE INSTANCE, GO TO Q6. IF NOT, TERMINATE</b>							

**IF RESPONDENT IS IN ANY OF THESE THREE CATEGORIES THEN CONTINUE. IF NOT, TERMINATE.**

6. Have you ever heard of the National Cancer Institute, sometimes known as the NCI? No \_\_\_\_\_  
Not certain \_\_\_\_\_  
Yes \_\_\_\_\_

**6a. If yes >> What do you know about the National Cancer Institute, sometimes known as NCI? (DO NOT READ - mark all that they identify)**

- \_\_\_\_\_ Part of the US/federal government
- \_\_\_\_\_ An NIH institute
- \_\_\_\_\_ Conducts and oversees cancer research
- \_\_\_\_\_ Provides money for cancer research
- \_\_\_\_\_ Has an 800 number (1-800-4-CANCER) (Probe for number to make certain or listen for a mention of Cancer Information Service (CIS))
- \_\_\_\_\_ Reviews and approves grants to support cancer research projects
- \_\_\_\_\_ Collects, analyzes and disseminates the results of cancer research
- \_\_\_\_\_ Provides training and instruction in cancer diagnosis and treatment
- \_\_\_\_\_ Coordinates and certifies comprehensive cancer centers
- \_\_\_\_\_ Provides money to train cancer researchers
- \_\_\_\_\_ Oversees clinical trials
- \_\_\_\_\_ Provides information so physicians and patients can find cancer clinical trials
- \_\_\_\_\_ Has/maintains Cancer.gov Web-site (make certain they indicate .gov, not .org)

**IF THEY SAY ANY OF THE FOLLOWING THEN INDICATE THAT THEY LIKELY DO NOT KNOW WHO NCI IS:** They have a fund raising drive; sponsor Relay for Life, sponsor a walk-a-thon, have advertisements on TV, in newspapers or in magazines

Other things that are said: \_\_\_\_\_

**For recruiter to answer: Do they know who NCI is?** \_\_\_\_\_ Yes  
\_\_\_\_\_ No  
\_\_\_\_\_ Not Sure

**Recruit note: Recruit a mix of those who do and do not (whether by their own admission or based on their answers) know who NCI is for each group**

7. What is the highest level of education you have completed? [**Recruit a mix of college degree or more and less than college degree over time**]
- Less than high school \_\_\_\_\_
  - High school diploma/GED \_\_\_\_\_
  - Some college \_\_\_\_\_
  - College degree \_\_\_\_\_
  - Graduate degree \_\_\_\_\_

8. Which of the following ranges matches your income? **[Recruit a mix]**

- Under \$35,000 \_\_\_\_\_
- \$35,00 - \$50,00 \_\_\_\_\_
- \$50,000 - \$75,000 \_\_\_\_\_
- Over \$75,000 \_\_\_\_\_

9. What is your age? **[Recruit a mix over time]**

\_\_\_\_|\_\_\_\_| **[RECORD AGE]**

- Terminate>>** Under 25 \_\_\_\_\_
- 25 - 49 \_\_\_\_\_
- 50 - 65 \_\_\_\_\_
- Terminate>>** Over 65 \_\_\_\_\_

10. Do you consider yourself Hispanic or Latino?

- Yes \_\_\_\_\_
- No \_\_\_\_\_

11. Which of the following best describes your race? **[Recruit a mix of over time – AI/AN and NH/PI not critical to recruit]**

- American Indian or Alaska Native \_\_\_\_\_
- Asian \_\_\_\_\_
- Black or African American \_\_\_\_\_
- Native Hawaiian or Other Pacific Islander \_\_\_\_\_
- White \_\_\_\_\_

12. **[Record gender; recruit a mix over time]**

- Female \_\_\_\_\_
- Male \_\_\_\_\_

13. Have you participated in a focus group/group discussion about health where you were asked questions by a moderator in the past year?

- Yes \_\_\_\_\_
- Continue>>** No \_\_\_\_\_

*If Yes, continue with next question.*

13a. Have you ever participated in three or more of these types of projects?

- Terminate>>** Yes \_\_\_\_\_
- Continue to invitation>>** No \_\_\_\_\_

**\*\*TERMINATE LANGUAGE:** Thank you very much for your time. We have recruited all of the persons like you that we need to talk to, so we won't be able to include you in our study. Thank you for your time and interest. Have a good day/evening.

**INVITE TO INTERVIEW**

Thank you for answering my questions. As I mentioned this study is being conducted on behalf of the National Institutes of Health about themes and messages about cancer research and we would like to include your views.

In order for us to get your input, I would like to invite you to participate in focus group. The focus group will last about ninety minutes and will take place at \_\_\_\_\_ on day/time \_\_\_\_\_.

This is not a sales effort of any kind and no one will call on you as a result of your participation. To compensate you for your time and travel expenses, you will receive \$75. Can we schedule your participation?

**Check day and time; see details below.**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

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**Session Dates/Time Slots**

TBD

## Appendix

### **List of U.S. Department of Health and Human Services (HHS) Operating and Staff Divisions**

- Administration for Children and Families (ACF)
- Administration for Children, Youth and Families (ACYF)
- Administration on Aging (AoA)
- Agency for Healthcare Research and Quality (AHRQ)
- Agency for Toxic Substances and Disease Registry (ATSDR)
- Center for Faith-Based and Neighborhood Partnerships (CFBNP)
- Centers for Disease Control and Prevention (CDC)
- Departmental Appeals Board (DAB)
- Food and Drug Administration (FDA)
- Health Resources and Services Administration (HRSA)
- Indian Health Service (IHS)
- Intergovernmental Affairs and Regional Representatives (IGA)
- National Cancer Institute (NCI)
- National Coordinator for Health Information Technology (ONC)
- National Institutes of Health (NIH)
- Office for Civil Rights (OCR)
- Office of Consumer Information and Insurance Oversight (OCIO)
- Office of Global Health Affairs (OGHA)
- Office of Medicare Hearings and Appeals (OMHA)
- Office of the Assistant Secretary for Health (ASH)
- Office of the General Counsel (OGC)
- Office of the Inspector General (OIG)
- Office of the Inspector General (OIG)
- Office of the Surgeon General (OSG)
- Office on Disability (OD)
- Substance Abuse and Mental Health Services Administration (SAMHSA)