

**“REAL TIME” SURVEYS OF CONSUMERS’ KNOWLEDGE, PERCEPTIONS, AND
REPORTED BEHAVIOR CONCERNING FOODBORNE ILLNESS OUTBREAKS OR
FOOD RECALLS
REQUEST FOR GENERIC CLEARANCE**

OMB No. 0910-NEW

SUPPORTING STATEMENT

PART B

B. Statistical Methods

1. Respondent Universe and Sampling Methods

The respondent universe for each data collection is Synovate’s online Consumer Opinion Panel (“ePanel”). U.S. consumers who are 18 or older are invited to join the ePanel primarily through an affiliate marketing program. Select web sites, portals and Internet Service Providers partner with Synovate to promote ePanel membership through targeted email campaigns as well as placement of banner and pop-up advertisements. Consumers may also join ePanel through referrals from existing ePanel members and re-enlistment of former members. Currently, ePanel has over 2.5 million participants.

The target sample for each independent survey is 1,000 adult consumers. The contractors will e-mail an introduction to each survey, along with a link to the screener and the survey instrument.

Synovate’s e-panel will suffice to provide public input about understanding of a current foodborne illness outbreak or food recall. The panel will not yield data that can be generalized, thus precluding using it to drive the development of policies, programs, and services. However, risk communication staff and educators can use the results to refine already released messages to the public about a current incident, much in the way qualitative information can be used to refine ideas.

2. Procedures for the Collection of Information

2.1 Statistical methodology for collection and sample selection

The survey samples will be drawn from a proprietary, web-based consumer panel. A screener will be used to identify an eligible household member. Only one respondent per household will be allowed to complete the survey.

Criteria for selecting a particular foodborne illness outbreak or food recall for a survey will include a qualitative assessment of the salience of some or all of the following: the geographical dispersion of the event, the number of illnesses or deaths associated with it, the consumption patterns of the food product, the complexity of consumer precaution instructions, and the presence of national media focus.

When OMB review is needed to clear surveys for incidences for which no ready-made, previously OMB cleared survey is available, the individual submissions will make clear the need for that particular survey.

2.2 Estimation Procedure

The data will not be weighted.

2.3 Degree of accuracy needed for the purpose described in the justification

A sample size of 1,000 respondents per wave is needed to perform sub-analyses that may include analyzing knowledge, perception, and behavior disparities among different populations. Some of the sub-analyses of potential interest include older adults (60+) and households with young children (<5 years old). Based on unweighted results from the 2010 FDA Food Safety Survey, an independently drawn, random sample of the adult U.S. population, we expect that 38% of our sample will be adults over age 60 and 17% will have children younger than five years old in the household. Therefore, the expected group size for these groups, respectively, is 380 and 170. The planned sample size will allow sufficient precision to enable us to make statistical comparisons between demographic groups of interest with moderate effect sizes (e.g., Cohen D=.50) in mean differences with an alpha of .05 and beta of 0.2 (Power=.80).

2.4 Use of specialized sampling procedures

The surveys will not employ specialized sampling procedures.

2.5 Use of periodic data collection cycles to reduce burden

This is a one-time data collection.

3. Methods to Maximize Response Rates

In an effort to increase cooperation by prospective respondents, the agency plans to take the following measures:

- Use a Web-based consumer panel whose members have agreed to participate.
- In the invitation, carefully explain the importance of participating in the survey;
- Craft a survey that is easy to understand and compelling.

4. Tests of Procedures or Methods

FDA plans to field pretests focusing on the length of the questionnaire, respondent burden, and accuracy of response recording and skip patterns. The contractor who is responsible for the data collection will administer the pretest questionnaire to 200 adult members of a web-based consumer panel shortly after the onset of a significant foodborne illness outbreak or food recall. This is the same web-based consumer panel from which regular sample will be selected.

5. Individuals Involved in Statistical Consultation and Information Collection

The contractor, Synovate Inc., will collect the information on behalf of the Agency. Analysis of the information will be conducted primarily by the FDA Project Officer, Linda Verrill, Ph.D., telephone 301-436-1765.

References

Cuite, C.L., Condry, S.C. Nucci, M.L & Hallman, W.K. (2007. Public Response to the Contaminated Spinach Recall of 2006. (Publication number RR-0107-013). New Brunswick, New Jersey: Rutgers, The State University of New Jersey, Food Policy Institute.

Harvard School of Public Health, Press Release 2-13-09. "Following Peanut Product Recall, Six in Ten Americans Taking Steps to Reduce Their Risk of Getting Sick." www.hsph.harvard.edu.