

FDA DOCUMENTATION FOR THE GENERIC CLEARANCE OF SURVEYS FOR

REAL TIME SURVEYS OF CONSUMERS' KNOWLEDGE, PERCEPTION AND REPORTED BEHAVIOR CONCERNING FOODBORNE ILLNESS OUTBREAKS OR FOOD RECALLS (0910-0711)

DESCRIPTION OF THIS SPECIFIC COLLECTION

1. **Statement of need:**

FDA is seeking clearance under the terms of a generic clearance associated with OMB Control Number 0910-0711, "Real Time Surveys of Consumers' Knowledge, Perceptions and Reported Behavior Concerning Foodborne Illness Outbreaks or Food Recalls" to pre-test the surveys. The request to pre-test the surveys was part of the overall Information Collection Request (ICR) to survey consumers on their "real time" knowledge, perceptions, beliefs, and self-reported behaviors related to a current foodborne illness outbreak. Pre-testing the surveys with a sample of consumers is needed to ensure the survey programming and administration are accurate and ready for real administration should the need arise. To help make the pre-test useful for its purpose, it will reference the current outbreak of salmonella linked to cantaloupe as a test topic.

2. **Intended use of information:**

The information collected during the pre-test will be used to ensure that the surveys have been properly programmed for web-based dissemination. Researchers will also look for values out of range of appropriate response options, whether questions are eliciting response variation, and whether there are systematically missing responses.

3. Description of respondents:

The respondent universe for the pre-test 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.

The target sample for the pre-test is 200 adult consumers. Contractors will e-mail an introduction to the pre-test along which will include a link to the screener and the pre-test survey instrument.

4. Date(s) to be conducted:

9-10-12 to 9-17-12.

5. How the information is being collected:

The pre-test sample will be drawn from a proprietary, web-based consumer panel and the will be completed online. Screening will be used to identify eligible household members and one respondent per household will be allowed to complete the pre-test.

6. Amount and justification for any proposed incentive:

Respondents will be recruited from members of Synovate's Consumer Opinion Panel. Members voluntarily agree to join the panel and participate in regular online surveys conducted by Synovate. Synovate offers panelists two main incentive programs: a sweepstakes draw and a points rewards program. The sweepstakes draw is conducted quarterly or monthly, depending upon the market. Panel members are automatically entered into a sweepstakes draw upon registering for the panel and for each survey completed during this time period. Sweepstakes prizes

include one cash prize of \$1,000, 10 prizes of \$100, 15 prizes of \$50, 30 prizes of \$25, and 150 prizes of \$10.” In the Points Rewards Program, panelists earn points for every survey completed and can redeem these points for cash in their native currency. Panelists receive 50 points for every survey minute anticipated. One thousand points = \$1.

7. Are there any deviations to the described methods, procedures, and uses of data contained in the Real Time Food Recall Surveys 2010 Justification Statement?

YES _____

NO X (if NO, skip to #12)

11a. If YES, please describe:

8. Burden Chart and Description:

We will screen 400 individuals, each taking approximately 20 seconds to complete for a total of 2 hours of respondent burden. Two Hundred respondents will complete the pre-test survey. We estimate that the pre-test survey will take 10 minutes to complete for a total of 33 burden hours. The total estimated burden hours for pre-testing the Real Time Food Recall Surveys are 35.

Activity	No. of Respondents	Number of responses per respondent	Average burden per response	Total hours
Pre-test Screener	400	1	.0055 (20 seconds)	2
Pre-test Survey	200	1	.167(10 minutes)	33
Total				35

9. Attach Questions

Please see attached files:

REQUESTED APPROVAL DATE: [insert 10 days from submission]

NAME OF PROGRAM CONTACT: Linda Verrill, Ph.D.

Linda.verrill@fda.hhs.gov

240-402-1765

FDA CENTER: CFSAN