Focus Group Testing to Effectively Plan and Tailor Cancer Prevention and Control Communication Campaigns

Appendix C

Reference Set of Example Questions to Use in Constructing A Focus Group Screening Form

Focus Group Testing to Effectively Plan and Tailor Cancer Prevention and Control Communication Campaigns

Recruitment Screener

| Introduction | |
|---|--|
| Group Date: | Group Time: |
| General Public/Health Care Provi | ider Name:_ |
| Address:_ | |
| City: Zip: Day Phone: | State: ** |
| Evening Phone:Email: | |
| Other contact information: | |
| description). On behalf of the fed | , (insert qualitative research firm eral Centers for Disease Control and |
| health care providers) about (inse campaign). Some people we speal | k with today will be invited to participate in |
| a focus group that will pay an hon your time. May I ask you a few of | norarium of \$, for about 120 minutes of mestions? |

Public reporting burden of this collection of information is estimated to average 3 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 CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-XXXX)

INSTRUCTIONS:

USE THIS REFERENCE SET OF SCREENING QUESTIONS TO CONSTRUCT A SCREENING FORM FOR EACH INFORMATION COLLECTION OR FOCUS GROUP. SELECT QUESTIONS THAT WILL ASSIST IN IDENTIFYING MEMBERS OF THE TARGET POPULATION. QUESTIONS THAT ARE NOT RELEVANT TO A SPECIFIC TARGET POPULATION OR COMMUNICATION CAMPAIGN SHOULD BE DELETED TO AVOID UNNECESSARY BURDEN TO RESPONDENTS.

DEMOGRAPHIC QUESTIONS

| 1. | Respondent gender: | |
|-----------|--|--|
| | 1 Male 2 Female | |
| | 2 Female | |
| <u>2.</u> | Ethnicity | |
| | ☐ Hispanic or Latino ☐ Not Hispanic or Latino | |
| | | |
| 3. | Race (respondents may select more than one response category for Race) | |
| | ☐ White | |
| | ☐ Black or African American | |
| | American Indian or Alaska Native | |
| | □ Asian | |
| | ☐ Native Hawaiian or Other Pacific Islander | |
| | | |
| 4. ` | Which of the following age categories includes you? | |
| | 1 Under 50 years old | |
| | 2 50 - 60 years old | |
| | 3 61-70 years old | |
| | 4 71 – 74 or older | |
| | 5 75 or older | |

QUESTIONS FOR HEALTH CARE PROVIDERS:

| 2. | | | specialty, that is your profession | - | - | - | |
|-------------|--------------------------|--|------------------------------------|---------------------------|----------------------|--------------|--|
| | | y Practice al Medicine: D | o you have a sub | General Pr -specialty? | | | |
| | ☐ Other | (please specify |): | | | | |
| | On average, ent care? | how many ho | urs per week do | you <u>curr</u> | <u>ently</u> spend i | n direct | |
| | 0 | □ 1 to 19 | □ 20 to 39 | □ 40 o | r more | | |
| 4. | Which best | describes the s | setting in which | you pract | ice? | | |
| 4A. | anization (M | n Maintenance (CO) e specialty group especialty group enment health fa (please specify | practice acility (e.g., VA) | | | ry practice | |
| 5. ' | What perce | ntage of your p | patients are over | the age o | of 50? | | |
| | 1 0% | ☐ 1 to 19% | □ 20 to 39 | % | 1 40% or more | j | |
| 6. | Have you ☐ Yes | ever been diag □ No | nosed with (inse | ert specific | c cancer)? | | |
| 7. can | Has a closecer)? | e family memb | oer ever been dia | agnosed w | th (insert sp | ecific | |
| 8.] | For statistic | al purposes, m | nay I ask: | | | | |

| A. | What year you | graduated from medical school? | |
|-------------|-----------------|-----------------------------------|--|
| 7 =• | vviide year you | graduated if oill incured school. | |

- B. And the year you were born? _____
- 9. Have you participated in any focus groups about (insert specific cancer) in the last six months?

[] NO [] YES

QUESTIONS FOR GENERAL PUBLIC ONLY (FOR ILLUSTRATIVE PURPOSES, ASSUME RECRUITMENT FOR **COLORECTAL CANCER FOCUS GROUPS)**

| 10. Have you | or your spouse ever | <u>r</u> worked for a | any of the fol | lowing types of | f organizations in |
|--------------|---------------------|-----------------------|----------------|-----------------|--------------------|
| a paid | position? | | | | |

- -Doctors office, hospital, clinic, pharmaceutical or drug company
- -Health department or community health agency
- -Marketing, advertising or public relations agency or department

| | -American Cancer Society (ACS) or another cancer organization |
|---|--|
| 11. Do | you have any kind of health insurance to pay for routine health care? |
| | 1 Yes If yes: Which plan or plans? |
| | 2 No |
| | 3 Don't know |
| | |
| 12. | Have you ever been told by a doctor that you have [READ SLOWLY] any sort of bowel disease such as colitis, inflammatory bowel disease, Crohn's disease, colon cancer, or polyps. POLYPS ARE SMALL GROWTHS IN YOUR COLON OR RECTUM. |
| | 1 Yes: Which one/s: 2 No 3 Not sure/don't know |
| 13. Have you, OR your mother, father, brother, sister, or child ever had colo | |
| | 1 Yes |
| | Not sure/don't know |
| 13B. | Have you ever been diagnosed with any kind of cancer? |
| | 1 No |
| | Not sure/don't know |
| | 3 Yes |
| | If yes, ask: What kind of cancer? |
| | For "skin cancer" only skin to O14. For other cancers, ask |

For "skin cancer" only, skip to Q14. For other cancers, ask:

| | | When were you diagnosed? |
|------------------|------------------------------------|---|
| 14. | Whei | n, if ever, was the last time you participated in a focus group? |
| | 1 2 | Have never participated Within the last 6 months: What was the topic? |
| | 3 | More than 6 months ago |
| 15. | When only] | n was your last routine check-up or physical? [Information |
| 16. | Thinl | king about the doctor visits you have had over the last 5 years, have you been tested for: |
| n w 1 y | nedical (vill not f 6a. Hav | Diabetes or "Sugar" Heart problems [Ask Females only] Breast cancer [Ask Males only] Prostate cancer Tyes No Don't know 1 Yes No Don't know 1 Yes No Don't know 1 No Don't know |
| | | 3 Yes If yes: |
| | | Did you <u>complete</u> the test and return the card to the lab or doctor? |
| | | 1 No 2 Don't remember 3 Yes If yes: When was the last time you <u>completed</u> this test? |
| | | [Record answer] Note: If unknown, try to jog memory by asking: Approximately when? [Read] |

- 1 Within 1 year or approximately a year ago
- 2 More than a year ago, but less than 2 years ago
- 3 At least 2 or more years ago
- 17b. Have you ever had a test for which a doctor inserted a tube in your rectum or colon?
 - 1 No
 - 2 Don't know
 - 3 Yes *If yes*:

Do you remember anything about the name of the test or tests? It's OK if you're not sure or don't know the exact pronunciation...anything you remember about the tests or the names will help me:

Record anything the person says:

[OK if they say they don't know the name(s)]

[Read regardless of what person says] **Sigmoidoscopy** (SIG-MOYD-OSS-CO-PEE) **is one common test. The other test is called a colonoscopy** (CO-LON-OSS-CO-PEE).

Both of these tests involve a lighted tube that the doctor inserts into your rectum to view the colon. The sigmoidoscopy is often done in the doctor's office without medication and is relatively simple. The colonscopy uses a longer tube and typically you are given medication to relax and you must be driven home by someone else. Some people confuse these tests with one in which a tube is inserted through the mouth or the nose. That's a different test.

Now that I have explained more about these tests, do you recall whether you have ever had a <u>colonoscopy</u>? That is the test that uses a longer tube and typically involves some medication. Afterwards, someone else must drive you home.

- 1 No
- 2 Yes [Continue with Q below about when colonoscopy was done]
- 3 Not sure [Continue with Q below about when completed to see if this

jogs person memory]

Approximately, when was the last time you had a colonoscopy?

If unknown, try asking...Was it:

Within the last 2 years
Within the last 5 years
5 or more years ago, but less than 10 years
Longer than 10 years ago

- 17c. Do you recall whether you have ever had a <u>sigmoidoscopy</u>? The test is usually done without medication in the doctor's office.
 - 1 No
 - 2 Yes
 - 3 Not sure

| Approximately, | , when was | s the last | time you | had a | sigmoido | scopy |
|----------------|------------|------------|----------|-------|----------|-------|
| Record answer: | | | | | | |

For responses...

Within the last year
Within the last 2-3 years
Within the last 4-5 years

[Terminate]
[Terminate]

5 or more years ago, but less than 10 [Continue] More than 10 years [Continue]

Don't know....*Try to jog person's memory by asking:* Approximately when?

[Read] Was it...

Within the last 2 years [Terminate]
Within the last 5 years [Terminate]
5 or more years ago, but less than 10 years [Continue]
More than 10 years ago [Continue]

- 17d. Have you ever had an x-ray test of your colon, for which you first were given an enema through your rectum and then x-rays of your colon were taken? This usually is called a barium enema, or lower GI test. [Note: If person volunteers that he/she has had a tube down his/her throat or <u>swallowed</u> "chalky stuff," before an x-ray, this is not the same test. OK to continue if test did NOT involve an enema.]
 - 1 No
 - 2 Yes *If yes, ask:* **When was the last time you completed this test?**

| | Record answer: |
|-------|---|
| | Don't know If unknown, ask: Approximately when? |
| | [Read] Was it Within the last 2 years Within the last 5 years |
| | 5 or more years ago, but less than 10 years More than 10 years ago |
| 18. | What is the last grade or year of school you completed? |
| | Less than high school Some high school Completion of high school Some college Completion of college Post-graduate degree |
| 19. | Please stop me when I read the range that includes your total annual household |
| incoı | **Categories will be based on each city/metro region's median household income. Goal is to recruit primarily lower to middle class participants. OK to include some people in "upper middle" income category IF they have never had any screening tests for colorectal cancer. Affluent or very rich are not desired. |
| | Less than or equal to \$ |

INVITATION:

Thank you for answering my questions. We are convening focus groups with (insert general public or health care providers) to discuss (insert specific cancer communication campaign). I hope you will be interested in participating.

| The current options are on (insert day/time) at: | | | | |
|--|--|--|--|--|
| Group 1: | _PM Eastern Daylight TimeOR _PM Eastern Daylight Time | | | |
| Group 2: | PM Eastern Daylight Time | | | |
| Are you available? If | YES: Record contact information on the front. | | | |
| If NO, please ask: | | | | |
| Would you like to be on scheduled? | contacted again about this study if additional times are | | | |
| Yes: Th | ank you. We will contact you if we schedule additional | | | |
| groups. | | | | |
| No | | | | |
| | | | | |