**ATTACHMENT B: Protocol**

**Message Testing: Radiation Emergencies Infographics**

**(Focus Group)**

Leeanna Allen, MPH

Karen Carera, Ph.D.

Florie Tucker, MSN, MBA

Oak Ridge Institute for Science and Education

Armin Ansari, Ph.D.

Centers for Disease Control and Prevention

**Background**

Radiation emergencies, whether intentional (terrorist attack) or unintentional (nuclear power plant accident) can result in concern and fear from the public, even in unaffected areas. Planning for such events is critical to the nation’s overall preparedness for emergency events. Amidst the calamity ensuing from a radiation emergency, a crucial task for federal, state, and local authorities will be communicating clear and consistent messages to the public. Effective communications will be a critical factor in saving lives and minimizing injury.

Previous research by the Radiation Studies Branch on effective communications in a radiation emergency found that visual aids can assist the public in understanding technical concepts related to radiation. Radiation is a topic often feared and misunderstood by the public. To meet this need, the Radiation Studies Branch has developed a series of infographics on various topics related to radiation emergencies. Infographics are visual representations of data, information, or knowledge that tell a story through visual communication. These infographics are intended to provide information such as key life-saving protective action guidance as well as responses to questions anticipated in such an event. Although incident-specific messages and other communications will still be needed, these infographics will enable decision makers and communicators to provide consistent, well developed information in an easily understood format that can address a variety of concerns.

The Radiation Studies Branch of the Centers for Disease Control and Prevention (CDC) provides basic information on radiation and its health effects as well as emergency instructions for individuals and families.  To help ensure the quality of these infographics, CDC wishes to test them with the public. The Oak Ridge Institute for Science and Education (ORISE) is to provide technical assistance.

This protocol sets forth the plan for message testing. It addresses:

* Goal
* Objectives
* Target Audience
* OMB Approval
* Methodology
	+ Audience Segmentation and Screening
	+ Recruiting
	+ Schedule
	+ IRB
	+ Methods of Data Collection
	+ Determining Tokens of Appreciation to Focus Group Participants
	+ Handling of Data and Records

**Goal**

Explore the effectiveness of radiation emergency infographics prepared for the CDC Radiation Emergencies website. A total of 192 burden hours is requested.

**Objectives**

1. Determine whether infographics effectively communicate radiation emergency topics.
2. Evaluate the extent to which infographics are relevant, comprehensible, credible, appealing, & motivate desired actions.

**Target Audience**

The target audience for this research is the public.

All participants will:

* Be at least 18 years of age
* Have at least some high school education
* Be comfortable conversing in English

**OMB Approval**

CDC will seek OMB approval through its existing broad-based agency approval for message testing [Health Message Testing System (HMTS)]. CDC is encouraged to use questions from a pre-approved question bank in developing data collection instruments. Questions from the pre-approved question bank will focus on the following areas:

* Comprehension
* Initial Impressions
* Believability
* Persuasiveness
* Self-protection motivation/Self efficacy
* Content & Wording
* Appearance

**Methodology**

**Audience Segmentation and Screening**

Testing will take place in four major metropolitan areas.

Across groups at each location, the respondents will provide approximate representation reflective of the community (with the exceptions described below) in terms of:

* Gender
* Age
* Education
* Race/ethnicity

It is understood that with the small number of respondents per group, and the relatively small number of respondents per city, it will not be possible to have respondents representing all combinations of characteristics in one group or even across groups for that city.

No respondents or members of their immediate family will be employed in any of the following fields:

* Advertising
* Public relations
* Market research
* Media
* Health care
* Public Health
* Health physics or related fields involved with radiation

The screening instrument is included as Attachment C.

**Recruiting**

Recruiting will be conducted through the market research facilities at which sessions are to be conducted, under the supervision of ORISE. Variations from this protocol must be approved by OMB, CDC and ORISE.

Peters Marketing Research, Inc.
The Paragon Building
12400 Olive Boulevard, Suite 225
Creve Coeur, Missouri 63141 (314) 469-9022

 http://www.petersmktg.com

Schlesinger Associates

The Palisades Building, Suite 590

5909 Peachtree Dunwoody Rd.

Atlanta, GA 30328

(770) 396-8700

http://www.schlesingerassociates.com/our\_locations/usa/atlanta.aspx

Opinions Unlimited

Three Riverway, Suite 250

Houston, TX 77056

(713) 888-0202

http://www.opinions-unlimited.com/

Schlesinger Associates in Phoenix, AZ

2355 East Camelback Rd, Suite 800

Phoenix, AZ 85016

(602) 366-1100

http://www.schlesingerassociates.com/our\_locations/usa/phoenix.aspx

Numbers of prospective respondents to be recruited are as follows:

* 8 prospective respondents per group
* 3 groups per city-day
* 4 cities
* 12 groups total
* 96 prospective respondents total

Any changes must be approved by OMB, CDC and ORISE before they are made.

**Schedule**

In each city data are to be collected in one day, with groups conducted as follows:

* 3:30 – 5:00 pm local time Group 1
* 6:00 – 7:30 Group 2
* 8:00 – 9:30 Group 3

**IRB**

Prior to participating in the study, each prospective respondent will receive an information sheet providing such information as sponsorship of the study, their rights as participants, risks and benefits in participating, and contacts for more information (Attachment D - Participant Information Sheet). Because this study presents no more than minimal risk and involves no procedures for which written consent is normally required outside of the research context, signatures for informed consent will not be obtained.

**Methods of Data Collection**

Data are to be collected by means of focus groups where eight prospective respondents are to be recruited. ORISE personnel will address any questions the participants have regarding the study before the session begins. Discussions are expected to last 90 minutes.

The moderator’s guide is included as Attachment E.

For all

Focus groups are to be conducted at commercial market research facilities, using a professional moderator, Dr. Mark Herring, who will facilitate the groups.

Observers from CDC and ORISE may observe the groups from behind one-way mirrors or live-video streaming.

All sessions will be conducted in English. Participants will be screened for those comfortable conversing in English.

Sessions will be recorded (audio only), and transcripts will be prepared. Facilities will provide two copies of audio recordings of each session. No videotaping is to be conducted.

The possibility exists that some participants will find contemplation of such subject matter upsetting. A subject-matter expert will come in to each group at its conclusion, make a few brief remarks (e.g., thank respondents for their contribution to an important effort), and answer questions for several minutes. If no subject-matter expert is available, participants will receive contact information for CDC’s Radiation Studies Branch.

**Determining Tokens of Appreciation to Focus Group Participants**

Gift cards are offered as a token of appreciation for focus group participants’ willingness to engage in the project. The monetary amount offered, $40 per participant, is impacted by a number of variables for this project, including the following:

* Total participation time of 1.5 hours: length of the focus group
* Specifications that each participant has to meet to participate in the study
* Recommendations from the market research facilities

Gift cards are neutral (not connected with a company, service or product) and have universal utility. It is usually more cost-effective and efficient to offer a monetary token of appreciation, attractive by the participant, to mitigate the cost of the recruitment. The amount needs to be high enough that participants feel like it is worth their time to participate and cannot be so low that participants perceive their time and candid responses are under-valued. Likewise, incentives cannot be so high that participants become skeptical as to the intention of the focus group.

In our experience, it is most cost effective to offer the recruiter-recommended amount, which results in a better show rate and lower recruiting fees. Recruiters from the market research facilities know from experience what various market segments expect to receive. Recruiters will be paid solely for the length of time required to recruit participants. They will have no monetary gain based on the recommended dollar amount of the gift card.

**Handling of Data and Records**

Facilities will provide only the qualifications for screening criteria to ORISE personnel. The moderator will keep the first name only during the focus group, and will not deliver names - first or last – to ORISE or CDC. First name and last name will be stripped from records sent to ORISE. No personal identifiers (e.g., last name, last initial, address, completed screening instruments) are to be provided to ORISE or CDC.

ORISE will maintain no identifiers connecting any data collected to any particular respondent; neither will it provide any personal identifiers to CDC or others. Firms which conduct recruiting and host sessions will be required to not provide personal identifiers to ORISE or CDC.

Additionally, ORISE will:

* Retain one set of audio recordings, and at least one copy of any report it produces
* Develop a report in an agreed-upon format summarizing the responses provided by participants; the report will contain no personal identifiers -- that is, information sufficient to determine the identity of any participant (e.g. first and last name, address)
* Deliver the report and one set of recordings to CDC;
* Not deliver to CDC or others any personal identifiers of participants;
* Retain records and audio recordings for three years, then burn, shred, or otherwise destroy them.