**Health Message Testing System Expedited Review Form**

1. **Title of Study: (Please append screener and questionnaire)**

Communities Putting Prevention to Work (CPPW) National Media Initiative — Message Testing

1. **Study Population: (Discuss study population and explain how they will be selected/recruited.)**

The study population will be the general public. Participants will be recruited through random-digit-dialing of both landline and cell-phone-only households. Participants will be recruited from zip codes that have a high prevalence of people with characteristics of interest, including zip codes with a diverse mix or race/ethnicity. Participants will be selected from the general public because the messages may be used in both current CPPW communities as well additional communities in the future.

Respondent characteristics:

 Number of subject: 300 Number of males: 150

 Age range: ≥24 Number of females: 150

 Race/ethic composition:

No racial/ethnic quotas. Participants will be a mix of race/ethnicity.

Special group status: (e.g., risk group, health care providers)

|  |  |
| --- | --- |
| Type of group(s):  | General public  |
|  |  |
| Geographic Location(s): | United States, including Hawaii and Alaska |

**3. Incentives: (State what incentive will be offered and justify proposed incentives to be used in study.)**

Participants will not receive an incentive for their participation.

**4. Study method:** (Please check **one** below)

Central location intercept interview: Focus group: \_ \_

Online Interview: \_\_\_ Individual in-depth interview (cognitive interview): \_\_\_

Telephone Interview: \_X\_ (CATI used: yes or no): \_ Yes\_

Other (describe): \_\_\_

**5. Purpose of the overall communication effort into which this health message(s) will fit:**

 (Please provide 2-3 sentences below.)

The Centers for Disease Control and Prevention (CDC) is conducting message testing to supplement the multiple communication efforts currently underway for the Communities Putting Prevention to Work (CPPW) initiative. CDC staff are in need of current information to address the following overarching question: What messages or language do we use to talk about obesity-related issues with multiple audiences across the United States?

**6. Category of time sensitivity: (**Please check one below**)**

Health emergency: \_\_\_ Time-limited audiences access: \_\_\_

Press coverage correction: \_\_\_ Time-limited congressional/administrative mandate: \_\_\_

Trend Tracking: \_\_\_ Ineffective existing materials due to historical events/social trends: \_X\_

**7. Describe nature of time sensitivity: (Please provide 2-3 sentences below.)**

The CDC CPPW initiative sought to achieve broad-reaching, high-impact, and sustainable change to reduce chronic disease morbidity and mortality associated with obesity and tobacco use by working with grantee communities to develop and place local media buys using creative materials from an approved pool of content. However, some approved content has not yet been tested. It is imperative that CDC implement message testing efforts in the immediate future to ensure that CDC resources are used to promote messages that support environmental change.

**8. Number of burden hours requested:** 60 hours

**BURDEN HOURS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent** | No. of Respondents | Participation Time | Burden |
| General Public | 300 | 12 minutes | 60 hours |
| **Totals** | **300** | **12 minutes** | **60 hours** |

**9. Are you using questions from the approved question bank?** Yes

If **yes**, please list the item number(s) for questions used from the question bank separated by a comma.

(e.g., 1a, 3c, 130d)

1a, 4a, 6d, 13a, 51f, 69e

**\*\*\*Items below to be completed by Office of Associate Director for Communication (OADC)\*\*\***

1. Number of burden hours remaining in current year’s allocation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. OADC confirmation of time-sensitivity:

Yes: \_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

No: \_\_\_  **Project Officer**