# Project Description for Determination of Exemption from Human Subjects Review

# Title: Knowledge, Attitudes, and Practices about Travel Health among Aid Agency Staff and Volunteers

**Summary:** The popularity of international mission trips and short-term humanitarian volunteer missions has meant that large numbers of people are now visiting foreign destinations and coming into contact with tropical diseases and health risks that are unfamiliar to the average American. In particular, dengue fever, chikungunya fever, and now Zika fever are vector-borne diseases that are present in many tropical and subtropical regions. The World Health Organization (WHO) estimates that there are over 100 endemic countries and areas where dengue can be transmitted. As of May 30, 2014, PAHO/WHO reported 4,406 confirmed cases of chikungunya as a result of local transmission for the first time in the Americas, and it remains an important health threat for travelers to Africa, Asia, and islands in the Indian Ocean and Western Pacific. As of September 29, 2016, PAHO/WHO also reported mosquito-borne evidence of Zika in 71 countries or territories since 2015, 12 countries reported person-to-person transmission of Zika and 47 reported local transmission in the Americas and the Caribbean for the first time. Of the 71 countries, 21 reported microcephaly and other neurologic malformations potentially associated with a Zika virus infection and 18 reported an increase in Guillain-Barre Syndrome (GBS) related to a Zika virus infection. Most travelers do not seek pre-travel medical care before going abroad. Of those who do, most see a primary care provider who might not be trained in travel medicine. Unlike traditional tourists, missionary and humanitarian aid travelers may stay in rustic conditions in rural areas, and may be unaware of the risks to their health. Furthermore, travel health messages may not always reach these unique travelers. An exploratory study of health messaging was conducted in 2010 with travel agents and staff from mission and humanitarian organizations (also known as sending agencies). The purpose was to gather information about what pre-travel health recommendations were made to these travelers, determine their sources of information, and identify ways to improve adherence to general travel health and safety guidelines, particularly regarding dengue fever. The study found that travel agents and mission/humans service organization provided some information about safety and health issues primarily regarding vaccinations. While traditional travel agents primarily relied on travelers to look for pre-travel health consultation on their own such as through a state health department websites or Google, sending agencies provided a direct link to CDC’s Travelers’ Health website, but said the website should be more-user-friendly. Sending agencies showed more interest in learning about dengue prevention and informing travelers during pre-travel training and by using electronic-based educational materials. Ultimately, the burden for understanding personal health and safety risks appeared to be treated as the responsibility of the individual traveler rather than of the sending or travel agency. This work also focused on dengue and did not include knowledge related to chikungunya; very little is known about these types of aid workers and their understanding of chikungunya. There is a significant need to determine how to: improve outreach to missionary/humanitarian organizations regarding health risks, develop appropriate mosquito-borne disease prevention messages, develop a more user-friendly and interactive dengue, chikungunya, and Zika website, and determine the best way to report dengue, chikungunya, and Zika fever among travelers.

**Current Knowledge/Justification:** TwoMMWRs were published in June 2010 and July 2011 reporting dengue fever in two groups of missionaries returning from the Caribbean. The first was a group of missionaries from Iowa and Minnesota that traveled to the Dominican Republic in 2008 of which at least 42% (14/33) were diagnosed with dengue fever upon return to the US. The second was a group of 28 missionaries from Georgia and Nebraska of which 7(25%) had diagnosed dengue virus (DENV) infection after travel to Haiti; five of these missionaries were hospitalized.

Of the missionaries to the Dominican Republic, none of those interviewed were aware of dengue fever as a health threat in the Caribbean and none had sought travel health information from online sources before departure. Only two had visited a health care provider or travel health clinic for pre-travel information, and neither had discussed dengue with the provider. However, dengue is a significant health threat in the Dominican Republic, with nearly 10,000 cases reported in the country in 2007. The study of missionaries returning from Haiti found that 19 of the 21 (90%) had a pre-travel healthcare appointment, 12 (57%) sought pre-travel advice on Internet, and 10 (48%) reported pre-travel knowledge about dengue. Although 10 (48%) of these missionaries reported being bitten by mosquitoes, only five (24%) said they used repellents multiple times a day. Reportedly, 10 (48%) wore long pants and two (10%) wore long-sleeve shirts more than one day. Previous studies reported dengue among military personnel deployed to Haiti and high DENV seroprevalence among Haitian children.

A review of the literature highlighted travel agents as the best source to provide pre-travel health information. For example, Hamer and Conner (2004) found that 50% of US travelers interviewed in an airport survey considered travel agents to be their primary source of general pre-travel information. Both Provost and Soto (2001) and Crockett and Keystone (2005) also found that a recommendation to visit a travel health clinic, as provided by a travel agent, was the single most important factor predicting pre-travel health consultations. Regarding dengue, over 50% of surveyed agents in Ivatts, *et. al.* (1999) “usually” gave some broad guidelines and recommended seeing a travel health provider, but the majority also incorrectly answered questions about dengue fever. Most responding travel agents in this study expressed an interest in becoming more involved in providing health information. However, our study reported that although travel agents advised travelers to look for pre-travel information regarding safety and vaccinations in the Internet, they demonstrated little interest in providing health information directly to travelers.

Travel health clinics/physicians are the best resource for pre-travel health information, yet their services are greatly underutilized. La Rocque *et. al*. (2010) found that of the 476 survey respondents residing in the US and traveling to low or low-middle countries, 54% sought health advice prior to departure. The internet (43%) and primary care providers (385) were the most common sources of health information, followed by travel medicine specialists (30%). Travel agents/trips organizers constituted 9% of the sources of health information among travelers. Because some of the sending agencies provided some form of travel assistance when planning trips and a few provided pre-travel training themselves, they could supply a valuable point for an intervention to address this knowledge gap and a good liaison to contact and promote travel health clinics/medicine specialist. In analyzing travel health behaviors using the Health Belief Model, Crockett and Keystone (2005) identified improved health practices (i.e., vaccine uptake )when travelers were both aware of the potential risks on their trip and given access to appropriate pre-travel health information. Sending agencies (missionary organizers and humanitarian organizations) are in the unique position of being able to address both of these issues with their volunteers and can raise awareness of the importance of health and safety while abroad.

**Study Design and Locations:** Focus group discussions will be conducted online with adult employees and missionaries of international humanitarian/aid organizations. Potential participants will be selected based on self-identified experience participating in or organizing international trips. Direct recruitment will take place via two approaches: 1) we will identify and make a list of potential missionary and humanitarian organizations using online information, and 2) snowball suggestions (key informants identify others who know about the topic or who the researcher should contact). We will contact target agencies via phone explaining the goal of the focus groups and request to speak with the most appropriate person. If this “cold calling” approach is unsuccessful we will send email requests to introduce the study ahead of time and place follow-up phone calls. If they agree to participate, we will send the date, time and internet link for joining focus groups sessions. We will conduct one to three focus groups with each sending agency for a range of 3 to 9 focus groups and a range of 18 – 90 individual participants.

This study is limited to adults; age will be assessed via self-report, prior to initiating the consent process. Before participation and during telephone calls, focus group participants will be explicitly asked their age to ensure they are legal adults (minimum age 18 years for the US and age 21 years for Puerto Rico) (Attachment A – Script for Telephone Calls to Screen and Recruit Participants of Focus Groups with Staff and Missionaries of Sending Agencies). Potential respondents who are below the age of majority (21 for Puerto Rico) will be excluded. Verbal consent will be sought from all participants. Participants will be asked about their knowledge, attitudes, and practices (including personal protection measures to avoid illness while traveling abroad) regarding travel health and specifically dengue, chikungunya and Zika. Sending agencies will also be asked about the health and safety recommendations they currently make to their volunteers regarding international travel and surveyed on the potential usefulness and content of CDC’s travel health information.

**Study Objectives:**

1. Identify barriers and facilitating factors for the routine implementation of pre-travel health consultations.
2. Identify preferred routes for travel health and disease prevention information, with a specific focus on large groups traveling internationally, as with short-term missionaries and other humanitarian groups.
3. Gather information that will assist in the creation of educational materials for missionary and humanitarian aid volunteers.
4. Determine interest and best mechanism to report illness for surveillance purposes.

**Specific Research Questions** will include:

1. **Sending agencies**

* How many international group trips would you estimate that you’ve worked with in the past year?
* What regions (e.g. Africa, Latin America and the Caribbean, Southeast Asia and the Pacific Islands, North America) do you primarily organize trips for?
* Which type of trips do you help organize: trips for large or small groups, long-term or short- term trips? How does coordination of these types of trips differ? How is it the same?
* How often do you provide travel health and safety information to your volunteers?
* Where do you most often go when looking for travel health information? (ex. travel health clinic, general medical doctor, CDC website, general travel guides, etc.)
* If you have visited CDC’s website to seek travel health information, how would you describe this site? What about the site was easy to use? What was difficult to use? What would you like to see changed?
* How comfortable do you feel providing health and safety information to your volunteers?
* How often do you refer your volunteers to a travel health clinic for more specific information?
* If CDC were to produce some educational materials intended for short-term mission groups, would you or your organization be interested in distributing them to your volunteers? What format would you find most useful? (ex. brochures, posters, email templates).
* Would you personally be interested in learning more about travel health recommendations for popular destinations? How would you most like to receive this information? Do you think you would share this information with your volunteers?
* What sort of health and safety recommendations do you make for volunteers traveling to the Caribbean? Southeast Asia?
* What do you know about diseases that are carried by mosquitoes?
* Have you ever heard of dengue fever? What do you know about dengue fever?
* Have you ever heard of chikungunya fever? What do you know about chikungunya fever?
* Have you ever heard of Zika fever? What do you know about Zika fever? How Zika differs from dengue and chikungunya?
* Do you give your travelers advice on how to avoid mosquito bites? What do you tell them specifically? Do you think these measures are effective?
* Do you receive reports from your volunteers about illness? Would you be interested in receiving reports from your volunteers about illness? How could volunteers report illness to you?

1. **Volunteers**

* In how many international trips have you participated in the past year?
* What regions have you visited (e.g. Africa, Latin America and the Caribbean, Southeast Asia and the Pacific Islands, North America)?
* How long have you stayed? In what type of accommodations have you stayed in during the trips?
* What are your main concerns for health and safety before beginning travel? How much of a concern are health issues for you when thinking about your travel?
* How often do you look for travel health and safety information? When do you look for this information?
* Where do you most often go when looking for travel health information? (ex. travel health clinic, general medical doctor, CDC website, general travel guides, etc.)
* If you have visited CDC’s website to seek travel health information, how would you describe this site? What about the site was easy to use? What was difficult to use? What would you like to see changed?
* Did you receive any training from your organization before your trip? How often do you receive pre-travel training from your organization? What type of information do you receive?
* Would you be interested in learning more about travel health recommendations for popular destinations? How would you most like to receive this information?
* If CDC were to produce some educational materials intended for short-term mission groups, would you be interested in receiving them? What format would you find most useful? (ex. brochures, posters, email templates).
* What do you know about diseases that are carried by mosquitoes?
* Have you ever heard of dengue fever? What do you know about dengue fever?
* Have you ever heard of chikungunya fever? What do you know about chikungunya fever?
* Have you ever heard of Zika fever? What do you know about Zika fever? How Zika differs from dengue and chikungunya?
* Do you worry about diseases carried by mosquitoes? How worried are you?
* How can you prevent mosquito bites? Do you think that prevention measures are effective?
* Would you be interested in notifying someone if you get sick during the trip? How could you report if you get sick to your organization?

**■ PROCEDURES/METHODS**

***Timeline:***

October, 2016: Update and submit amended protocol for Human Subjects and OMB approval

October-December, 2016 Update the list of Mission and Humanitarian Organization in the continental United States

and Puerto Rico

January-April, 2016: Coordinate and Conduct interviews

May-September, 2016: Analyze notes

September-December, 2016: Produce educational materials; develop scientific manuscript for publication

***Study Population:*** This study will involve focus groups with 30 – 90 individual participants; staff and volunteers from sending agencies. This study is limited to adults. Questions will be asked only about the participants’ general practices.

|  |  |  |  |
| --- | --- | --- | --- |
| Group | Number of focus group participants | Maximum N of focus groups | Maximum sample size |
| Missionary/Humanitarian Agency 1 | 8-10 | 3 | 30 |
| Missionary/Humanitarian Agency 2 | 8-10 | 3 | 30 |
| Missionary/Humanitarian Agency 3 | 8-10 | 3 | 30 |
| TOTAL |  |  | 90 |

***Consent:*** Before participation, focus group participants will receive an electronic copy of the consent form (Attachment B – Verbal Consent for Participants of Focus Group Regarding Travel Health Messages) prior to the beginning of the online focus group discussion. At the beginning of the online focus group, the moderator will read the consent form along with the participants and will ask participants to verbally consent. Participants will be informed about the purpose of the research, and that participation is strictly voluntary, that they may decline to answer any or all questions and they may withdraw from participation at any time. Verbal consent will be obtained from all participants as focus groups will be conducted via internet using Adobe Connect.

***Role of CDC personnel:* C**DC moderators (from Travelers’ Health or Dengue Branch) will conduct the focus groups with participants and will brief participants on the focus group discussion process before each group session begins (e.g. the importance of speaking one at a time; there is no wrong or right answers, all opinions are welcome; the presence of note takers to record answers and that audio will be taped; the voluntary nature of participation; that no individually identifiable information will be collected during the group discussion Attachment C – Instructions for the Participation in Focus Group Discussions). CDC personnel will also conduct the educational materials review. Analyses (as detailed below) will also be conducted by CDC staff.

***Data Storage and Analysis:*** No personally identifiable information will be collected.Focus group sessions will have a moderator and a note taker from CDC and discussions will also be digitally audio taped for verbatim transcription. Names of participants will not be recorded. Data will be stored at CDC’s Dengue Branch. Carmen Pérez, a behavioral scientist from CDC’s Dengue Branch, will oversee data analysis. Joanna Gaines, a behavioral scientist from CDC’s Travelers’ Health Branch, will serve as a secondary coder to ensure inter-rater reliability. A thematic and content analysis of the notes from focus groups discussions will be performed. Notes and transcriptions from audio tapes will be compiled and coded under categories which will be developed based on study objectives. Categories will later be arranged by themes for discussion.

Supplemental Information regarding Protection of Human Subjects

**■ Description of Risks:** There are no physical, social or psychological risks to subjects anticipated due to participation in this research.

Participation in the focus groups is not expected to place participants at risk for negative social stigma or other negative effects.

**■ Anticipated Benefits:** Participants in this project will have the opportunity to discuss their current knowledge, attitudes, and practices regarding travel health dissemination to their clients and be given links to the CDC travel health website for more information.

**■ Vulnerable populations:** Participants will be recruited from non-incarcerated persons. All participants will be adults. We will be asking for the participation of sending agencies and missionaries/volunteers with experience in organizing international group travel or participating in this type of travel. It is possible that pregnant women could be recruited to participate (they will not be excluded); however participation in this research is not expected to pose any risk to pregnant women or their fetuses. No questions will be asked about individual participants.

**■ Protection of Privacy and Confidentiality:** Focus group moderators are expected to treat statements made by participants as confidential. When data are used in reporting research findings, they will be presented in such a way that participants will not be able to be identified.

**Explanation of why this project is exempt:**

All participants in this research are adults. Prisoners will not be part of the population being recruited for this study. There are no physical, social or psychological risks to subjects anticipated due to participation in this research. The subject matter (travel health information dissemination) is not one that is expected to cause social stigma or controversy. The research will involve focus group sessions. The subjects will not be able to be identified either directly or indirectly from the information that appears in the final data set. Disclosure of the subjects’ response outside of the research setting (such as in a journal publication) would not have the potential to place the subjects at risk of criminal or civil liability or be otherwise damaging – the subject matter is unlikely to contain sensitive information and responses will not be traceable to the subjects.

**Attachment A – Script for Telephone Calls to Screen and Recruit Participants of Focus Groups with Staff and Missionaries of Sending Agencies**

Hello, my name is \_\_\_\_\_\_. I work with the Centers for Disease Control and Prevention. Before we begin, can I ask you to confirm that you are over 18 years of age (in the US and 21 in Puerto Rico)? Does your agency plan travel outside the Unites States? (If no, ask to speak to a person over 18 years.) We are talking to sending agencies like yours to know about the health information that your volunteers get when they travel out of the country. We want to learn what volunteers know about travel health and how you share this information with them. This will help us improve our health messages especially, about dengue, chikungunya and Zika.

We are inviting you to participate in focus groups online. We will like your help to contact volunteers to participate in discussion groups online. Participation is voluntary. If you like to take part, I will you send an email with a consent sheet and the date, time and internet link for the focus groups. Will you like to take part?

Readability Index: 6.7 (seventh graders)

**Attachment A Spanish version – Guión para realizar las llamadas telefónicas para Cernir y Reclutar los Participantes de los Grupos Focales con Personal y Misioneros de Agencias de Servicios Humanitarios**

Hola, mi nombre es \_\_\_\_\_. Trabajo con los Centros para el Control y Prevención de Enfermedades. Antes de comenzar, ¿puedo pedirle que confirme si es mayor de 18 años de edad (en los Estados Unidos y 21 si es en Puerto Rico)? (Si no es mayor de edad, pida hablar con una persona mayor de 18 años). Estamos hablando con agencias de servicios humanitarios como la suya para conocer sobre la información de salud que sus voluntarios obtienen cuando viajan fuera del país. Queremos conocer qué saben sus voluntarios sobre salud del viajero y cómo ustedes comparten esta información con ellos. Esto nos ayudará a mejorar nuestros mensajes de salud, especialmente, sobre el dengue, el chikungunya y el zika.

Le estamos invitando a participar en nuestros grupos de discusión en línea. Nos gustaría contar con su ayuda para comunicarnos con otros voluntarios para participar en grupos de discusión en línea. La participación es voluntaria. Si quiere participar, le enviaré un correo electrónico con una hoja de consentimiento y la fecha, hora y enlace de Internet para los grupos de discusión. ¿Quiere participar?

Índice de Legibilidad: 76.9 (grado 7)

**Attachment B – Instructions for the Participation in Focus Group Discussions**

Thank you for taking the time to participate in this group discussion.

Before we begin, is this a group session of staff from sending agencies or is this a group of missionaries or volunteers?

To guide the discussion we will follow these instructions.

* Please, do not say your name out loud during the discussion. We will not use your personal information. We will erase from the conversation if by any chance you say your name or other information that could identify you.
* We will assign you a number. Please, state your number before speaking. It will help you to introduce yourself before speaking. Also, it will help us to follow your comments.
* Wait until the speaker finishes speaking to start talking.
* Speak slow, loud and clear. We will take notes while we’re talking in order to better help me remember our conversation.
* This whole discussion is voluntary. If there is a question that you don’t want to answer, you don’t have to.
* There are no right-or-wrong answers for these questions. It’s important to say what you think. If you want to end your participation at any time just tell me.

Please keep in mind that your opinion will help us to improve our health messages.

Thanks.

Grade Level: 5.2

**Attachment B Spanish Version – Instrucciones para la Participación en las Discusiones de Grupos Focales**

Gracias por tomar de su tiempo para participar en este grupo de discusión.

Antes de empezar, ¿es este un grupo de personal de las agencias que envían voluntarios o es un grupo de misioneros?

Para guiar la discusión vamos a seguir estas instrucciones.

* Por favor, no diga su nombre durante la discusión. No usaremos su información personal. Si usted dice su nombre u otra información que pueda identificarlo, lo borraremos de la grabación.
* Le daremos un número. Por favor, diga su número antes de hablar. Le ayudará a presentarse antes de hablar. Y, nos ayudará a seguir sus comentarios.
* Espere hasta que el hablante termine de hablar para comenzar a hablar.
* Hable lento, fuerte y claro. Vamos a tomar notas mientras hablamos para ayudarnos a recordar mejor nuestra discusión.
* Toda esta discusión es voluntaria. Si hay una pregunta que no desee contestar, no tiene que hacerlo.
* No hay respuestas buenas o malas para estas preguntas. Es importante decir lo que piensa. Si desea terminar su participación en cualquier momento, me lo dice.

Por favor, piense que su opinión nos ayudará a mejorar nuestros mensajes de salud.

Gracias.

Índice de legibilidad: 80.1 (grado 6)

**Attachment C – Verbal Consent for Participants of Focus Group Regarding Travel Health Messages**

**Intro:** Thank you for taking the time to talk with me. Before we begin, can I ask you to confirm that you are over the age of 18 (for US residents or 21 for Puerto Rican residents)? (If person cannot confirm, give thanks and ask them to end participation.) My name is (x) and I work with Centers for Disease Control and Prevention in \_\_\_\_\_\_\_\_\_\_\_ (Atlanta, Georgia; San Juan, Puerto Rico). We are talking with sending agencies like yours about travel health information, especially for volunteer groups traveling internationally. We want to learn what people know about travel health and how they share that information with their volunteers. This will help us to improve our health messages.

* I’d like to talk to you for about 20 minutes– how long is up to you and the time you have available. We are inviting you to participate in a focus group session online.
* I won’t ask for the name of anyone in your family or any of your organization’s members.
* Our discussion will be confidential, to the extent allowed by law – that means whatever you tell me doesn’t get repeated to other people in the community. I might ask other people the same questions, but I won’t repeat to them what you say.
* We will be writing up a report from these discussions, and I might include some of the ideas that you give me, but I won’t use your name or anything else to identify you.
* I will take notes while we’re talking in order to better help me remember our conversation.
* This whole discussion is voluntary. If there is a question that you don’t want to answer, you don’t have to. There are no right-or-wrong answers for these questions. It’s important to say what you think. If you want to end our discussion at any time just tell me.

So, given these points are you OK with being in our group discussion?

Thanks.

Grade Level: 6.7

**Attachment E Spanish Version– Consentimiento Verbal para Participantes de Grupos Focales sobre Mensajes de Salud al Viajero**

**Introducción:** Gracias por tomarse el tiempo para hablar conmigo. Antes de comenzar, ¿puedo pedirles que confirmen que son mayores de 18 años (para residentes de Estados Unidos o 21 para residentes de Puerto Rico)? (Si algún participante no es mayor de edad, por favor dele las gracias e indíquele que no puede continuar participando). Mi nombre es (x) y yo trabajo con los Centros para el Control y Prevención de Enfermedades en \_\_\_\_\_\_\_\_\_\_\_ (Atlanta, Georgia; San Juan, Puerto Rico). Estamos hablando con las agencias que envían voluntarios como la suya, o con sus voluntarios, sobre información de salud de viaje, en especial para los grupos de voluntarios que viajan al extranjero. Queremos saber lo que la gente sabe acerca de la salud al viajero y cómo comparten esa información con sus voluntarios. Esto nos ayudará a mejorar nuestros mensajes de salud.

* Me gustaría hablar con ustedes alrededor de 20 minutos- cuánto tiempo usted desea hablar depende de ustedes y el tiempo que tengan disponible. Les invitamos a participar en una sesión de grupo focal en línea.
* No voy a pedir el nombre de ningún familiar o cualquiera de los miembros de su organización.
* Nuestra discusión será confidencial, en la medida que la ley lo permita - que significa que todo lo que me digan no se repetirá a otras personas en la comunidad. Yo podría preguntar a otras personas las mismas preguntas, pero no voy a repetir a ellos lo que ustedes digan.
* Vamos a escribir un informe de estas discusiones, y podríamos incluir algunas de las ideas que usted me den, pero no vamos a usar sus nombres o cualquier otra cosa para identificarlos.
* Vamos a tomar notas mientras hablamos para ayudarnos a recordar mejor nuestra conversación.
* Toda esta discusión es voluntaria. Si hay una pregunta que no desean contestar, no tienen que hacerlo. No hay respuestas buenas o malas para estas preguntas.
* Es importante decir lo que piensan. Si desean finalizar nuestra discusión en cualquier momento sólo díganlo.

Siendo que entienden estos puntos, ¿quieren ustedes estar en nuestra discusión de grupo?

Gracias.

Índice de legibilidad: 84.1 (grado 6)

**Attachment D Spanish Version –** Guía de Preguntas del Moderador para realizar Grupos Focales con las Organizaciones de Misioneros y Voluntarios

1. ¿Cuántos viajes internacionales coordinó el pasado año?

2. ¿Hacia qué regiones generalmente coordina los viajes? (Ejemplo; África, América Latina y el Caribe, del sudeste de Asia y las islas del Pacífico, América del Norte).

3. ¿Qué tipo de viajes ayuda a coordinar, viajes a largo plazo o viajes a corto plazo? ¿Coordina viajes para grupos pequeños o viajes para grupos grandes? ¿En qué se diferencian? ¿En qué se parecen? (Sondeo: ¿En qué tipo de alojamiento se han quedado durante los viajes?)

4. ¿Con cuánta frecuencia ofrece información sobre seguridad y salud del viajero a sus voluntarios?

5. ¿A dónde va generalmente para buscar información sobre salud del viajero? (ejemplo; clínica de salud del viajero, médico en medicina general, sitio web de CDC, guías de viajes en general, etc.).

6. Si usted ha visitado el sitio de web de CDC para buscar información sobre salud del viajero, ¿cómo describiría este sitio de web?

7. ¿Qué cosa de este sitio web le resultó fácil de usar? ¿Qué cosa fue difícil de usar? ¿Qué le gustaría que cambiara?

8. ¿Cuán cómodo se siente ofreciendo información de salud y seguridad a los voluntarios? ¿Se siente preparado para hablar sobre temas de salud? ¿De seguridad?

9. ¿Con cuánta frecuencia usted refiere a sus voluntarios a clínicas de salud para viajeros para obtener información más específica?

10. Si el CDC fueran a producir un material educativo dirigido a grupos de misioneros que viajan por periodos cortos, ¿estaría usted o su organización interesado en distribuirlo entre sus voluntarios? ¿En qué formato lo encontraría más útil? (folletos, afiches, formatos de correo electrónico).

11. ¿Estaría interesado en aprender más sobre las recomendaciones de salud para viajes a los destinos más populares? ¿Cómo le gustaría recibir esta información? ¿Daría usted esta información a sus voluntarios?

12. ¿Qué tipo de recomendaciones de salud y seguridad hace a voluntarios que viajan al Caribe? ¿Y a los que viajan al sudeste de Asia?

13. ¿Qué sabe usted sobre las enfermedades que son transmitidas por mosquitos?

14. ¿Ha escuchado hablar sobre dengue? ¿Qué sabe usted sobre el dengue?

15. ¿Ha escuchado hablar sobre chikungunya? ¿Qué sabe usted sobre el chikungunya?

16. ¿Ha escuchado hablar sobre el zika? ¿Qué sabe usted sobre el zika? ¿Cómo se diferencia el zika del dengue y el chikungunya?

17. ¿Ha dado algún consejo a sus viajeros sobre cómo evitar las picaduras de mosquitos? ¿Qué les ha dicho específicamente? ¿Cree que estas medidas (consejos) son efectivas?

18. ¿Recibe informe de sus voluntarios cuando se enferman durante el viaje? ¿Estaría interesado en recibir algún informe cuando sus voluntarios se enferman? ¿Cómo los voluntarios le podrían reportar si han tenido de alguna enfermedad durante el viaje?

Índice de legibilidad – 70 – (grado 7)

Attachment A -Spanish Version- Guía del Moderador de grupos de enfoque con los Voluntarios

1. ¿En cuántos viajes han participado en los últimos tres años?
2. ¿Qué regiones han visitado en los últimos tres años (por ejemplo, África, América Latina y el Caribe, el sudeste de Asia y las islas del Pacífico, América del Norte)? ¿Por cuánto tiempo se han quedado?
3. ¿En qué tipo de alojamiento se han quedado durante los viajes?
4. ¿Cuáles son sus principales preocupaciones de salud y seguridad antes de comenzar el viaje? ¿Cuánta preocupación les causan los problemas de salud cuando piensan en un viaje?
5. ¿Con qué frecuencia buscan información sobre salud y seguridad del viajero de su lugar de viaje? ¿Cuándo buscan ustedes esta información?
6. ¿A dónde se dirigen más cuando buscan información de salud del viajero? (Ej. En clínicas de salud del viajero, médico en medicina general, el sitio web de los CDC, guías generales de viaje, etc.).
7. Si usted ha visitado el sitio web de los CDC para buscar información de salud del viajero, ¿cómo describiría el sitio? ¿Fue fácil de usar? ¿Qué fue difícil de usar? ¿Qué te gustaría que cambiara?
8. ¿Recibió algún adiestramiento de su organización antes de viajar? ¿Con qué frecuencia reciben formación previa al viaje de su organización? ¿Qué tipo de información reciben?
9. ¿Estaría usted interesado en aprender más sobre las recomendaciones de salud al viajero para los destinos misioneros más populares? ¿Cómo les gustaría recibir esta información?
10. Si CDC desarrollaran materiales educativos para grupos misioneros de viajes cortos, ¿les interesaría recibir estos materiales? ¿Qué formato es más útil? (Ej. Folletos, carteles, correos electrónicos).
11. ¿Qué saben ustedes sobre las enfermedades transmitidas por mosquitos?
12. ¿Alguna vez han oído hablar de la fiebre de dengue? ¿Qué saben ustedes sobre la fiebre de dengue?
13. ¿Alguna vez han oído hablar de la fiebre de chikungunya? ¿Qué saben ustedes sobre la fiebre de chikungunya?
14. ¿Alguna vez han oído hablar sobre la fiebre del zika? ¿Qué saben ustedes sobre la fiebre del zika? ¿Cómo se diferencia el zika del dengue y el chikungunya?
15. ¿Les preocupan las enfermedades transmitidas por mosquitos? ¿Cuán preocupados están?
16. ¿Cómo pueden prevenir las picaduras de mosquitos? ¿Creen ustedes que las medidas de prevención actuales son eficaces?
17. ¿Estarían interesados en notificar a alguien si se enferman durante el viaje? ¿Cómo podrían informar si se enferman a su organización?

Índice de legibilidad 70.2 (grado 7)