SURVEY INSTRUMENT - PROGRAM DIRECTORS

Welcome to the CCC Program Director Survey!

The CCC Program Director Survey is being conducted by Battelle at the request of the Centers for Disease Control and Prevention (CDC), Division of Cancer Prevention and Control (DCPC). The survey is part of a larger comprehensive evaluation of a pilot program (also known as the 1017 program) in which CDC awarded additional funds to 13 CCC programs to increase their focus on Policy, System, and Environmental (PSE) change strategies.

You have been asked to participate in this survey because of your involvement with the comprehensive cancer control program in your state, tribe, or U.S. Associated Pacific Island Jurisdiction/territory. [FIRST SURVEY WORDING] This is the first of two surveys. You will be asked to complete a second survey 18-24 months from now. Each survey is expected to take 20-30 minutes to complete. [SECOND SURVEY WORDING] This is the second of two surveys. You were asked to complete the first survey 18-24 month ago. This survey is expected to take 20-30 minutes to complete.

Please answer the survey questions to the best of your ability based on your personal knowledge and experience with the CCC program. If you would like to consult with other staff members on any of the question items, you may do so. You do not need to complete the survey in one sitting. Your survey answers are not final until you hit the "Submit" button.

An identification number will be assigned to your completed survey in order to link information from your first completed survey to the second survey. Additional data security procedures will be implemented to ensure that your answers are maintained in a secure manner and your responses are never linked to you personally. You may choose not to participate in this survey, or to terminate your involvement at any time, without any penalty to you or your program. Completion of the survey constitutes your consent to participate.

If you have any questions about this evaluation please contact Battelle's study director Carlyn Orians at 206-528-3320, or CDC's technical lead Angela Moore at 770-488-3094. If you have any questions about your rights as a research participant, please contact Chair, Battelle Institutional Review Board, at 1-877-810-9530, extension 500.

PROCEED TO SURVEY

Public reporting burden of this collection of information is estimated to average 30 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, GA 30333, ATTN: PRA (0920-xxxx).

Moving Around in the Web Survey:

- Use the "<< Previous and "Next >>" buttons on the navigation bar at the bottom of each page of the survey to move from question to question. Do not use the Back or Forward buttons in your browser software!
- For pages with more content, you may need to scroll down to the "<< Previous" and "Next >> buttons, using the bar located at the right of your browser window.
- After entering your response, click on the "Next >>" button to continue to the next question. Your survey answers will be saved. Use the "<< Previous" button to see or change previous questions in the survey.
- **Progress Bar** at the top of each page you will see a bar to indicate your progress through the survey. The % complete is located on the far right of the progress bar.
- You may interrupt filling out the survey at any time by selecting the "Stop for Now" button on the far
 right of your navigation bar. If you select "Stop for Now" there will be a short delay before the
 survey application will allow you to re-enter the survey.
- To **re-enter the survey**, use the link provided to you in the invitation email. You will be returned to the point in the survey where you left off answering questions.
- If you have a problem with the survey, click on the Contact Us button at the top of the page to send an email to CCC1017ProgDirectorsSurvey@battelle.org or call 1-800-XXX-XXXX. Someone will get back to you as soon as possible.

When you have completed survey, you will have a chance to review and/or revise your answers by clicking on "<< Previous" to page back through the survey. When you are satisfied with your answers, use "Next >>" to get to the last page and press "SUBMIT RESULTS" to send the survey to a secure database. Once you have submitted the survey, you will not be able to revise your answers.

Thank you for your contribution!

DEFINITIONS

Here are the definitions of key terms used in the survey. Some of these will be familiar to you from CDC program documents; others may be new. Don't worry about remembering definitions. When you encounter these words in blue later in the survey, you will be able to hover your cursor over the word and a box will appear with the definition.

Roles:

Ally (Allies) – an individual or group with a similar interest in the proposed PSE strategy.

Communicator – an individual or organization that utilizes various approaches, skills, and resources to objectively inform key stakeholders. They bring authority from their organization to bring resources and effect change.

Decision maker – an individual within an organization or entity who can make decisions about PSE approaches to improve health impact (e.g., city council member, school superintendent, business owner, or an agency director). As a reminder, Federal funds may not be used to engage in advocacy or lobbying activities for legislative policies (see box, below). Program staffers are, however, permitted to provide information and data to legislative decision makers as requested as a part of the normal executive legislative processes.

Implementer – an individual or organization that utilizes subject matter expertise and/or resources to ensure successful execution of program activities.

Leader – a highly committed individual or organization with a clear and shared vision that is able to employ various competencies, networks, and resources to ensure the success of the partnership/workgroup and its activities. Examples of leaders may include mayors, Chief Executive Officers (CEOs) of health care systems, or directors from state agencies.

Opponent (Opponents) – an individual or group who opposes the proposed PSE strategy.

Planner – an individual or organization that utilizes subject matter expertise and/or resources to develop a feasible and appropriate PSE agenda and/or action plan. A planner will significantly contribute to the creation of goals, objectives, strategies, and activities related to the PSE agenda and/or annual action plan.

Promoter – an individual or organization that supports or actively promotes policy, system and environmental strategies that emerge from the PSE agenda to improve public health. Examples of promoters may include organizations such as medical societies, employers or advocacy organizations.

Stakeholder – an individual or organizational representative who will be affected by the proposed PSE strategy (e.g., employee, community resident, consumer, client, parent, student, employer, school, or healthcare institution).

PSE Strategy – Policy, system or environmental strategy or approach that makes it easy for people to adopt healthy behaviors (such as easy access to affordable, healthy food) or that protects people from the effects of unhealthy behavior (such as second hand smoke). PSE change may occur at various levels within organizations, communities, and health care systems. Examples of PSE change strategies include efforts to implement: 1) healthy food vending policies in schools; 2) organized wellness programs at worksites; 3) smoke-free policies in multi-unit housing units; and 4) patient reminder systems in healthcare settings.

Methods – Activities or strategies used to objectively inform and educate key stakeholders. Methods should be backed up by evidence and support from the community or influential organizations or people; make sense to the PSE workgroup; and when necessary, be flexible and creative (as described above). Examples of methods may include providing information through media events and public hearings, if requested.

NOTE: DP10-1017 award recipients are prohibited from using CDC funds to engage in any lobbying activity. Restrictions specifically include lobbying relating to any proposed, pending, or future Federal, state or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing. This prohibition also includes grass roots lobbying efforts directed at inducing members of the public to contact their elected representatives to urge support of, or opposition to, proposed or pending legislation, appropriations, regulations, administrative actions, or Executive Orders. It is permissible to use CDC funds to engage in activities to enhance prevention; collect and analyze data; implement prevention strategies; to provide information upon request as a part of the normal executive-legislative process; conduct community outreach services; foster coalition building and consensus on public health initiatives; provide leadership and training; and foster safe and healthful environments.

SURVEY OF CCC PROGRAM DIRECTORS

The first set of questions relates to the current capacity of your program to implement and support PSE strategies and the resources that you have found to be useful to build this capacity.

Definitions:

Program Staff:

CCC Program Director - one dedicated FTE who oversees 1017 program activities that are implemented by the PSE coordinator and key stakeholders.

PSE Coordinator - one FTE dedicated to 1017 program planning and implementation of PSE activities with appropriate competencies in using PSE strategies.

Competencies:

Issue framing – Objectively presenting an issue in a way that will ensure decision makers and the general public are fully educated on the topic. This includes tailoring the description of a problem to the interests of diverse groups and providing supporting evidence for a proposed PSE strategy.

Media utilization – Using the media to objectively provide information on a topic so that it conveys the public health impact or benefit of potential PSE strategies.

Message framing – Developing communication that is targeted to a specific audience and is designed to resonate and be accepted by that audience.

PSE strategy analysis – Analyzing potential PSE strategies for feasibility, impact, expected outcomes, reach, and potential negative effects. This includes examining the health, fiscal, administrative, legal, social, and political implications of PSE options. Decision analysis methods (e.g., cost-benefit analysis) may be used.

PSE strategy formulation – The process of developing a proposed PSE strategy which may be informed by how the problem is framed, the context surrounding the problem, and supporting scientific evidence for why the proposed PSE solution may work.

PUBLIC HEALTH CCC STAFF

1. Please select the one category that best represents the level of competency of your staff for each competency listed below.

	r CCC program team is mpetent in	Not at all	Basic: Staff have only general knowledge	Moderate: Staff could do this	Expert: Staff could teach this	Don't Know
a.	Issue framing	0	0	0	0	0
b.	Media utilization	0	0	0	0	0
C.	Message framing	0	0	0	0	0
d.	PSE strategy analysis	0	0	0	0	0
e.	PSE strategy formulation	0	0	0	0	0
f.	Building relationships with partners/stakeholders	0	0	0	0	0

2. Please indicate to what extent you agree or disagree with the following statements regarding the skills of your staff to promote PSE change strategies.

	n confident in my CCC program n's skills in	Strongly Disagree	Some- what Disagree	Neutral	Some- what Agree	Strongly Agree	Don't Know
a.	Gathering data to demonstrate the value of PSE strategies	0	0	0	0	0	0
b.	Developing specific PSE goals	O	0	0	0	0	0
C.	Assembling available evidence to support PSE strategies	0	0	0	0	0	0
d.	Leading action planning to determine how PSE goals will be achieved	0	0	0	0	0	0
e.	Developing proposals for specific, evidence based PSE strategies	0	0	0	0	0	0
f.	Convening a PSE Workgroup with representation from appropriate sectors	0	0	0	0	0	0
g.	Organizing informational community forums to objectively provide information to raise awareness about the health impact of PSE strategies	0	0	0	0	0	0
h.	Providing data and evidence to decision makers upon request	0	0	0	0	0	0
i.	Working with like-minded organizations to support PSE goals	0	0	0	0	0	0
j.	Providing evidence-based guidelines and technical assistance to implement and support PSE strategies	<u> </u>	0	0	0	0	0
k.	Providing technical assistance to sustain PSE approaches	0	0	0	0	0	0

PSE Workgroup/CCC Coalition

This set of questions relates to your understanding of the capacity of the broader CCC coalition and/or PSE Workgroup, with whom you work, to implement and support PSE approaches. CCC coalitions include partners from a diverse group of organizations (e.g. governmental agencies, medical societies, advocacy organizations, or state/local legislatures) who may play various roles in the development and implementation of the PSE agenda and/or strategies.

3. Does the CCC coalition have a workgroup that is focused on PSE strategies? OYes, we have a PSE Workgroup→ANSWER 3A AND 4A & B								
	O No, not currently, → ANSWER 4 O No, not currently,	but we plan to form o 4A BELOW, THEN S	one in the r KIP TO 5 s to form o	next year		ar		
		nd year was the PSE month/year) →answe	_	-	?			
		,						
4.	Please indicate to what e membership of the coaliti		-	h the follo	owing sta	atement a	about the	
	I am confident that		Strongly Disagree	Some- what Disagree	Neutral	Some- what Agree	Strongly Agree	Not Applicable
	a. The CCC coalitic sector representa PSE objectives		0	0	0	0	0	0
	b. The PSE Workgr sector representa PSE objectives. [ANSWER ONL]	ation to meet its	0	0	0	0	0	0

5. We are interested in your perceptions of the CCC coalition or PSE Workgroup in which you participate. Please indicate the extent to which you agree or disagree with the following statements about members' skills to support PSE strategies:

l am co	onfident in CCC coalition members' skills in	Strongly Disagree	Some- what Disagree	Neutral	Some- what Agree	Strongly Agree	Don't Know
a.	Assessment of PSE strategy environment, community support, attitudes and awareness	0	0	0	0	0	0
b.	Developing specific PSE goals	0	0	0	0	0	0
C.	Providing input to develop an Action Plan	0	0	0	0	0	0
d.	Developing proposals for specific PSE strategies	0	0	0	0	0	0
e.	Organizing media events to provide objective information to educate about PSE strategies	0	0	0	0	0	0
f.	Using media strategies to provide objective information about PSE approaches	0	0	0	0	0	0
g.	Holding meetings with stakeholders to raise awareness about the health impact of PSE strategies	0	0	0	0	0	0
h.	Providing decision makers with evidence of the health impact of proposed PSE strategy upon request	0	0	0	0	0	0
i.	Reaching out to allies	0	0	0	0	0	0
j.	Providing technical assistance to support PSE strategies	0	0	0	0	0	0
k.	Monitoring and assessing the quality of the implementation of PSE strategies to ensure they are sustainable	0	0	0	0	0	0

RESOURCES TO BUILD CAPACITY

6. For the list of skills below, please indicate which trainings or resources were most helpful in building CCC coalition or PSE Workgroup capacity to do PSE work. You may select more than one response.

		0 .	, ,			,		
	s resource helped ld skills in	Standard trainings by CDC/ national partners	Tailored trainings by national partners	Trainings developed locally	Networking with other programs	Guides websites tools	Other resource	None
a.	Developing key messages for target audiences							0
b.	Working with various media							0
C.	PSE strategy formulation							0
d.	Gaining stakeholder support							0
e.	Forming strategic alliances with other groups							0
f.	Providing objective data and information to increase awareness among decision makers as requested							0
g.	Implementing and monitoring PSE strategies							0

7.	Below is a list of PSE-related skills. Please indicate up to 5 areas in which you would like additional
	training or resources. Rank order your selections on a scale of $1-5$ where 1 is the top training
	priority.

Rank

a.	Developing key messages for target audiences	
b.	Working with various media	
C.	PSE strategy formulation	
d.	Gaining stakeholder support	
e.	Forming strategic alliances with other groups	
f.	Providing objective data and information to increase awareness among decision makers as requested	
g.	Implementing and monitoring PSE strategies	
h.	Other	
	[IF OTHER SKILL AREA IS RANKED THEN ASK 9.I]	
	i. Please specify the other PSE-related skills area you would like additional training or resources.	
	Area:	
		

IMPLEMENTATION

Please identify two PSE change strategies that are in the implementation phase, in which the CCC coalition or PSE Workgroup has taken leadership. Please choose strategies that you feel are the *most important* and have the *highest potential for success*. Examples of PSE change strategies include: 1) healthy food vending policies in schools; 2) organized wellness programs at worksites; 3) smoke-free policies in multi-unit housing units; and 4) patient reminder systems in healthcare settings. Provide a brief name below for each strategy you have identified.

Strategy 1		
Strategy 2		

STRATEGY 1: [POPULATE NAME]

8. Please select which of the following best characterizes this strategy you have identified. Select all that apply

PSE Strategy Characteristics	Strategy 1
To a change of the change of t	[Populate name]
Type of Strategy	
Environmental	
Systems	
Other Type of Strategy (Specify)	
Setting	
Community	
Clinic/Healthcare Facility	
School/Childcare	
Worksite	ם
Other Setting (Specify)	٥
Primary Prevention Topics	
Tobacco Control	
Nutrition	
Physical Activity	
Vaccination	
Sun Safety	
Built Environment	
Radon	
Other Primary Prevention Topic (Specify)	٥
Secondary Prevention Topics	
Breast Cancer Screening	
Colorectal Cancer Screening	
Patient Navigation	
Worksite Wellness	
Other Secondary Prevention Topic (Specify)	٥
Tertiary Prevention Topics	
Survivorship	
Other Tertiary Prevention Topic (Specify)	
Don't Know	0

	coalitio	on or PSE Workgroup has reached out to.
	a.	Decision Maker Name
	b.	Organization:
	C.	Position/Title:
	0	Don't Know→ SKIP TO INTRODUCTION BEFORE Q13
10.	_	e indicate your perception of the primary decision maker's awareness of the issue.
	O AV	ware, but uninformed
	O Av	vare, but inaccurately informed
	O Ac	ccurately informed
	O Ur	nsure
	O Do	on't Know
11.	_	e indicate your perception of the primary decision maker's position on the issue.
	О Ор	posed
	O Net	utral
	O No	position
	O Do	n't Know
12.		e select up to 3 methods the CCC coalition or PSE Workgroup has employed to inform the ry decision maker's understanding of the issue.
	Select	up to three
		Provide data and other information to demonstrate value
		Provide evidence that shows the health impact of PSE change strategies
		Develop proposal for a specific PSE change strategies
		Create white papers, websites or newsletters
		Create media, public service announcements
		When requested, attend in-person meetings or briefings to educate decision makers
		Provide data and information at board meetings and legislative hearings, upon request
		Demonstrate support for PSE change strategies from stakeholders and constituents
		Other (specify)
	0	Not Applicable

9. Thinking about Strategy 1 [Populate name], please identify the primary *decision maker* that the CCC

Strategy 1 [Populate Name]

13.		ng about Strategy 1 [Populate name] please identify up to two stakeholder groups that the coalition or PSE Workgroup has reached out to. How many stakeholder groups can you identify me?
	0 1-	ANSWER ONLY STAKEHOLDER 1 QUESTIONS Q14A, Q15 – Q17 THEN SKIP TO Q21
		→ ANSWER ALL QUESTIONS REGARDING BOTH STAKEHOLDER GROUPS 1 AND 2, L4A&B – Q20
14.		ng about Strategy 1 {Populate name] please identify a stakeholder group/two stakeholder s that the CCC coalition or PSE Workgroup has reached out to.
	A.	Stakeholder Group 1
	В.	Stakeholder Group 2
Str	ategy	1 [Populate Name] Stakeholder Group 1 [Populate Name]
15.	_	e indicate your perception of the stakeholder's average level of awareness of the issue. Unaware
	0	Aware, but uninformed
	0	Aware, but inaccurately informed
	0	Accurately informed
	0	Unsure
16.		e indicate your perception of the stakeholder's support for the issue. Visible and vocal program champion
	0	Supportive
	0	Opposed
	0	Neutral
	0	No position
	0	Don't Know
17.		e select up to 3 methods the CCC coalition or PSE Workgroup has used to inform the holder's understanding of the issue.
		Hold meetings, workshops and community forums
		Create white papers, websites or newsletters
		Secure earned media, public service announcements
		Engage stakeholders in collecting evidence to show value of PSE change strategies
		Other (specify)
	0	Not Applicable

Strategy 1 [Populate Name] Stakeholder Group 2 [Populate Name]

18. Ple	_	indicate your perception of the stakeholder's average level of awareness of the issue. Unaware
	0	Aware, but uninformed
	0	Aware, but inaccurately informed
	0	Accurately informed
	0	Unsure
19. Ple	_	indicate your perception of the stakeholder's support for the issue. Visible and vocal program champion
	0	Supportive
	0	Opposed
	0	Neutral
	0	No position
	0	Don't Know
		select up to 3 methods the CCC coalition or PSE Workgroup has used to inform the older's understanding of the issue.
		Hold meetings, workshops and community forums
		Create white papers, websites or newsletters
		Secure earned media, public service announcements
		Engage stakeholders in collecting evidence to show value of PSE change strategies
		Other
	0	Not Applicable

21. Thinking about Strategy 1 [Populate the following statement:	e name], p	lease indi	cate to	what exte	ent you ag	ree or disa(gree with
The PSE Workgroup or CCC coalition		ongly v	ome- vhat sagree	Neutral	Some- what Agree	Strongly Agree	N/A
Identified "allies"— individuals or group with a similar interest in the proposed P change strategy	/)	0	0	0	0	0
Reached out to allies	()	0	0	0	0	0
Had more than one meeting to discuss common interests	()	0	0	0	0	0
Regularly shared information and coordinated activities to achieve mutual goals	l ()	0	0	0	0	0
22. Thinking about Strategy 1 [Populate the following statement:	e name], p	lease indi	cate to	what exte	ent you ag	ree or disa(gree with
The PSE Workgroup or CCC coalition	St n Dis	rongly	Some- what isagree	Neutral	Some- what Agree	Strongly Agree	N/A
Identified " opponents "— individuals or groups who oppose the proposed PSE change strategy		0	0	0	0	0	0
Reached out to opponents to better understand their position or find commo ground	on	0	0	0	0	0	0
Identified strategies to address opponer concerns	nts'	0	0	0	0	0	0
23. Please indicate the role(s) (Promote planning, implementing or evaluatin Please check all that apply					der or Pla	nner) playe	ed in
	Promoter	Implemente	er Com	nmunicator	Leader	Planner	N/A
a. CCC coalition							0
b. PSE Workgroup [ANSWER ONLY IF 3=YES]							0
c. Allies							0

	out Strategy 1 [Populate naming of your issue among stake	21	event that occurred to increase
 25. Why was this	s event pivotal?		

STRATEGY 2: [POPULATE NAME]

26. Please select which of the following best characterizes this strategy you have identified. Select all that apply

PSE Strategy Characteristics	Strategy 2
3,	[Populate name]
Type of Strategy	
Environmental	
Systems	
Other Type of Strategy (Specify)	0
Setting	
Community	
Clinic/Healthcare Facility	
School/Childcare	
Worksite	٥
Other Setting (Specify)	٥
Primary Prevention Topics	
Tobacco Control	
Nutrition	
Physical Activity	
Vaccination	
Sun Safety	
Built Environment	
Radon	
Other Primary Prevention Topic (Specify)	
Secondary Prevention Topics	
Breast Cancer Screening	
Colorectal Cancer Screening	
Patient Navigation	
Worksite Wellness	
Other Secondary Prevention Topic (Specify)	٥
Tertiary Prevention Topics	
Survivorship	
Other Tertiary Prevention Topic (Specify)	
Don't Know	0

	coalitio	on or PSE Workgroup has reached out to.
	d.	Decision Maker Name
	e.	Organization:
	f.	Position/Title:
	0	Don't Know→ Skip to introduction before Q33
28.	_	e indicate your perception of the primary decision maker's awareness of the issue.
	O A	ware, but uninformed
	O AV	vare, but inaccurately informed
	O Ac	ccurately informed
	O U	nsure
	O D	on't Know
29.		e indicate your perception of the primary decision maker's position on the issue.
	Оор	posed
	O Ne	utral
	O No	position
	Оро	n't Know
30.		e select up to 3 methods the CCC coalition or PSE Workgroup has employed to inform the ry decision maker's understanding of the issue.
	Select	up to three
		Provide data and other information to demonstrate value
		Provide evidence that shows the health impact of PSE change strategies
		Develop proposal for a specific PSE change strategies
		Create white papers, websites or newsletters
		Create media, public service announcements
		When requested, attend in-person meetings or briefings to educate decision makers
		Provide data and information at board meetings and legislative hearings, upon request
		Demonstrate support for PSE change strategies from stakeholders and constituents
		Other (specify)
	0	Not Applicable

27. Thinking about Strategy 2 [Populate name], please identify the primary *decision maker* that the CCC

Strategy 2 [Popu	ılate	Name 1	
------------------	-------	--------	--

31.		ng about Strategy 2 [Populate name] please identify up to two stakeholder groups that the coalition or PSE Workgroup has reached out to. How many stakeholder groups can you identify me?
	0 1	→ ANSWER ONLY STAKEHOLDER 1 QUESTIONS Q32A, Q33 – Q35 THEN SKIP TO Q39
		→ ANSWER ALL QUESTIONS REGARDING BOTH STAKEHOLDER GROUPS 1 AND 2, 32A&B – Q38
		ng about Strategy 2 {Populate name] please identify a stakeholder group/two stakeholder s that the CCC coalition or PSE Workgroup has reached out to.
	A.	Stakeholder Group 1
	B.	Stakeholder Group 2
Str		2 [Populate Name] Stakeholder Group 1 [Populate Name]
33.	_	e indicate your perception of the stakeholder's average level of awareness of the issue. Unaware
	\circ	Aware, but uninformed
	\circ	Aware, but inaccurately informed
	0	Accurately informed
	0	Unsure
34.		e indicate your perception of the stakeholder's support for the issue. Visible and vocal program champion
	0	Supportive
	\circ	Opposed
	\circ	Neutral
	\circ	No position
	\circ	Don't Know
35.		e select up to 3 methods the CCC coalition or PSE Workgroup has used to inform the nolder's understanding of the issue.
		Hold meetings, workshops and community forums
		Create white papers, websites or newsletters
		Secure earned media, public service announcements
		Engage stakeholders in collecting evidence to show value of PSE change strategies
		Other (specify)
	0	Not Applicable
Str	ategy	2 [Populate Name] Stakeholder Group 2

36. Please indicate your perception of the stakeholder's **average level** of awareness of the issue.

Survey Instrument – Program Directors (10/24/13)
O Unaware
O Aware, but uninformed
O Aware, but inaccurately informed
OAccurately informed
O Unsure
37. Please indicate your perception of the stakeholder's support for the issue. O Visible and vocal program champion
O Supportive
O Opposed
O Neutral
O No position
O Don't Know
38. Please select up to 3 methods the CCC coalition or PSE Workgroup has used to inform the stakeholder's understanding of the issue.
☐ Hold meetings, workshops and community forums
☐ Create white papers, websites or newsletters
☐ Secure earned media, public service announcements
☐ Engage stakeholders in collecting evidence to show value of PSE change strategies
□ Other
O Not Applicable

39. Thinking about Strategy 2 [Populate nather the following statement:	ıme], pleas	e indicate to	o what ext	ent you ag	gree or disa	gree with
The PSE Workgroup or CCC coalition	Strongly Disagree	Some- what Disagree	Neutral	Some- what Agree	Strongly Agree	N/A
Identified "allies"— individuals or groups with a similar interest in the proposed PSE change strategy	0	0	0	0	0	0
Reached out to allies	0	0	0	0	0	0
Had more than one meeting to discuss common interests	0	0	0	0	0	0
Regularly shared information and coordinated activities to achieve mutual goals	0	0	0	0	0	0
40. Thinking about Strategy 2 [Populate nather the following statement:	ıme], pleas		o what ext	, ,	gree or disa	gree with
The PSE Workgroup or CCC coalition	Strongly Disagree		Neutral	Some- what Agree	Strongly Agree	N/A
Identified " opponents "— individuals or groups who oppose the proposed PSE change strategy	0	0	0	0	0	0
Reached out to opponents to better understand their position or find common ground	0	0	0	0	0	0
Identified strategies to address opponents' concerns	0	0	0	0	0	0
41. Please indicate the role(s) (Promoter, I planning, implementing or evaluating S Please check all that apply				ader or Pla	anner) playe	ed in
Pi	romoter Imp	lementer Co	mmunicator	Leader	Planner	N/A
d. CCC coalition						0
e. PSE Workgroup [ANSWER ONLY IF 3=YES]						0
f. Allies						0

Survey	Instrument -	Program	Directors	(10/24/13))
--------	--------------	----------------	-----------	------------	---

42. Thinking about Strategy 2 [Populate name], please describe any key event that occurred to increase understanding of your issue among stakeholders and decision makers
43. Why was this event pivotal?
RESPONDENT CHARACTERISTICS
44. What is your position or title in your CCC program?
45. Please indicate the length of time you have been working with the Comprehensive Cancer Control program in your jurisdiction.
☐ Less than 1 year
□ 1-3 years
□ 4-5 years
☐ More than 5 years

Thank you for taking our survey. Your response is very important to us.