

## **Supporting Statement B For:**

The Study of Center for Global Health's (CGH) Workshops  
(NCI)

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## B. STATISTICAL METHODS

### B.1 Respondent Universe and Sampling Methods

A total of 3,281 workshop participants (1,430 Phase 1 participants; and 1,851 Phase 2 participants) will be invited to assess the National Cancer Institute’s Center for Global Health’s (CGH) workshops. These potential participants have been identified through their participation in the following CGH workshops: the Symposiums on Global Cancer Research, Workshops in Cancer Control Planning and Implementation, the Summer Curriculum in Cancer Prevention, Women's Cancer Program Summit, Regional Grant Writing and Peer Review Workshops, Workshops on Tobacco Control, and other similar workshops. For additional information about the workshops refer to **Attachment 1**.

Table 1 Phase 1 Surveys for CGH Workshop Participants

<b>CGH Workshop</b>	<b>Total Number of Past Workshop Participants to be Surveyed</b>	<b>Number of Surveys to be distributed to each Workshop Participant</b>	<b>Number of Past Workshops (1998 – 2015)</b>
Symposium on Global Cancer Research	500	1	3
Workshop in Cancer Control Planning and Implementation	140	1	1
The Summer Curriculum in Cancer Prevention	500	1	17
Women’s Cancer Program Summit	140	1	2
Regional Grant Writing and Peer Review Workshop	150	1	3
Workshops on Tobacco Control	180	1	6

Table 2 Phase 2 Surveys for CGH Workshop Participants

<b>CGH Workshop</b>	<b>Number of Respondents per Workshop</b>	<b>Number of Surveys per Workshop</b>	<b>Number of Workshops per Year</b>	<b>Survey Intervals</b>
Symposium on Global Cancer Research	250	1	1	4 months post-workshop
Workshop in Cancer Control Planning and Implementation	70	1	2	3 months post-workshop
The Summer Curriculum in Cancer Prevention	27	1	1	6 months post-workshop
Women’s Cancer Program Summit	140	1	2	6 months post-workshop
Regional Grant Writing and Peer Review Workshop	60	1	1	12 months-post workshop
Workshops on Tobacco Control	30	1	3	6 months post-workshop

Since the purpose of these surveys is to understand whether or not these workshops have been successful in meeting their goals, all workshop participants will be invited to assess the workshop that they participated in. No statistical sampling methodology will be used. This is because much of the data that will be collected are qualitative (responses to open-ended questions), and the type of workshops, their frequency, participants and expected outcomes vary for each workshop. Further, the number of respondents in the study is too low to draw statistical conclusions. For example, each Women’s Cancer Program Summit only has 140 participants, and the types of participants vary from registered nurses to family practitioners to general practitioners, and the breakdown of each of these groups varies by workshop. Thus, the types of participants, the content, the dates, and workshop organizers will all vary across Women’s Cancer Program Summit workshops, which mean that we cannot sample or stratify.

Out of the 3,731 workshop participants invited to participate in the surveys, we anticipate that 2,985 to agree to participate. The overall response rate is expected to be approximately 80% (2,985/3,731). This response rate is not based on any previous testing or guidance and is solely an estimate.

For all workshops with the program leads for each of the workshops will send out invitation emails (**Attachment 7A-7G**) with a link to the survey in the body of the email (**Attachment 3A-3H; 4A-4H**). Invitees who choose to participate will click the link and complete the survey and submit it electronically. By allowing open participation and self-selection, we expect to receive data from those participants who have valuable feedback about CGH workshops and would like to contribute to decisions about similar future programs. This self-selection process is being used instead of a statistical sampling method. Program leads agree that this process is best aligned with the study objectives.

## **B.2 Procedures for the Collection of Information**

All potential participants will receive an invitation by email (**Attachment 7A-7G**) from their respective program leads informing them about the survey and inviting participation. The invitation will also include a link to the survey (**Attachment 3A -3H; 4A-4H**) that allows for easy completion and electronic submission. All documents that the respondent receives will be written in plain and clear language. Participants who choose to participate will choose click the provided link and complete the brief survey and then choose “submit” (**Attachment 3A -3H; 4A-4H**). All the participants that will be invited to complete the surveys are fluent in English, thus the surveys will be distributed in English only, with the exception of the Women’s Cancer Program Summit. Given the diversity of the Women’s Cancer Program Summit audience, the survey and invitations have also been produced in both English (**Attachment 3E, 4E, 7D**) and Spanish (**Attachment 3F, 4F, 7E**), to accommodate participants’ language ability.

If the participants do not complete the survey within two weeks of receipt, the program leads will resend the same invitation and the survey. For all workshops where phone numbers of participants are available, if the participants do not complete the survey within two weeks of the second invitation,

the program leads will call the investigator and invite them to participate (**Attachment 7A-7G**). If phone numbers are not available, then no further follow-up will be completed.

### **B.2.1. Quality Control**

The program leads in the working group (**Attachment 2**) will review all returned surveys. Respondents who submit the survey will not be re-contacted for lack of completeness since the survey is optional and participants may choose not to complete all questions. The program leads in the working group will monitor response rates and completeness of acquired data.

### **B.3 Methods to Maximize Response Rates and Deal with Nonresponse**

The Study of the Center for Global Health's Workshops expects to achieve a response rate of 80%, determined by the actual number of respondents divided by the total number expected (2,985/3,731).

The initial email inviting the workshop participants to participate will be sent by the program leads. The program leads will follow up non-response to the initial contact (defined as within 14 days of the initial email) by emailing the workshop participants again with the same letter of invitation (**Attachment 7A-7G**). Having the invitations come directly from the program leads rather than a central mailbox should increase response, since these program leads are integral to the planning and implementation of these workshops and should be either familiar or known to participants. Additionally, when phone numbers are available, program leads will call those participants who do not respond to the second letter of invitation and invite them to participate once again in order to increase response (**Attachment 7A-7G**).

#### **B.4 Test of Procedures or Methods to be Undertaken**

One person that had participated in a past workshop for each workshop was chosen from each workshop for a total of five respondents. These five participants were asked to complete the survey in April of 2014. The main goal of this pre-test was to validate the appropriateness of the survey questions. We wanted to ensure that the respondents were able to provide the data without considerable burden and that the sample questions were understandable. The intent and purpose of the survey was also discussed with the pre-tested respondents. Participant suggestions to improve clarity were incorporated into the survey design.

#### **B.5 Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data**

The individuals listed in **Attachment 2** were critical in developing the research plan, the conceptual framework, survey questions, and sampling strategies underlying the study. Many of the same individuals will be involved with analysis once the data are collected. Additionally, NCI's Office of Science Planning and Assessment were consulted in the process of designing this study.