

## ALCOHOL CONSUMPTION FOCUS GROUPS SCREENER

Public reporting burden of this collection of information is estimated to average 5 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, Georgia 30333; ATTN: PRA (0920-xxxx)

### INTRODUCTION

Hello, my name is \_\_\_\_\_, and I am calling on behalf of Fors Marsh Group. We will be conducting focus groups to better understand people’s attitudes and beliefs to develop health education messages. Each focus group will be led by a qualified moderator and will include about six participants who will be asked to share their opinions. Focus groups will be held in **LOCATION** on **DATES** for about 90 minutes. Those who participate will receive **\$75** as a thank you for taking part in the focus group. May I please speak with someone in your household ages 21 to 64 to see if they are qualified to participate?

[REPEAT INTRO IF CALL WAS TRANSFERRED]

May I ask you a few questions to see if you are qualified to participate in the focus group?

Yes	[ ]	<b>[CONTINUE]</b>
No	[ ]	<b>[THANK AND END]</b>

Great! Before we begin, you should know that there are no right or wrong answers to the questions I’m going to ask you. You also don’t have to answer some questions if you don’t want to. If an answer leads to me ending the call, this doesn’t mean that there was anything wrong with the answer you provided.

### **SECTION 1: SCREENER QUESTIONS**

**READ:** To begin, I have a couple questions to ensure that we speak to the targeted group of people.

1. How old are you? [\_\_\_\_\_]

RECORD RESPONSE 21 to 64

[ ] > **CONTINUE**

Screener

IF age is &lt;21 or &gt;64

[ ]

&gt;

**TERMINATE**2. What is your gender? **DO NOT READ LIST**

Male

[ ]

Female

[ ]

Other: **RECORD VERBATIM**

[ ]

> **CONTINUE**

**TERMINATION LANGUAGE:** Thank you for taking the time to answer these questions. Unfortunately, based on the responses you provided, you do not meet the specifications we are looking for in this focus group. I appreciate your time and have a good morning/afternoon/evening.

3. In the past five years (including now), have you, a member of your immediate family or a close friend worked for any of the following types of businesses? **READ LIST AND RECORD BELOW**

An advertising or public relations firm?

[ ]

A marketing or market research firm or department?

[ ]

A marketing or market research consultant?

[ ]

Any kind of media company—like a TV or radio station or newspaper?

[ ]

The federal government or a federal government agency?

[ ]

A manufacturer or representative of alcohol (or alcoholic beverages)

[ ]

> **TERMINATE  
IF YES TO  
ANY**4. When, if ever, was the last time you participated in a marketing study, such as a consumer interview or a group discussion? **DO NOT READ LIST**

Within the past six months

[ ]

Over six months ago

[ ]

Never

[ ]

> **TERMINATE**> **CONTINUE**> **SKIP TO Q5**5. Please think about the market research studies you have participated in. What were the topics of the market research? **RECORD BELOW**

1)

2)

3)

4)

**TERMINATE IF ANYTHING RELATED TO ALCOHOL (E.G., ALCOHOL ATTITUDES)**



## Screener

**SECTION 2: ALCOHOL BEHAVIOR<sup>1</sup>**

6. During the past 30 days, how many days did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage, or liquor?

**PROBE TO DETERMINE NUMBER AND RECORD NUMBER AND RESPONSE OPTION BELOW**

**Number of days:** \_\_\_\_\_

0 days

Valid response for number of days

Don't know/Not sure

Refused

[ ]	>	
[ ]	>	<b>CONTINUE</b>
[ ]	>	
[ ]	>	<b>TERMINATE</b>

7. In the past year, have you consumed an alcoholic beverage such as beer, wine, a malt beverage or liquor?

Yes

No

[ ]	>	
[ ]	>	<b>TERMINATE</b>
[ ]	>	

8. Have you ever consumed an alcoholic beverage such as beer, wine, a malt beverage or liquor?

Yes

No

[ ]	>	<b>SKIP TO Q12</b>
[ ]	>	

9. One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on average? **PROBE TO DETERMINE NUMBER AND RECORD NUMBER AND RESPONSE OPTION BELOW**

**Number of drinks:** \_\_\_\_\_

Valid response for number of drinks

[ ]	>	
[ ]	>	<b>CALCULATE SCORE</b>

<sup>1</sup> Questions 6 and 9 to 11 are adapted from the Alcohol Consumption series in the CDC's Behavioral Risk Factor Surveillance System Survey (BRFSS) Questionnaire, available at [http://www.cdc.gov/brfss/questionnaires/pdf-ques/2014\\_brfss.pdf](http://www.cdc.gov/brfss/questionnaires/pdf-ques/2014_brfss.pdf).

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Don't know/Not sure	[ ]	<b>BELOW</b>
Refused	[ ]	> <b>TERMINATE</b>

**CALCULATE Q6/Q9 COMPOSITE SCORE<sup>2</sup>**

[# days] multiplied by [# drinks] equals composite score

Q6: # days		Q9: # drinks		Composite Score
	<b>X</b>		<b>=</b>	

10. Considering all types of alcoholic beverages, how many times during the past 30 days did you have **[X]** or more drinks on an occasion? **PROBE TO DETERMINE NUMBER AND RECORD NUMBER AND RESPONSE OPTION BELOW**

[Note—if respondent is male, X = 5; if respondent is female, X = 4]

**Number:** \_\_\_\_\_

0 times	[ ]	>
1 or more times	[ ]	<b>CONTINUE</b>
Don't know/Not sure	[ ]	>
Refused	[ ]	<b>TERMINATE</b>

11. During the past 30 days, what is the largest number of drinks you had on any occasion? **PROBE TO DETERMINE NUMBER AND RECORD NUMBER AND RESPONSE OPTION BELOW**

**Number:** \_\_\_\_\_

1 to 3 drinks	[ ]	>
4 drinks	[ ]	<b>CONTINUE</b>
5 drinks	[ ]	
6 or more drinks	[ ]	
Don't know/Not sure	[ ]	>
Refused	[ ]	<b>TERMINATE</b>

**ALCOHOL CONSUMPTION GROUP CATEGORIZATION**

Q#	Item	ABSTAINERS	NON-	NON-	EXCESSIVE
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<sup>2</sup> The composite score is based on the calculated variable for calculated total number of alcoholic beverages consumed per month (variable \_DRNKMO4) from the CDC's Calculated Variables in the Data File of the 2014 Behavioral Risk Factor Surveillance System, available at [http://www.cdc.gov/brfss/annual\\_data/2014/pdf/2014calculated\\_variables\\_version8.pdf](http://www.cdc.gov/brfss/annual_data/2014/pdf/2014calculated_variables_version8.pdf).

			EXCESSIVE DRINKING YOUNG ADULTS	EXCESSIVE DRINKING MID-LIFE	DRINKERS
Q1	Age	Any age 21-64	21-26	35-55	Any age 21-64
Q6	Last 30: # Days	0 days			
Q7	Drink past year?	No			
Q8	Ever drink?	Yes			
Q6/9	COMPOSITE SCORE		>0 and ≤60 for males >0 and ≤30 for females	>0 and ≤60 for males >0 and ≤30 for females	>60 for males >30 for females
			<b>AND</b>	<b>AND</b>	<b>OR</b>
Q10	Last 30: # >4/5		0 times	0 times	1 or more times
Q11	Last 30: Max #		>0 and <5 for males >0 and <4 for females	>0 and <5 for males >0 and <4 for females	≥5 for males ≥4 for females

**PLEASE AIM TO RECRUIT MIX OF GENDER, RACE/ETHNICITIES, AND OTHER DEMOGRAPHICS FOR EACH GROUP.**

**SECTION 3: DEMOGRAPHIC QUESTIONS**

**READ:** Great. I have a couple last questions to ensure that we speak to a variety of people.

12. Are you Hispanic or Latino? **READ LIST AND RECORD ONE**

No	[ ]	<b>&gt; CONTINUE</b>
Yes. I am Mexican, Mexican American, or Chicano	[ ]	
Yes. I am Puerto Rican	[ ]	
Yes, I am Cuban or Cuban American	[ ]	
Yes. I am some other Hispanic or Latino not listed here	[ ]	

13. What race or races do you consider yourself to be? **READ LIST AND RECORD ALL THAT APPLY**

American Indian or Alaska Native	[ ]	<b>&gt; CONTINUE</b>
Asian	[ ]	
Black or African American	[ ]	
Native Hawaiian or Other Pacific Islander	[ ]	
White	[ ]	

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14. What is the highest level of education you have completed? **READ LIST AND RECORD BELOW**

Less than high school degree or equivalent	<input type="checkbox"/>	<b>&gt; CONTINUE</b>
High school graduate (GED or diploma)	<input type="checkbox"/>	
Some certificate or trade school courses completed	<input type="checkbox"/>	
Trade school certificate	<input type="checkbox"/>	
Some college courses completed	<input type="checkbox"/>	
Associate degree (two-year)	<input type="checkbox"/>	
Bachelor's degree (four-year)	<input type="checkbox"/>	
Some graduate courses completed	<input type="checkbox"/>	
Post-graduate degree (master's or doctorate)	<input type="checkbox"/>	

15. Which of the following best describes what you are currently doing? **READ LIST AND RECORD ALL THAT APPLY**

Employed full-time	<input type="checkbox"/>	<b>&gt; CONTINUE</b>
Employed part-time	<input type="checkbox"/>	
Full-time student	<input type="checkbox"/>	
Part-time student	<input type="checkbox"/>	
Homemaker	<input type="checkbox"/>	
Self-employed	<input type="checkbox"/>	
Retired	<input type="checkbox"/>	
Disabled	<input type="checkbox"/>	
Not currently employed	<input type="checkbox"/>	
Other (please specify: _____)	<input type="checkbox"/>	

16. What is your total household income? **READ LIST AND RECORD BELOW**

Less than \$30,000	<input type="checkbox"/>	<b>&gt; CONTINUE</b>
\$30,000 to \$49,999	<input type="checkbox"/>	
\$50,000 to \$99,999	<input type="checkbox"/>	
\$100,000 to \$150,000	<input type="checkbox"/>	
More than \$150,000	<input type="checkbox"/>	
Don't know/Not sure	<input type="checkbox"/>	
Refused	<input type="checkbox"/>	

#### **SECTION 4: INVITATION TO PARTICIPATE IN FOCUS GROUP**

Thank you for your time today! We would like to invite you to participate in the focus group. The focus group will take place at **LOCATION**, and we will be asking about your attitudes and beliefs to help develop health education messages. The discussion will be audio-recorded for use in reporting.

The focus group is being held on **DATE** and will last **approximately 90 minutes**.

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Your opinions are very important to us. You will be paid **\$75** as a token of our appreciation.

People who have been invited to participate in this type of project have found the experience to be enjoyable and informative.

17. Are you interested in participating in this focus group?

Yes

No

[ ]	> <b>CONTINUE</b>
[ ]	> <b>TERMINATE</b>

**READ:** Great! I am going to give you the address and contact information for the facility. Please make sure that you are there 15 minutes before the scheduled start time. Do you have a pen and paper?

**GIVE LOCATION OF FACILITY**