

**SAMPLE SCREENER FOR SURVEYS, FOCUS GROUPS, OR INTERVIEWS
INTERNATIONAL TRAVELERS**

Hello, my name is _____ from _____. I am calling on behalf of the Centers for Disease Control and Prevention (CDC).

We are calling to find out if you would be interested in joining a [focus group discussion] on health and international travel. We are not trying to sell you anything. The group will last about 2 hours and you will be compensated for your time. Is now a good time for you to answer a few questions to find out if you qualify and are interested in participating in the group discussion? **[If yes, continue]**

(Record Gender) **[Confirm if unsure: And you are (female/male?)]** **[Recruit a mix]**

a. Female ____ **[CONTINUE]**

b. Male ____ **[CONTINUE]**

1. Which of the following categories best describes your age? **[Recruit a mix]**

- Younger than 18.....1 **[THANK/END]**
- 19–24.....2 **[CONTINUE]**
- 25–35.....3 **[CONTINUE]**
- 36–45.....4 **[CONTINUE]**
- 46–59.....5 **[CONTINUE]**
- 60+6 **[CONTINUE]**

2. Are you a U.S. citizen or permanent resident?

- Yes.....1 **[CONTINUE TO QUESTION 4]**
- No.....2 **[GO TO QUESTION 3]**

3. What is your native, or first, language? **[Recruit at least half who report a language other than English as native.]**

- Yes.....1 **[CONTINUE]**
- No.....2 **[CONTINUE]**

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4. Do you currently have health insurance?
Yes.....1 [CONTINUE]
No.....2 [CONTINUE]
5. Do you or does anyone in your household work for a healthcare organization as a doctor, nurse, or other healthcare provider?
Yes.....1 [IF YES, THANK/END]
No.....2 [CONTINUE]
6. Have you been paid to participate in a focus group or other group discussion in the past 6 months?
Yes.....1 [THANK/END]
No.....2 [CONTINUE]
7. Other than Canada, have you traveled outside of the United States in the last 2 years?
Yes.....1 [CONTINUE]
No.....2 [THANK/END]
8. In what year did you take your most recent trip? _____ [If more than 2 years, [THANK/END]
9. Which of the following places have you traveled either for work or for personal reasons, or a combined trip during the *last 2 years*? [Recruit a mix.]
Africa.....1 [CONTINUE]
Asia.....2 [CONTINUE]
Central America.....3 [CONTINUE]
Middle East.....3 [CONTINUE]
Europe.....4 [CONTINUE]
Australia.....5 [CONTINUE]
South & West Pacific Islands.....6 [CONTINUE]
South America.....7 [CONTINUE]
10. Which category best describes how frequently you travel internationally?
[Recruit a mix]
More than four times per year.....1 [CONTINUE]

- Two to four times per year2 [CONTINUE]
- Once a year3 [CONTINUE]
- Once every 2 years.....4 [CONTINUE]

11a. Would you describe yourself as...[READ AND RECORD]

- a. Hispanic or Latino/Latina _____
- b. Not Hispanic or Latino/Latina _____

11b. Next, would you describe yourself as... [READ AND RECORD]

- a. American Indian or Alaska Native _____
- b. Asian or Asian American _____
- c. Black or African American or African _____
- d. Native Hawaiian or Pacific Islander _____
- e. White or Caucasian _____

12. What is the highest level of education you have completed?
[CONTINUE TO INVITATION]

- | | |
|---------------------------------|--------------------------|
| Less than high school graduate | <input type="checkbox"/> |
| High school graduate/GED | <input type="checkbox"/> |
| Some college | <input type="checkbox"/> |
| College degree | <input type="checkbox"/> |
| Graduate or professional degree | <input type="checkbox"/> |

INVITATION

Thank you for answering all of my questions. We would like to invite you to participate in a general discussion with other travelers to discuss health and international travel issues.

This discussion will take place on Monday, _____, at our offices, located _____.

Times: Group 1_____5:30 pm
Group 2_____7:30 pm

The discussion will last approximately 2 hours. We will also provide snacks and beverages.
Would you be willing to participate? Yes____ [CONTINUE] No____ [THANK/END]

Now, let me just verify the spelling of your name and your address, so we can send you a confirmation letter with directions to our offices. **[RECORD RESPONDENT'S INFORMATION]**

Name: _____ Telephone: _____

Address: _____

City, State: _____ Zip: _____

E-mail: _____

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