Brand Concept Testing: People with Diabetes Screener

OMB No. 0920-0572 Expiration Date 08/31/2021

Introduction

This effort is sponsored by the U.S. Centers for Disease Control and Prevention, also known as CDC. Eligible participants will

receive a \$10 gift card as a thank you for participating.

The following questions will determine your eligibility to participate in the survey and will include topics like your age, health, and ethnicity. You do not have to answer anything that makes you uncomfortable.

Public Reporting Statement

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 Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0572).

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What is your gender?
O Male
O Female
What is your age?
O Under 18
O 18 - 44
O 45 - 64
O 65 or older

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Have you been diagnosed with diabetes by a health care provider?

O Yes	
O No	
O Do not know/Unsure	



What type of diabetes have you been diagnosed with, Type I or Type 2, or some other type (such as gestational or cancer-related)?

О Туре 1
O Type 2
O Gestational
O Other type of diabetes
O Do now know/Unsure



Do you, or does any member of your household or immediate family, work as a health care professional (diabetes educator, doctor, nurse, pharmacist, dietician, community health worker, etc.)?

O Yes			
O No			

Do you, or does any member of your household or immediate family, work in a medical office, hospital, health care system, or pharmaceutical company?

O Yes			
O No			



Has a health care provider ever referred you to diabetes education? I am specifically referring to diabetes education where you meet with a diabetes care and education specialist in either one-on-one, in a group or online. These services help people keep on track to live well with diabetes. Diabetes care and education specialists connect people with resources to build skills, knowledge and tools to reach their goals. Sessions can be on eating healthy, checking blood sugar, being active, managing stress, and problem solving.

O Yes		
O No		
O Do not know/Unsure		

Have you ever participated in diabetes education to which your health care provider referred you? Again, I am specifically referring to one where you meet with a diabetes care and education specialist either in a group, one-on-one or online.

O Yes (specify name of program)		
O No		

Did you participate in the diabetes education within the last 24 months?

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O No

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1	DO	no	knowl	Unsure
	00	1 IU	KI IOW/	Unsure

Thinking specifically about the diabetes education you participated in approximately how many hours of diabetes education have you received through this program?

O Number of hrs:		
O Do not know/Unsure		

How long have you had diabetes?

O Less than 2 years

O 2 - 9 years

O 10 or more years

Have you ever experienced any health problems as a result of having diabetes? For example, these may include eye problems, foot or nerve pain, kidney problems, amputations, or heart problems.

O Yes		
O No		

How much do you agree with the following statement: I believe it is important to get regular regular check-ups.



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Which of the following best describe the area where you live?

O Urban

O Suburban

O Rural

What is the highest level of education you have completed?

O Less than high school graduate

O High school graduate or completed GED

O Some college or technical school

O A four-year college degree

O Higher than a 4-year college degree (e.g., Master's degree, PhD)

O Other (specify)

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Please tell me your race or ethnic background in the next 2 questions. How do you describe your ethnicity?

O Hispanic or Latino

O Not Hispanic or Latino

How do you describe your race? [select all that apply]

O American Indian or Alaska Native

O Asian

O Black or African American

O Native Hawaiian or Other Pacific Islander

O White

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Thank you very much for your time. You do not qualify for the study, so we will not be able to include you in our study. Thank you for your time and interest. Have a good day.



Brand Concept Testing: People with Diabetes Consent Form

OMB No. 0920-0572 Expiration Date 08/31/2021 Identification of Project: Survey with people with diabetes.

Authority for Collecting Data: Section 301 of the Public Health Service Act.

Purpose: The Centers for Disease Control and Prevention (CDC) is the sponsor of this project. FHI 360 is helping with this project. The purpose of the project is to find ways to increase awareness about and participation in diabetes self-management education and support (DSMES) services, and increase referrals from health care providers to these services. What you share may help CDC and its partners better promote and provide information about DSMES services.

Procedures: You have been invited to participate in a survey. You will be asked your thoughts, opinions, and ideas about DSMES. The survey will last about 15 minutes.

Information Security: There will be a written report based on the findings of the survey. We will keep your responses secure to the extent permitted by law. We will NOT put your name in the report.

Risks: Doing this survey should not place you at any greater risk than you would be at in your daily life.

Benefits, Freedom to Withdraw, and Ability to Ask Questions: This project is not designed to help you personally. However, it may benefit you in learning some of the benefits of DSMES services. It is intended to help CDC inform others about health-related information. You do not have to answer questions that you do not want to answer. You may stop at any time. You will receive \$10 as a thank you.

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Public reporting burden of this collection of information is estimated to average 15 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 Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0572).

O I agree to participate

O I do no agree to participate

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Brand Concept Testing: People with Diabetes Survey

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Thank you for agreeing to participate.

Please provide your honest opinions to the questions.

This survey asks for your opinion on ways to describe and tell people about diabetes self-management education and support services. First you will see draft images. These images would be part of a flyer or poster from your local hospital, pharmacy, or doctor's office. Keep in mind that these are not finished. We want to know what you do and don't like about them so we can make them better.

When you are finished reviewing the image, click the "NEXT" button.

[CONCEPTS WILL INCLUDE AN IMAGE AND ACCOMPANYING TEXT, SUCH AS A TAG LINE]

[Each person will see two different concepts or "images". After each concept is shown, they will be asked a series of questions. We will rotate the order in which they are shown.]

Please use the scale to indicate how much you agree or disagree with the following statements:

	Disagree strongly	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Agree stongly
This was made for a person like me	0	0	0	0	0
l can do what this suggests	0	0	0	0	0
This grabbed by attention	0	0	0	0	0
This is confusing	0	0	0	0	0
This is offensive	0	0	0	0	0
This made me want to talk with my doctor about diabetes self- management education services	0	0	0	0	0
I could trust this service	0	0	0	0	0
l've already had diabetes services like what's described	0	0	0	0	0
This shows what I need to help me manage my diabetes	0	0	0	0	0
This is unique	0	0	0	0	0
This is appealing to me	0	0	0	0	0
This is believable	0	0	0	0	0
This service cares about me and my diabetes	0	0	0	0	0
This service is friendly	0	0	0	0	0

This service is practical	0	0	0	0	0
This service would meet my needs	0	0	0	0	0
If I had to choose a diabetes self= management education service, I would choose this one	0	0	0	0	0
I would tell a friend about this service	0	0	0	0	0

What, if anything, is confusing, unclear, or hard to understand?

What, if anything, you would change about this?

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Now we would like to get your feedback on a second idea.

[Show second concept]

If you had to give this [image/idea/visual] a grade, like in school, where "A" is the best and "F" is a failing grade, what grade would you give this [image/visual] as a choice for making you want to find out more?

O A			
Ов			
Ос			
OD			
O F			

Thinking about diabetes self-management education and support services, how likely do you think you are to sign up after seeing this?

O Definitely will not sign up
O Probably will not sign up
O Might or might not sign up
O Probably will sign up
O Definitely will sign up

Please use the scale to indicate how much you agree or disagree with the following statements:

	Disagree strongly	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Agree stongly
This was made for a person like me	0	0	0	0	0
I can do what this suggests	0	0	0	0	0
This grabbed by attention	0	0	0	0	0
This is confusing	0	0	0	0	0
This is offensive	0	0	0	0	0
This made me want to talk with my doctor about diabetes self- management education services	0	0	0	0	0

I could trust this service	0	0	0	0	0
l've already had diabetes services like what's described	0	0	0	0	0
This shows what I need to help me manage my diabetes	0	0	0	0	0
This is unique	0	0	0	0	0
This is appealing to me	0	0	0	0	0
This is believable	0	0	0	0	0
This service cares about me and my diabetes	0	0	0	0	0
This service is friendly	0	0	0	0	0
This service is practical	0	0	0	0	0
This service would meet my needs	0	0	0	0	0
If I had to choose a diabetes self- management education service, I would choose this one	0	0	0	0	0
l would tell a friend about this service	0	0	0	0	0

What, if anything, you would change about this?

What, if anything, is confusing, unclear, or hard to understand?

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Now that you've seen both [images/brands], please tell me which one you liked best?

[SHOW	IMAGES	AND 2
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Why did you like this one best?

O [graphic 1]

O [graphic 2]

Why did you like this one best?

We thank you for your time spent taking this survey. Your response has been recorded.