

## Att. 2: Focus Group Screening Form

Thank you for your interest in participating in these focus groups. First, we need to know a few things about you. The information you provide in this form will be kept confidential – only staff at Banyan Communications who are involved in this project will have access to it. We will store it in a database on a secure server with password protection, and we will destroy all data after focus groups are finished and the study is over.

In order to protect your confidentiality, please do not give us your full name. Instead, please choose a nickname that we can use.

Nickname: \_\_\_\_\_

Please provide your email: \_\_\_\_\_

Are you able to attend a focus group discussion on (date, time) via Zoom:

Yes       No

Can you speak and understand conversations in English?       Yes       No

Can you speak and understand conversations in Spanish?       Yes       No

### Please answer the following questions about yourself:

Please tell us which race/ethnicity you feel best describes you:

White       African American/Black       Latino/Latina/Hispanic  
 Asian       American Indian/Alaska Native       Native  
Hawaiian/Pacific Islander       Prefer not to answer

How do you describe your gender identity?

Male       Female       Male-to-female transgender (MTF)  
 Female-to-male transgender (FTM)       Other gender identity  
(specify)  
 Prefer not to answer

What is your age:

\_\_\_\_\_ years       Prefer not to answer

What is the highest degree or level of school you have completed? (If you're currently enrolled in school, please indicate the highest degree you have received.)

Less than high school diploma       High school degree or equivalent (e.g., GED)  
 Some college, no degree       Associate or Bachelor's degree  
 More than a Bachelor's degree (e.g. Master's or Doctoral degree)

How many children do you have, live with, and/or raise?

0       1       2 or more

What are the ages of the children you have, live with, and/or raise? (Check all that apply)

0-4 years       5-12 years       13 years or older

Please indicate the state that you live in:

*A dropdown box will be added with the 50 U.S. states*

How would you describe the community that you live in:

Urban       Suburban       Rural

Do you participate in any of the following outdoor activities? (Select all that apply)

Hiking       Camping       Gardening       Golfing  
 Hunting       Fishing

How often do you participate in outdoor activities such as hiking, camping, visiting parks, or gardening?

Weekly       Monthly       A few times a year       Almost never

Does your job require work outdoors such as farming, landscaping, or forest managing, utility work?

Yes       No

Do you have a dog as a pet?

Yes       No

Are you aware of any tick-borne diseases\* in your area, such as Lyme disease? \*Tick-borne diseases are diseases that are spread by tick bites. Tickborne diseases will also include alpha gal syndrome (red meat allergy) which may be triggered by the bite of certain ticks.

Yes       No

Are you aware of any mosquito-borne diseases\* in your area, such as West Nile Virus?

\*Mosquito-borne diseases are diseases that are spread by mosquito bites.

Yes       No

A person can protect themselves from tick- and mosquito-borne diseases by doing things such as wearing insect repellent, wearing long clothes when in wooded areas, showering soon after being outdoors, emptying items that have filled with water, or treating clothes with permethrin. Do you do any of these things?

Yes       No

(If yes then) How often do you do these activities?

Always       Often       Sometimes       Rarely