



# Project Determination

## Firearms Messaging and Asset Development - FA Messaging

**Project ID:** 0900f3eb820d281e  
**Accession #:** NCIPC-DVP-2/27/23-d281e  
**Project Contact:** Jennifer Dills  
**Organization:** NCIPC/OD/OS  
**Status:** Pending Clearance  
**Intended Use:** Project Determination  
**Estimated Start Date:** 03/01/23  
**Estimated Completion Date:** 08/20/24  
**CDC/ATSDR HRPO/IRB Protocol#:**  
**OMB Control#:**

### Description

#### Priority

Standard

#### Date Needed

11/01/23

#### Determination Start Date

02/27/23

#### Description

The Centers for Disease Control and Prevention's (CDC) Division of Violence Prevention (DVP) has created a number of messages on firearm injury and death (FA I&D) data and prevention. This is a newer area of communications for DVP. To expand the existing messages that resonate with our key audiences and promote behavior change, CDC proposes to conduct formative research focused on FA I&D primary prevention. This will inform the development of prevention messaging on FA I&D. These messages will ultimately be added to (or may replace) the existing FA I&D content on the DVP website to be shared with the public. CDC will work with contracted staff to complete a literature review, environmental scan, and social listening, and use the findings to identify gaps in our understanding of the types of messages and trusted messengers for our priority audiences. Contractors will conduct a survey and focus group discussions with five

audiences: firearm owners, individuals who do not own firearms, gun control groups, community-based organizations, and organizations serving communities of color. The intent of these activities is to explore audience comprehension, motivation, engagement, and trusted messengers to propose communication and dissemination strategies for those messages. Using information from the survey and focus groups, contractors will finalize the messages and develop a document describing potential communications assets (means of communication and dissemination). Survey and focus group data will also help CDC assess if the agency is providing appropriate information to the intended audiences. Information gathered will be used only internally for general service improvement and is not intended for release outside of the agency. Information gathered will not be used for the purpose of substantially informing influential policy decisions. Without these types of feedback, the Agency will not have timely information to adjust its services to meet the needs of the priority audiences.

#### **IMS/CIO/Epi-Aid/Lab-Aid/Chemical Exposure Submission**

No

#### **IMS Activation Name**

Not selected

#### **Select the primary priority of the project**

Not selected

#### **Select the secondary priority(s) of the project**

Not selected

#### **Select the task force associated with the response**

Not selected

#### **CIO Emergency Response Name**

Not selected

#### **Epi-Aid Name**

Not selected

#### **Lab-Aid Name**

Not selected

#### **Assessment of Chemical Exposure Name**

Not selected

#### **Goals/Purpose**

This proposal seeks to conduct formative research to inform the development of prevention messaging about FA I&D and related communications and dissemination strategies.

#### **Objective**

We will use the information gathered from the literature review, environmental scan, and social listening to: provide evidence-based practices and cutting edge approaches toward communicating around FA I&D primary prevention, with a focus on improving engagement and response; identify themes and ways that FA I&D prevention is discussed in the peer-reviewed and grey literature; explore contexts in which this topic is discussed; characterize words, phrases, terms, and message frames used to discuss this topic; develop message types to be discussed in the focus groups. We will use the information gathered from the survey and

focus groups to: assess perceptions and understanding of the messages and materials, as well as alternate phrasing; explore contexts in which messages and proposed materials are shared to help prevent or respond to FA I&D; discuss dissemination and communication strategies associated with the messages and materials. Triangulated information from the literature review, environmental scan, social listening, survey, and focus groups will then be used to refine or revise the messages, propose related communication assets, and plan communication and dissemination strategies.

**Does this project include interventions, services, or policy change work aimed at improving the health of groups who have been excluded or marginalized and/or decreasing disparities?**

No

**Project does not incorporate elements of health equity science**

Not selected

**Measuring Disparities**

Not selected

**Studying Social Determinants of Health (SDOH)**

Not selected

**Assessing Impact**

Not selected

**Methods to Improve Health Equity Research and Practice**

Not selected

**Other**

We will use the information gathered to explore communication strategies and develop prevention messages about FA I&D to be incorporated into existing CDC resources. Information gathered will be used only internally for general service improvement and is not intended for release outside of the agency. Information gathered will not be used for the purpose of substantially informing influential policy decisions. Without these types of feedback, the Agency will not have timely information to adjust its services to meet customer needs.

**Activities or Tasks**

New Collection of Information, Data, or Biospecimens; Secondary Data or Specimen Analysis

**Target Population to be Included/Represented**

General US Population

**Tags/Keywords**

Firearms; Communication; Violence

**CDC's Role**

Activity originated and designed by CDC staff, or conducted at the specific request of CDC, or CDC staff will approve study design and data collection as a condition of any funding provided; CDC employees or agents will obtain or use anonymous or unlinked data or biological specimens; CDC employees will provide substantial technical assistance or oversight

**Method Categories**

Focus Group; Survey

### Methods

CDC has contracted with Banyan Communications. Banyan will conduct the literature review, environmental scan, and social listening using an approach, search terms, and search parameters developed in collaboration with and agreed upon by CDC. Banyan will use these findings to identify gaps in our understanding of the types of messages and trusted messengers for our priority audiences. Banyan will propose questions for the survey and focus groups about how audiences (firearm owners, individuals who do not own firearms, gun control groups, community-based organizations, and organizations serving communities of color) interpret these messages; how, when, and where they would share these messages; what materials could support sharing of those messages; and how, when and where they should be disseminated. Banyan will survey up to 500 individuals, recruited using Optimal Workshop, a professional survey platform. Banyan will also convene up to nine focus groups with 6-8 participants in each focus group. Banyan will recruit focus group participants through a recruitment firm and DVP's network of organizations and partners working in FA I&D prevention, and will recruit up to 10 participants per focus group to account for attrition. Participants will be screened based on inclusion/exclusion criteria set by CDC and asked to provide informed consent prior to participating in the focus groups. Consent forms will include instructions for only using first names during interviews to protect confidentiality and privacy. Focus groups will be approximately 60 minutes in length. They will be conducted via Zoom at times convenient for participants and scheduled to allow participation from multiple time zones to ensure regional variation within the groups. The focus groups will be conducted by a skilled facilitator supported by a note-taker and focus group coordinator responsible for taking observational notes, managing the chat function on Zoom, and troubleshooting the technology. The note-taker will use a note-taking template based on the semi-structured discussion guide. The focus groups will also be audio-recorded.

### Collection of Info, Data, or Bio specimens

This project will utilize the OADC Formative Research Generic OMB package mechanism. Banyan will administer the online survey using the survey platform Optimal Workshop. Survey data will then be exported and de-identified before analysis. Banyan will analyze the survey data in Excel. Focus groups will be conducted and audio-recorded, then transcribed for analysis. The transcripts will not include personally identifiable information (PII), but instead use labels (e.g., participant A, participant B, participant C). Analysis for themes will be conducted using the qualitative data analysis software Atlas.ti. A sub-contractor will be responsible for transcribing interviews, and de-identified transcripts will be delivered to CDC staff.

### Expected Use of Findings/Results and their impact

We will use the information gathered to explore communication strategies and develop communication messages about FA I&D prevention to be incorporated into existing CDC resources.

### Could Individuals potentially be identified based on Information Collected?

No

## Funding

Funding Type	Funding Title	Funding #	Original Fiscal Year	# of Years of Award	Budget Amount
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## HSC Review

### HSC Attributes

#### Other - Health message testing

Yes

## Regulation and Policy

#### Do you anticipate this project will be submitted to the IRB office

No

## Institutions

Institution	FWA #	FWA Exp. Date	IRB Title	IRB Exp. Date	Funding #
Banyan Communications	FWA00029147	01/07/25	Sterling Institutional Review Board IRB #1 - IRBs 3-7	08/10/24	

## Staff

Staff Member	SIQT Exp. Date	Citi Biomedical Exp. Date	Citi Social and Behavioral Exp. Date	Citi Good Clinical Exp. Date	Staff Role	Email	Phone #	Organization/Institution
Jennifer Dills	03/02/2024				Contract Officer Representative	win5@cdc.gov	770-488-4273	DIVISION OF VIOLENCE PREVENTION

## DMP

Proposed Data Collection Start Date	03/01/23
Proposed Data Collection End Date	08/20/23
Proposed Public Access Level	Non-Public

<b>Reason for not Releasing the Data</b>	Other- A small number of respondents will be included in FGD and data is restricted to internal information gathering for formative research. Data not useful for public.
<b>Public Access justification</b>	That data will be used to inform revisions of communications materials. Information will be limited to focus group respondents and survey respondents and will be de-identified. Communications materials will be revised following qualitative data analysis.
<b>How Access Will Be Provided for Data</b>	Data will not be released to the public.
<b>Plans for archival and long-term preservation of the data</b>	For the survey, de-identified exported Excel data will be saved and stored on the CDC share drive after data collection. For the focus groups, de-identified exported Atlas.ti data will be saved and stored on the CDC share drive after data collection. No PII will be included and the data will be used for the development of communication materials only.

## Spatiality (Geographic Location)

<b>Country</b>	<b>State/Province</b>	<b>County/Region</b>
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## Determinations

<b>Determination</b>	<b>Justification</b>	<b>Completed</b>	<b>Entered By &amp; Role</b>
HSC: <b>Does NOT Require HRPO Review</b>	Non-Exempt Human Subjects Research when CDC is not engaged  <i>45 CFR 46.102(a) HHS/OHRP 2008 Engagement Guidance at III B(1-11)</i>	03/31/23	Duncan_Elizabeth (slz5) CIO HSC
PRA: <b>PRA Applies</b>		04/04/23	Angel_Karen C. (idy6) OMB / PRA