**CDC Division of Vector-Borne Diseases**

Focus Group Screener for Outdoor Enthusiasts on Alpha-Gal Syndrome

Updated: December 14, 2023

Hello. My name is \_\_\_\_\_\_\_\_ and I’m calling from \_\_\_\_\_\_\_\_\_, an independent communications firm.

You indicated that you are interested in participating in a focus group conversation on topics that may matter or be interesting to you. **[DO NOT DISCLOSE THE EXACT TOPIC OF DISCUSSION BEFORE THE FOCUS GROUP.]** The discussion will last approximately 90 minutes. The sole sponsor of this activity is the Centers for Disease Control and Prevention (CDC). To maintain participants’ confidentiality, the leader will use first names only during the discussion, and no part of your name be used in any transcripts or reports available to CDC. CDC is not interested in any of your personal information. At this stage, we will be asking you a few questions to ensure we are recruiting a variety of people only.

I have a few questions to start.

**[IF TERMINATED DURING SCREENING PROCESS, READ:]** I’m sorry, we already have enough individuals in that category. Thank you very much for your time.

**INTERVIEWER INSTRUCTION:** If an individual expresses concern at any point during the screening process, please note their concern and reassure them appropriately. Remind them that their answers and participation will be completely confidential.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (residence): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Recruiter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SEPARATE CONTACT SHEET FROM THE REST OF THE SCREENER AND SHRED AT THE END OF THE PROJECT.**

**Recruit Summary**

|  |  |  |
| --- | --- | --- |
| Segment | Audience | FGs / Recruits |
| A | Hunters and fishers | 1 / 8 |
| B | Hikers and campers | 1 / 8 |
| C | Outdoor dog owners | 1 / 8 |
| D | Outdoor activities near home  | 1 / 8 |

**Screening Questions**

1. Are you…?

|  |  |  |
| --- | --- | --- |
| Female |  | ***RECRUIT A MIX; MINIMUM 3 FEMALE/MALE PER GROUP*** |
| Male |  |
| Transgender, non-binary, or another gender |  |

1. What is your age? **RECORD EXACT AGE; DO NOT READ LIST**

|  |  |  |
| --- | --- | --- |
| Under 18 |  | ***TERMINATE ALL*** |
| 18-29 |  | ***MINIMUM 3 PER GROUP*** |
| 30-39 |  |
| 40-49 |  | ***MINIMUM 3 PER GROUP*** |
| 50-59 |  |
| 60 or older |  |

1. In what city and state do you live? **RECORD CITY & STATE, ALSO CODE TO TABLE**

|  |  |  |
| --- | --- | --- |
| Northeast |  | ***MINIMUM 2 FROM EACH REGION PER GROUP*** |
| South |  |
| Midwest |  |
| West |  | ***TERMINATE*** |

1. Have you participated in any of the following activities in the past 12 months? Choose all that apply.

|  |  |  |
| --- | --- | --- |
| Hunting |  | ***CONTINUE*** |
| Hiking or backpacking |  |
| Camping |  |
| None of the above |  |

1. **IF ANY OF PREVIOUS ARE SELECTED** In the past 12 months, how many times have you participated in each of the activities you selected? Your best estimate is fine. **RECORD FOR EACH ACTIVITY SELECTED**

|  |  |  |
| --- | --- | --- |
| Once or twice |  | ***CONTINUE*** |
| Three or four times |  |
| Five to 10 times |  |
| More than 10 times |  |

* ***HUNTERS GROUP:***
	+ *Must have participated in hunting 5 or more times in the past 12 months.*
	+ *Minimum 2 of who have hunted more than 10 times.*
* ***HIKERS/CAMPERS GROUP:***
	+ *Must have participated in (a) hiking or backpacking or (b) camping five or more times in the past 12 months.*
	+ *Minimum 4 hikers or backpackers (can count toward both).*
	+ *Minimum 3 campers (can count toward both).*
	+ *Minimum 1 of each who have hiked/backpacked or camped more than 10 times.*

**IF NOT QUALIFIED FOR ABOVE GROUPS, ASK THE FOLLOWING QUESTIONS**

1. Do you own a dog?

|  |  |  |
| --- | --- | --- |
| Yes  |  | ***CONTINUE*** |
| No |  |

1. **IF OWN A DOG** For how long have you had dogs, including any you had before?

|  |  |  |
| --- | --- | --- |
| Less than 1 year  |  | ***CONTINUE*** |
| 1 to 2 years |  |
| 2 or more years |  |

1. **IF HAD DOG 2 OR MORE YEARS** Here are some outdoor activities some people do with their dogs. Do you do any of these with your dog? **READ:** Water activities or visits to rivers, lakes, or beaches; camping, hiking, or trail running; visiting woods, nature parks, or state or county parks; or similar natural activities.

|  |  |  |
| --- | --- | --- |
| Yes |  | ***PROBE AND RECORD WHICH ACTIVITIES, CONTINUE*** |
| No |  | ***CONTINUE*** |

1. **IF YES TO PREVIOUS DOG ACTIVITIES** In the past month, how many times have you and your dog participated in any of the activities you mentioned? Your best estimate is fine.

|  |  |  |
| --- | --- | --- |
| Once |  | ***CONTINUE*** |
| Twice |  |
| Three or four times |  |
| Five to ten times |  |
| More than ten times |  |

* ***OUTDOOR DOG OWNERS GROUP:***
	+ *Must own a dog.*
	+ *Must have had dogs for 2 or more years.*
	+ *Must have participated in natural outdoor activities with dog at least 3-4 times in the past month.*

**IF NOT QUALIFIED FOR ABOVE GROUPS, ASK THE FOLLOWING QUESTIONS**

1. Have you participated in any of the following outdoor activities in the past 12 months? Choose all that apply.

|  |  |  |
| --- | --- | --- |
| Gardening at home or in the community |  | ***CONTINUE*** |
| Walks or runs on park paths, trails, or roads |  |
| Biking on park paths, trails, or roads |  |
| Birdwatching at parks, forests, fields, or bodies of water |  |
| Outdoor rock climbing |  |
| Horseback riding |  |
| Other activities outdoors (please specify) |  |
| None of the above |  |

1. **IF ANY OF PREVIOUS ARE SELECTED** In the past 12 months, how many times have you participated in each of the activities you selected? Your best estimate is fine. **RECORD FOR EACH ACTIVITY SELECTED**

|  |  |  |
| --- | --- | --- |
| Gardening at home or in the community |  | ***CONTINUE*** |
| Walks or runs on park paths, trails, or roads |  |
| Biking on park paths, trails, or roads |  |
| Birdwatching at parks, forests, fields, or bodies of water |  |
| Outdoor rock climbing |  |
| Horseback riding |  |
| Other activities outdoors (please specify) |  |

* ***OUTDOOR ACTIVITIES NEAR HOME GROUP:***
	+ *Must have participated in any of the outdoor activities 24 times or more in the past 12 months; can include the combined total across activities.*
	+ *Maximum 4 who only do gardening, walks/runs, or both.*
	+ *KRC to review if “Other” is the only activity mentioned.*

**RESUME ASKING ALL**

1. How familiar are you with each of the following topics? Are you very familiar, somewhat familiar, not too familiar, or not at all familiar? **READ IN RANDOM ORDER, RECORD FOR EACH**

|  |  |  |
| --- | --- | --- |
| Tick bites and tick-borne diseases |  | ***MAX 2 NOT AT ALL PER GROUP*** |
| Sun damage and heatstroke  |  | ***CONTINUE. DUMMY TOPICS TO MASK SUBJECT.*** |
| Poison ivy and poison oak |  |

1. How concerned are you about each of the following topics? Are you very concerned, somewhat concerned, not too concerned, or not at all concerned? **READ IN RANDOM ORDER, RECORD FOR EACH**

|  |  |  |
| --- | --- | --- |
| Tick bites and tick-borne diseases |  | ***MAX 2 NOT AT ALL PER GROUP*** |
| Sun damage and heatstroke  |  | ***CONTINUE. DUMMY TOPICS TO MASK SUBJECT.*** |
| Poison ivy and poison oak |  |

1. Which of the following best describes the area where you live?

|  |  |  |
| --- | --- | --- |
| Urban |  | ***MAX 4 URBAN + SUBURBAN PER GROUP*** |
| Suburban |  |
| Small town |  | ***MAX 5 SMALL TOWN + RURAL PER GROUP*** |
| Rural |  |

1. Are you of Hispanic, Latino, or Spanish origin?

|  |  |  |
| --- | --- | --- |
| Yes |  | ***CONTINUE*** |
| No |  |

1. What is your race? Choose all that apply.

|  |  |  |
| --- | --- | --- |
| American Indian or Alaska Native |  | ***CONTINUE*** |
| Asian  |  |
| Black or African American |  |
| Native Hawaiian or Other Pacific Islander |  |
| White |  |
| Another race |  |

 ***MINIMUM 2 WHO ARE HISPANIC, LATINO, SPANISH, OR NON-WHITE PER GROUP***

1. Which of the following includes your total annual household income for the last year?

|  |  |  |
| --- | --- | --- |
| Less than $20,000 |  | ***MINIMUM 3 PER GROUP*** |
| $20,000 to less than $30,000 |  |
| $30,000 to less than $40,000 |  |
| $40,000 to less than $50,000 |  |
| $50,000 to less than $60,000 |  |
| $60,000 to less than $70,000 |  | ***MINIMUM 3 PER GROUP*** |
| $70,000 to less than $80,000 |  |
| $80,000 to less than $90,000 |  |
| $90,000 to less than $100,000 |  |
| $100,000 or more |  |

1. Do you, a spouse or partner, or a child work in any of the following fields?

|  |  |  |
| --- | --- | --- |
| Market research or communications |  | ***TERMINATE ALL*** |
| Health care or public health |  |
| Pharmaceuticals, health sciences, or medical device manufacturing |  |
| Federal or state government |  |
| None of the above |  | ***CONTINUE*** |

1. How many times within the past three months have you participated in a focus group or one-on-one research interview? **DON’T READ LIST**

|  |  |  |
| --- | --- | --- |
| None |  | ***CONTINUE*** |
| 1 or more |  | ***TERMINATE ALL*** |

Finally, to ensure we understand the individuals who are answering these questions…

1. What is the highest level of education you have completed?

|  |  |  |
| --- | --- | --- |
| Less than high school graduate |  | ***MIN 2 PER GROUP*** |
| High school graduate or completed GED |  |
| Technical or vocational degree |  |
| Four-year college degree |  | ***MIN 2 PER GROUP*** |
| Postgraduate or professional degree |  |

1. What best describes your current employment status?

|  |  |  |
| --- | --- | --- |
| Employed, full-time |  | ***MIN 4 PER GROUP*** |
| Employed, part-time |  |
| Student |  | ***CONTINUE*** |
| Homemaker |  |
| Retired |  |
| Unemployed |  |

**Invitation**

Thank you for answering all of my questions. As I mentioned, we respect your privacy and understand this information is confidential, and we will not disclose this information to anyone outside of the project team. We asked these questions because we want to speak with a wide variety of people who can review important information and provide their feedback. Based on your answers to the questions, we would like to invite you to participate in a 90-minute focus group.

You will receive $75 as a token of appreciation for your participation, which will be provided to you after you complete the focus group.

All of your feedback will be confidential, never in association with your name. To make sure we capture your remarks accurately, we will audio and video record the discussion. The purpose of the recording is to make sure we report accurately, we will not include your name in the transcript. After approval of the final report, recordings will be deleted. Is this discussion something you are interested in and comfortable with?

|  |  |  |
| --- | --- | --- |
| Yes |  | ***SHARE DATE AND TIME OF FOCUS GROUP*** |
| No |  | ***TERMINATE ALL*** |

Additionally, the focus group is virtual, meaning that you can participate from the comfort of your home or office. You will not need to come to a facility and can meet us from wherever you are, but you will need to be in front of a computer or tablet with internet access and camera so you can be on screen. You will also have to be in a quiet place. Someone will call you before the focus group to make sure all the technology needed for the discussion is working properly. Is this something you are interested in and comfortable with, and do you have access to a computer or tablet to fulfill these requirements?

|  |  |  |
| --- | --- | --- |
| Yes |  | ***CONTINUE*** |
| No |  | ***TERMINATE ALL*** |

**FOR SCHEDULED PARTICIPANTS:**

The focus group will occur on **DATE**, at **TIME**. Before your scheduled discussion, we will send you confirmation with all the required logistical and technological information. If you wear reading glasses or use a hearing aid, please remember to have those with you at the focus group.

If you must cancel, please let us know immediately, so we can find someone to take your place. My name is \_\_\_\_\_\_\_\_\_\_\_ and you can reach me at \_\_\_\_\_\_\_\_\_\_\_\_\_.

**SEPARATE FIRST PAGE (CONTACT SHEET) AND SHRED AT THE END OF THE PROJECT**