December 22, 2023

GenIC Clearance for CDC/ATSDR Formative Research and Tool Development

Wastewater Surveillance Communication Evaluation: Assessing Water Surveillance Messages, Knowledge, and Attitudes OMB Control No. 0920-1154

Supporting Statement B

Contact: Jena Losch, MPH Office of the Director Division of Infectious Disease Readiness & Innovation Centers for Disease Control and Prevention 1600 Clifton Road, NE Atlanta, Georgia 30333 Phone: 770.488.3834 Email: xkd6@cdc.gov

Table of Contents

1.	Respondent Universe and Sampling Methods	3
2.	Procedures for the Collection of Information	4
3.	Methods to Maximize Response Rates and Deal with No Response	5
4.	Tests of Procedures or Methods to be Undertaken	5
5.	Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data	6

LIST OF ATTACHMENTS

- 1. Eligibility Screener
- 2. Recruitment Materials
- 3. Eligible Participant Screener
- 4. Privacy Agreement
- 5. Respondent Consent Form for Focus Groups
- 6. Standard Invitation for FGs
- 7. Participant Confirmation Email
- 8. Focus Group Moderator Guide
- 9. Messages to be Tested
- 10. Human Subjects Determination

Supporting Statement B

The collection of data for this project does not involve statistical methods, and the purpose of the collection is not to make statistical generalizations beyond the respondents included in the study. The objectives of the project are to:

- Obtain information about the suitability (e.g., clarity, applicability) of current messages and materials about the National Wastewater Surveillance System (NWSS), including aspects of the in-development website.
- Obtain findings on knowledge gaps and communication preferences for viral disease data presentation tools and surveillance messages among those disproportionately affected by diseases that wastewater surveillance can monitor, including caregivers, business leaders, individuals at high risk for viral diseases, and rural populations, to promote health equity among these populations.
- Obtain insights about educational factors that may influence the attitudes, perceptions, and behaviors of individuals who receive health guidance related to viral diseases from CDC.

1. Respondent Universe and Sampling Methods

The project team will enlist a national recruitment agency to recruit and manage participant screening. They will recruit from a national proprietary database of individuals. The primary audience for the focus groups is U.S. adults aged 18 and older who make health and business decisions based on wastewater surveillance data. Key audiences will consist of people at high risk for viral diseases, people living in rural areas, business leaders, and caregivers of children under the age of 5 and the elderly and will be segmented further to support rich data collection and analysis. The project team will aim to recruit a sample of diverse participants that aligns with <u>U.S</u> <u>Census data</u>. The project team will aim to recruit a sample of diverse participants by various demographic and wastewater surveillance risk characteristics segmented as shown in Tables 1 and 2, respectively. We will conduct a series of 6 virtual focus groups lasting 60 minutes each. Each focus group will consist of eight to ten participants (n=60).

Table 1. Focus group demographic makeup by key audience, type, and number.

Population	Segmentation	Number of Focus groups	Number of Participants
Caregivers (of children and elderly	Caregivers of children under 5	1	8-10
individuals)	Caregivers of elderly individuals	1	8-10
Business Leaders	General population (not including low education individuals)	1	8-10
	Low education (less than high school diploma)	1	8-10

Population	Segmentation	Number of Focus groups	Number of Participants
Individuals at high risk of viral diseases	N/A	1	8-10
Rural Populations	N/A	1	8-10
Total		6	48-60

Table 2. Demographic characteristics to be captured.



2. Procedures for the Collection of Information

<u>Recruitment</u>

For the focus group discussions, to identify and recruit participants, we will employ a two part screening process to assess eligibility for participation. The first screener (**Attachment 1**) will ensure if they are eligible to participate in the focus groups. The second screener: Eligible Participant Screener (**Attachment 3**) will allow the recruiters to group the participants into specific focus groups (e.g. rural populations).

Exclusion criteria for participation includes people:

- under 18 years of age;
- who are not comfortable speaking or reading in English;

- who have participated in a focus group in the last 6 months;
- who work in the following industries: market research, graphic design or website design, advertising or public relations, media (TV/radio/newspapers/magazines), healthcare (e.g., doctor, nurse, pharmacist, dietician), federal government, infectious disease research, sample testing, or surveillance;
- who do not have access to the internet with a computer or mobile device.

These comprehensive screeners were developed in collaboration between CDC and the contractor. During the recruitment phase, the recruitment firm will provide a respondent report, confirmed attendees, and respondents for review. Staff will review these documents to ensure the recruitment mix is being reached. The recruitment firm will complete confirmation calls and provide a recruitment report after each focus group session is completed.

The contractor and recruitment agency will provide ongoing screening and recruitment updates to CDC and work with the project team to select a diverse sample for the groups during the recruitment phase. Samples of the recruitment materials that may be used by the recruitment agency can be found in **Attachment 2**. These, and similar items, will be used for recruitment. Recruited individuals will be sent an email with a digital consent form to confirm their participation (Attachment 7).

Implementation

The project team will conduct 6 virtual focus groups lasting about 60 minutes each. The team has developed a focus group approach designed to gather information about and assess participants' knowledge, attitudes, beliefs, and behaviors about wastewater surveillance and related messages. Specifically, the focus groups will provide responses to targeted questions about interests, behaviors, and opinions related to wastewater surveillance, as well as the effectiveness, preferred tone, format, and placement of new and existing messages around wastewater surveillance. Experienced moderators will facilitate the focus groups following approved semi-structured facilitator discussion guides (Attachment 8). The guides will contain multiple items and probes, which start more generally and get more specific, for individuals to respond to throughout the session. The contractor will conduct the virtual focus groups using a web conferencing platform.

CDC project staff will have access to the live focus group for observation. The focus groups will be audio and video recorded and the de-identified transcripts will be provided to CDC upon completion of all focus groups.

To protect the privacy of participants, personally identifiable information (e.g., names, places of employment mentioned) will be redacted from all transcripts and not included in the field notes, final report, or any presentation about the project. Further, to ensure security, the contractor will provide CDC with password-protected files of the transcripts, notes, and analysis files.

To protect the privacy of participants, personally identifiable information will be redacted from all data files and not included in the final report, or any presentation about the project. Further, to ensure security, the contractor will provide CDC with password-protected files of the survey data and analysis files.

Analysis and Reporting

The contractor will use iterative thematic analysis to identify key themes and subthemes captured in the data collected during focus groups. Using ATLAS.ti, the contractor will use both inductive and deductive coding to

identify themes and organize the data captured from participants. The contractor will provide CDC with a final report summarizing the results of the focus groups. The report will also include quotes from participants to illustrate themes and topics of interest.

The contractor will use descriptive statistics of the data collected during online surveys. The contractor will provide CDC with a final report summarizing the results of each survey administration.

3. Methods to Maximize Response Rates and Deal with No Response

Tokens of appreciation will be used in the focus groups to increase the likelihood of participation and offer a token of appreciation to participants for their time and input to the study. Based on industry standards, national vendor's expertise, and a previously cleared project, we plan to give \$75.00 per focus group participant as tokens of appreciation. In order to optimize and increase the chance of having at least a minimum of eight participants in each focus group, the contractor will over-recruit by 20 percent. This will account for any last-minute cancellations or no-shows and aim to get eight people per focus group.

A similar communication evaluation project that was conducted in the summer of 2023 proposed and was approved for 75\$ per person for a 60-minute focus group discussion (OMB No. 0920-1154, Food Safety Communication Evaluation: Assessing Food Safety Messages, Knowledge, and Attitudes).

This year, the team plans to conduct 60-minute focus groups with similar populations, therefore \$75 per person is appropriate. In addition, reviewed literature revealed the payment of incentives can provide significant advantages to the government in terms of direct cost savings and improved data quality. (See References.)

4. Tests of Procedures or Methods to be Undertaken

One technical run-through will be conducted with contractor staff prior to the start of the study.

5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

No individuals outside of the project team were consulted for statistical aspects of the design. Target numbers for the focus participants and groups were informed by the project scope of work, food safety surveillance data and research, and DFWED priorities. The data being collected are qualitative and descriptive and there will be no statistical aspects of analysis. The individuals collecting and/or analyzing data include:

Lead Investigator: Jena Losch, MPH, Research Lead, Centers for Disease Control and Prevention (CDC), National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Division of Infectious Disease Readiness and Innovation (DIDRI), Office of the Director (OD)

Collaborators

Name	Organizational Unit	
Nora Kuiper, Project Director	Banyan Communications	
	(contractor)	
Tola Aina, Project Manager	Banyan Communications	
	(contractor)	
Sharanya Thummalapally, Lead Research and Evaluation Specialist	Banyan Communications	
	(contractor)	

Amanda White, Senior Communications Strategist	Banyan Communications
	(contractor)
Bria Berry, Research and Evaluation Specialist	Banyan Communications
	(contractor)

References

- Abreu, D.A., & Winters, F. (1999). Using monetary incentives to reduce attrition in the survey of income and program participation. *Proceedings of the Survey Research Methods Section of the American Statistical Association*.
- Bonevski, B., Randell, M., Paul, C., Chapman, K., Twyman, L., Bryant, J., Brozek, I., & Hughes, C. (2014). Reaching the hard-to-reach: a systematic review of strategies for improving health and medical research with socially disadvantaged groups. *BMC medical research methodology*, 14, 42. <u>https://doi.org/10.1186/1471-2288-14-42</u>
- Krueger, R. and Casey, M. (2009) *Focus Groups: A Practical Guide for Applied Research*. Sage Publications: Thousand Oaks, CA.
- Robinson, K. A., Dennison, C. R., Wayman, D. M., Pronovost, P. J., & Needham, D. M. (2007). Systematic review identifies number of strategies important for retaining study participants. *Journal of clinical epidemiology*, 60(8), 757–765. https://doi.org/10.1016/j.jclinepi.2006.11.023
- Shettle, C., & Mooney, G. (1999). Monetary incentives in U.S. government surveys. *Journal of Official Statistics*, 15, 231–250.
- Singer, E., N. Gelber, J. Van Hoewyk, and J. Brown (1997). *Does \$10 Equal \$10? The Effect of Framing on the Impact of Incentives*. Paper presented at the American Association for Public Opinion; Norfolk, VA.
- Singer, E., Van Hoewyk, J., and Maher, M.P. (2000). Experiments with Incentives in Telephone Surveys. *Public Opinion Quarterly* 64(3):171-188.