**CDC/ATSDR Formative Research and Tool Development**

**OMB# 0920-1154**

**SUPPORTING STATEMENT: PART B**

Message Evaluation for CDC's Stop Overdose Campaigns

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## 1. Respondent Universe and Sampling Methods

The primary audience for this effort is U.S. adults ages 18–34. We will identify and recruit participants through a vendor, iHeart/Unified, which uses national survey panels to collect data from a non-probability sample from selected markets. The sample will consist of participants in selected markets where the campaigns will be delivered either through digital ads or broadcast radio. For each survey, two total samples, each of approximately N=700 participants, will be collected: 1) *broadcast radio survey* sample n=350 exposed/n=350 unexposed); and the *digital ad* survey sample (n=350 exposed/n=350 unexposed). Participants should speak and read English.

**Sampling for the *radio broadcast* sample (Attachment 1 and 3)**: Exposed participants will be identified based on their location in a market where the campaign ads were run. A screener will confirm their exposure to radio broadcast ads. A sample of unexposed *radio broadcast* participants will be invited to take the survey prior to the launch of radio broadcast ads.

**Sampling for the *digital ad* sample (Attachment 2 and 4):** For exposed participants, a digital tag is used to identify participants who have been exposed to digital media ads. In digital analytics, a tag is an element included on each webpage to be measured. The tag is a small piece of code that is inserted into the page's source code. It allows the third-party analytics tool to log connections on its server. In digital analytics, the tag is used to refine analyses using segments. The digital tag confirms exposure to digital ads, thus no screening is required. Unexposed *digital ad* participants will be identified as individuals in the panels who have not been tagged with the digital tags used for this effort.

The purpose of this data collection is to:

- Collect data from a sample of audience members who have been exposed to the Stop Overdose campaigns and from a sample who have not been exposed.
- Assess the impact of campaign exposure on audiences' drug overdose prevention knowledge, attitudes, and behaviors.
- Assess differences in drug overdose prevention knowledge, attitudes, and select behaviors and behavioral intentions related to key messages by select demographic characteristics based on key affected populations.

## 2. Procedures for the Collection of Information

Data will be collected through two instances of the same online survey with no more than 50 items disseminated. The survey will collect data for both the sample of those exposed by broadcast radio (**Attachment 1**) or digital ads (**Attachment 2**). Broadcast radio and digital ads are the primary channels through which the Stop Overdose campaign is delivered and to measure message effectiveness (exposed/unexposed) a separate sample for each is required.

**Data collection for the *radio broadcast* sample** radio (**Attachment 1**): Exposed participants are invited to take the survey by email and digital ad. A sample of unexposed *radio broadcast* participants will be invited to take the survey prior to the launch of radio broadcast ads. The survey will be administered prior to campaign implementation in the market, then again after campaign implementation.

**Data collection for the *digital ad* sample** radio (**Attachment 2**)**:** Participants identified by digital tagging (indicating exposure to campaign ad) will be invited to the survey by email (**Attachment 5**). Unexposed *digital ad* participants will be identified and recruited as individuals who have not been identified through the digital tags used for this effort. The survey will be administered prior to campaign implementation in the market, then again after campaign implementation.

On the opening page of the survey participants will receive a valid OMB number and contact information in case participants have questions about their rights as a participant.

Participants will first be screened by age to ensure they are 18-34 and by location to confirm they are in the media market where the ads were disseminated. We will ask two items to confirm the relevance of the topic of drug overdose to participants.

Though data will be collected through two separate surveys, one for each channel, the survey instrument will the same. The survey instrument will gather audience knowledge, attitudes, and beliefs (KABs), perceptions of campaign asset products, and demographic and drug use-related characteristics. We will gather demographic information at the end of the survey, including age, gender, race, education level, income level, state of residence, and acculturation.

To vendor will retain only aggregate survey data and any other project-related documents on secure servers. Only project staff members will have access to the servers via password-protected computers. Findings will be reported in summary form and no participants' personally identifiable information will be collected.

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

To maximize response rates the surveys will invite participants to participate through the campaign launch as they are identified.

Any incomplete responses, including when started but then dropped out, are disregarded. We will only analyze data on survey completes.

### 4. Tests of Procedures or Methods to be Undertaken

CDC and contractor project staff will work with iHeart/Unified to test the survey prior to launch to ensure proper logic and functionality.

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

iHeart/Unified provided analysis to inform the statistical needs for analysis. Target sample sizes were informed by the margin of error parameters identified in the iHeart/Unified survey panel required to measure the message effectiveness of being exposed to Stop Overdose campaign messages as compared to those unexposed by either broadcast radio or digital ads. Based on a margin of error of 4% and a 95% confidence level, we need a minimum of 700 participants for each of the broadcast radio group (n=350 exposed/n=350 unexposed) and the digital ad group (n=350 exposed/n=350 unexposed).

We also used G*Power to calculate an a priori sample size for additional power analysis needed to assess the message effects and variances in scores by key affected audiences. To conduct one-way ANOVAs to detect a

moderate effect size (β=0.8), with 95% confidence (α =0.05), we will need a minimum sample size of 343 (for each survey) or approximately 686 total survey participants for the first phase.

The individuals collecting and/or analyzing data include:

**Lead Investigator:** Brittany Curtis, Lead Health Communication Specialist, CDC, NCPIC, DOP

**Co-Investigators:**

**Collaborators**

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