

Generic Clearance for CDC/ATSDR

Formative Research and Tool Development

Title: Formative Research for Firearm Violence and Community Violence Messaging

Supporting Statement A

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List of Attachments

- Attachment 1: FA Survey and Consent
- Attachment 2: FA FGD Guide and Consent
- Attachment 3: FA FGD Screening Form
- Attachment 4: FA Messages for Testing
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- Attachment 6: CV Survey and Consent
- Attachment 7: CV FGD Guide and Consent
- Attachment 8: CV FGD Screening Form
- Attachment 9: CV Messages for Testing
- Attachment 10: CV Images for Testing

Attachment 11: Privacy Impact Assessment

Goal of the study: This project seeks to enhance the Division of Violence Prevention's (DVP) ability to establish a common understanding of both firearm injury and death and community violence as public health issues. Related to firearm injury and death, this project seeks to collect information on priority audiences' reactions to, understanding of, and preferences around firearm injury and death prevention messages, as well as their trusted messengers and dissemination channels. The priority audiences for firearm injury and death messaging include general consumers, individuals who own firearms, individuals who do not own firearms, policymaker organizations, community-based organizations, and organizations serving communities of color—because these communities are disproportionately impacted by firearm injury and death. Related to community violence, this project seeks to collect information on priority audiences' reactions to, understanding of, and preferences around community violence prevention messages, as well as their trusted messengers and dissemination channels. The priority audiences for community violence prevention messaging include general consumers, the community violence workforce, and community-based organizations - all of whom are common among DVP's primary audiences (i.e., media, policymakers, public health departments).

Intended use of the resulting data: We will use information collected from priority audiences related to firearm injury and death to develop messaging for general consumers who own firearms, general consumers who do not own firearms, policymaker organizations, community-based organizations, and organizations serving communities of color (those disproportionately impacted by firearm injury and death). We will use information collected from priority audiences related to community violence to develop messaging for general consumers, the community violence workforce, and community-based organizations.

Methods to be used to collect: Data collection will include one survey for firearm injury and death and one survey for community violence. Each survey will consist of up to 500 participants, for a total of up to 1000 survey participants. There will be at most nine (9) virtual focus group discussions (FGDs) related to firearm injury and death, and nine (9) FGDs related to community violence. Each FGD will involve at most eight (8) individuals, for a total of 144 individuals. The FGD facilitator will follow a FGD guide which includes receiving verbal acknowledgement of voluntary consent.

The subpopulation to be studied: For firearm injury and death, the populations to be studied include general consumers who own firearms, general consumers who do not own firearms, policymaker organizations, community-based organizations, and organizations serving communities of color (those disproportionately impacted by firearm injury and death). For community violence, the populations to be studied include general consumers, the community violence workforce, and community-based organizations.

How data will be analyzed: Quantitative data will be analyzed using descriptive statistics and comparative analyses. Qualitative data will be analyzed using grounded theory (Corben & Strauss, 2008) and narrative analysis (Riessman, 2008) strategies to answer the research questions and identify translatable findings into communication strategies. A codebook will be developed consisting of deductive and inductive codes to identify and compare themes within and across FGDs. Findings will be compiled into a report that will highlight recommendations for message and material development.

A. JUSTIFICATION

1. Circumstances Making the Collection of Information Necessary

The Centers for Disease Control and Prevention (CDC), Division of Violence Prevention (DVP) requests OMB approval of a new generic information collection (GenIC) under the generic information collection entitled *Generic Clearance for CDC/ATSDR Formative Research and Tool Development* for a period of 12-months.

Firearm injury and death (FA I&D) and community violence (CV) are inter-related public health problems. FA I&D includes homicide, suicide, and unintentional injury and death and, typically, occur within the home, as opposed to in the community. CV typically happens between individuals, who may or may not know each other, generally outside the home. CV examples include youth violence, such as assaults or fights among groups, and shootings in public places, such as schools, parks, and businesses.

DVP works to prevent violence before it begins. The DVP mission outlines key activities to prevent violence and its consequences, including surveillance, research and development, capacity building, communication, and leadership. To successfully carry out these activities, both DVP and its partners must understand the fundamental building blocks of violence prevention, including concepts of primary prevention, the social-ecological model, and the public health approach. To build upon these fundamentals, DVP must reach key audiences with deeper, actionable information related to high-priority topics like FA I&D and CV. In order to achieve violence prevention objectives, the messages, language, imagery, and assets DVP deploys must be tested and tailored according to the best available evidence on how to reach each priority population. The messages will be disseminated in various communication products, technical assistance materials, tools, and trainings.

DVP conducted preliminary research to determine the most suitable message types and messages for audiences interested in FA I&D prevention. This research included a review of public and media inquiries related to FA I&D; an environmental scan of communications from key organizations working to prevent FA I&D; and social listening to understand social media messaging from FA I&D-focused organizations.

DVP also conducted preliminary research to determine the most suitable message types and messages for audiences interested in CV prevention. This research included a review of public and media inquiries related to CV; an environmental scan of communications from key organizations working to prevent CV, a landscape analysis to identify new or lesser-known organizations present on the topic of CV; social listening to understand social media messaging from CV-focused organizations; and news media monitoring to understand how news media outlets discuss CV.

Findings from the preliminary research activities were used to inform draft messages and materials that are being proposed for testing through this information collection, as well as to inform the information collection tools. The priority audiences for the information collection on FA I&D include general consumers who own firearms, general consumers who do not own firearms, policymaker organizations, community-based organizations, and organizations serving communities of color. The priority audiences for the information collection on CV include general consumers, the CV workforce (e.g., violence interrupters, community health workers), and community-based organizations.

2. Purpose and Use of Information Collection

When properly designed and implemented, communication messages and materials can increase awareness, knowledge, self-efficacy and motivation of key audiences to engage in violence prevention. However, communication materials and messages must be designed effectively to ensure they are generating these desired outcomes. By conducting research that collects information on key audiences' awareness and understanding of FA I&D and CV, knowledge and perceptions of FA I&D and CV prevention strategies, perceived role of public health as it relates to FA I&D and CV, and preferred communication channels and trusted messengers, CDC can understand key audiences' knowledge and barriers to receiving information about FA I&D and CV. Thus, this information collection will allow CDC to develop messages and materials that increase awareness and understanding of FA I&D and CV, as well as strategies to prevent FA I&D and CV.

3. Use of Information Technology and Burden Reduction

A survey will be conducted online via the online survey platform Optimal Workshop. This approach allows for recruitment through existing participant panels of the survey platform. This approach also allows for national recruitment which reaches a wider, more diverse target audience, including those in rural areas. The survey platform has built-in analytics, which will allow the research team to quickly analyze data.

Focus groups will be conducted online via the online video-conferencing platform Zoom. This approach allows for national recruitment, which reaches a wider, more diverse target audience, including those in rural areas; it also provides flexibility for participants who would not be able to attend in-person focus groups. Each FGD will be audio-recorded and data will be transferred and stored on a shared information system with access restricted to authorized study personnel. This reduces the number of research staff that will be required to conduct focus groups and those that are present can focus on facilitation. Each FGD will be transcribed and imported into Atlas.ti 23 for coding. The use of a transcription service allows the research team to process and analyze the data quickly and monitor for data saturation.

4. Efforts to Identify Duplication and Use of Similar Information

A desk review found no instances of similar information to be available.

5. Impact on Small Businesses or Other Small Entities

This data collection will not involve small businesses.

6. Consequences of Collecting the Information Less Frequently

This request is for a one-time data collection.

7. Special Circumstances Relating to the Guidelines of 5 CFR 1320.5

This request fully complies with the regulation 5 CFR 1320.5

8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency

A. A 60-day Federal Register Notice has already been published for the Generic Clearance. No Federal Register Notice is required for this GenIC submission.

B. A health communications consultancy is the contractor for the data collection.

9. Explanation of Any Payment or Gift to Respondents

Incentives will not be offered directly to survey participants.

Each focus group participant will receive \$25 in the form of a gift card as a token of appreciation and reimbursement for opportunity costs and expenses incurred due to participation. Providing incentives to respondents is necessary to successfully recruit individuals. Incentives can increase the likelihood of obtaining a diverse sample of participants, which would include individuals in hard-to-reach and minority populations who encounter complex social problems that place limitations on their desire and time to volunteer for research studies (Ellard-Gray et al. 2015; Knoll et al. 2012).

10. Protection of the Privacy and Confidentiality of Information Provided by Respondents

The proposed study does not involve the collection of personally identifiable information (PII) or sensitive data. No questions will be asked that are of a personal or sensitive nature. This submission has been reviewed by the NCIPC's Information Systems Security Officer, who has determined that the Privacy Act does not apply (Att. 11). At no time will CDC have access to or receive potentially identifiable information. In the screening survey, participants will be asked to provide a "nickname," rather than their full name, so as to avoid collecting personally identifiable information (PII); they will also be asked to only provide an email that contracting study personnel may use to contact them. All procedures have been developed, in accordance with federal, state, and local guidelines.

11. Institutional Review Board (IRB) and Justification for Sensitive Questions

IRB Approval

The CDC National Center for Injury Prevention and Control's OMB and human subject's liaison has determined that IRB approval is not needed for this non-research activity (Att. 12).

Sensitive Questions

This data collection does not require participants to answer questions of a sensitive nature.

12. Estimates of Annualized Burden Hours and Costs

12a. Recruitment for the surveys of general consumers (up to 500 participants for the FA I&D survey and up to 500 for the CV survey) will be conducted through the survey platform (Optimal Workshop). Each survey will take approximately 15 minutes to complete per participant. Survey participation will draw on the platform's extensive participant panels, limiting burden to the public.

Recruitment for focus groups with segments of general consumers (up to 72 participants for FA I&D focus groups and up to 72 for CV focus groups) will be conducted by a recruitment firm, and the screening form is estimated to take about 2 minutes per individual to complete. Recruitment for the FA I&D focus groups with the policymaker organizations, community-based organizations, and organizations serving communities of color will occur via DVP's existing networks and/or a recruitment firm. Recruitment for the focus groups with the CV workforce and community-based organizations will occur via DVP's existing networks and/or a recruitment firm. Each focus group will take approximately 60 minutes to conduct. There is no cost to participants beyond the participation burden time. The table below provides the burden estimates for this study.

Table 1. Estimated Annualized Burden Hours

| Types of Respondents | Form Name | No. of Respondents | Average Burden per Response (in hours) | Total Burden (in hours) |
|---|----------------------------------|--------------------|--|-------------------------|
| General Consumers | Att. 1: FA Survey and Consent | 500 | 15/60 | 125 |
| General Consumers | Att. 3: FA FGD Screening Form | 100 | 2/60 | 4 |
| General Consumers – Rural; urban; Black, African American, and/or Hispanic; White; Gun owners; non-gun-owners; policymaker organizations; Community-based organizations; Organizations serving communities of color | Att 2: FA FGD Guide and Consent | 72 | 1 | 72 |
| General Consumers | Att. 6: CV Survey and Consent | 500 | 15/60 | 125 |
| General Consumers | Att. 8: CV FGD Screening Form | 100 | 2/60 | 4 |
| General Consumers – Rural; Urban; Black, African American, and/or Hispanic; White; Female; Male; CV Workforce; community-based organizations | Att. 7: CV FGD Guide and Consent | 72 | 1 | 72 |
| Total | | | | 402 |

12b. The estimates of the annualized cost to respondents for the burden hours for the collection of information is derived from the 2022 mean hourly wage of \$29.76 across all occupations, per the [Department of Labor website](#).

Table 2. Estimated Annualized Burden Costs

| Type of Respondents | Form Name | Total Burden Hours | Hourly Wage Rate | Total Respondent Costs |
|---------------------------|-------------------------------|--------------------|------------------|------------------------|
| General Consumers | Att. 1: FA Survey and Consent | 125 | \$29.76 | \$3720.00 |
| General Consumers | Att. 3: FA FGD Screening Form | 4 | \$29.76 | \$119.04 |
| General Consumers - Rural | Att 2: FA FGD Guide and | 8 | \$29.76 | \$238.08 |

| | | | | |
|--|----------------------------------|-----|---------|--------------------|
| | Consent | | | |
| General Consumers - Urban | Att 2: FA FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| General Consumers - Black, African American, and/or Hispanic | Att 2: FA FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| General Consumers - White | Att 2: FA FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| General Consumers - Gun owners | Att 2: FA FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| General Consumers - Non-gun owners | Att 2: FA FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| Policymaker organizations | Att 2: FA FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| Community-based organizations | Att 2: FA FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| Organizations serving communities of color | Att 2: FA FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| General Consumers | Att. 6: CV Survey and Consent | 125 | \$29.76 | \$3720.00 |
| General Consumers | Att. 8: CV FGD Screening Form | 4 | \$29.76 | \$119.04 |
| General Consumers - Rural | Att. 7: CV FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| General Consumers - Urban | Att. 7: CV FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| General Consumers - Black, African American and/or Hispanic | Att. 7: CV FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| General Consumers - White | Att. 7: CV FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| General Consumers - Gun owners | Att. 7: CV FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| General Consumers - Non-gun owners | Att. 7: CV FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| CV workforce | Att. 7: CV FGD Guide and Consent | 8 | \$29.76 | \$238.08 |
| Community-based organizations | Att. 7: CV FGD Guide and Consent | 16 | \$29.76 | \$476.16 |
| Total | | | | \$11,963.52 |

13. Estimates of Other Total Annual Cost Burden to Respondents or Record Keepers

This data collection does not involve other annual cost burdens to respondents or record keepers.

14. Annualized Cost to the Government

Table 3. Annualized Costs to the Government

| Description of Services | Estimated Annualized Cost |
|--|---------------------------|
| Contractor costs for labor, data collection, and other overhead costs, per contract year | \$193,730.00 |
| Federal Government personnel costs for CDC project oversight (5% GS-13 scientist) | \$4,862.00 |
| Total Annual Cost | \$198,592.00 |

15. Explanation for Program Changes or Adjustments

This is a new data/information collection.

16. Plans for Tabulation and Publication and Project Time Schedule

All activities for the project are expected to be completed within 12 months. One year of clearance is being requested for research activities. Table 3 outlines the project schedule.

Table 3. Project Timeline

| Project Time Schedule | |
|---|--------------------|
| Activity | Time Schedule |
| Conduct survey | 10/1/23 - 11/13/23 |
| Focus Group Recruitment | 10/1/23 - 11/1/23 |
| Conduct focus groups | 11/1/23 - 12/1/23 |
| Coding and thematic analysis | 12/1/24 - 2/1/24 |
| Reporting and synthesis for the next phase of the study | 2/1/24 - 3/15/24 |

17. Reason(s) Display of OMB Expiration is Inappropriate

None; the display of the OMB expiration date is not inappropriate.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

None; there are no exceptions to the certification.

References

Corben, J. and Strauss, A. (2008). Basics of qualitative research: Techniques and procedures for developing grounded theory. Thousand Oaks, CA: Sage.

Ellard-Gray, A., Jeffrey, N. K., Choubak, M., & Crann, S. E. (2015). Finding the Hidden Participant: Solutions for Recruiting Hidden, Hard-to-Reach, and Vulnerable Populations. *International Journal of Qualitative Methods*, 14(5), 1609406915621420. <https://doi.org/10.1177/1609406915621420>

Knoll, M., Soller, L., Ben-Shoshan, M. et al. (2012) The use of incentives in vulnerable populations for a telephone survey: a randomized controlled trial. *BMC Res Notes* 5, 572 (2012). <https://doi.org/10.1186/1756-0500-5-572>

Riessman, C. (2008). Narrative methods for the human sciences. Thousand Oaks, CA: Sage.