



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

National Institutes of Health
National Cancer Institute
Bethesda, Maryland 20892

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TO: Office of Management and Budget (OMB)

Through: Seleda Perryman, DHHS
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FROM: Nina Goodman, Project Officer
National Cancer Institute, Office of Communications and Education (OCE)

SUBJ: Pretesting/Formative Research for NCI Communications Messages
Generic Sub-study "Web-based Survey to Communicate Cancer
Risk Estimates"
(OMB No. 0925-0046-09; Expiration Date 1/31/10)

In accordance with the terms of the 3-year extension granted by OMB to the NCI Office of Communications and Education on January 26, 2007, requiring that we submit individual collections to OMB as they are implemented, I have electronically attached a copy of a web survey (tracking # 0925-0046-09) designed to help NCI better understand methods for communicating uncertainty and enhancing comprehension of individualized cancer risk estimates.

The objective of this research is to collect formative data to inform development of a new tool to predict an individual's risk of developing colon cancer, the Colorectal Cancer Risk Assessment Tool (CCRAT). This tool uses risk factor information to calculate an individual's risk of developing colon cancer, and can be used to inform laypersons about their colon cancer risk. The aim of the current project is to pilot test alternative methods of communicating the individualized cancer risk estimates produced by the CCRAT, in order to ultimately design a tool for the general public that is as usable and informative as possible.

Participants will be members of the general public, ages 40 and older, with a high school education level or greater, and no family history of colon cancer. They will be asked to answer a brief, web-based survey which shows one of two randomly-assigned simulated outputs from a hypothetical colon cancer risk prediction tool in order to examine the effects of using: 1) alternative result formats for communicating uncertainty about the accuracy of individualized cancer risk estimates, and 2) informational messages aimed at enhancing understanding of this uncertainty and of the meaning of risk estimates. The results of this formative research will help NCI better understand people's interest in using this kind of tool, trust in its information, and perceptions of cancer risk and of the model's accuracy and credibility.

The survey will be administered to 200 participants recruited from an existing panel of potential respondents obtained from commercial vendor. The total respondent burden for this effort, based on an average, pilot-tested administration time of 12 minutes and approximately 200 respondents, is 40 hours. This effort will account for 2.0 percent of the total annual burden hours (2010) granted in our approval package.

Please feel free to contact me if you have any questions.
Nina Goodman, MHS