

CENTERS FOR DISEASE CONTROL AND PREVENTION

**FOCUS GROUPS WITH MEN AND WOMEN, Ages 45-75 years
Screen for Life: National Colorectal Cancer Action Campaign**

MODERATOR DISCUSSION GUIDE

I. BACKGROUND (5 minutes)

Moderator will:

Greetings:

Good evening everyone. My name is _____. Thank you for participating in the discussion tonight. [Moderator mentions brief background about herself.]

Purpose/sponsor:

We're going to talk about screening for a particular type of cancer. Specifically, we'll be looking at some ideas for television ads and other materials to help people learn about this type of cancer.

Our discussion is sponsored by the Centers for Disease Control and Prevention – or CDC. Has anyone heard of CDC? It is part of the U.S. public health service. The main reason I am telling you this is to emphasize that the materials we'll look at are not being developed by a company that wants you to buy anything. This is strictly a health education program.

No Right or Wrong Answers:

Please bear in mind that I am interested in *your ideas and opinions* – there are no right or wrong answers. I encourage you to be candid about your personal view on anything that comes up. I will not use your names in my report and hope that will help you feel comfortable telling me your honest opinions. I did not work on this personally, so it will not hurt my feelings if there are things you do not like about what we look at.

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Recording/Observers:

We are being audio-taped, so that I can concentrate on talking with you and, just in case there is a problem with the recording, I've asked someone I work with to take notes in the room behind this mirror. Because of the recording, it will be very important for everyone to speak at least as loud as I am. If you see me do this [gestures with hands to raise voices], it will be a reminder to speak up. At the same time, please do not be offended if I must interrupt you to move on to another topic. I'd like to get at least a little bit on many different topics and that may make us feel a bit rushed. If I must cut you off, I will try to come back to you later on.

II. INTRODUCTIONS (10 minutes)

I think everyone would like to hear something about each other now. You already know that my name is ____ . My home is in _____ and I am delighted to have this chance to see your area and talk with people who live here.

Please take a moment now before you introduce yourself to think about this...

One of the things we will be talking about is your reaction to some preliminary ideas for television ads for a health education campaign, As you introduce yourself – first name only - please tell us briefly about an ad that has been especially memorable for you – it can be an ad about any product, anywhere. TV, radio, magazine, billboard...anything. I am interested in what makes people remember certain ads.

[Calls on first person.] ____, will you begin?

III. DISCUSSION TOPICS

A. KNOWLEDGE ABOUT COLORECTAL CANCER SCREENING @ 10 Minutes)

Objective: Assess participant knowledge about the benefits of screening.

Moderator: Will ask the group if they know—

- Who gets crc? (listen for men? Women? Races? Ethnicities? Ages?)
- Are there tests that screen for colorectal cancer? What are they
- Where did you learn the information that you know about colorectal cancer? /
-

B. CONCEPT TESTING (@60 minutes) (adjust titles to fit with testing order, flip order of TV and print concepts from group to group))

Objective: Obtain reactions to television PSA concepts (explain that these will be donated placements, and so may not be shown many times...not like a regular ad campaign selling something where companies buy ad time.):

Moderator:

Will explain what concepts are/are not to convey understanding of how participants should organize their reactions and comments...e.g., not finished ads... Then will introduce concepts in different order in each group, showing visuals along with a narration that explains what concepts are about .

Will emphasize as needed throughout discussion that people should focus on the *creative approach* or main part of the ad (not the quality or type of artwork that is used) to draw their attention to the ad. And that any text information is secondary. Also note that the information may be different in different ads, but that the final ad produced can have any of the facts or other information from any of the ads. Should also emphasize that this is just your reaction/thoughts about the ad...not how you feel others would respond. Interested only in your response. Also should explain that while we are seeing just frames of a TV ad, when it is produced for TV, it will have real people, and will flow seamlessly, just like other ads they see on TV.

After the presentation of three concepts, we will discuss the first three, then repeat the process for the second three. The moderator will facilitate discussion of each ad concept. The discussion will help to reveal attitudes and perceptions about CRC screening in addition to reactions to concept specifics.

Possible probes:

What was the take-away message?

What appealed to you about this approach?

What did not appeal to you?

Did this ad 'speak' to you?

Do you have any suggestions to make this ad more appealing?

What changes could be made?

Is this an ad that you'd stop and look at or flip right by?

- [At some point in the discussion, either during discussion of first spot or the second, moderator should ask if anyone has been screened for crc, and (if they are willing to share) why they did or did not get screened. Has your doctor recommended that you get screened? (get a count on this) How old were you when you first got screened? Who mentioned the topic of screening first you or your doctor? Were you hesitant to get screened? Why or why not? For those under age 50 who have not already been screened: Do you plan to get screened when your turn 50?

Any information that was surprising to you – that you did not know? (note: this will probably be necessary only for the first couple of concepts)

- Colorectal cancer is the 2nd leading cancer killer of men and women
- Colorectal cancer can be prevented.
- Screening can find polyps, which can be removed before they turn into cancer.
- Screening can also find colorectal cancer early, when treatment is most effective
- CRC may not cause symptoms, especially early on.

B. COMPARISON OF THE CONCEPTS (@10 minutes)

Objective: Determine which concept(s) resonate the most with participants and why.

Moderator will:

(using chart to show tallies)

Ask everyone to review the ads again, now that all have been discussed.

Facilitate reporting of first, second, and *last* place rankings.

I'm going to read each ad title now and see how you ranked it.

For the ad called, “___” did anyone put it in first place? If yes, please raise your hand and keep it up while I count.

Did anyone put “___” in second place?

Last place...that's 6th.

Moderator will repeat this process for the other titles.

Then will ask for some very brief discussion about overall results of ranking.

V. CONCLUSION (5 minutes)

Objective: Obtain participants' closing advice, thank them.

We're almost out of time now.

I am going to step out now and check with the observers about any last minute questions they may have.

The moderator then will:

Step out to check with observer(s) about any final questions to pose if time permits.

Return to focus group room; poses questions.

Possible last minute questions: where do you get information about health?

Thank everyone for participating and provides any needed departure instructions. (Let them know they will get a fact sheet on colorectal cancer screening to take home with them – along with their check.)

TOTAL TIME: 90 minutes