MEMO
June 10, 2009

To Moira Rankin, Soundprint Media
From: Bob Russell, Learning Experience Design


Focus Group Research for SOUNDPRINT MEDIA

Program: “HPV: The Shy Virus”
Producer/Narrator: Jean Snedegar
Length of Program: 28 minutes, 30 seconds
Dates of interviews: May 11 & May 19, 2009
Locations: Washington D.C. and New York City
Length of interviews: One hour

PARTICIPANTS:

• Two groups of adults, ages 21 – 66 who listen to NPR at least 10 hours per week.

• Most were professionals working in a range of fields including science, cartography, technology, teaching, healthcare, social work, marketing, and law. There was a real estate broker, event planner, designer, advertising copywriter, homemaker, and software consultant.

• All were radio listeners; most reported listening to NPR 6 to 7 days a week.

• Most were interested in science when it was a topic that concerned their everyday lives (e.g., health or the environmental topics). Many reported reading the Science Times (New York Times); most got their science information on the Internet, as well as in newspapers and from NPR.

• All but two said they were aware of HPV virus. One had no idea what it was; another thought it was the virus that leads to AIDS, mistaking it for HIV.

GROUP ONE (Washington D.C.) 8 adults; 3 males, 5 females

• 3 age 55 – 66
• 1 age 40
• 1 age 30
• 3 age 21 – 29

GROUP TWO (New York City) 10 adults; 4 males, 6 females
• 6 age 55 – 66
• 1 age 45 – 55
• 1 age 35 – 45
• 2 age 25 – 35

MODERATOR: Bob Russell, Ph.D. and Principal, Informal Learning Solutions
SUMMARY OF RESEARCH:

Participants were asked about their radio listening habits, interest in science, and if they had any knowledge of HPV.

They were then played a series of eight short segments from “HPV: The Shy Virus,” ranging in length from approximately one to four minutes, pausing between each to check comprehension, interest level, and to get their opinions about what was covered, and how well it was reported.

Segments were as follows:

1. Introduction by Lisa Simeone 0:00 – 1:07
2. Sci-fi dramatization, introduction by host Snedegar and start of interview with Peter Angeletti 1:08 – 4:18
3. Angeletti says HPV is a paradox; Snedegar introduces Christine Baze 3:57 – 7:08
4. Interview with Cosette Wheeler (tour of lab, summary of research); Baze explains HPV in layman’s terms 11:00 – 13:53
5. Angeletti defines cancer; return of sci-fi motif; comparison made between sci-fi virus and HPV’s subtlety 16:05 – 17:47
6. Angeletti explains science of a virus; how it enters cell 17:56 – 19:09
8. Narrator wraps up, explaining most people aren’t affected negatively by HPV; zur Hausen talks about vaccines; Baze story is touched on again, ie, that she’s a survivor 24:18 – 26:40

After the discussing each of the above segments, there was a wrap-up discussion to get an overall opinion about both the content and production values of “HPV: The Shy Virus.” Each participant, unaided and unprompted, gave a short synopsis of what they had heard and how they felt about the show.

Note: In the following report, under “Highlights,” representative quotes of participants are presented. These are not verbatim, but capture the essence of what was said.
Warm-up – Introduction

- Most participants had heard of HPV but weren’t too concerned about it. The exceptions were two women in the 20-30 age group who were concerned; a woman who had never heard of it at all; and a woman who thought that HPV was the virus that could lead to AIDS (HIV).

- None expressed concern for themselves (other than the two young women) or for daughters, grandchildren, society in general

- Most had heard of a vaccine for HPV (from TV commercials) and mentioned this unaided during the warm-up discussions.

- Most thought of HPV as only of concern to young women; that it cannot cause disease in men, i.e., that it’s of growing concern to gay men.

- Two or three (young females) knew that most people are infected with it.

THE SEGMENTS:

0:00 – 1:07  Introduction by Lisa Simeone

Although several felt the content was compelling (ie, scary; the fact that most people had it made them want to know more), the overall consensus was that it took too long to get to the subject of HPV. A better hook would have been “it’s the most common sexually transmitted virus,” rather than to present so much information about viruses in general. Another wondered why there was no mention of cancer in the introduction. Two or three felt they were being talked down to, that the intro was “high school level.”

Most participants from both groups disliked the title. They either didn’t know what it meant or felt it was “too cute.” One said it made a deadly virus sound “benign.” (At the end of the hour session some mentioned that the idea of “shy” was never paid off, and that they still didn’t know what it meant.)

All seemed to like Simeone’s delivery, and said the subject matter, in general, grabbed their attention and that they would probably keep listening.

1:08 – 4:18  Sci-fi dramatization, Snedegar’s intro and start of interview with Angeletti
Comprehension: Participants seemed to understand the content, saying they learned a lot from Angeletti. “The science was understandable,” one said. They felt he presented the facts on HPV at a level appropriate for educated lay persons. Several could play back, for example, that most viruses are benign.

The “sci-fi” intro, however, was nearly unanimously disliked. The fact that Angeletti had so many interesting things to say about viruses made them dislike the intro even more. They wondered why the show “wasted so much time on that.” They felt the “noises were distracting.” They said it sounded “cluttered,” and unnecessarily melodramatic. “It sounded like a teaser for a movie,” and that it “wasn’t useful in getting me engaged.” “Why start with something that doesn’t matter to me?” one asked. Another said it was “campy,” and “I didn’t like it.” Only one person defended it, saying she liked it. “I want more facts,” one concluded.

Interest level: Even though they were critical of the sci-fi segment, most said that the show was still holding their interest at this point, and they would probably continue listening. They seemed hungry for more information on HPV, and they found the information about viruses in general (ie, that some are benign and some aren’t) to be of interest.

Opinion of narrator: No one had a problem with Snedegar’s delivery and pacing. They could understand her and they enjoyed her interview with Angeletti. They liked the sound effects in the lab and some said they felt like they were there.

Highlights:

• “Why didn’t anyone say ‘This may affect YOU?’”
• “I’m 4 minutes into this and I’ve learned nothing.”
• “It’s taking too long to get to the point.”
• One found the fact that HPV was present in reptiles eons ago to be interesting; another felt this was of no concern to us now, and wanted to get to more relevant facts sooner.
• “‘You’re all going to die!’ (from sci-fi intro) is overkill.”

4:57 – 7:08  Angeletti talks of “paradox”; beginning of Baze story

Comprehension: Most were able to play back content of Angeletti’s explanation—that HPV is a paradox because while usually benign, it can sometimes be devastating. They were very engaged by and understood Baze’s story well. One wished Baze had been introduced sooner; that this would be a more compelling “hook,”(i.e., a real person.) One played back unaided that even though she was getting her yearly Pap smear, she still got cancer.
Interest level: Groups responded positively to the story of a “real person.” Their interest was renewed and they wanted to hear more. They found her story very compelling. They continued to be interested in what Angeletti had to say.

Highlights:

- Baze’s story “makes it real.”
- “Start with a real person. Then do the science. This should have been at the beginning.”
- Baze’s story “gave me a jolt.”
- Her story “was heart-wrenching.”
- Group liked learning about HPV “straight from her.”
- Group had mixed reviews on the singing. A little is ok, but some felt it was overdone and played too long.
- One participant was surprised that Baze (a therapist) didn’t know more about HPV, or where her cervix was, and felt this a bit unbelievable.
- One disliked Snedegar’s word choice: “As the new millennium turned to the 21st century…” in the Baze introduction, feeling it was overly dramatic.

11:00 – 13:53  Cosette Wheeler is introduced; she describes her research. Baze returns to explain how pap smears, HPV and cervical cancer are related.

Comprehension – Most participants were able to play back what they’d heard – in remarkable detail. They found it interesting that she could find the DNA; that one woman could be carrying more than one strain; that you don’t have to be promiscuous to get it; that she was using robots in the lab.

Interest level: The group seemed to like the informative aspect. They seemed hungry for facts, and the lab visit delivered them. They seemed to feel they were learning something new. They had no interest, and felt it was time wasted to give the names of the robots (Tom and Jerry). Some felt Wheeler’s description bogged down a bit and could have been more succinct (“needs to be edited”), and that it was a bit repetitive.

One expressed a real desire now to know what does make HPV lead to cancer? That is, they were comprehending that it sometimes does and sometimes doesn’t and were waiting to hear why. They seemed very engaged, overall, but were getting a bit impatient.

Highlights:

- The science was “too elaborate” and “technical.”
- “Who cares about robots’ names?”
- “I would keep listening.”
16:05 – 17:47  **Angeletti gives a layman’s definition of cancer; sci-fi motif is repeated; narrator returns to compare HPV to sci-fi version of viruses**

**Comprehension:** All participants seemed to understand Angeletti’s definition of cancer and most seemed to find it compelling, and even frightening.

**Interest level:** Interest was high, but again the sci-fi motif was found to be distracting and even annoying. They found the comparison of influenza virus to HPV virus to be interesting and compelling.

**Highlights:**

“It describes how cancer happens.”
“I liked the comparison to the common cold.”

17:56 – 19:09  **Angeletti compares virus to soccer ball; describes how HPV gets inside and replicates**

**Comprehension:** Participants were able to play back the process that Angeletti described (the door unlocking, the entry to nucleus.) Participations believed the explanation was very clear explanation.

**Interest:** Most seemed very engaged by the analogies of the door and the soccer ball, though one found the soccer ball to be another unnecessary element with “no purpose.” Most found the sfx of the door to be engaging, but one or two were critical and felt they were too much like old-fashioned radio and hokey.

**Highlights:**

- “Done well, easy to visualize.”
- “Too loud (sound effects) o hear voices, distracting.”
- “You don’t need it.” *(soccer ball)*
- “I wish Angeletti could have distinguished more between viruses and bacteria.”
Back to Wheeler’s lab; she discusses risk factor for cervical cancer

Comprehension: Group was able to name the three risk factors for cancer (no pap smears, sex with multiple partners, and smoking.) They played back that the first factor is present “even in insured populations.” Participants seem to comprehend best what applies to real people most, ie, the risk factors over the lab science.

Interest level: The segments continued to hold the participants’ interest, as evidenced by comments such as, “Why didn’t she talk more about sex with multiple partners, this was totally skipped over.” Wheeler presented a lot of factual information that relates to real people (as opposed to straight science about viruses) and this held the participants’ interest well.

Highlights:

- “This was a great segment. It was just fact, fact, fact.”
- “Can you get it from second hand smoke?” *(ie, could that be present in the mucus?)*
- “Baze got her tests but she still got cervical cancer. This doesn’t match up with what Wheeler is saying.”

Narrator summarizes; Angeletti reassures that with routine exams, HPV is usually benign. Vaccines are introduced. Zur Hausen is interviewed. Show concludes with Baze song, “It’s gonna be all right.”

Comprehension: Groups seemed to understand the summaries presented by narrator and Angeletti, but found zur Hausen’s accent hard to understand. They did understand what he had to say about vaccines now available. One wished that there could have been more information about what happens between an abnormal pap smear and cervical cancer, i.e., colposcopies and procedures resulting from the abnormal smear.

Interest level: Participants’ interest remained high. The continued to seem curious to know more, and felt the subject matter was important—even if it didn’t directly affect them. They seemed to care about how devastating the virus might be to others, and curious about the way the HPV virus behaves.

Highlights:

- “There was a lot on the virus and the abnormal pap, but not about colposcopies.”
- “What can be done wasn’t quite clear to me.”
• This was a bit more uplifting because it talked about what could be done. I wish I could have heard from zur Hausen sooner.

Wrap-up discussion:

Moderator asked a series of general questions and asked for a group response:

Q. Do you know more now about HPV than you did before listening?
A. All said yes.

Q. Do you care more about HPV now than you did before?
A. About half said yes.

Q. Was the information in the show believable?
A. All said yes.

Q. How did you feel about the overall tone of the show?
A. Consensus was that more facts and information were needed and less “fluff” One wanted more information about the vaccines.

Q. What did you think of the narrator?
A. All liked her; they were glad she was a woman. They felt she was engaging. She seemed objective, yet concerned, and not opinionated. Participants were glad she interviewed doctors, and that she brought in other voices and viewpoints.

Moderator then asked participants to give a summary of the program; if they were going to tell a friend about the program, what is the ONE THING would they say? Their comments were as follows:

Group I (Washington, D.C.)

• It was engaging; captivating
• I’ll take this back to my female family members
• There were a lot of facts; good interviews
• I liked the structure; I’d listen to it all
• It’s important to get the word out about this. But I want to know more about what I can do; how do it get the vaccine?
• The topic is very relevant; I want to hear more
• I’d like to hear more; I’d download the program.
• I liked all the different voices in the show and different interviews
• The facts really stood out
• I hated the name, “Shy Virus”

Group II (New York)
• It was informative; made me want to research this and know more
• “Shy Virus” was never paid off; made it sound too benign. What treatment is are available, or, is there nothing between “Benign” and “We’re removing your uterus?”
• “Shy Virus” was a bad title. They used it at the start and then just sort of threw it in again at the end. It made no sense.
• I wanted more information on prevention, so if I didn’t get the vaccine, what can I do?
• They presented a lot of information with few words. There were too many sound effects. It got repetitive in parts, and needs more editing.
• It was well done; for a subject that’s “boring.”
• The “fluff” didn’t interest me (i.e., the sci-fi). The sci-fi “dumbed it down.” I don’t listen to NPR for “dumbed down” content. That’s for high school kids.
• I didn’t like the sci-fi motif. I knew a little about HPV, now I know a lot more
• It would be good to hear about policy issues regarding vaccination. I know it’s controversial.
• It’s good that there wasn’t too much detail. I liked the background information on viruses and how they work—but on real people—not in science fiction. As a lay person, I was able to understand.

CONCLUSIONS:

The groups seemed interested in the topic because it is of direct concern to people and their health. Their interest also seemed driven by the freakish nature of this virus; its mysterious paradoxical behavior of being either benign or deadly. This really piqued their curiosity.

The groups seemed hungry for facts and got very impatient, and even turned off, by the sci-fi segments. It seemed to slow the piece down and waste their time. Overly long introductions also tried their patience. They loved Christine Baze’s story, but wished it didn’t have such a long introduction—they recommended cutting out some of her singing. They felt that Angeletti’s descriptions were easy to follow, yet not overly simplistic. He was able to inform listeners without talking down to them.

The groups were engaged with the show and listened well—and this was reflected in the quality of their questions. One asked why, for example, if Baze got regular pap smears, she still got cervical cancer—since Wheeler said that if women get pap smears they most likely won’t get cancer.

Even the negative comments (e.g., about the sci-fi introduction and taking too long to get to an important fact) indicated a high interest in the topic and overall content of the show. What they didn’t like was slowing down the flow of information; and they were hungry for more.
Participants responded positively to information about positive solutions (vaccinations) and content about what science was doing to help the situation (Wheeler’s research). The title was almost unanimously disliked; participants expressed an interest in something more straightforward.

**SUGGESTIONS:**

For a general audience that includes older adults, bring up the importance of spreading the word, and warning young/sexually active daughters or friends about HPV.

The time spent on the sci-fi segments would have been better spent presenting more facts, specifically about how women today can avoid getting cervical cancer.

It seems that when a problem is presented, the listener hopes and waits for (and even expects) a solution. They don’t want to be left thinking there’s no hope— even if it’s a modest hope, as was heard in “Meltdown,” the show on global warming. There the listener was told that while serious, the situation isn’t hopeless.

Even more important, tell listeners what they can do in their own small way to help. In this case, narrator could have specified what age of girls should get the vaccine; if insurance usually covers it; how older adults could go about educating sexually active children; or advising them how and where to get more information.

It seems very important to not just educate but to involve the listener in the issue by telling them what they can do to be a part of the solution presented.