East Liverpool Phone Recruitment Script

Hello, my name is _____. I am a _____ at San Francisco State University in the Psychology Department. We are conducting research on the potential health effects of exposure to manganese in adults. This study is supported by the United States Environmental Protection Agency, or USEPA, the Ohio Department of Health, the Ohio EPA, as well as the Columbiana County Health Department. You may have attended or heard about the town meeting where we discussed the study. I am calling because you live in proximity to some of the warehouses that may release manganese and other chemicals into the air and there is concern that this may have a negative health effects. Therefore, we would like you to consider allowing us to test your health. We are recruiting 100 adults in your town to participate in our study.

For this study we are only recruiting current residents of East Liverpool. Are you currently living in East Liverpool? **[IF YES]** And have you lived there for at least 10 years?

[IF NO] Unfortunately, we are only looking for residents who have been living in the community for at least 10 years, so we cannot ask you to participate. Thank you very much for you time, and have a great morning/afternoon/evening.

[IF YES] Great. Now I would like to describe to you some of the details of the study and also ask some questions to determine if you are eligible to participate in the study. Regardless of whether you are chosen for the study or not, this information will be kept strictly confidential. Only authorized researchers will have access to it, and it will be stored in a secure locked cabinet in the investigator's office. Even if you are ineligible to participate, your information will be kept in a locked file cabinet in the investigator's office and will be destroyed after 5 years. Would you like to continue?

Participation in this study will involve a brief interview about your health history, in addition to questionnaires regarding your medical, social, and psychological history. You would also be given tests to measure areas of cognitive functioning, including memory, attention, learning, and visual/spatial skills. We will also ask you to complete a brief neurological test of movement. Additionally, we will ask you for permission to collect a small sample of your hair, to collect your toenail clippings and draw a small amount of blood. The hair, toenails, and blood samples will be analyzed in a certified laboratory for manganese and other chemicals. The total time commitment would be approximately 2.5-4 hours.

If you're willing to participate and you are selected to be in our study, upon completion we will present you with a $50 gift card as a token of our appreciation for your time. At a later time we will also notify you of your test results.

Would you be willing to answer some screening questions to determine your eligibility for our research study?

[IF NO] Thank you very much for your time and have a great morning/afternoon/evening.

[IF YES] Now I would like to ask the questions that I mentioned before. It should only take a few moments.

Sex: M F Age: _____ Years of Education: _____

Ethnicity: _____

1. Have you ever lived outside of East Liverpool, Ohio? Yes/No
2. Have you ever worked for S.H. Bell? Yes/No
3. Have you ever had any major exposure, which required a hospital visit, to
   Pesticides? Yes/No If yes, Name if you know?_____
   Fungicides? Yes/No If yes, Name if you know?_____
   Herbicides? Yes/No If yes, Name if you know?_____
   Carbon monoxide? Yes/No
   Heavy metals? Yes/No Name if you know?_____
4. Have you ever had a head injury or stroke? Yes/No
5. If so, did you require a hospital visit for more than 1 day? Yes/No
6. Have you ever been told by a doctor that you have:
   Parkinson's disease? Yes/No
   Huntington's disease? Yes/No
   Epilepsy? Yes/No
   Brain surgery? Yes/No
   Encephalitis? Yes/No
   Meningitis? Yes/No
   Multiple sclerosis? Yes/No
   Chronic liver disease? Yes/No
7. Have you ever undergone electroconvulsive treatment? Yes/No
8. Have you ever been told by a doctor that you have:
   Bipolar disorder? Yes/No
   Alzheimer's disease? Yes/No
   Schizophrenia or psychoses? Yes/No
9. Are you currently being treated for alcohol or drug dependence? Yes/No

If you are selected to be in the study, we will be contacting you again by phone 6-8 weeks prior to the study in order to set up an appointment. If you would like to contact us in the meantime, we can be reached at 510-236-5599 or at this email address: ohstudy@sfsu.edu.
Thank you again for your interest, and have a great morning/afternoon/evening