



# National Occupational Research Agenda Councils: 2019 Evaluation Findings



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## Additional Information

For more information about the National Occupational Research Agenda (NORA), visit the web site [www.cdc.gov/nora](http://www.cdc.gov/nora)

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April 2020

# Introduction

## Background

The National Occupational Research Agenda (NORA) is a partnership program to stimulate innovative research and improved workplace practice. NORA runs in ten-year cycles and is currently in its third decade (October 1, 2016 - September 30, 2026). Seventeen NORA councils, one for each of the 10 industry sectors and 7 health and safety cross-sectors, are co-chaired by one person from NIOSH and another from a partner organization. Councils set the occupational research direction for the nation by writing research agendas and then work together to address the agendas through information exchange, collaboration, and enhanced dissemination and implementation of solutions that work. They have considerable freedom in the activities that they choose to pursue within these three areas. Membership in NORA councils is diverse, and includes individuals from large and small businesses, worker organizations, academia, professional societies, and other organizations.

As steward of NORA, the National Institute for Occupational Safety and Health (NIOSH) is responsible for coordinating the evaluation of NORA efforts. In 2019, NIOSH coordinated a process evaluation to understand how well councils are achieving their stated purposes of information sharing, networking, and disseminating/implementing evidence-based solutions, as well as assessing council member satisfaction. The goal was to help councils function as effectively as possible to maximize their contributions towards improved occupational safety and health.

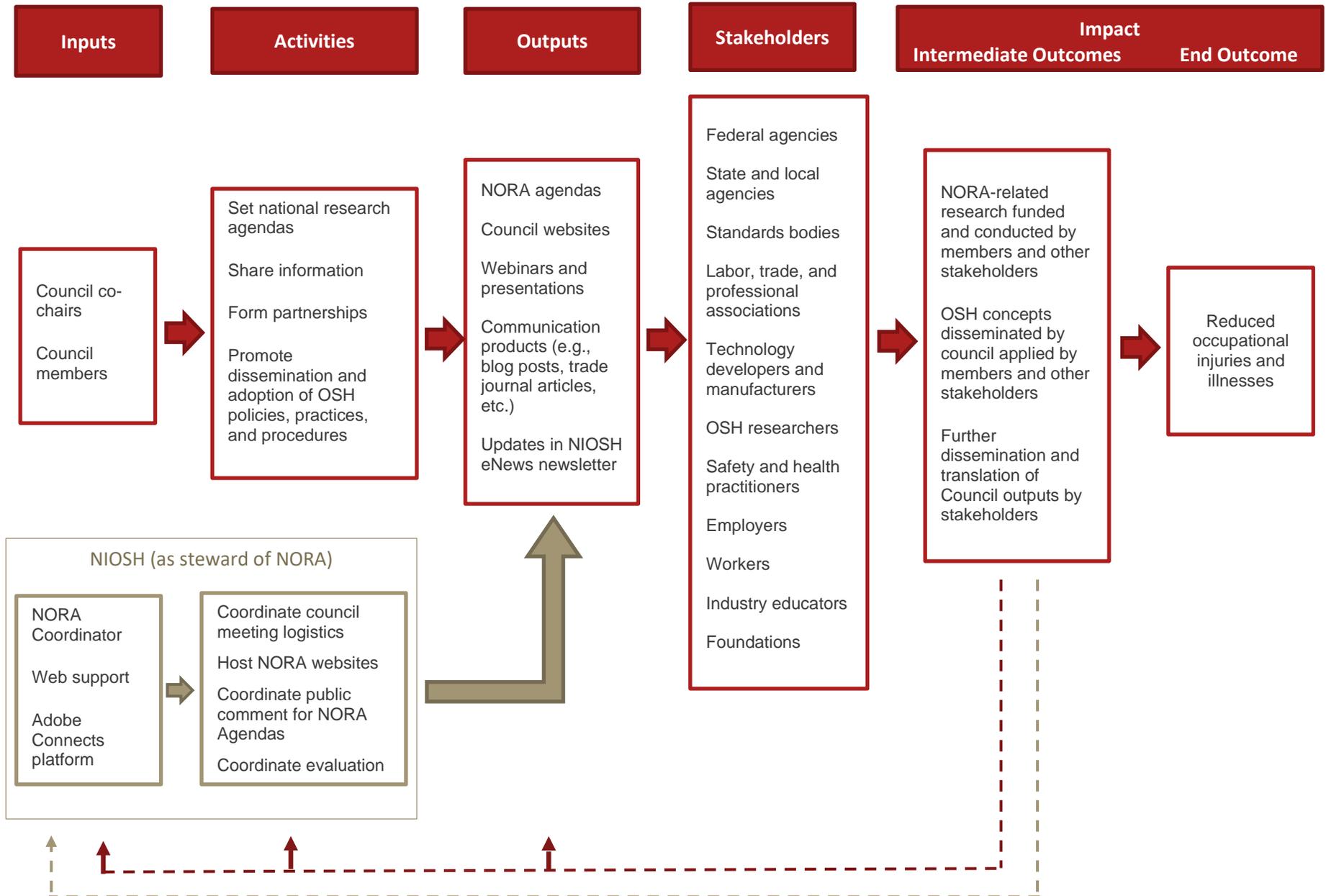
## Logic model

This evaluation was guided by the NORA logic model developed during the second decade review<sup>1</sup>, modified to focus more specifically on councils. NORA councils were formed to write national research agendas and engage in three main areas of activity: sharing information, networking, and enhancing dissemination and implementation of evidence-based solutions. Although the councils are not charged with generating specific products other than their research agendas, their efforts within these general areas of activity may lead to other outputs. Examples might include communication materials like websites, blogs, and publications, which are transferred to stakeholders. These stakeholders take action in a variety of ways (intermediate outcomes), which contribute to reductions in occupational injuries and illnesses (end outcomes). NIOSH plays a supporting role as the steward of NORA, providing logistical and technical support. For example, NIOSH hosts the NORA website and provides a platform for online meetings.

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<sup>1</sup> For more information on the second decade review, see <https://www.cdc.gov/niosh/docs/2017-146/default.html>

Figure 1. Logic Model: NORA Councils in the Third Decade of NORA



## Evaluation Questions

1. How effectively are NORA councils fulfilling their three purposes (information sharing, networking, and disseminating/implementing solutions)?
2. How satisfied are council members with the functioning of their council?
3. What are the best practices for effective NORA Councils?

## Data collection

There were three types of data collection:

### *Council Member Survey*

All current council members were invited to take an online survey in October 2019. Survey questions were built around indicators that the literature suggest are needed for an effective council.<sup>2,3,4,5</sup> Since councils have freedom to choose their activities within each of the three purposes, they are not expected to attain all indicators. The survey also asked for ideas on ways to improve in each of those three areas, and included questions on satisfaction with council leadership and meetings.

Of the 688 people invited, 241 completed at least 25% of the survey, a 35% response rate. This includes 173 respondents out of 484 council members from large and small businesses, worker organizations, academia, professional societies, and other organizations, a 36% response rate. It also includes 68 of 204 federal employees (57 out of 155 from NIOSH and 11 of 49 from other parts of the federal government), a 33% response rate. Participation in the survey varied across the 17 councils, with a range of 3 to 23 respondents. Sector councils tend to be larger, since they were established in 2006-2008, compared to cross-sector councils which were formed in 2016-2017. It is therefore not surprising that sector councils tended to have more responses. For the purposes of analysis, NIOSH council members were separated from “partner members,” meaning respondents from stakeholder organizations (other federal and non-federal).

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<sup>2</sup> National Center for Environmental Health [2015]. Evaluating Partnerships: Learning and Growing through Evaluation. Module 3. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Environmental Health.

<sup>3</sup> Zakocs R, Edwards EM [2006]. What explains community coalition effectiveness? A review of the literature. *Am J Prev Med* 30(4):351-361

<sup>4</sup> Krueter MW, Lezin NA, Young LA [2000]. Evaluating community-based collaborative mechanisms: Implications for practitioners. *Health Promotion Practice* 1(1):49-63

<sup>5</sup> Granner ML, Sharpe PA [2004]. Evaluating community coalition characteristics and functioning: A summary of measurement tools. *Health Ed Res* 19(5):514-532

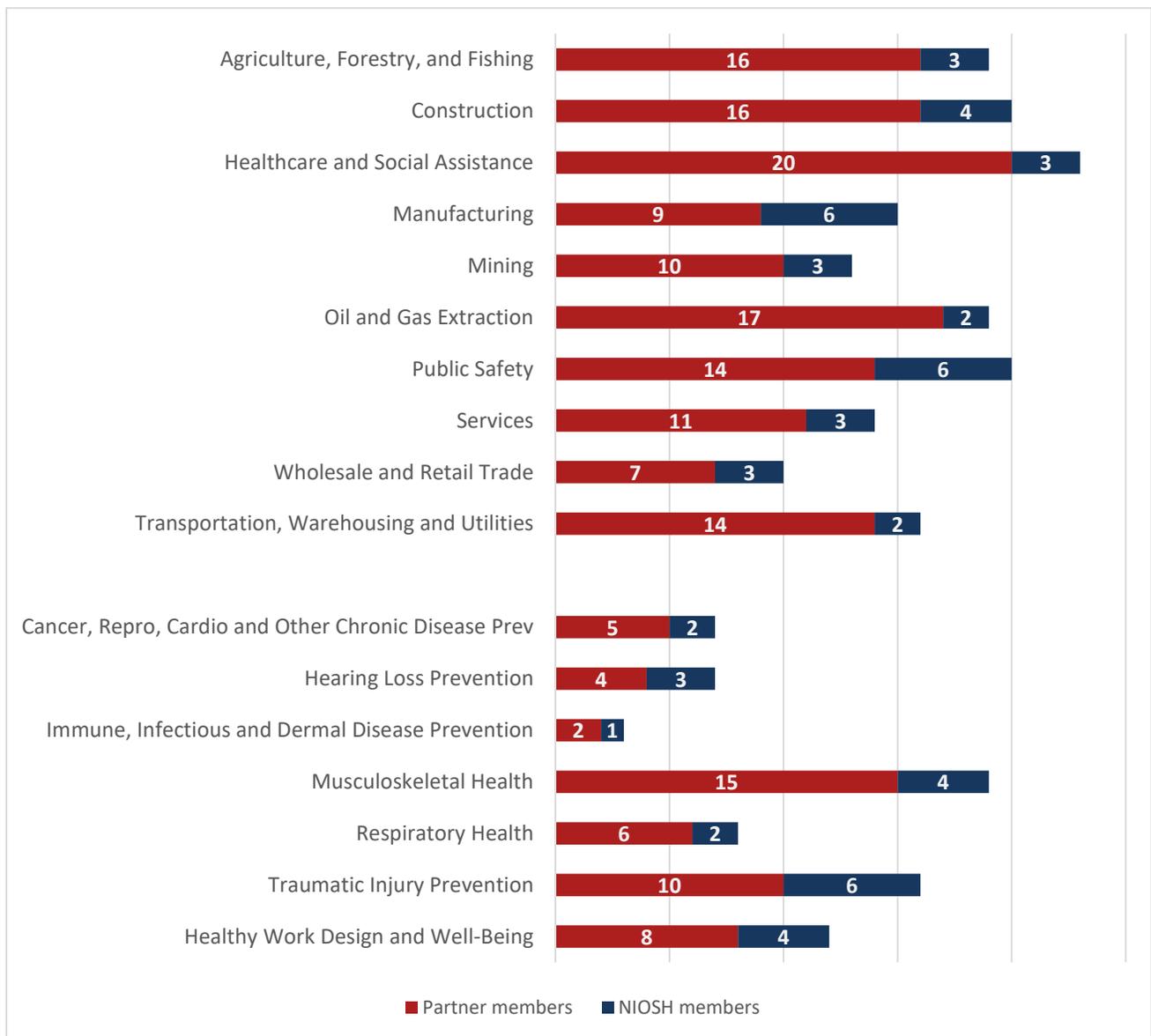


Figure 2. Number of council responses

Quantitative data were analyzed using simple frequencies, and qualitative data were analyzed for themes using a generative approach. Due to the low response rate, the findings cannot be generalized to all council members, either within or across councils.

#### *Administrative records*

Administrative records included agendas for every council meeting from October 2016-November 2017 (142 total), as well as records of attendance for October 2018 -November 2019 for all 17 councils. Attendance can serve as one indicator of engagement, as people may stop attending if they do not find meaning or value in participation.

#### *Year in Review*

Each council submits a single response to a set of questions by December 1 each year about activities and achievements. Co-chairs are responsible for responding on behalf of the council, but members should have the opportunity to provide input. See Appendix B.

## Findings and Discussion

### Question 1: How effectively are NORA Councils fulfilling their three purposes?

The table below has indicators for the three council purposes: information sharing, networking, and disseminating/implementing solutions.

#### *Information Sharing*

Nearly all respondents shared information with their council at least once in the past year, and about half shared 1-4 times. NIOSH members were more likely to share information about their work at least once per month (18%) compared to partner members (6%).

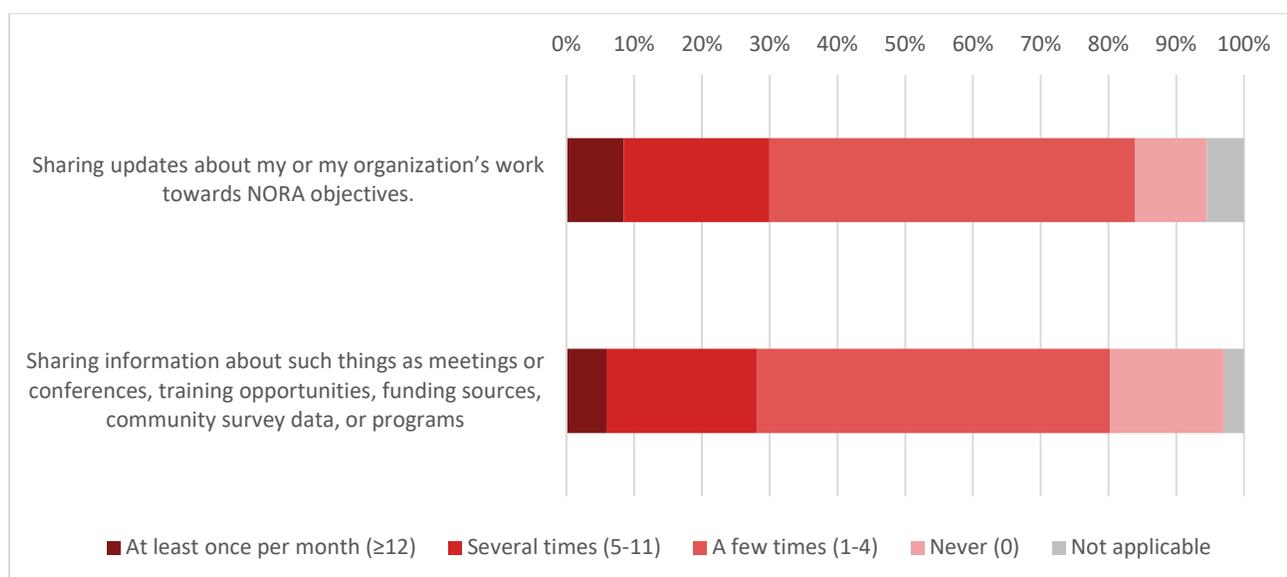


Fig 3. Information sharing indicators, all respondents

More than half (53%) of respondents perceived this sharing as being “very helpful” for keeping up to date with occupational safety and health information in their area, and another 39% rated it as “somewhat helpful.” Presentations were similarly viewed, with 81% rating them as “always” or “often” useful.

When asked how to improve information sharing, a suggestion from 14 people was to create a cloud-based central repository or forum where members could go to access presentations, meeting minutes, and other council documents. NIOSH is currently restricted from using third party file sharing software because of data security concerns. As a result, all information must be sent over email. As one person wrote, “Using email is archaic and increases our burden and overloads everyone.” A second technological solution from multiple respondents is to have a newsletter or monthly email to make communications between meetings more routine.

Other ideas were more process-oriented. Sixteen respondents suggested various ways to get broader participation in sharing. As one person put it, “More effort to get all members to share information. Much of the information we exchanged came from only a few members.” Ideas for how to do this included setting aside time during meetings for brief round-robin updates, doing member spotlights with formal presentations about the work of their organization, and clarifying what kinds of updates would be helpful so members feel more

comfortable sharing. Ten people wanted to start or continue having in-person council meetings to facilitate information sharing. Finally, 12 partner members indicated they were satisfied with the current arrangements.

### Networking

Survey respondents were asked about two different kinds of networking, personal one-on-one connections and connections between their council and other groups. The findings were overall positive, although NIOSH members were more likely to respond positively than partner members. For example, 43% of NIOSH members strongly agreed that their council formed productive collaborations with other organizations, while 33% of member partners did. This suggests that networking is more successful for NIOSH members, but ideally there would be parity and mutual benefit.

Respondents were also asked about whether these connections led to work that would otherwise not be possible. About 30% of council members disagreed or strongly disagreed, indicating that NORA partnerships are not necessarily the only route for networking within the occupational safety and health community. Again, the responses were more positive for NIOSH members than partner members. Thirty-four percent of NIOSH members strongly agreed but only 23% of partner members did.

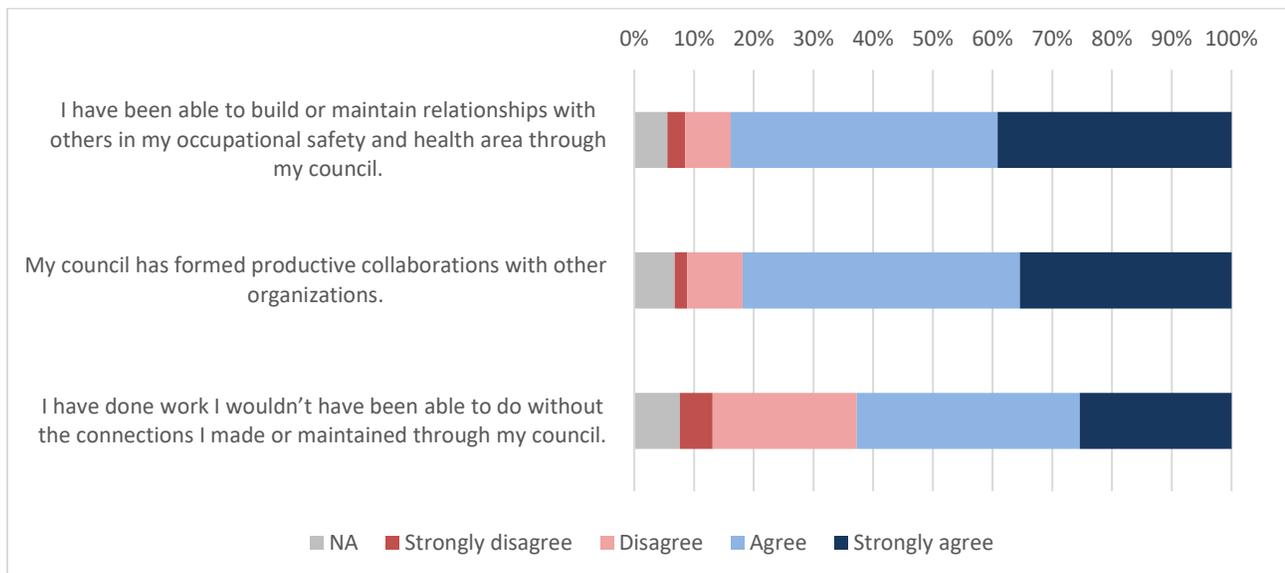


Fig 4. Networking indicators, all respondents

When asked what could be done to improve networking, the most common answer (from 26 people) was to start or continue to hold face-to-face meetings. As one person put it, “networking is most effective in person.” Currently most meetings are virtual. Some responses called for NIOSH to sponsor meetings. NIOSH can host meetings at its facilities but cannot pay for partner members’ travel expenses for legal and financial reasons. Partner organizations can and do host NORA council meetings at their facilities as well. Four respondents suggested meeting at conferences that members attend anyway or doing joint presentations at conferences.

Another frequent suggestion (from 9 people) was to create contact lists, with affiliation, areas expertise/interest, and perhaps even photos, to make it easier to connect. As one person explained, “Right now when people join the council they don't really know who's who and who's open to collaborating, etc. The lack of such mechanism I think hampers important connections because most people are unlikely to ‘cold contact’ other people without knowing there's at least some baseline level of interest.”

Eleven respondents suggested more contact, either through more frequent meetings, meetings held on a regular schedule, or communication between meetings. Others thought networking would be easier with an activity or workgroup to rally around. As one person wrote, “It would be nice to have clear goals, and specific objectives. A reason to be involved, learn and share experiences.” In this vein, five respondents suggested

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forming workgroups around a specific topic, and six others suggested engaging in small projects. Finally, nine people suggested specific partnerships that can be pursued to improve networking.

### Dissemination/Implementation Efforts

Some councils completed specific dissemination/implementation projects to promote evidence-based solutions in 2016-2019. For example, The NORA Manufacturing Council published a new website about [hazardous energy control](#) in September 2018. Members of the council compiled, reviewed, and adapted resources to help companies and businesses start or improve and maintain their existing lockout program. It features a resource guide with customizable materials and templates to help with implementation of effective strategies for the administrative control of unsafe release of hazardous energy. Another example comes from the Respiratory Health Council which created a series of four short videos called [Faces of Work-Related COPD](#). They feature a physician (the council co-chair) explaining Chronic Obstructive Pulmonary Disease (COPD) as well as interviews with patients diagnosed with work-related COPD. The videos cover work exposures, their quality of life having the disease, and ways to minimize the risks of getting the disease.

When asked specifically about these activities, 87% felt the products their council created were useful to others. Partner members felt more positive about these products, with 89% agreeing or strongly agreeing, while 79% of NIOSH members did. There was less agreement about whether councils do enough outreach dissemination work. NIOSH members were more likely to strongly agree (23%) than partner members (14%). About one-third, among both NIOSH and partner members, do *not* think that there is enough outreach/dissemination work currently.

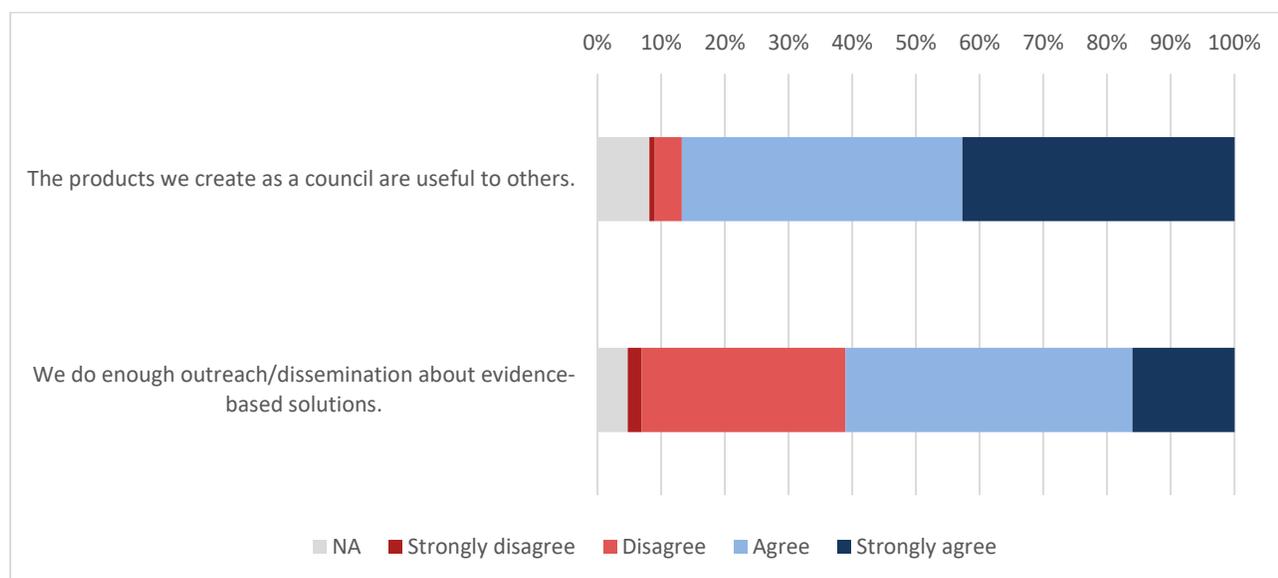


Fig 5. Dissemination/Implementation indicators, all respondents

Partner members were asked how they or their organization used information or implemented policies/program/solutions they learned of through their NORA council. This question may not have been clear, because despite the request for specific examples, the responses were often generic and, in some cases, ambiguous. Nine people said they had not used or implemented anything.

The most common answer, from 13 respondents, was that they had further disseminated information or resources, either informally with colleagues, formally to the membership of professional organizations, or through interactions with clients. Similarly, twelve respondents described using information obtained through NORA to educate, either in their classes with undergraduate or graduate students, or in trainings.

Nine people talked about using information learned through NORA within their organization. One person from the Oil and Gas Extraction offered specifics, saying "1) We use motor vehicle safety information and materials among our fleets and carrier networks. 2) We used the tank gauging material in setting policy and procedure." A

few people described using what they learned for prioritizing their work. As one person wrote, “Have provided presentations and initiatives to local leadership to use as suggestions where our organization can spend their time, effort, and energy to make progress.” A couple of others talked about using this information for research grant applications, and one respondent talked about starting a pilot research project within their organization.

A question about how to improve dissemination/implementation brought up many of the same suggestions already covered, such as having more in-person meetings, better collaboration tools like a cloud-based document repository, and improved communication. A few pointed to better support from NIOSH, including dedicated staff, help from health communication specialists, and dedicated funding. There were a handful of requests for things that already exist, such as a web presence (each council has a section of the [NORA website](#)), a presence in NIOSH newsletters (NORA has a section in the monthly [NIOSH eNews](#)), and an annual report (the first was [published in March 2019](#)).

Others suggested different ways to build or expand networks. As one person put it, “Continue with current channels of communication, of course, but find ways to better leverage individual companies, industry associations, and safety associations - both virtually but with greater in-person presence.” Several respondents offered specific suggestions of groups to reach out to related to their sector or cross-sector area.

## Question 2: How satisfied are council members with the functioning of their council?

In order to effectively fulfill their three purposes, councils must function effectively. The survey included questions on facets of running a council that may impact effectiveness, like leadership and the length and frequency of meetings.

Both NIOSH and partner members had high opinions of the council co-chairs. Roughly 95% agreed or strongly agreed across all dimensions.

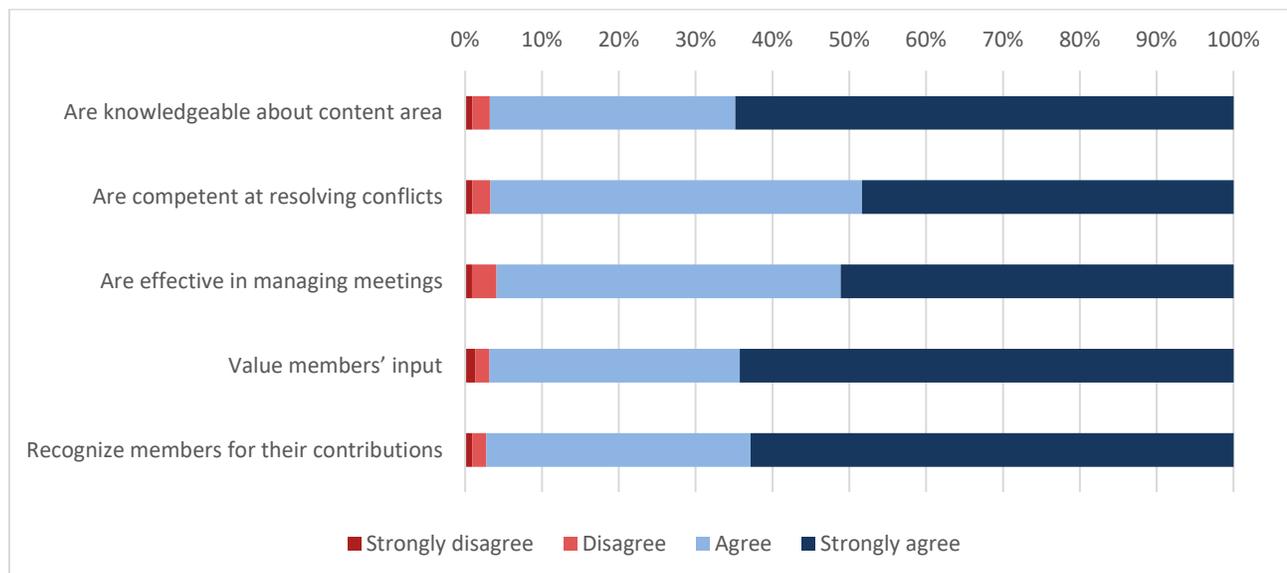


Fig 6. Leadership indicators, all respondents

Nearly all respondents felt they understood the mission of their council and were able to make contributions to the council’s work.

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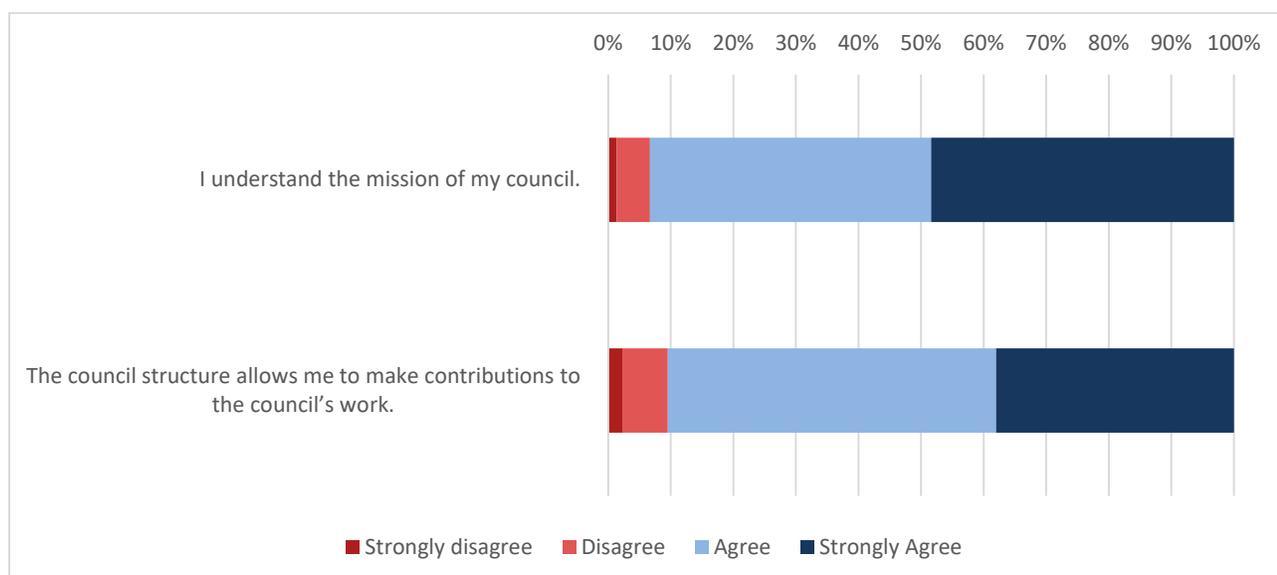


Fig 7. Council mission and structure, all respondents

Despite the calls to expand council networks in a previous section, a strong majority (85%) felt their council was representative of the varied stakeholders in their sector or cross-sector. Partner members were more likely to say yes, their council was representative (88%) compared to NIOSH members (79%). Those who answered no were asked to explain further. Of the few responses, most described a need for representation of specific subpopulations within a sector, or an imbalance among NIOSH, industry, worker, and academic members.

As far as meeting frequency, almost three-quarters (72%) thought the meeting frequency was about right. Partner members were more likely to want to meet more often (29%) compared to NIOSH members (21%). Nearly all (94%) felt that meetings were about the right length.

In a series of questions about overall sentiments about their NORA councils, members had positive opinions. More than 90% agreed or strongly agreed that their council contributes to improved occupational safety and health and participating was a good use of time. Virtually all (98%) care about the future of their council.

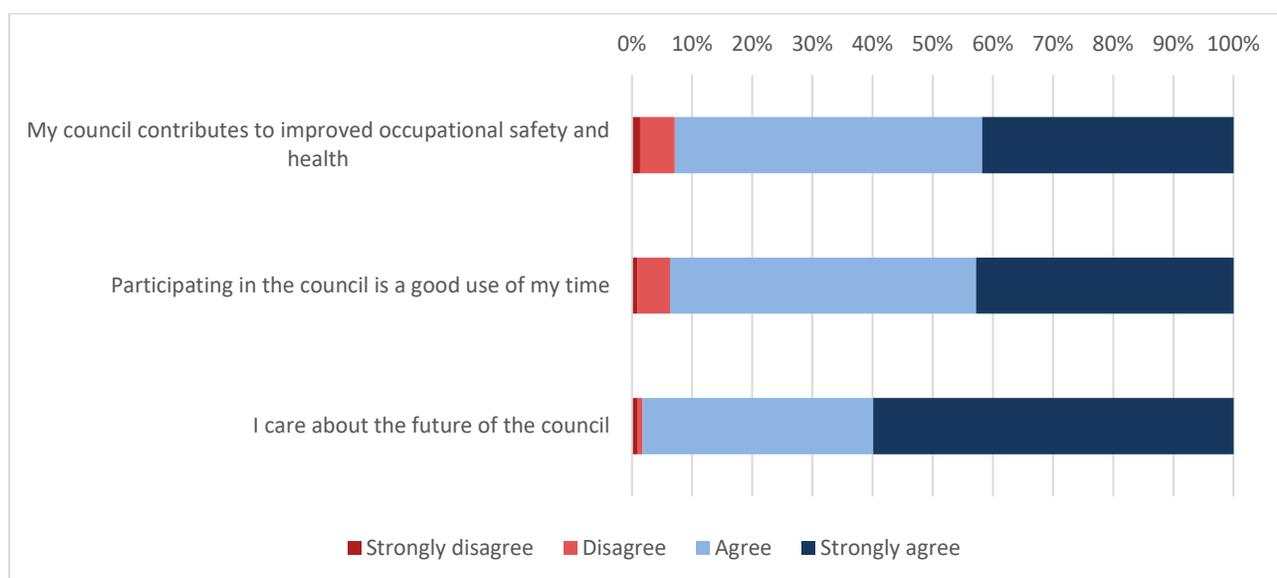


Fig 8. Overall experience, all respondents

## Question 3. What are best practices for effective NORA Councils?

Review of administrative data (attendance logs, annual review forms) and survey data showed that councils could be categorized into four groups:

- Highly engaged – Councils with robust participation and multiple partnership activities.
- Engaged – Councils with regular participation and some partnership activities.
- Information sharing – Councils that primarily spend time on presentations and other forms of information sharing, with few (or no) partnership activities.
- Challenged – Councils that struggle with engagement, usually due to leadership changes and/or competing priorities.

### *Models from highly engaged councils*

The five highly engaged councils are Construction, Manufacturing, Oil and Gas Extraction, Respiratory Health, and Services. The diversity in their approaches suggest there are multiple successful models. Construction and Oil and Gas Extraction represent the first model. Both meet twice per year for 1 ½ days, usually at partner facilities, with an option for remote attendance. These councils spend some time on presentations and information sharing at meetings, but also devote substantial time to workgroups. Construction has three workgroups and Oil and Gas Extraction has four. The advantage of this approach is the face-to-face time that may help acquaintances to become partners, but the challenge is that it can be difficult to maintain momentum between meetings.

A second model comes from Manufacturing and Services. These two councils have a mix of in-person and online meetings. Manufacturing meets in Cincinnati at NIOSH facilities, and Services meets roughly every other year at NIOSH facilities, and both councils offer an option for remote attendance. Online meetings throughout the year for the full council are typically devoted to presentations, information sharing, and in-person meeting planning. Manufacturing and Services each have two workgroups, and they have separate online meetings. This approach has less face-to-face time but the advantage of more regular interactions.

The third model is from Respiratory Health. While the other four exemplary councils have been operating since about 2006, Respiratory Health is one of the seven cross-sector councils formed in 2016/2017 at the start of the third decade of NORA. Respiratory Health meets exclusively online, with the occasional informal gathering at professional conferences. Meetings are primarily focused on partnership activities, and when the council does do presentations/webinars, they are in conjunction with other councils or organizations. Respiratory Health does not have any workgroups, perhaps because it is smaller (approximately 20 members) compared to the exemplary councils that have 40-60.

### *Other best practices*

Additional lessons can be learned from looking across the highly engaged and engaged councils. These councils tend to:

- Meet on a regular schedule, either twice a year or quarterly
- Have committed leadership (NIOSH and external co-chair) able to routinely devote time to the council
- Take an action-oriented approach to actively encourage partnership activities. This often includes setting goals or milestones.
- Create workgroups when the council becomes large (more than 40 members)

The time commitment for council leaders can be challenging because council leadership is not a full-time position, and is instead an additional commitment on top of other work responsibilities. It may be helpful to rotate leadership every two to three years.

# Conclusion

## Recommendations

Based on the findings, the following actions are recommended:

### 1. NIOSH, as steward of NORA, should provide more logistical support for in-person council meetings

Meeting planning can be time consuming and may also be intimidating for those without experience. While NIOSH cannot provide travel funding for NORA council meetings for financial and legal reasons, it can provide meeting space and additional administrative support for meeting planning.

### 2. NIOSH, as steward of NORA, should provide a central repository for NORA council documents

Currently, meeting agendas, meeting notes, and presentations are shared over email, which creates a burden on council members. Although NIOSH must comply with government data security requirements, it can seek an acceptable software to serve as a central repository.

### 3. Councils leaders should prioritize engagement

The meaning and significance of NORA comes from the partnerships formed through NORA councils, making engagement critical. As the adage goes, “People vote with their feet” and will stop attending meetings if they no longer find value in participating. Potential benefits to members include exposure to new ideas, new professional connections, better ability to meet individual or group goals, personal recognition, and a sense of “making a difference.” These benefits must outweigh the costs of participation, which are generally time, frustration, insufficient recognition, and loss of independence.

Council leaders are encouraged to monitor meeting attendance carefully and try new approaches when attendance begins to decline. The attendance data was unfortunately not as robust as the other data sources, but it did show that approximately 25%-50% of members did not attend any meetings in the past year, even in the highly engaged councils. It may be helpful for council leaders to ask which benefits their members value most and then use that information to shape future activities in ways that maximize those benefits.

### 4. Council leaders should consider implementing ideas from the survey and best practices

The open-ended survey responses included helpful, concrete ideas for how to broaden participation in information sharing, help members make connections, and spread the word about occupational safety and health research findings. Helpful approaches can be drawn from the cases studies of the five highly engaged councils and other best practices. Council leaders should consider which of these ideas would be helpful considering their unique circumstances.

## Limitations

The survey had a low response rate, 35%, so the findings cannot be generalized to all NORA council members. Future survey designs will need to include new strategies to increase the response rate. Like many other surveys, this one was also affected by recall bias and social desirability bias. The attendance data was not complete and was challenged by the way that membership fluctuates over time.

## Final Summary

All NORA councils are engaged in information sharing, but success at networking and promoting evidence-based solutions varies. Members who participated in this evaluation appear to be satisfied with council leadership and meetings. This evaluation offers potential solutions to increasing engagement and fully achieving all three purposes of NORA councils.

## Appendix A. Annual review form

1. What activities have you undertaken this year? Please include details about how it relates to your council's NORA objectives. If you have workgroups, please describe the activities of workgroups as well as the council as a whole.

*Activities could include guest presentations, setting milestones or yearly goals, projects underway, and outreach, among others.*

2. What products have you completed this year?

*Products could include publications, newsletters, blog posts, webpages, social media campaigns, etc. Please include links, pdfs of documents, or an appendix.*

3. Did the council and/or workgroups set any milestones/goals/objectives for this year? If so:

- a. Please list below. Indicate if progress was made or if they were completed.
- b. Describe the process used to set the milestones/goals/objectives.

4. Did the council engage in or contribute to the establishment or maintenance of any partnerships this year? Please describe below, including whether it was a formal arrangement with an MOA/MOU or an informal collaboration.

*Partnerships could be between organizations represented on the council, or between the council (collectively) and other organizations.*

5. Did you face any major obstacles or challenges this year? How did you address them? Please describe below.

6. Please describe any success stories from this year.

*These are usually instances when someone else takes action based on a council activity or product. For example, individuals or organizations working towards NORA objectives (especially those outside of NIOSH), or other organizations making changes to their policies or practices based on council activities or products.*

7. As an appendix or in a separate document, provide all meeting agendas. If there was a presentation, please make sure the name and affiliation of the speaker is noted.

## Appendix B. Council Member Survey

1. Which council are you a member of? (If you are a member of more than one council, choose the one you are most active in.)

[dropdown menu consisting of the following options]

Agriculture, Forestry and Fishing  
Cancer, Reproductive, Cardiovascular, and Other Chronic Disease Prevention  
Construction  
Healthcare and Social Assistance  
Healthy Work Design and Well-Being  
Hearing Loss Prevention  
Immune, Infectious, and Dermal Disease Prevention  
Manufacturing  
Mining  
Musculoskeletal Health  
Oil and Gas Extraction  
Public Safety  
Respiratory Health  
Services  
Traumatic Injury Prevention  
Wholesale and Retail Trade  
Transportation, Warehousing, and Utilities

2. For the past 12 months, which of the following best describes your role in the council?
  - a. Member who attends council meetings only
  - b. Member who attends meetings *and* participates in a workgroup
  - c. Member who has a leadership role (co-chair of a council, leader of a workgroup or leader of a project/activity)
3. Over the past 12 months, how many hours have you spent working on council activities outside of meetings?  
[slider that goes from 0-100]

**Information Sharing**

4. How often did you engage in information sharing with in your NORA council in the past 12 months?

	At least once per month ( $\geq 12$ )	Several times (5-11)	A few times (1-4)	Never (0)	Not applicable
Sharing updates about my or my organization's work towards NORA objectives					
Sharing information about such things as meetings or conferences, training opportunities, funding sources, community survey data, or programs					

5. How helpful has your council been in keeping up to date on information about occupational safety and health in your area?

- a. Very helpful
- b. Somewhat helpful
- c. Not so helpful
- d. Not at all helpful
- e. My council doesn't share information

6. How would you rate the usefulness of the presentations during council meetings?

- a. Always useful
- b. Often useful
- c. Sometimes useful
- d. Never useful
- e. My council doesn't have presentations

7. What is one thing that could be done to improve information sharing in your NORA council?

[Text box]

**Networking**

8. How much do you agree with the following statements about networking in your NORA council?

	Strongly disagree	Disagree	Agree	Strongly Agree	Not applicable
I have been able to build or maintain relationships with others in my occupational safety and health area through my council.					
My council has formed productive collaborations with other organizations.					

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	Strongly disagree	Disagree	Agree	Strongly Agree	Not applicable
I have done work I wouldn't have been able to do without the connections I made or maintained through my council.					

9. What is one change that could improve networking and/or partnerships on your NORA council?

[Text box]

**Dissemination and implementation**

10. How much to do you agree with the following statements about promoting dissemination and implementation of solutions in your council?

	Strongly disagree	Disagree	Agree	Strongly Agree	Not applicable
The products we create as a council are useful to others.					
We do enough outreach/dissemination about evidence-based solutions.					

11. How have you or your organization used information or implemented policies/programs/solutions you learned through your NORA council over the past two years? Please provide specific examples.

[Text box]

12. What is one change that could improve dissemination and implementation work on your NORA council?

[Text box]

**Council Functioning**

13. How much to you agree or disagree with the following statements about your council's co-chairs?

Co-chairs...	Strongly disagree	Disagree	Agree	Strongly Agree
Are knowledgeable about content area				
Are competent at resolving conflicts				
Are effective in managing meetings				
Value members' input				
Recognize members for their contributions				

14. How much do you agree or disagree with the following statements?

	Strongly disagree	Disagree	Agree	Strongly Agree
I understand the mission of my council.				
The council structure allows me to make contributions to the council's work.				

15. Is your council representative of the varied stakeholders of your sector or cross-sector? If not, what group(s) are missing?

[Text box]

16. What is your opinion about the frequency of meetings?

- We should meet less often
- Meeting frequency is about right
- We should meet more often

17. What is your opinion about the length of meetings?

- Too short
- About the right length
- Too long

### Overall

18. How much do you agree or disagree with the following statements about your overall experience on a NORA council?

	Strongly disagree	Disagree	Agree	Strongly Agree
My council contributes to improved occupational safety and health.				
Participating on the council is a good use of my time.				
I care about the future of the council.				

19. Do you have specific examples that you would like improvements in worker health and safety resulting from the activities of your NORA council? If so, please describe them in the text box below.

[Text box]

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20. Is there any other feedback you'd like to share to improve the NORA council process? Please use the box below.

[Text box]