

Supporting Statement B

for

**Testing Act Early Messages and Materials for “Learn the Signs.
Act Early” – Phase II**

New

August 22, 2014

Technical Monitor
Denise Levis, MA, PhD
Health Communication Specialist
Prevention Research Branch
National Center on Birth Defects and Developmental Disabilities
P: (404) 498-0237
E: Denise.Levis@cdc.gov

Table of Contents

- B.1. Respondent Universe and Sampling Methods
- B.2. Procedures for the Collection of Information
- B.3. Methods to Maximize Response Rate and Address Non-Response
- B.4. Test of Procedures or Methods to be Undertaken
- B.5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

B. Collection of Information Employing Statistical Methods

B.1. Respondent Universe and Sampling Methods

Parent Focus Groups. Focus groups will consist of four (4) in-depth discussions with parents/guardians to provide their feedback on educational messages and materials developed by CDC for the “Learn the Signs. Act Early.” Campaign. Focus group participants will be recruited through six primary care clinics (three in the Baltimore, Maryland (MD)/Washington, DC metropolitan area and three in the Atlanta, Georgia (GA) metropolitan area) that serve children and low-income families. Handouts and posters will be provided to these clinics to promote the study; potential respondents will then call a toll-free number (found on the handouts and posters) in order to be screened for eligibility.

When a potential participant calls the toll-free number and expresses interest in taking part in the study, Westat will conduct a short screener to ensure eligibility. To be eligible to participate in the focus groups, participants must be between the ages of 18-55; a parent or legal guardian of a child age 5 or younger; be English-literate (English-speaking and comfortable reading in English); not have a child with a previously identified developmental delay or disability; not work as a medical professional or in a medical setting; not work with children who have special needs or in special education; and not have an annual household income of more than \$50K. We will also collect education and race/ethnicity during the screening process but this information will not be used to determine eligibility. Instead, we will use this information to ensure a mix of education levels and race/ethnicities are represented in the focus groups.

Eligible participants will be invited to attend the 1-hour focus group discussion and provide in-person feedback on the “Learn the Signs. Act Early.” educational messages and materials. The project team will schedule 4 focus groups (two in the Baltimore, MD/Washington, DC metropolitan area and two in the Atlanta, GA metropolitan area). Each group will have 8-10 participants, for a total of 32-40 respondents. To ensure that a minimum of 8 people participate in each of the 4 focus groups, 10-12 participants will be recruited per group.

Parent Intercept Interviews. Participants in the parent intercept interview will be recruited from the same 6 primary care clinics that were used to recruit focus group participants. Eligible respondents must be between the ages of 18-55; a parent or legal guardian of a child age 5 or younger; be English-literate (English-speaking and comfortable reading in English); not have a child with a previously identified developmental delay or disability; not work as a medical professional or in a medical setting; not work with children who have special needs or in special education; not have an annual household income of more than \$50K; and have not previously received *Amazing Me*.

Recruitment and data collection for the intercept interviews will be conducted via a tablet computer device in the clinic waiting rooms at a time when the parent is already present for an appointment. Westat staff will work with the clinics to identify the ideal location for the intercept, but it will likely occur in clinic waiting rooms. Staff will use the intercept interview recruitment script (**Attachment 8**) as a guide when approaching parents in the waiting room and recruiting them for the interview. Interviewers will also have copies of the study factsheet (**Attachment 14**) that provides more detailed information about the study overall for interested parents/guardians to review.

Parents/guardians who express interest in participating will complete a brief, self-administered screener on a tablet computer device to confirm their eligibility. The screener will terminate for those found ineligible because they do not meet any of the criteria listed above. Eligible participants will proceed to complete the intercept interview, which will be conducted as a computer-assisted self-administered web survey. All data will be collected through a secure website hosted by SurveyMonkey.

The intercept interview should take no more than 15 minutes to complete. The project team aims to complete a total of 40 intercept interviews, 20 in the Baltimore, MD/Washington, DC metropolitan area and 20 in the Atlanta, GA metropolitan area. In each state, we will aim to conduct approximately 6-7 interviews per clinic.

B.2. Procedures for the Collection of Information

Parent Focus Groups. Participants will be asked to arrive at the focus group facility 15 minutes prior to the start of the focus group. They will be given a consent form to read and sign (see **Attachment 6**). Then the participants in each group will be gathered in a room with a trained moderator. A note taker will also be present, either seated behind a two-way mirror in an adjoining room, or (in the event that any groups are conducted at a clinic) in the room with the participants. The moderator will explain the study, inform the group of audiotaping, and lead a discussion using the moderator's guide (see **Attachment 7**). Each focus group will last approximately 60 minutes. Responses will be collected by audiotape and notes taken by the note taker. After each group, the recordings will be transcribed for qualitative analysis.

Parent Intercept Interviews. All intercept interview data will be collected using the web survey tool, SurveyMonkey. The interview will be self-administered by parents in the clinic waiting rooms, using a tablet (such as an iPad) provided by the research team for data collection. (See **Attachments 10, 10a, and 10b** for the intercept interview guide.) Consent information included into the introduction of the interview will be programmed into the web survey and all participants will be required to acknowledge that they have read the consent and agree to continue by selecting a radio button before starting the survey. Intercept interviews will take no more than 15 minutes to complete.

B.3. Methods to Maximize Response Rates and Deal With Nonresponse

Parent Focus Groups. For the focus groups, the project team will make efforts to

schedule the groups at times and locations that are convenient for respondents. For example, evening hours are often most convenient for collecting information from parents and guardians who work during the day. We will also seek focus group locations at or near each of the clinics participating in the study, to reduce travel burden for participants. In addition, we will employ standard over-recruitment methods (recruiting 10-12 parents per group) to ensure that we have a minimum of 8 participants for each group. Finally, a financial incentive of \$40 will also be provided to focus group participants as a token of appreciation for their interest.

Parent Intercept Interviews. The intercept interviews will not use a probability sample to select respondents. Except for offering financial inducement for participation, the project team does not plan to use any special procedures to convert those who, after being informed about research objectives and participation, decline to participate in the interview.

B. 4 Test of Procedures and Methods to be Undertaken

Parent Focus Groups. The qualitative research being conducted through the parent focus groups will follow standard focus group discussion procedures. The focus group discussion guide was tested in a pilot group discussion with 3 individuals who met the screening criteria for participating in the study. This pilot testing was conducted to ensure that the questions were understood as intended by the target audience and to estimate time requirements. The final parent focus group screener and discussion guide can be found in **Attachments 5 and 7**, respectively.

Parent Intercept Interviews. The parent intercept interview was programmed and tested with 6 individuals who met the screening criteria for the larger web survey; this was conducted in order to ensure that all questions were understood as intended and to assess the timing of the survey. The final parent intercept interview screener, screener screenshots, intercept interview, and intercept interview screenshots can be found in **Attachments 9, 9a, 10, 10a, and 10b**.

B.5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

The individuals consulted on technical and statistical issues related to data collection are listed below. The data will be analyzed by the study contractor, Westat, Inc.

Westat collaborators:

Erika Bonilla, MS
Project Director
Westat
1600 Research Blvd.
Rockville, MD 20850
Phone: 301-610-4879
Email: ErikaBonilla@westat.com

Melanie Chansky, MAA
Task Leader
Westat
1600 Research Blvd.
Rockville, MD 20850
Phone: 301-517-4019
Email: MelanieChansky@westat.com

Erika Reed-Gross, MSH
Task Leader
Westat
1600 Research Blvd.
Rockville, MD 20850
Phone: 770-455-4897
Email: ErikaReed-Gross@Westat.com