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key informant INTERVIEW discussion guide

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key informant interview discussion guide

for the Text4baby evaluation

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| **Introductions****(3-5 minutes)***NOTE: Ask all key informants (clinic providers and outreach partners).* | My name is [fill in] and this is [FILL IN], Thank you for your time today. As we mentioned when we set up this interview, we are conducting an evaluation of text4baby. We are visiting four communities across the country to meet with providers and outreach partners to talk about their experiences with the text4baby program. We are also conducting focus groups with consumers to learn more about their experiences.This interview will take about [30 to 45 minutes / 45 to 60 minutes]. [MY COLLEAGUE] will take notes as we talk. We also would like to record the conversation as a backup for our notes. We will keep the recording private and use it only for reference purposes for this project. We will not attribute any statements to a particular person. Is it ok for us to begin recording? [IF NO, ASK INDIVIDUAL(S) IF IT’S OK TO TAKE NOTES ON A LAPTOP. IF NO, DISCONTINUE INTERVIEW.]First, please tell us how long you have worked at this [organization/clinic]. and describe your main responsibilities? *[NOTE: If this is a group interview, have each person introduce themselves individually.]* |
| **Knowledge of text4baby****(5 minutes)***NOTE: Ask all key informants (clinic providers and outreach partners).* | Next, we are interested in hearing how and when you learned about text4baby.1. Please tell us what you recall about how and when text4baby first came to your attention. How did you originally hear about text4baby? (PROBE: Did you attend an outreach event (what kind)? See a media campaign (what kind)? Pick up promotional literature (where)? Learn about it from a colleague (what kind)? Learn about it from a patient (what was the context)? Other source?)
2. How familiar are you with the text4baby program, such as its sponsorship and goals, who it is targeting, how women sign up for text4baby messages, and the content of the messages? (PROBE: very well, somewhat well, not well at all)
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| **Involvement in Outreach and Enrollment****(5-10 minutes)***NOTE: Ask all key informants (clinic providers and outreach partners). Section b aimed to outreach partners.* | Our next questions are about the promotion of text4baby in your [clinic and your] community. 1. Does your organization promote text4baby in any way? IF YES: How? To whom? What role do you personally play in that effort?
2. Does your organization let consumers know that text4baby is available in Spanish? IF YES: How?
3. Does your organization participate in a community coalition or partnership to promote text4baby?
* IF YES: What is the name of the coalition or partnership? How did your organization become involved? What role does it play? What other organizations are involved? Who are the key partners? (PROBE: Health care providers? Outreach partners? Health educators?) What challenges if any have you encountered with the operation of the partnership to date? (PROBE: Resources? Coordination? Leadership?) In what ways, if any, could the partnership be improved to make it more effective in promoting text4baby at a community level?
* IF NO: Does your organization plan to participate in a coalition or partnership in the next 6 to 12 months?
1. Are you aware of any [other] efforts to promote enrollment in text4baby in your community?
* IF YES: What kinds? (PROBE: Outreach events? Media campaigns? Promotional materials?)
1. How effective do you think your [organization’s/community’s] outreach efforts have been in reaching women to sign up for text4baby?
* Which strategies do you think are most effective? Why?
* Which are least effective? Why?
1. As you may have heard, text4baby has a “1 million moms” enrollment goal by the end of 2012. What would you say are the promising practices for increasing enrollment in text4baby? What makes you say that? (PROBE: Outreach events? Media campaigns? Promotional materials?)
2. What barriers, if any, have you observed to increasing enrollment among low-income underserved women? (PROBE: Strategy? Cost of maintaining cell phone ownership? Language? Literacy? Lack of consumer interest? Health care providers do not have time to mention text4baby during visits with clients or patients?)
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| **Communications with Patients/ Clients About text4baby****(5 minutes)***NOTE: These questions are aimed to clinic providers.*  | Now I’d like to ask you about any communications you have about text4baby with the [patients/clients] that you serve.1. Do you ask your [patients/clients] who are pregnant or new mothers if they use text4baby?
* IF YES: Do you ask all [patients/clients] whether they are signed up for text4baby, or do you ask only certain types of [patients/clients] based on their risk profile or other factors? How do you integrate it into your communications with [patients/clients]? Do you record information on text4baby participation in the medical chart?
* IF NO: What are the main reasons you don’t bring up text4baby in conversations with [patients/clients]?
1. Have you ever recommended that a [patient/client] sign up for text4baby?
* IF YES: What kinds of [patients/clients]? Pregnant women? New mothers? Can you describe a specific situation in which you referred a [patient/client] to the service? Why did you recommend text4baby in this situation?
* IF NO: Why not?
1. Do your [patients/clients] ever ask you whether they should sign up for text4baby?
* IF YES: How often does this happen? What do you tell them? How often do they sign up after your discussion?
1. Thinking about your [patients/clients] who have signed up for text4baby, do they ever talk to you about the messages they receive?
* IF YES: In what context do they usually discuss text4baby? For example, is it in response to receipt of a message on a specific health or education issue? Are there specific types of messages that patients refer to more often? Can you provide a specific example?
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| **Women’s Overall Experiences with text4baby** **(5-10 minutes)***NOTE: Ask all key informants (clinic providers and outreach partners).* | We are interested in your observations about women’s experiences with text4baby from the first stages of learning about text4baby to actually using the service.1. ***Awareness:*** As far as you know, how do your [patients/clients] typically hear about the service? (PROBE: Do they hear about it from you? Did they attend an outreach event? See a media campaign? See a poster in the health center? Pick up promotional literature? Learn about it through discussion with other patients or family members? Other source?)
2. ***Decision to Enroll:*** Do you have any impressions as to why some [patients/clients] decide to enroll and others decide not to?
* What specific features do they like/not like about text4baby?
* What characteristics differentiate those who sign up versus those who don’t? (PROBE: Cell phone use? Language/literacy/cultural background? First-time pregnancy? Other factors?)
1. ***Enrollment:*** Have you heard any feedback from [patients/clients] about the enrollment process, such as how easy or hard the process is?
* Are there any barriers to signing up as well as staying enrolled?
1. ***Disenrollment***: Are you aware of women deciding to STOP receiving messages? Why do they decide to stop? Is there anything that could be done to make the service more appealing or attractive to them?
2. ***Satisfaction with Service:*** Do you have a sense of how satisfied women are with the service? What do they like most? What do they like least?
* Do you see any differences in the level of satisfaction between pregnant women and new moms? Between English-language and Spanish-language subscribers? Between any other groups?
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| **Women’s Use of text4baby****(5 minutes)***NOTE: Ask all key informants (clinic providers and outreach partners). Providers and case managers may be more knowledgeable about these questions.* | Now I would like to ask you about your perceptions of how women use text4baby messages.1. From your point of view, what makes text4baby messages useful for pregnant women or new moms? (PROBE: Is text4baby useful because it conveys new information, or because it affirms and reminds women of messages they may hear elsewhere? Is the linking of the messages to the due date or baby’s age useful?)
* Are certain types of messages more useful than others? (PROBE: Recommended health care services? Appointment reminders? Toll-free numbers? Can you provide some examples?)
1. Do you think women find the messages clearly written and culturally appropriate?
* Do you notice any differences in understanding among English-language and Spanish-language participants?
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| **Changes in Health Knowledge** **(5 minutes)***NOTE: Ask all key informants (clinic providers and outreach partners). Providers and case managers may be more knowledgeable about these questions.* | Have you noticed any changes in your [patients’/clients’] health knowledge or desire to learn that might result from participating in text4baby? * IF KNOWLEDGE INCREASED: In which areas?
* IF GREATER DESIRE TO LEARN: What examples have you seen? Increased patient use of information pamphlets? Increased calls to hotlines? Increased referrals to classes?
* IF NO CHANGES: Are there any reasons why the service may not have improved your [patients’/clients’] level of health knowledge? Can you suggest ways to make the service more effective?
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| **Changes in Behavior****(5 minutes)***NOTE: These questions are for clinic providers who have had interactions with their patients about text4baby. Other providers and outreach partners are unlikely to be able to answer these questions.* | How have you noticed any behavior change that might have resulted from text4baby?1. Have you or your colleagues noticed improved compliance with recommended care (prenatal care, flu shot, prenatal vitamins, smoking cessation, dental care), fewer missed appointments, or increased engagement in their own care?
* IF YES: Can you provide any examples?
* IF NO: Why not? What barriers do participants face in acting on messages? (PROBE: Financial? Transportation? Child care? Scheduling?)
1. Similarly, have you or your colleagues seen any changes in compliance with recommended care during the baby’s first year among women who receive text4baby messages, such as timeliness of well-child visits, immunizations, breastfeeding, safe infant sleep position, or car safety? Have you observed fewer missed appointments or increased engagement in their child’s development?
* IF YES: Can you provide any examples?
* IF NO: Why not? What barriers do participants face in acting on messages? (PROBE: Financial? Transportation? Child care? Scheduling?)
1. Do you observe any differences in utilization patterns between text4baby participants and nonparticipants?
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| **Changes in the Health Care System** **(3 Minutes)***NOTE: Ask all key informants (clinic providers and outreach partners).* | We are interested in hearing whether the implementation of text4baby has led to health system changes in your community, such as new forms of collaboration, new care protocols, or new resources. 1. Has text4baby led to any changes in how care is organized or delivered in your community? (PROBE: Changes in demand for education/counseling classes? Introduction of new classes? New reminder systems to support better compliance? Revised outreach strategies and communications?)
* IF YES: What changed and what led to the change?
1. Has the level of collaboration between health providers and outreach partners around maternal and child health changed within your community since the introduction of text4baby?
* IF YES: What changed and what led to the change?
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| **Sustainability and Replication of text4baby****(5 minutes)***NOTE: Ask all key informants (clinic providers and outreach partners).* | The next few questions relate to sustaining text4baby and applying the text4baby approach to other public health and health education issues within your community. 1. What costs or other resources, if any, has your organization contributed to support your role in promoting text4baby? (PROBE: Money? Staff? Time?)
2. What are the benefits to your organization’s continued involvement with text4baby? What challenges do you foresee?
3. How effective has the local partnership been at facilitating outreach, enrollment, or other activities related to text4baby? (PROBE: Outreach events? Media campaigns? Promotional materials?)
4. What resources are required to maintain and grow the local partnership among public and private organizations? (PROBE: Dedicated outreach budget? Dedicated staffing?)
5. What elements of text4baby, if any, are replicable with other public health issues or populations? (PROBE: Health conditions? Populations?)
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| **Final Reflections and Wrap Up** **(5 minutes)***NOTE: Ask all key informants (clinic providers and outreach partners).* | We are interested in your recommendations for improving text4baby, such as suggestions to reach more women and refine the messages.1. First, do you have any impressions of specific aspects of the text4baby program that have worked well to date? (PROBE: Enrollment process? Voluntary disenrollment process? Emergency alerts? Content of messages? Timing and frequency of messages?)
2. Do you have any recommendations for improving text4baby? (PROBE: Ways to make it more useful to women? Improve its integration with provider practices within the community?)
3. What barriers or challenges do you foresee to implementing those improvements? What resources would be required to address them?
4. In the future, will you recommend text4baby to your patients? (PROBE: Why or why not?)

Thank you very much for your time. We appreciate your sharing your experiences and observations with us.  |

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| **Public Burden Statement:**  An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.  The OMB control number for this project is 0915-0347.  Public reporting burden for this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information.  Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:  HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-49, Rockville, MD 20857. |