

## Virtual Focus Group Guide

### Postpartum Consumer Group (Depression Medication)

**Overview.** The 90 minute virtual focus group will comprise the following steps:

1. **Consent Form:** Participants will read the consent form and check the box indicating their agreement to participate.
2. **Waiting Room.** Participants will gather in the virtual waiting room 10-15 minutes before the group is scheduled to start and will review the housekeeping items.
3. **Welcome:**
  - a. **Welcome**—the moderator will welcome the participants and explain the purpose of the focus group session.
  - b. **Ground rules**—the moderator will provide guidance to ensure that participants are able to respond with minimal distractions.
4. **Discussion:** In the focus group, participants will discuss the following topics:
  - a. Current medication use
  - b. Changes to medication use during pregnancy
  - c. Sources of information about medication use during preconception/pregnancy
  - d. Reactions to messages about medication use during pregnancy
5. **Closing**

#### Housekeeping Items (Waiting Room)

Before the group begins, we want to share a few housekeeping items:

1. **TECHNICAL PROBLEMS.** If you experience technical problems, please call 1-888-525-5026 (select option 2) for technical support.
2. **TRANSCRIPT.** After the focus group, we'll print a transcript of our discussion that will help us summarize the key points that you raise. It will not include anyone's full name or identifying information.
3. **CONFIDENTIALITY / PRIVACY.** Anything you say in today's discussion will remain secure. Your names, addresses, and phone numbers will not be given to anyone. We will conduct

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follow-up interviews with some participants. Within a week, you may be contacted about participating in a follow-up interview.

### Welcome

Thanks for joining us today. I'm \_\_\_\_\_, and I'm from RTI International. We're a non-profit research organization based in North Carolina. We are working with the Centers for Disease Control and Prevention (CDC) and March of Dimes to conduct the virtual focus groups about medication use during pregnancy.

We brought you here tonight because you all have something in common--you've all had a pregnancy in the past year.

Another thing that you all have in common is that you took medication for your depression during your prior pregnancy. I know that it can be difficult for some people to talk about depression and treatments for depression. We're very interested in your experiences of managing this condition during pregnancy.

The purpose of today's group is to learn more about your thoughts about medication use during pregnancy.

The session will last about 90 minutes.

First, I want to share a few ground rules for today's discussion:

1. **YOUR OPINION.** There are no right or wrong answers in today's discussion. We want to know your honest opinions and experiences, even if they differ from other people's experiences.
2. **ANSWER ALL QUESTIONS.** After we ask a general question, we will frequently ask several follow-up questions. Please answer both the questions and follow-up questions.
3. **BUILDING ON OTHERS' COMMENTS.** When building on another person's comments—for example, when agreeing with them—be sure to reference the name of person who made the original comment. (For example: "@ Ellen - I completely agree!")
4. **MINIMIZE DISTRACTIONS.** Please make sure that you are in a place where you can participate without any distractions. Please turn off your beepers, cell phones, pagers, televisions, radios, and anything else that may make it difficult to concentrate.
5. **RESTROOMS.** Feel free to use the restroom during our discussion if needed. You don't need to tell us you will be away from your computer; please just return to the discussion as quickly as possible.
6. **QUESTIONS.** Does anyone have any questions before we begin?

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### Questions

#### **Warm-up Question**

Congratulations on your recent baby! Let's start by typing in your first name and something about your baby.

#### **Introductory Questions.**

Like I mentioned before, you all have experience managing depression during pregnancy. I am going to ask you some questions about your experiences, particularly about medication use.

1. What are the biggest benefits you get from taking your depression medication, in general?
2. What are the downsides, if any, to taking your depression medication, in general?
3. At what point did you start taking depression medication, was it before you were pregnant or did you begin medication after you were already pregnant?

### Probes or Follow-Ups

- Did you have a boy or a girl? How old is he/she now? Anyone with twins?
- Were there different benefits when you were pregnant?
- Were there different downsides when you were pregnant? Probe: Downsides for mom? Downsides for baby?
- During which trimester did you start taking the medication?

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4. While you were pregnant, did you make any changes to your depression medication?
  - If so, how did your medication use change? Dosage? Frequency?
  - Did you change medication according to what trimester you were in?
  - If not, why?
  - What types of doctors did you talk to? Psychiatrist, OB/GYN, midwife, family doctor?
  - Did your doctors tell you different information? If you received conflicting information, how did you make a decision about your medication?
  - What type of doctors did you get the conflicting information from?
  
5. Before you changed your medication use, what specific steps did you take?
  - Did you meet with your doctor? Talk to a pharmacist? Create a treatment plan? Search for information online?
  
6. For those of you who made a change to your depression medication during pregnancy, what factors did you consider? For those of you who did not make a change, what factors did you consider?
  - Did you look for information about the safety of the medication during pregnancy? If so, who did you ask or where did you look for that information?
  - What information were you able to get about the medication's safety? Is there other information you wanted but didn't receive or couldn't find?

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7. Do you think your doctor had enough knowledge about your depression medication and pregnancy to address your questions?
  - Which type of doctor had the most information to give you? [OB/GYN, psychiatrist, etc.]
  - If the risk of the depression medication was unknown, how did you make decisions about taking or not taking it?
8. Could you share any other information you have received from your doctors and other providers about depression medication use during pregnancy?
  - If you lacked information on the risk of a depression medication, what did you do? (continued to take medication(s), discontinued medication(s)) How did you make a decision about what to do?
9. If you had a question regarding depression medication use during pregnancy, which doctor(s) did you contact?
  - If you were seeing more than one doctor, how did these providers share information about your treatment plan, if at all?

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10. Besides your doctor(s), where else did you look for guidance about medication use during pregnancy?
  - Family/friends, health Websites, online health communities, phone apps, TV, and text messaging?
  - Whose specific opinion regarding medication use during pregnancy mattered most to you?
  
11. How did you decide what information you can trust?
  - How did you decide which sources were more likely to be trustworthy or were giving you more accurate information than others?
  - How did you handle conflicting information?
  - Did you share information with other women or family members? If yes, how?

### Message Testing

For the next set of questions, we are going to ask your opinion on some messages that you might read on a pregnancy webpage or materials available to you at your doctor's office about medication use during pregnancy.

#### Message 1a.

Talk with your doctor if you are pregnant and you have taken any medicine or are thinking of taking any medicine. This includes prescription and over-the-counter medications, as well as dietary or herbal products.

1. What are your initial reactions to this message?
  - What is the main point of this message?
  - Is there anything that is confusing or difficult to understand? If so, what?
    - a. What does "talk with your doctor" mean to you in this context?
    - b. What do "over-the-counter medications" mean to you in this context?
  - Is there information missing from this message that you think should be included?
2. How relevant is this message to you?

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- a. Thinking back to when you were pregnant, how helpful would a message like this have been to you?
- b. How, if at all, would it have influenced your decision making?

### Message 1b.

The following message is an addition to the previous message (Message 1a).

Since no medicine is 100 percent safe for all women, it's a good idea to check with your doctor. The conversation with the doctor will help you weigh the risks and benefits of any medication used during pregnancy.

3. What are your initial reactions to this additional information?
  - a. Does this additional information change your reaction to the first part of the message? If so, how?
  - b. Is there anything that is confusing or difficult to understand? If so, what?
    - a. What does "100 percent safe" mean to you in this context?
    - b. Who do you think the statement "100 percent safe" refers to – the mother or the fetus?
    - c. What does "weigh the risks and benefits" mean to you in this context?

### Message 2a.

Pregnant women should not stop or start taking any type of medication that they need without first talking with a doctor.

4. What are your initial reactions to this message?
  - What is the main point of this message?
  - Is there anything that is confusing or difficult to understand? If so, what?
    - a. What does "medication that they need" mean to you in this context?
    - b. What does "first talking with your doctor" mean to you in this context?
    - c. What do you expect your doctor to do?
  - Is there information missing from this message that you think should be included?
5. How relevant is this message to you?
  - a. Thinking back to when you were pregnant, how helpful would a message like this have been to you?
  - b. How, if at all, would it have influenced your decision making?

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### Message 2b.

The following message is an addition to the previous message (Message 2a).

This is particularly important early in your pregnancy. Pregnant women should avoid taking anything during your first trimester when your developing baby is most vulnerable.

6. What are your initial reactions to this additional information?
  - a. How does this additional information change your reaction to the first part of the message?
  - b. Is there anything that is confusing or difficult to understand? If so, what?
    - a. What does “avoid taking anything during your first trimester” mean to you in this context?
    - b. What does “when your baby is most vulnerable” mean to you in this context?

### Message 3a.

If you are planning a pregnancy and are using any medications, please talk to your doctor about which medications are necessary and should be continued.

7. What are your initial reactions to this message?
  - What is the main point of this message?
  - Is there anything that is confusing or difficult to understand? If so, what?
    - a. What does “planning a pregnancy” mean to you in this context?
    - b. What does “which medications are necessary” mean to you in this context?
  - Is there information missing from this message that you think should be included?
8. How relevant is this message to you?
  - a. Thinking back to when you were pregnant, how helpful would a message like this have been to you?
  - b. How, if at all, would it have influenced your decision making?



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### Message 3b.

The following message is an addition to the previous message (Message 3a).

If you are planning to have a baby and are using any medications, please talk to your doctor about which medications are necessary and should be continued. Unnecessary medications early in your pregnancy can hurt your baby.

9. What are your initial reactions to this additional information?
  - a. How does this additional information change your reaction to the first part of the message?
  - b. Is there anything that is confusing or difficult to understand? If so, what?
    - a. What does “unnecessary medications” mean to you in this context?
    - b. What does “early in your pregnancy” mean to you in this context?

### Closing Question

12. Is there anything else you would like to share about how information given to women about medication use during pregnancy could be improved?

### Closing (1 min)

Thank you again for participating in today’s group. Your experiences and input were extremely valuable in helping us to understand how women make decisions about medication use during pregnancy.

I’d like to remind you of two phone numbers you can call if you have any questions about the study. If you have any questions about your rights as a study participant, you may call Molly Lynch toll-free at 1-866-RTI-1958 then extension x22709 or you can call RTI’s Office of Research Protection at (919) 316-3358 in Durham, NC or 1-866-214-2043 (a toll-free number).

As a token of appreciation for your interest, you will receive a check in the amount of \$50. You should receive it within 5-7 business days. If you do not receive the check, please contact Molly Lynch at 1-800-334-8571 (extension 22709).

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