NORC
at the UNIVERSITY *of* CHICAGO

COGNITIVE INTERVIEWING PROTOCOL

National Survey of Children's Health

Development of Mail and Internet Questionnaires with Measurement Equivalence

Respondent ID	
Appointment Date	_____/_____/_____ MM DD YY
Appointment Time	_____:_____ AM/PM
Interviewer name	
Observations or comments	

Step 1
Interviewer: make sure you have the following **materials**.

Checklist
☐ Interviewer protocol booklet (THIS BOOKLET)
☐ Respondent questionnaire
☐ Consent form (Two copies)
☐ $50 cash in envelope
☐ Payment receipt
☐ Pens, pencils and extra white paper
☐ Recorder

Step 2
Interviewer: Provide respondent with a copy of the **informed consent form**. Ask the respondent to read the form (or read it to him/her, depending on respondent preference), answer any questions, and have the respondent sign their initials giving consent. Leave a separate copy of the form with the respondent.

[INTERVIEWER]: IF CONDUCTING OVER THE PHONE, HAVE RESPONDENT GIVE VERBAL CONSENT AND SIGN YOUR INITIALS ON THE FORM].

☐ Signed consent form collected
☐ Copy of consent form given to respondent

Step 3
Interviewer: Confirm participant has consented to recording.
☐ Pens, pencils and extra white paper
☐ *If not, DO NOT audiotape but continue with the interview stating that the conversation is not being audiotaped*

Step 4
Interviewer [ASK]: Do you have any questions before I begin?
☐ Answer any questions R may have
☐ R did not have questions

Interviewer: Although we will use your notes and recordings to obtain detailed feedback for the write-up, please use the coding scheme provided throughout this protocol to facilitate the summary of main findings. Do not read the coding scheme to the respondent.

Step 4

Interviewer [READ]: We discussed briefly during the initial phone screening whether you would be able to provide documentation of insurance coverage. Do you have this documentation available?

Did respondent provide documentation to confirm insurance coverage?

- ☐ Yes
- ☐ No

- ☐ Physician Letter
- ☐ Letter from the child's school
- ☐ Prescription bottle
- ☐ Medical Records
- ☐ Other (please specify)_____
  _____

Step 5

Interviewer [READ]: We discussed briefly during the initial phone screening whether you would be able to provide documentation on your child's condition(s). If you have this documentation available, we can collect it at this time. If you do not have the documentation available, we can discuss alternative options for verifying your child(s) conditions following the interview.

Did respondent provide documentation to confirm the child's diagnosed condition(s)?

- ☐ Yes
- ☐ No

- ☐ Physician Letter
- ☐ Letter from the child's school
- ☐ Prescription bottle
- ☐ Medical Records
- ☐ Other (please specify)_____
  _____

Cognitive Interview: **SCREENER**
Interviewer: Hand respondent a copy of a screener and a pen. [**READ**] Now I would like you to complete this screening questionnaire. Once you've completed the screening questionnaire, I'll also have some questions to ask you about it.

Section: "Survey Instructions", "Start Here" and "Household"	
Interviewer: *Record START time*	___:___ AM/PM
Interviewer: *Record END time*	___:___ AM/PM

Section: Survey Instructions	
Is there anything unclear or confusing that you've noticed in section "Survey Instructions"? If yes, which parts?	

1 ☐ No
2 ☐ Yes, which parts?

What you'd change:

Section: Start Here
Is there anything unclear or confusing that you've noticed in section "Start Here"? If yes, which parts?

1 ☐ No
2 ☐ Yes, which parts?

What you'd change:

Section: Household

In general, is there anything unclear or confusing that you've noticed in section "Household"?

1 ☐ No
2 ☐ Yes, which parts?

What you'd change:

Section: Child 1

In general, is there anything unclear or confusing that you've noticed in section "CHILD 1"?

1 ☐ No
2 ☐ Yes, which parts?

What you'd change:

Section: Child 1/Q7 "Does this child currently need or use **medicine prescribed by a doctor,** other than vitamins?"

1.-Are there any terms or phrases that **are not clear** to you in this survey question? Which ones and why?	2.-Did you have troubles **remembering** information to answer this question? How?
1 ☐ R experienced difficulties **understanding** meaning of the survey question	1 ☐ R experienced difficulties **remembering** relevant information
2 ☐ R **did not** experience difficulties	2 ☐ R **did not** experience difficulties

3.-Did you have trouble **deciding** on which information to use? Why?	4.-Did you have troubles **selecting** a response category to provide your answer? Why?
1 ☐ R experienced difficulties **deciding** on which info to use	1 ☐ R experienced difficulties **selecting** a response category
2 ☐ R **did not** experience difficulties	2 ☐ R **did not** experience difficulties

5.-Interviewer: Record by observation alone or probe to see if R experienced difficulties with the following aspects

FOR PAPER & WEB	FOR WEB ONLY
1 ☐ R experienced issues locating **instructions** to answer survey item	11 ☐ R experienced issues locating **navigational** arrows (forward /backward)
2 ☐ Issues locating **navigating** the question (following numbering)	12 ☐ R experienced issues using **vertical scroll bar**
3 ☐ Issues following **skip patterns**	13 ☐ R experienced issues using **drop down menu**
4 ☐ Issues using **arrows**	
5 ☐ Issues **locating** response options	
6 ☐ Issues filling out **boxes with blank space**	
7 ☐ Issues seen **boldface text**	
8 ☐ R experienced issues with **font size**	
9 ☐ R experienced issues using **colors**	
10 ☐ Issues using **segmented square spaces**	

Section: Child 1/Q8 "Does this child need or use more **medical care, mental health, or educational services** than is usual for most children of the same age?"

1.-Are there any terms or phrases that **are not clear** to you in this survey question? Which ones and why?	2.-Did you have troubles **remembering** information to answer this question? How?
3 ☐ R experienced difficulties **understanding** meaning of the survey question 4 ☐ R **did not** experience difficulties	1 ☐ R experienced difficulties **remembering** relevant information 2 ☐ R **did not** experience difficulties
3.-Did you have trouble **deciding** on which information to use? Why?	4.-Did you have troubles **selecting** a response category to provide your answer? Why?
3 ☐ R experienced difficulties **deciding** on which info to use 4 ☐ R **did not** experience difficulties	1 ☐ R experienced difficulties **selecting** a response category 2 ☐ R **did not** experience difficulties

5.-Interviewer: Record by observation alone or probe to see if R experienced difficulties with the following aspects

FOR PAPER & WEB	FOR WEB ONLY
8 ☐ R experienced issues locating **instructions** to answer survey item	14 ☐ R experienced issues locating **navigational** arrows (forward /backward)
9 ☐ Issues locating **navigating** the question (following numbering)	15 ☐ R experienced issues using **vertical scroll bar**
10 ☐ Issues following **skip patterns**	13 ☐ R experienced issues using **drop down menu**
11 ☐ Issues using **arrows**	
12 ☐ Issues **locating** response options	
13 ☐ Issues filling out **boxes with blank space**	
14 ☐ Issues seen **boldface text**	
8 ☐ R experienced issues with **font size**	
9 ☐ R experienced issues using **colors**	
13 ☐ Issues using **segmented square spaces**	

Section: Child 1/Q9 "Is this child **limited or prevented** in any way in his/her ability to do the things most children of the same age can do?"

1.-Are there any terms or phrases that **are not clear** to you in this survey question? Which ones and why?	2.-Did you have troubles **remembering** information to answer this question? How?
5 ☐ R experienced difficulties **understanding** meaning of the survey question	1 ☐ R experienced difficulties **remembering** relevant information
6 ☐ R **did not** experience difficulties	2 ☐ R **did not** experience difficulties
3.-Did you have trouble **deciding** on which information to use? Why?	4.-Did you have troubles **selecting** a response category to provide your answer? Why?
5 ☐ R experienced difficulties **deciding** on which info to use	1 ☐ R experienced difficulties **selecting** a response category
6 ☐ R **did not** experience difficulties	2 ☐ R **did not** experience difficulties

5.-Interviewer: Record by observation alone or probe to see if R experienced difficulties with the following aspects

FOR PAPER & WEB	FOR WEB ONLY
15 ☐ R experienced issues locating **instructions** to answer survey item	17 ☐ R experienced issues locating **navigational** arrows (forward /backward)
16 ☐ Issues locating **navigating** the question (following numbering)	18 ☐ R experienced issues using **vertical scroll bar**
17 ☐ Issues following **skip patterns**	13 ☐ R experienced issues using **drop down menu**
18 ☐ Issues using **arrows**	
19 ☐ Issues **locating** response options	
20 ☐ Issues filling out **boxes with blank space**	
21 ☐ Issues seen **boldface text**	
8 ☐ R experienced issues with **font size**	
9 ☐ R experienced issues using **colors**	
16 ☐ Issues using **segmented square spaces**	

Section: Child 1/Q10 "Does this child need or get **special therapy**, such as physical, occupational, or speech therapy?"

1.-Are there any terms or phrases that **are not clear** to you in this survey question? Which ones and why?	2.-Did you have troubles **remembering** information to answer this question? How?
7 ☐ R experienced difficulties **understanding** meaning of the survey question 8 ☐ R **did not** experience difficulties	1 ☐ R experienced difficulties **remembering** relevant information 2 ☐ R **did not** experience difficulties

3.-Did you have trouble **deciding** on which information to use? Why?	4.-Did you have troubles **selecting** a response category to provide your answer? Why?
7 ☐ R experienced difficulties **deciding** on which info to use 8 ☐ R **did not** experience difficulties	1 ☐ R experienced difficulties **selecting** a response category 2 ☐ R **did not** experience difficulties

5.-Interviewer: Record by observation alone or probe to see if R experienced difficulties with the following aspects

FOR PAPER & WEB	FOR WEB ONLY
22 ☐ R experienced issues locating **instructions** to answer survey item	20 ☐ R experienced issues locating **navigational** arrows (forward /backward)
23 ☐ Issues locating **navigating** the question (following numbering)	21 ☐ R experienced issues using **vertical scroll bar**
24 ☐ Issues following **skip patterns**	13 ☐ R experienced issues using **drop down menu**
25 ☐ Issues using **arrows**	
26 ☐ Issues **locating** response options	
27 ☐ Issues filling out **boxes with blank space**	
28 ☐ Issues seen **boldface text**	
8 ☐ R experienced issues with **font size**	
9 ☐ R experienced issues using **colors**	
19 ☐ Issues using **segmented square spaces**	

Section: Child 1/Q11 "Does this child have any kind of emotional, developmental, or behavioral problems problem for which he/she needs treatment or counseling?"

1.-Are there any terms or phrases that **are not clear** to you in this survey question? Which ones and why?	2.-Did you have troubles **remembering** information to answer this question? How?
9 ☐ R experienced difficulties **understanding** meaning of the survey question 10 ☐ R **did not** experience difficulties	1 ☐ R experienced difficulties **remembering** relevant information 2 ☐ R **did not** experience difficulties
3.-Did you have trouble deciding on which information to use? Why?	**4.-Did you have troubles selecting a response category to provide your answer? Why?**
9 ☐ R experienced difficulties **deciding** on which info to use 10 ☐ R **did not** experience difficulties	1 ☐ R experienced difficulties **selecting** a response category 2 ☐ R **did not** experience difficulties

5.-Interviewer: Record by observation alone or probe to see if R experienced difficulties with the following aspects

FOR PAPER & WEB	FOR WEB ONLY
29 ☐ R experienced issues locating **instructions** to answer survey item	23 ☐ R experienced issues locating **navigational** arrows (forward /backward)
30 ☐ Issues locating **navigating** the question (following numbering)	24 ☐ R experienced issues using **vertical scroll bar**
31 ☐ Issues following **skip patterns**	13 ☐ R experienced issues using **drop down menu**
32 ☐ Issues using **arrows**	
33 ☐ Issues **locating** response options	
34 ☐ Issues filling out **boxes with blank space**	
35 ☐ Issues seen **boldface text**	
8 ☐ R experienced issues with **font size**	
9 ☐ R experienced issues using **colors**	
22 ☐ Issues using **segmented square spaces**	

Section: Mailing Instructions
Is there anything unclear or confusing that you've noticed in this section?

1 ☐	No
2 ☐	Yes, which parts?

What you'd change:

Cognitive Interview: **Topical Questionnaire (0-5)**
Interviewer: Hand respondent a copy of a questionnaire and a pen. [**READ**] Now I would like you to complete this screening questionnaire. As you go through the questionnaire, I'll also have some questions to ask you about some of the survey items.

Section: Your Child's General Health

Interviewer: *Record START time*	___:___AM/PM
Interviewer: *Record END time*	___:___AM/PM
Once R has completed Section A, please administer these probes.	

Section: General Health/Q1 [QUESTION TEXT]

*[INTERVIEWER: ONLY ASK QUESTIONS ASSIGNED FOR PROBING]

1.-Are there any terms or phrases that **are not clear** to you in this survey question? Which ones and why?	2.-Did you have troubles **remembering** information to answer this question? How?
11 ☐ R experienced difficulties **understanding** meaning of the survey question 12 ☐ R **did not** experience difficulties	1 ☐ R experienced difficulties **remembering** relevant information 2 ☐ R **did not** experience difficulties
3.-Did you have trouble **deciding** on which information to use? Why?	4.-Did you have troubles **selecting** a response category to provide your answer? Why?
11 ☐ R experienced difficulties **deciding** on which info to use 12 ☐ R **did not** experience difficulties	1 ☐ R experienced difficulties **selecting** a response category 2 ☐ R **did not** experience difficulties

5.-Interviewer: Record by observation alone or probe to see if R experienced difficulties with the following aspects

FOR PAPER & WEB	FOR WEB ONLY
36 ☐ R experienced issues locating **instructions** to answer survey item	26 ☐ R experienced issues locating **navigational** arrows (forward /backward)
37 ☐ Issues locating **navigating** the question (following numbering)	27 ☐ R experienced issues using **vertical scroll bar**
38 ☐ Issues following **skip patterns**	13 ☐ R experienced issues using **drop down menu**
39 ☐ Issues using **arrows**	
40 ☐ Issues **locating** response options	
41 ☐ Issues filling out **boxes with blank space**	
42 ☐ Issues seen **boldface text**	
8 ☐ R experienced issues with **font size**	
9 ☐ R experienced issues using **colors**	
25 ☐ Issues using **segmented square spaces**	

End of interview

Interviewer: *Thank the respondent for his/her time and his/her help. Ask if there is anything else R would like to add. To stop the recording.*

These are all the questions I had for you. We sincerely appreciate your time and help. Your answers are very helpful to improve our questionnaire. Is there anything else you would like to add?

Thank you again, and have a good day.