Attachment 4a – Telephone Screening Script

The Public Health Service Act provides us with the authority to do this research (42 United States Code 242k). All information which would permit identification of any individual, a practice, or an establishment will be held confidential, will be used for statistical purposes only by NCHS staff, contractors, and agents only when required and with necessary controls, and will not be disclosed or released to other persons without the consent of the individual or the establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m(d)) and the Confidential Information Protection and Statistical Efficiency Act (PL-107-347).

Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CDC/ATSDR Information Collection Review Office; 1600 Clifton Road NE, MS D-74, Atlanta, GA 30333, ATTN: PRA (0920-0222).

Form Approved OMB #0920-0222; Expiration Date: 07/31/2018

Sample screening script for respondent contact by Collaborating Center for Questionnaire Design and Evaluation Research (CCQDER) Recruiter/CCQDER Staff for

Cognitive Testing of Food for Babies and Mothers' Health Questions on the NHANES B24 Month Questionnaire recruited through newspaper advertisement/flyer

Dial respondent's telephone number [hereafter referred to as *R*] as indicated on CCQDER voice mail system.

Note: Speak only to R. If the number is answered by voice mail, call back at another time.

CCQDER Recruiter/CCQDER Staff: Good morning/afternoon, may I speak to (name)?

If *R* is not available or not at home, say, "Thank you" and try again at another time.

If the person who answered the phone (NOT R) asks, "Who is calling?" or "What's this about?" say, "I am returning their call to me. I'll try to reach them at another time.

If *R* has been successfully contacted, continue...

...Hello, my name is [CCQDER Recruiter/CCQDER Staff's name. I am calling from the National Center for Health Statistics. You may remember that you responded to the advertisement we placed in the [name of newspaper] on [date] or flyer looking for parents or guardians or primary caretakers (aged 18 and over) of babies aged 0-24 months to answer some questions that may be used on a national survey. Is this a safe time to talk? If you are too busy or driving, I can call you back.

Wait for acknowledgment, such as, "This is a safe time to talk."

...In order to determine if you are eligible for our study, I'll need a few minutes of your time to ask some background questions. Answering these questions is completely voluntary. We are required by law to use your information for statistical research only and to keep it confidential. The law prohibits us from giving anyone any information that may identify you without your consent. Is this a good time to ask the questions or should I call back later?

If not a good time to talk, schedule a time to call back.

If good time to talk, continue...

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1.	Where did you see our advertisement/flyer?
2.	How old are you? [If under age 18, go to exit script 1]

take	What is your relationship to the baby that you called about? Are you the mother, faren? Mother Father Guardian Primary care taker	ther, guardian, or primary care
	IF MOTHER, FATHER, OR GUARDIAN: How old is your baby?24 months old, go to exit script 2]	[If do not have a baby aged
	IF PRIMARY CARE TAKER: How old is the baby that you care for?baby aged 0 – 24 months old, go to exit script 2]	[If do not care for a
	F MOTHER, FATHER, OR GUARDIAN: Are you the parent or guardian who is a sical health, and well-being of your [fill] month old? Yes No [Go to exit script 3]	most knowledgeable about the
	IF PRIMARY CARE TAKER: Are you the primary care taker who is most kn health, and well-being of the [fill] month old? Yes No [Go to exit script 3]	owledgeable about the physical
6.	IF MOTHER, FATHER, OR GUARDIAN: Does your baby go to daycare? Yes No	
	IF PRIMARY CARE TAKER: Does the baby go to daycare? Yes No	
	IF MOTHER, FATHER, OR GUARDIAN: Do you or your baby receive benefits infants, and Children program? Yes No	from WIC, that is, the Women,
	IF PRIMARY CARE TAKER: Does the baby or the baby's parent/guardia that is, the Women, Infants, and Children program? Yes No	an receive benefits from WIC,
8.	What is the highest level of school you have completed? Less than High School (No Diploma or GED) High School Diploma or GED Associate Degree Some College Bachelor's Degree Graduate Degree	
9.	Are you Spanish, Hispanic or Latino? Yes No	

10. What race or races do you consider yourself to be? You may indicate more than one race.

White

Black or African American

Asian

American Indian or Alaska Native

Native Hawaiian or Other Pacific Islander

[If the recruitment needs for certain demographic groups have been achieved, go to exit script 4]. Otherwise continue.

Entry Script:

...Based on your answers to the questions so far, we would like you to take part in our study. For this study we'd like you to come here to the National Center for Health Statistics in Hyattsville, Maryland/agreed mutual location. An interviewer will ask you a variety of health and food questions about your baby and [you/the parent or guardian [or primary care taker]. Then the interviewer will ask you to explain what you were thinking as you answered the questions. The interviewer will also ask you about your opinions of the questions. Your answers will help us find out if the survey questions will be easy for other people to answer. Everything you say will be kept private. With your permission, we would like to record your interview. The recording is a record of what we asked and what you said about the questions. Do you give permission to have your interview video recorded? Yes/No. [If no, ask if for permission to audio record]. Do you give permission to have your interview audio recorded? Yes/No. [If no, go to exit script 5. At a minimum audio recording is essential for this project].

Do you have any questions at this point? *Pause to answer questions*. If (not/you have no other questions), then let's get you on the schedule, ok? We will be interviewing (Day, Month/Date) through (Day, Month/Date) from 8 a.m. to 6 p.m. Looking at your schedule, when would you be available to participate? *Schedule*. **[If date/times not available go to exit script 6.]**

A reminder call will be made to you a few days in advance. Should you have any questions or need to change your appointment, please feel free to contact me [name] at [phone number]. Thank you for responding to our ad, and I look forward to seeing you here at (DATE/TIME) *Get respondent to cite date & time if possible.*

Exit script 1: I'm sorry, you have to be 18 years of age or older take part in this study and therefore we won't be able to use you at this time. We appreciate your call and thank you for your interest in our study.

Exit script 2: I'm sorry, you have to be the parent, guardian, or primary care taker of a baby aged 0-24 months old to take part in this study and therefore we won't be able to use you at this time. We appreciate your call and thank you for your interest in our study.

Exit script 3: I'm sorry, you have to be the parent or guardian [or primary care taker] who is most knowledgeable about the physical health, and well-being of your [fill] month old to take part in this study. Therefore, we won't be able to use you at this time. We appreciate your call and thank you for your interest in our study.

Exit script 4: Based upon your answers, it seems that we may already have a number of volunteers with very similar answers to yours. At this point we need to talk with people with some different characteristics. However, if we have cancellations or other slots open up, I may wish to call you back. Would it be okay if I kept your name, telephone number, and the information you provided in response to the eligibility questions until the end of this study? *If yes*, make notation. *If no*, Would it be okay if I added your name, telephone number, age, educational level, and race to our database so that I can contact you about other studies coming up in the future? If yes, add to database. If no: OK, thank you for your time. Your name and any information you gave me will not be added to our database.

Exit script 5: I'm sorry, willingness to be audio recorded is required in order to take part in this study and therefore we won't be able to use you at this time. Would it be okay if I added your name, telephone number, age, educational level, and race to our database so that I can contact you about other studies coming up in the future? If yes, add to database. If no: OK, thank you for your time. Your name and any information you gave me will not be added to our database.

