# Attachment C

Individual Interview Questions (Family Spotlights)

#### **Individual interviews**

ID:
Date:

OMB Control Number: 0925-XXXX Expiration Date: XX/XX/XXXX

Public reporting burden for this collection of information is estimated to average 120 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: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-XXXX). Do not return the completed form to this address.

#### **Individual interviews**

ID:
Date:

### Family Spotlights:

- 1. Did you find the videos easy to understand?
  - a. Probe: If no, which parts were difficult to understand?
- 2. Did you find the videos helpful in learning about clinical trials?
  - a. Probe: If yes, can you give me an example of something that was helpful? If no, why were the stories not helpful?
- 3. Did you enjoy hearing more about youth and their families who have been through a clinical trial?
  - a. Probe: If no, why not?
- 4. Is there a video that you liked the best?
  - a. Probe: Why or why not?
- 5. Is there a video that you liked the least?
  - a. Probe: Why or why not?
- 6. Did you learn anything in the videos that you have not learned before? If so, what was it?
  - a. Probe: Is there anything missing that you think should be added?
- 7. What did you think about the length of the videos?
  - a. Probe: If too long, why?
  - b. Probe: If too short, why?
- 8. Do you have suggestions on how to make the family spotlights more fun or interactive for kids your age?
  - a. Probe: If yes, what?

## **Individual interviews**

			<b>Background Information</b>			
1.	Are you	male or female?				
	Male		Female			
	0		0			
2. Are you of Hispanic, Latino or Spanish origin?						
	No		Yes			
	0		0			
3.	What is	your race?				
		American Indian/Alaska Native		Native Hawaiian or Other Pacific Islander	Asian	
0 0		О	О	0	0	
4. What is your age?						
5. What grade are you in?						

ID: Date: