NICHD MESSAGES AND VISUALS CONCEPTS FOR FOCUS GROUP

AND IDI DISCUSSION GUIDE

**NICHD Maternal Obesity Initiative**

Concept for Focus Testing Messages and Visuals

**Message Structure**

In collaboration with the methodology proposed by Edge, several messages will be tested in different formats during the focus groups for the maternal obesity initiative. PP would like to propose a specific method to testing the visuals and messages. The purpose of this testing is to determine what types of messages: 1) resonate with the target audience (e.g., fact-based, empowering etc.) 2) and elicit a response toward the desired call to action.

In developing the messages, we recommend structuring them around a behavior change theory. The Social Cognitive Theory (SCT) is a well-established framework in affecting change in smoking, physical activity, and underage drinking behaviors.[[1]](#footnote-1) The theory maintains that behavior change is product of personal factors, environmental factors, and the behavior itself working in a reciprocal relationship to influence a behavioral outcome. A key concept of the theory is self-efficacy, described as “competence to perform certain desired tasks or behavior.”[[2]](#footnote-2) According to the SCT, an individual’s self-efficacy is influenced by several personal and interpersonal variables (such as verbal persuasion and or witnessing someone modeling the behavior successfully). The messaging created for focus group testing will be written in such a way to target facilitators of self-efficacy and address the SCT’s core components.

**Messages for Testing**

*Approach during the focus groups*

PP suggests presenting several index cards with messages targeting potential personal, behavioral, and environmental factors potentially influencing the self-efficacy of our target population. Per Edge’s recommendation, focus group participants will be asked to identify messages that captured their attention and caused them to take action (as described in the discussion guide). Taken together, participants will evaluate our messages to determine if they are informative, realistically actionable, and written in a way that would attract them to learn more about the initiative or seek more information.

*Note: These messages are only preliminary and serve as examples for the focus group testing. Initiative messages will be developed after the audience research is complete.*

Attention Getting Messages

* Plus-size women CAN have healthy, happy pregnancies and deliver healthy babies.
* Pregnancy is a great time to focus on your health and taking care of yourself. What will you do to have a healthy pregnancy?
* Knowledge is power. Providers check your weight and BMI to find possible risks during your pregnancy and make a plan to keep you and your baby healthy.
* Your weight may play a role in the outcome of your pregnancy. Stay positive and get proactive. Work with your provider to create a prenatal care plan to help you achieve the best possible pregnancy outcome.
* It’s normal! Your provider needs to monitor your weight and your baby’s growth throughout pregnancy to ensure you stay on track with the recommended weight ranges.
* Having a BMI over 29 does carry higher risks for some serious health conditions. Seek care early from a provider you trust to make a prenatal plan that’s right for you.
* You’re not alone. There are size-friendly providers who know how to care for plus-size pregnant women with compassion and respect.

Calls-to-Action Messages

* Tell your story. If you’re concerned about how your weight will affect your pregnancy, bring your questions and concerns to a provider you trust. Let them know how they can support you.
* One size doesn’t fit all! Ask a provider for *your* recommended weight gain for the best pregnancy outcome.
* The best advocate for your prenatal care is YOU! Ask questions during visits with your provider and work together to address any problems or concerns.
* Reach out to family and friends for support. Whether it’s lending a listening ear, being a walking partner, or handling an item on your to-do list, there’s strength in numbers!

**Visuals**

We will present several photos of pregnant women and pregnancy-related items for focus group participants to view. The photos will include:

* plus-sized pregnant women of varying sizes and ethnicities
* baby bumps
* ultrasounds and other images related to pregnancy
* babies of varying ethnicities
* lifestyle photos (such as women of all sizes walking/exercising, eating healthy meals)

This activity will occur after participants have shared the images they brought as part of the homework assignment. Edge has described the details of this activity in the discussion guide.

1. Glanz, K., Rimer, B. K., & Viswanath, K. (Eds.). (2008). Health behavior and health education: theory, research, and practice. John Wiley & Sons. [↑](#footnote-ref-1)
2. McKenzie, J.F., Neiger, B.L., & Smeltzer, J. L. (2005). Planning, Implementing, & Evaluating Health Promotion Programs. A primer. Pearson Education, Inc. [↑](#footnote-ref-2)