A 90-Minute Focus Group

**Adults Ages 45 and Older**

EVALUATION PROTOCOL

November 23, 2020

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| --- | --- |
| **SESSION OVERVIEW: TOTAL TIME 90 MINUTES** | **STIMULI** |
| Background (<5 minutes)  | -- |
| Participant Introductions (5 minutes) | -- |
| General Attitudes Toward Oral Health and Experiences with Oral Health Care (Including Behavioral Pre-Test) (10-15 minutes) | * Three Poll Questions
 |
| Message and Materials Testing (60 minutes) | * (1) *Brushing and Flossing* (revised brochure)
* (2) *Dry Mouth* (revised brochure)

(3) *Oral Cancer* tri-fold brochure* Three Poll Questions
 |
| Preferred Communication Channels (5 minutes) | * Slide A (Photographs) versus Slide B (Drawings) (PowerPoint Slides)
 |
| Close (Including Behavioral Post-Test) (<5 minutes)  | * One Poll Question
 |

**BACKGROUND [5 Minutes]**

While participants are joining, the moderator will ask them to be sure they have a pen or pencil with them, as well as the unopened mailed envelope/packet. The moderator will also remind participants to have their reading glasses and hearing aids available, if they wear them, and ensure they can see the shared computer screen.

* Welcome and thank you for your participation
* My name / independent researcher / not an employee of the Health Resources and Services Administration (HRSA) or the federal government (the sponsor of this project)
* My role (facilitate discussion and end on time at x:xx a.m./p.m.)
* The purpose of today’s discussion is to:
	+ Discuss your thoughts and feelings about health
	+ Get your feedback on information that HRSA developed for persons like you
	+ Hear your suggestions for how HRSA could best reach you with important health information
* Some guidance for our conversation:
	+ Please talk one at a time.
	+ Please talk in a voice at least as loud as mine.
	+ I need to hear all of your opinions—i.e., everyone should have more or less equal “airtime.”
	+ There are no right or wrong answers—that said, if someone disagrees with what someone else says, please speak up (we are respectful of all opinions and we want to hear all opinions).
	+ This discussion is confidential—first names only / no names will be used in the summary report.
	+ Please do not share any information which could be used to identify someone, such as someone’s full name.
	+ Your participation is voluntary. You are free to decline to answer a question / free to leave at any time without any penalty.
	+ I did not have anything to do with the development of the materials we are going to review—if you have constructive criticism, I will not be offended, and I will not be penalized.
		- Please be honest.
	+ Our time together is limited—please do not be offended if I have to interrupt you to turn to the next question; there is simply a lot to cover, and we have to finish on time.
	+ Please turn your cell phones off or turn the ringtone off.
	+ Project staff are listening to the discussion, but we will be the only ones talking during our discussion.

***Consent to Audio-Record***

* We would like to audio (sound)-record this conversation so that when it comes time to write the summary report, we will have your actual words to ensure accuracy, if needed. However, you will not be identified in the report.
* Although we have our webcams (cameras) on for our live conversation, there will be **no** video-recording (video-archive) made of our conversation.
* Do I have your permission to audio (sound)-record this discussion? [*Dismiss participant if they do not verbally consent.*]

**PARTICIPANT INTRODUCTIONS [5 Minutes]**

Let’s go around our virtual table and when I call your first name, please introduce yourself with your first name only (no last names) and let us know:

* Your city and state.
* One activity you like to do for fun.

From now on, please state your first name (no last names) out loud before making a comment so that the conversation/audio-recording will be easier to follow.

**GENERAL ATTITUDES TOWARD ORAL HEALTH AND EXPERIENCES WITH ORAL HEALTH CARE [10-15 Minutes]**

1. Very briefly (top-of-mind, in just one or two words), what do the words “preventive health care” mean to you? [*PROBE FOR SPECIFICS.*]

Please take a moment to respond to the question that appears on the computer screen.

* 1. **POLL 1: How important is preventive health care to you?**

*Use a scale from 1 to 7, with 1 being “Not at all important” and 7 being “Extremely important.”*

Please open the packet you received from us. Inside is an envelope that says, “DO NOT OPEN UNTIL THE START OF THE FOCUS GROUP.” Please pull out the whole envelope and keep the material in the order that it is in. Do not flip through it. During our discussion, we will look at each piece of material together. Again, please don’t flip ahead.

1. Now look at the top page that has the word “TOP” on it. On this page, please write down the words “oral health” [*spell out O-R-A-L*] and then write down what these words mean to you. [*DISCUSS. PROBE EXTENSIVELY.*]

*Probes might include any of the following:*

* I noticed you included “teeth”—what makes you think of teeth?
* Does “oral health” include any of the following: gums, throat, and bones around the mouth? Are any of these surprising? Why?
	+ What, if any, other parts of the body should be included in the broad “oral health” term? Why?
* What do you think people think of when they hear the term “oral health”? Do you think they know what is included within the term “oral health?” Is there a better way to talk about oral health that might make more sense to people? [*Offer ideas if participants cannot generate examples on their own, such as “mouth and teeth health.”*]

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 2 (PRE-TEST): How likely are you to go to the dentist in the next 6 months?**

*Use a scale from 1 to 7, with 1 being “Not at all likely” and 7 being “Extremely likely.”*

* 1. Why did you rate this question in this manner? Please talk about the extent to which your rating relates to the COVID-19/coronavirus pandemic. [Listen for/probe: If a number is low, is the number low because of the pandemic or primarily other reasons?]
1. How often do you go to the dentist for a checkup (that might include a cleaning)? [*PROBE EXACT TIME INTERVALS AND IF LESS THAN ONCE A YEAR (EVERY 12 MONTHS).*]
	1. What, if any, recommendation have you received from a health care provider about how often you should go to the dentist for a check-up?
	2. Do you follow this recommendation?
		1. [If no] What are some of the reasons you do not follow this recommended schedule?
		2. [If yes] What makes it easy for you to follow this recommended schedule?
	3. How often do you personally think you *should* you go to the dentist?
2. Can someone tell us what a “cavity” is? What do you do when you have pain in your mouth, such as noticing you might have a cavity in any of your teeth? [*PROBE: SEEK TREATMENT OR WAIT AND REASONS FOR WAITING.*]

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 3:** **How important is oral health to you?**

*Use a scale from 1 to 7, with 1 being “Not at all important” and 7 being “Extremely important.”*

[*SHOW POLL RESULTS. DISCUSS. PROBE FOR REASONS.*]

* 1. How does “good” or “bad” oral health affect your entire body as well as your mouth?

**MESSAGE AND MATERIALS TESTING [60 Minutes Total]**

**Material 1: *Brushing and Flossing* (20 Minutes Subtotal)**

Note: The moderator will display the below instructions on the shared screen for the participants to refer to as needed. The moderator and note-taker will closely watch participants’ handling of the material—their body language, facial expressions, etc. This may provide clues or insights into ease or difficulty in comprehension. Also, the moderator will display on the shared screen the material that is being referenced at the appropriate time during the focus group discussion.

* **Circle** anything that:
	+ Is important
	+ Is new information
* **Cross out** anything with an “X” that:
	+ You think unnecessary
	+ Is something you disagree with
* Put a **question mark** next to anything that:
	+ You have questions about
	+ You do not understand



Please flip to the brochure in your packet labeled *Brushing and Flossing*. Please read through this brochure by yourself during the next 3 minutes. As you read through it, please **circle** anything that is important or new information. **Cross out anything with an “X”** that does not need to be included in the material, or that you may disagree with. If there are things you have questions about or do not understand, put a **question mark** next to it.

1. What information or messages did you get from this brochure?
2. Tell me in your own words why brushing and flossing are important. [*LISTEN FOR: REMOVES PLAQUE, PREVENTS TOOTH DECAY AND GUM DISEASE.*]
3. What did you CIRCLE on this brochure? (What was NEW or IMPORTANT to you?)
4. What did you CROSS OUT? (What was NOT NEEDED? What did you NOT AGREE with?)
5. What did you put a QUESTION MARK next to? (What did you NOT UNDERSTAND or have QUESTIONS about?)
6. Have you used any of the tips or techniques listed in this brochure?
7. Let’s look at page two, the “Flossing Step-By-Step” section. In your own words and using your hands and fingers, tell me how you would floss your teeth.
	1. How helpful are the images next to the step-by-step list?
	2. What would you change about these images to make them more helpful?
8. Let’s now look at page three, “Flossing Tools.”
	1. What did you learn from this section of the brochure?
	2. How helpful are the images next to these tools?
	3. What would you change about these images to make them more helpful?
9. Let’s now look at page four, “Brushing Tips.”
	1. How realistic are these tips? In other words, how likely are you to take these steps? For example, do you or would you brush your tongue?
	2. How motivational are these steps? After reviewing these steps, will you change the way you brush your teeth and if so, how?
	3. What questions do you have after reading these tips? For example, would it be helpful if this information included the exact angle recommended when brushing “toward the gumline” (e.g., “45 degree angle”)? Would it be helpful if this information included the number of total minutes recommended to do each of these steps?
10. What would you change about the design of this brochure to make it more likely that someone would pick it up and read it? [*PROBE FOR “LOOK AND FEEL” (COLORS, LAYOUT, FONT, IMAGES).*]
11. Is there anything else that you would change about this brochure to make it feel more personal to you, like the brochure is speaking to you directly and understands you?
12. How likely would you be to give this brochure to someone you know? Why?

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 4**: **How easy or difficult is the brochure, *Brushing and Flossing*, to understand?**

*Use a scale from 1 to 7, with 1 being “Very difficult” and 7 being “Very easy.”*

[*SHOW RESULTS. DISCUSS.*]

**Material 2: *Dry Mouth* (20 Minutes Subtotal)**

Please flip to the brochure in your packet labeled *Dry Mouth*. Once again, please read through this brochure on your own—I will give you 3 minutes to review. As you are reading through it, please **circle** anything that is important or new information. **Cross out anything with an “X”** that does not need to be included in the material, or that you may disagree with. If there are things you have questions about or do not understand, put a **question mark** next to it. [*Moderator will display the O, X, ? screen instructions.*]

1. What does “dry mouth” mean to you? [PROBE FOR DETAILS: What causes dry mouth?]
2. What information or messages did you get from the brochure?
3. What did you CIRCLE on this brochure? (What was NEW or IMPORTANT to you? What surprised you?)
4. What did you CROSS OUT? (What was NOT NEEDED? What did you NOT AGREE with?)
5. What did you put a QUESTION MARK next to? (What did you NOT UNDERSTAND or have QUESTIONS about?) For items that are confusing, what recommendations do you have for making them clearer?
6. Do you experience dry mouth? How does dry mouth affect your day-to-day lives?
7. Let’s look at page one, the “What Causes Dry Mouth?” section. What surprised you about this section?
	1. [*IF NEEDED*] What else do you want to know about dry mouth now that you know this?
8. Let’s look at page two, the “You may also do the following” section. How helpful are these suggestions for preventing dry mouth?
	1. Are there any suggestions you would add to this list based on your own experiences?
9. What would you change about the design of this brochure to make it more likely that someone would pick it up and read it? [*PROBE FOR “LOOK AND FEEL” (COLORS, LAYOUT, FONT, IMAGES).*]
10. What else would you change to make this brochure something that feels personal to you, like the brochure is talking to you personally?
11. How likely would you be to give this brochure to someone you know? Why?

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 5**: **How easy or difficult is the brochure, *Dry Mouth*, to understand?**

*Use a scale from 1 to 7, with 1 being “Very difficult” and 7 being “Very easy.”*

[*SHOW RESULTS. DISCUSS.*]

**Material 3: *Oral Cancer* (20 Minutes Subtotal)**

Let’s look at a final material, a brochure labeled *Oral Cancer*. Once again, please review the material on your own—I will give you 3 minutes to review. Again, as you are reading through it, I would like you to **circle** anything that is important or new information. **Cross out anything with an “X”** that is unnecessary to include in the material, or something you may disagree with. If there are things you have questions about or do not understand, put a **question mark** next to it.

1. What information or messages did you get from this brochure?
2. What information did you CIRCLE on this brochure? (What was NEW or IMPORTANT to you? What surprised you?)
3. What information did you CROSS OUT? (What was NOT NEEDED? What did you NOT AGREE with?)
4. What did you put a QUESTION MARK next to? (What did you NOT UNDERSTAND or have QUESTIONS about?) For items that are confusing, what recommendations do you have for making them clearer?
5. When you read that, “Oral cancer accounts for three percent of all new cancers diagnosed annually in the United States,” does this percentage seem large or small to you? Why?
6. What does the brochure mean when it says, “Risk increases with age”?
7. Let’s look at the section, “Possible Signs & Symptoms.” How helpful are these tips?
8. What would you change about the design of this brochure to make it more likely that someone would pick it up and read it? [*PROBE FOR “LOOK AND FEEL” (COLORS, LAYOUT, FONT, ADDING IMAGES).*]
9. What else would you change to make this brochure something that feels personal to you, like the brochure is talking to you personally?
10. How likely would you be to give this brochure to someone you know? Why?
11. **POLL 6**: **How easy or difficult is the brochure, *Oral Cancer*, to understand?**

*Use a scale from 1 to 7, with 1 being “Very difficult” and 7 being “Very easy.”*

[*SHOW RESULTS. DISCUSS.*]

**PREFERRED COMMUNICATION CHANNELS [<5 Minutes]**

Now I would like to ask you about your preferences looking for oral health information.

1. How many of you noticed the sponsor(s) of the materials we reviewed? Did you recognize any of them? If so, what do you know about them? How likely would you be to visit the website or call the phone number listed on the brochures?
2. How much would you trust information about oral health on social media?
	1. [*IF TRUST SOCIAL MEDIA*] Where would you find trustworthy information about oral health on social media? [*PROBE: GET SPECIFICS. WHICH PLATFORMS? FACEBOOK, TWITTER, SNAPCHAT, INSTAGRAM, LINKEDIN, ETC.*]
3. How do you most like to receive oral health information? (How do you like oral health information to be "packaged"?) [*Offer examples like brochure, poster, website, infographic, graphic novel/fotonovela, video, GIF, in-person conversation [with whom: healthcare provider, trusted family member?], podcast, social media post.*]
	1. Please look at the shared screen. You’ll see two versions of the same brochure page. The words are the same but they have different pictures. Slide A uses photographs while Slide B uses drawings. If you saw these in a dentist’s office, which would you be more likely to pick up? Why?

**OBSERVERS’ QUESTIONS AND CLOSE [<5 Minutes]**

Now I’d like to ask the observers if they have any additional questions or need clarification on any of the issues we’ve discussed. [*Moderator will review any questions from observers via a private communication channel and pose those to the participants.*]

Please take a moment to respond to this last question that appears on the computer screen.

1. **POLL 7 (POST-TEST):** **How likely are you to visit the dentist in the next 6 months?**

*Use a scale from 1 to 7, with 1 being “Not at all likely” and 7 being “Extremely likely.”*

a. Why did you rate this question in this manner? Again, please talk about the extent to which your rating relates to the COVID-19/coronavirus pandemic. [Listen for/probe: If a number is low, is the number low because of the pandemic or primarily other reasons?]

NOTE: After the participants respond to this question, the moderator will compare the responses to the PRE-question with the responses to the POST-question and ask: Why do you think your responses changed from X to Y to the same question just about 90 minutes ago?

[*MODERATOR THANKS PARTICIPANTS AND CLOSES THE DISCUSSION.*]

OMB No. 0915-0212

Exp. Date 07/31/2021

**Public Burden Statement:** 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. The OMB control number for this project is 0915-0212 and expires 07/31/2021. This Information Collections Request is voluntary. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including the time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 18N136B, Rockville, Maryland, 20857.

A 90-Minute Focus Group

**Children and Families**

EVALUATION PROTOCOL

November 24, 2020

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| --- | --- |
| **SESSION OVERVIEW: TOTAL TIME 90 MINUTES** | **STIMULI** |
| Background (5 minutes)  | -- |
| Participant Introductions (5 minutes) | -- |
| General Attitudes Toward Oral Health and Experiences with Oral Health Care (Including Behavioral Pre-Test) (10 minutes) | * Three Poll Questions
 |
| Message and Materials Testing (55 minutes) | * Two videos: (1) *Brushing Toddlers’ Teeth* (2) *Lift the Lip to Prevent Decay*
* (3) *Taking Care of Your Baby’s Oral Health* Brochure
* (4) *Brushing Your Child’s Teeth* Brochure
* Four Poll Questions
 |
| Preferred Communication Channels (5–10 minutes) | * Slide A (Photographs) versus Slide B (Drawings) (PowerPoint Slides)
 |
| Close (Including Behavioral Post-Test) (5 minutes)  | * One Poll Question
 |

**BACKGROUND [5 Minutes]**

While participants are joining, the moderator will ask them to be sure they have a pen or pencil with them, as well as the unopened mailed envelope/packet. The moderator will also remind participants to have their reading glasses and hearing aids available, if they wear them, and ensure they can see the shared computer screen.

* Welcome and thank you for your participation
* My name / independent researcher / not an employee of the Health Resources and Services Administration (HRSA) or the federal government (the sponsor of this project)
* My role (facilitate discussion and end on time at x:xx a.m./p.m.)
* The purpose of today’s discussion is to:
	+ Discuss your thoughts and feelings about health
	+ Get your feedback on information that HRSA developed for persons like you
	+ Hear your suggestions for how HRSA could best reach you with important health information
* Some guidance for our conversation:
	+ Please talk one at a time.
	+ Please talk in a voice at least as loud as mine.
	+ I need to hear all of your opinions—i.e., everyone should have more or less equal “airtime.”
	+ There are no right or wrong answers—that said, if someone disagrees with what someone else says, please speak up (we are respectful of all opinions and we want to hear all opinions).
	+ This discussion is confidential—first names only / no names will be used in the summary report.
	+ Please do not share any information which could be used to identify someone, such as someone’s full name.
	+ Your participation is voluntary. You are free to decline to answer a question / free to leave at any time without any penalty.
	+ I did not have anything to do with the development of the material we are going to review—if you have constructive criticism, I will not be offended, and I will not be penalized.
		- Please be honest.
	+ Our time together is limited—please do not be offended if I have to interrupt you to turn to the next question; there is simply a lot to cover, and we have to finish on time.
	+ Please turn your cell phones off or turn the ringtone off.
	+ Project staff are listening to the discussion, but we will be the only ones talking during our discussion.

***Consent to Audio-Record***

* We would like to audio (sound)-record this conversation so that when it comes time to write the summary report, we will have your actual words to ensure accuracy, if needed. However, you will not be identified in the report.
* Although we have our webcams (cameras) on for our live conversation, there will be **no** video-recording (video-archive) made of our conversation.
* Do I have your permission to audio (sound)-record this discussion? [*Dismiss participant if they do not verbally consent.*]

**PARTICIPANT INTRODUCTIONS [5 Minutes]**

Let’s go around our virtual table and when I call your first name, please introduce yourself with your first name only (no last names) and let us know:

* + Your city and state.
	+ How old your child(ren) is/are—the one(s) between 6 months and 3½ years only.

From now on, please state your first name (no last names) out loud before making a comment so that the conversation/audio-recording will be easier to follow.

**GENERAL ATTITUDES TOWARD ORAL HEALTH AND EXPERIENCES WITH ORAL HEALTH CARE [10 Minutes]**

Your perspectives as persons with children between 6 months and 3½ years are critically important to what we would like to explore during our discussion today.

1. Very briefly (top-of-mind, in just one or two words), what do the words “preventive health care” for your child mean to you? (As a reminder, while you may have other children, we are focusing our entire conversation today on your children 6 months to 3½ years.) [Note: There is \*no\* need for every participant to respond to this question.]

Please take a moment to respond to the question that appears on the computer screen.

* 1. **POLL 1:** **How important is preventive health care for your child 6 months to 3½ years?**

*Use a scale from 1 to 7, with 1 being “Not at all important” and 7 being “Extremely important.”*

Explain your rating response. [LISTEN FOR: WHETHER *ORAL* HEALTH CARE ARISES ORGANICALLY FROM THE PARTICIPANTS THEMSELVES.] [Note: If “oral health” is mentioned, take note of it for conversation later, not now.]

Please open the packet you received from us. Inside is an envelope that says, “DO NOT OPEN UNTIL THE START OF THE FOCUS GROUP.” Please pull out the whole envelope and keep the material in the order that it is in. Do not flip through it. During our discussion, we will look at each piece of material together. Again, please don’t flip ahead.

1. Now look at the top page that has the word “TOP” on it. On this page, please write down the words “oral health” [*spell out O-R-A-L*] and then write down what these words mean to you. [*DISCUSS. PROBE EXTENSIVELY.*]
	1. [IF “oral health” was mentioned during the POLL 1 conversation: For those of you who mentioned “oral health” during our conversation after the poll question, why did you say “oral health” when discussing “preventive health”?

*Probes might include any of the following:*

* I noticed you included “teeth”—what makes you think of teeth?
* Does “oral health” include any of the following: gums, throat, and bones around the mouth? Are any of these surprising? Why?
	+ What, if any, other parts of the body should be included in the broad “oral health” term? Why?
* What do you think people think of when they hear the term “oral health”? Do you think they know what is included within the term “oral health?” Is there a better way to talk about oral health that might make more sense to people? [*Offer ideas if participants cannot generate examples on their own, such as “mouth and teeth health.”*]

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 2 (PRE-TEST): How likely are you to take your child of 6 months to 3½ years to visit the dentist in the next 6 months?**

*Use a scale from 1 to 7, with 1 being “Not at all likely” and 7 being “Extremely likely.”*

* 1. Why did you rate this question in this manner? Please talk about the extent to which your rating relates to the COVID-19/coronavirus pandemic. [Listen for/probe: If a number is low, is the number low because of the pandemic or primarily other reasons?]
	2. At what age has a health care professional recommended that you take your child to the dentist for the *very first* visit (i.e., for the *first time*)?
	3. What recommendation has a health care professional given you about *how often* to take your child(ren) after that very first visit (ever, in the child’s life)? What, if any, advice have you received about your child receiving *regular* check-ups?
	4. What is the type of health care setting (source of health care professional) that your family accesses for care related to this type of guidance?
1. How often do you take your child(ren) 6 months to 3½ years to the dentist for a checkup (that might include a cleaning)? [*PROBE EXACT TIME INTERVALS AND IF LESS THAN ONCE A YEAR (EVERY 12 MONTHS).*]
	1. What, if any, recommendation have you received from a health care provider about how often to take your child to the dentist for a check-up?
	2. Do you follow this recommendation? Why or why not?
	3. How often do you think very young children *should* go to a dentist?

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 3 (PRE-TEST): How important is it to you to brush your child’s teeth every day?**

(Reminder: Focus your response to this question on your children 6 months to 3½ years.)

*Use a scale from 1 to 7, with 1 being “Not at all important” and 7 being “Extremely important.”* [*SHOW RESULTS.*] Explain your rating response.

**MESSAGE AND MATERIALS TESTING [55 Minutes Total]**

Note: The moderator will gather participant feedback on two videos and two materials and will spend approximately 15 minutes on each material. The moderator will play each video via the shared computer screen for participants to see and hear.

[**Video 1: Brushing Toddlers' Teeth**](https://www.youtube.com/watch?v=eW2SlJenJNg) **[~15 Minutes Subtotal]**

We are now going to watch a short 2-minute video called *Brushing Toddlers’ Teeth*.

While we are watching the video together, please use a stuffed animal, doll, or pillow to act out what you are seeing in the video, while it is happening. [Note: participants will have been invited to consider bringing one of these items to the focus group during recruitment, prior to the focus group.]

1. [After the video ends] What did you think about how fast or how slow the video is? (Did it go too fast or too slow or was the speed just about right?)
2. What do you think of the length of the video? (Is the video too long, too short, or just about right?) What would be an ideal length for the video?
3. If you had watched this video on your own, how likely would you be to watch it again? Why?
4. What did you learn about the best positions for a toddler while brushing? Again, please feel free to act out one of the recommended positions using the stuffed animal / doll / pillow for this role-playing purpose. Please let me know if you would like to watch the video a second time.

[Note: If any participant requests to watch the video again, show the video a maximum of two times.]

[*LISTEN/WATCH FOR:* (1) sitting down on a chair and cradling the child in your arm; (2) standing behind child; (3) standing in front of child, looking at the child; and (4) sitting on the floor and having child lay on your lap.]

* 1. What did the video say about *how* to brush a toddler’s teeth? Feel free to use your pen or pencil as a “pretend” toothbrush and show me how you should brush your child(ren)’s teeth. [*LISTEN/WATCH FOR: SMALL CIRCULAR MOTIONS, ORDER.*]
	2. What did the video say about *when* to start using toothpaste *with fluoride*?
		1. *How much* toothpaste should you use? [*LISTEN FOR: RICE KERNAL SIZE (SMEAR) FOR UNDER AGE 3 AND PEA SIZE BEGINNING AT AGE 3.*]
1. What did you like about the video? [*PROBE FOR: ACTORS (HEALTH EDUCATOR/PARENT OR GUARDIAN/CHILD, RACE/ETHNIC/AGE REPRESENTATION), VISUALS, BACKGROUND MUSIC, EDUCATIONAL VALUE.*]
2. What did you not like about the video? Why?
3. What questions do you have after watching the video? What else would you like to have included in the video?

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 4 (POST-TEST): How important is it to you to brush your child’s teeth every day?**

[Moderator to remind participants: Please remember to focus your response to this question on your children 6 months to 3½ years.]

*Use a scale from 1 to 7, with 1 being “Not at all important” and 7 being “Extremely important.”* [*SHOW RESULTS.*] Explain your rating response.

[**Video 2: Lift the Lip to Prevent Decay**](https://www.youtube.com/watch?v=80DDOcsZOIc) **[~15 Minutes Subtotal]**

Now we are going to watch another short 2-minute video called *Lift the Lip* *to Prevent Decay*.

While we are watching the video together, again, please use a stuffed animal, doll, or pillow to act out what you are seeing in the video, while it is happening.

1. [After the video ends] What did you think about how fast or how slow this video is? (Did it go too fast or too slow or was the speed just about right?)
2. What do you think of the length of this video? (Is the video too long, too short, or just about right?) What would be an ideal length for this video?
3. If you had watched this video on your own, how likely would you be to watch it again? Why?
4. In your own words, please tell me what tooth decay is?
5. What can you do to find out if your child 6 months to 3½ years has tooth decay? Again, please feel free to act this out using the stuffed animal / doll / pillow. Please let me know if you would like to watch the video a second time. [Note: If any participant requests to watch the video again, show the video a maximum of two times.] [*LISTEN/WATCH FOR: LIFT CHILD(REN)’S LIP.*]
6. [*PROBE IF NOT MENTIONED*] What did you learn about *where* tooth decay begins? [*LISTEN FOR: GUM LINE.*]
7. [*PROBE IF NOT MENTIONED*] What did the video say about *how often* to do the ‘lift the lip’ check? [*LISTEN FOR: ONCE A MONTH.*]
8. [*PROBE IF NOT MENTIONED*] What types of things are you looking for when you lift the lip? [*LISTEN FOR: DISCOLORATION, DECAY.*]
9. [*PROBE IF NOT MENTIONED*] What should a health care professional recommend that you do if you notice discoloration or decay in your child’s teeth? [*LISTEN FOR: SEE ORAL HEALTH CARE PROVIDER.*]
10. What did you like about the video? [*PROBE FOR: ACTORS (HEALTH EDUCATOR/PARENT OR GUARDIAN/CHILD, RACE/ETHNIC/AGE REPRESENTATION), VISUALS, BACKGROUND MUSIC, EDUCATIONAL VALUE.*]
11. What did you not like about the video? Why?
12. What questions do you have after watching the video? What else would you like to have included in the video?

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 5: How likely are you to try any of the advice in the *Lift the Lip to Prevent Decay* video?**

*Use a scale from 1 to 7, with 1 being “Not at all likely” and 7 being “Extremely likely.”*[*SHOW RESULTS. DISCUSS.*] What specifically, of the tips the video shared, are you going to try in the next month?

**Print Material 1: *Healthy Habits for Happy Smiles: Taking Care of Your Baby’s Oral Health* (~10–15 Minutes Subtotal)**

Note: The moderator will display the below instructions on the shared screen for the participants to refer to as needed. The moderator and note-taker will closely watch participants’ handling of the material—their body language, facial expressions, etc. This may provide clues or insights into ease or difficulty in comprehension. Also, the moderator will display on the shared screen the material that is being referenced at the appropriate time during the focus group discussion.



Please flip to the next item in your package. It is a brochure with the title, *Healthy Habits for Happy Smiles: Taking Care of Your Baby’s Oral Health*. Please read this brochure during the next 3 minutes. As you read through it, please **circle** anything that is important or new information. **Cross out anything with an “X”** that does not need to be included in the material, or that you may disagree with. If there are things you have questions about or do not understand, put a **question mark** next to it.

1. What information or messages did you get from this brochure?
2. Tell me, in your own words, why keeping your baby’s teeth and mouth healthy is important.
3. How helpful are the tips for keeping your baby’s teeth and mouth healthy?
4. What is the image of the toothbrush on page two with the caption, “Use a smear of fluoride toothpaste,” trying to show you? [*LISTEN FOR: RECOMMENDED TOOTHPASTE AMOUNT FOR A BABY.*] How helpful is it in letting you know how much toothpaste is recommended for a baby? Why?
5. What did you CIRCLE on this brochure? (What was NEW or IMPORTANT to you? What surprised you?)
6. What did you CROSS OUT? (What was NOT NEEDED? What did you NOT AGREE with?)
7. What did you put a QUESTION MARK next to? (What did you NOT UNDERSTAND or have QUESTIONS about?) For items that are confusing, what recommendations do you have for making them clearer?
8. What do you still want to know after reading this brochure? What is missing?
9. What would you change about the design of this brochure to make it more likely that someone would pick it up and read it? [*PROBE FOR: CULTURAL APPROPRIATENESS (E.G., RACIAL/ETHNIC AND AGE REPRESENTATION), LIKES AND DISLIKES REGARDING SIZE OF BROCHURE, LENGTH, COLORS, LAYOUT, FONT TYPE/SIZE.*]

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 6**: **How easy or difficult to understand is the brochure, *Healthy Habits for Happy Smiles: Taking Care of Your Baby’s Oral Health*?**

*Use a scale from 1 to 7, with 1 being “Very difficult” and 7 being “Very easy.”*[*SHOW RESULTS.*]Explain your rating response.

**Print Material 2: *Healthy Habits for Happy Smiles: Brushing Your Child’s Teeth* (~10–15 Minutes Subtotal)**

Please flip to the brochure in your packet labeled *Healthy Habits for Happy Smiles: Brushing Your Child’s Teeth*. Once again, please read through this brochure on your own—I will give you 3 minutes to review. As you are reading through it, please **circle** anything that is important or new information. **Cross out anything with an “X”** that does not need to be included in the material, or that you may disagree with. If there are things you have questions about or do not understand, put a **question mark** next to it. [*Moderator will display the O, X, ? screen instructions.*]

1. What information or messages did you get from this brochure?
2. What is one tip you learned from this brochure on how to brush your child’s teeth?
3. What are the images of the toothbrushes on page 2 trying to show you? [*LISTEN FOR: COMPARISON OF RECOMMENDED TOOTHPASTE AMOUNTS. Captions: “Use a smear for children under age 3,” and “Use a pea-size amount for children 3 to 6.”*] How helpful is this information? Why?
4. What did you CIRCLE on this brochure? (What was NEW or IMPORTANT to you? What surprised you?)
5. What did you CROSS OUT? (What was NOT NEEDED? What did you NOT AGREE with?)
6. What did you put a QUESTION MARK next to? (What did you NOT UNDERSTAND or have QUESTIONS about?) For items that are confusing, what recommendations do you have for making them clearer?
7. What do you still want to know after reading this brochure? What is missing?
8. What would you change about the design of this brochure to make it more likely that someone would pick it up and read it? [*PROBE FOR: CULTURAL APPROPRIATENESS (E.G., RACIAL/ETHNIC AND AGE REPRESENTATION), LIKES AND DISLIKES REGARDING SIZE OF BROCHURE, LENGTH, COLORS, LAYOUT, FONT TYPE/SIZE.*]

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 7: How easy or difficult to understand is the brochure, *Healthy Habits for Happy Smiles: Brushing Your Child’s Teeth*?**

*Use a scale from 1 to 7, with 1 being “Very difficult” and 7 being “Very easy.”*[*SHOW RESULTS.*]Explain your rating response.

**PREFERRED COMMUNICATION CHANNELS [5–10 Minutes]**

Now I would like to ask you about your preferences looking for oral health information.

1. How many of you noticed the sponsor(s) of the materials we reviewed? Did you recognize any of them? If so, what do you know about them?
2. How do you most like to receive oral health information? (How do you like oral health information to be "packaged"?) [*Offer examples like brochure, poster, website, infographic, graphic novel/fotonovela, video, GIF, in-person conversation [with whom: healthcare provider, trusted family member, parents of other young children?], podcast, social media post.*]
	1. Please look at the shared screen. You’ll see two versions of the same brochure page. The words are the same but they have different pictures. Slide A uses photographs while Slide B uses drawings. If you saw these in a dentist’s office, which would you be more likely to pick up? Why?

**OBSERVERS’ QUESTIONS AND CLOSE [<5 Minutes]**

Now I’d like to ask the observers if they have any additional questions or need clarification on any of the issues we’ve discussed. *[Moderator will review any questions from observers via a private communication channel and pose those to the participants.]*

Please take a moment to respond to the last question that appears on the computer screen.

1. **POLL 8 (POST-TEST):** **How likely are you to take your child 6 months to 3½ years to visit the dentist in the next 6 months?**

*Use a scale from 1 to 7, with 1 being “Not at all likely” and 7 being “Very likely.”*

44a. Why did you rate this question in this manner? Again, please talk about the extent to which your rating relates to the COVID-19/coronavirus pandemic. [Listen for/probe: If a number is low, is the number low because of the pandemic or primarily other reasons?]

NOTE: After the participants respond to this question, the moderator will compare the responses to the PRE-question with the response to the POST-question and ask: Why do you think your responses changed from X to Y to the same question just about 90 minutes ago?

[*MODERATOR THANKS PARTICIPANTS AND CLOSES THE DISCUSSION.*]

OMB No. 0915-0212

 Exp. Date 07/31/2021

**Public Burden Statement:** 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. The OMB control number for this project is 0915-0212 and expires 07/31/2021. This Information Collections Request is voluntary. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including the time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 18N136B, Rockville, Maryland, 20857.

A 90-Minute Focus Group

**People with HIV**

EVALUATION PROTOCOL

November 23, 2020

|  |  |
| --- | --- |
| **SESSION OVERVIEW: TOTAL TIME 90 MINUTES** | **STIMULI** |
| Background (<5 minutes)  | -- |
| Participant Introductions (5 minutes) | -- |
| General Attitudes Toward Oral Health and Experiences with Oral Health Care (Including Behavioral Pre-Test) (10-15 minutes) | * Three Poll Questions
 |
| Message and Materials Testing (60 minutes) | * (1) *Oral Health: Tips for People Living with HIV* Trifold Brochure
* (2) *Dry Mouth* (revised brochure)
* (3) *Brushing and Flossing* (revised brochure)
* Three Poll Questions
 |
| Preferred Communication Channels (5–10 minutes) | * Slide A (Photographs) versus Slide B (Drawings) (PowerPoint Slide)
 |
| Close (Including Behavioral Post-Test) (<5 minutes)  | * One Poll Question
 |

**BACKGROUND [5 Minutes]**

While participants are joining, the moderator will ask them to be sure they have a pen/pencil with them, as well as the unopened mailed envelope/packet. The moderator will also remind participants to have their reading glasses and hearing aids available, if they wear them, and ensure they can see the shared computer screen.

* Welcome and thank you for your participation
* My name / independent researcher / not an employee of the Health Resources and Services Administration (HRSA) or the federal government (the sponsor of this project)
* My role (facilitate discussion and end on time at x:xx a.m./p.m.)
* The purpose of today’s discussion is to:
	+ Discuss your thoughts and feelings about health
	+ Get your feedback on information that HRSA developed
	+ Hear your suggestions for how HRSA could best reach you with important health information
* Some guidance for our conversation:
	+ Please talk one at a time.
	+ Please talk in a voice at least as loud as mine.
	+ I need to hear all of your opinions—i.e., everyone should have more or less equal “airtime.”
	+ There are no right or wrong answers—that said, if someone disagrees with what someone else says, please speak up (we are respectful of all opinions and we want to hear all opinions).
	+ This discussion is confidential—first names only / no names will be used in the summary report.
	+ Please do not share any information which could be used to identify someone, such as someone’s full name.
	+ Your participation is voluntary. You are free to decline to answer a question / free to leave at any time without any penalty.
	+ I did not have anything to do with the development of the materials we are going to review—if you have constructive criticism, I will not be offended, and I will not be penalized.
		- Please be honest.
	+ Our time together is limited—please do not be offended if I have to interrupt you to turn to the next question; there is simply a lot to cover, and we have to finish on time.
	+ Please turn your cell phones off or turn the ringtone off.
	+ Project staff are listening to the discussion, but we will be the only ones talking during our discussion.

***Consent to Audio-Record***

* We would like to audio (sound)-record this conversation so that when it comes time to write the summary report, we will have your actual words to ensure accuracy, if needed. However, you will not be identified in the report.
* Although we have our webcams (cameras) on for our live conversation, there will be **no** video-recording (video-archive) made of our conversation.
* Do I have your permission to audio (sound)-record this discussion? [*Dismiss participant if they do not verbally consent.*]

**PARTICIPANT INTRODUCTIONS [5 Minutes]**

Let’s go around our virtual table and when I call your first name, please introduce yourself with your first name only (no last names) and let us know:

* Your city and state.
* One activity you like to do for fun.

From now on, please state your first name (no last names) out loud before making a comment so that the conversation/audio-recording will be easier to follow.

**GENERAL ATTITUDES TOWARD ORAL HEALTH AND EXPERIENCES WITH ORAL HEALTH CARE [15 Minutes]**

Today, we are seeking to learn from you, as persons with HIV, about the health topics of our discussion.

1. Very briefly (top-of-mind, in just one or two words), what do the words “preventive health care” mean to you?

Please take a moment to respond to the question that appears on the computer screen.

* 1. **POLL 1**: **How important is preventive health care to you?**

*Use a scale from 1 to 7, with 1 being “Not at all important” and 7 being “Extremely important.”*

[*PROBE*] How does your rating response apply specifically to your HIV diagnosis? [*LISTEN FOR WHETHER ORAL HEALTH CARE ARISES ORGANICALLY FROM THE PARTICIPANTS THEMSELVES.*]

Please open the packet you received from us. Inside is an envelope that says, “DO NOT OPEN UNTIL THE START OF THE FOCUS GROUP.” Please pull out the whole envelope and keep the material in the order that it is in. Do not flip through it. During our discussion, we will look at each piece of material together. Again, please don’t flip ahead.

1. Now look at the top page that has the word “TOP” on it, please write down the words “oral health” [*spell out O-R-A-L*] and then write down what these words mean to you. [*DISCUSS. PROBE EXTENSIVELY.*]

*Probes might include any of the following:*

* I noticed you included “teeth”—what makes you think of teeth?
* Does “oral health” include any of the following: gums, throat, and bones around the mouth? Are any of these surprising? Why?
	+ What, if any, other parts of the body should be included in the broad “oral health” term? Why?
* What do you think people think of when they hear the term “oral health”? Do you think they know what is included within the term “oral health?” Is there a better way to talk about oral health that might make more sense to people? [*Offer ideas if participants cannot generate examples on their own, such as “mouth and teeth health.”*]

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 2 (PRE-TEST):** **How likely are you to visit the dentist for a check-up in the next 6 months?**

*Use a scale from 1 to 7, with 1 being “Not at all likely” and 7 being “Extremely likely.”*

* 1. Why did you rate this question in this manner? Please talk about the extent to which your rating relates to the COVID-19/coronavirus pandemic. [Listen for/probe: If a number is low, is the number low because of the pandemic or primarily other reasons?]
1. How often do you go to the dentist for a checkup (that might include a cleaning)? [*PROBE EXACT TIME INTERVALS AND IF LESS THAN ONCE A YEAR (EVERY 12 MONTHS).*]
	1. What, if any, recommendation have you received from a health care provider about how often you should go to the dentist for a check-up?
	2. Do you follow this recommendation?
		1. [If no] What are some of the reasons you do not follow this recommended schedule?
		2. [If yes] What makes it easy for you to follow this recommended schedule?
	3. How often do you personally think you *should* you go to the dentist?
2. Can someone tell us what a “cavity” is? What do you do when you have pain in your mouth, such as noticing you might have a cavity in any of your teeth? [*PROBE: SEEK TREATMENT OR WAIT AND REASONS FOR WAITING.*]

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 3:** **How important is oral health to you?**

*Use a scale from 1 to 7, with 1 being “Not at all important” and 7 being “Extremely important.”*

[*SHOW POLL RESULTS. DISCUSS. PROBE FOR REASONS.*]

* 1. How does your rating relate to your HIV diagnosis?
	2. Has oral health become more important to you since you were diagnosed with HIV? Why or why not? In what ways? For example, what do you differently?
	3. Do you believe “good” or “bad” oral health can affect your entire body as well as your mouth?
		1. [*IF NO*] Why not?
		2. [*IF YES*] How so? (What other parts of your body can be affected by “good” or “bad” oral health?)

**MESSAGE AND MATERIALS TESTING [60 Minutes Total]**

**Material 1: *Oral Health: Tips for People Living with HIV* (20 Minutes Subtotal)**

Note: The moderator will display the below instructions on the shared screen for the participants to refer to as needed. The moderator and note-taker will closely watch interviewees’ handling of the material—their body language, facial expressions, etc. This may provide clues or insights into ease or difficulty in comprehension. Also, the moderator will display on the shared screen the material that is being referenced at the appropriate time during the focus group discussion.

* **Circle** anything that:
	+ Is important
	+ Is new information
* **Cross out** anything with an “X” that:
	+ You think is unnecessary
	+ Is something you disagree with
* Put a **question mark** next to anything that:
	+ You have questions about
	+ You do not understand



Please flip to the next item in your packet, a trifold brochure titled, *Oral Health: Tips for People Living with HIV.* Please read through this brochure by yourself during the next 3 minutes. As you read through it, please **circle** anything that is important or new information. **Cross out anything with an “X”** that does not need to be included in the material, or that you may disagree with. If there are things you have questions about or do not understand, put a **question mark** next to it.

1. What information or messages did you get from this brochure?
2. What kinds of oral health problems are people with HIV at special risk for? [*LISTEN FOR: CHRONIC DRY MOUTH, BLEEDING GUMS, LOOSE TEETH, BONE LOSS AROUND THE TEETH, CANCER (KAPOSI’S SARCOMA), ORAL WARTS, CANKER SORE/FEVER BLISTERS, THRUSH (CANDIDA/YEAST), DENTAL CAVITIES (FROM THE BROCHURE).*]
3. What did you CIRCLE on this brochure? (What was NEW or IMPORTANT to you? What surprised you?)
4. What did you CROSS OUT? (What was NOT NEEDED? What did you NOT AGREE with?)
5. What did you put a QUESTION MARK next to? (What did you NOT UNDERSTAND or have QUESTIONS about?) For items that are confusing, what recommendations do you have for making them clearer?
6. What else do you want to know after reading this brochure? What is missing? [*LISTEN FOR: MORE INFORMATION ABOUT A PROBLEM LISTED (E.G., BLEEDING GUMS)—SUCH AS HOW DOES THE PROBLEM MANIFEST ITSELF, IS IT LIKELY A RESULT OF HIV OR FROM TREATMENTS FOR HIV, TYPICAL TYPES OF TREATMENTS FOR EACH.*]
7. If you received this brochure in the mail or saw it somewhere (for example, at a clinic waiting area), how likely is it that you would read it? Why or why not? How likely would you be to give this brochure to someone else with HIV?
8. What would you change about the design of this brochure to make it more likely that someone would pick it up and read it? [*PROBE FOR CONTENT AND “LOOK AND FEEL” (COLORS, LAYOUT, FONT, IMAGES) CHANGES.*]
9. What do you think about the images in the brochure?
	1. What images would you change and why? [*PROBE FOR CULTURAL APPROPRIATENESS (E.G., RACIAL/ETHNIC AND AGE REPRESENTATION).*]
10. Let’s quickly look at the list of resources in the brochure.
	1. What about this list of resources is most helpful or important to you? How likely are you to visit any of these links and what would you hope to find?
	2. What, if anything, is missing from this list?

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 4**: **How easy or difficult is the brochure, *Oral Health: Tips for People with HIV*, to understand?**

*Use a scale from 1 to 7, with 1 being “Very difficult” and 7 being “Very easy.”*

[*SHOW RESULTS. DISCUSS.*]

**Material 2: *Dry Mouth* (20 Minutes Subtotal)**

Please flip to the brochure in your packet labeled *Dry Mouth*. Once again, please read through this brochure on your own—I will give you 3 minutes to review. As you are reading through it, please **circle** anything that is important or new information. **Cross out anything with an “X”** that does not need to be included in the material, or that you may disagree with. If there are things you have questions about or do not understand, put a **question mark** next to it. [*Moderator will display the O, X, ? screen instructions.*]

1. What does “dry mouth” mean to you? [PROBE FOR DETAILS: What causes dry mouth?]
2. What information or messages did you get from this brochure?
3. What did you CIRCLE on this brochure? (What was NEW or IMPORTANT to you? What surprised you?)
4. What did you CROSS OUT? (What was NOT NEEDED? What did you NOT AGREE with?)
5. What did you put a QUESTION MARK next to? (What did you NOT UNDERSTAND or have QUESTIONS about?) For items that are confusing, what recommendations do you have for making them clearer?
6. Do you experience dry mouth? How does dry mouth affect your day-to-day lives?
7. Let’s look at page one, the “What Causes Dry Mouth?” section. Were you surprised to learn HIV/AIDS can cause dry mouth?
	1. [*IF NEEDED*] What else do you want to know about dry mouth now that you know this?
8. Let’s look at page two, the “You may also do the following” section. How helpful are these suggestions for preventing dry mouth?
	1. Are there any suggestions you would add to this list based on your own experiences?
9. What would you change about the design of this brochure to make it more likely that someone would pick it up and read it? [*PROBE FOR “LOOK AND FEEL” (COLORS, LAYOUT, FONT, IMAGES).*]
10. What else would you change to make this brochure something that feels personal to you, like the brochure is talking to you personally?
	1. What pictures would you recommend including in a brochure with the title, “People with HIV and Dry Mouth,” so that the brochure feels like it knows what it is like to be a person with HIV?
11. How likely would you be to give this brochure to someone you know? Why?

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 5**: **How easy or difficult is the brochure, *Dry Mouth*, to understand?**

*Use a scale from 1 to 7, with 1 being “Very difficult” and 7 being “Very easy.”*

[*SHOW RESULTS. DISCUSS.*]

**Material 3: *Brushing and Flossing* (20 Minutes Subtotal)**

1. What information or messages did you get from this brochure?
2. Tell me in your own words why brushing and flossing are important. [*LISTEN FOR: REMOVES PLAQUE, PREVENTS TOOTH DECAY AND GUM DISEASE.*]
3. What did you CIRCLE on this brochure? (What was NEW or IMPORTANT to you?)
4. What did you CROSS OUT? (What was NOT NEEDED? What did you NOT AGREE with?)
5. What did you put a QUESTION MARK next to? (What did you NOT UNDERSTAND or have QUESTIONS about?)
6. Have you used any of the tips or techniques listed in this brochure?
7. Let’s look at page two, the “Flossing Step-By-Step” section. In your own words and using your hands and fingers, tell me how you would floss your teeth.
	1. How helpful are the images next to the step-by-step list?
	2. What would you change about these images to make them more helpful?
8. Let’s now look at page three, “Flossing Tools.”
	1. What did you learn from this section of the brochure?
	2. How helpful are the images next to these tools?
	3. What would you change about these images to make them more helpful?
9. Let’s now look at page four, “Brushing Tips.”
	1. How realistic are these tips? In other words, how likely are you to take these steps? For example, do you or would you brush your tongue?
	2. How motivational are these steps? After reviewing these steps, will you change the way you brush your teeth and if so, how?
	3. What questions do you have after reading these tips? For example, would it be helpful if this information included the exact angle recommended when brushing “toward the gumline” (e.g., “45 degree angle”)? Would it be helpful if this information included the number of total minutes recommended to do each of these steps?
10. What would you change about the design of this brochure to make it more likely that someone would pick it up and read it? [*PROBE FOR “LOOK AND FEEL” (COLORS, LAYOUT, FONT, IMAGES).*]
11. Is there anything else that you would change about this brochure to make it feel more personal to you, like the brochure is speaking to you directly and understands you?
12. How likely would you be to give this brochure to someone you know? Why?

Please take a moment to respond to the question that appears on the computer screen.

1. **POLL 6**: **How easy or difficult is the brochure, *Brushing and Flossing*, to understand?**

*Use a scale from 1 to 7, with 1 being “Very difficult” and 7 being “Very easy.”*

[*SHOW RESULTS. DISCUSS.*]

**PREFERRED COMMUNICATION CHANNELS [<5 Minutes]**

Now I would like to ask you about your preferences looking for oral health information.

1. How many of you noticed the sponsor(s) of the materials we reviewed? Did you recognize any of them? If so, what do you know about them? How likely would you be to visit the website or call the phone number listed on the brochure?
2. Is there an internet site you especially like for information on HIV and oral health? [*PROBE: GET SPECIFICS WHEN POSSIBLE. WHICH WEBSITES/ORGANIZATIONS?*]
3. How much would you trust information about oral health as it relates to HIV on social media?
	1. [*IF TRUST SOCIAL MEDIA*] Where would you find trustworthy information about oral health as it relates to HIV on social media? [*PROBE: GET SPECIFICS. WHICH PLATFORMS? FACEBOOK, TWITTER, SNAPCHAT, INSTAGRAM, LINKEDIN, ETC.*]
4. How do you most like to receive oral health information? (How do you like oral health information to be "packaged"?) [*Offer examples like brochure, poster, website, infographic, graphic novel/fotonovela, video, GIF, in-person conversation [with whom: healthcare provider, trusted family member?], podcast, social media post.*]
	1. Please look at the shared screen. You’ll see two versions of the same brochure page. The words are the same but they have different pictures. Slide A uses photographs while Slide B uses drawings. If you saw these in a dentist’s office, which would you be more likely to pick up? Why?

**OBSERVERS’ QUESTIONS AND CLOSE [<5 Minutes]**

Now I’d like to ask the observers if they have any additional questions or need clarification on any of the issues we’ve discussed. [*Moderator will review any questions from observers via a private communication channel and pose those to the participants.*]

Please take a moment to respond to the last question that appears on the computer screen.

1. **POLL 7 (POST-TEST):** **How likely are you to visit the dentist in the next 6 months?**

*Use a scale from 1 to 7, with 1 being “Not at all likely” and 7 being “Extremely likely.”*

18a. Why did you rate this question in this manner? Again, please talk about the extent to which your rating relates to the COVID-19/coronavirus pandemic. [Listen for/probe: If a number is low, is the number low because of the pandemic or primarily other reasons?]

NOTE: After the participants respond to this question, the moderator will compare the responses to the PRE-question with the response to the POST-question and ask: Why do you think your responses changed from X to Y to the same question just about 90 minutes ago?

[*MODERATOR THANKS PARTICIPANTS AND CLOSES THE DISCUSSION.*]

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