

## Attachment 6: CAN Focus Group Guide and Consent for Direct Service Providers

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The public reporting burden of this collection of information is estimated to average 60 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 Reports Clearance Officer; 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30333 ATTN: PRA (0920-1154).

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### Introduction [8min]

#### WELCOME

My name is [FACILITATOR NAME]. I work at [CONSULTANCY NAME]. I am here with my colleague [insert notetaker name], who will be taking notes today. We will also have a couple CDC observers who will be listening in.

Today, our discussion will focus on the knowledge that adults like yourselves have about and child abuse and neglect (what we refer to as “CAN”), as well as how we can prevent them. The information you share with us today will help us create future messages and content to help people recognize and prevent CAN. We will present various messages about CAN and then ask you questions about your reactions and responses to these messages. The focus group will be largely conversational, so please feel free to raise any additional points or share your own unique insights on our messages. Our discussion should last around 60 minutes.

Before we start, I’d like to remind you that your involvement is voluntary, and you may end your participation at any time. If at any point you feel uncomfortable, you may take a break or end your participation. Your feedback is valuable to us and the success of our messages on this topic. You each can provide specific insight and opinions, so we do want to hear from each of you, but you are not required to answer all the questions. To make sure we don’t miss anything, this session will be recorded. However, we will only use these recordings to inform a written recommendations report. The recordings will be stored on a secure computer folder. Your responses are confidential, and our report will not identify you or any other participant. If you are still willing to participate in this focus group discussion, please say, “Yes.” [If someone no longer wants to participate, thank the person and dismiss them.]

Do you have any questions for me before we get started?

Ok, great. I will now go over the ground rules for today’s discussion.

#### GROUND RULES

[Display slide with ground rules on screen]

To help this session go smoothly, here are some ground rules for our discussion:

- Please speak one at a time – this will help us hear one another and enable us to take good notes.
- Please speak clearly and at least as loudly as I am.
- You can raise your hand to speak (physically or virtually) or speak up after another person has finished speaking.
- You do not have to speak in any particular order, and you may speak directly to each other. This is a group conversation and you do not have to address your comments to me.
- There are no right or wrong answers.
- You do not have to agree with the views of other people in the group. In fact, if you disagree, we hope you will share your perspective so we can understand the full range of views in the group.
- Respect others and their different viewpoints.
- Please maintain each other's privacy. What's said in the room stays in the room.
- There are a lot of you in the room and we'd like to hear from everyone. Some of you may be more comfortable speaking than others, so at times I may ask more talkative people to let others share first, or invite a quieter person to share their thoughts.
- Please put away or silence any distractions like phones, tablets, or TVs for our discussion, and mute yourself when you are not speaking.

Before we get started, let's all introduce ourselves. Please tell us a nickname that we can use to address you during the discussion.

### **Understanding of and Familiarity with CAN [8min]**

1. What comes to mind when you hear the term "child abuse and neglect"?
  - Probe: How would you define it?
  - Probe: Do you think of specific images, people, places, or settings? Do specific events come to mind?
2. When you hear about child abuse and neglect in your community or other communities, how is it described?
  - Probe: What terms are used?
  - Probe: How is it described by the people/community you work with?

3. I'm going to show and read you a definition of child abuse and neglect, and then ask about your reactions.

*“Child abuse and neglect is defined as any act or series of acts of commission or omission by a parent, caregiver, or another person in a custodial role that results in harm, potential for harm, or threat of harm to a child.”*

[source:

<https://www.cdc.gov/violenceprevention/childabuseandneglect/index.html>]

What do you think of this definition?

- Probe: What information did you learn? Did anything surprise you?
  - Probe: Was anything unclear?
4. Is it possible to prevent child abuse and neglect?
    - Probe: Whose responsibility is it to prevent or address child abuse and neglect?
    - Probe: At what level? (local, state, federal)
    - Probe: Which fields? (law enforcement, education, medical, public health, etc.)
    - Probe: How should public health (e.g. CDC, health depts) be involved in preventing child abuse and neglect?

### **Reactions to CAN Messages [20min]**

I'd like to get your feedback on some new messaging that's being developed in relation to child abuse and neglect. You can imagine the main message as a headline that might appear at the top of a poster or on a website, and the supporting message as information that might go underneath that headline.

[Display slide with CAN messages on screen, reading each message aloud]

I'm going to ask you some questions about this messaging. Feel free to talk about whatever stands out to you – the entire set of messaging, the main message, or any sub-messages. If you have something to say about a specific part of the messaging, please identify which piece you are talking about using the number or letter provided.

[Ask the following questions for each message displayed. Probes will be asked as needed. Messages will be prioritized for testing, and we will test as many messages in this section as 20min will allow.]

[Message Set 1]

**Main Message:** Every trusted adult matters for kids—the more positive relationships they have, the healthier they'll be.

- **Supporting Message:** That's why we prioritize support and connections at home, at school, and wherever kids interact with trusted adults.
5. How would you sum up in just a few words your first impression of this messaging?
    - Probe: How well do you think the main ideas come across? Is it clear/easy to understand?
    - Probe: What do you think of this idea?
    - Probe: Was your reaction to this positive or negative?
    - Probe: Does your organization agree or disagree with any specific parts of this messaging? If so, what?
  6. Is this messaging believable? Why/why not?
    - Probe: Do you have recommendations for how to improve the credibility of this messaging?
  7. How relevant is this information for you?
    - Probe: Who would you share this information with?
    - Probe: When would you share this information? What events/circumstances might prompt you to share it?
    - Probe: Where would you share this information (e.g., setting, platform)?
  8. How could it be improved?
    - Probe: Is there anything you want to know that this messaging does not tell you?
    - Probe: Is there a way to say this differently that would make it clearer/less confusing?
    - Probe: Are there any words or phrases that bother you or that you think should be said differently?
    - Probe: Is there a way to say this differently that would make you personally, or the populations you work with, more likely to notice and think about the messaging?

### **Reactions to Comparison of CAN Messages [20min]**

Next, I'm going to have you compare two messages and ask you some questions about them.

[Display slide with two CAN messages on screen, reading each message aloud]

Feel free to talk about whatever stands out to you. If you have something to say about a specific part of the messaging, please identify which piece you are talking about using the number or letter provided.

[Ask the following questions for each pair of messages displayed. Probes will be asked as needed. Message pairs will be prioritized for testing, and we will test as many message pairs in this section as 20min will allow.]

**[Comparison #1]**

- A. You can create spaces where kids form the relationships they need to thrive and where parents or caregivers feel comfortable asking for help when they need it.
- B. When you create spaces for kids to learn, play, and live, you are also creating opportunities for positive relationships and supportive communities where families can get help if they need it.

**[Comparison #2]**

- A. Be a consistent and reliable adult who encourages kids to share their feelings without judgment so they can feel emotionally safe and secure.
- B. Check in with parents, ask about how they are experiencing parenthood, and listen without judgment.

**[Comparison #3]**

- A. Be a consistent and reliable adult who encourages kids to share their feelings without judgment so they can feel emotionally safe and secure.
  - When parents reach out for help, show up, listen, and communicate openly. This, too, supports kids and prevents CAN.
- B. Be a consistent and reliable adult who encourages kids to share their feelings without judgment so they can feel emotionally safe and secure.
  - When parents reach out for help, show up, listen up, and build them up—supporting parents supports kids and helps prevent child abuse and neglect.

- 9. Which of the two messages do you prefer and why?
  - Probe: Which one was easier to understand?
  - Probe: Which one do you find more engaging?
  - Probe: Which one is more motivating?
- 10. Do the messages appeal to different audiences? If so, which audiences do they appeal to?
  - Probe: Which audiences should CDC prioritize?
  - **[If presenting main and supporting messages]** Probe: Which one do you think makes a more appropriate headline for the sub-messages?
- 11. **[If presenting main and supporting messages]** Which of the supporting messages do you prefer and why?
  - Probe: Which one was easier to understand?
  - Probe: Which one do you find more engaging?
  - Probe: Which one is more motivating?

**Conclusion [2min]**

- 12. Is there any additional information you think we should know?
- 13. Does anyone have any questions about what was discussed today?

If there are no additional items to add or questions I would like to thank you for your time and for sharing your experiences with me today.

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## **FOCUS GROUP CONSENT FORM**

**STUDY TITLE:** Formative Research for Child Abuse and Neglect (CAN) Messaging

**SPONSOR:** Center for Disease Control and Prevention, National Center for Injury Prevention and Control

### **WHAT ARE YOU BEING ASKED TO DO?**

We are asking you to be part of a focus group discussion. This is part of a research study that will inform the creation of communications messages and materials put forth by the Centers for Disease Control and Prevention (CDC). The purpose of this group is to get your thoughts and opinions on communication messages and concepts related to child abuse and neglect, and how to prevent it.

### **WHAT WILL YOU BE DOING?**

A focus group is a special group discussion. We will meet with a small group of people like you (about 6 to 8 individuals) in a private Zoom meeting to talk about this topic. We will ask you what you think about several different messages and images related to child abuse and neglect. We will use this information to create child abuse and neglect prevention materials and messages for organizations that are working to prevent child abuse and neglect, as well as the general public.

We will record what people say so that we do not miss what is being said. We will also take notes. We will destroy the recordings and notes as soon as we finish working on our materials and messages. Our job is to:

- Ask you questions,
- Keep the group focused on the topic we want to discuss, and
- Make sure we don't run out of time.

We really want you to feel free to talk together as a group. If everyone is talking about the questions we asked, we will just listen to your ideas and take notes. This discussion will take about an hour to complete.

### **DO YOU HAVE TO DO THIS?**

You do not have to be part of this group discussion. It is your choice. Your being in this focus group is voluntary. You can say that you don't want to be in the focus group and that is fine. You are also free to stop participating at any time. It is important that you feel okay answering the questions honestly. You do not have to answer any questions you do not want to answer.

## **HOW WILL YOUR PRIVACY BE PROTECTED?**

To protect your privacy, we will not ask you to share your full name and we will not write down your name in any of the notes we take.

We value your being in this focus group. We also understand that you may not be okay telling the entire group what you think out loud. In these cases, if you prefer, you can write down your ideas or thoughts and share them in the Zoom chat box with the person leading the discussion. No one else will see these ideas, sent as private messages, except the study team. We will review all private messages sent to us via private Zoom chats after the focus group and record them in a password protected drive with other study materials. We will destroy our notes and recording when we finish working on our messages.

## **WHAT ARE THE RISKS?**

**There may be some risks from participating in this study.** Because you will be speaking with us in a group, there is the possibility that other participants in the group will tell other people you were part of this discussion. They may repeat what you said during the focus group to other people. To minimize this risk, at the beginning of the discussion, we will ask everyone in the group to not share anything from the discussion with anyone after the discussion ends. We hope you will feel comfortable being open and honest in your responses to our questions.

While we are not asking about personal experiences, you may feel distressed or experience psychological or emotional trauma as a result of having to respond to questions about child abuse and neglect. We will minimize those risks by allowing participants to withdraw from the discussion at any time. You may leave the meeting at any time, and you do not have to answer any questions you do not want to. In addition, we are sharing several counseling and support resources with all focus group participants (at the end of this document), and will share these resources at the beginning of the discussion.

## **ARE THERE ANY BENEFITS TO BEING IN THIS GROUP?**

There are no direct benefits to being in this study. However, you may benefit from knowing your contributions in this discussion could help improve public messaging about child abuse and neglect and help prevent future child abuse and neglect.

## **WILL YOU RECEIVE PAYMENT?**

We will give you a \$40 token of appreciation after we finish the discussion to thank you for your time, effort and contributions.

## **WHAT WILL BE DONE WITH THE RESULTS OF THIS FOCUS GROUP?**

We will review information from the focus group to inform the creation of future products or materials to help prevent child abuse and neglect, such as webpages, videos, and other tools.



## OTHER INFORMATION

Please keep a copy of this information sheet for your records. If you have any questions or concerns about this study, you may contact [PI NAME] at [PHONE NUMBER] or via email at [EMAIL ADDRESS]. The study team is also willing to answer any questions or concerns you might have right now or after the discussion.

Please answer yes or no to the following statements:

\_\_\_ I understand the information that has been provided to me and voluntarily agree to take part in this focus group discussion.

\_\_\_ I know that I have a choice to be in this focus group discussion or not, and can stop participating at any time during the discussion.

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## COUNSELING AND SUPPORT RESOURCES

- Childhelp National Child Abuse Hotline: 1-800-4-A-Child / 1-800-422-4553
  - Website: <https://www.childhelphotline.org/>
  - Description: The Childhelp National Child Abuse Hotline is a safe, nonjudgmental and inclusive space for those concerned about or affected by child abuse. Its counselors are available to support those concerned about or affected by child abuse and provide appropriate, individualized guidance for those that reach out. Its staff can also help research additional resources that may be available. The Childhelp National Child Abuse Hotline is NOT a reporting line for child abuse. The hotline is NOT connected to emergency services nor is it a replacement for 911 emergency responsive services.
- 988 Suicide & Crisis Lifeline: 988
  - Website: <https://988lifeline.org/talk-to-someone-now/>
  - Description: The 988 Suicide & Crisis Lifeline (formerly known as the National Suicide Prevention Lifeline) provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week, across the United States. The Lifeline is comprised of a national network of over 200 local crisis centers, combining custom local care and resources with national standards and best practices.
- SAMHSA's National Helpline: 1-800-662-HELP / 1-800-662-4357
  - Website: <https://www.samhsa.gov/find-help/national-helpline>
  - Description: The Substance Abuse and Mental Health Services Administration (SAMHSA) National Helpline, also known as the Treatment Referral Routing Service, is a confidential, free, 24-hour-a-day, 365-day-a-year, information service, in English and Spanish, for individuals and family members facing mental and/or substance use disorders. This service provides referrals to local treatment facilities, support groups, and community-based organizations.

- Additional Info: Also visit the online treatment locator, or send your zip code via text message: 435748 (HELP4U) to find help near you. Read more about the HELP4U text messaging service.