Data Collection Methods

“The Proof is in the Pudding, the Perils are in the Plan”

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MESI Spring Training 2017
That look when you are trying to analyze data collected without thoughtful planning...
LEARNING OBJECTIVES

*Participants will…*

Gain a deeper understanding of how to develop and align evaluation questions, approaches, and methods that are feasible and appropriate to the context.

Recognize the considerations, advantages, and limitations of various types of data collection methods

Identify technologies available to support data collection

Gain a tool for communicating data collection plans with team members and/or clients + increase buy-in from key stakeholders
introduce yourself
SCOPE – WHAT ARE WE DOING TODAY?

1. Context, Questions, and Feasibility
2. Types of Data Collection
3. Sampling
4. Innovations and Technologies
5. Pulling Together and Sharing the Plan
Section 1: Context, Questions, & Feasibility
DATA COLLECTION IN THE EVALUATION CYCLE

“Compiling information that stakeholders perceive as trustworthy and relevant for answering their questions. Such evidence can be experimental or observational, qualitative or quantitative, or it can include a mix of methods. Adequate data might be available and easily accessed, or it might need to be defined and new data collected. Whether a body of evidence is credible to stakeholders might depend on such factors as how the questions were posed, sources of information, conditions of data collection, reliability of measurement, validity of interpretations, and quality control procedures.”
WHAT COUNTS AS CREDIBLE EVIDENCE?

- Demands for such evidence is increasing
- Program-theory driven
  - Develop program impact theory
  - Develop evaluation questions
  - Answer evaluation questions
- What constitutes knowledge and how it is created? (Patton, 2002)
  - Positivism (quantitative)
  - Constructivism (qualitative)
ALL DATA COLLECTION IS A TYPE OF CONVERSATION, A RELATIONSHIP

With each question asked, reflect: How will this information be used? Is it necessary for us to ask?

Know your potential respondents – know the context (language, reading levels, preferred communication formats, etc.)
START WITH THE EVALUATION QUESTIONS, **NOT** THE METHODS

How many times have you heard someone say, “Let’s do a survey – it’s easy!”

**Process Evaluation**
- To whom did you direct program efforts?
- What has your program done?
- When did your program activities take place?
- What are the barriers/facilitators to implementation of program activities?

**Outcome Evaluation**
- Were the providers who received training more likely to effectively screen and treat patients than those who did not?
- Did the program have any unintended effects on the target population?
- Do the benefits of the program justify a continued allocation of resources?
<table>
<thead>
<tr>
<th>Question</th>
<th>Possible Qualitative Methods</th>
<th>Possible Quantitative Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you engage with the right partners at the right time?</td>
<td>Interviews with partners and staff</td>
<td>Survey of partners</td>
</tr>
<tr>
<td>Did the measures you chose resonate with your audience?</td>
<td>Focus groups with sample of audience member</td>
<td>Surveys of audience members</td>
</tr>
<tr>
<td>Did your audience find your Web-based report?</td>
<td>Focus groups with sample of audience member</td>
<td>“Web analytics” to track usage of the Web site</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Surveys of audience members</td>
</tr>
<tr>
<td>Did you get the media attention you wanted?</td>
<td></td>
<td>Tracking of media mentions (by yourself or through a service)</td>
</tr>
<tr>
<td>Did your outreach efforts reach those who are less literate?</td>
<td>Interviews with outreach partners Focus groups with less literate</td>
<td>Note: A survey would probably not be appropriate for a less</td>
</tr>
<tr>
<td></td>
<td>community members</td>
<td>literate group, unless it was done by telephone.</td>
</tr>
</tbody>
</table>
# EVALUATING RESULTS

If you are evaluating results:

<table>
<thead>
<tr>
<th>Question</th>
<th>Possible Qualitative Methods</th>
<th>Possible Quantitative Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did your audience understand the report?</td>
<td>Usability testing after the report has been issued</td>
<td>Survey of audience members including questions to test their knowledge of key facts and messages in the report</td>
</tr>
<tr>
<td>Did your audience use the report? How?</td>
<td>Focus groups with samples of audience members</td>
<td>Survey of audience members Observed changes in enrollment in health plans or use of providers (very difficult)</td>
</tr>
<tr>
<td>How did providers and plans respond to the report?</td>
<td>Interviews with individual plans and providers</td>
<td>Survey of plans or providers</td>
</tr>
<tr>
<td>Did the reports intensify quality improvement activities?</td>
<td>Interviews with individual plans and providers</td>
<td>Survey of plans or providers</td>
</tr>
<tr>
<td>With what results?</td>
<td></td>
<td>Changes in plan or provider performance over time on key metrics, including but not limited to those in your report</td>
</tr>
</tbody>
</table>
WHAT IS YOUR INQUIRY WORLDVIEW?

What was your experience in completing the questionnaire? Was it difficult? Why?

Did your score surprise you? Why or why not?

How might one’s worldview affect his or her evaluation practice?
How might it have affected your practice with previous evaluations?

How would you deal with a client, colleague, or team member who had a worldview different from yours?
FOUR CONSIDERATIONS FOR QUALITY

To be discussed during early planning of the evaluation and data collection processes!

**Credibility of Findings**
(who are the stakeholders and what do they value?)

- Community members
- Legislators
- Program staff
- Program participants

**Staff skills**

- Project management
- Interpersonal skills – buy-in from stakeholder groups
- Data cleaning
- Data management
- Data analysis
- Reporting and visualization

**Costs**

- Software
- Training
- Consultants or collaborations
- Weighing accuracy with feasibility
- Access to information (e.g., secondary data)

**Time constraints**

- Balancing deadlines with ability to plan and implement quality processes
- Communication & shared understanding of data collection process
- IRB considerations & timelines
BAD DATA IS **NOT** BETTER THAN NO DATA
Section 2: Types of Data Collection
TYPES OF DATA COLLECTION

Surveys

Interviews & focus groups

Observation
TYPES OF DATA COLLECTION

- Extraction
- Secondary data
- Innovative strategies
WHEN SHOULD I USE A SURVEY?
PURPOSE: WHEN IS A SURVEY THE APPROPRIATE METHOD?

Gather self-reported information on knowledge, behaviors, beliefs, experiences

Population is defined

Limited or well-defined need for detailed information

Anonymity possible
ITEM TYPES
CLOSED-ENDED

Likert-type (rating scale)
Dichotomous (T/F or Y/N)
Multiple choice, ranking, rating scales
### Q19 Please indicate the extent to which you agree with each of the following statements.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly disagree (1)</th>
<th>Disagree (2)</th>
<th>Neutral (3)</th>
<th>Agree (4)</th>
<th>Strongly agree (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I tend to bounce back quickly after hard times. (1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have a hard time making it through stressful events. (3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>It does not take me long to recover from a stressful event. (4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>It is hard for me to snap back when something bad happens. (6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I usually come through difficult times with little trouble. (7)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I tend to take a long time to get over set-backs in my life. (8)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Q12 Have you been diagnosed with any of the following?**

<table>
<thead>
<tr>
<th></th>
<th>Never (1)</th>
<th>Yes, within the past 12 months (2)</th>
<th>Yes, over 12 months ago (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol/Drug problems (1)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anorexia (2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anxiety (3)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attention deficit disorder (4)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bipolar disorder (5)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bulimia (6)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depression (7)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obsessive-compulsive disorder (8)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Panic attacks (9)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Post-traumatic stress disorder (10)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seasonal affective disorder (11)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social phobia/Performance anxiety (12)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Q117 On a scale from one to ten, with one being very unsupportive to ten being very supportive, how would you rate your relationship with the following:

<table>
<thead>
<tr>
<th></th>
<th>Very unsupportive 1 (1)</th>
<th>2 (2)</th>
<th>3 (3)</th>
<th>4 (4)</th>
<th>5 (5)</th>
<th>6 (6)</th>
<th>7 (7)</th>
<th>8 (8)</th>
<th>9 (9)</th>
<th>Very supportive 10 (10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friends (1)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Family (2)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>College/University Faculty (3)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>College/University Staff (4)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
### H3 Personal Safety

The following questions pertain to issues related to personal safety. When answering the questions please use the following definitions: sexual intercourse - oral, vaginal, or anal penetration; sexual touching - touching of breasts, buttocks, or genitals.

**Q20 Please indicate your responses below:**

<table>
<thead>
<tr>
<th></th>
<th>Within past 12 months</th>
<th>Within your lifetime</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you had sexual intercourse with someone without that person's consent or against his/her will (4)</td>
<td>Yes (1)</td>
<td>Yes (1)</td>
</tr>
<tr>
<td></td>
<td>No (2)</td>
<td>No (2)</td>
</tr>
<tr>
<td>Have you touched someone sexually without that person's consent or against his/her will (3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you slapped, kicked, or pushed your significant other or spouse/partner (6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you threatened or &quot;put-down&quot; your significant other or spouse/partner (7)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
OPEN-ENDED ITEMS

Use: When uncertain of entire range of alternative answers or when you want to gather examples, stories, lists, or descriptions
The way I feel is hard to quantify!

How hard - on a scale of one to ten?
H4 Nutrition and Physical Activity

Q40 How tall are you in feet and inches? Please enter inches in decimal format (e.g., 11.75)
Feet (2)
Inches (3)

Q41 Approximate your current weight in pounds. (1 kilogram = 2.2 pounds)

Q42 In the past 7 days, how many minutes did you spend doing strenuous exercise (heart beats rapidly)?
Examples: biking fast, aerobics, dancing, running, basketball, swimming laps, rollerblading, tennis, soccer

Q43 In the past 7 days, how many minutes did you spend doing moderate exercise (not exhausting)?
Examples: walking quickly, baseball, easy biking, volleyball, skateboarding, snowboarding

Q44 In the past 7 days, how many minutes did you spend doing exercises to strengthen or tone your muscles? Examples: push-ups, sit-ups, weight lifting/training
SURVEY MODE:
PAPER
PHONE
ONLINE
IMPERSONALITY

COGNITIVE BURDEN

LEGITIMACY

Data Quality
SEVEN DESIGN PRINCIPLES TO REDUCE COGNITIVE BURDEN

Take advantage of knowledge that is available externally + long-term memory

Simplify the structure of tasks

Make both controls and actions that perform visible to the user

Rely on natural mappings between actions and their consequences

Exploit physical and cultural constraints

Allow for errors

Rely on standardization when other design principles do not apply
Now, imagining each of the following **brands of natural and organic cereal** as a person, please indicate which personality traits you think best represent the brand. You may select as many or as few of these traits as you want. *(Please select all that apply.)*

<table>
<thead>
<tr>
<th>Approachable</th>
<th>Nature Valley</th>
<th>Nature’s Path</th>
<th>Bear Naked</th>
<th>Back to Nature</th>
<th>Envirokidz</th>
<th>Barbara’s Bakery</th>
<th>Cascadian Farm</th>
<th>None of these</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kashi</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Honest</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Open-minded</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trendy</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Authentic</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Down to earth</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fun</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Active</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intelligent</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Light hearted</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
PAPER SURVEYS

- Self-Administration
- Impersonality
- Cognitive Burden
- Accuracy
- Level of Reporting
- Rate of Missing Data
- Reliability
ONLINE SURVEYS

Online

Legitimacy

Cognitive Burden

Accuracy

Level of Reporting

Rate of Missing Data

Reliability
ADAPTIVE DESIGN

How would you rate your satisfaction with the following items?

Generally speaking, meets my needs

<table>
<thead>
<tr>
<th>Disagree</th>
<th>Disagree</th>
<th>Neither</th>
<th>Agree</th>
<th>Agree Strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I think is at least as good as any other casual dining restaurant

<table>
<thead>
<tr>
<th>Disagree</th>
<th>Disagree</th>
<th>Neither</th>
<th>Agree</th>
<th>Agree Strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
FIVE PRINCIPLES FOR DESIGN OF PAPER OR ONLINE SURVEYS

1. **Consistently** use graphical elements (e.g., contrast and spacing) to define a clear path through the questionnaire.

2. Use **prominent visual guides** to redirect respondents when conventions within a questionnaire must change.

3. Place directions where they are **easily seen** and **close** to where they are needed.

4. Keep separate pieces of information **physically close** when they must be connected to be understood.

5. Ask only **one question at a time**.
## CONSISTENCY

### Section I

<table>
<thead>
<tr>
<th>Rating</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>No Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am satisfied with X.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I found the content to be useful.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section II

<table>
<thead>
<tr>
<th>Rating</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
<th>No Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>I would attend X event again.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I would recommend X to a friend.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Welcome to the WSU Student Experience Survey.

This is a short, 30-question survey that should take no more than 10 minutes to complete. We are asking you to reflect on your experience as a student at WSU. Please take the time to complete this survey. Every response is important!

Your participation is voluntary and your responses will be kept confidential. No personally identifiable information will be associated with your responses in any reports of this data. If you have any questions or comments about the survey please feel free to e-mail us at seescweb1@wsu.edu or ask for Thom at 335-1722.

Thanks in advance for filling out the survey.

This survey has been reviewed and approved by the Washington State University Institutional Review Board. If you have any questions concerning your rights about participating in this project, please contact 509-335-9661 and ask for the IRB Coordinator.

Please enter your Access Code listed in the letter or e-mail we sent to you:

[Field for entering the access code]

Submit Personal Access Code
TELEPHONE SURVEYS

- Telephone
- Legitimacy
- Cognitive Burden
- Accuracy
  - Level of Reporting
  - Rate of Missing Data
  - Reliability
Strategies for increasing response rates

WHAT IS AN “OPTIMAL” RESPONSE RATE STRATEGIES FOR INCREASING RESPONSE RATES
WHAT IS A “GOOD ENOUGH” RESPONSE RATE?

Estimating non-response bias

Use – how will the results be used? What are the stakes?
PRE-INCENTIVES
HEY, Students!

Take a SWELL SURVEY
For a chance to win NEAT PRIZES!

You've been selected to participate in the 2015 COLLEGE STUDENT HEALTH SURVEY

Take the survey and you'll be entered to win a $1,000, $500 and $250 Amazon gift card!

To begin, check your school or personal email account and click on the survey link we sent you.

Deleted the email? Another survey link will be emailed again soon. Can't find it? Check your spam folder.

To be eligible for the prize drawings, complete your survey by NOON ON FRIDAY, MARCH 27, 2015!

To learn more, visit www.bhs.umn.edu/healthsurvey

SURVEY QUESTIONS
Katharine Lust, Ph.D., Survey Administrator
klust@bhs.umn.edu, 612-624-6214

TECHNICAL HELP
cahs@umn.edu

2015 College Student Health Survey Postcard
GRADUATE STUDENT SURVEY
Somewhere, at this very moment...

Currently we’re on Step 6

Follow-up Plan
- Send invitation
- 1st Reminder
- 2nd Reminder
- 1st Call
- 2nd Call
- Send silly cartoon
- Beg
- Hire goons
- Release hounds

freshspectrum.com
MAKE A LIST OF POSSIBLE INCENTIVES THAT COULD BE USED TO OBTAIN A HIGH SURVEY RESPONSE RATE
<table>
<thead>
<tr>
<th>Incentive</th>
<th>Respondent Population</th>
<th>Positive Aspects or Advantages</th>
<th>Negative Aspects of Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
• HOW DID YOU DECIDE WHAT WOULD BE AN EFFECTIVE SURVEY INCENTIVE? WHAT WERE YOUR CRITERIA?

• What issues arose in your discussions concerning the positive and negative aspects of various incentives?

• What ethical issues did your group discuss relative to the use of incentives?

• Under what circumstances might the use of incentives be inappropriate?
Survey fatigue is real, people...
WHEN MIGHT YOU CONDUCT IN-DEPTH INTERVIEWS?
Interviews provide more nuanced information, personal stories, ability to probe/follow-up

<table>
<thead>
<tr>
<th>Interview format:</th>
<th>Mode of interviews:</th>
<th>Types of Questions:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Unstructured</td>
<td>☐ Telephone</td>
<td>☐ Descriptive</td>
</tr>
<tr>
<td>☐ Semi-structured</td>
<td>☐ In-person</td>
<td>☐ Structural</td>
</tr>
<tr>
<td>☐ Structured</td>
<td>☐ Intercepts</td>
<td>☐ Contrast</td>
</tr>
</tbody>
</table>

With each question asked, know the type of information you anticipate receiving
DESCRIPITIVE QUESTIONS RESULT IN A NARRATIVE

- **Grand tour questions**
  “I am interested in your life when you were growing up. What was your family like? Where did you live? Where did you go to school?”

- **Mini-tour questions**
  Specific element/follow-up from grand tour questions: “You’ve told me a lot about your life growing up but you haven’t said much about your parents. Please tell me about your parents. For example, what did they do for a living?”

- **Example questions**
  “Please give me an example of something he did to make you feel that way.”

- **Experience questions**
  “Please tell me something you did while you were deployed.”
STRUCTURAL QUESTIONS RESULT IN A LIST

- **Cover term questions**
  “What are the different software options that are authorized to be on computers at this location?”

- **Included term/item questions**
  “I’ve hear you say that you are allowed to have word processing software and spreadsheet software on your computer. What are the database applications that are also approved? What about qualitative coding software?”

- **Card or list sorting questions**
  “Here are some cards labeled with software names. Can you divide them by type (spreadsheet, database, word processing)? Which of these are authorized to be on your machines? Can you divide them by how frequently you use them?”
CONTRAST QUESTIONS MANIPULATE A LIST

- **Contrast verifications**
  “So you are permitted to have Microsoft Word but not NVivo?”

- **Directed contrasts**
  “So you have Word, Excel, and Power Point on your machine. What other software do you have?”

- **Rating questions**
  Establish the order or value of items, themes, activities, etc.: “What was the best birthday gift you ever received? What was the worst?”
WATCH OUT FOR:

- Double barreled items
- Leading items
- Double negatives
- Jargon or technical terms
- Vague items
- Items using emotional language
- Items beyond the respondent’s capability to answer
Some Standard Probes

FOR CLARITY/SPECIFICITY
- Can you be more specific?
- Can you tell me more about that?
- What is your best estimate?
- What do you think?
- Which would be closer?
- Which answer comes closest to how you feel/think?
- If you had to pick one answer, what would you choose?

FOR COMPLETENESS:
- Anything else?
- Tell me more.

OTHER PROBING TECHNIQUES:
- Repeat the question
- Echo their response
- Pause a second
- Baiting
## INTERVIEW PROTOCOL

**From:** Professional Data Analysts, Inc.  
**Date:** 3/21/2017  
**Subject:** CCCP evaluation interviews with OPCC committee chairs

### Interview Description

- **Purpose(s):** To answer key evaluation questions and indicators:
  - Are evidence-based interventions in the annual action plan being implemented?
  - What factors are influencing progress?
  - How much progress has been made on the Cancer Plan's goals?

- **Respondents:** Five or six OPCC coalition committee chairs who work in the follow (pres
- **Length/Mode:** Appr
- **Timeline:** PDA  
  - ODH  
  - Final PDA  
  - PDA w/in  
- **Response rate:** 100%  
  - 5-6 hr

### Interview Protocol

*Introduction*

[Exchange pleasantries and confirm with the caller that the day and time still works]. FDA is the external evaluator hired by the Ohio Department of Health (ODH) to conduct an evaluation of Ohio’s work in comprehensive cancer control. We are interested in learning about the work your committee has been doing, including successes and challenges. The information you share with me will be used for program improvement purposes by ODH as well as for reporting, in aggregate, to the CDC.

[Invite participants to provide feedback about our questions, especially in the first 1-2 items. This includes letting us know if a question or any language is confusing].

After the interview today, I will summarize the conversation and send it to you to review to confirm that we’ve got our facts correct, see if you want to add anything more that you might have thought of since the interview, and ensure that you feel comfortable with what we’ve written up.

I anticipate that this interview shouldn’t take more than 45 minutes.

Do you have the Ohio Cancer Plan [in front of you for reference]? [email relevant section(s) ahead of the call]

What questions do you have before we begin?

Before we begin:**“Ask for permission to record”** You may choose to not answer any question or to stop the interview at any time and it will have no effect on your current grant project or funding with the Ohio Department of Health. We use the recordings to make sure we’ve accurately captured the conversation and will not share them with anyone outside of FDA.
Overcoming Common Barriers

• “I’m not interested”
  – Explain purpose of research and remind them it’s an opportunity for their opinions to be heard

• “I’m too busy. How long will this take?”
  – Be honest about time and suggest you can schedule for a more convenient time

• Fear of being inadequate
  – Provide reassurance that we want their opinion, that there are no right or wrong answers

• Have a negative reaction to research
  – Reiterate why the research is important, provide information on legitimacy of the research

• Confidentiality concerns, questions too personal
  – Explain that answers will be combined with answers from others and presented in aggregate form; no names will be reported

RAND
Focus Groups provide an interactive, facilitated session where group dynamics are important.

**Group characteristics will determine how data is analyzed – groups are typically compared**

<table>
<thead>
<tr>
<th>Formats:</th>
<th>Sampling:</th>
<th>Number of groups:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Online</td>
<td>Demographics</td>
<td>Convergence of information</td>
</tr>
<tr>
<td>In-person</td>
<td>Level of acquaintance</td>
<td>Resources available</td>
</tr>
<tr>
<td></td>
<td>Ability to verbalize thoughts</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(can be a screener)</td>
<td></td>
</tr>
</tbody>
</table>
TYPOLOGY OF FOCUS GROUP QUESTIONS

- Background / Icebreaker
- Main evaluation questions
- Factual questions
- Anonymous questions
- Kitchen sink questions (“Are there any other issues we haven’t discussed that you would like to bring up?” / “Let’s discuss at the end…”)
- Big picture question (“The department of health is trying to understand what type of cessation service is most appealing to tobacco users in the state. If you had the opportunity to take your own message to the state what would you say?”)
Common Problems with Participants

- Experts – legitimate or self-appointed
- Rank or hierarchy
- Friends
- Hostile group members
- Unclear whether they meet the sampling
Design and Implementation of a Focus Group Research Project

Research (Study) Questions

- Existing Literature on Topic
- Advice/Input from Stakeholders

Segmentation Plan
- Identification of selection criteria
- Development of screener

Ethical Issues and Clearance Requirements
- Informed consent of participants
- OMB/IRB requirements
- Sensitive topics
- Confidentiality

Selecting Moderators
- Skills needed
- Matching characteristics of target audience
- Expectations

Conducting the Focus Groups
- Group dynamics
- Observers
- Logistics
- Protecting participants and the rigor of research
- Troubleshooting

Recruitment Plan
- Methods
- Who will recruit
- Timeline
- Documentation
- Location for the groups
- Incentives

Moderator Guide
- Development of questions and activities
- Pilot test and revise
- Timing

Theoretical Framework

Analysis of Data
- Notes and/or transcripts
- With or without qualitative software

Report Findings
- Top-line summary
- Extensive report
- Publication
- Debriefing
- Presentation
# Observation

<table>
<thead>
<tr>
<th>When to use:</th>
<th>Types:</th>
<th>Drawbacks:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- When you are attempting to</td>
<td>- Direct – watching a classroom teacher</td>
<td>- Can be resource intensive</td>
</tr>
<tr>
<td>understand an ongoing process or</td>
<td>- Indirect – measuring the amount of</td>
<td>- Susceptible to Hawthorne effect</td>
</tr>
<tr>
<td>situation</td>
<td>food waste in a school cafeteria</td>
<td></td>
</tr>
<tr>
<td>- There is a need to understand a</td>
<td></td>
<td>- On its own does not address why behaviors,</td>
</tr>
<tr>
<td>physical setting (e.g., schools,</td>
<td></td>
<td>interactions, or processes are occurring</td>
</tr>
<tr>
<td>classrooms)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- When it is difficult to collect</td>
<td></td>
<td></td>
</tr>
<tr>
<td>data from individuals</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Extraction – retrieving data out of (poorly structured) data sources for further analysis

- Medical charts
- Earned media (e.g., newspaper mentions)
- Legal records
Secondary data sources

- Census data
- BRFSS or other surveillance data
- MN Population Center data
Innovative data collection

- Geographic Information Systems (GIS)
- Non-verbal communication
- Photographs, video (You Tube, self-cam, others)
- Pictures, writing, work samples, etc.

Matrix for Documenting Proxemic, Chronemic, Kinesic, and Paralinguistic Information

<table>
<thead>
<tr>
<th>Focus Group Question</th>
<th>Member 1</th>
<th>Member 2</th>
<th>Member 3</th>
<th>Member 4</th>
<th>Member 5</th>
<th>Member 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
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<td>2</td>
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<tr>
<td>3</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

Symbols* such as the following could be inserted into the cells by the assistant moderator, as appropriate:

- hhh: The letter “h” is used to indicate hearable aspirations, its length being approximately proportional to the number of “h”s. If preceded by a dot, the aspiration denotes an in-breath.
- >: Talk is faster than the surrounding talk.
- <: Talk is slower than the surrounding talk.
- (0.6): Numbers in parentheses indicate periods of silence, in tenths of a second—a dot inside parentheses indicates a pause of less than 0.2 seconds.
- ::: Colon indicates a lengthening of the sound just preceding them, proportional to the number of colons.
- toda-: A hyphen indicates an abrupt cut-off or self-interruption of the utterance in progress indicated by the preceding letter(s) (the example here represents a self-interrupted “today”).
- ___: Underlining indicates stress or emphasis.
- ^e: A ‘hat’ circumflex accent symbol indicates a marked increase in pitch.
- =: Equal signs indicate no silence between consecutive clauses or sentences.
- LLL: The letter “L” is used to represent laughter.
- SSS: The letter “S” is used to represent sighing.
- FFF: The letter “F” is used to represent frowning.
- PPP: The letter “P” is used to represent passion.
- L ↑: Speaker leans forward while talking, the length of the arrow being approximately proportional to how far the speaker leans.
- L ↓: Speaker leans backward while talking.
- L ←: Speaker leans to the left while talking.
- L →: Speaker leans to the right while talking.

Note: *This table was adapted from Onwuegbuzie et al. (2008). Reprinted with permission of Anthony J. Onwuegbuzie, Sam Houston State University.
NEXT STEPS: PUTTING IT INTO ACTION

Data Collection Methods:

1. Mailed survey
2. Online survey
3. Individual, face-to-face interviews
4. Focus group interview
5. Phone survey or interview
6. Observation
7. Archival data (records and documents)
8. Test
Section 3: Sampling
THE IMPORTANCE OF SAMPLING
Be informed about and sensitive to needs and constraints of your sample

- How to best reach a homeless population?
- How to best reach young adults?
- Are there cultural considerations (e.g., gender, ethnicity, geography, etc.)?
HOW LARGE SHOULD THE SAMPLE BE?

It Depends!

- Do you need to generalize to a broader population?
- At what point will I have reached saturation?
- What is feasible?
- What is ethical?
- Which subgroups need to be represented?
- Which subgroups may be over-represented?
<table>
<thead>
<tr>
<th>A Smattering of Sampling Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Random</strong></td>
</tr>
<tr>
<td><strong>Stratified</strong></td>
</tr>
<tr>
<td><strong>Structured (purposeful oversampling)</strong></td>
</tr>
<tr>
<td><strong>Cluster (specific group – daycare settings, school, etc.)</strong></td>
</tr>
<tr>
<td><strong>Judgment/experts</strong></td>
</tr>
<tr>
<td><strong>Snowball sampling</strong></td>
</tr>
<tr>
<td><strong>Typical case</strong></td>
</tr>
<tr>
<td><strong>Extreme or deviant cases</strong></td>
</tr>
<tr>
<td><strong>Theory based</strong></td>
</tr>
<tr>
<td><strong>Maximum variation</strong></td>
</tr>
<tr>
<td><strong>Critical case</strong></td>
</tr>
<tr>
<td><strong>Success case method</strong></td>
</tr>
<tr>
<td><strong>Homogeneous</strong></td>
</tr>
<tr>
<td><strong>Confirming or disconfirming cases</strong></td>
</tr>
<tr>
<td><strong>Intensity</strong></td>
</tr>
<tr>
<td><strong>MQP qualitative methods – 40+ types of sampling for qualitative studies</strong></td>
</tr>
<tr>
<td><strong>...</strong></td>
</tr>
<tr>
<td><strong>Convenience</strong></td>
</tr>
</tbody>
</table>
ATTRITION – THE CONCEPT

Universe (theoretical target population)

Population (empirical target population)

Original sample

Final sample (data)

sometimes called sampling frame

Loss (non-response)
Start with
N = 3950 records

Keep records where there is at least 1 field from the survey completed
Leaves n = 3695

Clean records with birthdate - visit type mismatches & remove obvious data entry errors based on these fields
Leaves n = 3684

Keep most complete unique record
Leaves n = 3629

Verify visit dates and visit types are in correct order for those with multiple visits
Leaves n = 3628

Match pre- and post- visit surveys
Leaves n = 1403 complete records

Removed n = 255 records where all survey data was missing

Identified n=480 records with severe birthdate-visit type mismatches Removed n = 11 records with obvious data entry errors

Removed total of n = 55 records (n = 4 were exact duplicates and n = 51 were duplicate on PatientID-VisitDate-VisitType-IsPostVisit)

Removed 1 record where 1st record was 15 month visit & 2nd visit was newborn. (rest of the data support 15 month visit, so not sure why there was also a newborn survey after the 15 month); There were 13 people (45 records) with repeated visit types for different visit dates. These were left in as is.

Of the 3628 total records, 2206 were pre-visit & 1422 were post-visit. When combined on PatientID-VisitDate-VisitType, there were 1403 complete surveys (pre- and post-visit), 803 pre-visit only, and 19 post-visit only.
Section 4: Technologies for Data Collection
Examples of Data Collection Technologies

Technology Overview Chart

Technology evolves constantly and rapidly. The sample list below is meant to give you an idea of currently available technology for collaboration and data collection in evaluation and research. We recommend that you search through the variety of options often available for each type of technology mentioned below in order to find that which best meets your needs (or can be adapted to meet your needs). You are also encouraged to be mindful of how using these technologies will promote inclusiveness among the participants or users you are trying to reach.

<table>
<thead>
<tr>
<th>Name</th>
<th>URL</th>
<th>What it does</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Collection</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technologies</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Qualtrics (Research Suite) | http://www.qualtrics.com/research-suite/ | • Create/distribute online surveys  
                        |                                          | • Collaborate/share surveys  
                        |                                          | • Purchase/upload/maintain distribution lists  
                        |                                          | • Collect/report data; automated reports  
                        |                                          | • Mobile/offline options  
                        |                                          | • In-person & kiosk mode data collection  
                        |                                          | • Automatic location tracking of respondents |
| Qualtrics 360      | http://www.qualtrics.com/qualtrics-360/  | • Same as above, and...  
                        |                                          | • Create/distribute online 360 evaluations  
                        |                                          | • Automated reports  
                        |                                          | • Analysis tools |
| Survey Gizmo       | http://www.surveygizmo.com/professional-services/ | • Same as Qualtrics/Qualtrics 360, and...  
                        |                                          | • Integrated 360 function (no need for separate software)  
                        |                                          | • Option to hire Gizmo to conduct data collection and reporting  
                        |                                          | • Mobile users can upload photos on survey through phone camera |
| Poll Everywhere    | http://www.polleverywherelive.com/       | • Polling application for live audience through SMS (some foreign languages supported)  
                        |                                          | • Can be used in-person or remotely  
                        |                                          | • Participants vote using web browser, text messages, or Twitter  
                        |                                          | • Poll can be embedded and seen live in PowerPoint presentation or webpage  
                        |                                          | • Can include texting comments, questions, voting |
Online survey software, fairly flexible

Surveys can be customized, there are also templates

SMS survey invites

Management of respondents, reminders, completes

Some analysis capabilities (be careful with this though!)

Good support, resources, online information (https://www.qualtrics.com/support/)
POLL EVERYWHERE

- Real-time polling ability
- Supports closed-ended or open-ended items
- Phone, web, or Twitter options
- One-time use available
- Limited options for free account

https://vimeo.com/polleverywhere/intro
- Virtual qualitative and collaboration suite
- Supports online focus groups
- Ability to share images, video, hyperlinks, etc. during the focus group
- Ability to split participants into subgroups
- Integration with web cam
- Up to six participants at a time (excluding moderators)
WHAT IS YOUR FAVORITE TECHNOLOGY?

- Survey Monkey
- Microsoft 2016
- Moodle
- Dragon
- Voxco
- Other??
Section 5: Pulling the Plan Together
Nutrition - Breastfeeding Policy Follow-up Survey

Survey description

Purpose:  
- To assess change in the number of state agencies and HOBC employers with breastfeeding supportive policies at their work sites subsequent to participation in the baseline survey and/or ODH breastfeeding training.  
- To describe progress made toward adopting breastfeeding-friendly employee policies, including the number of new policies adopted.  
- To identify factors that support or hinder policy change.  
- To assess the extent to which employer breastfeeding policies meet minimum federal requirements (PPACA).

Respondents:  
- Members of the HOBC, State Agencies, Creating Healthier Communities (CHC) businesses, and other businesses that took part in the ODH breastfeeding training.

Timeline:  
- Baseline: 8/31/2010-9/30/2010  
- Training: 12/2010-current  
- Follow-up - State Agencies: 6/30/2011-8/19/2011 (may change, depending on response rate)  
- Follow-up - HOBCs/CHC businesses: 9/15/11-10/31/11

Sample:  
- Baseline: Treatment - N=95, Control N=13  
- Training: [still being conducted; sample larger than # for follow-up]  
- Follow-up: Treatment - N=xx

Methodology:  
- PDA will create an online survey via Survey Monkey software:  
- ODH will provide respondent email list to PDA  
- PDA will collaborate with ODH to create language for initial invite  
- PDA will send respondents an initial unique email link  
- PDA will send reminder emails to non-respondents (up to three reminders)  
- Fielding period: 06/29/2011 to ~08/19/2011

Response rate:  
- Baseline: Treatment 95/xxx=xx%, Control 13/xxx=xx%  
- Training: [still being conducted; ODH reported close to 100%]  
- Follow-up: goal 70% response rate
Nutrition - Breastfeeding Policy Follow-up Survey

Survey description

Purpose:
- To assess change in the number of state agencies and HOBCC employers with breastfeeding supportive policies at their worksites subsequent to participation in the baseline survey and/or ODH breastfeeding training.
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Response rate:
- Baseline: Treatment-95/xxxx=xx%, Control- 13/xxxx=xx%
- Training: [still being conducted; ODH reported close to 100%]
- Follow-up: goal 70% response rate

Current maternity leave policy:
- Characteristics of current maternity leave policy as related to supporting mothers who choose to breastfeed
  - Length and type of leave (paid/unpaid)
  - Opportunity for flexible/gradual return to work
  - Communication of policy when communicated (1 question)

Current breastfeeding policy:
- Characteristics of current breastfeeding policy
  - Actions toward implementing breastfeeding policy or movement toward model breastfeeding policy
  - Changes made since ODH training
  - Implementation of recommended breastfeeding policy provisions (breaks, space, equipment, education, staff support, other)
  - Communication of breastfeeding policy and provisions

Support for BF policy change:
- Factors that supported/contributed to policy adoption/change:
  - Resources used (Business Case for BF, community resources, etc.)
  - Integration of BF policy into existing policies (BF added or expanded existing wellness programs)
  - Perceptions of policy’s usefulness, benefits, acceptance among employees and management

Barriers to BF policy change:
- Minimum Federal requirements – understanding and confidence/capacity to meet minimum requirements.
- Barriers to policy adoption (space, time, scheduling, non-support from management, multiple locations)
- Invitation to participate in a 30-minute conversation with the external evaluator about successes and challenges related to BF policy change

Agency Demographics:
- Type (HOBCC, State agency, CHC)
- Industry category
- Size (# employees): may change/collapse response options
  - % hourly/salaried employees
  - % female employees (15-44; 45+)
  - HOBCC Region

Participant Demographics:
- Position/role within agency/business
- Participation in ODH training

Collection of Policy:
- Request e-copy of current breastfeeding policy

Prepared by Professional Data Analysts, Inc.
Questions?