

Appendix AA

Alternative Methods & Questionnaire Supplement Plans

States may elect to make some modifications to the data collection procedures of the standard protocol in order to improve participation of hard to reach populations, or to add question supplements to the survey in years when the survey is not revised to address emerging topics. This appendix provides the template for designing plans for these activities. Implementing alternative methods or adding a questionnaire supplement to state PRAMS surveys can only be employed with approval from CDC PRAMS, and CDC and/or local IRBs.

1.0 Alternative Methods

The Yankton Sioux Tribe was funded to conduct a Point-in-Time PRAMS project from 2006 to 2009. This project, called the South Dakota Tribal (SDT) PRAMS project, was intended from the time of inception and response to the PRAMS Funding Opportunity Announcement to target American Indian women from the 9 South Dakota tribes living on and off reservation in South Dakota (and later expanded to include 1 county in North Dakota where tribal land crossed the border). The project staff designed and implemented a series of modifications to the standard PRAMS protocol in an effort to reach American Indian women. Some unique challenges in reaching this population included rural and geographically dispersed population, poor or sporadic telephone coverage, high mobility, mail delivery challenges (such as boxes being located far from the residence), and distrust of data collection and government surveys. The SDT PRAMS project altered the mail delivery portion of the PRAMS Model Protocol to allow for hand delivery or pick up of survey packets from a woman's residence, and delivery of the survey packets during WIC clinic visits. This methodology proved successful in reaching this population of American Indian women; SDT achieved an overall response rate of 73%. A full description of the project can be obtained from the CDC PRAMS team by contacting a CDC PRAMS program manager.

Since the successful implementation of alternative methods by the SDT PRAMS project, other states have experimented with other alternative approaches to reach populations that may have lower participation in PRAMS. For example, as part of the W. K. Kellogg Foundation collaboration from 2012-2015, Michigan PRAMS used text messages to reach sampled women, Mississippi PRAMS partnered with local organizations to conduct prompt calls with women from their communities, New Mexico PRAMS developed a self-administered electronic version (ACASI) of their questionnaire for field works to transport to sites where sampled women could be interviewed, and Louisiana PRAMS established drop-boxes at WIC clinics for women to leave their completed surveys.

Other states may seek to replicate or adapt these methods or to design other alternative methods that may apply to different populations of women in their state. The purpose of

this appendix is to outline the steps necessary to adapt and/or implement alternative methods to improve response rates of women who may not be adequately represented in PRAMS when the standard PRAMS methodology is used..

1.1 Designing Alternative Methods

The SDT PRAMS project was unique for many reasons, including that all the funding was dedicated exclusively to reaching a specific sub-population of women. Likewise, the Kellogg projects were unique to each geographical location where they were implemented. Other PRAMS sites may not have that luxury and will need to consider the outlay of resources necessary to conduct alternative methodologies.

SDT PRAMS developed a process for establishing a new surveillance system along with the actual methodology (or method of survey implementation) that involved engaging community partners and carefully researching the tribal needs and available resources. Based on the SDT PRAMS model, we recommend that PRAMS sites interested in testing or using alternative methods develop an **Alternative Methods Plan**. The elements of this plan are outlined below.

- Part 1 **Statement of Goals:** Describe the intended outcome of the modified methodology (e.g. increase contact rate, increase response rate, or build partnerships). Identify the population or population sub-group that will be targeted.
- Part 2 **Justification of need:** Provide a narrative description explaining why the standard PRAMS methodology is not adequate to achieve the goal outlined in Part 1. Data should be cited to support the stated need.
- Part 3 **Proposed methodology:** Provide a narrative description of the proposed alternative methodology. Justify why you think this approach will work to achieve the goal outlined in Part 1 (higher response rates, etc.) with the target population.
- Part 4 **Sampling:** Explain whether PRAMS sampling will need to be modified to accommodate the alternative methods.
- Part 5 **Data management:** Describe whether or not activities can be accommodated in PIDS. If data management activities will be handled outside of PIDS, explain the procedures that will be used.
- Part 6 **Partnerships:** The effectiveness of an alternative methodology will likely depend on the establishment of partnerships. Identify key partners and describe how you will engage them (e.g. a community liaison or oversight committee). Indicate if these relationships are already established, or if they are not, describe how you plan to develop them.

Part 7 **Resources:** Some alternative methods (such as hand delivery) are costly and potentially hard to sustain. Coordination of different partners or entities can also be time consuming. Outline how your project will obtain additional funding or other resources that may be needed to manage the new methods. Include a staffing plan.

Part 8 **Training Requirements:** If the alternative methodology involves additional staff members, discuss any new training materials that may need to be developed and how training is going to be conducted.

- Provide a draft of new training materials.
- Provide a draft agenda for training to include Human Subjects Training and any additional training (full day, need to travel in staff, or plan to conduct training off-site or in the field)

Part 9 **Timeline:** Provide a timeline for implementation of alternative methods.

Protocol Development Task

Place your **Alternative Methodology Plan** here. The plan should be reviewed by CDC PRAMS and approved by CDC and local IRBs prior to implementation. Refer to the guidance above in developing the plan.

2.0 Implementing a Questionnaire Supplement

In response to the H1N1 Influenza Pandemic of 2009, CDC PRAMS received supplemental funding from CDC's National Center for Immunization and Respiratory Diseases (NCIRD) to fund states that volunteered to implement a questionnaire supplement. The supplement was an extra page of questions added to the end of the survey. These questions were printed on a separate page and stapled into the printed booklets. For phone interviews, hard copy phone versions of the questions were administered to respondents using pen and paper (i.e. not using the WebCATI system, at the time). Supplemental questions about seasonal influenza were added to PRAMS surveys in states that volunteered to include them again in 2010 and 2011. In 2012, the seasonal flu questions were added to the core questionnaire (Phase 7), and the use of flu supplements stopped.

Analysis of the impact of the supplemental pages on response rates was conducted by CDC. Results indicated that the supplement did not have a negative impact on response rates overall, and response to the supplement itself was 95%, among women who returned a mail questionnaire or completed a phone interview. Given the success of this methodology to quickly add questions to the PRAMS survey, which may be difficult due to the cost and labor involved in creating new survey booklets, states expressed interest in implementing questionnaire supplements on other topics.

This appendix allows for documentation of questionnaire supplement implementation by states. States may prepare a **Supplemental Questionnaire Plan**. The elements of this plan are outlined below.

2.1 Designing a Questionnaire Supplement

Part 1 Topic and Justification of Need:

Part 2 Source of Funding:

Part 3 Duration of Supplement: _____

(Number of batches)

Starting Batch: _____

Ending Batch: _____

Part 4 Proposed Methodology: Describe how the questions will be added to the mail survey (i.e. stapled/attached to booklet, or booklets reprinted), how mail data entry will be done (i.e. within PIDS or some other software), how phone data will be collected (i.e. within PIDS or outside of PIDS), how data will be processed and merged with the final year datasets.

Part 5 Question List: Document mail and phone, English and Spanish versions of the questions used

Part 6 Question Testing: Describe the source of the question (i.e. are they from the PRAMS standard list, another state PRAMS survey, some other survey, etc.). If the questions are from another survey, describe any testing that has been done on the PRAMS population prior to implementation.

Part 7 Analysis/Dissemination Plan: Describe how the data collected by the supplement will be used. List partners who are interested in the data. List any potential research questions or MCH priorities that can be addressed using the information from the supplement.

Protocol Development Task

Place your **Supplemental Questionnaire Plan** here. The plan should be reviewed by CDC PRAMS and approved by CDC and local IRBs prior to implementation. Refer to the guidance above in developing the plan.