School Stakeholder Interview Project Final Report

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Prepared by:

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Executive Summary

Introduction and Purpose

The purpose of the School Stakeholder Interview Project (SSIP) was to learn about community stakeholder preferences and priorities to improve Center strategies for recruiting and retaining research study schools and participants, as well as to guide future projects. The Michael & Susan Dell Center for Healthy Living (the Center) 2014-2019 Strategic Plan identified these interviews as a strategy to gain information on systems-level approaches for implementation of best practices and to further develop relationships with community partners.

The objective of the SSIP project was to obtain input from school community stakeholders to ensure priority and relevance of Center-focused public health problems and acceptability of proposed solutions. Information collected in this research study aim to assist with the following goals: planning future Center research projects and outreach activities; planning future community, research, and policy-related resources; and identifying new community connections.

Methods

The SSIP project utilized a mixed-methods approach consisting of an online survey, and either semistructured interviews or focus groups. A theoretical framework using Social Cognitive Theory (SCT) was developed from the research questions and then data were assigned into themes and categories using the framework approach.

Results

There were a total of 47 participants (12 teachers, 10 administrators, and 25 parents). Of these, nine teachers, nine administrators, and 24 parents completed the survey and either an interview or focus group. There were three teachers, one administrator, and one parent who completed the survey, but did not participate in an interview or focus group. The research questions yielded results in the topic areas of: 1) Center Priorities and Strategies, 2) School Recruitment and Retention, 3) Teacher Recruitment and Retention, and 4) Family Recruitment, Engagement, and Retention.

Conclusion

Recruitment, engagement and retention in school-based research through the Center can be a challenging process due to recruiting at four distinct levels: school district, school, teacher, and student (or parent/family). This mixed-methods study divided the multilevel processes down into each recruitment group to provide targeted strategies for the Center to use in future research to build and sustain relationships with school districts, schools, and teachers, and to maximize research study participation from parents and students. Additionally, the information gleaned from this research will help the Center to develop goals and strategies that align with Central Texas community needs. Lessons learned and recommendations are also presented.

Final Report

Introduction & Purpose

The mission of the Michael & Susan Dell Center for Healthy Living is to advance health and healthy living for children and families through cutting-edge research, innovative community-based programs, and dissemination of evidence-based practices. Based at The University of Texas Health Science Center at Houston (UTHealth) School of Public Health in Austin, the Center works with educators, community groups, policy makers, and all those who shape a child's world.

The Center 2015-2019 Strategic Plan identified the need for the School Stakeholder Interview Project (SSIP), to learn more about community stakeholder preferences and priorities. Data from the SSIP will be used to guide future research projects, to improve Center strategies for recruiting and retaining study schools and participants, and to ensure priority and relevance of public health problems and proposed solutions in these communities.

Information collected in this research study will also address three key goals:



Methods

Study Design

The SSIP project utilized a mixed-methods approach consisting of an online survey, and either semistructured interviews or focus groups. A theoretical framework using Social Cognitive Theory (SCT) was developed from the research questions (Bandura, 1986). The NVivo program (QSR International) was used to assign data into themes and categories using a theoretical framework approach (Ritchie, Lewis, Nicholls, & Ormston, 2013).

<u>Timeline</u>

The SSIP project began in the summer of 2016 and was funded directly through Center infrastructure monies, with no dedicated external funding. Center operations and project staff, as well as Dell Health Scholars, participated in the project and met once or twice a month throughout the project cycle. In the fall of 2016, Sarah Bentley was identified as the project coordinator (see timeline figure for overview).

In October 2016, an internal focus group was conducted with Center project managers, who work within the school sector, to provide direction for the research questions. Based on the internal focus group results, SSIP staff worked in the fall to create the survey and interview questions. The instruments, along with protocols were submitted to the UTHealth Committee for the Protection of Human Subjects (CPHS) in December 2016 for Institutional Review Board approval. The project received approval by expedited review from CPHS in January 2017. In the spring, 9 staff received training on conducting semi-structured interviews (led by staff member Kacey Hanson and Dell Health Scholar, Leigh Ann Ganzar) and the survey and interview questions were piloted among Center staff. Simultaneously, the project coordinator began to approach school districts to obtain appropriate approvals.

Approval was received from 5 school districts. In the spring, staff began to recruit schools and individuals. Throughout the summer and fall, participants were continuously recruited and participated in the survey and interviews. Participant recruitment (n=47) and data collection were completed in late October 2017. Beginning in September, three interns and volunteers began to transcribe and verify the English audio recordings. The Spanish language audio recordings were transcribed, translated into English, and then verified by an intern and a volunteer. In late September, two staff members (Sarah Bentley and Leigh Ann Ganzar) began to code the transcripts. Half of the transcripts were double-coded, but since agreement level was high, double coding them all was deemed unnecessary. Coding of initial themes was complete in November. Data analysis, including summarizing, interpreting and finalizing themes, was finalized in December. At the time of writing this report, internal dissemination is planned for the Center in the first quarter of 2018, with submission of manuscripts and creation of infographics and/or white papers planned for the second quarter of the year.

COMMUNITY	/ INTERVIEW PROJECT TIMELINE
une 2016	
Project initiation	
ecember 2016	
Finalize survey and intervie RB submission	ew questions
nuary - March 2017	
RB approval School district approvals Semi-structured interview t Pilot survey and interviews	
pril - October 2017	
School and participant recr Conduct surveys and interv	
eptember - November 2017	7
School and participant recr Conduct surveys and interv	
ecember 2017	
Data analysis: summarize, ii	nterpret, and finalize themes
nuary - June 2018	
Dissemination	

- Report findings to Center
- Submit manuscript for publication, prepare white paper/infographics

Study Participants

Study participants were residents of Central Texas, and parents, teachers and administrators associated with Title 1 schools in the following school districts: Austin ISD, Hays Consolidated ISD, Manor ISD, Pflugerville ISD, and Round Rock ISD. See participant demographics in Tables 1 & 2.

Table 1: Teacher and administration participant characteristics for School Stakeholder Interview	
Project (n=22)	
Number (Deveent)	

		Number (Percent)
Sex	Female	21 (95.5)
	Male	1 (5.0)
Race/	ethnicity	
	Hispanic	5 (25.0)
	White	12 (60.0)
	African American	3 (25.0)
Job ro	ble	
	Teacher	12 (57.1)
	Classroom	4 (33.3)
	Physical education	8 (66.7)
	District level administration	9 (42.9)
Years	of work in education	
	1-5 years	2 (9.1)
	6-10 years	1 (4.5)
	More than 10 years	8 (86.4)

Table 2: Parent participant characteristics for School Stakeholder Interview Project (n=25)

		Number (Percent)
Sex	Female	25 (100)
	Male	0 (0)
Race/	/ethnicity	
	Hispanic	21 (84.0)
	White	3 (12.0)
	African American	1 (4.0)
Assist	ance received	
	None	5 (20.0)
	Women, Infant, and Children (WIC)	13 (52.0)
	Medicare	3 (12.0)
	Children's Health Insurance Program (CHIP)	4 (16.0)
	Temporary Assistance for Needy Families (TANF)	1 (4.0)
	Free/reduced school meals	8 (32.0)
	Other	3 (12.0)
Has 2	or more children attending:	
	Elementary school	20 (69.0)
	Middle school	7 (24.1)
	High school	8 (27.6)

Recruitment

Participants were recruited by asking for Center project managers' recommendations for prior research study contacts within the school districts. These individuals were contacted by email or phone, and then invited to participate in the survey and interview. In some cases, staff also visited previous study schools to drop off recruitment letters [Appendix A], along with the district-required campus recruitment and agreement form. Any person who declined was sent a thank you email. Subjects who accepted were sent an email confirmation with a secure REDCap survey link and the interview was scheduled.

School contacts were also asked to recommend other teachers, administrators or parents who may be interested in participating. Parents were recruited in two ways: 1) flyers posted in the school [Appendix B], and 2) school personnel sharing the opportunity with parents (email, phone call, in person) and having them contact the project staff directly if they were interested. All participants received a \$25 gift card for participating. Subjects who agreed to participate were sent an email confirmation with a secure REDCap survey link and the interview was scheduled.

Data handling and record keeping

All participants were assigned an identification number to protect their identity. Participant responses were transcribed from recordings of the interviews. All recordings were stored on a secure server. Once all data analyses are completed and reports/papers are published, the audio recordings will be deleted per UTHealth IRB guidelines. All survey data are currently stored on the REDCap servers and the interview transcripts are stored on a secure server at UTHealth School of Public Health.

Study Instruments

Survey

Online surveys [Appendix C] were distributed via email and contained an informed consent statement, which stated that by completing the survey, they agreed to participate in the survey and interview. Two distinct surveys were developed: one for parents and one for teachers and administrators. Both surveys collected basic demographic information, including race/ethnicity, gender, school district, and assistance received. Survey questions were modeled after SPAN Health Policy Survey questions, which have been evaluated for face validity and previously used in similar studies (Kelder et al., 2009; McCullum-Gomez, Barroso, Hoelscher, Ward, & Kelder, 2006). The process involved Center staff creating the questionnaire, which was later revised and approved by the project Principal Investigator. The survey was then created on the UTHealth REDCap database.

<u>Parent survey</u>. The parent survey asked where participants receive health information for their children, how their child's school shares health-related information with them, health program awareness, interest in particular types of programs for themselves or their children, facilitators for participation, and incentive preferences. The parent survey was also translated into and disseminated in Spanish by Center staff. For the focus groups, parents completed the survey on paper rather than the online version. Responses were then entered into REDCap.

<u>Teacher and administrator survey</u>. The teacher and administrator survey asked for the participant's role (job title) and how long they had worked in education. Similar to the parent survey, the survey asked where they receive health information to share with families, how the school or district shared health-related information with families, and health program awareness.

Interviews

Center staff developed the questions, using similar questionnaires from Center projects and a literature review (Kelder et al., 2009; McCullum-Gomez et al., 2006). After completing the online survey, participants were scheduled for an interview. Interviews were conducted either in person or over the phone by Center staff and GA. To begin, the interviewer read the confidentiality statement and asked permission to audio record the interview. Then the interviewer began to ask the participant the semi-structured interview questions [Appendix D], utilizing follow-up questions and probes as needed.

<u>Parent interview</u>. The parent semi-structured interview guide served to explore parents' preferences and priorities around health programming in their child's school. Working from the results of the survey, interviewers tailored the interview questions and probed participants to elicit the intricacies and depth of views held by parents. The interview guide asked questions about program awareness, community health needs, facilitators and barriers to program participation, communication methods, recruitment incentives, and ideas for potential partnerships.

<u>Administrative interview</u>. The administrative semi-structured interview guide provided a qualitative method for gathering district administrators' views on how to best work with research institutions, teachers, and parents. Question topics covered describing the "best" school-based health programs and how they address the community's needs, best practices for recruiting into research projects, how to engage schools to participate fully, program sustainability, barriers to participating in school health programming, best ways to communicate with parents and teachers, priorities for Center strategic planning, ideas for new organizational partnerships, and how to continue long-term partnerships with schools and districts.

<u>Teacher interview</u>. The teacher semi-structured interview guide provided a framework for learning about teacher's opinions and ideas with regards to health programming within schools. Interview questions asked about which school-based health programs were the best and why, how they address the community's needs, how to engage teachers to participate fully in research projects, barriers for teachers to participating in school health programming, best ways to communicate with parents and teachers, priorities for Center strategic planning, ideas for community partnerships, and how to continue long-term partnerships with schools.

All interviews concluded with an opened-ended question to determine if the participant had anything else to add. Interviewers also asked if there was anyone else at their school or district they recommend we interview. Finally, the interviewer thanked the participant and discontinued the audio recording.

Focus Groups

Three focus groups were planned to gather participant feedback. The focus group questions were adapted from the interview questions. At the beginning of the focus groups, the facilitator read the confidentiality statement and asked permission to audio record the focus group [Appendix D].

<u>Administrative focus group</u>. District administrators completed the online survey prior to the scheduled focus group. The focus group questions mirrored the administrator interview question guide, with a focus on facilitators and barriers for conducting research with school districts. Because the administrators were from the same district, questions were tailored to be specific to their district. Other questions were comparable to the administrative interview guide.

<u>Parent focus group</u>. Participants of the parent focus groups completed a paper survey before the focus group. The focus groups were conducted by Center staff in Spanish and facilitators used the same questions asked during the interviews.

Data Analysis

The recordings of the interviews and focus groups were anonymously transcribed verbatim. Interviews and focus groups that were conducted in Spanish were transcribed verbatim and then translated into English. Transcripts were then verified for accuracy by second person. All transcripts were uploaded into NVivo (QSR International's NVivo 11 Software). Two research staff coded the transcripts, using a theoretical framework (Table 3) based on SCT, with initial themes deductively identified from our research questions (Gale, Heath, Cameron, Rashid, & Redwood, 2013).

SCT Construct	Definition	Related Codebook Categories	
Knowledge of programs and research	Awareness of the programs and events related to physical activity, nutrition, and childhood obesity in community	 Knowledge of existing programs Communication methods for parents 	
Knowledge of recruitment process	Awareness of the research recruitment process at the district level	 Knowledge of research recruitment process 	
Parent outcome expectations	Beliefs about the likelihood and value of the consequences of child participating in research or school-based health program	 Reasons for child participating in research Reasons against child participating in research 	
Barriers for teachers	Factors that impede teachers from participating or implementing health programs or curriculum	 Barriers to teachers implementing program 	
Facilitators for teachers	Factors that make implementing health program easier	 Facilitators for teachers implementing program Communication methods for teachers 	

Table 3. Theoretical Framework using Social Cognitive Theory (Bandura, 1986)

Barriers for districts	Factors that impede districts from participating in research	 Barriers to district participation
Facilitators for districts	Factors that make participating in research easier	 Strategies for long-term partnerships with district Facilitators for districts Sustainability strategies Strengths of research
Reinforcements	Incentive that increases likelihood of participation in research or a health program	 Incentives for participation
Goal setting for Center	Beliefs about priorities that the Center should have over the next 10 years	 Potential new partnerships Goal setting for Center

Thematic analysis approach

The framework approach (Ritchie et al., 2013) was used, which is well suited for analysis of cross sectional descriptive data. Based on the SCT theoretical framework, data were assigned into themes and categories in the coding index, via nodes in NVivo. Themes were then interpreted, summarized, refined, and synthesized through an inductive and iterative process to develop the final core concepts and sub-concepts (Smith & Firth, 2011; Ward, Furber, Tierney, & Swallow, 2013). Original transcripts were also revisited as necessary to ensure accurate interpretation.

	STAGES	PROCESS
	Familiarize	 Becoming familiar with the data Identifying initial themes
NUL	Theoretical Framework	Developing a theoretical framework of recurring themes (see Table 3)
TIN	Coding Index	 Assigning data to the themes and categories in the coding index
CONTINUUM	Summarize	 Summarizing similarities, differences, and associations in data Refining and combining initial themes
	Interpret	 Developing more abstract concepts (from anecdotal to general) Searching for patterns within concepts and themes Revisiting the original transcripts to ensure accurate interpretation

Results

There were a total of 47 participants (12 teachers, 10 administrators, and 25 parents). Of these, nine teachers, nine administrators, and 24 parents completed the survey and participated in either an interview or focus group (Table 4). Three teachers, one administrator, and one parent completed the survey, but did not participate in the interviews or focus groups because they were too busy,

uninterested, or non-responsive. The research questions yielded results in the topic areas of: 1) Center Priorities and Strategies, 2) School Recruitment and Retention, 3) Teacher Recruitment and Retention, and 4) Family Recruitment, Engagement, and Retention.

PARTICIPANTS	Admin	Teacher	Parent	Total
Survey only	1	3	1	5
Survey & Interview	9	9	24	42
	10	12	25	47

Table 4. Participant sample for School Stakeholder Interview Project.

Center Priorities & Strategies

Feedback from teachers, administrators, and parents about Center priorities and strategies were broken down into goal setting, strategies for sustainability and long-term partnership, and new partnership opportunities. Table 5 presents an overview of the qualitative themes, core concepts, and representative quotes. Table 6 list recommendations for the Center and researchers by topic and audience.

Center goal setting

Goal setting concepts were organized into the following categories: priority topics, priority populations, program component considerations, brand awareness, and reporting results to stakeholders. Overall, study participants said the Center should focus on topics related to active living, sexual health education, healthy eating, home environment, mental health, and obesity. Study participants encouraged the Center to concentrate their efforts on younger grades, specifically Pre-K, Kindergarten, First, Second Grades (in order to reach children early), middle and high school (in which students have fewer opportunities for physical and health education), and non-Title 1 schools (because administrators are seeing poor Fitnessgram results across all schools). A few stakeholders advocated for every day PE in elementary school, stating the importance of physical activity on student behavior and academics. This could have policy implications.

Program component considerations that were mentioned by stakeholders included: updating the research for the CATCH curriculum (18% of administrators & teachers), having shorter lessons for Center-based intervention programs (12.5% of administrators & teachers), and a focus on family-oriented programs (14% of parents, administrators and teachers).

"[CATCH] hasn't changed. I would like to see it updated at least bi-annually with new information or it gets stale and I think that's where we are. We've done this for thirteen years, the CATCH kit for sure at least the last six, we've done our own changes. I would like to see some newness come through it so that we can provide new information anywhere if it's brain research or whatever." Other topics that stakeholders broached included brand awareness, including increased awareness of the Center in general. Occasionally, participants praised specific Center staff for their work with their school or district.

"Just giving them [Center staff/faculty] the accolades and saying to superintendents, these are a bunch of awesome people. You need to work with them because they do make a change."

Finally, a few administrators expressed the importance of reporting results to stakeholders.

"I think, one thing I've noticed that I think all of the researchers in the district can probably do better on is providing information back to the district, to the campuses, to the principals where they're doing their studies about what they learned and how it can help them. Like, what did we learn that implies policy changes?"

Strategies for sustainability and long-term partnership

Stakeholders had a variety of ideas for how to make programs sustainable, including simpler interventions, giving schools a break between research projects, training staff, and making sure programs are evidence based. The concept of collaborative partnership was another facet of sustainability and encompassed communication, involving districts early in planning, engaging outside of grant work, planning in advance for grants, stakeholder involvement, teacher buy-in, building relationships.

"I think the best way to do that is to continue to talk to them and be a part of their school and be involved with their school. You know just being an active presence there. That you're there to back them up and help them and support them."

Specific stakeholder involvement recommendations included working with school health advisory councils (SHACs), parents, community members, and student wellness teams.

Partnership opportunities

To assist with the identification of key organizations and potential partnerships in the community, parents, teachers, and administrators were asked about which organizations to work with in order to improve the health of their families and community. Participants identified several school-based and community-based groups. School-based partnership opportunities included parent groups, school counselors, and school health advisory councils. Potential community-based partners identified by participants were businesses, churches, non-profit groups, healthcare organizations, and neighborhood associations, with non-profit and community organizations being mentioned by the majority of participants.

"Any of the local churches would be more than willing to step up and offer assistance or even jump in with both feet to help. Especially if it's gonna improve their community"

School Recruitment & Retention

Administrators and teachers were asked about their experiences regarding recruitment and retention with regards to school-based health research. Barriers and facilitators at the school level and teacher level were identified, as well as best methods for communicating with teachers.

School Barriers

Participants identified the two main barriers to conducting research in schools as competing priorities and insufficient human resources, although research fatigue was also mentioned. Competing priorities included academics, state testing, lack of support for the Whole School, Whole Child, Whole Community (WSCC) model and principal buy-in (CDC, 2018).

"What I have to work hard on is principal buy-in, making sure it's their idea and helping them understand how these programs help lead to improved academics overall. Especially because some of our test scores at some of the campuses are lower and they're so focused on the academics and so they don't see a connection there then they are quick to say 'not interested'. It's oftentimes a sales job, not just sales but just helping them clearly understand how this is going to help the child longterm."

With regards to the lack of human resources, participants mentioned a large turnover among teachers leading to the need for curriculum materials to be "start-up friendly" and one senior administrator advocated for "a system where older teachers train the newer teachers". A few people mentioned the need for a designated coordinated school health staff member.

"I think the downfall for our district is that we didn't have a truly designated person who could commit fully to monitoring and providing that support."

School Facilitators

Administrators identified several facilitators for conducting research in schools, including finding key staff to work with, communication, reciprocity, and reinforcements. Participants said that sometimes the principal was the best person to communicate with on campus, but on occasion the contact might be the assistant principal who is in charge of health initiatives. There was some variability in the responses regarding the best staff to work with, ranging from the parent support specialist, to PE teachers and nurses.

"Well first and foremost, the administration at the school has to be aware, has to be included in all of this. They have to be on board. Because if we go around behind them and get approval, but the principal really truly did not want you there. That's a problem. So I think to keep schools engaged, the principal has to be involved in the original process."

Reciprocity, or the idea of social capital, was also a shared concept and included the ideas of building relationships, getting district input when choosing which schools to include in a project, knowing district

processes and timelines, getting buy-in from stakeholders, understanding expectations, and reporting results back. Multiple people said it is important to be able to communicate to the district and campus what is in it for them and to make it a mutually beneficial collaboration, not transactional.

"You have to know how to play the game before you start playing. Know the district rules, know their processes, procedures, their policies, their timelines. And have those expectations out on the table that you all agree with, with basic conflict management skills. Here's what we've agreed to and if something ever happens and we're at this point where it's not working, how do we solve that problem right then and there."

Reinforcements, or the idea of tangible materials, was another school facilitator. These included school incentives and program materials (digital and free curricula).

"A school that's struggling and really being overwhelmed, incentives are not necessarily what helps. I think sometimes incentives as far as we're going to get curriculum free or we're going to get this as a free resource or we're going to get this digitally free because we're participating. Those kinds of incentives I think would help. But gift cards, those kinds of incentives, I'm not real sure if that really makes or breaks a difference as far as recruitment of schools to participate."

Teacher Recruitment & Retention

Administrators and teachers were asked about their experiences regarding recruiting and engaging teachers to participate in school-based health research. Barriers, facilitators, and communications methods are reported below.

Teacher Barriers

An overwhelming majority (75%) of teachers identified the main barrier to implementing research in schools was competing priorities. This concept included teachers being expected to do too much, not having enough time, testing, and not believing teaching health was their job.

"Sometimes I think it's just they are so overwhelmed with the testing. And you know the tutoring and the extra lesson plans and all that kind of stuff. They don't want to have to implement something like that in the classroom right. How do you make it work with everything else?"

Teacher Facilitators

Main outcomes for teacher facilitators were being a teacher who values health, reinforcements, implementation support, and ease of use. Many teachers and administrators agreed that teachers who were personally motivated or passionate about health were more likely to implement programs better.

"Health is important to some teachers, and health is not important to other teachers. So teachers aren't really gonna do it unless they find the importance in it." Reinforcements, specifically cash, snacks, and classroom supplies, were mentioned as effective for teacher recruitment.

"I mean honestly, with the way that education's going, we don't even have money for paper right now. So it's like, finding out what teachers need and then figuring out a way to get them something. 'Cause we're doing so many things, and we're paying for so many things out of our pockets, you know?"

Participants advocated for more implementation support for classroom teachers, primarily in the form of having others help with teaching intervention lessons. Specifically, they suggested other school staff, research staff, and parent volunteers. More training for teachers was also cited as valuable for supporting the implementation of research.

"I think really if they just try to tie in some of our health services people so like our nurses come into the classes and the counselors meet with the kids so the teachers – it's not on their plate. Put it on our plate, like the physical education teachers because we all have that part of our curriculum we have to teach certain things about health."

Ease of use of intervention materials was a common concept. Stakeholders reiterated the importance of having adaptable and easy to access materials, including the ability of teachers to be able to access materials on already existing platforms (i.e. Canvas, Blackboard) and online. Some also mentioned that it was imperative that the materials be aligned with TEKS (Texas Essential Knowledge and Skills). The use of video and apps, like *Brain Pop®* and *Go Noodle®* received multiple kudos. Teachers also said it was important to keep the lessons short and simple, noting that a 30 minute lesson is not feasible for classroom teachers.

"It should be simplistic enough that the teachers don't have to do a lot of thinking. It's pushing a button and the kids are listening to it. Or it's a prompt that they just put up and the kids are writing about it. Something that's just really simplistic for them because more and more they feel like they keep on getting things thrown at them."

Communication with Teachers

Teachers and administrators were asked about the best communication methods for teachers. In general, in person (staff meetings, professional development) was the best method, but electronic (email, social media), print, and through nurses were also cited. The majority (63%) of teachers said that electronic methods were good, while far fewer (30%) of administrators thought this was a good means of communication for teachers.

"I think the best way is to go to a teacher and go to meetings. There are days we have to stay there for teacher's faculty meetings. When you send e-mails they see it and a lot of them just delete it."

Family Recruitment, Engagement, & Retention

Parents were asked about their perceptions of community needs, existing opportunities, and methods for recruiting, engaging and retaining families and children in research studies. Outcome expectations, barriers, facilitators, reinforcements, and communications methods are reported below.

Perceptions of community needs

Participants were asked about community health needs that were not currently being adequately addressed by the existing programs and resources. Parents reported that healthy eating and active living were prominent community health needs. The theme of healthy eating included the need for cooking classes and education about sugar and sugary beverages. Physical activity programs in the community, physical education in school, summer activities for children, and low cost opportunities were the active living needs cited by participants. Additionally, parents mentioned that there were policies, systems and environmental community health issues not being adequately addressed such as food access, and access to quality parks, trails, sidewalks and shared use facilities. Finally, participants expressed the need for healthcare services such as diabetes care and education, and mental health services.

Existing environmental opportunities

Participants were asked about the existing health promoting opportunities and programs in their external environments (schools and communities). Most parents were aware of several school-based opportunities for their children, including physical activity opportunities through the physical education department, and healthy eating promotion programs through the food service department, with 59% of the parents reporting their child has participated in school-based programs to promote physical activity and 61% had children who participated in a school health fair in the last two years. One parent mentioned the coordinated school health program. Parents also reported awareness of many community-based health promotion opportunities. The majority of parents reported they knew of sports programs in their communities, and a few parents were aware of farmer's markets and community physical activity programs such as Zumba classes.

"Our P.E. coach attempts to, you know, keep the kids active in school, but other than that I don't know any community programs."

Communication methods

In order for children and families to be involved in research and health promotion programs, they need behavioral capability to participate by having the knowledge about the programs. Participants were asked about their preferred and effective communication methods to receive knowledge and information about research opportunities. Most parents reported that multiple methods of communication were necessary from the school to receive the information, including electronic based (email, social media), phone-based (text message, phone calls), print-based (flyers home, signs at school), and in person. In the pre-interview survey, almost all parents (80%) reported that schools currently use student folders to share flyers as a communication method for health information, but during the interview and focus groups, some parents reported that flyers sent home from school can get lost or not reach the parents. The most common current methods of communication from schools

reported by parents were through student flyers (79.2%), by phone call (75.0%), and through newsletters (66.7%). In the focus groups, Spanish-speaking parents relayed that they do not use email, and that other forms of communication were necessary to receive health-related information from the school.

"I know my kids do bring home flyers from the school, and the school calendar, but sometimes the school isn't always good about getting that to us. And there's kind of a window of opportunity if they send it... if they send it home too far in advance, people forget, which I can say I'm guilty of, too. Or if they send it, we'll get it like the same day it's happening and forget it, we can't get it into our schedules."

Outcome expectations

Outcome expectations are the anticipatory outcomes of engaging in a behavior. Parents were asked about what they expected for their child and families when participating in health related research. The majority of parents reported positive outcome expectations, including benefiting the health of their children and families and benefiting their wider community through social support and modeling. The only negative outcome expectation reported was that it would interfere with other activities.

> "I would be convinced if it's in relation to health and for my children, my family, and my community. Many parents are not here, they do not come, but when we start we could maybe invite them and teach them."

Barriers

Parents were asked about what prevented them or made it hard to participate in health-related research. Parents reported that a main barrier to participating in research or programs was lack of resources, including lack of childcare, lack of transportation, lack of time, and high rates of relocating households.

"Because sometimes there are mothers that have younger children. If it was a family place it would be perfect because like that one would take them. Because many of us don't have someone to take care of them and then it would be a large barrier."

Additionally, parents reported that communication was a barrier to participation. Communication barriers include language barriers in non-English speaking communities, and lack of awareness among parents about the available opportunities in their communities for participating in research or health promotion programs.

Facilitators

Parents were asked about factors that would make it easier to participate in health related research or programs. Convenience and programs based on family values were the main themes expressed by parents. Convenience of the program includes providing childcare for children not involved in the program, providing food, especially if the program occurs during mealtime, and timing of the program, especially if the program is held after-school, which many parents described as an opportune time to fit

in their schedule. Additionally, 88% of parents reported a facilitating factor for participation was having the program or research located close to home (within a half mile).

"Well they always ask about the time, and for those of us that work it is very difficult. For me it would be perfect if there would be program after school because I think that is when parents have a little bit more time. During the school the majority of parents are working but maybe the evening."

Parents also reported that if the program or research involved activities for the whole family or focused on health of the whole family that it would be easier to attend.

Reinforcements

Reinforcements are responses to a person's behavior that affect the likelihood of continuing the behavior. Participants were asked about which positive reinforcements (incentives) would make the parent or her child more interested in participating in a health-related research project, with 76% of parents reporting they would be likely to participate or definitely participate with water bottles or t-shirts as incentives. Participants mentioned that incentives related to health, material or monetary incentives, or certificates would encourage them to participate. Additionally, 36% of parents reported that no incentive was necessary to garner their interest because the benefit of attending and the activities for their children was motivation enough for their families, as previously mentioned. The majority of participants reported that an incentive related to health or the topic of the program would increase their likelihood of participating, such as a gym membership, or gardening supplies.

"If we're gonna teach them to try and exercise more, then how much is a yoga mat? 'Here ya go! This is what we're gonna teach you today. Here's a yoga mat, thanks for coming. Here's a video on how to do it, or here's some handouts on how to do it.""

Parents also reported that material or monetary incentives, such as gift cards (68%), cash (56%), or larger raffle items (64%) would incentivize their families to participate. Additionally, a few parents reported that they would be motivated to participate by the recognition provided by certificates from the program or research.

Core Concept	Sub-Concepts	Representative Quote		
Center Priorities & Strategie	Center Priorities & Strategies			
Goal setting	-Priority topics	I think our district would really		
	-Program component considerations	like to know, what are the		
	-Priority populations	results? Are we doing good? Are		
	-Brand awareness	we going down the right path?		
	-Reporting results to stakeholders	What do we need to do better?		
Strategies for sustainability	-Collaborative partnerships	I think it'd be great if we could		
and long-term partnership	-Sustainability of programs	all come together and meet to		
		talk about needs, gaps,		
		challenges and how we can		

Table 5. Qualitative them	es: Core concepts, sub	-concepts, and re	presentative quotes.
Table 5. Quantative them	cs. conc concepts, sub	-concepts, and re	presentative quotes.

		work as a team as opposed to working in silos.
Partnership opportunities	-School - based -Community - based	"Community-wise, we need to get the businesses involved. I think you could look at doing the chamber of commerce."
School & District Recruitme	ent Engagement & Retention	
Facilitators	 -Identifying key staff -Reciprocity -Reinforcements 	you kinda gotta develop your own relationship with campuses.
Barriers	-Competing priorities -Insufficient human resources -Research fatigue	I think the downfall for our district is that we didn't have a truly designated person who could commit fully to that, to monitoring and providing that support.
		 It's oftentimes a sales job, not just sales but just helping them clearly understand how this is going to help the child long- term."
Teacher Recruitment, Enga	gement & Retention	
Facilitators	-Teachers who value health -Reinforcements -Implementation support -Ease of use	Making it really easy of what do they have to do? If it's disseminate "blablabla" then have that stuff prepackaged ready to go.
Barriers	-Competing priorities	they have so many things on their plates. Convincing them that academics is not all that we need to do right now, we need to focus on their health.
Communication	-In person -Electronic -Print	By far email. Teachers are living and breathing by their email. Not everybody, even our teachers within our department don't do a good job of checking email but that's going to be the best method.
Family Recruitment, Engage		
Perceptions of community needs	 -Healthy eating -Family based programs -Active living -Policy, systems, and environmental needs 	<i>"I think that the healthy eating is definitely a big one. I don't always agree with some of the food choices, because obviously the district's on a budget. They</i>

	-Healthcare system	don't always get to do the healthier choices"
Awareness of existing environmental opportunities	-School - based -Student health services -Community - based	<i>"I think they do have signs posted within the cafeteria that try and remind kids to eat healthy."</i>
Outcome expectations	-Positive -Negative	"More than anything information that the kids receive. That is the most important since I tell them but they don't believe me. It benefits them to know this information."
Facilitators	-Convenience -Align with family values	"If food is served, that does make it easier for us, because then we don't have to worry about getting home and cooking, and getting the kids to bed at ten o'clock at night."
Barriers	-Lack of resources -Communication barriers	But if you have to take a bus, or, not a lot of time. Or, a place that children could get to on their own, 'cause there's a lot of children in our neighborhood who are doing things on their own.
Communication methods	-Electronic-based -Phone-based -Print-based -In person	"Our school does have a Facebook page not even directly through the schools but through the school district itself, would probably be a good way for you guys to get information out."
Reinforcements	-No incentive needed -Incentive related to healthy living -Material or monetary incentive -Certificate of recognition	<i>"If we're gonna teach them to try and exercise more, then how much is a yoga mat?"</i>

Торіс	Audience	Recommendation
		 Update CATCH curriculum research
		 Expand partnerships into diverse sectors
Research &	The Center	(businesses, faith-based, etc.)
Implementation		 Address priority topics: healthy eating, active
		living, sexual health education, home
		environment, mental health, and obesity
		 Intervention program activities & lessons
		should be short and simple to implement
		 Intervention program curriculum & materials
		should be available digitally and free
		 Create family-based programs
		 Report results back to schools in a timely
	Researchers	manner
	ACJCUICIEI J	 Prioritize intervention programs Pre-K – 2nd
		grade
		 Develop health education programs for middl
		and high school
		 Conduct research in non-Title 1 schools
		 Advocated for every day PE in elementary
		school
		 Be aware of each district's research
		recruitment process & policies
		 Prioritize relationship building throughout
		process (before, during and after project)
Recruitment &		 Emphasize connection between health &
	Schools	academics (WSCC) to encourage principal &
Engagement	5010015	administration buy-in
		 Identify key gatekeeper in each school and
		involve him/her in implementation &
		communication
		 Designate a research coordinator to provide
		implementation support and monitoring
	Teachers	 Reach teachers in person at staff meetings and
		professional development
		 Emphasize the health and/or education
		benefit to the child
		 If program involves whole family, provide
	Parents & Children	childcare and food
		 Communicate through all channels
		 Communication should be easily understood
		and disseminated in multiple languages

Incentives	Teachers	 Provide monetary incentives, free curricula, and/or classroom supplies
	Parents & Children	 Provide monetary incentives, and/or connect incentives to program content to reinforce messages

Conclusions

The purpose of this project was to gather input from school stakeholders, including district and school level administration, teachers, and parents of students. Results from the interviews and focus groups provide evidence for perceptions of community needs, gaps in services, partnership strategies, as well and barriers and facilitators to participating in Center research. The SSIP project provided input on stakeholders' preferences and priorities, ensuring relevance of Center public health priorities and acceptability of proposed solutions. Furthermore, through the process of conducting these interviews, relationships with school partners and districts were strengthened. Data collected in this research project will be useful for planning future Center research projects and outreach activities; planning future community, research, and policy related resources; and identifying new community connections.

Recruitment, engagement and retention in school-based research through the Center can be a challenging process due to the need to recruit at four distinct levels: school district, school, teacher, and student (or parent/family). These results provide input on systems-level approaches for implementation of best practices for conducting research in the school setting. This mixed-methods study provided targeted strategies for the Center to use in future research to build and sustain relationships with school districts, schools, and teachers, and to maximize participation from parents and students. Additionally, the information gleaned from this research will help the Center to develop goals and strategies that align with Central Texas community needs.

Lessons learned

While this was a very successful project, there were a few lessons learned that might be of use to future Center projects that involve qualitative methods. Due to the nature of the recorded interviews over the phone, occasionally, the audio quality was sub-par due, with in-person interview resulting in higher audio quality. For future phone interviews, it would be worth it to explicitly state in protocol for the staff member to tell participant ahead of time that we will be recording and ask them try not to be multitasking, eating, or drinking during the phone call. It should also be best practice to listen to audio right after, especially if asking for referrals (i.e. snowball recruitment). Another solution would be to have staff write down separately the names of the referrals for efficient follow-up.

Due to IRB reporting (continuing review) requirements, it should be best practice to track both participants and non-participants in one spreadsheet. IRB requests information on people who were approached and did not participate, as well as their reason for declining.

On a final note, it would be ideal to begin thinking about analysis earlier in the project cycle. One way to do this would be to begin to pull out themes as the project progresses and from interview notes. This would help to develop a complete codebook in a more timely manner.

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Appendices

Appendix A – Recruitment letter & phone call script



Recruitment letter

The UT School of Public Health and Michael & Susan Dell Center for Healthy Living invites you to participate in the Community Stakeholder Interview Project. XXX recommended that we call to see if you might be able to assist us in recruiting parents, teachers, and administrators <u>from XXX</u> <u>Elementary</u> to participate.

The purpose of this project is to learn more about community preferences and priorities to guide future research projects, as well as improve Center strategies for recruiting and retaining study schools and participants. To give you some background, the Center primarily conducts research studies and surveillance through school-based health programs for children, including afterschool. These programs work to improve children's health, primarily through programs on nutrition, diet, and physical activity and obesity prevention research.

For this project, participants will complete a brief survey (10-15 minutes) and take part in a short interview (30 – 45 minutes) and will be compensated for their participation with a \$25 HEB gift card. Ideally we would interview parents, teachers, and administrators that are familiar with Coordinated School Health, perhaps even including yourself. We have a recruitment flyer for parents that can be distributed to parents or posted in your school.

We must have a signed Campus Recruitment & Agreement to Participate Form in order for anyone in your school to participate, in accordance with the AISD Department of Research and Evaluation. I have attached that form to this letter.

Please feel free to contact me if you have any questions.

Sarah S. Bentley, MPH Project Manager | Community Stakeholder Interview Project

UTHealth | The University of Texas Health Science Center at Houston School of Public Health in Austin Michael & Susan Dell Center for Healthy Living 1616 Guadalupe | Suite 6.300 | Austin, TX 78701 512.587.2107 cell email: <u>sarah.s.bentley@uth.tmc.edu</u> www.msdcenter.org

This project has been approved by the Institutional Review Board of the University of Texas Health Science Center at Houston School of Public Health. This study [HSC-SPH-16-1106] has been reviewed by the Committee for the Protection of Human Subjects (CPHS). If you have questions about your participation as a research subject, call the project coordinator in Austin at (512) 391-1357 or CPHS at the University of Texas Health Science Center at Houston at (713) 500-7943.

Appendix A – Recruitment letter & phone call script

Phone call script

Hi Mrs./Ms. ___,

I'm ____ with the UT School of Public Health and Michael & Susan Dell Center for Healthy Living. XXX recommended that we call to see if you might be able to assist us in recruiting parents, teachers, and administrators from ____ Elementary to participate in the Community Stakeholder Interview Project. Do you have a minute to talk to me about that? [*pause*]

The purpose of this project is to learn more about school stakeholder preferences and priorities to guide our future research projects. For this project, participants will complete a brief survey and take part in a short interview and will be compensated for their participation with a \$25 HEB gift card. Ideally we would interview parents, teachers, and administrators that are familiar with Coordinated School Health, perhaps even including yourself.

First of all, I know that we need to get your permission to do research at your school in accordance with the AISD Department of Research and Evaluation.* Would you be interested in participating? [pause]

I'd be happy to either email you a copy of the Campus Recruitment & Agreement to Participate Form or I could also find a time to come by and have you sign it. Do you have a preference? [pause]

As far as recruitment, I am hoping that you could put me in touch with the Coordinated School Health Team at your school. [*wait for response – try to get names and contact information for specific people*]

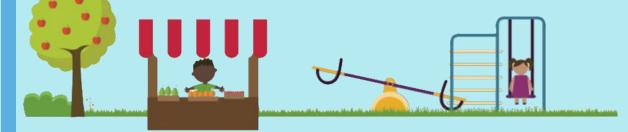
[*if they won't give contact info*] We have a recruitment flyer for parents. Would you be willing to help distribute it to parents or hang it at your school? Would you prefer I email it to you or bring a few copies by your school?

Would you be interested in participating yourself?

*[*if leaving voicemail*] I'd like to discuss this opportunity with you at your earliest convenience. Could you please call me back at _____ or you can email me at _____. Thank you so much for your consideration.

PARENTS

Community Stakeholder Interview Project



You are invited to share your opinion about how to improve health programs for your child, school, and community through a **short survey and brief interview**.

For more information contact us at 512-482-6166 or

Sarah.S.Bentley@uth.tmc.edu. Participants will receive a HEB gift card.

Ver reverso para el español





IRB NUMBER: HSC-SPH-16-1106 IRB APPROVAL DATE: 06/15/2017

PADRES

Community Stakeholder Interview Project



Se le invita a compartir su opinión sobre cómo mejorar los programas de salud para su hijo, la escuela y la comunidad a través de una **breve encuesta y entrevista**.

Para más información contáctenos al 512-482-6166 o Alejandra.B.Gonzalez@uth.tmc.edu. Los

participantes recibirán una tarjeta de

regalo de HEB.

See reverse for English





IRB NUMBER: HSC-SPH-16-1106 MICHAEL & SUSAN DELLUTHEalth IRB APPROVAL DATE: 06/15/2017

Administrator And Teacher Survey

Please complete the survey below.

Thank you!

Community Interview Survey and Informed Consent

Thank you for participating in this community assessment of the Michael & Susan Dell Center for Healthy Living. The purpose of this survey is to learn more about community stakeholder preferences and priorities to guide future research projects, as well as improve our Center strategies for recruiting and retaining study schools and participants in our research studies.

Participating in this project includes giving consent, completing a survey, and participating in a one-on-one interview. By completing this survey, you agree to participate in the survey and interview. We may contact you in the future to follow-up.

There are no right or wrong answers to this survey. You can skip a question if you do not want to answer, and you may stop participating at any time. There is no risk in filling out the survey and the information collected will be kept in a secure location. The survey is only available to researchers and their staff. The results of the study may be published, but results will never mention any person or school by name.

This project has been approved by the Institutional Review Board of the University of Texas Health Science Center at Houston School of Public Health. This study [HSC-SPH-16-1106] has been reviewed by the Committee for the Protection of Human Subjects (CPHS). If you have questions about your participation as a research subject, call the project coordinator in Austin at (512) 391-1357 or CPHS at the University of Texas Health Science Center at Houston at (713) 500-7943.

1. What is your name?

2. What is your school district?

○ Austin ISD ○ Del Valle ISD ○ Hays CISD ○ Manor ISD ○ Pflugerville ISD ○ Round Rock ISD

3. What school are you affiliated with? (N/A if you are a district level administrator)

 \bigcirc Male \bigcirc Female



^{4.} What is your gender?

5. How do you most identify yourself?

○ African American	⊖ White	○ Native American	\bigcirc Hispanic or Latino	\bigcirc Asian	\bigcirc Other: please list
Other: please list					

6. What is your current role?

Principal
 Associate/Assistant Principal
 Teacher

○ District-level administrator

○ Other

Please specify what you teach:

Other job (please specify):

7. How many years have you worked in education?

 \bigcirc Less than 1 year \bigcirc 1-5 years \bigcirc 6-10 years \bigcirc More than ten years

8. How is your school (or if district-level, your district) sharing *HEALTH-related messages, information, or activities to students, parents, or guardians? Please provide answers for each method. *Note: this is not whether your school/district uses these in general, but if they use them for HEALTH information.

	Yes	No	l don't know
Health Fairs	0	\bigcirc	0
School Website	0	\bigcirc	0
Social Media	0	\bigcirc	0
Newsletter	0	0	0
Student folder or backpack	0	0	\bigcirc
Phone call	0	0	0
Text Message	0	0	0
ROBO call	0	0	\bigcirc
Classroom TV	0	0	\bigcirc
PTA/PTO meeting	0	0	0
School menu	0	0	\bigcirc
Marquee signs	0	0	0
Other:	0	0	0

Other form of communication:



What social media platforms?

□ Facebook □ Twitter □ Instagram □ Pinterest □ Other

Other Social media type:

9. Has your school (or if district-level, your district) participated in or conducted any of the following programs or events in the last 2 years?

Coordinated School Health Program (ex: CATCH; GO, SLOW, WHOA)	Yes	No O	l don't know
Health Fairs (ex: Healthy Family Event, CATCH family night)	0	0	0
Weekday Themed Events (ex: Wellness Wednesday, Farm Fresh Friday)	0	0	0
Classroom Activity Breaks or Brain Breaks (ex: GoNoodle)	0	0	0
Programs to promote physical activity (ex: Marathon Kids, Walk to School Day, Walk Across Texas)	0	0	0
Programs to promote safe walking and bicycling (ex: Walking School Bus/Safe Routes to School)	0	0	0
Programs to promote nutrition (ex: GO, SLOW, WHOA)	0	0	\bigcirc
Gardening programs (ex: Junior Master Gardener; Learn, Grow, Eat Go!)	0	0	0
National "Turn off TV Week"	0	0	\bigcirc
American Heart Association's Jump Rope for Heart	0	0	0
Diabetes Walk	0	0	\bigcirc
Texas Round Up 3.4	0	0	\bigcirc
IT's TIME TEXAS (ex: Teach Healthier or Choose Healthier apps)	0	0	0
Fitness Club	0	0	0



Super Cyclist	\bigcirc	0	\bigcirc
Let's Move	\bigcirc	0	\bigcirc
Other program to promote child health:	0	0	0

Other program (please specify):

10. Where do you (or if district-level, schools within your district) get information about health programs to share with students and their families?

	Yes	No	l don't know
Pediatrician/Doctor	\bigcirc	\bigcirc	\bigcirc
Teachers	\bigcirc	0	\bigcirc
School nurse	\bigcirc	0	0
School counselor	\bigcirc	0	0
Parent support specialist	\bigcirc	0	0
Internet	\bigcirc	0	0
Social media (Facebook, Twitter, Instagram, Pinterest, other)	0	0	0
Faith leaders, church, synagogue, temple	0	0	0
Research or academic institutions Other:	0 0	0 0	0 0

Other source of information:

What social media platforms do you use to get information about health programs to share with students and their families?

🗌 Facebook 🔄 Twitter 🔄 Instagram 🔄 Pinterest 🗔 Other

Other social media platforms used to get information:



Parent Survey

Please complete the survey below.

Thank you!

Community Interview Survey and Informed Consent

Thank you for participating in this community assessment of the Michael & Susan Dell Center for Healthy Living. The purpose of this survey is to learn more about community preferences and priorities to guide future research projects, as well as improve our Center strategies for recruiting and retaining participants in our research studies.

Participating in this project includes giving consent, completing a survey, and participating in a one-on-one interview. By completing this survey, you agree to participate in the survey and interview. We may contact you in the future to follow-up.

There are no right or wrong answers to this survey. You can skip a question if you do not want to answer, and you may stop participating at any time. There is no risk in filling out the survey and the information collected will be kept in a secure location. The survey is only available to researchers and their staff. The results of the study may be published, but results will never mention any person or school by name.

This project has been approved by the Institutional Review Board of the University of Texas Health Science Center at Houston School of Public Health. This study [HSC-SPH-16-1106] has been reviewed by the Committee for the Protection of Human Subjects (CPHS). If you have questions about your participation as a research subject, call the project coordinator in Austin at (512) 391-1357 or CPHS at the University of Texas Health Science Center at Houston at (713) 500-7943.

1. What is your name?

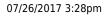
2. What school district does your child attend? *Note: choose one child in elementary school that lives with you most of the time for this answer.

3. What school does your child attend? *Note: use same child from previous answer.

4. What is your gender?

Austin ISD
Del Valle ISD
Hays CISD
Manor ISD
Pflugerville ISD
Round Rock ISD

○ Male○ Female





5. How do you most identify yourself?			 African American White Native American Hispanic or Latino Asian Other, please list 				
Other ethnicity:							
6. Which of the following types of assistance does your family receive?			 No assistance received WIC (Women Infants & Children) Medicare CHIP (Children's Health Insurance Program) TANF (Temporary Assistance for Needy Families) Free/Reduced school meals Other, please list: 				
Other assistance:							
7. How many children do yo	u have in:						
Elementary school? Middle school? High school? 8. Are you the primary caretaker? on same child from questions 2 ar		1 〇 〇 丁 based	2 () () () () () () () () () ()	3 () () ()	4 () () ()	5 or more	

9. Where do you get health information for your child(ren)?

	Never	Rarely	Sometimes	Very Often	Always
Pediatrician	U	\bigcirc	0	0	0
Teachers (ex: classroom, PE teachers)	\bigcirc	0	0	0	0
School nurse	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
School counselor	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Parent support specialist	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc
Internet	\bigcirc	0	0	\bigcirc	\bigcirc
Social media (ex: Facebook, Twitter, Instagram, Pinterest, other)	0	0	0	0	0
Faith leaders, church, synagogue, temple	0	0	0	0	0
Research or academic institutions Grocery stores	0 0	0 0	0 0	0 0	0 0



Confidential

				Appendix C	Page 3 of 6 - Surveys	
Other:	0	\bigcirc	0	0	0	
Other place you get health information:						
From which social media platforms do you get health information for your child(ren)?		 Facebook Twitter Instagram Pinterest Other 				
Other social media:						

10. How does your child(ren)'s school share *HEALTH-related messages, information, or activities with you? *Note: this question is not if the school uses these in general, but specifically to communicate HEALTH information.

	Yes	No	l dont know
Health Fair (ex: CATCH night)	\bigcirc	\bigcirc	\bigcirc
School website	\bigcirc	0	\bigcirc
Social media (ex: Facebook, Twitter, Instagram, Pinterest, other)	0	0	0
Newsletter	0	\bigcirc	0
Student folder or backpack (ex: flyers)	0	0	0
Phone call	\bigcirc	\bigcirc	\bigcirc
Text message	\bigcirc	0	\bigcirc
ROBO call (automated call from school)	0	0	0
Classroom TV	0	\bigcirc	0
PTA/PTO meetings	\bigcirc	0	\bigcirc
School menu	\bigcirc	0	\bigcirc
Marquee signs	\bigcirc	0	\bigcirc
Other:	0	0	\bigcirc
Other place:			
Which social media sites:		 Facebook Twitter Instagram Pinterest Other 	
Other social media site:			



11. Has your child(ren) participated in any of the following programs or events in the last 2 years?

	Yes	No	I don't know
Coordinated School Health Program (ex: CATCH; GO, SLOW, WHOA)	0	0	0
Health Fairs (ex: Healthy Family Event, CATCH family night)	0	0	0
Weekday Themed Events (ex: Wellness Wednesday, Farm Fresh Friday)	0	0	0
Classroom Activity Breaks or Brain Breaks (ex: GoNoodle)	0	0	0
Programs to promote physical activity (ex: Marathon Kids, Walk to School Day, Walk Across Texas)	0	0	0
Programs to promote safe walking and bicycling (ex: Walking School Bus/Safe Routes to School)	0	0	0
Programs to promote nutrition (ex: GO, SLOW, WHOA)	0	0	0
Gardening programs (ex: Junior Master Gardener; Learn, Grow, Eat Go!)	0	0	0
National "Turn off TV Week"	0	0	\bigcirc
American Heart Association's Jump Rope for Heart	0	0	0
Diabetes Walk	\bigcirc	0	\bigcirc
Texas Round Up 3.4	\bigcirc	\bigcirc	\bigcirc
IT's TIME TEXAS (ex: Teacher Healthier or Choose Healthier apps)	0	0	0
Fitness Club	0	0	\bigcirc
Super Cyclist	0	0	0
Let's Move	0	0	\bigcirc
Other:	0	0	0
Other, please specify:			





12. How likely would you be to participate, or allow your child(ren) to participate, in a program that:

Teaches parents how to shop for healthier foods?	Definitely Not	Not likely	Neutral	Likely	Definitely
Teaches parents how to cook/prepare healthier foods at home?	0	0	0	0	0
Provides school-based physical activity programs/resources?	0	\bigcirc	0	\bigcirc	0
Provides school-based nutrition education programs/resources?	0	0	0	0	0
Provides clinic-based (doctor) health education programs?	0	0	0	0	0
Other:	0	0	0	0	0
Other, please specify:		_			

13. Check which items below would make it easier for you or your child(ren) to participate in a health-related research project. You can check more than one.

	Yes	No
Childcare provided	\bigcirc	\bigcirc
Knowing someone else in the project	0	0
Feeling a sense of belonging with the group	0	0
Close to my home (within 1/2 mile)	0	0
Food provided	0	0
Access to transportation (ex: bus route)	0	0
Other:	0	0
Other, please specify:		



14. Which of the following types of incentives would make you or your child(ren) more interested in participating in a research study or program:

	Definitely Not	Not likely	Neutral	Likely	Definitely
Gift Cards	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Cash	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Raffles (chance to win a tablet, ipad, etc.)	\bigcirc	\bigcirc	0	0	0
Other Items such as a water bottle, t-shirt or mug	0	0	0	0	\bigcirc
No incentive	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Other:	\bigcirc	\bigcirc	0	\bigcirc	0
Other, please specify:		_			



Confidential

Parent Survery

Please complete the survey below.

Thank you!

Encuesta de Entrevista Comunitaria y Formulario de Consentimiento

Gracias por participar en esta evaluación comunitaria del Michael & Susan Dell Center for Healthy Living. El fin de esta encuesta es aprender más sobre las preferencias y prioridades comunitarias para guiar futuros investigación proyectos, así como mejorar nuestras estrategias para reclutamiento y retención de participantes en nuestros estudios.

Participar en esto proyecto incluye dar consentimiento, completar una encuesta y participar en un una entrevista. Al completar esta encuesta, usted da su consentimiento para participar en la encuesta y la entrevista. Podemos comunicarnos con usted en el futuro para hacer el seguimiento.

No hay respuestas correctas o incorrectas en esta encuesta. Puede saltarse una pregunta si no quiere contestarla, y puede dejar de participar en cualquier momento. A usted no lo pondrá en ningún riesgo completar la encuesta y la información que se obtenga se guardara en un sitio seguro. Estará disponible solo para los investigadores y su personal. Es posible que se publiquen los resultados del estudio pero los resultados no mencionan cualquier persona o escuela por nombre.

Esto proyecto ha sido aprobado por el Institutional Review Board del Centro de Ciencias de Salud de la Escuela de Salud Publica en la Universidad de Texas en Houston. Este estudio [HSC-SPH-16-1106] ha sido revisado por el Comité para la Protección de las Personas (CPHS, por sus siglas en ingles). Si tiene preguntas sobre su participación, llame al Coordinador del proyecto en Austin al (512) 391-1357 o a CPHS en la Universidad de Texas, Centro de Ciencias de Salud en Houston al (713) 500-7943.

- 1. ¿Cuál es su nombre?
- 2. ¿Cuál es su género?
- 3. ¿Cómo se identifica más?

- O Masculino
- O Femenino
- Afro Americano
- O Blanco
- O Indígena Americano
- O Hispano o Latino
- Asiático
 Otro, por favor escríbalo

 4. ¿A cuál distrito escolar asiste su niño/a? *Nota: elija un niño en escuela primaria que vive con usted la mayoría del tiempo. 			 Austin ISD Del Valle ISD Hays CISD Manor ISD Pflugerville ISD Round Rock ISD 			
5. ¿A cuál escuela asiste su niño/a *Nota: Use el mismo niño/a de la n						
Otro grupo étnico:						
6. De los siguientes tipos de asistencia, ¿cuál recibe su familia?			 No recibo ayuda WIC (mujeres infantes y niños) Medicare CHIP (programa de seguro médico para niños) TANF (asistencia temporal para familias necesitadas) Comidas escolares gratis / reducidas Otro, por favor escriba: 			
Otro tipo:						
7. ¿Cuantos niños/as tiene o	en:					
	0	1	2	3	4	5 o mas
Escuela primaria?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Escuela secundaria?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Escuela preparatoria?	\bigcirc	\bigcirc	0	\bigcirc	0	\bigcirc
8. ¿Usted cuida a sus hijos la may tiempo? * Nota: responda de acuerdo al m	·		⊖ Sí ⊖ No			

* Nota: responda de acuerdo al mismo niño/a de preguntas 4 y 5.



9. ¿Dónde obtiene información de salud para sus hijos?

	Nunca	Casi Nunca	A veces	Casi Siempre	Siempre
Pediatra	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Maestros (ej.: maestro, maestro de PE)	0	0	0	0	0
Enfermera de la escuela	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Consejera de la escuela	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Especialista de apoyo a padres	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Internet	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Redes sociales (ex: Facebook, Twitter, Instagram, Pinterest, otros)	0	0	0	0	0
Líderes de fe, iglesia, Sinagoga, templo	0	0	\bigcirc	0	0
Instituciones académicas de investigación	0	0	\bigcirc	0	0
Supermercado	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Otro:	0	0	0	0	0

Otro lugar donde obtiene información de salud:

¿De cuáles plataformas de redes sociales obtiene información de salud para sus hijos?

FacebookTwitter

Instagram

Pinterest

Otro red social:

Otro red social:



10. ¿Cómo comparte la escuela de su niño/a mensajes, información, o actividades de información relacionados con la *SALUD con usted? * Nota: esta pregunta no es si la escuela utiliza estas en general, pero específicamente para comunicar información de salud.

	Sí	No	No se
Feria de Salud (ex: Noche de CATCH)	0	0	0
Sitio de web de la escuela	\bigcirc	\bigcirc	\bigcirc
Redes sociales (ex: Facebook, Twitter, Instagram, Pinterest, otros)	0	0	0
Boletín de noticias	0	0	\bigcirc
Carpeta o mochila del estudiante (ex: volantes)	0	0	0
Llamada telefónica	\bigcirc	\bigcirc	\bigcirc
Mensaje de texto	\bigcirc	0	\bigcirc
Llamadas automáticas pregrabadas	0	0	0
TV en el salón de clase	\bigcirc	\bigcirc	\bigcirc
Reuniones de PTA/PTO	\bigcirc	0	\bigcirc
Menú escolar	\bigcirc	0	\bigcirc
Rotulo	0	0	\bigcirc
Otro:	0	0	0
Otro lugar:			
¿Cuál red social?		 Facebook Twitter Instagram Pinterest 	

Otro red social:

www.projectredcap.org

Otro



11. ¿Ha participado su hijo en cualquiera de los siguientes programas o eventos en los últimos 2 años?

	Sí	No	No se
Programa coordinado de salud escolar (ex: CATCH; GO, SLOW, WHOA)	0	0	0
Ferias de Salud (ex: Evento saludable de familia, coger familia noche)	0	0	0
Eventos temáticos entre semana (ex: Wellness Wednesday, Fresh Farm Friday)	0	0	0
Descansos activos (ej.	0	0	0
GoNoodle) Programas que promueven la actividad física (ej. Marathon Kids, Walk to School Day, Walk Across Texas)	0	0	0
Programas que promueven seguridad al caminar y andar en bicicleta (ej. Walking School Bus/Rutas Seguras a la Escuela)	0	0	0
Programas que promueven la nutrición (ej. GO, SLOW, WHOA)	\bigcirc	0	0
Programas de jardinería (ex: Junior Master Gardener; Learn, Grow, Eat Go!)	0	0	0
Día Nacional "Apaga la	0	0	0
Televisión" American Heart Association Brinca Cuerda para el Corazón	0	0	0
Caminata para la Diabetes	0	0	0
Texas Round Up 3.4	0	0	\bigcirc
IT's TIME TEXAS (ex: aplicaciones de Teach Healthier o Choose Healthier)	0	0	0
Grupo de ejercicio	0	\bigcirc	\bigcirc
Grupo de ciclismo	0	0	0
Let's Move	0	0	0
Otro:	0	0	0
Otro, por favor especifique:			



12. ¿Qué tan probable sea que usted participe, o permita que su hijo/a participe, en un programa que:

	Definitivamente no	No probable	Neutral	Probable	Definitivamente
Enseña a padres cómo compara alimentos saludables?	0	0	0	0	0
Enseña padres cómo cocinar/preparar alimentos más saludables en casa?	0	0	0	0	0
Proporciona programas y recursos escolares de actividad	0	0	0	0	0
física? Proporciona programas y recursos escolares de educación de nutrición?	0	0	0	0	0
Proporciona programas educacionales de salud en clínicas (doctor)?	0	0	0	0	0
Otro:	0	0	0	0	0
Otro, por favor especifique:		_			

13. Marque cuales de las opciones a continuación le hará más fácil que usted o sus hijos/as participen en un proyecto de investigación relacionado con la salud. Puede marcar más de uno.

	Sí	No
Cuidado de niños disponible	\bigcirc	\bigcirc
Conocer a alguien más en el proyecto	0	0
Sensación de pertenencia con el grupo	0	0
Cerca de mi casa (en 1/2 milla)	0	0
Alimentos disponibles	\bigcirc	\bigcirc
Acceso a transporte (ex: ruta de autobús)	0	0
Otro:	0	0
Other, please specify:		



14. ¿Cuál de los siguientes tipos de incentivos haría que usted o sus hijos/as estén más interesados en participar en un estudio o programa de investigación?

	Definitivamente no	No probable	Neutral	Probable	Definitivamente
Tarjeta de regalo	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
Efectivo	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Rifas (posibilidad de ganar una tablet, ipad, etcétera)	0	0	0	0	0
Otros premios tal como una botella de agua, camiseta o una taza	0	0	0	0	0
Ningún incentivo	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Otro:	\bigcirc	0	0	\bigcirc	\bigcirc
Otro, por favor especifique:					



Semi-Structured Interview Guide - Admin Interview

[Good morning/afternoon]. My name is ______, and I work at the University Of Texas School Of Public Health and the Michael & Susan Dell Center for Healthy Living. Thank you for being a participant in a community assessment of the Center. The purpose of this survey and interview is to learn more about community preferences and priorities to guide future research projects, as well as improve Center strategies for recruiting and retaining study schools and participants. To give you some background, the Center primarily conducts research studies and surveillance through school-based health programs for children, including afterschool. These programs work to improve children's health, primarily through programs on nutrition, diet, and physical activity and obesity prevention research.

Participation in this interview is completely voluntary, and you may choose whether or not to respond to specific questions. There are no right or wrong answers; we just ask that you answer as honestly as you can. There are no risks to participating in the interview, and we will not use your name nor the name of your school in any publications or reports related to this project. Everything you share with us today will be kept confidential, and no one will know your responses. The interview will take approximately 30 to 45 minutes. If you have any additional questions or concerns about the interview or the project, I will be happy to provide you with the contact information of the principal investigator, Dr. Deanna Hoelscher, faculty at the UT School of Public Health in Austin, as well as the UTHealth Committee for the Protection of Human Subjects (713-500-3985). While I will be jotting notes down during our discussion, I would also like to use a recorder to make sure I do not miss anything. Is that okay? Do you have any questions before we begin?

Interviewer: Fill In Following Information

Date of Interview: ___/___/___ Interviewer Initials _____ ____ Location of interview: ______

Admin Interview Questions

*Check they have completed all survey questions and not left anything blank. If any missing, ask this question:

• I noticed you didn't answer ___ on the survey. Did you in mean to leave that blank?

Try to obtain missing information during interview.

1. Which school-based health programs used in your school or

district are the best, and why?

- a. Probe, if needed: Can you think of any other programs?
- b. *If "why" not addressed:* What do you like about those programs?
- 2. How do you feel existing health programs in your school or district address your community's needs?
- 3. Are you familiar with the process of how schools are recruited for our research projects?
 - a. If yes: What could we do to better recruit schools to

participate in our research projects?

b. *If not:* [if they want to know: after applying through the district, we also need approval from principals. We often offer an incentive.]

Do you have any suggestions on how we can recruit

schools to participate in our research projects?

- 4. What could we do to better *engage* schools in participating in our research projects?
 - a. *If needed for clarification*: How could we inspire schools to participate fully in our programs and curricula?

5. What do you see as the strengths of how we currently

implement our research projects in your school or district? (site

specific project(s) if appropriate)

- 6. What ideas do you have about how we can keep a program going after a specific project is over and the Center support staff are gone?
- 7. What are the barriers for your school or district to participating in school health programming?
 - a. How can they be overcome?
- 8. What have you found to be the most effective ways of

communicating with parents?

- a. If needed, probe: Are there specific messages that are effective?
- b. *If not addressed, probe*: What gets parents to come to health-related school events?
- 9. What are the best ways to communicate with teachers?
- 10. What priorities should the Center set for the next 10 years to improve child health with regards to obesity, healthy eating or physical activity?
 - a. *If needed, probe*: Are there any other specific health needs in your community that we should develop programs to address?

11. What organizations do you think the Center should work with to improve the health of the community?

12. How can we continue long-term partnerships with schools?

a. Probe: Do schools need a break between research projects?

13. Is there anything we can do as a Center that would make it

easier for you to implement or engage in our health programs?

- 14. Is there anything else you would like to add?
- 15. Is there anyone else at your school or district who we should

interview?

Thank you for taking the time to talk with me today. Your input will help us to better assess our research at the Center and continue to strengthen our efforts as we move forward!

- If in person: Can you please sign this form so I can give you a gift card?
- *If on phone*: **I will email you a form to fill out so I can mail you a gift card. Please print, sign and return it to me as soon as possible.**

Semi-Structured Interview Guide - Teacher Interview

[Good morning/afternoon]. My name is ______, and I work at the University Of Texas School Of Public Health and the Michael & Susan Dell Center for Healthy Living. Thank you for being a participant in a community assessment of the Center. The purpose of this survey and interview is to learn more about community preferences and priorities to guide future research projects, as well as improve Center strategies for recruiting and retaining study schools and participants. To give you some background, the Center primarily conducts research studies and surveillance through school-based health programs for children, including afterschool. These programs work to improve children's health, primarily through programs on nutrition, diet, and physical activity and obesity prevention research.

Participation in this interview is completely voluntary, and you may choose whether or not to respond to specific questions. There are no right or wrong answers; we just ask that you answer as honestly as you can. There are no risks to participating in the interview, and we will not use your name nor the name of your school in any publications or reports related to this project. Everything you share with us today will be kept confidential, and no one will know your responses. The interview will take approximately 30 to 45 minutes. If you have any additional questions or concerns about the interview or the project, I will be happy to provide you with the contact information of the principal investigator, Dr. Deanna Hoelscher, faculty at the UT School of Public Health in Austin, as well as the UTHealth Committee for the Protection of Human Subjects (713-500-3985). While I will be jotting notes down during our discussion, I would also like to use a recorder to make sure I do not miss anything. Is that okay? Do you have any questions before we begin?

Interviewer: Fill In Following Information Date of Interview: ___/___/___

Interviewer Initials _____ ____

Location of interview:

Teacher Interview Questions

*Check they have completed all survey questions and not left anything blank. If any missing, ask this question:

• I noticed you didn't answer ___ on the survey. Did you in mean to leave that blank?

Try to obtain missing information during interview.

1. Which school-based health programs used at your school are

the best, and why?

- a. Probe: Can you think of any other programs?
- b. *If "why" not addressed*: What do you like about those programs?
- 2. How do you feel existing health programs in your school meet your community's (students, families, staff) needs?

3. What do you see as the strengths of how we currently

implement our research project(s) in your school? (site specific

project(s) if appropriate)

- 4. What could we do to better *engage* teachers in participating in our research projects?
 - a. *Probe*: Can you think of ways we could inspire teachers to participate fully in our programs and curricula?
- 5. What ideas do you have about how we can keep a program going after a specific project is over and the Center support staff are gone?
- 6. What are the best ways for us to communicate with teachers with regards to implementing school-health programming?

7. We know that teachers have a lot on their plates and that time is always an issue. What are some other barriers for teacher to

implementing school health curricula?

- a. How can they be overcome?
- 8. What have you found to be the most effective ways of

communicating with parents?

- a. Probe: What gets parents to come to health-related school events?
- 9. What priorities should the Center set for the next 10 years to improve child health with regards to obesity, healthy eating or physical activity?
 - a. *Probe:* What are your community's specific health needs that we should address through programming?
- 10. What organizations do you think our Center should work with to improve the health of your school and community?
- 11. How can we continue long-term partnerships with schools?
 - a. *Probe:* Do schools need a break between research projects?
- 12. Is there anything we can do as a Center that would make it easier for you to implement or engage in our health programs?
- 13. Is there anything else you would like to add?
- 14. Is there anyone else at your school or district who we should interview?

Thank you for taking the time to talk with me today. Your input will help us to better assess our research at the Center and continue to strengthen our efforts as we move forward!

- If in person: Can you please sign this form so I can give you a gift card?
- If on phone: I will email you a form to fill out so I can mail you a gift card. Please print, sign and return it to me as soon as possible.

Semi-Structured Interview Guide - Parent Interview

My name is ______, and I work at the UT School of Public Health and the Michael & Susan Dell Center for Healthy Living. Thank you for taking part in our Center survey and interview. The purpose of this study is to improve Center plans for enrolling and keeping teachers, parents and students in our research projects. The Center does research studies through in-school and afterschool health programs for children. These programs aim to improve children's health, through programs on nutrition, diet, and physical activity.

This study is completely voluntary, and you may choose whether or not to answer specific questions. There are no right or wrong answers; we just ask that you answer as honestly as you can. There are no risks to giving information in this interview, and we will not use your name nor the name of your school in any published papers or reports having to do with this project. What you share with us today will be kept private, and no one will know your answers. This meeting will take about 30 to 45 minutes. If you have any questions about this project, I will be happy to give you the email and phone number for Dr. Deanna Hoelscher, the project lead at the UT School of Public Health in Austin, as well as the UTHealth Committee for the Protection of Human Subjects (713-500-3985). While I will be taking notes during our talk, I would also like to use a tape recorder to capture what you say. Is that okay? Do you have any questions before we begin?

Interviewer: Fill In Following Information

Date of Interview: ___/___/___ Interviewer Initials _____ ____ Location of interview:_____

Parent Interview Questions

*Check they have completed all survey questions and not left anything blank. If any missing, ask this question:

• I noticed you didn't answer ___ on the survey. Did you in mean to leave that blank?

Try to obtain missing information during interview.

- 1. Can you tell me about some programs in your community or child's school that focus on increasing physical activity and exercise for kids?
- 2. What about programs in your community or child's school that focus on increasing families' access to healthy foods (fruits and vegetables)?
- 3. How do you feel those programs address your family's and/or your community's needs?
- 4. What are your community's specific health needs that aren't being adequately addressed that need support or programs?
- 5. What are some reasons why you would allow your child(ren) to participate in a health-related research project?
 - a. *If needed, probe:* If we sponsored a program to address child well-being and healthy living, how could we make it attractive to parents and children?
- 6. What are some reasons that might keep you or your child(ren) from participating in health-related programs?
 - a. *Probe*: You mentioned <u>XYZ</u>, can you think of ways these issues could be overcome? (*Can refer to survey answers on Q.13 if they can't think of any.*)
- 7. What are the best ways for the Center to share health-related information with you, and why?
 - *a. Probe*: What medium do you prefer, for example something emailed that you can print or all online media? (*Can refer to survey answers on Q.10 if needed; examples, social media, newsletters, flyers*)

b. What methods of communication are not good for you, and why?

8. What would be a reasonable amount of time for you or your child(ren) to participate in a project without compensation?

a. *If needed, clarify*: 1 hour only one time or 1 hour/week for 6-8 weeks?

- **9.** Refer to survey Q.14; only ask the following for questions on which they answered "likely or definitely". **On the survey you said that you or your child(ren) would be "likely" or "definitely" more interested in participating in a study that offered:**
 - a. gift cards. What kind of gift cards would you or your child(ren) like to have?
 - b. raffles. What kinds of raffle items would you or your child(ren)
 be interested in?
 - c. cash. If we did have funding to compensate you, what amount of money would you or your child expect to receive for spending about an hour of your time on one of our projects including such activities as filling out a survey, fitness testing, measuring height/weight?
 - d. other items. What kinds of other items are of interest to you or your child(ren)? (if needed, give examples: t-shirt, water bottle, Amazon gift code)
- 10. What organizations should we work with to improve the health of your family and community? (if needed, give examples: church, businesses, neighborhood associations)
- 11. You've already mentioned some great ideas to improve the health of your family and community, what else would generally improve the well-being of you and your family?
- 12. Is there anything else you would like to add?
- 13. Is there anyone else at your school or district who we should interview?

Thank you for taking the time to talk with me today. Your input will help us to better assess our research at the Center and continue to strengthen our efforts as we move forward!

- If in person: Can you please sign this form so I can give you a gift card?
- *If on phone*: I will email you a form to fill out so I can mail you a gift card. Please print, sign and return it to me as soon as possible.

Focus Group Guide - Admin

Before focus group:

- Send link to online survey to be completed one week ahead from scheduled focus group. The survey contains the consent form.
- As participants arrive, have them complete the gift card form.

[Good morning/afternoon]. My name is ______, and I work at the University Of Texas School Of Public Health and the Michael & Susan Dell Center for Healthy Living. Thank you for being a participant in a community assessment of the Center study. The purpose of this focus group is to hear your thoughts and opinions – as district administrators – about how to improve our plans for enrolling and keeping AISD schools in our research projects. To give you some background, the Center primarily conducts research studies and surveillance through school-based health programs for children. Taking part is voluntary. A decision not to take part in this study will not change the services available to you from the schools in AISD. You may receive no benefit from taking part in this study. The benefit gained may help to improve children's health, primarily through programs on nutrition, diet, and physical activity and obesity prevention research. *[Hand them a copy of the Dell Center brochure with descriptions of projects]*

If you agree to take part in the survey you will agree to a 10-15 minute online survey. There are no known risks to take part in this study. The only possible risk may be breach of confidentiality. This information collected will not contain identifying information, and we will not use your name nor the name of your school in any published papers or reports having to do with this project. What you share with us today will be kept private, and no one will know what you say. An audio recorder is being used to record our discussion. This is merely to make sure that we capture everything that was said. The audio will then be transcribed to a type-written document, and we will not record who is saying what. The audio recording will be kept under lock and key, and/or destroyed after the research has been conducted. Please be respectful of each other, and the opinions that each person shares. Everyone has a different perspective. There

are no right or wrong answers here. Please remember to keep everyone's information confidential. Some questions may not apply to your specific role or department – please just answer as best as you are able. This meeting will take about 1 hour.

[If you have any additional questions or concerns about the interview or the project, I will be happy to provide you with the contact information of the principal investigator, Dr. Deanna Hoelscher, faculty at the UT School of Public Health in Austin, as well as the UTHealth Committee for the Protection of Human Subjects (713-500-7943).]

If you agree to take part in the study your agreement is completion of the survey or you will remain present for focus group discussion.

This research project has been reviewed by the Committee for the Protection of Human Subjects (CPHS) of the University of Texas Health Science Center at Houston (HSC-SPH-16-1106). For any questions about research subjects rights call CPHS at (713) 500-7943.

Admin Focus Group Questions

- 1. How do you feel existing school-based programs that focus on child health & family support address the community's needs?
- 2. What do you see as the strengths of how we currently

implement our research projects in AISD?

- a. What areas could we improve upon?
- 3. What are the barriers for the district and AISD schools to participating in school health programming?

a. How can they be overcome?

4. From a district point-of-view, what could we do to better *recruit* schools to participate in our research projects?

- a. If needed, probe: Do you have any suggestions on the best ways to communicate with schools/principals/parents?
- 5. What are some strategies to make sure we continue our longterm partnership with AISD (referring to research fatigue)?
- 6. What priorities should the Center set for the next 10 years to improve child health with regards to obesity, healthy eating or physical activity?
 - a. *If needed, probe*: Are there any other specific health needs in your community that we should develop programs to address?
- 7. Is there anything else you would like to add?

Thank you for taking the time to talk with me today. Your input will help us to better assess our research at the Center and continue to strengthen our efforts as we move forward!

Focus Group Guide - Padres

Before focus group:

As participants arrive, have them complete the gift card form and the survey. The survey contains the consent form.

Mi nombre es ______, y trabajo en la Escuela de Salud Publica en la Universidad de Texas en el Michael & Susan Dell Center for Healthy Living. Gracias por participar en una evaluación comunitaria del Centro. El propósito de este grupo de enfoque es escuchar sus pensamientos y opiniones - como padres - sobre cómo mejorar nuestros planes para inscribir y mantener a padres y estudiantes en nuestros proyectos de investigación. Para darle algunos antecedentes, el Centro conduce principalmente estudios de investigación a través de programas de salud basados en la escuela para niños. Estos programas tienen como objetivo mejorar la salud de los niños a través de programas sobre la nutrición, dieta y actividad física.

No hay riesgos de dar información en este grupo de enfoque, y no usaremos su nombre ni el nombre de su escuela en ningún artículo publicado o reportes que tengan que ver con este proyecto. Lo que comparta con nosotros hoy será privado y nadie sabrá lo que dice. Se utilizara una grabadora de audio para grabar nuestra discusión. Esto es sólo para asegurarnos de que capturemos todo lo que se dijo. El audio se transcribirá a un documento por escrito, y no vamos a grabar quién está diciendo qué. La grabación de audio se mantendrá bajo llave y / o será destruida después de que la investigación se ha llevado a cabo. Por favor sea respetuoso el uno al otro, y a las opiniones que cada persona comparta. Todos tienen una perspectiva diferente. Aquí no hay respuestas correctas o incorrectas. Por favor recuerde mantener la información de todos confidencial.

Este grupo de enfoque tomará alrededor de 45 minutos a 1 hora. Si tiene alguna pregunta o inquietud adicional sobre la entrevista o el proyecto, estaré encantado de proporcionarle la información de contacto de la investigadora principal (Dr. Deanna Hoelscher, facultad en la Escuela de Salud Publica en la Universidad de Texas en Austin, y del Comité para la Protección de las Personas (713 - 500 - 3985).)

Preguntas del grupo de enfoque de padres:

- ¿Pueden decirme acerca de algunos programas en la escuela de su hijo que se concentran en incrementar la actividad física y el ejercicio para los niños?
- 2. ¿Qué tal programas en la escuela de su hijo que se centran en aumentar el acceso de las familias a alimentos saludables (frutas y verduras)?
- 3. ¿Cómo cree que esos programas abordan las necesidades de su familia y su comunidad?
- 4. ¿Cuáles programas que abordan las necesidades de salud en su comunidad le gustaría ver implementados?
- 5. ¿Cuáles son los beneficios para sus hijos participar en un proyecto de investigación relacionado con la salud en su escuela?
- 6. ¿Cuáles son algunas de las razones que podrían impedir que su hijo participe en un proyecto de investigación relacionado con la salud en su escuela?
 - a. Probe: Usted mencionó _____, ¿puede pensar en las formas en que estos problemas podrían ser superados?
- 7. ¿Cuáles son algunos de los incentivos que harán que Ustedes o sus hijos estén más interesados en participar en un proyecto de investigación relacionado con la salud?
 - a. If necessary, give examples: tarjetas de regalo, dinero en efectivo, etc obtener que sean específicos.
- 8. Nos gustaría colaborar con otras organizaciones en la comunidad para mejorar la salud de su familia y su comunidad. ¿Hay algunas que recomiendan? (iglesias, empresas, etc.)
- 9. ¿Hay algo más que les gustaría agregar?

iGracias por tomar tiempo para hablar conmigo hoy! iSu contribución nos ayudará a evaluar mejor nuestra investigación en el Centro y seguir fortaleciendo nuestros esfuerzos mientras avanzamos!