



health care systems  
research network

# INTERVIEWER TRAINING MANUAL FOR MULTISITE RESEARCH

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## PURPOSE OF THIS GUIDE

The purpose of this guide is to acquaint you with the art and science of survey research telephone interviewing. The guide is to be used in conjunction with interviewer training conducted by study staff. Topics covered are professional ethics, introduction to interviewing, general interviewing practices, active listening, refusal avoidance, and additional considerations for in-person interviewing. Matters pertaining to a specific study are incorporated into each study's training manual.

This brief manual is intended to be an introduction to interviewing for people who have never been formally trained in conducting a research interview. It will not turn a novice into a great interviewer (that requires extensive experience and appropriate personality, and interviewing is not something everyone can do effectively); nor will it teach people how to design their own interviews. The information and techniques that follow will help the interviewer conduct interviews with the goals of obtaining complete and accurate information in a systematic way and maximizing interviewer response.

This guide was developed primarily for telephone interviewing in multisite studies. In-person interviewing may pose some different challenges. We devote a special section for the in-person interviewer.

This symbol  occurs in places where individual sites may have specific information or procedures they want to include.

# ETHICS AND CONFIDENTIALITY

## Institutional Responsibilities

The rights of human subjects are a matter of primary concern to all research study sites. All research organizations, using human subjects, are legally and ethically responsible for the safety and well-being of study subjects. Study procedures are reviewed by the Institutional Review Board (IRB) to ensure that individual respondents are protected at each stage of research. Under the **Health Insurance Portability and Accountability Act of 1996 (HIPAA)**, all HMO Research Network (HMORN) Research Centers must take steps to protect the privacy of "protected health information" (PHI). PHI includes information that we have created or received regarding health or payment for health care. It includes both medical records and personal information such as name, social security number, address, diagnosis, date of diagnosis, etc... In addition the following procedures are strictly adhered to:

- No names are ever associated with the data. Names are never in the reports; reports show statistical data in the aggregate. No one is ever identified or identifiable in any reports. The data management computers are locked and only programmers have the key. Careful procedures are followed to ensure that the identity of individuals will not be compromised
- No one has access to the network or server computers where data is stored except supervisors
- Each institution provide privacy training for employees



*Your site information here*

## Individual Responsibility

Interviewers must make every effort to protect the anonymity and confidentiality of respondents. Interviewers perform a professional function when they obtain information from individuals in personal interviews, and they are expected to maintain **professional ethical standards of confidentiality** regarding what they hear about a respondent.

1. All information about respondents obtained during the course of the research is privileged information whether it relates to the interview itself or includes extraneous observations concerning the respondent's home, family, and activities.
2. Such information is not to be discussed with anyone but project staff.
3. A breach of confidentiality is a serious violation.
4. It is very important that you never conduct an interview with someone you know as a: relative, friend, neighbor, or someone you remotely know. The respondent may feel you are judging him and therefore not respond honestly to the questions. Everyone is entitled to a confidential interview. Knowing the respondent could compromise confidentiality and the integrity of the interview. Basically, if you know the respondent either personally or through a friend or relative, you can not interview that person.

For your own safety:

- NEVER give out personal information about yourself.
- NEVER agree to meet a respondent in person.

- NEVER reveal the actual location from which you are interviewing.

Often you talk to interesting people on the phone. Sometimes you have a conversation that upsets or disturbs you. You may be tempted to talk to someone about it – a close friend or partner, or another interviewer. It is important that you do not do this. You may think that you can describe the conversation without revealing someone’s identity, but consider how very little you must say before someone can be identified. For example, if you were interviewing parents of kids with asthma, and you were amazed by one parent’s account of raising 7 children, 2 of whom have asthma. The parent is doing this alone, because the other parent was killed tragically in an auto accident. Suddenly, your friend says, “I heard about a tragedy like that on the news about 6 months ago...” Suddenly, there is enough information revealed to do very little research to find this person. The link below leads to a description of the scientific study that led to the phenomena of the Six Degrees of Separation:

<http://smallworld.columbia.edu/description.html>

# INFORMED CONSENT

Informed consent is critical to research. It means that the person, who is agreeing to be interviewed, has clearly heard and understood:

1. Who you are
2. Who is doing the research
3. What the study is about
4. What is expected of study participants (time, future contact, any other burden or perceived burden)
5. Participation is voluntary
6. Participant can refuse to answer any question(s)
7. All information is confidential except in rare cases. Examples include where someone is a danger to themselves or others, or, in cases of child abuse
8. Their relationship with their health plan will not be affected

The language of informed consent may vary by site. Consult your own site manager for information about what information must be included at your location. 

## Consent to Talk with a Minor (children under the age of 18)

Children under the age of 18 are not legally allowed to agree to an interview. The only persons who may legally give informed consent for us to talk with a sampled child are:

- Biological parents;
- Adoptive parents (including a stepparent who has adopted the child);
- Legal guardians;
- Foster parents.

An older sibling cannot provide consent for a younger child unless they have legal guardianship of the child. This is a very unusual circumstance.

If you are confident **the adult** providing consent understands the study description and risks and benefits and gives his/her consent to speak to the minor, only then can you ask the minor to participate in the study.

### Assent

For parents/guardians the term used for allowing their children to participate in research is *permission*; for children/subjects, *the term used is assent*. Typically, minors do not have the legal capacity to consent to participate in research, but children should be involved in the process if they are able to assent (i.e., capable of having a study explained to them and/or reading a simple form about it, and giving verbal or written agreement if they decide to participate in the study.) There are circumstances in which minor assent may be unnecessary or inappropriate such as when the capability of the child is so limited that they cannot reasonably be consulted.

The age at which children can assent to participate in research is not dictated by federal legislation. Many institutions use the following or similar age categories to decide how much a child should be involved in the process.

**Children 7 to 12 years old:** In most cases, children this age will be able to participate in the assent process, using a simplified assent form. A separate, more detailed permission form will be needed for the parents or guardians.

**Adolescents 13 to 17 years old:** In most cases, adolescents should be fully informed about a study and give assent to their own participation in the research.

## Confirmation that the Respondent Understands

What if you are not convinced that the adult or other respondent understands their rights and responsibilities? We need to be aware of factors that may contribute to miscommunication and misunderstanding; the respondent may be agreeing to participate without fully understanding the risks and benefits.

### Suggested Language

INTERVIEWER: *"Before we go on, I need to be sure I've told you everything about the study. Would you mind telling me in your own words what I've told you?" (BE SURE TO THANK THE RESPONDENT.)*

If the respondent is able to summarize in a meaningful way, you may proceed. If you get into the interview, though, and find that the questions are not understood, use the language below to terminate the contact.

Also, if it is clear that the respondent does not understand, say:

INTERVIEWER: *"Thank you so much for your time. Those are all of the questions I have for you."*

### Reaffirming informed consent when calling back

Sometimes the respondent will need to be called back after they've heard the Risks and Benefits Section of the interview. The next time the respondent is contacted before beginning or resuming an interview, you **must** remind the respondent that:

1. All information is confidential, and will not be identified with the respondent.
2. Her/his relationship with her health plan will not be affected, and
3. S/he may skip any question.

# INTRODUCTION TO INTERVIEWING

Interviewing is a conversation with a purpose. As a professional interviewer, your goal is to collect accurate information in accordance with sound interviewing practices. Interviews are designed to obtain accurate and complete information, but to be effective the information must be collected in a uniform manner from all respondents. The people interviewed must be asked the same questions in the same way. It is only when each interviewer conducts the interview in the same fashion as all other interviewers that the information will be uniformly accurate and ensure that the study produces meaningful and useful results.

It is important for you to develop your own style of interviewing. Confidence and sincerity can be heard. All respondents should be treated with respect and appreciation for their time. Respondents will be more likely to participate if they perceive you as knowledgeable, respectful, and sincerely interested in what s/he has to say. You will find that the majority of participants are willing to be interviewed. A confident, enthusiastic approach which assumes people are willing to be interviewed is a most effective technique.

In general, consult your supervisor if you have any questions about the interview or about how a situation you're unfamiliar with should be handled.

## Active Listening

Good interviewers are skilled professionals and their skills enable participants to give frank, complete, relevant answers to questions. The interviewer must convey that s/he is an understanding person capable of accepting information in a nonjudgmental manner and that she has an interest in what the participant is saying. A good interviewer is an active listener, one who always listens very carefully, respectfully and politely. The participant should enjoy the interview. Studies have shown that a participant will often remember more about the interviewer and how the interview was conducted than about the topics covered during the interview. **In the HMORN, the interviewer is a representative of the health plan(s), and the impression the interviewer leaves on the participant may be the impression the participant will then have of the health plan(s) in general.**

For telephone interviewing you do not have the advantage of talking to the person face-to-face. Your ears will have to be your eyes. Listen very carefully when the respondent speaks. Listen for distractions such as running water, a baby crying, a child asking questions, or another conversation. Before the interview can begin you must first determine if you have the respondent's attention. If you have a respondent on the phone, it is often best to try to complete the interview, because you may not reach him again. On the other hand you do not want to compromise the quality of the data because the respondent is not paying attention. Listen very carefully and always offer to either hold or call back.

While it is important that all interviewers be trained to administer the questions of a survey over the telephone in the same way to every respondent, it is also important that we recognize that by interviewing over the telephone, we have the benefit of interacting with a respondent. You are not merely a talking survey. Sometimes what a respondent says is not what we expected to hear, or else the answers they give do not fit exactly into our pre-coded response categories. It is at these times that it is important for the interviewer to **listen carefully** to what the respondent is saying and to respond in a way that **reflects that you HEARD what the respondent said**. For example, you may be asking a series of questions with the response categories of "Strongly agree, agree, disagree, or strongly disagree." During the course of the interview, perhaps the respondent says, "Sure," instead of giving one of the pre-coded responses. Instead of reading the entire list again, you might just ask, "Would that be strongly agree or agree?" There is no

need to say, "Disagree or strongly disagree," because the respondent has already indicated she is in agreement with the synonym, "Sure." But it is still important that you do not interpret "Sure" to be "Strongly agree" or "Agree," but rather give the respondent the choice of the most reasonable response categories closest to the answer she gave in the first place. Even if the respondent has already talked about a situation, when it comes time to ask the question, which addresses the same issue, ask the question and take their response.

### **Suggestions for Active Listening**

- *Listen attentively without interrupting.*
- *Exude warmth, curiosity, interest, and caring* - qualities that will make respondents want to talk to you, to share their thoughts and feelings.
- *Be present* – avoid daydreaming; focus on the respondent and what s/he is saying. Control distractions.
- *Become a "whole body" listener* – sit with good posture, use verbals – "uh-huh, hmmm" – to let the speaker know you are hearing them.
- *Maintain Neutrality* – it is your job to make your own experiences and opinions of no interest to the respondent, so it is important that your reactions to the answers given remain neutral but show that you are listening and paying attention. Avoid words that imply value or reaction, like "Good; Oh really?; No!; You're kidding!; etc.
- *Be aware of your emotions* – if someone is saying something that triggers your emotions, it is important that your interactions with her remain neutral and do not reflect those emotions.
- *Summarizing, paraphrasing and asking for clarification* – if the respondent has shared a great deal of information with you, you might pull it all together and *summarize* it or *paraphrase* it by restating the message in a summary form. This is an effective way to demonstrate that you have been listening actively to the respondent and you are now asking for affirmation that you heard what you think you heard or that you *need clarification* of the respondent's intended message.

*Always keep in the back of your mind:* Has this question been answered adequately, do I understand what the respondent has said, does the answer make sense, is it an answer to this question, and did I get all the information necessary to be able to code this question for data entry?

# GENERAL INTERVIEWING PRACTICE

## The First 10 Seconds

The first ten seconds after someone answers the phone is the precious time when people decide what to do with your call. Each time you reach a household, you must be in a "ready" position – speak your name confidently, ask for the designated respondent by name, and be prepared to answer any questions that may arise. When we are nervous, our voices tend to end every sentence in a higher pitch – like a question. Avoid this – it conveys that you are reluctant or uncertain about what you are telling the respondent. Actively listen for distractions in the background, reluctance in the voice of the person you are talking to, and let the person on the phone dictate the volume and pace of your speech.

## Asking the Questions

### Read Exactly as Written

Before fielding a survey, time should be allowed to test the questions for flow, verbal presentation, and understanding. Because this time and energy is spent pre-testing the questionnaire, it is mandatory that each interviewer read each question EXACTLY as it is written. The slightest change in wording can bias, or change the meaning of the question for different respondents. Each respondent must hear the entire question read exactly as it is written.

### Read in the Order Indicated

Questions are ordered in a certain way to prevent some answers from influencing other answers. Information is asked in logical progression. Any alteration of the order of questions could bias a respondent's answers. All questions must be read in the order they appear on the questionnaire.

### Use a Conversational Tone

Interviewers must be careful to avoid behavior, conscious or unconscious, spoken or unspoken, which could affect the way a respondent answers a question. It is important that the facts and opinions a respondent gives are his/her own. Questions should be read in a conversational tone without intonation that may change the meaning or bias the response. Only those words underlined in the questionnaire should be emphasized.

### Read the Entire Question

Each respondent must hear the entire question before they answer. If a respondent answers before the entire question has been read, there is a chance his/her response would be different if he/she heard the entire question. If the respondent interrupts, you can say, "I want to make sure you hear the entire question before you answer".

### Don't Skip Questions

Sometimes respondents mention information that answers a question that you will ask later in the survey. Don't skip a question because the answer was given earlier or because you "know" the response. Although it is tempting to skip a question because you feel the respondent has already answered it, always ask each question in its entirety. The respondent must hear each question. However, in those situations in which the respondent has already provided information

that probably answers the next question, you may preface the question with some combination of the following phrases:

- "I know we've talked about this" or "I know you just mentioned this, but I need to ask each question as it appears in the questionnaire".
- "You have already mentioned this, but let me ask you..."

### **Do Not Assume You Know the Answer**

Even if the respondent has already talked about a situation, when it comes time to ask the question, which addresses the same issue, ask the question anyway and take their response.

# PROBING

When a respondent answers the question in a way that does not fit one of the categories, you need to probe for a correct answer. Probing is a prompt which encourages further conversation without biasing the response. There are three types of probing:

- Probing for correctness
- Probing for clarity
- Probing for completeness

## Probing for Correctness

Probing for correctness is used on pre-coded questions where you have categories that the respondent is to choose from. Sometimes reading the entire question again is an excellent probe to let the respondent know that the answer they gave was incorrect. Pausing and asking, "Your answer is," is a very good probe. If the respondent's answer does not fit into the categories you have, the best probe is to repeat the categories. When you repeat the categories always read ALL of the categories. Tell the respondent, "I only have these categories" and read them all again.

### Question 4a

Respondent: Oh it is a problem.

Interviewer: Should I mark "A big problem, a small problem, or not a problem at all"?

Always read the entire question and all of the categories when repeating. Never help the respondent by telling them which category is closest to their response. Be careful never to criticize the survey or express negativity to the respondent. Always let the respondent choose even if they are asking for your help.

### **Examples of Probes for Correctness:**

- Which one response is closest to your answer?
- I don't have a category in between. I only have "yes" or "no".
- What would your answer be?
- If you had to choose, which one would you choose?
- Why don't I read the question and possible answers again and you can tell me what is closest to your situation or opinion.
- I only have these categories. Let me read them again and tell me which one is closest to your answer.
- There is no right or wrong answers only your opinions.
- The questionnaire does not offer an explanation or definition, so whatever "[term]" would mean to you. Let me read the categories again.
- I really can't choose for you, this is your opportunity to be heard and tell us what is important to you or how satisfied you are.
- Sometimes fitting into a category is difficult. Let me read them again.

- These categories are a range of opinions, which make it easier for analysis. I realize we speak to many respondents in different situations.
- Let me read the categories again and if you would like I would be happy to record a comment with your response.

When probing with a scale the same standards would apply. Think of each number as a category. Here is an example.

Question                      *Please rate your current health plan. On a scale of 0 to 10 where 0 means the worst health plan possible and 10 means the best health plan possible, how would you rate your current health plan? You can use any number, 0, 1, 2, 3, 4, 5, 6, 7, 8, 9 or 10.*

Respondent: **Pretty good...probably one of the best.**

Interviewer:                      *What number would that be? 0 means the worst health plan possible and 10 means the best health plan possible. You can select any number in between.*

Respondent: **What would a five mean?**

Interviewer:                      *I only have labels for 0 and 10 - 0 means the worst health plan and 10 means the best health plan; you can select any number zero through ten.*

Respondent: **I would like to give them an above average rating but I am not sure which number.**

Interviewer:                      *Scales can be difficult. I'm going to read you the scale again while you think about it. The lowest point of the scale is 0 meaning the worst, we move up the scale to 1, 2, 3, 4, 5, 6, 7, 8, 9, and 10 which means the best.*

Respondent: **Let's go with an 8.**

## Probing for Clarity

A probe for clarity is often asking the respondent for a more detail about their response, or an explanation of their answer. Open-ended questions tend to be very general (what do you think, why do you feel that way, etc.). Respondents tend to answer these questions in a general way and use general adjectives to describe situations and options. Thus, probing for clarity is often a matter of asking for a more specific response, or an explanation of an answer.

### Examples of Probes for Clarity:

- What do you mean?
- Could you be more specific?
- Could you say more?
- Could you explain?
- I don't understand.
- What about that?

The best probes for clarity are ones which tell the respondent exactly what you want to know. When probing for clarity, always help the respondent know what you don't understand and what you want clarified. Do not assume you understand - ask for an example or an explanation.

Question: *Is there anything in particular that you didn't like about the experience?*  
Respondent: **The wait is awful.**  
Interviewer: *Please tell me what you mean by the wait?*  
Respondent: **When I call for an appointment I usually have to wait 90 days before I am seen in the clinic.**  
Interviewer: *Is that for any particular type of an appointment or for all appointments?*  
Respondent: **No, they are good when I need to get in for my allergies, but for a physical I have to wait 90 days.**  
Interviewer: *Is there anything else you would like to comment on?*  
Respondent: **No, everything else is fine.**

Here is another example with the same question.

Question: *Is there anything in particular that you didn't like about the experience?*  
Respondent: **Cost is very good.**  
Interviewer: *Could you give me an example of what you mean by costs?*  
Respondent: **The co-pays are much lower with this plan than the plan I had last year. I am very pleased with that.**  
Interviewer: *Anything else?*  
Respondent: **Yes, the costs for prescriptions are wonderful. I take a lot of allergy medication and I am very happy with the low co-pay for these medications.**  
Interviewer: *Anything else?*  
Respondent: **The people are great!**  
Interviewer: *Anyone in particular?*  
Respondent: **I'd have to say the office staff that check you in and the nurses. They are always so kind and thoughtful they go out of their way to make you feel welcome.**

## Probing for Completeness

Some questionnaires will have questions where the interviewer is instructed to "check all that are mentioned," or probe for "others." This is where you would use your probes for completeness. Once a clear answer has been obtained, the interviewer should probe for additional responses to the question. The best way to do this is to repeat the substance of the question as part of a request for further information.

**Examples of Probes for Completeness:**

- What else do you like?
- What other reason did you have?
- Anything else?
- Any other comments?

Each additional response should be probed for clarity as necessary. The interviewer should continue probing for additional responses until the respondent indicates that he/she has nothing else to say on the subject.

# RECORDING DATA

## Types of Questions

- Close-ended questions with pre-coded responses
- Open-ended questions – record verbatim responses
- Open-ended questions with pre-coded responses that are not read to the respondent

## Recording Pre-coded Responses to Close-ended Questions

Pre-coded questions have response categories that are part of the question; there is a set of pre-planned response options and the respondent's answer must be coded into one of them:

### Example:

Q. A9. *In general, would you say your health is excellent, good, fair or poor?*

- <1> Excellent
- <2> Good
- <3> Fair
- <4> Poor
- <8> DK (Don't know)
- <9> REF (Refused)

If the respondent answers "excellent," record 1 as the answer.

If the respondent answers "good," record 2, etc.

Be sure to enter the correct number for the respondent's response! If you need to look down at the keyboard while typing it in, go ahead. You can fill any brief "dead air" by simply repeating their answer, which is a good thing to do anyway. It helps the respondent know you're paying attention.

Below are examples of different pre coded questions.

Q. B10. *In general, how would you say you are these days? Would you say you are very happy, pretty happy, or not too happy?*

- <1> Very happy
- <2> Pretty happy
- <3> Not too happy
- <8> DK (Don't know)
- <9> REF (Refused)

If respondent says "Pretty happy," enter 2.

If respondent says, "Yes, I am happy" you must try to get respondent to fit the answer into one of the listed categories by repeating the responses closest to what the respondent said (probing). You should probe by saying:

*Would that be closer to very happy or pretty happy?*

Show your probe in your F-1 note pad as x and record what the respondent says in the box provided using the pre code.

## Recording Verbatim Responses to Open-ended Questions

Sometimes researchers want to know exactly what respondents say when asked a question. When this occurs, the interviewer records WORD FOR WORD, or verbatim, what the respondent says. The interviewer should not paraphrase or summarize the respondent's answers unless instructed specifically to do so. You will record the respondent's verbatim comments, and your probes should be recorded in parentheses.

Most respondents will talk faster than you can record. It will be up to you to slow them down or ask them to wait while you catch up. Techniques for recording quickly and for slowing the respondent without inhibiting him/her will be different for each interviewer. Some examples of the techniques are:

- Begin writing or typing as soon as the respondent starts answering.
- Use standard abbreviations.
- Repeat what you are writing/typing *while* you are writing/typing.
- Slow the respondent down as soon as you get lost. Go back to the beginning and let him/her take it from there.

When you are recording the respondent's comments, be careful not to have too much dead time in the conversation. If the respondent is just sitting there while you write, they will be bored. Use small talk to maintain their attention. Such as:

- O.K., I need to record all of your responses.
- This is helpful.
- I'm sorry I'm typing so slowly, but I want to make sure I write down your comments correctly.

## Other examples of open-ended questions:

Q.B11. *How many years have you been married?*

98 DK

99 REF

\_\_\_ \_\_\_ Enter number of years <1 - 80>

This question shows you a range of appropriate answers and the pre-codes to be used for DK (don't know) and REF (refused) options. Acceptable ranges should be large enough to accommodate any reasonable, realistic response. In the example above an acceptable range on ages is 1 to 80. If a legitimate response falls outside the acceptable range, probe to make sure the respondent understand the question. If the response is still outside the acceptable range then record it in a note with the verbatim response and proceed to the next question.

## Recording Verbatim Responses to Open-ended Questions

Sometimes researchers want to ask a question in an open-ended fashion, but they have a pretty good idea what the top 5 or 6 responses are likely to be. In this case, the interviewer listens to the answer, and if appropriate, records the number corresponding to the pre-coded response (usually presented in CAPITAL LETTERS, indicating they are NOT to be read to the respondent). If the answer does not fit into one of the pre-coded responses, the interviewer should record the number corresponding with "other," then record verbatim the respondent's answer.

### Example:

What is the main reason why you do not eat as many fresh vegetables as you would like or think you should?

- <1> COST TOO MUCH
- <2> NOT AVAILABLE WHERE I SHOP
- <3> TOO DIFFICULT TO PREPARE
- <4> DON'T KNOW HOW TO PREPARE
- <5> SPOIL QUICKLY
- <7> OTHER - SPECIFY
- <88> DON'T KNOW
- <99> REFUSED

# HANDLING DIFFICULT SITUATIONS

## People Who Talk Too Much

There are some respondents who may want to give more information than the interviewer needs or asks for, or who are not able or willing to stick to the point of the question. Some may be so concerned with being thorough that they provide answers to questions not yet asked. Others may be lonely and view the interview as an opportunity for companionship and want to engage the interviewer in social conversation. Still, other respondents may be naturally chatty and want to talk on and on about themselves. While much of the information these respondents give may be interesting, an interview that normally takes five minutes should not be allowed to go on for fifteen. It is the interviewer's responsibility to rein the respondent back in by refocusing his attention while remaining respectful of his needs. If the respondent tends to give long explanations for every answer, politely cut him off, and direct his attention to the next question after you've gotten an acceptable response.

### Examples of Ways to Redirect

- Say, "oh, I see, OK. . ." then immediately proceed to the next question.
- Say, "isn't that interesting -- now let me ask you . . ." and repeat the question.
- If the respondent is very talkative and doesn't answer the question, interrupt at an appropriate point and say "given what you've just told me, would you say . . ." or "given all that, if you had to choose, would you say . . ." and repeat the choices.
- Offer, "So that I don't take any more of your time than is needed, let's go to the next question..."
- Say "let me stop you so I can write this all down . . . now, given what you've said . . ." and repeat the choices or the question.
- If the respondent jumps ahead of the question, tell him you will be "asking about this later" and suggest he wait until you get to that part of the interview so you can record the information accurately at that time. Say "we're going to cover that a little later" or "we'll get back to that in a bit," then read the next question, or repeat the question you already asked, or repeat the choices you already gave.

## People in a Hurry to Get Off the Phone

Sometimes the respondent is in a hurry to get off the phone or wants to cut the interview short. This can be a problem with long interviews. If you are almost done with the interview, let the respondent know, and usually you'll be allowed to finish. It helps to say "just \_\_\_\_ more questions" or "we'll be through in about \_\_\_\_ minutes." If you are not almost done, or if the respondent becomes truly weary of the interview, indicate how much more time you think you'll need to finish and let the respondent decide whether to continue or to reschedule another time to complete the interview. Many research centers allow interviews to be completed in multiple sittings. It is preferable to complete an interview in one sitting, because you never know if you will actually be able to contact the respondent again. But situations arise – someone comes to the door, something burns on the stove, a child needs attention, or the respondent simply has another appointment to get to, and you should have instructions on how to deal with the interview should such a situation arise. If you can resume the interview, try to schedule a specific day and time to call back; if the respondent cannot commit to an appointment readily, find out

the best days and times to call back and call the respondent until you reach him/her and are able to complete the interview.

## People with Difficulty Hearing or Understanding a Question

If the respondent has difficulty hearing or understanding a question, repeat the question slowly and clearly without raising your voice. For some people the louder the voice, the more distorted it sounds and the harder it is to hear, especially over the phone. A louder voice may convey the impression that the interviewer is getting impatient. Do not reword, explain or interpret the question; simply repeat it and encourage the respondent to do the best she can. If she cannot come to an understanding of the question, move on to the next and note in the margin or comments section of the CATI program what happened.

## People Who Are Defensive

Health research telephone interviews often involve personal or sensitive questions. Sometimes they are conducted with patients who participated in a behavior change program in the past to follow up and see how they are doing now. People who try to quit smoking, lower cholesterol, or lose weight but do not succeed may feel that they have failed. They may be unwilling to participate in an interview, or they may answer questions defensively. It is imperative that the interviewer provide a safe, nonjudgmental environment where the respondent feels safe sharing the results of his/her experience, even if it didn't result in the desired outcome. To minimize the respondent's defensiveness, remain neutral; ask all questions in a direct, matter-of-fact tone of voice, especially when asking questions about income, education, weight, etc. Be careful to avoid criticism or even praise.

### Suggestions for Reducing Defensiveness

- "There are no right or wrong answers"
- "Your medical care will not be affected if you participate."
- Explain, "it is important to talk to you and get information from you because your experience may differ from the experience of others we talk to."
- "I understand that you may not want to participate, but we need the information only you can give us" and that "others may benefit from your experience."

## People Who Are Upset with the Health Plan or Angry in General

If the respondent is mad at the health plan or angry about something else, listen to what s/he is saying and acknowledge -- rather than deny or minimize -- the anger. A statement like "I can understand why you're upset" will validate the respondent's feelings and help establish a trust between interviewer and respondent. Accept all opinions without showing surprise, approval or disapproval, agreement or disagreement. Telling the respondent "your opinions are very important to us -- we want your feedback - we can benefit from your experience" may diffuse the respondent's anger and enlist his/her participation. Often the respondent just needs to vent frustration with the health plan in general and nothing more, but if you feel the respondent would benefit by discussing the complaint with someone else, consider referring the respondent to the health plan's customer service/consumer helpline. If the respondent has a complaint about the research process -- the advance letter or the phone call -- note the details and inform your supervisor immediately. The research center's supervisory staff and/or the project staff may decide to follow up with the respondent.



*Your site information here*

## Suggestions for Interviewing Angry Respondents

- Say "I can understand why you're upset"
- Explain, "your opinions are very important to us -- we want your feedback - we can benefit from your experience."
- "I do not have access to your medical information; because we promise that your participation in our research study will remain confidential, I cannot personally pass on your comments about your experience to the health plan. But I can provide you with the number for [customer service] if you wish to talk with them."



*Your site information here for customer service or patient services*

## People who are Difficult to Reach

A household member may try to keep the interviewer from connecting with the respondent. Some examples include:

- The household member wants more information about the purpose of your call than you can comfortably give.
- The household member is reluctant to put you through to the respondent.
- The household member tells you the respondent is not interested in participating.

In these situations, you need to be extremely diplomatic to avoid losing the respondent completely.

If the respondent is not home, ask when a good time to call back would be, thank the household member, and hang up. If asked, say you will call back, that there is no need for your call to be returned, and there's no message. If pressed, it's OK to explain that you're calling from the health plan research center with a short questionnaire regarding a "health study" (not a "stop smoking study" or "high cholesterol study"), that you'll call back, and that it's not urgent and there is no problem (a call from a health plan makes many people wonder what's wrong). Due to HIPAA privacy issues, we must reveal minimal information to anyone other than the respondent, but we also do not wish to alarm the household.

If the household member says he can answer the questions for you --"I'm her husband" -- say you appreciate his interest and offer, but explain that you really need to speak to the respondent directly. If you sense after repeated attempts to reach the respondent that a household member is intentionally blocking your access to the respondent, say that you need to speak to the respondent "for just a minute, for one quick question" that it's "very important;" or try calling at different times when you suspect the household member might not be there.

If you're told by a household member that the respondent is not interested in participating, thank him for the information and let him know that participation is voluntary so it's OK if the respondent is not interested, but that you would like to speak with the respondent briefly anyway. The interviewer's best strategy for reaching the respondent is to remain polite but persistent and try to gain the trust of the resistant household member.

## Answering Machine Protocols

Most people have answering machines and some people use them to screen calls. Here is a sample protocol written for one study that provides guidelines for working with answering machines and leaving messages.

## Sample Protocol for Leaving Messages:

We use messages to let respondents know we are trying to reach them.

We can leave up to 3 messages. The case is eligible to be re-called on the next shift.

You can count the shifts as,

Day, 9am-5pm = 1 shift.

Evenings = 1 shift,

Saturday = 1 shift,

Sunday = 1shift.

The **first** message is left on the first call attempt after **all** numbers are dialed and answering machines or no contact is encountered. This is so the respondent connects the advance materials to the call.

Try to leave the first message at the home number.

If you don't know which phone number is the home number, leave the message on the answering machine or voice mail where the respondent's name is listed if it does not appear to be a work number.

If no name is listed on any of the messages, you choose one of the numbers to leave the message.

*This is <INTV NAME>from "The Health Institution"< MR/S FNAME LNAME > we sent you a letter about a study and will call you back soon. Our voice mail number is .....*

**The 2<sup>nd</sup> message** should be left in 5 days or the next call after 5 days, or on the 4<sup>th</sup> day if, in the interviewer's judgment, the situation calls for it. This message gives more information along with the phone number asking the respondent to return the call. It is your choice to include or not include day, date & time.

Leave this message as the 2<sup>nd</sup> message.

*This is <INTV NAME>from <SITE/HEALTH PLAN> Mr/s. FName LName we sent you a letter about a study. (Today is DAY/DATE/TIME) We return calls days, evenings and week-ends Please call our voicemail at .....leave your first & last name and several good times to reach you.*

*(If the situation calls for it go ahead and add thanks for returning our last call, we are sorry we missed you or Sorry we are playing phone tag, we will keep trying Again our Voicemail number is ..... )*

### **3<sup>rd</sup> Message:**

The third message is left after the supervisor/sample manager directs it or, if in the interviewer's judgment, the situation calls for it. The third message always occurs by the 10<sup>th</sup> call if there is constantly no-answer. If you are unsure of what to do, then wait for the supervisor to direct you when/if to leave the third and final message.

The parameters are to leave a message that encompasses the situation. There is no script.

#### Talking points for the final message are:

- Leave your name
- The study voice mail number
- Where you are calling from/or on behalf
- Address the person whom we are calling
- Tell them we have been trying to reach them about a study.
- Leave neutral information regarding 'study letter' and ask them to call back with times & numbers where they can be reached
- It is okay to say to a live contact I can call right back and leave this on the answering machine for the respondent if you'd like.
- It is okay to say that this is the only number we have and ask them to call us back with additional numbers and best times to be reached.

## **People with a Language Barrier**

The respondent must understand both the consent and content of the survey. Where English is not the first language, children sometimes serve as translators for the adults in official interactions. We cannot accept a translated consent process. Some research organizations have large enough populations of non-English speaking respondents to go through a translation and re-translation of survey instruments; others choose to complete the interview or intervention with only English-speaking respondents. The study protocol will tell you more specifically how to address language barriers.

## **People Who Should Not be Coaxed into an Interview**

When you reach a respondent who is terminally ill or grieving the recent loss of a loved one, it may not be appropriate to pursue the interview. Discuss with your supervisor in advance whether it is necessary to even attempt an interview with such a respondent. If an interview is desired, let the respondent decide if she wants to participate. Never try to persuade this respondent, but if s/he is willing, the interview may serve as a welcome diversion. If s/he is unwilling or upset by your call, apologize for the untimely intrusion.

## People Who are Deceased

Occasionally you may contact a household to find the person you are trying to reach has died. Sometimes the death is recent, but sometimes it occurred in the not-so-recent past. It is wise to express sympathy, indicate you will note this and we will not call again. If you have indicated that you are calling from the health plan, be prepared to answer questions about why you didn't KNOW the respondent was deceased, especially if s/he died at a health plan facility. You might offer, "I do not actually have access to the medical record. Sometimes it takes awhile for this to be recorded in the record. I will note this, and we will not contact you again."

If the respondent was already enrolled in a study, it may be important to the IRB to record when the death occurred so the researcher can take steps to explore if it was related to study participation. In this case, you might offer sympathy, indicate that you don't have access to the medical record, could the person you are talking with please tell you when this happened so you can note it in your records?

## PREVENTING REFUSALS

A refusal is a person who states that they do not want to do the interview or do not want to participate further. Then, after you have taken the opportunity to explain the importance of the study, probed for concerns and responded to their individual situation, the person still states that they do not want to participate.

First, try to prevent a firm refusal. Figure out why the respondent does not want to do the interview, and be prepared with a response that addresses the issue. If the respondent says s/he does not have time, offer that you can call back any time that is convenient, and the interview can be completed in more than one sitting, if needed (and if possible at the respective site or within the study protocol). If the respondent says s/he is too old, offer that it is important that you speak with respondents of all ages. S/he was chosen at random to represent health plan members like him/her. Before you begin interviewing on any study, try to think of all of the reasons that a reluctant or refusing respondent might give you, and craft a response that is appropriate for each reason. These are often called "recommended responses," and study staff may provide them to you. However, it is important that your responses to the respondent concerns flow naturally from you, so practice them, and be prepared.

Preparation will allow you to speak with confidence about the study. Be yourself! Relax before you make the call, and then assert yourself confidently. Refusals seldom reflect the respondent's feelings about YOU in particular – they usually result because you have called at a bad time, the respondent does not have enough information to make an informed decision, or the respondent just does not participate in surveys. Do not take refusals personally.

If the respondent does not agree to participate immediately, try to end the conversation with, "I'm sorry I caught you at an inconvenient time. Take some time to think about the study." Seldom must you force a reluctant respondent to make a decision immediately, but rather, allow some time to review the advance letter and think about your conversation, and perhaps a follow up phone call will be in order.

When a potential respondent says s/he is not interested, try to determine if s/he really has enough information about the study. It is legitimate for the respondent to be reluctant to share personal information by phone, so s/he may want to verify the study, verify your identity as an interviewer for [health plan], etc. Be polite, confident, and clear and answer all questions.

## No Contacts

If someone says "Do not call back," "Please don't call this number again," or "Take me off your list," be sure to note the verbatim in the notes-- there is a special list kept by most sites for these cases. We are obligated by law not to call back respondents that explicitly tell us not to call again. The project manager puts the respondent on the "Do Not Call List." We do our best not to contact them again. If you contact a respondent who tells you: "I am not supposed to be called I was put on your list and they promised me I would not be bothered again," say

*"I am sorry to have bothered you. I will refer this to the supervisor and we will do everything we can to respect your wishes."*

If you happen to get a case that says Do Not Call Back in the notes section, do not dial the number, instead code it as a "Refusal" and send it to your supervisor with additional notes.

Some institutions also have a "No-Contacts" File for individual consumers who do not want to be called about any studies. Check with your site supervisor to determine if such a list exists at your location.



# IN-PERSON INTERVIEWING

There are many similarities between in-person and telephone interviewing. Chiefly, data collection for the study is dependent on your interaction with the respondent. However, in-person interviewing differs from telephone interviewing a few key ways, which are described below.

## Attend to the Respondent

Allow enough time to attend to the person in front of you, the interviewee. You should plan so you are not rushed either in reality or having the appearance of being rushed. Organize your study materials before the interviewee is in the room. Become familiar with your surroundings, where the lights are, how to adjust the blinds, etc.... Know how to direct the respondent to restrooms or drinking fountains if necessary.

## Introduce the Study

You can use the basic techniques for introducing the study discussed previously. In addition, you can *show* the respondent study materials to help convince her to participate. For example, the interviewer can show a copy of the advance letter or a description of the study.

## Identification

As an interviewer and representative of the project and HMO, you should wear your ID badge with your name, picture, and the institution. The ID shows the respondent, or any other family member, that you are legitimate.

## Be Aware of Non-Verbal Cues

Interaction goes beyond voice. Be aware of your own non-verbal communication such as smiling, raising your eyebrows, grimacing, yawning. You will also have the opportunity to monitor the respondent's non-verbal cues. Do they look tired? Are they distracted?

## Setting

Once you have introduced yourself, you are ready to begin the interview by first arranging for a proper setting. The following two conditions are important:

### **Avoid an Audience**

It may require ingenuity and tact to obtain privacy. The following are some suggested approaches you could use:

Example:

"Could we go into another room so we won't interfere with the children's TV program?"

"If your friend will excuse us, maybe we could go into another room. The interview will go much faster."

"I think you would prefer to answer these questions privately. Could we go into another room?"

**Arrange for Suitable Seating:**

The interviewer should suggest sitting at a table, if one is available. Sit across from the respondent—not side-by-side. The respondent's attention will be too divided with trying to read ahead on the questionnaire if they can see it.



## RESOURCES

Fowler, Floyd J. Jr., Survey Research Methods, Second Edition, Chapter 7. *Survey Interviewing*, Sage Publications, Inc. 1993

Oishi, Sabine Mertens , How to Conduct In-Person Interviews for Surveys, 2<sup>nd</sup> edition, The Survey Kit, Sage Publications, 2003

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