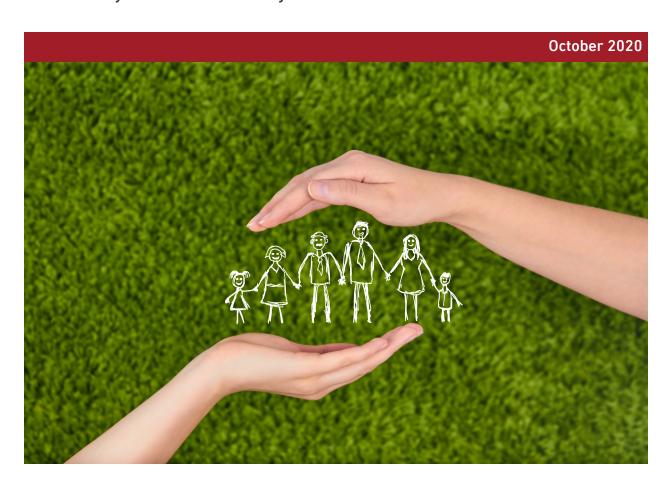


Interview Preparation and Risk Mitigation

Lessons from the BC Healthy Connections Project



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We celebrate the Indigenous Peoples on whose traditional territories we are all privileged to live and work.

Citing This Manual

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BC Healthy Connections Project

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Glossary and Abbreviations

BC British Columbia

BCHCP British Columbia Healthy Connections Project

CHPC Children's Health Policy Centre
NFP Nurse-Family Partnership
OP Operating Procedures
DCT Department of Controlled Trial

RCT Randomized Controlled Trial
SFI Scientific Field Interviewer
SFU Simon Fraser University

Preamble

The British Columbia Healthy Connections Project

The BC Healthy Connections Project (BCHCP) is a randomized controlled trial (RCT) examining the effectiveness of the Nurse-Family Partnership (NFP) program. NFP involves nurses visiting young, disadvantaged mothers in their homes, providing intensive supports starting early in the first pregnancy and continuing until children reach their second birthday. The aim of the BCHCP is to evaluate NFP's effectiveness compared with BC's existing health and social services in improving child and maternal outcomes. The project is led by a research team based at the Children's Health Policy Centre (CHPC) in the Faculty of Health Sciences at Simon Fraser University (SFU) in Vancouver, British Columbia (BC) — with collaborators at McMaster University, the University of British Columbia, the University of Victoria and the Public Health Agency of Canada. The first Canadian evaluation of NFP's effectiveness, this RCT is running from 2011 to 2022 with 739 mothers and 731 children enrolled. This trial is embedded within BC's public health and child health systems, involving close collaborations with the BC Ministries of Health, Children and Family Development and Mental Health and Addictions, and with four regional BC Health Authorities — Fraser, Interior, Island and Vancouver Coastal Health. The BCHCP also involves two adjunctive studies: a nursing process evaluation and an evaluation of NFP's impact on biological markers of maternal and child stress in a sub-sample of RCT families.^{2,3} The trial was registered on August 24, 2012 with ClinicalTrials.gov (Identifier: NCT01672060) prior to study enrolment commencing; the trial also has research ethics approvals from 10 participating agencies and universities. For a full description of the trial, methods and procedures, see the published RCT study protocol.4

Scope of BCHCP RCT Data Collection

Eligible and consenting participants living in the four participating Health Authorities were recruited in early pregnancy (i.e., prior to 28 weeks gestation), between October 2013 and December 2016. Participants completed the

baseline interview and were then randomly assigned to the intervention group (NFP plus existing services) or the comparison group (existing services only). Research interviews were conducted until late 2019 and involved multiple methods and sources including:

- maternal self-report questionnaires administered in the home or by telephone
- child and maternal observational and cognitive tests in the home

Administrative public health data collection is ongoing until late 2020 to inform findings on the RCT's primary outcome indicator — childhood injuries.

BCHCP Primary Outcome Indicator

Childhood injuries by age two years

BCHCP Secondary Outcome Indicators

- Prenatal substance use
- Child mental health at age two years
- Cognitive and language development at age two years
- Maternal subsequent pregnancies at 24months postpartum

The SFU Study Team (or Study Team) includes Scientific Team members (Nominated Principal Investigator, BCHCP Scientific Director), onsite Study Team members and Scientific Field Interviewers (SFIs). The onsite Study Team continues to collect administrative and participant-tracking data, while SFIs have collected all interview data. (NFP home visits were separate and were the responsibility of the Health Authorities.) SFIs were located in the four Health Authorities and were masked to treatment group allocation. NFP nurses and participants were not masked. Participants were invited to participate in six interviews during pregnancy and postpartum (see Table 1 below):

Table 1. BC Healthy Connections Project Timeline



Between 2013–2019, the SFU Study Team tracked 739 participants to schedule in-person and telephone data collection interviews. Almost 4,000 interviews were completed across wide geographical areas and with participants who were experiencing extremes of socioeconomic disadvantage. For example, the data collected during the baseline interview confirm that we reached a cohort experiencing low income (84% reporting less than \$20,000/annum), as well as associated adversities including: unstable housing (52%), intimate partner violence (50%) and severe anxiety or depression (47%), with many (70%) experiencing cumulative disadvantage (i.e., four or more indicators of adversity).⁵

1. Interview Scheduling and Preparation

1.1 Step-by-Step Overview of Conducting Home Interviews

This section provides an overview of the steps for conducting home interviews. Steps 6–11 are specific to the baseline interview (e.g., eligibility, consent, randomization) and are omitted for later interviews.

- Step 1 In preparation for the home visit, please review the Pre-Interview Checklist (Appendix 1).
- Step 2 Upon arrival, greet the participant and engage in small talk to build rapport.
- Step 3 Ensure participant is available for allotted time. Reschedule the interview if necessary.
- Step 4 Provide the participant with an overview of the visit, e.g., check contact information, questionnaire administration.
- Step 5 Confirm that the contact information on file is up-to-date. This is crucial for ongoing retention, i.e., participant tracking efforts.
- Step 6 Verify participant eligibility. If she is no longer eligible, thank the participant for her time and leave the home.
- Step 7 Obtain written informed consent.
 - Leave one copy of the signed form with the participant and retain two copies for the CHPC.
- Step 8 Obtain participant's legal name, date of birth, BC public health number (for administrative data linkage), and due date.
 - Verify accuracy of identifying information with a government issued identification (e.g., driver's license or passport).
- Step 9 Discuss the Randomization Allocation Text with participant.
 - Participants will receive an automated message telling them whether they have been assigned to existing services (comparison group) or the new program (intervention group).
 - Emphasize the value of each study group, regardless of which group to which they will be assigned. This was crucial in the BCHCP in facilitating 100% retention immediately following random allocation i.e., no participants withdrew after being allocated to the comparison group.
- Step 10 Explain the importance of never disclosing their group assignment to SFIs. (For research purposes, the SFIs involved in data collection are masked to treatment assignment).
 - Participants can contact the onsite Study Team via the toll-free number with questions about their group assignment.
- Step 11 Provide the participant with the Participant Welcome Folder, which contains your business card, a study timeline, and the list of Support Resources.

- Step 12 Review the Support Resources sheet (e.g., 911-emergency services, HealthLink BC's 24-hour hotline, and local crisis line; see Appendix 2).
 - Can be helpful "Even if you just want to talk."
 - The interviews contain sensitive items. As an objective interviewer, you are independent and do not provide advice or support. For consistency, all participants are provided these resources *prior* to each interview.
- Step 13 Describe the honoraria and confirm the type of gift card the participant would like (ie., participant-centered and meaningful honoraria).
- Step 14 Discuss the reminder calls/texts/emails, and the importance of communicating any updated contact information to the Study Team.
- Step 15 Schedule the next interview and provide an interview reminder card with the details.
- Step 16 Remind the participant that some topics may be sensitive in nature, that she does not have to answer any questions she is uncomfortable with, and that all her information is kept strictly confidential.
- Step 17 Administer the questionnaire.
- Step 18 Upon concluding data collection, revisit the Support Resources. This step is completed to be consistent, impartial and unbiased for all participants.
- Step 19 Provide the honorarium and have participant sign two copies of the gift card receipt.
 - One copy stays with the participant and one is returned to the CHPC.
- Step 20 After leaving the participant's home, review the questionnaire for missing items. Ensure each question was answered and that detailed notes are left for questions that were difficult to code. Wherever possible, SFIs are encouraged to code the answer as this additional work will only have to be completed later, costing more time/resources. Regular SFI feedback and training are provided to facilitate coding of ambiguous items.
- Step 21 Complete the Post-Interview Checklist (Appendix 1).

1.2 Interview Time

1.2.1 General Guidelines

Interview time must be confirmed with the participant 24 hours in advance and recorded in the participant tracking database. Interviews are typically scheduled at the participant's convenience. Please plan to be available for evenings, weekends, and statutory holidays (the exception being scheduled vacation time).

1.2.2 General Safety When Scheduling Interviews

Always keep personal safety in mind and use your discretion when scheduling in-person interviews in the evening. It is recommended that interviews not be scheduled later than 7:00 pm. However, you may book interviews later if you feel this is appropriate based on the participant and community. Likewise, you may decline to meet a participant after dark based on the circumstances, e.g., neighbourhood, living arrangements, etc.

1.2.3 Interrupted Interviews

When scheduling interviews always confirm that the participant is available for the full duration of the interview to avoid having to interrupt the interview. This is crucial to ensure administration is standardized. Participants may also have difficulty rescheduling a follow-up interview, resulting in incomplete data collection.

Furthermore, honoraria must be provided once the interview has begun, regardless of the amount of interview completed. Participants who have already received their honoraria may not see the value of rescheduling the visit. Therefore, assume you only have one opportunity to collect data.

1.3 Interview Locations

1.3.1 General Guidelines

Interview location must be confirmed with the participant 24 hours in advance and recorded in the participant tracking database. Whenever possible, in-person interviews should be scheduled and conducted in the participant's home. However, situations may arise that require the use of an alternative location. For instance, some participants may be embarrassed about their home and may not want to welcome a stranger inside. Others may not want household members to observe the interviews or know about their involvement in the study. Alternative locations should be quiet, so that the interviews can be conducted without interruptions, and should allow for the participant's privacy and confidentiality to be maintained.

1.3.2 Safety When Selecting an Interview Location

During your training you discussed the nature and type of safety concerns that may be encountered in the field. As you know, these concerns are generally minimal and are further avoided by thorough preparation and planning. Some participants' circumstances may be a safety concern. This assessment may be made by an SFI or shared by the Health Authority with the Study Team. In these circumstances an alternative location must be found, and it will be necessary to conduct the interview in a public place. This is to ensure participant and interviewer safety. Please keep in mind that some safety concerns may be specific to the participant's residence (e.g., bed bugs), but some may relate to the participant (e.g., concerns about partner's temperament). Since SFIs are not informed about the exact reason for the safety concern, you will arrange to meet the participant somewhere public (rather than in the home of the participant's relative, friend, partner, etc.).

1.3.3 Alternative Interview Locations

Alternative interview locations suggested by the participant (i.e., not the result of a safety concern) can include public locations or the private home of a relative, friend or partner. You must feel comfortable with any private locations and are supported in finding another location in order to feel safe. Please see 2.3 Safety for Alternative Interview Locations for additional safety information concerning these locations.

When planning to meet at a public location, offer to meet somewhere the participant suggests, reminding them that some information discussed in the interview is private and personal. As long as the participant is aware of this, interviews can be held in alternative locations. Please try to confirm alternative locations at least two days in advance and record it in the participant tracking database. This guideline is a safety precaution to ensure the Study Team always knows where you are.

Public Library	Some public libraries have study rooms that will allow privacy for interviews. Check with the branch beforehand to see whether study rooms can be booked in advance.
University Study Rooms	See internal university protocols for booking and using study rooms.
Community Centre	Community Centres may have private rooms, that can be booked for this occasion, or public areas that are relatively quiet.
Coffee Shop	Ensure the participant is comfortable with this location as privacy can be compromised. Further, purchases may need to be made to use this type of location. You should arrive early to purchase yourself a simple refreshment and find a table in a quiet area; this expense will be reimbursed. Items cannot be purchased for participants.
Public Health Unit	This location is to be used as a last resort. This is to prevent any contamination or cross-over of information with the intervention public health nurses and staff. Please ensure the Study Team is aware of the situation if an interview must be booked in a public health unit.

Please avoid conducting any interviews in schools as school boards may need to obtain ethics approval for research to be conducted on their property. Please be mindful of programs/facilities (e.g., public housing for mothers and children) that might be frequented by multiple participants. Avoid conducting in-person interviews within common areas at these locations, so as not to be identified or inadvertently reveal a participant's involvement in research to someone else. If you learn that one participant is in contact with another, you should note this situation in the Post-Interview Observations.

1.3.4 Privacy During Interviews

Always inform participants that interviews are meant to be completed one-on-one, and insist on privacy to the greatest extent possible. When participants have a friend present at an interview, be aware of the possibility (depending on the friend's approximate age) that the friend could be involved in the study themself, or referred in the future. This poses a unique concern regarding data quality — for example, we do not want a future participant exposed to the baseline questionnaire ahead of time. In these cases, try to obtain more detail, e.g., is there a reason the friend is interested in observing? If a participant insists on having a friend present, there is no need to object, but do make note of the situation.

1.4 First Nations Reserve Communities

1.4.1 Introduction

Participants recruited for the BCHCP are not living in First Nations reserve communities at the time of consent. However, participants may move to a reserve community during the course of the study. Respecting First Nations' sovereignty, the Study Team will seek consent from the Chief of the community through the BCHCP First Nations Protocol. This permission must be obtained before continuing with data collection for participants who live on reserve. Data collection includes conducting telephone and in-person interviews, as well as data linkage.

Please note that no study activities can take place in First Nations reserve communities unless the BCHCP First Nations Protocol has been enacted. For example, even though a participant may not live on reserve, you are not permitted to conduct an interview with a participant at her parents' home that is on reserve. In this situation, you must find another suitable location for the interview. If this poses an issue, or if you are ever unsure about whether or not an interview location is appropriate, please consult with the Research Coordinator.

1.4.2 Verifying Participant Addresses

It is extremely important to always verify whether a participant's address is in a First Nations reserve community, even if the participant reports that it is not. Conducting an interview with a participant who lives on reserve where we have not initiated or completed the BCHCP First Nations Protocol is not permitted. Since we do not have ethical permission to do this, the data collected are unusable. Please confirm participant addresses prior to each interview. In the event that you learn of a move during an interview, please ask the participant if they have moved on reserve and verify this with a secondary source, e.g., interactive map tools provided online by the Canadian government, or calling the First Nations community office.

1.4.3 BCHCP First Nations Protocol

Please refer to this protocol whenever a participant moves into a First Nations reserve community within BC. This protocol may be adapted to accommodate individual participant circumstances. This protocol also applies to participants who move into a First Nations reserve community temporarily and should be enacted if the participant:

- is uncertain of the duration of their stay in the community and does not have plans to leave, or
- intends to stay in the community for at least four weeks.

This protocol should be initiated promptly, no more than two business days after it has been determined that a participant has relocated into a First Nations reserve community. This protocol may also be enacted for a participant's child who is residing separately in a First Nations reserve community (e.g., due to custody arrangements).

For participants who move into First Nations reserve communities, permission must be obtained from the community Chief to continue with data collection. The steps of this BCHCP-specific process are as follows:

- Step 1 Confirm that a participant's address is on reserve land using at least two sources (e.g., participant self-report, interactive map tools provided online by the Canadian government, or calling the First Nations community office).
- Step 2 Obtain permission from the participant for the Study Team to contact the Chief of her Nation or community. Let the participant know that they will remain anonymous in our communications with the community Chief.
- Step 3 Ensure there are no interviews scheduled with this participant within the next four weeks to allow time for the protocol to be enacted. Reschedule interviews if necessary.
- Step 4 Inform the Study Team via email of the move into a First Nations reserve community and confirm that the participant has consented for us to contact the community Chief.
- Step 5 The Study Team will send a letter from the BCHCP Nominated Principal Investigator to the Chief outlining the participant's involvement in the study and asking the Chief's permission to continue the study with this participant. The letter asks the Chief to contact the Study Team to discuss any concerns. The letter states that the Study Team will assume that data collection is approved if no reply is received within two weeks.
- Step 6 A week before the next scheduled interview, confirm with the Study Team that the protocol has been completed and that data collection may resume.

1.4.4 Multiple Participants Move to First Nations Reserve Communities

If multiple participants relocate to the same First Nations reserve community, the Study Team will send a letter to the Chief for each participant. That said, the language in the subsequent letters will be adapted for clarity (i.e., indicating "another" participant has recently moved to this community).

If a participant provides permission to the Study Team to send a letter to the Chief of a First Nations reserve community, then later relocates to a different community, the above steps will need to be taken again (i.e., a new letter will be sent to the Chief(s) of any subsequent communities in which the participant lives).

1.5 Interview Preparation and Supplies

1.5.1 Knowing the Questionnaires

Knowing the contents of the questionnaires will help the interview flow smoothly. Some sections, for example, require different administration techniques. Knowing when these sections occur within the questionnaire will allow quick transitions, which reduces the time needed to complete the interview — and therefore reduces participant (and SFI) burden. As well, when you are well-versed and well-practiced you will appear more confident to the participant.

Finally, most measures within the questionnaire are standardized. Standardized measures require uniformity and consistency of administration across interviewers and across time periods. Knowing these measures well is, therefore, required to administer these measures appropriately.

1.5.2 Equipment

Proper preparation speaks to your professionalism during the interview and decreases participant (and SFI) burden by allowing the visit to flow smoothly. Modifications to administration and rescheduling can be avoided by ensuring all equipment is packed and electronics are charged before the interview.

Appendix 1 provides a list of interview supplies. You are responsible for knowing the equipment you need and for keeping it in working order. In addition, you are responsible for ensuring you have the correct version of the questionnaire. On occasion, you will be notified via urgent email that a change has been made to a questionnaire (usually to clarify item administration). Please pick up a paper back-up copy of the new version of the questionnaire and begin using this new version within the next three days. For electronic versions of the questionnaires, these changes will be updated automatically.

Organization of equipment is a necessary step in interview preparation. Arranging the paper forms in order of administration, for example, decreases sorting time in front of the participant. Ensure you are comfortable using the interview binder and all related materials. You are invited to personalize your binder with tabs and labels to assist with organization.

For paper sections of the questionnaire, every sheet is stamped with the participant study ID. This ensures pages can still be identified if they become separated during transportation or filing. Stamp paper data forms and sensitive measure answer sheets with the participant study ID (note: the paper backup of the questionnaire is only stamped if it is used for data collection). It is important to remember that the sensitive measure sections of the questionnaire are completed independently by the participants and sealed in an envelope when they are finished. SFIs cannot access the sensitive measure answer sheets after the interview and so these must be stamped beforehand.

2. Risk Mitigation for Conducting In-Person Interviews

2.1 Background

Personal safety awareness is important as it is anticipated you will be attending homes or other locations where participants are coping with socioeconomic disadvantage including homelessness. Safety protocols ensure ample support and debriefing opportunities for SFIs who may experience personal challenges as a result of encountering participants' difficult circumstances.

Although SFIs have regularly encountered the challenging life circumstances of our participant population, proper awareness and adherence to these protocols means there have been no reported field-related harm to SFIs since data collection began in October 2013 (collecting almost 4,000 in-person and telephone interviews).

Additionally, the Study Team manages adverse event reports that are considered "anticipated" in this population whose circumstances place them and their children at risk for vulnerability (e.g., homelessness, premature birth). The BCHCP Data and Safety Monitoring Committee provides oversight and comprises independent researchers with clinical, statistical, ethical and RCT expertise, as well as BCHCP investigators. Part of your role is to file adverse event reports regarding study participants.

The following sections outline the SFI risk mitigation procedures developed for conducting home interviews.

2.2 Safety When Scheduling Interviews

This section pulls together the specific steps and protocols in place to ensure safety in the field.

2.2.1 Monitoring the Location of SFIs

The following protocols are in place to inform the onsite Study Team about your location when working in the field:

- Your name, participant ID number, time, date and location of the interview must be entered into the
 participant tracking database as soon as an interview is scheduled. This entry must be updated immediately
 with any changes.
- You will update your interview schedule in the shared online calendar every day.
- Upon completing an interview, you will immediately submit the Interview Completion Form in the participant tracking database. This activity is monitored by the Study Team allowing them to see that SFIs have successfully completed the interview and arrived home safely. If not completed within a few hours, a Study Team member will reach out to you.

2.2.2 Interview Location Safety

You will assess whether a visit can be scheduled at the participant's home or at an alternative location.

- Prior to contacting the participant, check the participant's file to determine if their residence is suitable for an interview or if an alternative location (e.g., local library) is recommended.
- Recommendations to conduct the interview outside the home may be a formal safety concern or the suggestion of an SFI who had prior contact with the participant.

You will stay alert to safety issues during the interview.

- When you visit a participant's home for the first time, note any safety-related hazards in your field notebook and communicate this to the Study Team as soon as possible.
- In the case of immediate safety concerns (e.g., health hazards, violence), stop the interview and leave the location immediately. If a sensitive exit is required, you may tell the participant the Study Team has contacted you about an emergency.

You will take the interview time into account.

- Do not schedule a home interview after 7 pm unless you feel very comfortable with the participant's living circumstances (e.g., neighbourhood, residence, etc.).
- Ensure the Study Team is aware that you will be conducting a later interview and inform them immediately when the interview is complete, so they are aware of your whereabouts.

2.3 Safety for Alternative Interview Locations

Whenever possible, in-person interviews should be conducted in the participant's home. If this is not possible (e.g., they live in a group shelter with minimal privacy, or potentially unsafe, or participant preference), then an alternative location can be arranged. In addition, the Study Team coordinates reports of participant circumstances that may require a home interview to be held at an alternative location. These issues are reported by both public health nurses and SFIs, and may include practical matters (e.g., bed bugs) as well as personal issues (e.g., violence in the home).

When the Study Team informs you that interviews must take place outside a participant's home, you will not be informed of the reasons for this change. This is to ensure you remain unbiased towards the participant and their circumstances. Since the details of these situations are not shared, it is recommended that the interviews be conducted at an alternative location that is not at the home of a participant's relative, friend, or partner (e.g., in case there is a safety concern involving a partner or family member). What follows are safety guidelines for planning alternative interview locations.

Alternative locations should be planned at least two days prior to the scheduled interview date to ensure the Study Team is aware of your location.

- SFIs are strongly discouraged from permitting changes to the interview location on the day of an interview, but if this situation cannot be avoided, you will call the Study Team to inform them of the new location prior to the beginning of the interview.
- If the interview is scheduled outside the hours of 9 am − 5 pm, inform a delegated senior Study Team member on their personal cell number and confirm they have received the message. This is to ensure someone is always aware of your whereabouts.

Parameters for alternative interview locations include the following:

- Within walking distance of the previous location unless the participant has her own transportation to reach the alternative location.
- Can be private households only if there are no safety concerns about the participant's circumstances and you are comfortable with the location.
- Ensure the Study Team is aware of the address where you will be conducting the interview.
- Please see section 1.3.3 Alternative Interview Locations for more details on appropriate public locations for interviews.

2.4 Preparation

In addition to preparing your equipment for the interview, it is necessary to take certain safety precautions when working in the field. The following preparations promote SFI safety:

- Ensure your cell phone is charged and easily accessible (i.e., on your person and not in a purse or bag) during the interview.
- Ensure you have the three designated Study Team emergency contacts saved on your phone. This includes
 the personal contact information for these designates, which is to be used any time, including evenings and
 weekends, when someone cannot be reached at their work number.
- Choose apparel (clothing and accessories) that is comfortable, modest, does not attract attention, and is appropriate for the participant's home environment.
- Ensure that your car is in working order and always have contact information for roadside assistance, for instance, the British Columbia Automobile Association [BCAA] toll free at 1-800-222-4357.
- Never drive a participant to another location, either before or after the interview.

2.5 Promoting SFI Safety During the Interview

If you feel unsafe during an interview, you are encouraged to follow your instincts and may end the interview immediately and leave the interview location. Other considerations are listed below:

- A hand towel is included in your supplies. You may place the towel onto the surface of the chair before sitting down. Public Health Nurses advise this approach to prevent the spread of bed bugs. If you choose to do so, it is expected that you will do this in a sensitive and casual manner.
- If there are large dogs or other pets you are uncomfortable with, you are encouraged to ask the participant if they can meet in a room away from the pet(s). Otherwise, you are supported in rescheduling the interview in an alternative location.
- Provide the participant with contact information via your study business cards only (i.e., SFI first name, BCHCP cell phone number, study logo and study toll-free line).
- Do not wait at a participant's home if the participant leaves the premises (e.g., to run an errand). In such a circumstance, let the participant know you will wait in your vehicle.
- If a conflict situation arises in the home, leave the interview location immediately and call the appropriate authorities, if necessary.

2.5.1 Limiting Exposure to Sensitive Material

You do not directly collect sensitive data on measures such as intimate partner violence or a history of child maltreatment during in-person interviews. These items are administered to participants via audiotape and entered into the questionnaire by an independent Study Team member. In addition to providing the participant with privacy, this process limits the effect of the interview material on anyone present (e.g., a family member could feel angry that certain questions are being asked about the participant's childhood, or a partner's presence may influence questions related to intimate partner violence). This process also limits the SFI's exposure to distressing information.

2.6 Participant Confidentiality

Research participation is confidential. The BCHCP strictly adheres to a number of procedures in order to ensure confidentiality of participant identity and data (e.g., using secure servers, locking file cabinets, etc.). These protocols are beyond the scope of this manual. Instead, this section identifies some additional measures taken to ensure participant confidentiality when SFIs are working in the field.

- All communication with participants, e.g., calls, texts, emails, are deleted immediately after being logged in the secure participant tracking log. No participant information may be stored on BCHCP cell phones. This is to ensure that this information is not available if a phone or email is lost or hacked.
- Prior to entering the home, the SFI will not wear their badge (first name only with study logo), but instead have it on hand as a form of identification when meeting the participant. Only when the SFI is certain that she is introducing herself to the participant will the badge be placed around her neck.
- When asking participants about their possible acquaintance with other study participants, it is imperative to not confirm or deny the participation of anyone the participant mentions. This is to ensure everyone's participation is kept confidential.

2.7 SFI Confidentiality

As you will be working in the field, your confidentiality is of great importance. Personal information (including surnames) is never shared with participants or their relatives. The following are some ways in which your identity is kept confidential:

- You will only use cellular phones provided by the BCHCP or landlines with blocked caller-ID. This ensures participants do not have access to your personal contact information. If you are communicating with participants via text messaging, only use BCHCP cellular phones.
- SFIs are acknowledged, but not named, as BCHCP Study Team members on the CHPC website.
- SFI email addresses do not disclose the SFI's surname.
- SFI business cards use the SFIs first name only.
- During interviews, personal items that display identifying information (e.g., driver's license) are kept hidden.
- Pictures or videos are not allowed during interviews. Cameras can present a significant safety concern, and therefore allowing participants or family members to have a camera around during the interview is not a good idea. With babies present at some interviews, it may seem like a good idea for the participant to "capture" the moments, but please tell them this is against our regulations.

2.8 Participant Support

Knowing that participants can be experiencing personal challenges and that our questionnaires ask for some very sensitive information, it is imperative that participants have access to support resources.

- At the beginning of each in-person interview, the SFI will provide the participant with a list of Support Resources (e.g., 911-emergency services, HealthLink BC's Nursing Services team 24-hour hotline, and a local crisis line within their health area; Appendix 2).
- All participants are actively provided with this list to reduce any (unintended) stigma of providing the list to only participants suspected to be at risk for emotional distress or problems.
- This list also provides a mechanism for you to remain objective during data collection and is a way for you to respond to the participant's distress.
- It is important for us to not influence participants' lives, but we need to acknowledge and respond to participant distress. Since these same resources are provided to all participants in a uniform way, this ensures any influential effect is held constant throughout the study population.

2.9 SFI Support

Recognizing that you may encounter emotionally challenging information and situations while working with participants, there are a number of ways in which you are supported throughout your time with the BCHCP. Please refer to Table 2 for a description of the resources available to you.

Table 2. Scientific Field Interviewer Support Resources

Resource	Description
Study Team Debriefing	You are encouraged to call the Study Team to debrief about situations or emotional distress. SFIs are provided with the personal contact information of the Research Coordinator and Scientific Director for calls after 5:00 pm or on weekends when needed.
Bi-monthly SFI Wellbeing Sessions	You are invited to participate in bi-monthly "SFI wellbeing" sessions, led by the Research Coordinator (with over five years of experience as an SFI and Study Team member). These are optional self-care sessions, providing you with a space to discuss any challenges you encounter in the field.
Staff Support Resources	A document of internal and external support resources available to SFIs and any Study Team member experiencing work-related distress. Please see Appendix 3.
SFI Self-Care Meeting Notes	The SFI Self-Care Meeting notes include questions that were anonymously answered by SFIs during the development of our SFI wellbeing strategies. This resource can be helpful for you to know that others may have encountered similar difficulties. It can also be reassuring to read some of the SFI responses to these situations. Please see Appendix 4.
SFI Self-Care Strategies	At the beginning of the trial we hosted a brainstorming session with SFIs to build a list of self-care techniques (e.g., personal strategies for staying relaxed, shutting off at the end of the day, maintaining a healthy work-life balance, etc.). This was compiled into a living document for you to review and add to as you wish. See Appendix 5.

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References

- 1. Olds, D. (2012). Improving the life chances of vulnerable children and families with prenatal and infancy support of parents: The Nurse-Family Partnership. *Psychosocial Intervention*, 21, 129–143.
- Jack, S., Sheehan, D., Gonzalez, A., MacMillan, H., Catherine, N., Waddell, C., for BC Healthy Connections Project Process Evaluation Team. (2015). British Columbia Healthy Connections Project Process Evaluation: A mixed methods protocol to describe the implementation and delivery of the Nurse-Family Partnership in Canada. BioMedCentral Nursing, 14, e1–13 (DOI: 10.1186/s12912-015-0097-3).
- 3. Gonzalez, A., Catherine, N., Boyle, M., Jack, S., Atkinson, L., Kobor, M., Sheehan, D., Tonmyr, L., Waddell C., MacMillan, H., for Healthy Foundations Study Team. (2018). Healthy Foundations Study: A randomized controlled trial to evaluate biological embedding of early-life experiences. *British Medical Journal Open*, 8, e018915, e1–12 (DOI: 1136/bmjopen-2017-018915).
- Catherine, N., Gonzalez, A., Boyle, M., Sheehan, D., Jack, S., Hougham, K., McCandless, L., MacMillan, H., Waddell, C., for BC Healthy Connections Project Scientific Team. (2016). Improving children's health and development in British Columbia through nurse home visiting: A randomized controlled trial protocol. BioMedCentral Health Services Research, 16, e349–362 (DOI: 10.1186/s12913-016-1594-0).
- 5. Waddell, C., Catherine, N., MacMillan, H., Lever, R., Wallis, P., Sheehan, D., Boyle, M., Gafni, A., McCandless, L., Tonmyr, L., Gonzalez, A., Jack, S., Barr, R., Varcoe, C., Marcellus, L., for the BC Healthy Connections Project Scientific Team. (2018) Preparing to Parent in British Columbia: A Profile of Participants in the BC Healthy Connections Project. Vancouver, BC: Children's Health Policy Centre, Simon Fraser University.

Appendix 1: Pre- and Post-Interview Checklists

Listed below are checklists of tasks/items to be completed for each home visit. Please review this checklist at least 24 hours ahead of the interview.

Tas	k	
Pre	-Interview Checklist (24 hours ahead)	
1.	Keep track of working hours on the SFI timesheet	
2.	Contact participant the day before as per their preferred method of contact (if participant is deemed "incompetent minor," contact parent/guardian)	
3.	Map out location of participant's home and plan to arrive 15 minutes early	
4.	Check weather and road conditions at www.drivebc.ca/mobile/events	
5.	Charge cell phone and laptop	
6.	Review and pack relevant operating procedures (OPs) (e.g., Home Interview OP) and scripts	
7.	Become familiar with participant's name (if needed, child and parent/guardian names)	
8.	Write participant's Study ID on all paper data collection forms	
9.	Determine approximate date for next interview	
10.	Ensure "Interview Visit Supplies" have been packed (see checklist below)	
Pos	st-Interview Checklist	
1.	Update REDCap participant tracking system	
2.	Submit Request for Randomization (baseline only)	
3.	Review questionnaire for complete and accurate coding	
4.	Submit REDCap questionnaire	
5.	Update SFI online calendar with next interview	
6.	Log mileage and miscellaneous expenses	
7.	Update honorarium distribution log	
8.	Drop off/courier paper documents	
l. t.	min Mais Complian	
	erview Visit Supplies	
•	Computer Charger Mouse Extension Cord Phone Phone USB Cable	
•	2 Pens 2 Pencils Eraser Highlighter Dry Erase Marker	
•	Field Notebook Clipboard Stopwatch & Battery	
•	Name Badge SFI Calendar Reminder Cards Study Timeline Diagram for SFIs	
•	Information Letter Participant Informed Consent Forms	
•	Consent for Future Contact (2)	
•	Transition From Consent to Baseline Script Outline	
•	Welcome Folder Business Card Support Resource Sheet Study Timeline	
•	Executive Functioning Tests Answer Sheet Cheat Sheets	
•	Paper Backup Questionnaire	
•	Response Cards (complete and in correct order)	
•	Sensitive Measures Answer Sheets Envelope with Label	
•	Headphones Alcohol Swabs	
•	Interview Reminder Card Honorarium Honorarium Table Gift Card Receipt (2)	
•	Indoor Shoes	
•	Backup Copies: CoS SAE Child Abuse or Neglect Risk Mitigation Information Letter All Consent Forms Answer Sheets Envelope Business Cards Interview Reminder Cards	

Appendix 2: Participant Support Resources

Support Resources

Emergency Telephone Number 911

In the event of an emergency, this number will connect you with police, fire and ambulance services.

HealthLink BC 811

Registered nurses, pharmacists and dieticians answer any nonemergency health-related questions and provide information and advice. (Pharmacists are available daily from 5 pm to 9 am and dieticians are available weekdays from 9 am to 5 pm.)

Crisis Line 1-800-SUICIDE (7842433)

Trained volunteers provide emotional support, crisis intervention, suicide prevention and community intervention. You can call a crisis line for any reason, including relationship conflicts, family violence, addiction issues, suicide or loneliness.

Appendix 3: BCHCP Staff Support Resources

	Internal Resources
Research Coordinator	The Research Coordinator has substantial experience as an SFI and is available to connect and to offer a safe place to talk
Human Resources Trainer	The BCHCP Human Resources Trainer is a certified clinical counselor, available to provide support for field- and work-related experiences
Senior BCHCP Team Members	The BCHCP Research Manager is available to connect people to supports as needed
Senior BCHCP Leadership	Nicole Catherine, BCHCP Scientific Director and Co-Principal Investigator and SFU Mowafaghian University Research Associate, is an experienced trialist who knows the study population well and can provide further supports as needed
	Charlotte Waddell, BCHCP Nominated Co-Principal Investigator and SFU University Professor, is responsible for all BCHCP research staff and can also connect with SFIs as needed

External Resources	
BC Crisis Line	Province wide toll-free line: 1-800-784-2433
SFU Health and Counselling Services	Free services available to all SFU faculty, staff and students; office located in BCHCP headquarters building; accept drop-in/walk-in appointments; also available for SFIs who are offsite. Please contact your direct supervisor for more information

Appendix 4: Example of SFI Self-Care Meeting Notes

These notes are an example of a meeting led by the Research Coordinator, an experienced SFI, along with the Human Reources Trainer, a senior Study Team member who is also a qualified clinical counselor. Questions were provided as starting points for the conversation and SFIs were invited to give anonymous responses. These questions brought up a number of difficult topics and it is not always clear what the most helpful responses are, or should be, in all cases. However, it is of great importance to understand the effect of this work on SFIs and acknowledge their experiences working with our study population.

Indeed, through working together as a team, we have found a number of helpful responses to the emotionally challenging situations SFIs encounter. These responses are regularly discussed with SFIs. We have responded in some of the following ways:

- We focus on the <u>resilience</u> of our participants, pointing out the vast number of challenges they have not only managed, but have been brave enough to share with us
- We acknowledge the fact that even though we cannot directly support or intervene, we do provide a <u>non-judgmental</u> space for participants, which can be healing in and of itself
- We remind ourselves of the many participants who have thanked us for interviews, for listening, and for giving them a place to <u>have their voices heard</u>
- We reconnect to the larger picture and the fact that collecting information about our participants' lives is a crucial step in <u>making changes</u> to programs and services that may help other young women and children in similar circumstances

Questions & Answers from SFIs

1. What are some of the challenges you face when encountering the population we work with?

I find it difficult to be reminded of the vast and varied struggles and challenges that so many girls and young women face. It is difficult to be constantly hearing about mental health issues, intimate partner violence, housing problems, etc., directly from individuals, (rather than at a population/group level). It is hard to bear witness without being able to offer support.

When I encounter something challenging, I find it really helpful to talk it through; I will often call another SFI after challenging interviews.

2. What are the most emotionally difficult situations that you encounter?

I find it most difficult to have to stay neutral when a participant is obviously in the middle of dealing with some big challenges in their life. It is easier when things seem to be in the past and they are currently OK, but when it is clear that they are still struggling, it is hard to not reach out and comfort them. I always feel bad walking away from those situations.

I find disclosures of intimate partner violence (especially those currently occurring) to be particularly emotional and difficult. It is extremely challenging to know that they are living in that situation, and even more difficult when the participant seems to find their situation acceptable. I feel helpless when I have to gather the information and just leave it at that.

Often my participants trust me enough to really express to me what is going on in their lives and even where they need help. Sometimes it feels like they are asking for help, and as much as I don't want to brush them off, I know it is not within my "scope of practice" to reach out or become involved, which leaves me feeling helpless.

3. What are some challenging situations that you feel you need better tools for managing?

I could use some help managing situations where participants ask for my advice. Sometimes participants share a lot of details about their struggles and what they're going through. It has happened a few times that they then ask my advice about their situation. I know I cannot intervene or offer support, but I also want to be careful not to cut them off too suddenly and have them feel self-conscious about having opened up to me.

I would love to have some strategies for managing (or maybe accepting?) the discomfort that comes from hearing about all of these challenging individual struggles. I empathize with our participants and my heart goes out to them, but then I feel like I am stuck sitting with that discomfort because I cannot act on it to change anything immediately.

4. How can the Study Team best support the SFIs?

Keep asking SFIs about their experiences and how their work affects them.

Continuing to acknowledge and have conversations about the uncomfortable/ugly parts of the SFI role is really important. Keep making time for regular self-care meetings/sessions, etc.

5. What are you hoping for from this self-care session? What would be most helpful for you?
I am really hoping to gain some specific tools for managing my own emotional reactions to what my participants disclose.
It's hard to feel empathy, but then "turn off" at the end of the day!

Appendix 5: SFI Self-Care Strategies

Dear SFIs.

This document has been created for you to share some of your personal strategies for managing emotional stress that you may encounter in the field. Please feel free to visit this document often and be inspired by all the ways your teammates take care of themselves.

This is a living document — continue to add new ideas to it as often as you would like. Please sign off on any additions you make. The Research Coordinator will regularly review this document for ideas and topics that can be discussed at the bi-monthly SFI Wellbeing sessions, as well as for any material that may be inappropriate or indicate someone is struggling. Do not use this document for immediate assistance; instead please contact the Research Coordinator or refer to the BCHCP Staff Support Resources.

- I try to do some physical activity after I get home a yoga class or going for a bike ride helps get my mind off of the day and puts me in a different frame of mind.
- Sometimes I give myself a "time out" before going home from an interview. I will just sit somewhere for a few
 minutes to collect myself and process the interaction.
- If I am in a stressful interview, I will mindfully clench my fists or curl toes. It helps me be conscious of my body and stay grounded. I remind myself: "This is me. This is my body. I'm present and I'm OK."
- I really like to think about resiliency. Women are incredibly resilient!
- I like to remind myself what a privilege it is that these girls and young women are sharing their lives with us. It's amazing that they are in a space where they feel comfortable sharing that with us. It really helps to feel that sense of gratitude.
- I remind myself that listening to participants may be providing them an opportunity to reflect.
- I like to verbalize what happened and try to talk to someone right away. I very often call another SFI. Other people can help me re-frame the situation and understand it in a different light.
- Sometimes I go for a walk and consciously work on letting go and coming back to my breathing and my body the whole time.
- I use the drive home as a time to reflect on things. It is nice to have that sense of space after an interview before getting back to work.
- I will often try to schedule a break after an interview if there is somewhere nice nearby, like a nice beach or park that I like.