



Quantitative Fieldwork Training

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Workshop Aims

- To provide information and guidance to equip you to run effective and safe data collection procedures for household fieldwork surveys and related data collection in schools
- Learning outcomes :
 - Gain knowledge on the steps and procedures needed to train enumerators and other staff on data collection from households
 - Have a firm understanding of research ethics, safeguarding and risks of harm
 - Have a better appreciation of the main principles underpinning effective survey administration
 - Be able to write a fieldwork plan that includes operating procedures, staffing requirements and timelines for the Baseline Household Survey and Baseline School Data Collection

Workshop Structure

- Mixture of presentations, groupwork and video material
- Ethics, safeguarding and risk of harm
- Learning from feasibility studies in schools
- Survey research methods – guidance on good practice for enumerators and supervisors, fieldwork management & quality assurance, with roleplay exercises
- Planning for the fieldwork taking place from September onwards (baseline household survey, and baseline data collection in schools)

Key Research Questions

- **Main Research Question:**
 - Does a mindfulness intervention delivered to children in schools, in Rwanda & Ethiopia, improve their mental health and well-being?
- **Additional Research Questions:**
 - What mechanisms explain the changes (or lack of) in mental health and well-being?
 - Does the intervention change teacher job satisfaction and overall school culture?
 - Does the intervention have any effects on parental well-being?
 - What is the relative cost-effectiveness of the intervention?

- Quasi-experimental design
- Quantitative measures of *outcomes*: mindfulness, mental health, health-related quality of life and well-being
- Quantitative measures of *resource use and costs* (training time, intervention delivery time by teachers)
- Qualitative data approaches throughout
- Household surveys - household composition, assets, occupation/job type, education, health, attitudes & behaviours

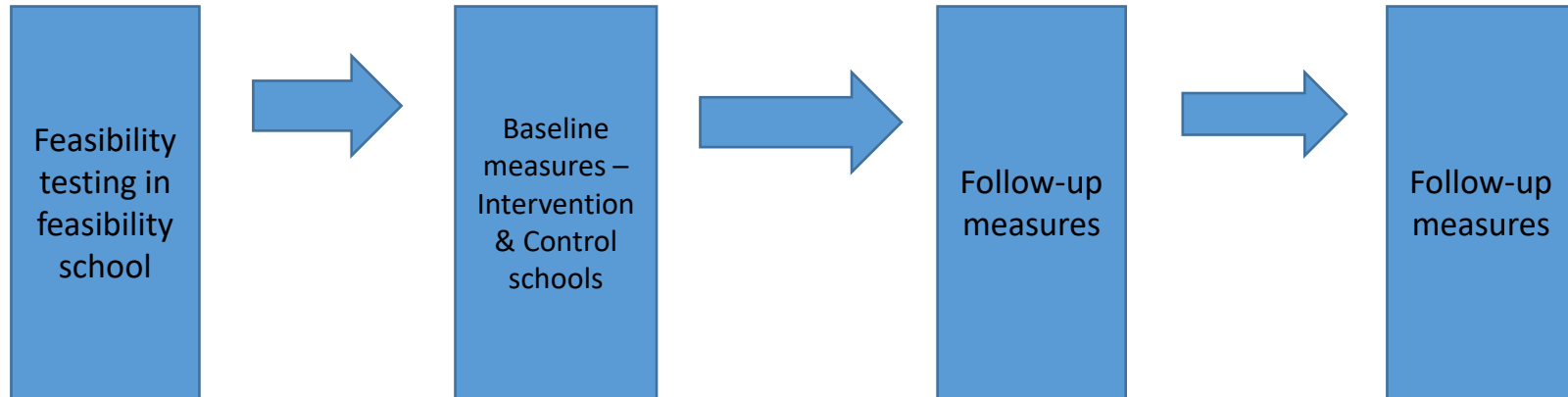
Outcome measurement in schools

Feb – June 2024

Late Sep 2024

Feb 2025

June 2025



Outcome measures for our study

Children (in Schools)	Teachers (in Schools)	Parents (via Household Survey)
Stirling Children's Wellbeing Scale	Kessler Psychological Distress Scale (K-10)	Kessler Psychological Distress Scale (K10)
Strength & Difficulties Questionnaire (SDQ)	Teacher Job Satisfaction (adapted from TALIS)	Child Behaviour Questions
Cantril Life Satisfaction Ladder	School Climate (adapted from TALIS)	Cantril Life Satisfaction Ladder
Beyond Blue School Climate Survey	Cantril Life Satisfaction Ladder	
Children & Adolescent Mindfulness Measure (MSQ)		
Child Health Utility Index (CHU-9D)		



Sample size

- Target = **230 children per school**
- Sample size below the number of pupils year 4 or over at the intervention and control schools in both countries (larger in Ethiopia)
- Whole school intervention ; sample size will exceed 230 !
- Sample size large enough therefore to consider whether effectiveness differs according to characteristics such as:
 - Sex
 - Age of children (e.g. age 8-12 vs. 13-16 years of age)
 - Classroom/teacher (e.g. recently qualified vs. more experienced)
 - Siblings (e.g. yes / no)
 - ???

Household survey questionnaire



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Domain/Item	Example questions/scale
Household roster	How many people live in your house? How many children live in your house? What are their ages?
Assets	Do you own your house? Does anyone in your house own any of the following (mobile phone, bike, motorbike, car etc.)?
Poverty	How often in the last year has anyone had to do without any of the following? (food, water, fuel, health care etc.
Employment & occupation	During the last year what was your main occupation? (e.g paid farm work, unpaid farm work, other)
Health & well-being	Kessler Scale, Cantril's ladder
Education	Highest level of education achieved
Attitudes & behaviours	Does your husband ever bully you, shout at you or hit you?



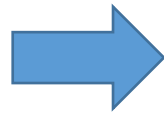
Household survey - Timelines

**Testing phase -
End September/October**

Early October

October

Testing (with
trained
enumerators)



Household
Survey
- Main carer
of children in
Intervention
School



Household
Survey
- Main carer
of children
in Control
School

What we need to do next ...

- **Planning for the Household Survey :**
 - Identification of households – we interview the main carer of the children in the study
 - Fieldwork manuals
 - Interview materials (incl. participant information sheets & consent forms)
 - Questionnaire printing
 - Fieldwork/enumerator staff recruitment
 - Organise and train research teams for interviews, data entry and analysis

Tasks & Timelines

Stage 1 Preparation (August 2024)

Tools: Final Translation of Tools & Household Survey Instrument
Other materials: Fieldwork Manual, Participant consent forms, data collection sheets

Printing of Tools and other materials
Recruitment of enumerators

Stage 2 Training & Fieldwork Planning (August 2024)

Training for supervisors (Post-docs and PhD students)
Training for enumerators/interviewers

Setting up interviews

Stage 3 Data collection & analysis from Schools & Households (September-October 2024)

Conducting interviews with children, parents and teachers

Data entry, quality checking & preliminary analysis of questionnaire responses

Questions? Comments?

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Feasibility testing - Aims

- To gather data to inform the selection of outcome measures to be used in the intervention and control schools
- To assess and finalise the resource requirements needed to run the main study in the intervention and control schools

Feasibility study in schools - Recap

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Feasibility testing – How?

- “Think-aloud” exercises with participants for *selected* measures
- Completion of outcome measures in schools, with participants from the feasibility schools (children and teachers)

Think Aloud

- Aim is to gain fuller understanding regarding *how* respondents decide on a response to a question
- Task requires respondents to verbalise their thoughts in arriving at an answer *in the moment*
- Can uncover misunderstanding of *concepts* as well as help respondents to arrive at an answer they are most comfortable with
- Important when using “off-the-shelf” questionnaires in a new setting



Think Aloud - Methods

- The interviewer must teach the subject how to perform the think-aloud procedure. This training generally involves practice at the start of an interview. One training approach that has may work is the following:
- "Try to visualize the place where you live, and think about how many windows there are in that place. As you count up the windows, tell me what you are seeing and thinking about."

(Source: Willis GB. Cognitive Interviewing: A How-To Guide (1999)).

Think Aloud – Methods 1

- Interviewer reads each question to the subject, *OR* the subject reads each question themselves
- The interviewer records (by audio) and/or notes (by writing) the processes that subject uses in arriving at an answer to each question
- The interviewer should not interject or suggest possible answers – they should however encourage the subject to think aloud, e.g.
 - *“tell me what you’re thinking” (if there is a long silence before answering)*
 - *“what things were you thinking about when you were deciding on your answer?” (if the subject has answered without saying anything)*



Think Aloud – Methods 2

- INTERVIEWER (reading survey question to be tested): *How many times have you talked to a doctor in the last 12 months?*
- SUBJECT: I guess that depends on what you mean when you say “talked.” I talk to my neighbor, who is a doctor, but you probably don’t mean that. I go to my doctor about once a year, for a general check-up, so I would count that one. I’ve also probably been to some type of specialist a couple of more times in the past year - once to get a bad knee diagnosed, and I also saw an ENT about a chronic coughing thing, which I’m pretty sure was in the past year, although I wouldn’t swear to it. I’ve also talked to doctors several times when I brought my kids in to the pediatrician - I might assume that you don’t want that included, although I really can’t be sure. Also, I saw a chiropractor, but I don’t know if you’d consider that to be a doctor in the sense you mean. So, what I’m saying, overall, is that I guess I’m not sure what number to give you, mostly because I don’t know what you want.

(Source: Willis GB. Cognitive Interviewing: A How-To Guide (1999).)

Video – Ethics & Safeguarding



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Video – Survey Research

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Workplan & Resources



HERU is supported by the Chief Scientist Office (CSO) of the Scottish Government Health & Social Care Directorates (SGHSC)



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