

Child Profile Health Promotion System

Mailings Evaluation Report

March 1, 2016



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Executive Summary

Background and Objectives

The Child Profile Health Promotion System is Washington State's centralized immunization and well-child visit reminder system. The Department of Health uses the system to send health and safety information to all families in our state with kids aged birth to six years in English and Spanish. The information includes age-specific reminders about well-child visits and immunizations as well as information on growth and development, nutrition, safety, and more. The mailings also include materials from partner agencies and organizations. The department sends information to over 470,000 families (90% of all Washington families with kids under six years), which equals nearly 1.5 million mailings a year.

PRR conducted a mixed-method evaluation to understand how parents who receive the Child Profile Health Promotion mailings have changed their behavior or been influenced by the materials (e.g. parent letters, immunization and health and safety publications, and partner publications). Specifically the evaluation was designed to better understand:

- Changed behavior after receiving Child Profile mailings.
- Increased awareness/knowledge of Child Profile mailings and child health issues.
- Improved attitude toward Child Profile mailings and child health/safety issues.
- Barriers to reading the materials or following the recommendations in the materials.
- Helpfulness of the mailings, and suggestions for changes to the materials.
- How the Department of Health can better meet parents' needs.

Methodology

For this evaluation, PRR conducted both qualitative and quantitative research in three phases.

1. First, a multi-mode survey (mail and online) was sent to a statewide sample of parents from October 13 through November 10, 2015.
2. Next, PRR conducted three focus groups: two in Seattle and one online. Two groups were conducted in Seattle--one in Spanish and one in English, and a third group was conducted online for parents outside the Puget Sound area.
3. Lastly, an in-the-moment online ethnography was conducted with 18 parents allowing them to respond to materials (at home) as they received them in the mail. For this method parents were asked to complete five online activities between November 30 and December 16, 2015.

Mailing lists were provided by the Department of Health and recruitment for the focus groups and in-the-moment research was conducted using email lists and contact information collected from the survey. Survey questions focused on awareness and behavior changes resulting from the Child Profile mailings. The qualitative research (focus groups and in-the-moment) focused on parents' impressions and reactions to the Child Profile mailings and specific materials in the Child Profile mailings.

The following report provides overall evaluation key findings, detailed methodologies, and the detailed findings for each phase of research conducted.

Overall Key Findings

Provided by Washington State, nice, and trustworthy.

FINDING #1: Information in the Child Profile Health Promotion mailings is important and trusted

- Parents' most important and favorite topics in the Child Profile mailings were nutrition, growth and development, dental health, immunization, and safety.
 - 60% of parents from the survey particularly save growth and development, nutrition, and immunization information to refer to later.
 - Most parents (60-70%) from the survey would like more information on why immunizations are important (particularly parents of Hispanic, Latino, or Spanish origin) and more descriptions on the specific diseases they prevent.
- Focus group and in-the-moment participants indicated the materials in the Child Profile mailings were very trustworthy.

FINDING #2: Parents read the materials in the Child Profile Health Promotion mailings

- 96% of parents from the survey reported reading the materials when they received them, and almost half (46%) read them carefully.
- The main reason they didn't read the materials is because they already know most of information provided or they get information elsewhere.
 - Focus group participants reported using many information sources, such as BabyCenter, Centers for Disease Control and Prevention (CDC), WebMD, and their doctors.

FINDING #3: Parents find the materials in the Child Profile Health Promotion mailings helpful and this changes their parenting behavior

- Almost all (93%) of parents from the survey reported learning something from the materials, and reported that the materials were helpful.
- 60% of parents from the survey reported keeping some of the materials in the Child Profile Health Promotion mailings to refer to later.
- Parents in focus groups reported learning new information about lead poisoning, dental care, toxins, and better feeding habits.
- 82% of parents from the survey indicated the materials reinforced their parenting decisions.
- More than half of the parents from the focus groups reported the materials in the Child Profile mailings helped them remember important milestones, particularly for growth and development.

FINDING #4: Parents want the Department of Health to expand Child Profile

- Almost half (44%) of the parents from the survey indicated they want to receive information from the Department of Health for children over age six.
- Parents in focus groups, particularly those with older children, want teen information on new vaccines for this age group (specifically the human papillomavirus vaccine), bullying, Internet/technology safety, mental health, sexually transmitted infections, and preventing obesity.
- Parents overall (all research methods) would also like to see more topics covered such as obesity, preschool preparation, behavior issues, eye health, post-partum weight loss and depression, and more emphasis on poison control and toxins.

Overall Key Findings

FINDING #5: Parents want the Department of Health to keep Child Profile as a mostly “mailed” system

- Parents in the survey (76%), focus groups, and in-the-moment phases all indicated they feel the Department of Health should continue to mail the materials. Parents in the Spanish speaking focus groups felt the materials should specifically be mailed to Hispanic groups as that may be their only way to receive them.
- Parents in the focus groups and in-the-moment phases thought the materials should continued to be mailed. However having an option to sign up for materials via email (rather than mail) or providing them online is also recommended.

FINDING #6: Keep the materials in the Child Profile mailings simple, informative, and neutral in tone

- Parents in the focus groups often found the information too simple and a repeat of information they already knew. However, they realize the importance of getting this information out to all parents in Washington and that meeting the needs of a large audience is difficult.
- A main concern expressed was that information was presented in a paternalistic tone rather than helpful and informative. For example, materials on breastfeeding felt “shaming” for those that couldn’t breastfeed.

Finding #7: Parents of Hispanic, Latino, or Spanish origin were more likely to want more information and read the materials from the Child Health Promotion mailings carefully

- Parents of Hispanic, Latino, or Spanish origin were also more likely to report they wanted more vaccine safety information.
- Parents of Hispanic, Latino, or Spanish origin, and/or lower household income were more likely to report reading the materials in the Child Profile mailings carefully.
- Parents of Hispanic, Latino, or Spanish origin were more likely to report learning about vaccines, immunizations, and child behavioral issues from the materials in the Child Profile mailings.
- Parents of Hispanic, Latino, or Spanish origin and/or those with lower incomes were more likely to report the materials in the Child Profile mailings were helpful.
- Parents of Hispanic, Latino, or Spanish origin were more likely to report that they keep vaccine and immunization information to refer to later.
- Parents of Hispanic, Latino, or Spanish origins were more likely to report the materials in the Child Profile mailings reinforced their parenting decisions.

DETAILED FINDINGS: SURVEY

Survey Purpose and Methods

Purpose

As part of the Child Profile Health Promotion evaluation a survey was conducted to collect quantitative data to measure how well the Department of Health is performing on several key goals and objectives, as well as to evaluate measures that matter to some partners who insert materials in Child Profile mailings. More specifically, the survey portion of the evaluation focused on the following aspects:

- What percent of parents who receive the Child Profile mailings have experienced the following due to the materials in the mailings:
 - Changed behavior
 - Increased awareness
 - Increased knowledge
 - Improved attitude
 - Increased self-efficacy
- What percent of parents who receive the Child Profile mailings:
 - Are reminded about and are getting their child immunized and to their well-child visit on time due to the mailings?
 - Read the mailings and how often do they read them? Why do non-readers not read the mailings and what can be done to capture them?
 - Find the mailings helpful, and how helpful?
 - Find specific materials within the mailings helpful, and how helpful? What would make them more helpful?
 - Read the envelope taglines (messages printed on the front of the mailing envelopes) and have initiated/changed their behavior as a result of them?
 - Are satisfied with the amount of information they receive? What topics do parents want more and less information on?
- What are the barriers to reading the materials in the mailings and following the recommendations, and how can those barriers be overcome?
- How long are parents keeping materials?

Methods

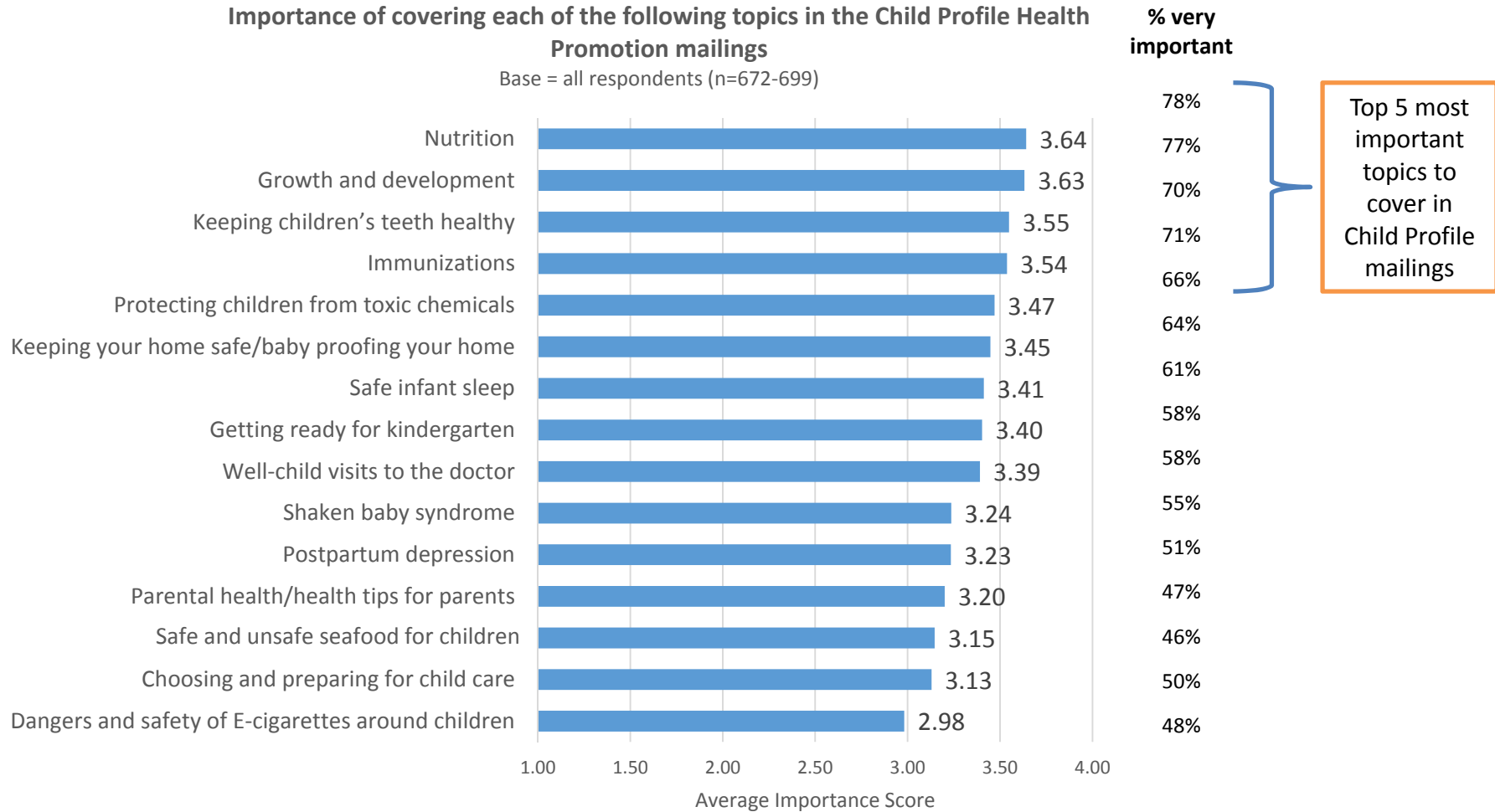
PRR conducted a statistically valid, multi-mode survey (mail and online) from October 3 through November 10, 2015. The survey was mailed (see Appendix A for survey) to a random sample of parents who receive Child Profile mailings (9,000 English language, 1,000 Spanish language). Approximately 418 were returned by the United States Postal Service as undeliverable, resulting in a base of 9,582. A follow-up reminder postcard was also mailed one week after the initial survey was mailed.

The survey could be completed using the paper version or the online version. A unique ID ensured that the survey was completed only once for each household. A total of 758 parents completed the survey:*

- 550 on paper
- 208 online
- 92% were completed in English and 8% were completed in Spanish (60 completed in Spanish)
- The response rate was 8%
- The overall margin of error is +/- 3.7%. The margin of error for Spanish speaking parents is +/- 12.65%.

Data analysis used appropriate descriptive statistical techniques (frequencies and percentages) and explanatory statistical techniques (correlations and regression) to test for the statistical significance of relationships between variables. Testing for statistical significance determines the probability that a result is not likely due to just chance alone. In social science research, correlations are assigned a probability, and in this research (as is standard) only correlations that are $\geq .10$ and with probabilities at the .05 level or higher and that are meaningful to understanding the data are reported. All reported relationships are statistically significant at the .05 level or better at the 95% confidence level. These relationships are reported in italics.

Nutrition and growth and development are the most important topics to cover



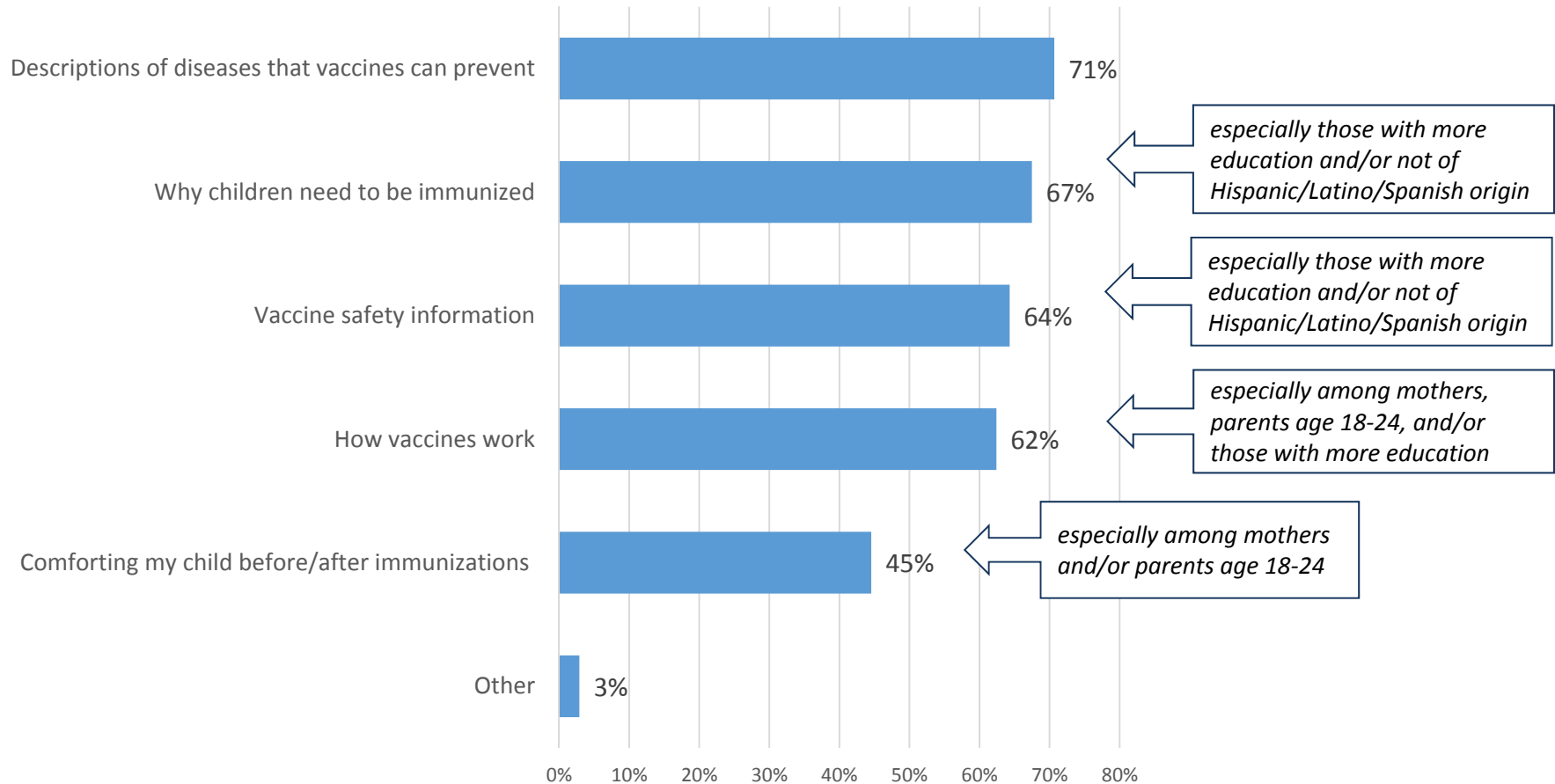
Those who think the topics covered in the mailings are important are more likely to:

- *Keep the materials to refer to later*
- *Report the envelope messages and mailings remind them to do something, including get child immunized on time, take child to next well-child visit, check child's growth and development*
- *Have learned more from the mailings*
- *Report that the mailings are helpful*

Most parents want to know more about the diseases that vaccines can prevent

Most helpful immunization topics to include in Child Profile Health Promotion mailings

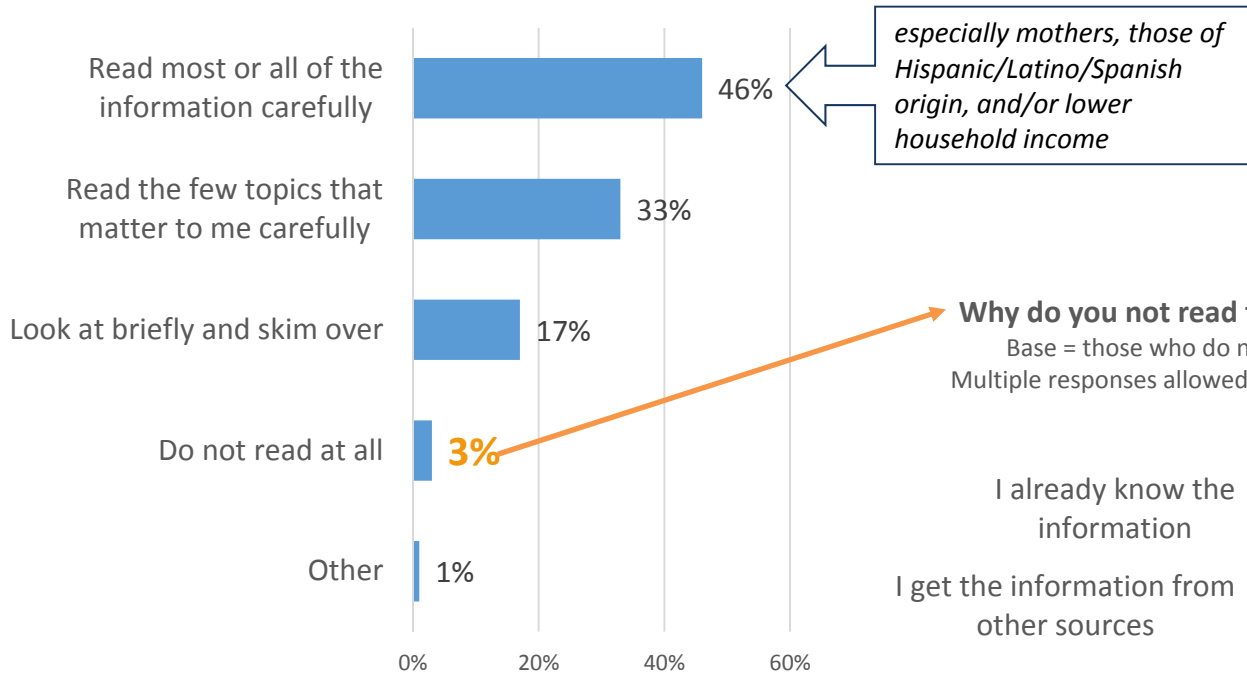
Base = all respondents (n=689)
Multiple responses allowed. Percentages may not add up to 100.



46% read most or all of the information carefully, while 3% do not read at all

What do you usually do with the Child Profile Health Promotion mailings?

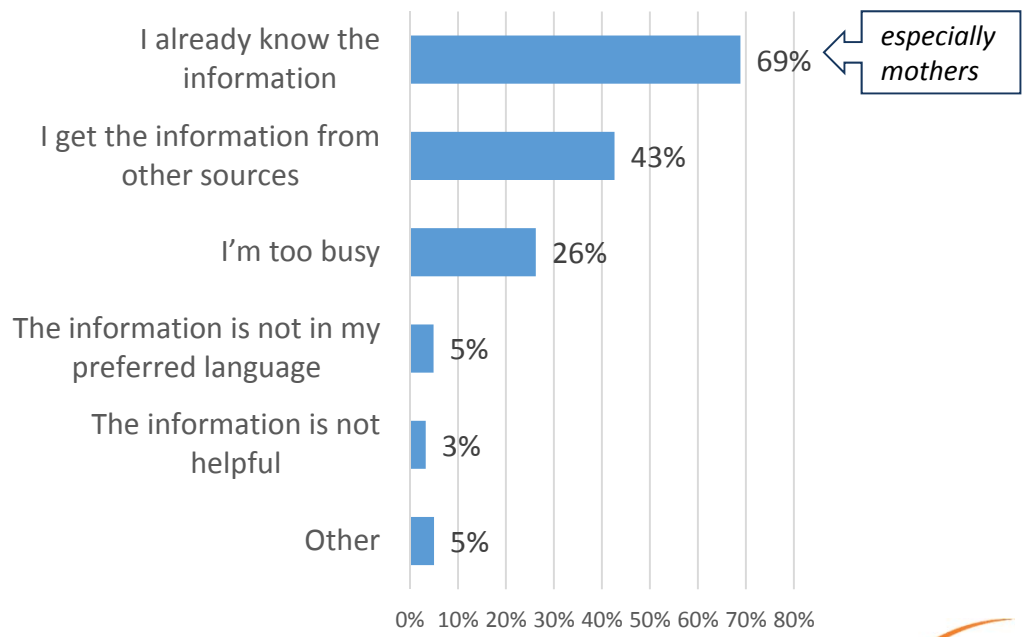
Base = all respondents (n=705)



especially mothers, those of Hispanic/Latino/Spanish origin, and/or lower household income

Why do you not read the Child Profile mailings?

Base = those who do not read the mailings (n=61)
Multiple responses allowed. Percentages may not add up to 100.



especially mothers

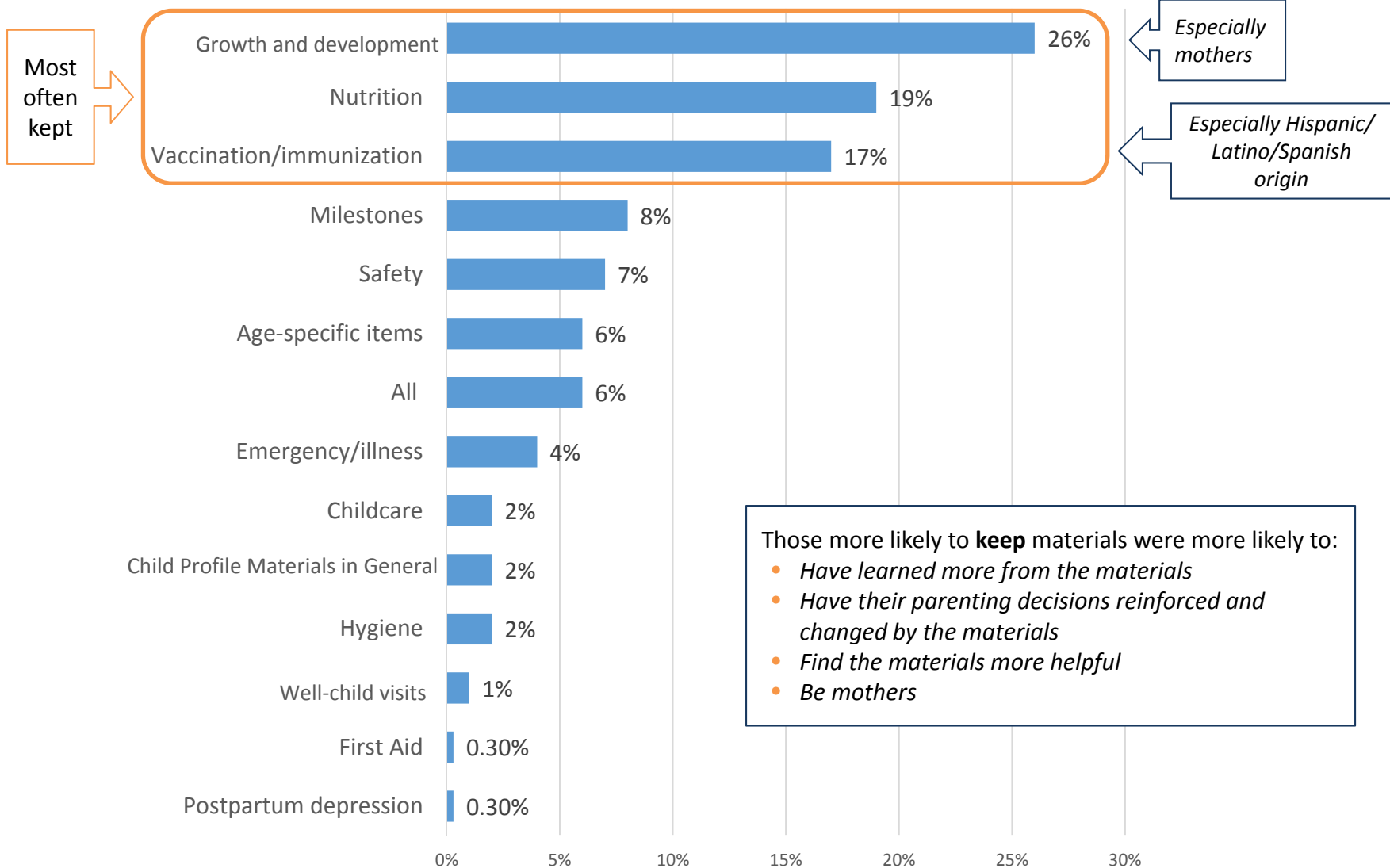
Only 3% reported not reading the materials at all. The major reasons for not reading are:

- Already knowing the information (69%)
- Getting the information from other sources (43%)

60% reported keeping some of the materials in the Child Profile Health Promotion mailings

Which materials in the Child Profile mailings do you keep to refer to later?

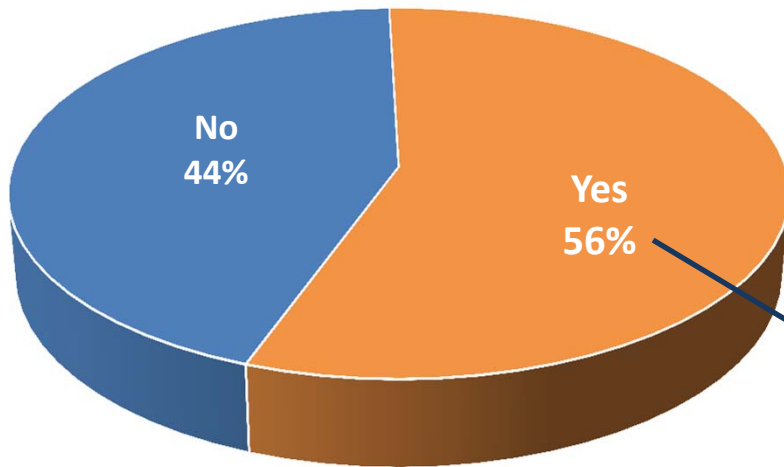
Base = all who kept materials (n=421)



56% notice the messages printed on the front of the envelopes

Have you noticed the messages on the front of the Child Profile mailing envelopes?

Base = all respondents (n=695)

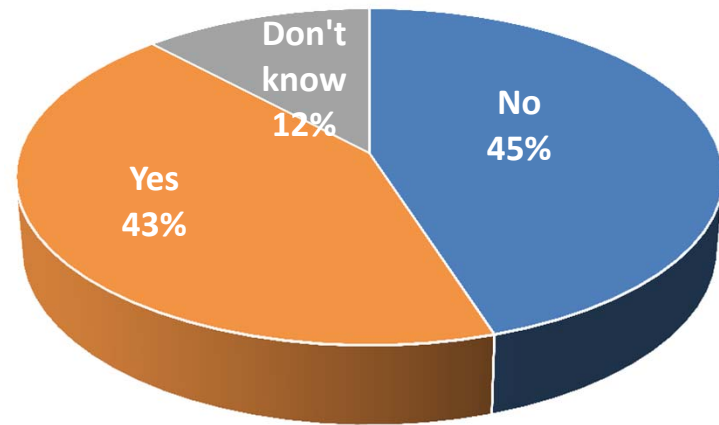


Those who have noticed the envelope messages are more likely to:

- Have learned more from the materials
- Be reminded to get their child immunized on time, take child to next well-child visit, and check child's growth and development
- Have their parenting decisions reinforced or changed by the materials
- Report the materials are more helpful
- Have less education
- Are of Hispanic, Latino, Spanish origin
- Have lower household incomes

Have the messages printed on the Child Profile mailing envelopes reminded and caused you to do something?

Base = all who remembered seeing the envelope messages (n=385)

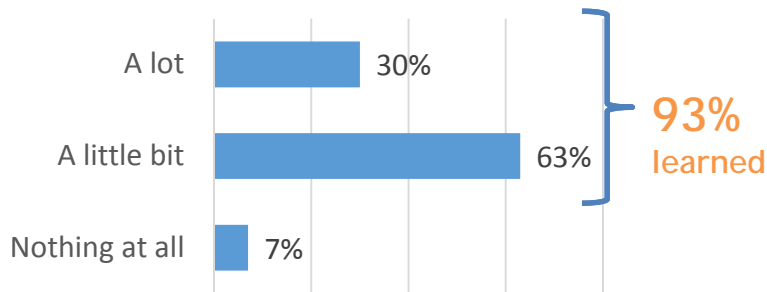


Of those who remember seeing the message, 43% said that the messages on the front of the envelopes reminded or caused them to do something, such as get their child immunized or to call or look online for more information.

93% of respondents have learned something from the materials

How much have you learned from reading the Child Profile mailings?

Base = all respondents (n=699)



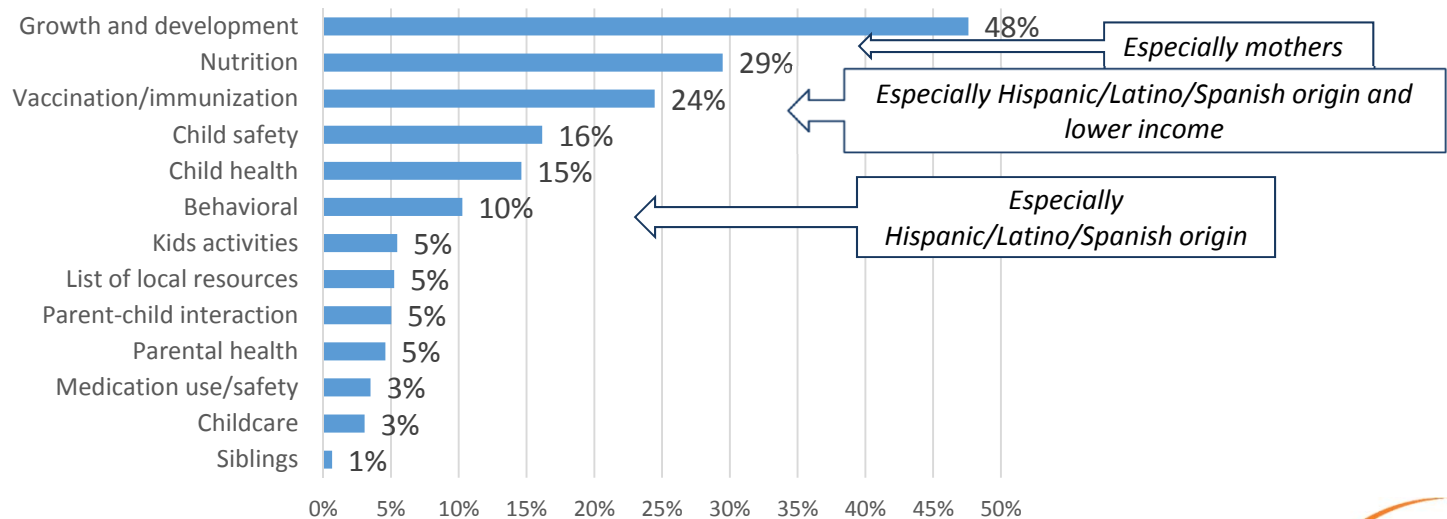
Those who learned more from the materials were more likely to:

- Be reminded by the mailings to get their child immunized, take child to the next well-child visit, and check child's growth and development
- Report the materials reinforce or change their parenting decisions
- Have less education
- Are of Hispanic, Latino, Spanish origin
- Have lower household incomes

Which two topics would be most helpful to have more information on in the Child Profile Health Promotion mailings?

Base = all respondents (n=458)

Multiple responses allowed. Percentages may not add up to 100.

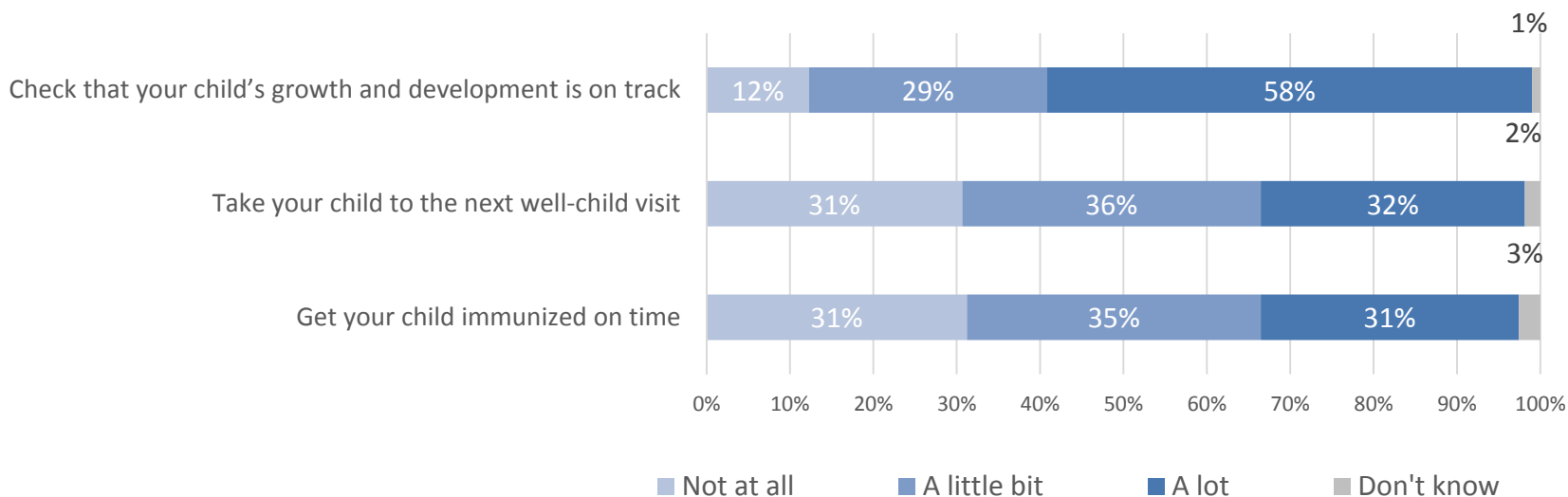


40% of survey respondents did not indicate ANY topics (provided no response to this question) that they would like more information in Child Profile Health Promotion mailings.

The materials in the Child Profile Health Promotion mailings help parents to remember important child health topics, especially growth and development

How much does the information in the Child Profile Health Promotion mailings help you to remember to:

Base = all respondents (n = 698-700)



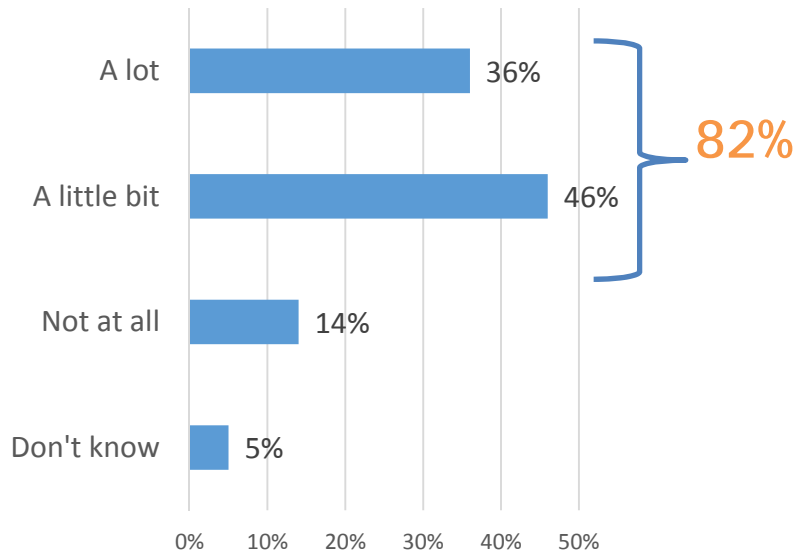
Those more likely to be reminded to do these things three things were also more likely to:

- Have their parenting decisions reinforced or changed by the materials
- Find the materials more helpful
- Be younger
- Have less education
- Be of Hispanic, Latino, Spanish origin
- Have lower household incomes

82% report that the materials in the Child Profile Health Promotion mailings have reinforced their parenting decisions

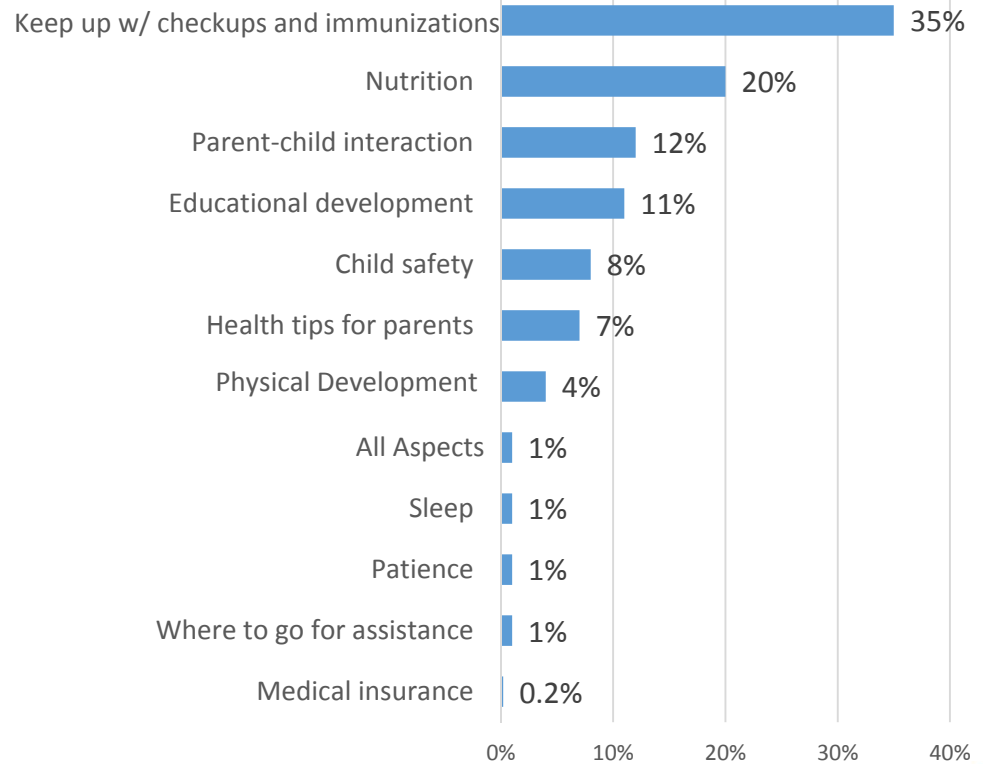
How much has the information in the Child Profile mailings helped reinforce your parenting decisions?

Base = all respondents (n=700)



What is the one most important parenting decision that the materials in the Child Profile Health Promotion mailings have reinforced?

Base = all who said mailings reinforced parenting decisions (n=427)



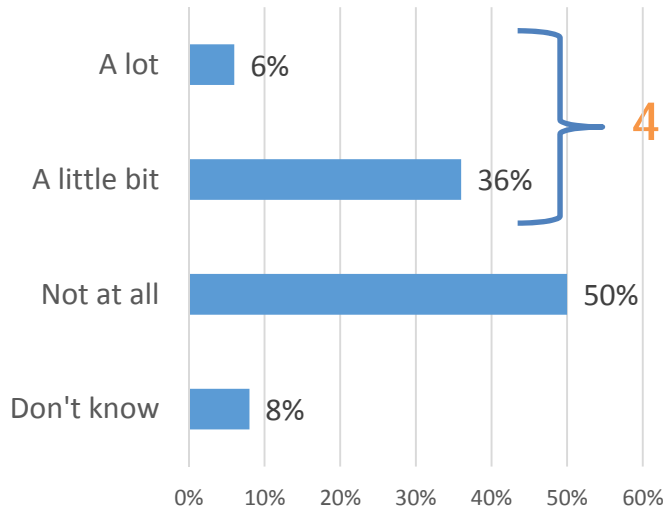
Those more likely to have their parenting decisions reinforced by the materials were those who:

- Found the materials more helpful
- Were of Hispanic, Latino, or Spanish origin
- Had lower household incomes

42% report that the materials in the Child Profile Health Promotion mailings have changed their parenting decisions

How much have you changed your parenting decisions based on information in the Child Profile mailings?

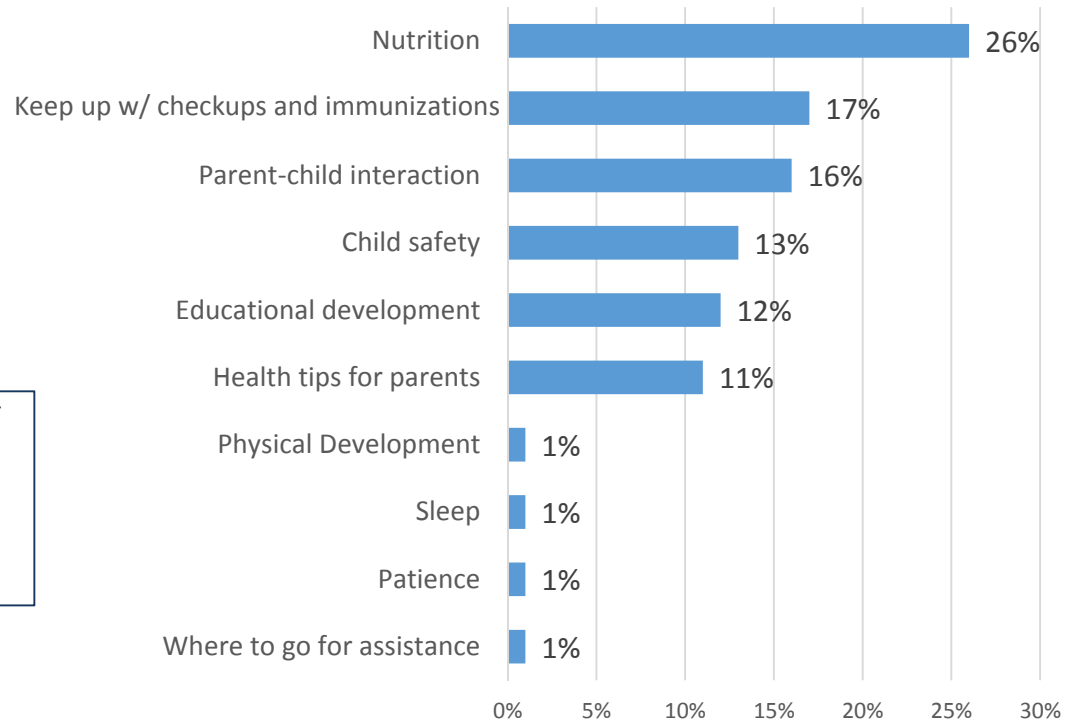
Base = all respondents (n=689)



42%

What is the one most important parenting decision that the materials in the Child Profile mailings have changed?

Base = all who said mailings changed parenting decisions (n=171)



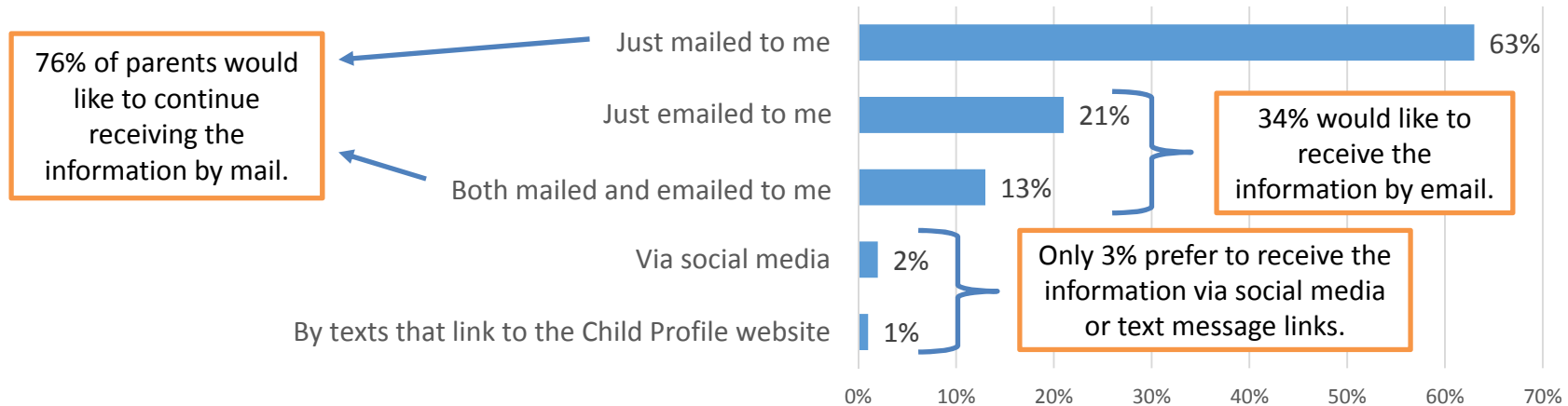
Those more likely to change their parenting decisions based on the materials were those who:

- Found the materials more helpful
- Had less education
- Were of Hispanic, Latino, or Spanish origin
- Had lower household incomes

Most parents prefer receiving the materials in the Child Profile Health Promotion mailings by mail, but email is also popular

What is your first preference for receiving child health and safety information from the Washington State Department of Health?

Base = all respondents (n=688)



44% would prefer that the Child Profile Health Promotion mailings continue past age 6

Those who thought the mailings should continue past age six were more likely to:

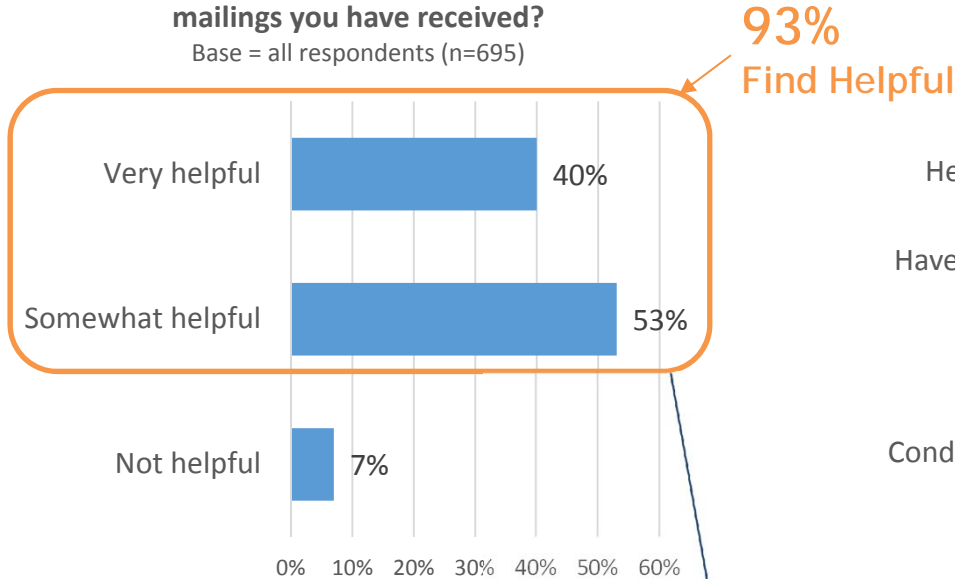
- Find the mailings more helpful
- Have a Hispanic, Latino, or Spanish origin

Of those who would like the mailings to continue past age 6:

- More than half (55%) would like the mailings to end later in childhood, sometime from age 7 and up to age 12
- Close to half (45%) would like the mailings to end in adolescence, sometime between age 13 and 18

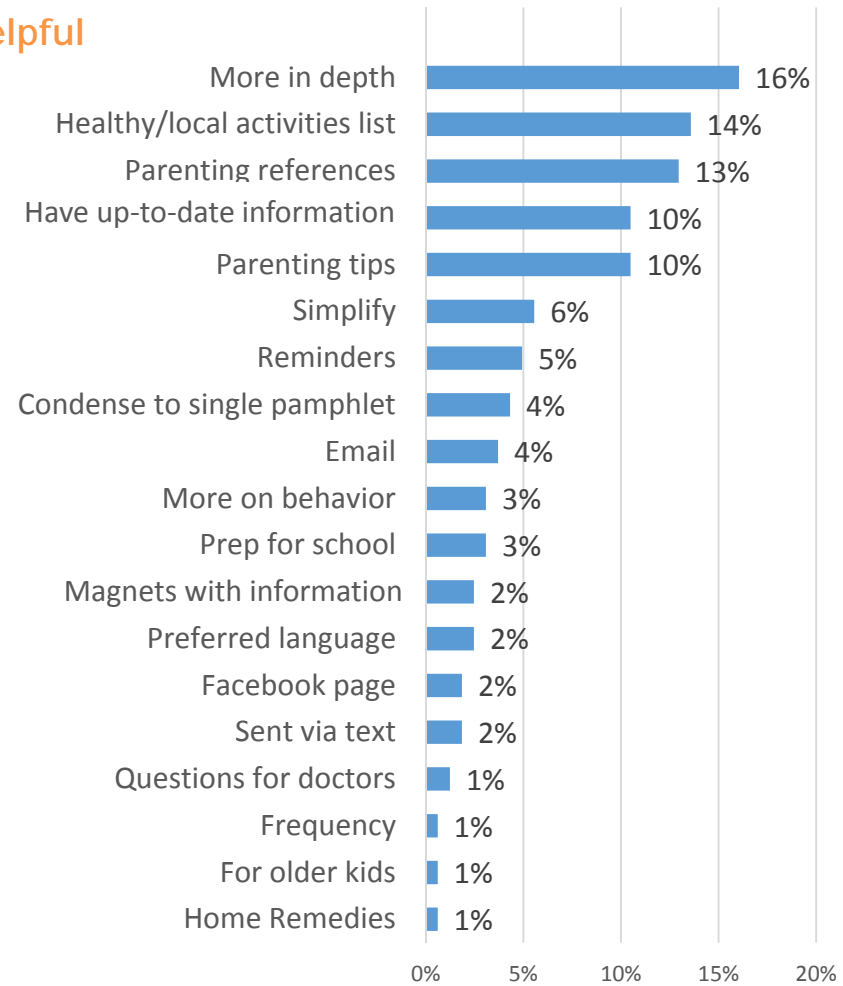
93% reported that the materials in the Child Profile Health Promotion mailings are helpful

Overall, how helpful are the materials in the Child Profile Health Promotion mailings you have received?
Base = all respondents (n=695)



Especially Hispanic/Latino/Spanish and those with lower income

What would make the materials in the Child Profile Health Promotion mailings more helpful?
Base = all respondents (n=180)



Who are the main audiences of Child Profile Health Promotion mailings?

Cluster analysis is a statistical technique used to find targets or audience segments. This type of exploratory data analysis technique helps to reveal natural groupings within a collection of data based on responses to survey questions. Cluster analysis results may reveal meaningful ways to group survey respondents and can help to understand the Child Profile Health Promotion Program audience. This analysis revealed three main audiences of the Child Profile Health Promotion mailings.

Lovers (50%)	Ignorers (43%)	Skeptics (7%)
<ul style="list-style-type: none">• They keep the materials and refer to them later• Most likely to notice the messages on the envelopes• They find the materials in the mailings helpful• Believe all the topics are important• Learned from the materials• Changed parenting decisions, or decisions were reinforced by the mailings• Likely to agree that the materials should stop at age six.	<ul style="list-style-type: none">• Might keep the materials to refer to later• Least likely to notice the messages on the envelopes• The materials are not particularly helpful, but they believe all the topics in the mailings are somewhat important• They don't necessarily learn anything new from the materials in the mailings• They don't necessarily change their parenting decisions because of the materials in the mailings• Are most likely to want materials after age six	<ul style="list-style-type: none">• The materials are somewhat helpful and they may keep them to refer to them later• Somewhat likely to notice the messages on the envelopes• They don't necessarily feel all the topics in the mailings are important• They might learn something new, and depending on the materials this may affect their parenting decisions• Most likely to think the mailings should stop at age six

You can find more detailed descriptions of each cluster in Appendix E.

DETAILED FINDINGS: FOCUS GROUPS

Purpose and Methods of Focus Groups

Main Discussion Topics

After the online survey three focus groups were conducted to better understand impressions and helpfulness of the materials in the Child Profile mailings. The main discussion topics of the focus groups included:

- Where parents currently get health information for their children and family.
- Parents' knowledge about the Child Profile mailings, perceptions of the mailings, and barriers to reading the materials.
- Parents likes and dislikes of particular materials in the Child Profile mailings:
 - Welcome to Child Profile
 - Feeding Your Baby: Birth to six months
 - Watch and Help Me Grow: Birth to 18 months
 - Healthy Fish Guide
 - Pertussis is Serious
 - Feeding Your Baby: 6-12 months
 - Immunizations: Birth through 6 years
 - Parents Need Vaccines, Too!
- Parents' need for information regarding the health of their children past age six
- Parents' impressions about the current look and feel of the materials and possible changes to the look and feel of the Child Profile material mailings.

Methods

PRR conducted a series of three focus groups in November 2015. One group was held at PRR with parents from the Puget Sound area, one group was held in Seattle at El Centro de La Raza and was moderated in Spanish to Spanish speaking parents, and the final group was conducted online to parents living outside the Puget Sound area.

Participants were provided a \$100 Safeway gift card for their time. The number of participants for each group included:

Seattle English Group: 6
 Seattle Spanish Group: 9
 Online English Group: 4

Participants were recruited using email lists and contact information from the multi-mode survey and were screened for:

- Age
- Gender
- Race/ethnicity
- Income
- If they read or received Child Profile Health Promotion materials
- Children under seven years old

The discussion questions were the same across all three groups, but each group looked at only three to four sets of different materials in order to give time for a full discussion. Materials for the Spanish group were provided in Spanish. The full discussion guide and activity worksheets are in Appendix D. The following table outlines which materials were tested in each group:

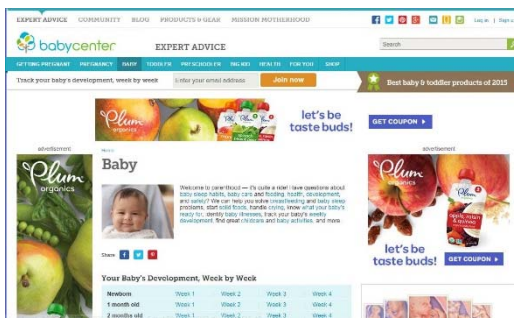
Materials Tested	Groups Tested
Welcome to Child Profile	Seattle English and Spanish Groups
Feeding Your Baby: Birth to six months	Seattle English and Spanish Groups
Watch and Help Me Grow: Birth to 18 months	Seattle English Group
Healthy Fish Guide	Seattle English Group
Pertussis is Serious	Online Group
Feeding Your Baby: 6-12 months	Online Group
Immunizations: Birth through 6 years	Online Group
Parents Need Vaccines, Too!	Seattle Spanish Group

The following results are a summary of all groups, however when applicable notable differences between groups are highlighted.

Where do parents go for health information?

Child Health Resources

- Children’s doctor/pediatrician
- Nurse hotlines
- Internet, specifically for finding pictures
 - There are many unreliable Internet resources on vaccines.
- Government health sources (e.g. CDC)
- Friends with medical experience
- Child Profile Health Promotion mailings (particularly for immunization schedule)
- The Women, Infants, and Children Nutrition Program (WIC) (particularly mentioned in Spanish-speaking focus group)



Parents' thoughts on the materials in the Child Profile Health Promotion mailings. Do they read the materials?

Provided by Washington State, nice, trustworthy.
Seattle Group

A good source of information for parents who do not use a computer.
Spanish Group

I'd rather have more information than less. I can always disregard what I am not interested in.
Online Group

I like the development milestones, child safety, nutrition, and vaccine information.
Seattle Group

The materials are a pleasant surprise.
Online Group

I learned many other topics from the mailings that I didn't learn from my doctor.
Spanish Group

Everyone can follow this advice.
Spanish Group

YES, they read the materials in the Child Profile mailings:

- The materials are a good reference, and parents keep them to refer to later
- The materials are a trustworthy source of information
- Parents' favorite mailings are those that include feeding, development, play, and safety
- The materials are helpful and include timely information, particularly for first time parents
- Mailing the materials is important, particularly for Hispanic parents who may not have access to this information otherwise

I like the development and vaccine information.
Seattle Group

The materials are more fun and interesting than the name "profiling" implies.
Online Group

It is like receiving chapters from a child health book when you need them.
Spanish Group

I learned about lead poisoning and dangers. When I realized I was bringing lead home, I took more precautions.
Spanish Group

Material review: *Welcome to Child Profile* Seattle English Group

Likes and Helpfulness of Materials:

- Clearly states what the program is and in a compact brochure
- Visually appealing
- Easy to read
- Looks approachable
- States where to get immunization records
- Has helpful information like websites, phone numbers, and credible sources
- Has an option to receive the materials via email

Dislikes and Changes to Make:

- Too wordy without being descriptive or informative
- Needs more interesting headlines— “why am I reading this?”
- Graphics look dated
- Put links on the back “contacts” page, or consolidate resource information
- There is too much on one brochure. The basic welcome message and Child Profile purpose information should be separate (different brochure) from the immunization system information.

Where can I get help?



The Family Health Hotline is a partner of the Department of Health. It offers free child and family health information to parents and gives referrals to nearby health and community services.

You may also call the Family Health Hotline at **1-800-322-2588** to:

- Sign up for Child Profile mailings or emails if you are not already getting them.
- Correct your address or child's name.
- Request the mailings in Spanish or another format.
- Cancel the mailings.

If you do not want your own or your child's information in the Washington State Immunization Information System, call **1-866-397-0337**. Also, talk with your family's doctor or clinic about what you want.

WithinReach | WithinReach Family Health Hotline
1-800-322-2588 (711 TTY relay)
or www.ParentHelp123.org



Child Profile is a program of the Washington State Department of Health.

Partially funded by the Federal Vaccines for Children program.
If you have a disability and need this document in another format, please call 1-800-322-2588 (711-TTY relay).

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Material review: *Feeding Your Baby: Birth to six months*

Seattle English and Spanish Groups

Likes and Helpfulness of Materials:

- Highlights the “normalness” of breastfeeding and is positive
- Good information on why breastfeeding is important
- Also provides advice on when to introduce solid foods
- Provides information on protection laws regarding breastfeeding (many did not know about these laws)
- Provides contact information of concerned about breastfeeding

Dislikes and Changes to Make:

- Explain the “right” and protections even more and where to get help if employers aren’t cooperating
- Not enough information on what to do if you can’t breastfeed and feels “shaming”
- Could use images of parents (particularly dads) bottle feeding
- Use a more sympathetic and understanding tone and highlight how to get help when feeling overwhelmed by the difficulties of breastfeeding
- Needs more information on storing breast milk



It highlights that it is a mother's right by law to breastfeed (pump) at work.

Material review: Watch and Help Me Grow: Birth to 18 months

Seattle English Group

Likes and Helpfulness of Materials:

- Good “day to day” examples and validates the importance of the little things we do every day with our children
- Appreciate the milestones by age category
- The poison hotline is really important
- Like the developmental screening hotline
- Suggested activities are accessible and easy

Dislikes and Changes to Make:

- The poison control information should be highlighted more
- Some of the messages seem very “privileged” and don’t seem open or applicable to everyone
- The growth timeline can be somewhat general and vague and not all the activities are helpful
- Like other materials can seem “preachy” and “shaming,” for example if you let your child watch TV. Many parent do this so they can prepare meals or take out the trash, so maybe the advice should be on types of programming that can be beneficial (e.g. Sesame Street)
- Advice should be more realistic on what is actually accomplishable and provide helpful hints

You help me learn and grow through everyday things we do together. Everything I learn, do and feel is connected. How I learn and grow depends on both who I am and what I experience.

Watch and help me grow from birth to 18 months!

	Birth - 3 Months	3 - 6 Months	6 - 9 Months	9 - 12 Months	12 - 15 Months	15 - 18 Months
PHYSICAL HEALTH I grow and learn best when my body is healthy.	I can lift my head. 	I can roll over. 	I can sit up, try to move. 	I use my fingers and toes. 	I start walking without help. 	I can climb and dance.
SOCIAL & EMOTIONAL I learn best when you love me, encourage me and help me be with other people.	I need and trust you. 	I show my feelings. 	I like familiar people best. 	I enjoy playing with adults. 	I like to explore with help. 	I need help with my feelings.
HOW I LEARN I want to learn and you can encourage me.	I look at faces and smile. 	I like to hold things. 	I like to play with toys. 	I move to explore. 	I know what I want. 	I learn through play.
THINGS I KNOW I learn when you help me explore the world around me.	I learn through my senses. 	I notice routines. 	I am interested in people. 	I like to play hiding games. 	I begin to scribble. 	I put things together.
LANGUAGE I learn when you play, talk, read and write with me.	I make noises and listen. 	I make and respond to sounds. 	I babble and try to talk. 	I use sounds with gestures. 	I begin using words. 	I want to be understood.

Instead of “I should not be near a stove” provide more helpful advice like “to prevent injury turn stove handles inward.”

Material review: *Healthy Fish Guide*

Seattle English Group

Likes and Helpfulness of Materials:

- One of the most liked materials
- Simple and helpful
- Something many already carry in their purse/diaper bag
- Good information without sounding “preachy”

Dislikes and Changes to Make:

- Use this as a guide for more materials because it is simple and informative

Do you fish in Washington State?
There is a statewide advisory due to mercury.

- Do not eat northern pike/minnow.
- Limit largemouth and smallmouth bass to two meals per month.

Check for local fish advisories at: www.doh.wa.gov/fish

Washington State Department of Health

For more information visit: www.doh.wa.gov/fish or call TOLL FREE: 1-877-485-7316

What you can do to reduce toxic chemicals: www.ecy.wa.gov/toxics

Available in other formats for persons with disabilities 1-800-525-0127 (TDD/TTY call 711). DOH 334-096 June 2013

HEALTHY FISH GUIDE

Fishing for the safest seafood?

HEALTHY CHOICE
EAT FISH. BE SMART.

Are you pregnant, planning to become pregnant, nursing, or feeding children?

Use this guide to make healthy choices for you and your family.

SAFE TO EAT 2-3 MEALS PER WEEK | **SAFE TO EAT 1 MEAL PER WEEK** | **AVOID DUE TO MERCURY**

Follow this advice to reduce your exposure to mercury, PCBs, and other toxic chemicals:

<ul style="list-style-type: none"> ♥ Anchovies ♥ Black sea bass Butterfish Catfish Clams Cod (US Pacific) (US Atlantic) Crab (Blue, King, Snow) (US, CAN) (imported King) Crab – Imitation Crayfish (imported farmed) Flounder/Sole ♥ Herring ♥ Mackerel (canned) ♥ Oysters Pollock/Fish sticks 	<ul style="list-style-type: none"> ♥ Salmon (fresh, canned) ♥ Chinook (King) (local, Alaska) ♥ Chum (King, King) ♥ Coho (Silver) ♥ Farmed* ♥ Pink (Humpy) ♥ Sockeye (red) ♥ Sardines (US Pacific) (US Atlantic) Scallops Shrimp/Prawns (US, Canada) (imported) Squid/Calamari (frozen, Italian style) ♥ Trout ♥ Tuna (canned light) (troll/pole) (imported longline, purse seine) 	<ul style="list-style-type: none"> Chilean sea bass (Chile) (local, France, Europe & Marion Islands) ♥ Chinook salmon (Puget Sound) Croaker (white, Pacific) Halibut (Pacific) (Alaska) Lobster (US, Canada) (imported Spiny Crustacean) Mahi mahi (imported longline) 	<ul style="list-style-type: none"> Monkfish Rockfish/Red snapper (fresh, canned) ♥ Sablefish/Black cod ♥ Tuna, Albacore (fresh, canned white) (WA, OR, CA troll/pole) (imported longline) Tuna, Yellowfin (imported longline)
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Women who are or may become PREGNANT, NURSING MOTHERS, and CHILDREN should NOT eat:

Mackerel (King)	Tuna Steak
Marlin (imported)	Bluefin
Shark	Bigeye (imported longline)
Swordfish (imported)	
Tilefish (Gulf of Mexico, South Atlantic)	

♥ Highest in healthy omega-3 fatty acids
ORANGE TEXT: Overfished, farmed, or caught using methods harmful to marine life and/or environment
* Farmed salmon information: www.doh.wa.gov/fish/farmedsalmon
Seafood not listed? Call 1-877-485-7316

What is a meal?
A serving/meal is about the size and thickness of your hand, or 1 oz. uncooked fish for every 20 lbs. of body weight.
160 lb. Adult = 8 oz. / 80 lb. Child = 4 oz.

Material review: *Pertussis is Serious*

Online Group


Likes and Helpfulness of Materials:

- All the information at the different age stages is very useful, concise, and in one place
- Seriousness of pertussis is clear
- Direct, but not overly wordy
- Good information for parents to make informed decisions

Dislikes and Changes to Make:

- Needs more information about others that interact with the baby also needing to get vaccinated
- Information provided is also important for pregnant women as well
 - *Can you sign up for "Child Profile" at OB appointments?*

Needs to say more about how important for ANYONE who interacts with your baby...it can be hard to convince grandparents and other caregivers on the concern of pertussis.




Pertussis is Serious

What is pertussis?
Pertussis (whooping cough) is a respiratory disease that spreads easily by coughing and sneezing.

How serious is it?
Pertussis is most dangerous for babies. They often have severe coughing spells that make it hard to breathe, eat, drink, and sleep. Pertussis can lead to pneumonia, seizures, brain damage, and death. Recent outbreaks in Washington have caused hospitalizations and deaths, mostly in babies under six months.

3 ways to protect your baby and family

- ✓ **Get your child the DTaP vaccine** at the following ages for full protection:
 - 2 months
 - 4 months
 - 6 months
 - 15 - 18 months
 - 4 - 6 years
 - Plus a dose of Tdap at age 11-12
- ✓ **Get the Tdap vaccine for you and your family.** Children, teens, and adults can protect themselves and babies by getting a Tdap vaccine. Babies usually get pertussis from family or friends who do not know they have it.
- ✓ **Get the Tdap vaccine during the third trimester of each pregnancy** for the best protection. Women who do not get the vaccine during pregnancy should get it right after giving birth.



Material review: *Feeding your baby: 6-12 months*

Online Group

Likes and Helpfulness of Materials:

- Examples of daily menu and information on portion sizes
- Information on wiping gums
- Like the diverse photos used in the brochure
- Highlights the importance of caution and carefulness when feeding your baby

Dislikes and Changes to Make:

- More meal ideas with more age ranges
- Importance of also giving your baby water (not just milk) to make sure they stay hydrated
- More information on how to eliminate or deal with nighttime feeding
- More information about "*honey—when exactly is it okay? What if it's in baked goods?*"
- More information on fluoridated "*water—is that okay?*"
- More information about dental care

At that age they don't need much, and parents don't know if they're still hungry.

Feeding your baby



6-12 months



Material review: *Immunizations: Birth through 6 years*

Online Group

Likes and Helpfulness of Materials:

- Information on how each disease spreads differently
- Information is available in other languages

Dislikes and Changes to Make:

- More about vaccinating other people who interact with the baby
- Information, or adjusted schedule, for premature infants
- More information about immunocompromised relatives or caregivers and what is safe/not safe (e.g. those receiving cancer treatments)
- More information on school requirements for vaccines
- More information on the return of preventable disease and why we are still at risk (risk of non-vaccination)

Comfort Your Baby
It's hard to watch your child get shots. If your child feels that you are relaxed, she is more likely to feel safe. Breathe slowly and stay calm.

There are things you can do to comfort your child at any age:

- Bring along his favorite toy or blanket.
- Hold him in your lap.
- Reassure him that everything is okay.
- Ask your doctor about when to give him medicine to reduce pain or fever.

For infants:

- Touch your baby gently and talk softly to her.
- Make eye contact as you smile at her.
- Hold, cuddle, or feed your baby.

For toddlers:

- Talk to or sing with your child.
- Help him to take deep breaths and "blow out" the pain.
- Point out posters or objects in the room.
- Tell a story or have him tell you one.
- Let your child cry. Don't force him to be brave. Help him understand that a shot hurts a short time, but being sick hurts a lot longer.

More Immunization Information
Learn the facts about vaccine benefits and risks by getting the free booklet **Plain Talk About Childhood Immunization** from the **Washington State Department of Health**.

- Available in English, Spanish, and Russian
- To download, search for publications at: www.doh.wa.gov
- To order a printed copy, call: Family Health Hotline at 1-800-322-2588

U.S. Centers for Disease Control and Prevention:

- www.cdc.gov/vaccines
- 1-800-CDC-INFO (1-800-232-4636)
- TTY: 1-800-232-6348
- email: NIPINFO@cdc.gov

Vaccine Education Center at the Children's Hospital of Philadelphia:

- www.vaccine.chop.edu

Immunization Action Coalition:

- www.vaccineinformation.org

WithinReach
Washington State Department of Health
Family Health Hotline
1-800-322-2588 (TDD) (711)
www.ParentHelp123.org

CHILD PROFILE
childprofile.org

Health
© 2015 Child Profile is a service of the Washington State Department of Health.

Partially funded by the Federal Vaccines for Children Program.
If you have a disability and need this document in another format, please call 1-800-322-2588 (711) TTY: 325-0053E DOH 348-088 March 2015

What are the permissible excuses for not vaccinating? Are there consequences for parents that don't vaccinate their school-aged children?

Material review: Parents Need Vaccines, Too!

Seattle Spanish Group

Likes and Helpfulness of Materials:

- The table of adult vaccines and dosages
- Case studies showing the importance of getting vaccinated
- Q & A section
- Noting that adults getting vaccines keeps their family and neighbors safe
- Message that adults getting vaccinated keeps family and children safe, not just the adult

Dislikes and Changes to Make:

- Missing in-depth explanations on the differences between cold, flu, and whooping cough
- Some illnesses seem to be omitted (shingles and chickenpox)
- There is A LOT of text, crowded, and hard to read
- Some vaccines come in pairs and there is no mention of this

¡Los padres también necesitan vacunas!

Proteja a usted mismo

¿Los adultos realmente necesitan vacunas? Sí. Los adultos necesitan protección de las enfermedades. Cada año en Estados Unidos, hasta 50,000 adultos mueren por enfermedades que los adultos pueden prevenir, como la gripe y la neumonía. Usted y sus hijos también se enferman por las mismas enfermedades que los adultos. ¡Proteja a usted y a su familia!

Proteja a su familia

¿Por qué debería vacunarme? Los niños les protegen a sus familias y vecinos. Si usted se vacuna, ayuda a proteger a los demás. Esto es así, la gripe y la neumonía. También es importante para usted, para poder seguir a su familia y sus amigos. Los adultos también se enferman por las mismas enfermedades que los niños. ¡Proteja a usted y a su familia!

Recursos para saber más

Departamento de Salud del estado de Washington
www.dsh.wa.gov

Centros para el Control y la Prevención de Enfermedades
www.cdc.gov/immunization/DC/parentsadults.html

Vaccines.gov
http://vaccines.gov

Proteja a usted mismo. Proteja a su familia.

¿Qué es la inmunidad comunitaria? La inmunidad comunitaria es la inmunidad colectiva y protege a las personas que no pueden vacunarse. Si usted se vacuna, ayuda a proteger a los demás. Esto es así, la gripe y la neumonía. También es importante para usted, para poder seguir a su familia y sus amigos. Los adultos también se enferman por las mismas enfermedades que los niños. ¡Proteja a usted y a su familia!

Enfermedad	Vacuna	Edad recomendada
Neumonía	Prevenar 13	65 años o más
Gripe	Flucelvax	65 años o más
Neumonía	Prevenar 13	65 años o más
Gripe	Flucelvax	65 años o más
Neumonía	Prevenar 13	65 años o más
Gripe	Flucelvax	65 años o más
Neumonía	Prevenar 13	65 años o más
Gripe	Flucelvax	65 años o más
Neumonía	Prevenar 13	65 años o más
Gripe	Flucelvax	65 años o más

Other topics and information needed past age six

All Groups

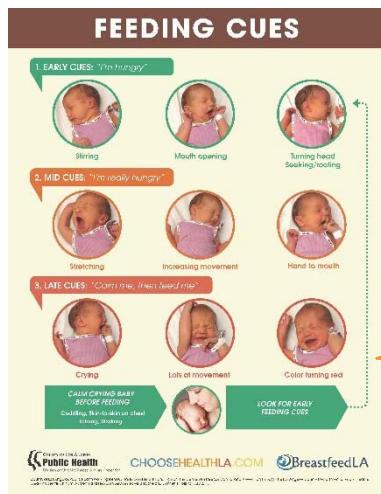
Other Topics to Add:

- More information on the flu vaccine (particularly in Spanish Group)
- More medical reports or case studies to support information provided
- Education and preschool preparation
- Social development skills
- How to deal with behavior issues
- Eye health
- Losing weight postpartum/how to take care of mom (how to get a break)
- More poison information and hotlines
- CPR at different ages
- How to find a parent support group
- Add contraception information while breastfeeding (provide sooner)

Information Need after Age six:

- Particularly early “teen” information:
 - New vaccinations for this age group (e.g. HPV)
 - How to deal with bullying
 - Saying no to “peer pressure”
 - Mental health signs/hotlines
 - Obesity
 - Menu ideas for teens
 - Puberty
 - Advice on dangers of technology and Internet safety
 - STD’s prevention and how to talk to your teen about this
- Preventing obesity, diet examples for more age stages beyond age six
- Raising confident children
- Internet safety for all ages
- Where to find parent support groups beyond age six

YES (all groups), Child Profile should expand and provide information beyond age 6!



Here is an example of the best handout I have seen on 'feeding cues'—more information like this would be good.

Impression of look and feel of Child Profile Health Promotion materials and suggested changes

All Groups

Things to consider for rebranding Child Profile Health Promotion:

- Make the logo bigger and more noticeable
- Add more color overall (note: many parents in the Seattle Group preferred the drawings over the photos)
- Make the mailings more aesthetically pleasing, and more compact (less text and more pictures)
- Something to better describe what Child Profile is (name of the program was more confusing for the Spanish Group)
- Continue mailing the materials, but offer an email version
- Also distribute at doctor offices, community centers, schools, and cultural fairs



DETAILED FINDINGS: IN-THE-MOMENT RESEARCH

In-The-Moment Purpose and Methods

Purpose and Methodology

In order to test different publications and education materials, PRR implemented a two week online ethnography of 18 parents with children between the ages of 0 and 15 months.

Using a list of parents provided by the Department of Health, PRR recruited 21 participants via email. Participants were recruited across the state of Washington, and 3 parents were recruited for each of the 7 age groups: 0, 1, 3, 6, 9, 12, and 15 months. All of the parents who signed up were female and 18 of the 21 recruits participated in the study. Participants were provided \$100 Safeway gift cards at the end of the study.

All of the parents in this phase of the study had at least one child who was scheduled to receive a Child Profile Health Promotion mailing in the next couple months. Parents of newborns received an additional copy of the introductory mailing that they had already recently received. Parents of children soon to be 1, 3, 6, 9, 12, or 15 months old received the next set of materials intended for their child, but ahead of schedule. For parents who did not have older children or had recently moved to Washington State, this was their first time viewing these materials. For parents who had older children, this was their second or third time receiving some of these materials.

Scheduled Mailings Tested	Number of Moms
Introduction/Welcome	3
1-month mailing	1
3-month mailing	2
6-month mailing	3
9-month mailing	3
12-month mailing	3
15-month mailing	3

Each parent was asked to complete five online activities between November 30 and December 16, 2015. Each activity asked the parents to provide real-time feedback on the materials included in the Child Profile mailings they received and share insights about other useful child health resources. The activities asked parents to report their initial impressions, what they learned, what was most memorable, what they would change, and whether anything from the materials changed their behavior.

Research Activities

The measurements used throughout the study were qualitative. During the study period, participants were asked to respond to a series of open-ended questions and activities using an in-the-moment online tool from Revelation Global™. This tool allowed them to provide feedback (written and photographic) about their experience receiving, reading, and acting on the materials in the Child Profile mailings when they were actively engaged in this behavior.

All of the activities from this online system are included in Appendix D.

Limitations

Given the qualitative nature of this portion of the study, these insights are most helpful for understanding in more depth how different parents interact with the materials. As stated previously, not all of the recruits participated in the study, so the findings for the one-month mailing are based on just one parent's feedback.

All of the findings include a call-out box to highlight when parents independently mentioned the same thing. For the most part, parents found value in different materials, and so the findings largely highlight their diversity of experiences.

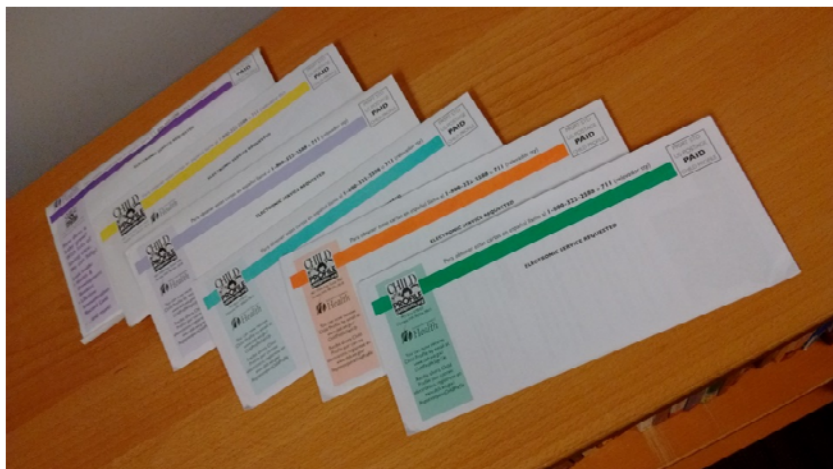
What happens to the mailings once they arrive?

Journey

- Most parents put the mailing aside before reading it
- Many parents keep the materials from the mailings that are most relevant or that they'll want to refer back to
- Many parents recycle everything after they read it
- Some parents recycle all bulk/junk mail, so it's important for Child Profile Health Promotion mailings to stand out or they are at risk of being thrown out before they get opened

Advice on How to Increase Readership

- Keep it short (several parents read the short stuff first, or only read the short stuff and then skim the long stuff)
- Have an email opt-in option
- Publicize that PDFs of the materials are online



Sharing the Readings

- Most of the participants (all moms) share the materials with or at least talk about some of the materials with their child's father (11)
- Many of the moms talk about materials with their friends who are moms (6) and some will forward them on to friends who live in other states
- Several of the participants share the materials with other family members, especially grandparents who help care for their child (3) or siblings who have children, too (1)
- Only two of the participants said that they haven't talked to anyone else about the materials
- Many of the moms said that they act as gatekeepers and only talk about or share the materials that they think are important or noteworthy
- Few of the moms regularly talk about the materials with their child's doctor
- One mom mentioned that she will leave the materials at the library when she is done with them in hopes that someone else will re-use them

Introduction/Welcome Mailing (3 moms)

Favorites

- immunization materials
- protective sleeve
- nutrition
- childcare
- activities

Feedback

- Try to make this mailing stand out EVEN MORE - it's crucial for parents to open the first one!

General Impressions

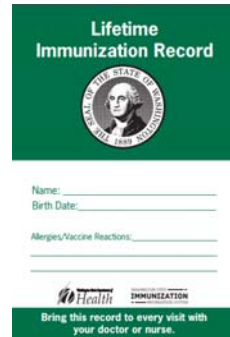
- Useful
- Lots of info, not all relevant to every parent
- Easy to read

Memorable

- Different parenting styles

Behavior Changes

- All continue to breastfeed



Washington State Department of
Early Learning

1-Month Mailing (1 mom)

Feedback

- Would like more about breastfeeding past 6 months (the focus in these materials is on the first 6 months)
- Would like a handout on how to help older siblings adjust to a new baby

General Impressions

- Most is useful for the first baby

Memorable

- Watch & Help Me Grow, especially the chart



3-Month Mailing (2 moms)

Favorites

- Emergency info is especially helpful
- The DTaP publication was convincing and concise
- "The Watch Me Grow flyer was my favorite as I felt it was the most accessible-easy to follow and read without taking a lot of time, and yet very informative."
- Development page is especially helpful for parents with older kids - serves as a reminder of when babies reach milestones
- Most of the three month mailing

Feedback

- Three month letter sleep recommendations were overly specific: "it was so specific and didn't allow for individual circumstances. It instead prescribed a very limited way of putting baby to sleep, which I didn't identify with and don't use."
 - Left lingering questions - this is a complicated issue and providing 1 option isn't enough
- "The safety care book had so much information. I skimmed it before recycling. I either already know the information or I find it easier to look up online instead of searching the house for a book."
- Whooping cough timing seems off - important during pregnancy (which isn't explained in the reading) and by 3 months the baby and parents should already have the vaccine



Watch Me Grow - 3 Months

General Impressions

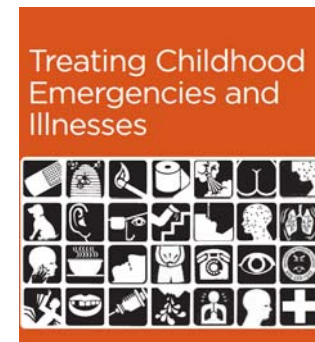
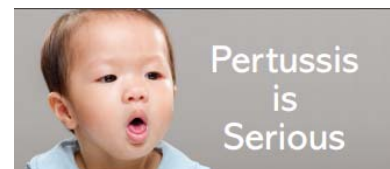
- Lots of information, can be overwhelming

Memorable

- Watch and Help Me Grow milestones
- Having the emergency info makes her feel relieved

Behavior Changes

- Mom and dad decided to get the flu vaccine after all
- Printed out the guidelines to share with Grandmother who watches the baby during the day



6-Month Mailing (3 moms)

Favorites

- *Love Talk Play - looks great!*
- Feeding your baby - having age group on front helps for parents with multiple kids, everything in there is good - keep in kitchen
- Watch Me Grow 6 Months - know it's Child Profile and can find topics quickly - summary often has enough info - one put with baby's important papers and medical paperwork
- Flu vaccine - like the section about the 2 types of vaccine and annual reminder

Feedback

- Watch Me Grow - didn't like paper and lack of color
- Flu Vaccine
 - Should highlight the need for double doses of the flu vaccine for kids under 9 years old
 - Already read this at doctor's office
- Healthy Habits feel like common sense, may be unnecessary for some
- Watch and Help Me Grow could say more about how each child is different, these are just guidelines
- Would like more age appropriate games/songs in the materials
- Add more about teething
- More on breastfeeding and nursing support

2 mentioned



Memorable

- Using hand signs - good reminder to start this with second child, would be nice to include some hand signs in the materials
- Importance of flu vaccines
- Parents are child's first teacher
- Dental care
- Conversation ideas
- Baby proofing by getting down on their level
- When to introduce solid foods
- Baby walkers aren't safe

Lingering Questions

- What do I do for a bad diaper rash?
- Could diaper rashes be a sign of an allergy?
- Should vaccines happen all at once or be split up?
- What are good recipes for homemade baby food?

Behavior Changes

- Gives baby a sippy cup with water at meal time
- Called doctor to confirm 6 month appointment
- Will use nutrition info when ready to start solids
- More aware of milestones
- Talk to the baby more throughout the day

9-Month Mailing (3 moms)

Favorites

- Baby Teeth - read and file
- Watch Me Grow 9 Months - carefully read
- Reminder about baby in the bathtub
- Importance of eating together

Feedback

- Fish - not helpful for some
- Would be helpful to talk about different developmental timelines - this mom's babies were crawling and pulling themselves up by 8 months
- More about car seats (front vs. back facing, wearing heavy coats in them, etc.)
- More about early walking

General Impressions

- Likes that they are short and to the point
- Not offensive, easy to read
- Professional yet friendly
- Likes that they have a website

Memorable

- Dental care

2 mentioned

Behavior Changes

- Introduce wider variety of food
- Started brushing teeth more often
- Removing the bottle
- Reading to baby more
- More routine feeding times
- Thinking more about toxins - lead, plastics, fish, etc.
- Use fluoride



12-Month Mailing (3 moms)

Favorites

Watch Me Grow is familiar and like the consistent formatting across the ages

Feedback

- Put 'Mom: Pregnancy planning' in an earlier mailing, people who don't know that they should wait at least a year shouldn't learn that once the year is already up
 - One of the moms got pregnant again when her firstborn was just 4 months old, she said you should include this information at 1 or 3 months, and then again at 12 months
 - Moderator's note: this information in Watch Me Grow could also be written in a clearer way to explain how the length of a pregnancy is related to spacing between pregnancies
- Why does chickenpox get its own flyer, while all of the other vaccines are grouped together?
- Chickenpox flyer had flimsier paper than the others, while the lead flyer had durable paper which implies that it should be saved
- Lead flyer was the nicest, as though it's the most important, but all 3 doctors this mom has spoken to haven't been worried or offered testing for her child even though they live in an older house
- Screen time is such a big problem that this merits more information about what it does to a child's brain/cognitive development
 - Another says that this is outdated information, screens can be necessary when you have multiple young kids, and can provide educational benefits
 - The current phrasing makes parents feel guilty if the parent needs a way to occupy their baby for a short time while they clean the bathroom or take out the trash

2 mentioned

- Watch and Help Me Grow flyer was boring, would be nice to have more specific examples of milestones
- Include more about emotional intelligence "Saying 'When your child gets sad or upset, talk with him about his feelings' is pretty vague. Are you naming the feelings when they feel them? Or reading books and looking at pictures of emotions and describing them?"
- Northwest Burn Foundation link is outdated, it's now the Washington State Council of Fire Fighters Burn Foundation
 - Knowing that there are outdated links raises red flags about the validity of the Child Profile information
- Need more info about car seats - many parents are not following the recommendations/laws

General Impressions

- Eye catching pictures and colors
- Relevant and short info is easy to read quickly
- Nice reminder
- "I honestly think all of the information is helpful. Parenting is tough and in the thick of things it is easy to forget about what typical sleeping, eating and activities look like. Even experienced parents can enjoy the information in the mailings."

Memorable

- Looked up the post-vaccination comfort tips online, which were very helpful

Behavior Changes

- Talk and read more to/with baby
- More childproofing
- Less concerned about what baby is eating

15-Month Mailing (3 moms)

Favorites

- Health, milestones, illness and immunizations

Feedback

- Would like more recipe ideas
- Would like more resources on developing good sleeping habits

General Impressions

- Readings were more informative when child was younger, now they seem more basic
- Helpful for first time parents
- All good info and good reminders for parents with older children

Memorable

- Nutritional information
- Child proofing
- Hand washing
- Pertussis flyer

All 3 mentioned

Behavior Changes

- Washing hands together and singing
- Thinking more about how to discuss emotions and feelings
- Providing choices to pick from (clothes, food, and toys)
- More veggies and less dairy



Resources

For Learning:

Nine of the parents mentioned the Child Profile Health Promotion mailings as a common source of information for learning about their child's health.

Some of the parents rely on books, and the favorite was *Your Baby's First Year* (3 mentioned).

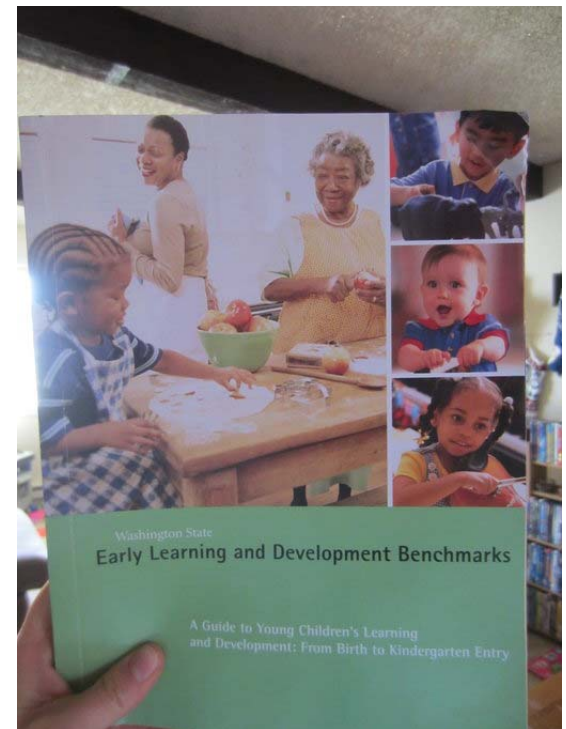
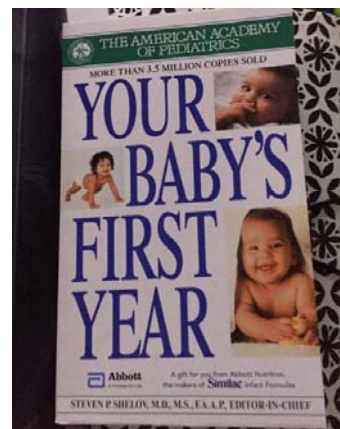
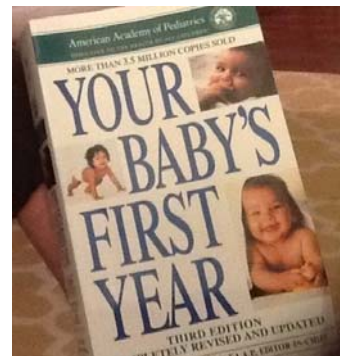
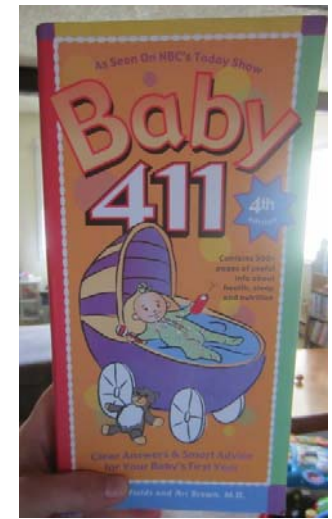
Many of the participants use the Internet to learn about their child's health. The most popular websites were:

- Babycenter.com (7 mentioned)
- Mayoclinic.com (5 mentioned)
- Webmd.com (5 mentioned)

Parents use the Internet in a variety of ways to find more information, including:

- Pinterest (3 mentioned).
- Google searches (3 mentioned) rather than going directly to a trusted resource.
- Wonder Weeks App (2 mentioned).
- Emails about child health (2 mentioned).

Care providers are also a major source of information for parents. This includes conversations with their child's dentist (3 mentioned), pediatrician (2 mentioned), or a relative who is a medical professional (2 mentioned). This also includes handouts, web resources, and other print and online information from care providers.



Resources

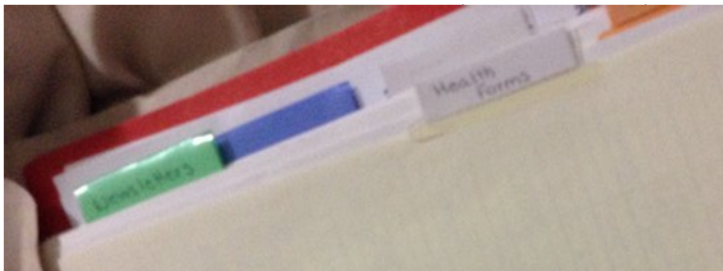
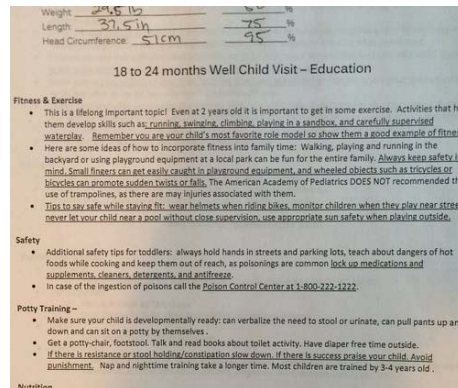
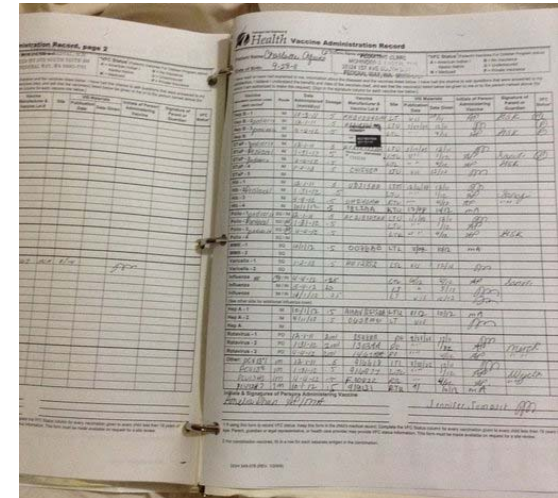
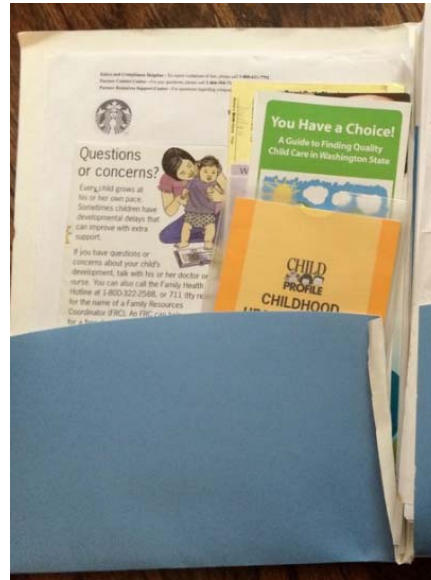
For Tracking/keeping info:

Many of the parents rely on a combination of online and print materials/tools to track and store information about their child's health and medical history.

Five of the parents mentioned using the Lifetime Immunization Record card that they received in the Child Profile Health Promotion mailings, and another mentioned using the "Child Profile Childhood Health Records: Birth to 18 years."

Other common ways to track or store information included:

- Binder/notebook (7 mentioned).
- Folder/files (7 mentioned).
- Calendar (3 mentioned).
- Care providers (3 mentioned).



Other Feedback

Add more (or any) info on

- Circumcision
- Sleep habits
- Ideas for activities to do with babies, month by month
- Preschool and elementary school
- Allergies
- A list of online resources

Changes

- The online versions are nice for sharing with friends, family, and caregivers - publicize them more
- Some would prefer email instead of (or in addition to) the physical mailings
- The more that health care professionals talk about the materials to their patients, the more likely that parents will open and read them
- Make sure the PDFs are hyperlinked, that makes it easier for parents to go directly to the extra resources
- Have an interactive area where parents can ask questions and see the responses

Keep

- Addressing the letters to the kids makes them stand out - keep doing that!

Other

- Finding the time to read them is difficult
- Readings good for settling disagreements between parents, or between parents and other caregivers (including grandparents, family members, friends, etc.)

APPENDICES

Appendix A: Survey Questions



CHILD PROFILE SURVEY ▲

The Department of Health would like to know what you think of the Child Profile Health Promotion mailings. Your feedback will help us better serve you and other parents and guardians. When completing the survey, think about the child health and safety materials the Department of Health mails to you. ▲

Your participation is very important to us. The survey will take about 10 minutes and your answers are completely confidential. After completing the survey, simply fold it so that the return address to PRR, Inc. shows, secure with one small piece of tape, and drop it in the mail. No postage is required. **Please mail by October 26, 2015.**

You can also complete the questionnaire online at <http://goo.gl/0z0Ynt>

If you have any questions about the survey, please contact research@prrbiz.com.

FOR OFFICE USE ONLY

We thank you for your participation and for helping to improve the Child Profile Health Promotion mailings!

Appendix A: Survey Questions

Please indicate your choices like this: ▲

1. As a parent, you deal with many things. Please tell us how important it is to cover each of the following topics in the Child Profile mailings. Depending on the age of your children, some of the topics may be things you have already dealt with, are currently dealing with, or may eventually deal with. Please rate all of the topics.

▲	Very unimportant	Somewhat unimportant	Somewhat important	Very important	Don't know
❖ Choosing and preparing for child care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Keeping your home safe/baby proofing your home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Keeping children's teeth healthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Immunizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Parental health/health tips for parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Safe infant sleep	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Well-child visits to the doctor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Postpartum depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Shaken baby syndrome	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Protecting children from toxic chemicals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Getting ready for kindergarten	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Dangers and safety of E-cigarettes around children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Safe and unsafe seafood for children and pregnant/ nursing women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Growth and development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
❖ Nutrition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Which of the following immunization topics do you think would be most helpful for the Child Profile mailings to include? (check all that apply)

Comforting my child before/after immunizations
 Why children need to be immunized
 Descriptions of diseases that vaccines can prevent
 Vaccine safety information
 How vaccines work
 Other (please specify) _____

3. What do you usually do with the Child Profile mailings? (check just one)

Read most or all of the information carefully *Skip to Q5*
 Look at briefly and skim over *Skip to Q5*
 Read the few topics that matter to me carefully *Skip to Q5*
 Do not read at all
 Other (please specify) _____ *Skip to Q5*

4. If you do not read the Child Profile mailings, why don't you? (check all that apply)

I already know the information
 The information is not helpful
 I get the information from other sources
 The information is not in my preferred language
 I'm too busy
 Other (please specify) _____

5. Do you keep some of the materials in the mailings after you have read them so that you can use or refer back to them later?
- No *Skip to Q7* Yes

Appendix A: Survey Questions

6. Which Child Profile materials do you keep to use or refer back to later? For each material listed, please indicate how many months or years you keep it to use or refer back to.

Material	# of months kept	# of years kept
1.		
2.		
3.		
4.		
5.		

7. The Child Profile mailing envelopes typically have a message printed on the front, such as *"Is your household protected from flu and whooping cough? Stay healthy this year. Get vaccinated! Talk with your doctor today about low or no-cost vaccine options."* Have you noticed these messages on the envelopes?

No Skip to Q9 Yes

8. Have the messages printed on the envelopes reminded or caused you to do something, such as get your child immunized or call or look online for more information? No Yes Don't know

9. How much have you learned from reading the Child Profile mailings? Nothing at all A little bit A lot

10. Which two topics would be the most helpful to have more information on in the Child Profile mailings?

1. _____
2. _____

11. How much does the information in the mailings help you remember to:
- | | Not at all | A little bit | A lot | Don't know |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| ❖ Get your child immunized on time | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ❖ Take your child to the next well-child visit | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ❖ Check that your child's growth and development is on track | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

12. How much has the information in the mailings helped reinforce your parenting decisions?

▲ Not at all Skip to Q14 A little bit A lot Don't know

13. What is the one most important parenting decision that the mailings have helped to reinforce? ▲

14. How much have you changed your parenting decisions based on information in the Child Profile mailings?

Not at all Skip to Q16 A little bit A lot Don't know

15. If you have changed any parenting decisions based on information in the Child Profile mailings, what is the one most important parenting decision that you've changed?

16. Child Profile mailings end when your child turns six. If you could continue to receive them after age six, at what age would you like to receive them through?

I think they should end at six years Older than six years - What age? _____

Appendix A: Survey Questions

17. What are the top two ways you would prefer to receive child health and safety information from the Washington State Department of Health? ▲
- | | 1 st Preference | 2 nd Preference |
|--|----------------------------|----------------------------|
| ❖ Just mailed to me | <input type="checkbox"/> | <input type="checkbox"/> |
| ❖ Just e-mailed to me | <input type="checkbox"/> | <input type="checkbox"/> |
| ❖ Both mailed and e-mailed to me | <input type="checkbox"/> | <input type="checkbox"/> |
| ❖ By texts that link to the Child Profile website | <input type="checkbox"/> | <input type="checkbox"/> |
| ❖ Via social media (please specify platform) _____ | <input type="checkbox"/> | <input type="checkbox"/> |

18. Overall, how helpful are the Child Profile mailings you have received? ▲
- Not helpful Somewhat helpful Very helpful

19. What would make the Child Profile mailings more helpful?
- _____
- _____

The following questions are used for analysis purposes. Remember, your answers are completely confidential.

20. Please list the ages of the children who live in your home: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

21. Are you your child's: Mother Father Other (please specify) _____

22. Which of the following includes your age?
- Under 18 18 to 24 25 to 34 35 to 44 45 to 54 55 and older

23. What is the highest level of education you have completed?
- Less than 12th grade 12th grade or GED College degree
 Some college/technical school Graduate school degree

24. What race would you classify yourself as? (check just one)
- African American Asian
 Caucasian Native Hawaiian or Pacific Islander
 American Indian or Alaska Native Other (please specify) _____

25. Are you of Hispanic/Latino/Spanish origin? No Yes ▲

26. What was your total household income (before taxes) for 2014? ▲
- | | | |
|---|---|---|
| Less than \$15,000 <input type="checkbox"/> | \$25,000 to less than \$35,000 <input type="checkbox"/> | \$75,000 to less than \$100,000 <input type="checkbox"/> |
| \$15,000 to less than \$25,000 <input type="checkbox"/> | \$35,000 to less than \$50,000 <input type="checkbox"/> | \$100,000 to less than \$150,000 <input type="checkbox"/> |
| | \$50,000 to less than \$75,000 <input type="checkbox"/> | \$150,000 and over <input type="checkbox"/> |

27. Would you be willing to participate in a discussion group to help the Department of Health learn more about how to improve the Child Profile mailings? No

Yes - Please provide your contact information below. We will only use this information to invite you to participate in a discussion group.

Name: _____

E-mail: _____

Phone: ____ - ____ - ____

Appendix B: Survey Respondent Profile

Relation to child(ren) (n=687)

- Mother – 87%
- Father – 12%
- Other – 1%

Age of parent or guardian (n=690)

- Under 18 – 1%
- 18 to 24 – 6%
- 25 to 34 – 51%
- 35 to 44 – 38%
- 45 to 54 – 3%
- 55 and older – <1%

Highest level of education (n=687)

- Less than 12th grade – 6%
- 12th grade or GED – 7%
- Some college/technical school – 13%
- College degree – 42%
- Graduate degree – 31%

Race (n=618)

- Black/African American – 3%
- White/Caucasian – 82%
- American Indian or Alaskan Native – 1%
- Asian – 12%
- Native Hawaiian or other Pacific Islander -- 1%
- Other – 2%

Hispanic/Latino/Spanish background (n=665) – 16%

Household income

- Less than \$15,000 – 9%
- \$15,000 to less than \$25,000 – 7%
- \$25,000 to less than \$35,000 – 8%
- \$35,000 to less than \$50,000 – 9%
- \$50,000 to less than \$75,000 – 15%
- \$75,000 to less than \$100,000 – 15%
- \$100,000 to less than \$150,000 – 22%
- \$150,000 or more – 18%

Appendix C: Focus Group Moderator Guide and Activities

Child Profile 2015 Focus Group Moderator Guide

A. Introduction/Warm Up (10 minutes)

- [Moderator introduces herself/himself.]
- [Explain:] A focus group is a group discussion where we can learn more in-depth about peoples' ideas and opinions (compared to telephone or written surveys).
- My job is to facilitate the discussion and make sure that everyone has an opportunity to speak **and to make sure that no one dominates the conversation.**
- Housekeeping – Toilets and refreshments.
- 1. [Mention ground rules.]
 - There are no right or wrong answers; we're interested in your honest and candid opinions and ideas.
 - Our discussion is totally anonymous. We will not use your names in any report.
 - Our discussion today is being recorded. These recordings allow us to write a more complete report, and to make sure we accurately reflect your opinions. However, please only speak one at a time, so that the recorder can pick up all your comments.
 - That is a one-way mirror behind me and a couple of my colleagues are observing our discussion
 - It is important to tell us YOUR thoughts, not what you think others will think, or what you think others want to hear.
 - Please turn off cell phones
 - Your gift card will be provided as you leave.
 - We will validate parking at the end of the night
 - Relax and enjoy
- Very generally, we're going to spend our time today talking about information on child health, safety, vaccines, and other related information. Any questions about the purpose of our focus group or the ground rules before we begin?

I'd like you each to introduce yourselves. Please tell us:

- Your first name
- Where you live
- How many children do you have?
- What are their ages?

B. Where Do You Get Child Health Information (15 minutes)

1. How do you currently get information about child health? Probe for:
 - What sources do you use?
 - Internet (which sites)
 - Doctor/health professionals

1

Appendix C: Focus Group Moderator Guide and Activities

DRAFT 2

- Friends/Family
 - Child Profile mailings
 - Books
 - Other
2. Are there different sources you use for different types of child information? Why? Probe for:
- Growth and development sources
 - Nutrition sources
 - Immunization sources
 - Well-child visit reminders
3. What about information on Vaccines? Where do you go most? What is your go-to place for vaccine information? Why? Probe for:
- Internet (where)
 - Doctor/Health professional
 - Child Profile mailings
 - Other
4. Which sources do you trust the most? Why is that?
- Doctor
 - Family/Friends
 - Public Health Dept
 - Internet
 - Child Profile mailings
 - Other

C. Perception/Knowledge of Child Profile Program (20 Minutes)

1. Now let's focus a bit more on the Child Profile program. Provide participants with the **Mind Map** form, and ask them to write down whatever comes to mind when they think of Child Profile. What do you know about Child Profile? What does the term/name Child Profile mean to you?
- Then open up to discussion and capture common themes.
2. Does everyone know what the Child Profile mailings look like (show examples of a newsletter/envelope if needed)?
3. What types of materials does Child Profile send? Do you remember receiving any materials from them? What do you remember receiving?
4. Do you read the materials when they arrive? Right away or later? How thoroughly? Why or why not? What is the main reason you do not/or would not read them?
5. What are general impressions of these materials you have received from Child Profile? Are they useful/helpful? Why or why not?

Appendix C: Focus Group Moderator Guide and Activities

DRAFT 2

6. Do you act on the information in the materials that is new to you? Do you follow the advice? Why or why not? Do you follow/act on some of the information but not all of it? Why some advice but not all of it?

- **Focus on Barriers:** What stops you from following the recommendations?

7. Is the Child Profile program a worthwhile/important program? Do you feel this is important information to get to parents in WA? Why/Why not?

D. Thorough Review of 3 Child Profile Materials (40 minutes)

For each group -- 3 examples of newsletters or partner publications will be presented (different for each focus group). Such as Nutrition brochures, flu, Safe infant sleep, Growth and Development, etc.

Review publication #1: Provide the first set of materials to review, and allow them a few minutes to review/read the material. Provide **worksheet** asking them to write what information they like/dislike, what is helpful/not helpful. [*Indicate to participants not to focus on the look of the materials, but the information*]

After Review Discuss:

- Likes/Dislikes
- What is helpful information/not helpful information?
- Did they learn something new from this publication? What did they learn?
- Would this information make you change anything about what they do? Why or why not?
- Would they keep this for further review later or as a reminder?
- What information is missing that would make the materials more useful/helpful?

Review publication #2: Provide next set of materials to review, and allow them a few minutes to review/read the material. Provide **worksheet** asking them to write what information they like/dislike, what is helpful/not helpful. [*Indicate to participants not to focus on the look of the materials, but the information*]

After Review Discuss:

- Likes/Dislikes
- What is helpful information/not helpful information?
- Did they learn something new from this publication? What did they learn?
- Would this information make you change anything about what they do? Why or why not?
- Would they keep this for further review later or as a reminder?
- What information is missing that would make the materials more useful/helpful?

Review publication #3: Provide last set of materials to review, and allow them a few minutes to review/read the material. Provide **worksheet** asking them to write what information they like/dislike, what is helpful/not helpful. [*Indicate to participants not to focus on the look of the materials, but the information*]

After Review Discuss:

Appendix C: Focus Group Moderator Guide and Activities

DRAFT 2

- Likes/Dislikes
- What is helpful information/not helpful information?
- Did they learn something new from this publication? What did they learn?
- Would this information make you change anything about what they do? Why or why not?
- Would they keep this for further review later or as a reminder?
- What information is missing that would make the materials more useful/helpful?

E. Other Topics/Extending Child Profile Past Age 6 (10 minutes)

1. What child health and safety topics do you wish you had more information on? What topics do you think Child Profile should focus on or add? What is missing from the materials you have received? Why?
2. If you could change just one thing about the Child Profile mailings, what would that be to improve their publications, newsletters, and materials?
3. Currently Child Profile sends materials to parents of children up to age 6. Should they send information on child health after age 6? Why? Why not?
 - If so how often should the reminders/newsletter come? Every:
 - 6 months
 - 1 year
 - 2 years
4. Are there any topics of information that would be useful for parents with older children? What do you think would be useful? Why?

F. Look & Feel/ Brand of Materials and Getting Child Profile Information to Parents (25 minutes)

1. I want you to pretend that you (this focus group) are the group that is in charge of marketing the Child Profile materials and information. Break up into groups of 2-3 and take about 3-5 minutes to brainstorm:
 - How would you market or get the materials to parents?
 - Would you improve the materials? Why or why not?
 - How would you get parents to pay attention and read this important information?
 - What is your plan to communicate to parents, let them know about Child Profile?

Provide pads and pens for them to write down their ideas.

Discuss and present their ideas and follow-up with these specific questions:

2. Currently all the materials are mailed? Is this the best way to continue getting information to parents? Email? Both mail and email? What about social media? Text message? Online? Other?

Appendix C: Focus Group Moderator Guide and Activities

DRAFT 2

3. What about the current envelope and tagline? Do you think it grabs parent's attention? Could this be improved? How?
4. The Child Profile program is planning a re-branding project to refresh and modernize the materials. What do you think about that?
5. Knowing that they are going to be updating the brand and materials, what are your initial suggestions for improvements?
6. What are your thoughts around making the parent letter a little bigger, perhaps a foldable larger format—it would have the same amount of information (or more information if they'd like), but it would have more pictures, color, white space, and design.
7. Is there anything you DO NOT want them to change? What should stay the same?

Okay, now let me go back to see if the observers have any final questions for you.

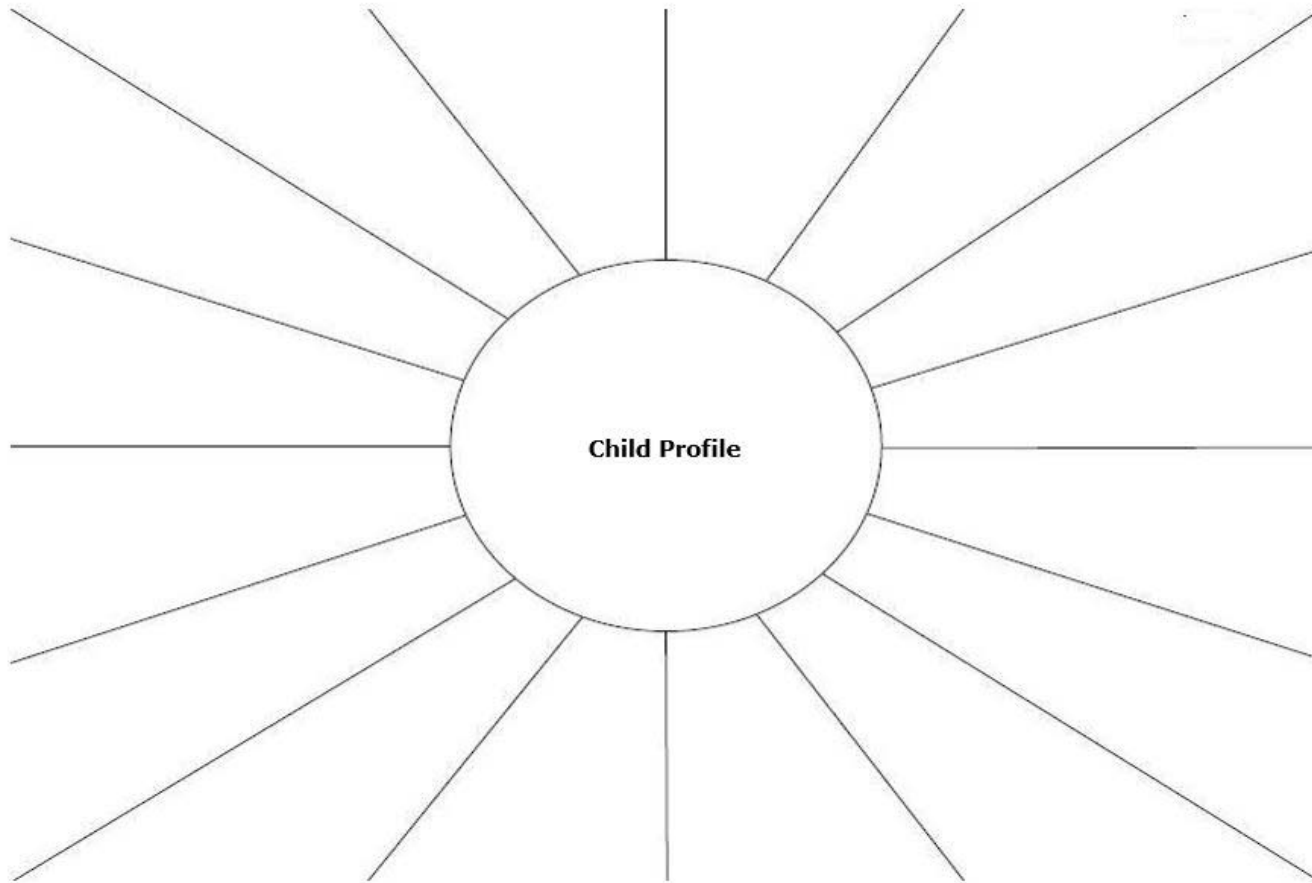
G. Wrap Up (3 minutes)

8. Now that we've completed our discussion, is there anything that particularly stands out for you? Any other thoughts or comments?

Appendix C: Focus Group Moderator Guide and Activities

Mind Map Activity

Focus Group Date: _____



Appendix C: Focus Group Moderator Guide and Activities

Likes, Dislikes, Helpful, and Not Helpful Worksheet for Materials Reviewed

Publication # _____ Date _____

LIKES	Helpful
DISLIKES	Not Helpful

Appendix D: In-The-Moment Activities

Activity 1: Introduction



Welcome! My name is Kate and I am the “moderator” for this study, which means I will be asking the questions, monitoring this site daily and communicating with you on an ongoing basis.



I’ve got a bunch of fun activities planned for you over the next couple weeks!

There will be new activities to complete throughout the coming week, so I encourage you to log in to this website several times a week.

You can contact me by clicking the “messages” button located in the menu on the left. If you need technical support, click the “Get technical support” button also located in the menu on the left side of the page. You can submit a message and the support team will help you resolve the issue.

Be yourself. The main objective of this first activity is to learn a bit about you. Please know that there are no “wrong” or “right” answers. We are simply looking for your honest thoughts and what is “right for you” (not someone else!)

For *each activity* I’ll let you know if it is private or if you can see other parents’ responses after you leave your own response. This first activity is private.

To get us started, tell me a bit about yourself, your kid(s), and anyone else you live with.

[Click here to respond](#)

Appendix D: In-The-Moment Activities

How do you keep track of information about your child or children's health, such as their growth and development, health and dental checkups, and vaccinations? If you use online tools, it would be really helpful if you could provide the links to those websites.

Click here to respond

Please upload some photos of where you keep or access this information about your child's health and what materials you have.

[+ Add a photo](#)

Individual images limited to 10MB
Permissible image types: .jpg, .jpeg, .png, or .gif

Appendix D : In-The-Moment Activities

Now, tell me about what resources you use to learn or find information about your child or children's health. I'm interested in hearing about what you use to learn about different aspects of their health including growth and development, nutrition, immunizations, home safety, safe infant sleep, and taking care of their teeth. Please include any online links, and please include a photo of brochures, books, or other resources if you often use them.

Click here to respond

+ Add a photo

Individual images limited to 10MB
Permissible image types: .jpg, .jpeg, .png, or .gif



Thanks for completing this first activity!

Your next activity will be asking for your first impressions of your next Child Profile mailing. Please come back to the website once you receive your Child Profile envelope in the mail.

Appendix D : In-The-Moment Activities



Activity 2: First Impressions of your Child Profile mailing



Welcome back! To complete this survey, please refer to the Child Profile mailing materials that arrived at your home in early December.

This activity is private. Other participating parents won't be able to see your feedback for this activity.

First off, tell me the story of the Child Profile mailing's journey from arriving in your mailbox up to right now, and then what you think you will do with the mailing next. Is this typical?

Click here to respond

What are your initial impressions on each of the Child Profile materials you received?

Click here to respond

Appendix D : In-The-Moment Activities

If you've already read or skimmed some of the materials from the mailing, what did you focus on? What was helpful and not helpful about each material?

[Click here to respond](#)

If you haven't read the materials in the mailing yet, how likely are you to read some of the materials later, and why? Which materials do you think you will take the time to read, and why?

[Click here to respond](#)



Thanks for completing this second activity! Please come back to the website in a couple days to answer some more questions about your Child Profile mailing.

Appendix D: In-The-Moment Activities

Activity 3: More about your Child Profile Mailing



Welcome back!

This activity is private. Other participating parents won't be able to see your feedback for this activity.

Some time has passed since you first received your Child Profile mailing. Tell me what has happened since the last activity. Did you read more of the Child Profile materials, file it away for later, recycle it without reading anything, etc.? Is this typical of what usually happens with Child Profile mailings at your home?

[Click here to respond](#)

Have you talked about or shared the materials with anyone? Is this typical?

[Click here to respond](#)

Appendix D : In-The-Moment Activities

If you read or skimmed the materials, tell me a bit about what stuck with you. What was helpful? Did you learn anything new? Do you have any lingering questions? What feelings and thoughts do you have about the materials?

[Click here to respond](#)

If you didn't read or skim through the materials, tell me more about why you decided not to. What feelings and thoughts do you have about the mailing? Do you think you will look at them later?

[Click here to respond](#)



Thanks for completing this activity; you are now more than half way done with the study! We will have two more activities, both starting on December 10.

Appendix D: In-The-Moment Activities

Activity 4: Is Anything Different?



This is our final private activity. Other participating parents won't be able to see your feedback for this activity.

Tell me what you've done in the past week or so to support your child or children's health. Are you doing anything new or different?

[Click here to respond](#)

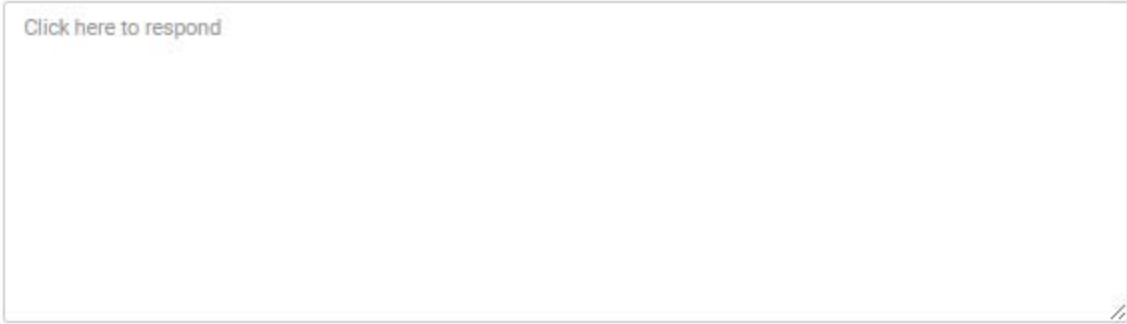
Have you given any more thought to the Child Profile materials you received? Have they influenced you in any way? Have you taken any action or changed your behavior as a result of what you've read in the materials?


[Click here to respond](#)

Appendix D: In-The-Moment Activities

What lingering questions or concerns about your child's health that the materials did not address? What will you do next?

[Click here to respond](#)



 Thanks for completing this activity, there is just one more left!

Appendix D: In-The-Moment Activities



Activity 5: Favorite Resources and Tools



You've made it to the end of the study!

This activity is public, so that parents can learn from each other. After you post, you will be able to see other participants' responses. You are welcome and encouraged to reply to other people's posts with questions and comments.

For this final activity, please tell the group about your favorite resources, tools, and materials involving children's health. Tell us about what makes them so helpful and what you use them for.

[Click here to respond](#)



Appendix D: In-The-Moment Activities

Please also tell the group if there are any types of resources, tools, or advice that you would like to know about. What information would be useful that you haven't yet received? If possible, describe your dream resources and tools.

[Click here to respond](#)



You're officially done, though I encourage you to check out what the other participants post, and feel free to comment or ask questions. Thank you again for all of your help, we learned a lot!

Appendix E: Cluster Analysis Details

Cluster analysis indicated three customer segments. Cluster analysis is an exploratory data analysis technique designed to reveal natural groupings within a collection of data based on responses to survey questions. Cluster analysis results may reveal meaningful ways to group survey respondents and may help with tailoring outreach efforts.

● = most likely ● = more likely ● = less likely ● = least likely

	'Lovers' 50%	'Ignorers' 43%	'Skeptics' 7%
believe all topic areas presented in survey are important to cover in mailings	●	●	●
read all or most of the information carefully	●	●	●
keep the mailings to refer to later	●	●	●
notice the messages on the envelopes	●	●	●
have the envelope messages remind them to do something	●	●	●
learned from the materials in the mailings	●	●	●
have the materials from the mailings remind them to get their child immunized, take their child to well-child visits, and check child's growth and development	●	●	●
parenting decisions reinforced by the materials in the mailings	●	●	●
changed parenting decisions based on materials in the mailings	●	●	●
think the materials in the mailings should stop at age six	●	●	●
think the materials in the mailings are helpful	●	●	●

Appendix E: Cluster Analysis Details

Cluster analysis indicated three customer segments. Cluster analysis is an exploratory data analysis technique designed to reveal natural groupings within a collection of data based on responses to survey questions. Cluster analysis results may reveal meaningful ways to group survey respondents and may help with tailoring outreach efforts.

Cluster 1: Lovers - 50%

- More likely to believe all topic areas presented in survey are important to cover in mailings
- More likely to read all or most of the information carefully
- More likely to keep the mailings to refer to later
- More likely to notice the messages on the envelopes
- More likely to have the envelope messages remind them to do something
- Have learned the most from the mailings
- More likely to have the mailings remind them to get their child immunized, taken to well-child visits, and check child's growth and development
- More likely to have parenting decisions reinforced by the mailings
- Somewhat likely to have changed parenting decisions based on mailings
- More likely to think the mailings should stop at age 6
- More likely to think the mailings are helpful

Cluster 2: Ignorers - 43%

- Somewhat less likely to believe all topic areas presented in survey are important to cover in mailings
- Less likely to read all or most of the information carefully
- Less likely to keep the mailings to refer to later
- Least likely to notice the messages on the envelopes
- Least likely to have the envelope messages remind them to do something
- Have learned the least from the mailings
- Least likely to have the mailings remind them to get their child immunized, taken to well-child visits, and check child's growth and development
- Least likely to have parenting decisions reinforced by the mailings
- Least likely to have changed parenting decisions based on mailings
- Somewhat more likely to think the mailings should continue past age 6
- Least likely to think the mailings are helpful

Cluster 3: Skeptics - 7%

- Much less likely to believe all topic areas presented in survey are important to cover in mailings
- Less likely to read all or most of the information carefully
- Least likely to keep the mailings to refer to later
- Less likely to notice the messages on the envelopes
- Less likely to have the envelope messages remind them to do something
- Have learned less from the mailings
- Less likely to have the mailings remind them to get their child immunized, taken to well-child visits, and check child's growth and development
- Less likely to have parenting decisions reinforced by the mailings
- Much less likely to have changed parenting decisions based on mailings
- Most likely to think the mailings should stop at age 6
- Less likely to think the mailings are helpful

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