



POPULATION'S ADHERENCE TO THE PORTUGUESE HEALTH EXAMINATION SURVEY: THE PERSPECTIVES OF FIELDWORK TEAMS

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BACKGROUND AND OBJECTIVES

The engagement of fieldwork teams is key to successful surveys implementation. Thus, the Portuguese National Health Examination Survey (INSEF) is involving fieldwork teams in survey quality control processes.

INSEF is a cross-sectional population-based study representative at regional (7 Regions) and national level focused on health status, health determinants and use of health care services. INSEF target population comprises community-dwelling individuals aged between 25 and 74.

Sample size: 600 individuals for each region (4200 at national level).

Data collection: blood collection, core physical measurements and a CAPI questionnaire.

INSEF local team: The fieldwork staff (receptionists, nurses and laboratory technicians) worked at the local health centre. They were trained for the survey measurements before the fieldwork started.

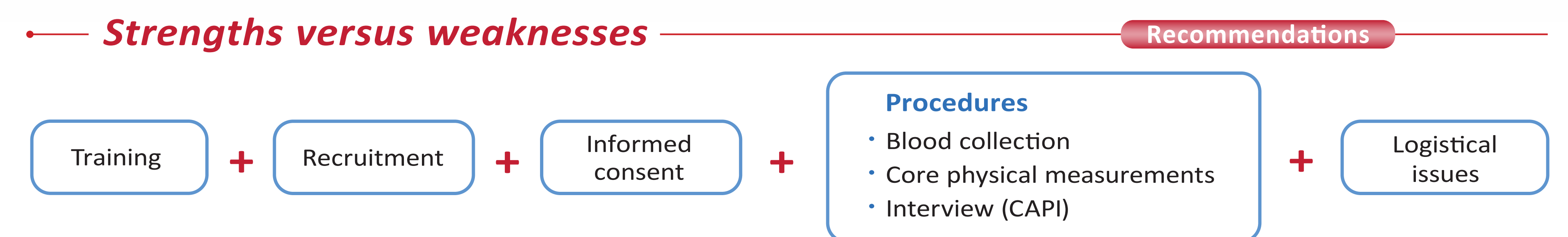
The aim of this presentation is to report a midterm evaluation's results of the internal quality control concerning participants' recruitment strategies and how these influence participation rate.

METHODS

A focus group discussion was carried out with fieldwork teams (nurses, laboratory technicians and administrative staff) and regional coordinators in the North, Center and Algarve regions.

Each focus group had between 8 to 14 participants with an average age of 47 years and a long professional experience with an average of 22 years.

A slideshow presentation fostered the discussion of the survey process: It also explored the teams' perceptions of local cultural attitudes and the strategies used within the fieldwork. A thematic content analysis was performed.



SOME RESULTS OF FOCUS GROUP

TRAINING

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- Adequate program (contents) of formation
- Spectacular manuals
- Very detailed

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- In Physical exam notebook the absence of separators (**height, weight and perimeter**) makes it **difficult to fill in the information and visually it's not well achieved.**
- Need for additional practical exercises** (difficulty in filling data collection instruments and in internalising procedures) **and more days of training** (Center and Algarve)
- Use of different colors would make it easier to find the **corresponding part of the physical exam notebook** (Algarve)

RECRUITMENT

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- Being free of charge
- Letter signed by General practitioner
- Free clinical analysis
- Interest in the scientific study and never having been invited (specifically in the younger generation)

- Credibility of having a health professional doing the exam
- Good study presentation in the recruitment
- Schedule flexibility
- Invitation and confirmatory telephone calls

PHYSICAL EXAM

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Difficulty in finding the **right spot to measure the hip perimeter** (Algarve)

Difficulty/embarrassment in **taking off the pants** (specifically men) (Center)

Equipments:
The fact that the stadiometer swings is a problem, because its difficult to fix (glue, cardboard)
Measuring tape splits in half (Algarve, Center, North)

When we start to measure the blood pressure, they start to undress and then they take off their shoes. There are a few that wanted to undress even more. We got a little bit of everything. (North)

Cultural differences

BLOOD SAMPLE

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Problems in the equipment

We don't have a proper blood collection chair, where a person can extend the arm; only on top of the table (Algarve)

"A constraint is to know where to sit the persons down. We would sit the person in a wheelchair and I didn't even had a chair to myself. (...) We had to improvise several times, in order to find solutions in the field" (Center)

INTERVIEW

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Global satisfaction in regard to the questionnaire (Center)

Low level of literacy implies decode some questions
The length and extent makes the interviewer tired
Slow network coverage and loosing the REDCAP link
Impossibility of returning back on REDCAP¹ (Algarve, Center, North)

The questionnaire is well developed, but some people have education levels very low and, therefore, we have to decode all the questions (Center)

CONCLUSIONS

The use of qualitative methods such as focus group is important to improve survey process and these can also give valuable input on fieldwork teams engagement and motivation.

Differences in participation rates depend on the population dimension where the health centre is located, cultural factors and the years of experience from the health teams. Some divergent elements in two focus groups were found in socio-professional categories regarding the clearness of the letter and the aim of the study, only fully achieved in the informed consent. The different perspectives can be explained by demarcations between disciplinary fields, as well as the population health illiteracy.

Key messages

- ➔ Focus groups are useful tools to develop strategies for improving both participation rate and technical procedures; given that quality data are essential for any health survey.
- ➔ Field teams are motivated by a participatory methodology based on a continuous process of evaluation and discussion

¹ P. A. Harris, R. Taylor, R. Thielke, J. Payne, N. Gonzalez, J. G. Conde, Research electronic data capture (REDCap) - A metadata-driven methodology and workflow process for providing translational research informatics support, J Biomed Inform. 2009 Apr;42(2):377-81.

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