



QDS™ NEWSLETTER

Questionnaire Development System



Summary of Enhancements in the Upcoming QDS™ Version 2.5

A **major upgrade** of QDS™—Version 2.5—will be released in summer 2006. NOVA has programmed an extensive list of new features, most of which were requested by QDS™ users:

Build Enhancements

- A new build option suppresses the prompt to view the audio script file.
- A new build option supports inclusion of audio files associated with Pick One, Check Each, Yes/No, and Gender items in the audio script file.
- A new build option allows the user to select a default speaker for the ACASI DECTalk text-to-speech engine.

Screen Layout and Appearance

- Designers can customize text displayed on the title bar of a probe dialog box.
- Pictures can now be displayed on information screens and question screens in HAPI, CAPI, and ACASI. Supported graphic formats include .BMP, .JPG, .GIF, .ICO (icon), .EMF (enhanced metafile), and .PNG (portable network graphics).
- HAPI supports a new option that allows interviewers to toggle the layout of date and time screens during the course of an interview. The screen can contain a single input field or multiple input fields; with multiple fields, each field accepts a single subcomponent of the date or time information.
- HAPI supports a new option that allows interviewers to modify the screen layout to accommodate landscape orientation or a square screen.
- CAPI and ACASI now display a vertical scroll bar in the question area when the text is too large to fit within the field.

Audio Improvements

- ACASI has been enhanced to include the latest version of DECTalk, version 5.00.
- ACASI can automatically load the appropriate DECTalk dictionary based on information in the control file—no need to launch a unique module for each language version of a survey.

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Tips and Tricks

It is possible to customize nearly every aspect of your QDS™ interviews. You can even adjust most of the default settings.

You can change the label of any of the **Special Response** buttons for automated interviews. To change the wording for the **Don't Know**, **Refused**, or **Not Applicable** buttons, go to the **Language: Translations** menu in the Design Studio and select the **Edit** button.

Enter your alternate wording on the **Responses** tab. This wording will then be substituted throughout the entire questionnaire. For example, you might prefer **Declined to Respond** as an alternate for **Refused** in your own interview.



QDS™ Users' Corner

“I LOVE QDS! I did a pretty exhaustive search about 4 years ago and found that all major competitors were missing one or more components included with QDS. Some would have a great data entry module, but no way to do ACASI/CAPI. Others would do CAPI pretty well, but not export data into a usable file format. Still others were pretty functional but VERY difficult to learn, were very expensive, or did not support warehousing data from different sources. None produced surveys in a usable format automatically, and none provided for sound recording in a natural voice. QDS has everything from start to finish. Survey design support, database design, ACASI/CAPI/HAPI (including sound files), data entry, warehousing, exporting to multiple file formats, multiple version management, multisite and multi-interviewer support, and on and on! For a very reasonable price.”

Barbara Estrada, El Rio Santa Cruz Community Health Center, Tucson AZ

QDS 2.5 Enhancements, continued from Page 1

Interview Logic

- A new numeric function, Random, returns a random number within a specified range.
- Edit elements support the ability to loop back to the last data element displayed. This allows the interviewer or subject to return to a location that may vary during the course of an interview.
- Edit elements support the ability to launch an external application during the course of an interview, such as a Web browser or word processor.
- HAPI and CAPI support an “auto-probe” feature—probes can be displayed automatically at the first visit to a question. The interviewer can toggle this feature on and off during the course of an interview.

Reports

- Summary reports generated at the end of an automated interview now include interviewer comments.
- The Warehouse Manager Interview Details property sheet now supports a Print function.

- A new function in the Warehouse Manager outputs a single interview as an .RTF document.

Data Management

- The Design Studio allows the designer to designate that an automatic variable should be ignored during export from the Warehouse.
- Warehouse Manager supports a new feature that allows the data manager to manually exclude specific variables from export. In addition, the data manager can save manual settings and reuse them for subsequent export operations.
- The Warehouse Manager data corrections log is now an integral part of a data warehouse file and has been enhanced to include several additional fields for each correction: a date/time stamp, the name of the data manager, the reason for the change, the original data, the revised data, and any additional comments the data manager wants to add to the log. The log now also includes an entry for every delete and undelete. ♦



QDS™ User Profile: Dr. John Richens, Centre for Sexual Health and HIV Research, University College London



Just as in the rest of the world, sexually transmitted infections are on the increase in the United Kingdom. Dr. John Richens, Principal Investigator, Centre for Sexual Health and HIV Research, is examining communication methods between health workers and patients at two London sexual health clinics—the Mortimer Market Centre and the Courtyard Clinic, St. George's Hospital. For his computer-assisted sexual health interviewing (CASHI) study, Richens and staff are comparing three interview techniques: face-to-face interviews, computer-assisted-personal interviews (CAPI) using QDS™, and computer-assisted-self interviews (CASI) using QDS™. They will compare rates of disclosure of sensitive information about sexual behavior and examine the impact on disease diagnosis and testing. The study is funded by the Medical Research Council, the United Kingdom's equivalent to the U.S. National Institutes of Health.

Face-to-face interviewing remains the norm in sexual health clinics, despite growing evidence that individuals may prefer to disclose information about their sexual behavior in ways they feel to be less threatening. Research on sexual behavior in the community has demonstrated that subjects feel more comfortable with CASI than face-to-face interviews. For questions about certain aspects of sexual behavior, patients are more likely to reveal important information to a computer than to a health worker. Dr. Richens believes that the benefits of using CASI in a clinical setting are threefold: (1) patients can

utilize time normally spent in the waiting room performing their own interviews; (2) health providers can focus more on patients' concerns, expectations, and information needs during the exam and spend less time asking for routine background information; and (3) administrators can streamline clinic services and make the shift to electronic records. Dr. Richens anticipates that, if his research validates the usefulness of CASI in clinical practice, this approach could become a standard component of everyday health care.

Subjects recruited into the study will include men and women of all sexual orientations, HIV-positive subjects, and subjects from ethnic minority groups. Dr. Richens plans to recruit 2,500 patients over a 10-month period and has already reached 70 percent of that goal. These subjects will be divided into three groups: one will perform a CASI prior to seeing a clinician, the second will have a CAPI version of the same interview with a clinician, and the third will see a clinician according to current clinical practice. A subset of patients involved in the trial will be invited to participate in exit interviews prior to leaving the clinic to investigate reactions to the different interview methods. Dr. Richens and his team hope to show that use of CASI leads to greater levels of disclosure of risky sexual behavior, more

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Where to See QDS™

July 8–12	UICC World Cancer Congress	Washington, DC
July 10–12	NCHS Data Users Conference	Washington, DC
July 12–15	13th World Conference on Tobacco OR Health	Washington, DC
August 10–13	American Psychological Association	New Orleans, LA
August 14–19	International AIDS Conference	Toronto, ON
September 21–25	United States Conference on AIDS	Hollywood, CA
November 6–8	American Public Health Association	Boston, MA



User Profile—Dr. John Richens, continued from page 3

appropriate sampling for infection, increased diagnosis of STDs, better identification of reproductive health issues in women, higher levels of patient and provider satisfaction, and improved patient flow.

After graduating from Cambridge University, Dr. Richens worked as general physician for 7 years in Papua New Guinea and moved into HIV and STD research on returning to London in 1990. He thinks that working in the field of sexual health is fascinating because one can learn so much about society's attitudes toward sexual behavior and its consequences. He has worked extensively in Asia and Africa on the design and evaluation of intervention projects for the control of STDs and HIV, and he develops training programs on clinical and public health aspects of STD/HIV control. Since HIV has become one of the world's most serious health problems, he believes that searching for new strategies to deal with the spread of AIDS is vital.

One of the novel solutions Dr. Richens and his team has implemented for CASHI is the ability to immediately incorporate data from QDS interviews into reports for clinical staff. After an interview is completed, QDS data are mail-merged into a Microsoft Word document that can be printed

and used during the consultation. First, automatic variables are converted into intelligible short forms suitable for merging. Then the report element is adapted for use as a merge source document. The team designed a macro button that clinicians can use to create single-sheet clinic pro formas that display data from the questionnaire. These data then become part of the patient's clinical record.

The research team found that the questionnaire his team developed works very well under both CASI and CAPI methods and that patients are generally very positive about computerized interviews; they believe this study could change the way clinicians and patients interact well into the future.

Dr. Richens was very pleased with the excellent support his team received from NOVA Research Company while they were designing and building the questionnaire. He truly appreciated the invariably prompt responses to e-mails requesting help, especially when they were implementing new features like the mail-merge system. ♦

For contact information, visit <http://www.ucl.ac.uk/sexual-health/staff-members/richens.htm>



QDS™ User's Manual Available Online

Visit <http://www.novaresearch.com/Products/qds> for a free download!



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How Are You Using QDS™?

We would like to know! Please e-mail Paul Young at PAYoung@novaresearch.com with a description or story of your unique application of QDS™—don't forget to include citations for any published articles based on your work. A profile may be posted on our Web site or featured in the next QDS™ Newsletter!