Video Interviewing: Applying a New Paradigm for a National Behavioral Health Survey

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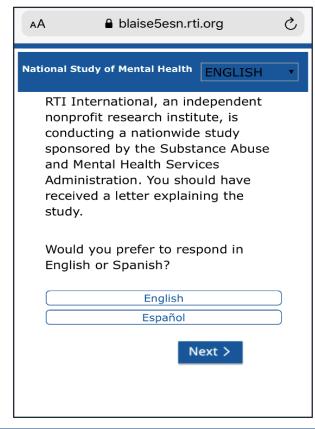
# Acknowledgments: MDPS Funding and SAMHSA Disclaimer

Funding: The Mental and Substance Use Disorders Prevalence Study (MDPS) is a 4-year cooperative agreement between RTI International and the Substance Abuse and Mental Health Services Administration (SAMHSA). SAMHSA provided funding for the project (H79FG000030).

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# Mental and Substance Use Disorders Prevalence Study (MDPS)

- Conducted to estimate the prevalence of specific mental health and substance use disorders, and treatment in adults across the United States
- Clinical Interviews with adults 18-65
- National Samples
  - Households
  - Prisons
- Local Samples
  - Homeless Shelters
  - State Psychiatric Hospitals
- Data collection 2020-2022



#### **Video-based Interviewing**

- Clinical interviewers conducted interviews from their homes
- Systems and processes developed to support and integrate video-interviewing
- Support features included:
  - Web-based scheduler for respondents
  - Automated emails confirming appointments
  - Process to securely upload recorded interviews to a FIPS-Moderate environment
  - Enhanced quality control for interview authentication and diagnoses rating
  - Support provided for interviewers and respondents
  - Supported data collection in households and facilities

## **Staffing and Equipment**

- Trained approximately 90 Clinical Interviewers (Cls) and 15 Clinical Supervisors
- Hardware:
  - Laptop with case management system and interview
  - Tablet with Zoom connection
  - Centralized phone system for Cls privacy
- In-home clinical interviewer requirements:
  - Private location
  - Secure location for study equipment
  - Sufficient bandwidth for video
  - Professional background



#### **Household Data Collection**

Rostering

Modes: Web, Phone, In Person, Mail Screening

Modes: Web, Phone, In Person, Mail Clinical Interview

Appointment Scheduler Scheduling Call or Email Clinical Interview Modes: Video or Phone (Zoom)

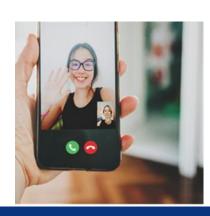


Completed Rosters: 25,072

Completed Screeners: 29,084

Completed Clinical Interviews: 4,764

3,192 completed by video



# MDPS Non-Household Video-based Clinical Interviews

Facility Type	# of Facilities	# Facilities Completed Interviews by Video	# Completed Interviews Total
Prisons	22	8	321
Homeless Shelters	24	4	423
State Psychiatric Hospitals	4	1	171
Total	50	13	915



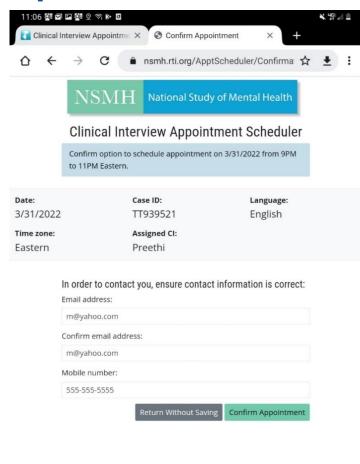
# Household Respondents: Clinical Interview Appointment Scheduler

- Accessed from
  - Screening instrument in web, CATI and CAPI modes
  - NSMH public website with passcode
  - FI prompting instrument from Android tables in CAPI mode
- Offered available timeslots based on Cls' availability
- Automatically adjusted for time zone for CI and respondent
- User could schedule, re-schedule, or cancel



#### **Confirmation, Invitations, and Prompts**

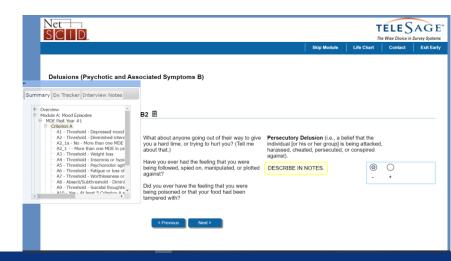
- Once an appointment is scheduled, rescheduled, or cancelled, respondents and Clinical Interviewers (CIs) received automated confirmation emails/texts
- Cls sent a personal invitation with Zoom link to respondents for the scheduled appointment
- Respondents got alerts the day before the appointment
- Cls received daily list of appointments



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#### **Clinical Interview**

- Blaise 5 instrument on a MS Windows laptop
  - Socio-demographics, Medication, Treatment, Housing
  - NetSCID clinical interview
  - COVID experience
- Zoom used with all household interviews
- Zoom/Webex used with non-household interviews
- Recordings from Zoom were securely uploaded to RTI into a FIPS Moderate environment for review and then deleted off Zoom cloud
- Average interview length:
  - 77 min HH
  - 71 min hospital
  - 72 min shelter
  - 59 min prison
- 93.3% agreed to be recorded



#### **Quality Control: Review of Recordings**

- Recordings were made available to supervisor for review
- Supervisors could launch NetSCID instrument again and confirm that the responses match their observations
- In addition, more experienced clinicians could weigh in on the responses in NetSCID to confirm or revise the findings
- Authentication of interviews was much easier because we had the audio and video recording of the full interview

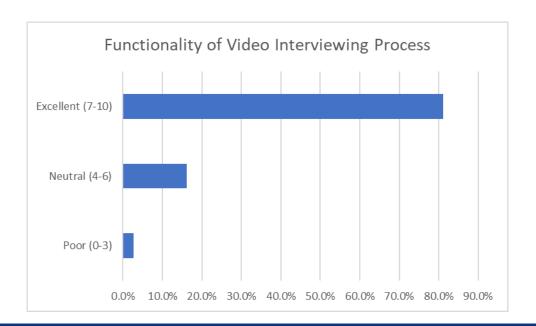


## Findings / Results

- Original plan was to do a subset of interviews by video but COVID-19 forced our hands
- Fully remote, video-based interviewing was possible with household respondents
  - 90% reported being comfortable with completing a video-based interview
  - 94% reported being comfortable with virtual interviewing software
- Video-based data collection is feasible in non-household facility settings
  - Additional onsite coordination required
  - May need to provide hardware (tablet) to facility
  - Private location with internet connection required

## Findings / Results (continued...)

- Lost connection: 7% of interviews
- Interviewer could hear respondent clearly: 98%
- Very/Extremely good visual quality: 91%
- Visual observation helpful in completing interview: 69%
- Respondent was attentive throughout the interview: 95%



#### **Lessons Learned**

- Setting up Zoom was quite easy, initial account setup required tech support but not much support after that
- Uploading large video files took a lot of bandwidth; better solution might be to review the files directly in the cloud
- Respondents need to be reminded multiple times before the interviews and might have last minute conflicts
- Using a single device (with dual monitors) might be easier than using two devices



