APPENDIX A: CONSENT FORM

VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY
INFORMED CONSENT FORM FOR PARTICIPANTS OF
INVESTIGATIVE PROJECTS

Project Title: Consumption of Dairy Foods

Principle Investigators: Denise Brochetti, Ph.D. and Katherine T. Eddy

I. PURPOSE OF THE PROJECT

Researchers in the Department of Human Nutrition and Foods are studying factors that influence the consumption of dairy foods by women 65 years of age or older. You are invited to participate in the project. Your participation is voluntary.

II. PROCEDURES

You are asked to participate in a focus group discussion of how you feel about dairy foods. There will be approximately 6-10 women participating in the discussion. A moderator will lead the discussion, which will last approximately 45 minutes to 1 hour.

III. RISKS

There are no risks involved in this study.

IV. BENEFITS OF THIS PROJECT

Your participation in the project will provide information that may be helpful in understanding attitudes and beliefs regarding the consumption or lack of consumption of dairy foods by women, 65 years of age and older. No guarantee to benefits has been make to encourage you to participate. When the research is completed, you may contact the investigator for a copy of the results.

V. EXTENT OF ANONYMITY AND CONFIDENTIALITY

The results of this project will be kept strictly confidential. Your name will be removed and only a code number will be used during evaluation and any written report of this material. A notetaker will be present and an audiotape will be made of the discussion. The notes and tape will be reviewed by Katherine eddy, investigator, and Denise Brochetti, faculty advisor. Notes and tapes will be secured in the office of the Department of Human Nutrition, Foods, and Exercise, Virginia Tech.
VI. COMPENSATION

For your participation, you will receive recipe booklets, food coupons and refreshments at the time of the group discussion.

VII. FREEDOM TO WITHDRAW

You are free to withdraw from this project at any time without penalty. You also have the right to refuse to answer any questions that are asked during the group discussion. If you choose not to answer any questions, you will still be compensated for your participation in the project.

VIII. APPROVAL OF RESEARCH

This project has been approved, as required, by the Institutional Review Board for Research Involving Human Subjects at Virginia Polytechnic Institute and State University and by the Department of Human Nutrition and Foods.

IX. SUBJECT’S RESPONSIBILITIES

I know of no reason that I cannot participate in this study. I have the responsibility of participating in one group discussion of dairy foods.

X. SUBJECT’S PERMISSION

I have read and understand the Informed Consent and conditions of this project. I have had all my questions answered. I hereby acknowledge the above and give my voluntary consent for participation in this project.

If I participate, I may withdraw at any time without penalty. I agree to abide by the rules of this project.

__________________________________________  ______________
Signature                                      Date
Should I have any questions regarding the project or its conduct, I should contact:

Katherine Eddy
Investigator
Graduate Assistant
Department of Human Nutrition and Foods
Virginia Tech

Denise Brochetti, Ph.D.
Faculty Advisor
Department of Human Nutrition and Foods
Virginia Tech

Ernest R. Stout
Chair, Internal Review Board, Research Division
Virginia Tech

(540) 231-7708
(540) 231-9048
(540) 231-9359

PLEASE DETACH THIS PAGE AND KEEP IT
APPENDIX B: SAMPLE LETTER OF CONFIRMATION

Katherine Eddy
340 Wallace Hall
VPI&SU
Blacksburg, VA 24060
July 15, 1996

Participant’s name and Address

Dear ______,

I enjoyed meeting you at our ice cream social on July 8th. Though it was a small group, everyone seemed enthusiastic. I wanted to thank you again for accepting our invitation to attend the discussion on Monday, July 22 at 2 PM. This meeting will be held in the New River House Library and will last approximately one hour. Refreshments will be served. We are only speaking to a limited number of people, so your participation will help make our project a success.

The discussion you will be attending will be a forum of women like yourself who are responsible for purchasing and preparing meals for themselves or others. We will be discussing food choices and food attitudes and your opinions are very valuable to us. You can be assured that this is strictly a research project and there will be no sales or solicitations. After our session we will be having a door prize drawing for a house plant and will be giving you ice cream coupons and a recipe booklet as tokens of our appreciation.

If you have questions or are unable to attend for some reason, please call and let me know as soon as possible. I can be reached at Virginia Tech at (540)231-7708 or at home (540) 552-1846.

Thank you again for your time and I look forward to seeing you on July 22 in the New River House Library.

Sincerely,

Katherine Eddy
### APPENDIX C: FOCUS GROUP TIME TABLE

<table>
<thead>
<tr>
<th>Week of June 2-8</th>
<th>Week of June 9-15</th>
<th>Week of June 16-22</th>
<th>Week of June 23-29</th>
<th>Week: June 30-July 6</th>
<th>Week of July 7-13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop Questions and Introduction</td>
<td>Practice Focus Group w/students and staff: June 13</td>
<td>Modify Questions based on results of practice group</td>
<td>Modify and Finalize questions as necessary based on Pilot Study</td>
<td>Proposal Defense: July 2</td>
<td>Ice Cream Social: Warm Hearth (July 8)</td>
</tr>
<tr>
<td>Recruit students/staff for Practice Focus Group</td>
<td>Recruit Subjects (Elderly Women) for Pilot Study</td>
<td>Contact C'ville Site Supervisor</td>
<td>Pilot Focus Group with Elderly Women: June 28</td>
<td>Organize Supplies and Incentive Gifts</td>
<td></td>
</tr>
<tr>
<td>Finalize Methods</td>
<td>Contact Supervisor at Blacksburg Site</td>
<td>Contact Supervisor at Virginia Beach Site</td>
<td>Finalize plans and dates with Sites</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Week of July 14-20</th>
<th>Week of July 21-27</th>
<th>Week of July 28-August 3</th>
<th>Week of August 4-10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus Group #1: Blacksburg (July 22)</td>
<td>Focus Group #2: Charlottesville (July 31)</td>
<td>Focus Group #3 Virginia Beach (August 9)</td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX D: WELCOME AND INTRODUCTION

Welcome and Introduction

Good Morning and welcome to our session today. Thank you for taking the time to join in our discussion of dairy food choices. My name is Katherine Eddy and I'm a graduate student at Virginia Tech. Pam Stewart is assisting me today. We are trying to learn about your attitudes towards dairy foods and factors that influence dairy food choices. Your opinions are very important to us.

Today we will be discussing all types of dairy foods, such as different types of milk, cheeses, yogurt, and dairy desserts such as ice cream. As we discuss dairy foods and some of the things that may influence your use of dairy foods, remember there are no wrong or right answers but just different opinions. Please feel free to share your views even if they are different from what others have said. Remember we are interested in both negative and positive comments.

Before we begin, I want to remind you of a few ground rules. Our session will last about 45 minutes. We will be tape recording the session so we don't miss any of your important comments. Please speak up and speak one at a time so the tape will be clear. While we are talking, Pam will be taking notes. We will be using first names tonight but in our reports you can be assured of confidentiality. No names will we associated with your comments.

We will be using name cards to help us remember each others names. Let's begin.

Modified from examples found in:

APPENDIX E: MODERATOR’S GUIDE

FOCUS GROUP QUESTIONS:

Opening Statement: Let’s begin by going around the room and introducing ourselves. Please say your name and something you like to do for fun here in ________________. (Blacksburg, Charlottesville or Virginia Beach)

<table>
<thead>
<tr>
<th>Introductory Activity: Group Ranking Exercise</th>
</tr>
</thead>
<tbody>
<tr>
<td>Index cards will be handed out to each participant with the following categories listed:</td>
</tr>
<tr>
<td>- Easy to use</td>
</tr>
<tr>
<td>- Good for me</td>
</tr>
<tr>
<td>- Low cost</td>
</tr>
<tr>
<td>- Tastes good</td>
</tr>
</tbody>
</table>

Please give each category a number from 1-4 in the order of importance to you when choosing foods. (1 is most important, 4 is least important)

1. Let’s go around the room again so everyone can share what they ranked as most important and explain what influenced you to give it the highest ranking?

Since we will be talking about dairy foods, we are going to start by making a list of dairy foods that we can refer to throughout our discussion. Pam will be writing it down for us.

PROBES:
- Consider foods you may eat at home or when eating out.
- Can you be more specific about what type of cheese, milk, etc. you are referring to.

2. Think back over the last few months. What are some dairy foods that you ate regularly? These can be foods you ate at home, in restaurants or with friends. Please give some of the reasons you decided to eat these specific dairy foods. Remember it is fine to disagree with each other, in fact it is to be expected.

Possible probes:
- Consider foods you ate at home or when eating out.
- Can you be more specific about what type of cheese, milk, etc. you are referring to.
- Can you be more specific about what you like about that food? (Use if “liking the product” is given as the reason)
3. Let’s talk now about some of the dairy foods you seldom or never eat. As you did before, give some examples and reasons that influenced your decision not to eat these foods.

4. We’ve talked about dairy foods that you do and do not eat. Compared with other foods, how important are dairy foods to you?

5. What are some advantages of eating dairy foods?

6. What are some disadvantages of eating dairy foods?

7. **ACTIVITY** read aloud to participants.

<table>
<thead>
<tr>
<th>Childhood</th>
<th>Teenage years</th>
<th>Young</th>
<th>Pregnancy</th>
<th>Middle Age</th>
<th>Present Day</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td>Adulthood</td>
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</tbody>
</table>

Think back over the different stages in your life. Please mark the times you feel you ate the most dairy foods with a (+) and the times when you ate the least with an (-). You do not have to mark every column. Briefly jot down reasons that influenced your use of dairy products during this time.

COMMENTS:

7) **Who would like to share some of the times you have made changes in the amounts of dairy foods you eat?**

Possible probes:
- What were the changes?
- What were some of the factors that influenced this change? (Motivations)
- Was this change a permanent one for you?
- How satisfied were you with this change?

8. **Describe some situations in which you can see yourself changing the dairy foods you regularly eat?**

Possible probes:
- Has anyone already made recent changes in dairy intake for any reason?
- In this situation, what is it that you would be changing?

9. **Who influences your decision to eat dairy foods?**

10. **How do you think the food industry could improve dairy foods to make them more desirable to you and your friends?** Think about specific dairy foods and remember the things you especially like or dislike about dairy products to help you.
Possible probes:
• Have you tried some of the new dairy products such as low fat versions?
• Do you feel that packaging could be improved on dairy products to make it more convenient to you?
• Could the packaging be improved to make the products more appealing?
• Can you expand on that idea?
• What type of product are you referring to?
• Is that a product you would buy regularly?

11. **What does the term osteoporosis mean to you?**

Possible probes:
• Can you define osteoporosis?
• Does the risk of osteoporosis ever affect your eating?

12. **Is there anything else you'd like to add that we haven't covered here today?**
APPENDIX F: ACTIVITY HANDOUTS

Introductory Activity: Group Ranking Exercise

Consider the following categories:

- **Easy to use ____**
- **Good for me ____**
- **Low cost ____**
- **Tastes good ____**

Please give each category a number from 1-4 in the order of importance to you when choosing foods.
(1 is most important, 4 is least important)

Activity 2: Identifying Changes Through the Life Cycle

<p>| | | | | |</p>
<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>Childhood Years</td>
<td>Teenage Adulthood</td>
<td>Young Age</td>
<td>Pregnancy Middle Age</td>
<td>Present Day</td>
</tr>
</tbody>
</table>

Think back over the different stages in your life. Please mark the times you feel you ate the most dairy foods with a (+) and the times when you ate the least with an (-). You do not have to mark every column. Briefly jot down reasons that influenced your use of dairy products during this time.

Comments:

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
APPENDIX G: EXAMPLES OF DAIRY FOODS

**Milk:** Whole, 2%, Skim
Buttermilk, Chocolate milk

**Natural Cheeses:**
Cheddar, Swiss, Mozzarella etc.
(Could be chunks, shredded, or sandwich slices)

**Processed Cheese Products:**
Spreads, dips, sauces

**Cottage cheese, Cream cheese, Sour cream**

**Yogurt:** Plain, flavored, w/added fruit

**Foods containing dairy:**
**(Consider foods eaten at home or when out)**
- Cream soups or chowders
- Macaroni and cheese, Lasagna, Pizza, Quiche etc.
- Milk or cream w/coffee

**Gourmet/fancy cheeses:**
Havarti, Brie, Gouda etc.

**Frozen Dairy Desserts:**
- Ice cream (regular or low fat), frozen yogurt
- Novelties: Ice cream sandwiches, fudgesicle etc.

**Other Desserts:**
- Puddings with milk
- Custard pie
- Whipped cream topping

**Beverages:**
- Fast food milkshake
- Eggnog
APPENDIX H: QUESTIONNAIRE

• Do you live alone? ____yes ____no

• How often do you prepare your own meals?
  ____ Never
  ____ Sometimes
  ____ Almost always
  ____ Always

• How often do you eat alone?
  ____ Never
  ____ Sometimes
  ____ Almost always
  ____ Always

• Do you follow a specific diet prescribed by your doctor?
  ____ No ____ Yes

  If yes, please check all that apply:
  ____ Low fat
  ____ Low cholesterol
  ____ Low salt (sodium)
  ____ Low calorie
  ____ Other, Please explain _____________________

• Please check the highest level of education obtained:
  ____ Less than Eighth grade ____ Some college
  ____ Eighth grade ____ College degree
  ____ Some high school ____ Any post graduate degree
  ____ High school degree ____ Don’t care to answer

• Age:
  ____ 55-64 years
  ____ 65-69 years
  ____ 70-79 years
  ____ 80-89 years
  ____ 90 years or older
  ____ Don’t care to answer

Thank you!
VITA

Katherine T. Eddy

Katherine T. Eddy was born in Richmond, Virginia, on January 30, 1973. After graduating from Douglass Freeman High School in 1991, she began undergraduate studies at the College of William and Mary. In May 1995, she received her Bachelor of Science degree in Biology with a minor in Psychology. In 1995, Katherine enrolled in a Master's program in the Department of Human Nutrition and Foods at Virginia Tech. After graduation and the completion of a dietetic internship program, she plans to pursue a career in clinical dietetics. Katherine is a member of The American Dietetic Association.