

# **POSTER PRESENTATION**

**Open Access** 

# A mixed-methods assessment of understanding (AoU) tool for AIDS vaccine trials in sub-Saharan Africa: results from a pilot study

G Lindegger<sup>1</sup>, M Quayle<sup>1</sup>, S Singh<sup>2</sup>, S Welsh<sup>7</sup>, D Mark<sup>3</sup>, M Wallace<sup>3</sup>, S Roux<sup>3</sup>, L Bekker<sup>3</sup>, L Mwananyanda<sup>4</sup>, W Kilembe<sup>4</sup>, E Chomba<sup>5</sup>, S Allen<sup>6</sup>, F Priddy<sup>7\*</sup>, P Fast<sup>7</sup>

From AIDS Vaccine 2012 Boston, MA, USA. 9-12 September 2012

# **Background**

Assessments of understanding (AoUs) in clinical trials are often composed of true/false multiple choice questions, however, these tools can be difficult for volunteers with limited education or without prior testing experience.

### **Methods**

35 adults were recruited at two research centers in Southern Africa. A within-subjects, repeated measures design was used, whereby each volunteer served as his/her own control. An AoU tool with closed- and openended questions was administered within a hypothetical AIDS vaccine trial setting. Performance on closed- and open-ended questions was compared using correlations and repeated-measure t-tests, limited to 4 complex concepts: false sense of security, risk of false positive test, need for contraception, and potentially enhanced susceptibility.

### **Results**

Mean scores of understanding for each concept assessed by closed-ended questions ranged from 0.73 (need for contraception) to 0.84 (risk of false positive test); and by open-ended questions from 0.4 (risk of false positive test) – 0.6 (need for contraception). Scores for the open-ended measure were all lower than the equivalent closed-ended measure. Correlations between the closed-and open-ended measures were generally low, achieving significance for false sense of security (r=0.377), potentially enhanced susceptibility (r=0.393), and total score across concepts (r=0.617). Volunteers' understanding as

assessed by the closed- and open-ended methods differed significantly: false sense of security= -3.862; risk of false positive test= -7.210; need for contraception= -2.303; and potentially enhanced susceptibility= -8.007. The correlation with years of education was consistently and significantly higher for the open-ended measure than the true/false questionnaire with the exception of need for contraception.

## Conclusion

The results suggest the qualitative measure better assesses understanding than the quantitative measure. The scores from the two assessment methods have limited interchangeability. The standard closed-ended questions appear to provide an inflated measure of volunteers' understanding. An assessment tool with closed- and open-ended questions is better suited to determine genuine understanding.

### Author details

<sup>1</sup>School of Psychology, University of Kwa-Zulu Natal, Pietermaritzburg, South Africa. <sup>2</sup>GHAR Consulting Inc, New York, NY, USA. <sup>3</sup>Desmond Tutu HIV Foundation, University of Cape Town, Cape Town, South Africa. <sup>4</sup>Zambia-Emory HIV Research Project, Lusaka, Zambia. <sup>5</sup>Zambia-Emory HIV Reseach Project, Lusaka, Zambia. <sup>6</sup>Emory University, Atlanta, GA, USA. <sup>7</sup>International AIDS Vaccine Initiative, New York, NY, USA.

Published: 13 September 2012

doi:10.1186/1742-4690-9-S2-P135

Cite this article as: Lindegger *et al.*: A mixed-methods assessment of understanding (AoU) tool for AIDS vaccine trials in sub-Saharan Africa: results from a pilot study. *Retrovirology* 2012 9(Suppl 2):P135.

<sup>7</sup>International AIDS Vaccine Initiative, New York, NY, USA Full list of author information is available at the end of the article

