**Supplemental Materials and Methods**

**Follow-up study testing a transcript-only version of the Attitudes Toward Genomics and Precision Medicine (AGPM) Measure**

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**Introduction**

This appendix reports on a pilot test of a transcript-only version of the Attitudes Toward Genomics and Precision Medicine (AGPM) measure. Our research questions were:

1. Are the mean scores and standard deviations of a transcript-only version of the AGPM equivalent to the version that contains short video descriptions of the genomics and precision medicine concepts?
2. What is the difference in the duration of survey completion between the two versions?

**Method**

Participants were recruited from Amazon’s Mechanical Turk (MTurk) online platform (*N* = 201) and were paid $2.00. Characteristics of the sample can be found in Table A1.

Table A1. Demographics

|  |  |  |
| --- | --- | --- |
|  | Frequency | Percent |
| **Gender** |  |  |
| Male | 110 | 54.7 |
| Female | 89 | 44.3 |
| Prefer not to answer | 2 | 1.0 |
| **Age** |  |  |
| 20 - 29 | 50 | 24.9 |
| 30 - 39 | 77 | 38.3 |
| 40 - 49 | 36 | 17.9 |
| 50 - 59 | 19 | 9.5 |
| 60 or older | 19 | 9.5 |
| **Education** |  |  |
| Less than High School | 0 | 0 |
| High School | 22 | 10.9 |
| Some College | 35 | 17.4 |
| Associate's Degree | 27 | 13.4 |
| Bachelor's Degree | 95 | 47.3 |
| Master's Degree (e.g., MPH, MA, MS) | 17 | 8.5 |
| Doctoral Degree (e.g., PhD, ScD, MD, PsyD) | 3 | 1.5 |
| Other | 2 | 1.0 |
| **Employment Status** |  |  |
| Employed part-time | 23 | 11.4 |
| Employed full-time | 126 | 62.7 |
| Caregiver or homemaker | 8 | 4.0 |
| Self-employed | 25 | 12.4 |
| Retired | 6 | 3.0 |
| Unemployed | 9 | 4.5 |
| Other | 4 | 2.0 |
| **Race/Ethnicity** |  |  |
| Hispanic or Latino | 18 | 9.0 |
| Not Hispanic or Latino | 176 | 87.6 |
| American Indian or Alaska Native | 3 | 1.5 |
| Asian | 10 | 5.0 |
| Black or African American | 23 | 11.4 |
| Native Hawaiian or Other Pacific Islander | 0 | 0 |
| White | 168 | 83.6 |
| **Physical Health** |  |  |
| Excellent | 45 | 22.4 |
| Very Good | 49 | 24.4 |
| Good | 75 | 37.3 |
| Fair | 28 | 13.9 |
| Poor | 4 | 2.0 |
| Very Poor | 0 | 0 |
| **Income** |  |  |
| 0 - 23,000 | 20 | 10.0 |
| 23,001 - 45,000 | 52 | 25.9 |
| 45,001 - 75,000 | 73 | 36.3 |
| 75,001 - 112,000 | 44 | 21.9 |
| Greater than 112,000 | 8 | 4.0 |
| Prefer not to answer | 4 | 2.0 |

N = 201.

Participants were randomized to receive either the video version of the AGPM measure, for which the development and validation is documented in the main manuscript, or a transcript-only version of the AGPM. The versions were identical, with both containing the 37 AGPM items retained from study 2 in the main article, plus 6 new items that were developed to form an overall support subscale. The only difference between the versions was whether the information about genomics and precision medicine was presented in a series of brief videos, or in brief paragraphs of text, which were exact transcriptions of the videos.

**Results**

**Mean Scores and Standard Deviations**

We conducted a series of independent samples t-tests to determine whether the video version and transcript-only versions yielded significantly different scores on either the 37-item AGPM total score, or on any of the AGPM subscales. As seen in Table A2, there were no significant differences between the video version and transcript-only version for either the overall AGPM 37-item total score, nor any of the subscales.

Table A2. Independent samples t-tests comparing AGPM versions.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Subscale | AGPM video mean (*SD*) | AGPM transcript-only mean (*SD*) | *t* | *p* |
| 37-item total score | 4.89 (.56) | 4.96 (.60) | -.79 | .43 |
| Embryo concerns | 4.48 (.69) | 4.46 (.78) | .26 | .80 |
| Privacy concerns | 5.10 (.97) | 5.24 (1.08) | -.94 | .35 |
| Perceived benefits | 5.19 (.93) | 5.37 (.79) | -1.43 | .15 |
| Nature concerns | 4.86 (.81) | 4.87 (.84) | -.13 | .90 |
| Social justice concerns | 4.78 (1.17) | 4.76 (1.19) | .14 | .89 |
| Overall support 6-items | 5.09 (1.09) | 5.34 (.95) | -1.76 | .08 |

Note. *N* = 201. For all t-tests, df = 199.

**Duration of Survey Completion**

The amount of time it took to complete the survey (AGPM plus demographics) was significantly different between the two versions. After removing three participants from this analysis due to being more than three standard deviations above the mean survey completion time, we found that participants took significantly longer to complete the survey in the video condition (*M* = 19.74 minutes, *SD* = 5.67 minutes) than the transcript-only version (*M* = 11.47 minutes, *SD* = 9.23 minutes, *t*(196) = 7.41, *p* < .01).

**Conclusion**

The text-only version is equivalent to the originally developed video version of the measure in terms of mean scores. This suggests that, when participant literacy is not a concern, researchers could use either version of the survey and expect similar results. Researchers may choose the video version of the survey if they anticipate that the population they are surveying has low health literacy or other attributes for which a brief video may be useful. Alternatively, researchers can utilize the transcript-only version of the survey if they anticipate that their population of interest may have poor internet connections which may prohibit video streaming, or if they want to administer the survey in paper and pencil format. Additionally, if researchers are concerned about the time commitment required to complete the survey, the transcript-only version can be used to save participants’ time without sacrificing reliability and validity.