

Strengthening Adult Reading Instructional Practices	OMB#:	Exp. Date:
	Code # _____ — _____ — _____	

**LEARNER BACKGROUND INTERVIEW PROTOCOL
FORM A**

LEARNER CODE: _____ **DATE:** _____

PROGRAM AND SITE LOCATION: _____

CLASS NAME: _____

INSTRUCTOR NAME: _____

DATA COLLECTOR NAME: _____

Introduction: We are working with adult education programs across the country to learn about the experiences that adults have in learning new skills. Today, I'd like to ask you some questions about your background and why you've enrolled in this class. I'd also like to ask you some questions about your health, how you think about yourself, and the people that you talk with about your family, education and other needs.

Strengthening Adult Reading Instructional Practices	OMB#:	Exp. Date:
	Code # _____ — _____ — _____	

Reasons for Attending Program

First, let's talk about this adult education program you are now attending.

1. How did you hear about this program? *(Interviewer: Do not read the categories, but listen to the learner's response(s) and circle all that apply from the list below.)*

- Friends..... 1
- Family member..... 2
- People at my work..... 3
- Announcements on TV, radio..... 4
- Literacy Hotline..... 5
- Newspaper, other printed promotional materials..... 6
- Library..... 7
- Children's school..... 8
- Religious organizations (e.g., churches)..... 9
- Public assistance office, other governmental services, private services
(e.g., case manager)..... 10
- Other (Specify) _____..... 11

2. Why have you enrolled in this class? *(Interviewer: Do not read the reasons, but listen to the learner's response(s) and circle all that apply from the list below.)*

- To obtain a job..... 1
- To improve skills for current job 2
- To improve skills to obtain a better job 3
- To improve basic skills (reading, writing, math) 4
- To obtain a GED or a high school diploma..... 5
- To prepare for higher education 6
- To help my child(ren) with his/her school work..... 7
- Because of changes in family composition such as birth, death, marriage,
or divorce..... 8
- Encouraged by family member/friend..... 9
- Mandated by court system, welfare agency, etc..... 10
- Other..... 11
- Don't know..... 12

3. Is your participation voluntary or mandatory *(Interviewer Probe: e.g., mandated by welfare; the court system)? (Interviewer: Circle one.)*

- Voluntary 1
- Mandatory 2

Strengthening Adult Reading Instructional Practices	OMB#:	Exp. Date:
	Code # _____ — _____ — _____	

4. In what month and year did you first enroll in this program? (*Interviewer: If learner cannot recall the month, probe for the year.*)

Month _____ Year _____

5a. Currently, are you taking more than one class in this program?

Yes..... 1
 No (*Skip to Question 6a*)..... 2

5b. If Yes to Question 5a: How many classes are you attending? _____

5c. If Yes to Question 5a: What are the names of the classes and how many days of the week do you attend each class?

Class #1 Name _____	Number days per week: _____
Class #2 Name _____	Number days per week: _____
Class #3 Name _____	Number days per week: _____

Educational Background

Now, I am going to ask you some questions about the education you received before you enrolled in this adult education program.

6a. What is the highest grade or year of school you have completed **in the United States**? (Select one) (*Interviewer: See response options below for learners who were not educated in the U.S.*)

Completed grades 1-11 (but did not complete a high school diploma)..... 1

If '1' is circled above, circle the highest grade completed in the box below:

1	2	3	4	5	6	7	8	9	10	11
---	---	---	---	---	---	---	---	---	----	----

Completed grade 12 but didn't receive diploma..... 2
 Completed a high school diploma or GED..... 3
 Attended some college..... 4
 Completed college (2-year or 4-year)..... 5
 Received no schooling (in or outside U.S.) before enrolling in the current program (*Skip to 10a*)..... 6
 Received schooling prior to entering program, but none of it was in the U.S. (*Skip to 7*)..... 7

6b. If the learner attended some school in the U.S.: Did you attend (*one grade higher than the response*)

to Question 6a) grade?

- Yes..... 1
- No..... 2

Interviewer: Prepare to use response card.

7. Think about your overall experience in school from the first grade to when you left. Would you say your experience was generally: **(Interviewer: Use response card. Read and point to categories across the card. Ask learner to select one response. Circle the response.)**



- Very good..... 1
- Somewhat good..... 2
- Neutral..... 3
- Part of the experience was good; part was bad..... 4
- Somewhat bad..... 5
- Very bad..... 6

8a. Before you enrolled in the adult education class you now attend, had you taken any other classes to prepare for a GED, to obtain a high school diploma, or to improve your reading, writing, or math skills (not including high school)?

- Yes 1
- No (Skip to Question 9)..... 2

8b. **If Yes to Question 8a:** What did you study in that class(es)? **(Interviewer: Read each category to the learner and circle all that apply.)**

- Reading..... 1
- Writing..... 2
- Math..... 3
- Preparation for GED..... 4
- Other (Specify)..... 5

8c. **If Yes to Question 8a:** What were your main reasons for taking that class? **(Interviewer: Do not read the categories, but listen to the learner's response(s) and circle the number of all that apply from the list below.)**

- To obtain a job..... 1
- To improve skills for current job..... 2
- To improve skills to obtain a better job..... 3
- To obtain a GED or a high school diploma..... 4
- To prepare for higher education..... 5
- To help my child(ren) with his/her school work..... 6
- Because of changes in family composition such as birth, death, marriage, or divorce..... 7
- Encouraged by family member/friend..... 8

Strengthening Adult Reading Instructional Practices	OMB#:	Exp. Date:
	Code # _____ — _____ — _____	

Other..... 9
 Don't know..... 10

9a. Have you ever taken any of the GED tests?

Yes 1
 No (*Skip to Question 10a*) 2

9b. If Yes to Question 9a: Which GED test(s) did you take? (*Interviewer: Read each category to the learner and select all that apply.*)

Language Arts, Reading..... 1
 Mathematics..... 2
 Science..... 3
 Social Studies..... 4
 Language Arts, Writing..... 5
 Don't remember..... 6

9c. If Yes to Question 9a: Which GED test(s) did you pass? (*Interviewer: Read each category to the learner and select all that apply.*)

Language Arts, Reading 1
 Mathematics..... 2
 Science..... 3
 Social Studies..... 4
 Language Arts, Writing..... 5
 Don't Remember..... 6

9d. If Yes to Question 9a: When did you last take a GED test? (*Interviewer: If the exact month/year is not available, probe for approximate year.*)

Month: _____ Year: _____
 OR
 Number of years since learner took the GED: _____
 OR
 Don't remember (*circle*)..... 1

Employment and Job Training

Now, I'd like to ask you some information about your work and job training.

10a. Please tell me which of the following is true about your employment situation: (*Interviewer: Read each category to the learner before asking for a response. Circle one.*)

Currently employed 1

Strengthening Adult Reading Instructional Practices	OMB#:	Exp. Date:
	Code # _____ — _____ — _____	

- Not currently employed and never have been **(Skip to Question 14a)**..... 2
- Not currently employed but have worked in the past..... 3
- Not currently employed but retired..... 4
- Currently employed and retired..... 5

Interviewer: For the remainder of Question 10 , ask the respondent about his/her current job. If not currently employed, ask about the most recent job they had. If they work/worked more than one job, select the one they work/worked most often. If multiple jobs were worked equally, select the job with the highest salary.

10b. What is/was your job?

10c. Is/was your job a: **(Interviewer: Read each category to the learner before asking for a response. Circle one.)**

- Permanent, full time job (32 hours a week or more)..... 1
- Permanent, part time job..... 2
- Temporary job (full-time – 32 hours a week or more)..... 3
- Temporary job (part-time)..... 4
- Seasonal job..... 5
- Paid job training position (i.e., TANF, WIA)..... 6
- Self employed..... 7
- Other (Specify) _____..... 8

10d. How many weeks, months, or years have/had you had this job?

_____ weeks OR _____ months OR _____ years

10e. How many hours or days per week do/did you work?

_____ hours/week (*preferred response*) OR
_____ days/week

10f. How much money do/did you currently earn each hour OR week OR month at your job?

(Interviewer: Indicate either the hourly OR weekly OR monthly wages.)

_____ dollars _____ cents per HOUR Or
_____ dollars _____ cents per WEEK Or
_____ dollars _____ cents per MONTH

- Don't know/can't remember..... 1
- Refuses to answer..... 2

Strengthening Adult Reading Instructional Practices	OMB#:	Exp. Date:
	Code # _____ — _____ — _____	

11a. Currently, do you participate in any job training activities aside from this adult education program you are enrolled in?

- Yes 1
- No (*Skip to Question 12*)..... 2

11b. If Yes to Question 11a: What is the job training program you are attending (aside from this adult education program you are enrolled in)?

Name of job training program: _____

11c. If Yes to Question 11a: What are you learning in that job training program?

Use of Basic Skills

Now, I am going to ask you some questions about the type of reading, writing and math you do at home or at work.

12. Which of the following things do you have in your home? (*Interviewer: Read each category to the learner and circle all that apply.*)

- Computer..... 1
- A specific place to study.....2

13a. Do you buy or subscribe to any magazines?

- Yes..... 1
- No (*Skip to Question 14a*)..... 2

13b. If Yes to Question 13a: What are the names (or topics) of magazines that you buy or subscribe to?

14a. Are there books in your home?

- Yes 1
- No (*Skip to Question 15*)..... 2

14b. If Yes to Question 14a: What types of books do you currently have in your home? (*Interviewer: Read each category to the learner and circle all that apply.*)

Strengthening Adult Reading Instructional Practices

OMB#:

Exp. Date:

Code # _____ — _____ — _____



- Novels, stories, poems, biographies, etc..... 1
- Children's books..... 2
- Reference books, e.g., dictionary, computer books, cook books..... 3
- Religious books, e.g., the Bible..... 4
- Other (Specify the type) _____ 5

15. Here is a list of things that people may read or write. How often do you do the following things?
Select the answer that comes closest to how often you do each activity.

(Interviewer: Use response card. Read and point to categories across the card. Ask learner to select one response for each item. Circle each response.)

	Almost every day	A few times a week	About once a week	About 2 or 3 times a month	About once a month	Almost Never
1. Read school/class assignments, materials	1	2	3	4	5	6
2. Read advertisements in the mail, coupons	1	2	3	4	5	6
3. Read letters	1	2	3	4	5	6
4. Read labels on food, cooking recipes	1	2	3	4	5	6
5. Read religious materials	1	2	3	4	5	6
6. Read street signs	1	2	3	4	5	6
7. Read newspapers, magazines	1	2	3	4	5	6
8. Read books	1	2	3	4	5	6
9. Read TV Guide or other television listing	1	2	3	4	5	6
10. Read other things (Specify in space	1	2	3	4	5	6
11. Write school/class assignments, materials	1	2	3	4	5	6
12. Write checks, money orders	1	2	3	4	5	6
13. Write letters, e-mail, greeting cards, notes,	1	2	3	4	5	6
14. Write forms or applications	1	2	3	4	5	6
15. Write entries in a diary, stories, poems	1	2	3	4	5	6
16. Write grocery lists	1	2	3	4	5	6
17. Write other things (Specify in space	1	2	3	4	5	6
18. Do math	1	2	3	4	5	6
19. Use a computer	1	2	3	4	5	6

16a. Does anyone help you with your writing or reading other than teachers or tutors in the adult education program you are attending?

Yes 1

**Strengthening Adult Reading
Instructional Practices**

OMB#: _____ Exp. Date: _____
Code # _____ — _____ — _____



No (Skip to Question 17a)..... 2

16b. If Yes to Question 16a: Who helps you with your writing or reading? (**Interviewer: Read each category to the learner and circle all that apply.**)

- Spouse or partner..... 1
- Child..... 2
- Other relative(s)..... 3
- Friend..... 4
- Neighbor..... 5
- Other (Specify) _____..... 6

Interviewer: If the respondent is currently employed, then proceed with Question 17a. If not, skip to Question 18.

17a. Do you read, write, or do math for your job?

- Yes 1
- No (Skip to Question 18)..... 2

17b. If Yes to Question 17a: How often do you do the following things at work? Select the answer that is closest to how often you do each activity. (**Interviewer: Use response card. Read and point to categories across the card. Ask learner to select one response for each item. Circle each response.**)

	Almost everyday	A few times a week	About once a week	About 2 to 3 times a month	About once a month	Almost never
1. Read instructions, manuals, safety documents, schedules, forms, etc.	1	2	3	4	5	6
2. Read reports, books, trade magazines, etc.	1	2	3	4	5	6
3. Read or write e-mail, letters, memos, etc.	1	2	3	4	5	6
4. Read a computer screen or enter information into a computer	1	2	3	4	5	6
5. Search information on the Internet	1	2	3	4	5	6
6. Handle money, use cash register	1	2	3	4	5	6
7. Do math	1	2	3	4	5	6

	Almost everyday	A few times a week	About once a week	About 2 to 3 times a month	About once a month	Almost never
	1	2	3	4	5	6
8. Assist or teach new or other employees						

18. Do you have a library card?

- Yes 1
 No 2

19a. Since January 2008, have you gone to a library?

- Yes 1
 No (*Skip to Question 20*)..... 2

19b. If Yes to Question 19a: About how many times have you gone to a library since January 2008?

_____ (number of times)

19c. If Yes to Question 19a: What do you do at the library? (*Interviewer: Read each category to the learner and circle all that apply.*)

- Check out books to bring home to read yourself..... 1
 Check out books for your child(ren) to read 2
 Check out other materials (e.g., CD's, video tapes) to use at home..... 3
 Use reference materials..... 4
 Study, do your school work..... 5
 Read magazines or newspapers in the library..... 6
 Attend social events..... 7
 Other (Specify) _____..... 8



Health

Now, we would like to know if your health has influenced your ability to participate in work or educational activities.

20. Overall, how would you rate your health? (*Interviewer: Use response card. Read and point to the categories across the card. Ask learner to select one response. Circle the response.*)

- Very good..... 1
 Good..... 2
 Fair..... 3
 Poor..... 4

21. Many people have a problem or disability that gets in the way of work or education. Do you currently have any of the following problems? (*Interviewer: Read all categories and circle all that apply.*)

- An illness that has lasted a long time..... 1
- Vision Problems..... 2
- Hearing Problems..... 3
- Other physical handicap or disability..... 4
- Learning problems or disability 5
- Speech problems or disability..... 6
- Emotional problems or disability 7
- None..... 8

22a. Many people had problems that got in the way of their learning when they were young. Did you have any of these problems that got in the way of your learning? (*Interviewer: Read all categories and circle all that apply.*)

- An illness that lasted a long time..... 1
- Experience with violence or abuse 2
- Many moves and changes in school..... 3
- A learning disability 4
- A speech problem..... 5
- A physical handicap..... 6
- A drug or alcohol problem 7
- A mental or emotional problem..... 8
- A family problem 9
- Other (Specify) _____..... 10
- No problem that got in the way of learning..... 11

22b. Did you have difficulty reading as a child?

- Yes 1
- No (*Skip to Question 22d*)..... 2
- Don't know / don't remember (*Skip to Question 22d*)..... 3

22c. If yes to question 22b: Did you receive any special help with your reading?

- Yes 1
- No..... 2
- Don't Remember..... 3

22d. Were you placed in any special education classes or programs as a child?

- Yes..... 1
- No..... 2
- Don't Remember..... 3

Demographic Information

Strengthening Adult Reading Instructional Practices	OMB#:	Exp. Date:
	Code # _____ — _____ — _____	

23. Gender (*Interviewer: Note the gender*)

_____ Female
_____ Male

I have just a few more questions to ask about your background.

24. What is your date of birth?

_____ / _____ / _____
Month Day Year

25a. Were you born in the United States or in another country?

- United States (skip to question 26a)..... 1
- Another country..... 2

25b. If born in another country: How old were you when you moved to the United States?
(Interviewer: If the exact age is not available, ask for approximate age in years.)

_____ years old

25c. If born in another country: What was the highest grade you completed in your home country?
 (Select one)

- Completed grades 1-11 (but did not complete a high school diploma)..... 1

If '1' is circled above, circle the highest grade completed in the box below:

1 2 3 4 5 6 7 8 9 10 11

- Completed grade 12 but didn't receive diploma..... 2
- Completed a high school diploma..... 3
- Attended some college..... 4
- Completed college (2-year or 4-year)..... 5
- Other..... 6

26a. What was the first language you learned to speak as a child?

Was it: *(Interviewer: Read all the responses to the learner, circle one response.)*

- English (skip to question 26c)..... 1
- Not English (Specify language: _____)..... 2
- English and another language equally..... 3

26b. Was your mother born in the United States or in another country?

- United States..... 1
- Another country..... 2
- Don't know..... 3

Strengthening Adult Reading Instructional Practices	OMB#:	Exp. Date:
	Code # _____ — _____ — _____	

26c. When you were a child, did your mother:

- Read in English?
- Yes 1
 - No 2
 - Don't know / don't remember 3
- Speak in English?
- Yes 1
 - No 2
 - Don't know / don't remember 3

26d. Was your father born in the United States or in another country?

- United States..... 1
- Another country..... 2
- Don't know 3

26e. When you were a child, did your father:

- Read in English?
- Yes 1
 - No 2
 - Don't know / don't remember 3
- Speak in English?
- Yes 1
 - No 2
 - Don't know / don't remember 3

27a. What is your ethnicity? (**Interviewer: Read the first two responses to the learner, circle one response. If the learner refuses to answer, circle number 3.**)

- Hispanic or Latino..... 1
- Not Hispanic or Latino..... 2
- Refuse to answer..... 3
- Don't know..... 4

27b. What is your race? Please select one or more of the following. (**Interviewer: Read responses to learner and circle all responses that the learner gives.**)

- American Indian or Alaskan Native (Specify tribe/group _____).... 1
- Asian 2
- Black or African American 3
- Native Hawaiian or Other Pacific Islander..... 4
- White 5
- Refuse to answer..... 6

Strengthening Adult Reading Instructional Practices	OMB#:	Exp. Date:
	Code # _____ — _____ — _____	

28a. Which language do you usually speak at home?

- English 1
- Spanish 2
- Other (Specify: _____) 3

28b. *(Interviewer: Ask only if learner is currently working.)* Which language do you usually speak at work?

- English 1
- Spanish 2
- Other (Specify: _____) 3

29. What is your legal marital status now?

- Single 1
- Married 2
- Common-law marriage 3
- Divorced 4
- Separated 5
- Widowed 6

30.. About how much money do **you** currently make or receive per year or per month? Think about all sources of income, such as jobs, alimony, child support, public assistance, Unemployment Insurance, Social Security or SSI that you receive. Don't include any income that someone else in your household makes. *(Interviewer: Record the amount of income, probe/verify whether it is the MONTHLY or YEARLY income, and circle 1 or 2 accordingly.)*

Amount of income: \$ _____ Per MONTH 1 Per YEAR 2

Interviewer: ONLY IF the learner hesitates to report an exact amount, say:
 If you prefer, I'll read you a general range and you can pick the one that applies to your income. Is it easier to think about your MONTHLY income or YEARLY income? ***(Interviewer: Read the MONTHLY OR the YEARLY income ranges and circle the range the learner selects.)***

MONTHLY		YEARLY	
Under \$100 per month.....	1	Under \$999 per year	1
\$100 – \$249 per month.....	2	\$1,000 – \$2,999 per year.....	2
\$250 – \$499 per month.....	3	\$3,000 – \$5,999 per year.....	3
\$500 – \$749 per month.....	4	\$6,000 – \$8,999 per year.....	4
\$750 – \$999 per month.....	5	\$9,000 – \$11,999 per year.....	5
\$1,000 – \$1,249 per month.....	6	\$12,000 – \$14,999 per year.....	6
\$1,250 – \$1,664 per month.....	7	\$15,000 – \$19,999 per year.....	7
\$1,665 – \$2,084 per month.....	8	\$20,000 – \$24,999 per year.....	8
\$2,085 – \$2,499 per month.....	9	\$25,000 – \$29,999 per year.....	9
\$2,500 or more per month.....	10	\$30,000 or more per year.....	10
Don't know.....	11	Don't know.....	11
Refuses to answer.....	99	Refuses to answer.....	99

Strengthening Adult Reading Instructional Practices	OMB#:	Exp. Date:
	Code # _____ — _____ — _____	

31a. Do you currently receive any public assistance (e.g., TANF, food stamps, Supplemental Security Income, refugee cash assistance, old age assistance, etc.)?

- Yes 1
- No (*Skip to Question 32a*) 2

31b. If Yes to Question 31a: How long have you been receiving public assistance?

- _____ Months OR _____ Years OR Year began receiving public assistance: _____ OR
Don't know..... 1

Learning Goals

The last question is about your learning goals.

32a. Are you planning to continue your education after this year?

- Yes 1
- No (*Conclude interview.*) 2
- Don't know or Does not apply (*Conclude interview.*)..... 3

32b. If Yes to Question 32a: What type of further education do you plan to receive?