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MATHEMATICA
Policy Research, Inc.



Fall/Spring Head Start Teacher Interview

Head Start FACES- Fall
2009

NOTE: IF A QUESTION IS NOT DESIGNATED AS SPRING VERSION ONLY, THE QUESTION WILL BE ASKED IN THE FALL AND THE SPRING VERSION.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection will be entered after clearance. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

INTRODUCTION

Thank you for taking the time to let us speak with you today. This survey is part of a study of families and children's experiences with the Head Start program. We obtained permission from the director of the center to talk with you about your experiences in Head Start. We appreciate your time and effort in completing this survey.

Your participation in the study is voluntary and you may refuse to answer any questions you are not comfortable answering. Your answers will be completely confidential and will not be shared with parents or other staff in your center, or anybody else not working on this study. The survey will take about 20 minutes of your time to complete.

Do you have any questions before we begin?

PROGRAMMER NOTE FOR TEACHERS WITH SECOND CLASS: ASK QUESTIONS ABOUT FIRST CLASS FIRST AND THEN ASK QUESTIONS ABOUT SECOND CLASS AT THE END OF THE INTERVIEW.

FALL, GO TO SECTION A

SPRING, CONTINUE

SPRING SCREENER

(SECOND) (ASKED ONLY IF TEACHER WAS INTERVIEWED LAST FALL)

{All}

S1. **Our records indicate that we interviewed you for the FACES study last [(if Spring 2010) fall/(if Spring 2011) year] in [FILL FROM SMS (Fall 2009/(and) Spring 2010)]. Is that correct?**

YES.....1 → GO TO A0-1

NO/DOES NOT RECALL.....0

DON'T KNOW.....d

REFUSED.....r

{tYesNo}

{IF S1 = 0, d, r}

S1a.

Please give me your full name so that I can update my records.

First name: _____

Middle name: _____

Last name: _____

(SECOND)

{IF S1 = 0, d, r}

S1b. **When did you become the teacher of this (ONE CLASS) classroom/(MORNING CLASS) morning class/(AFTERNOON CLASS) afternoon class?**

DATE TYPE

|_|_| / |_|_| / |_|_|_|_|
MONTH DAY YEAR

DON'T KNOW.....d

REFUSED.....r

{ASKED ONLY IF NEW TEACHER ACCORDING TO SMS OR IF NEW TEACHER IN S1=0,d,r}

S1c. **According to our records you were not teaching the [NAME OF CLASS] (ONE CLASS) classroom/(MORNING CLASS) morning class/(AFTERNOON CLASS) afternoon class) last [(if Spring 2010) fall/(if Spring 2011) year] when we conducted the first interview, is that correct?**

- CORRECT—DID NOT TEACH CLASS AT FIRST INTERVIEW.....1
- INCORRECT—SAME TEACHER AS AT FIRST INTERVIEW.....0 → GO TO A01
- DON'T KNOW.....d
- REFUSED.....r

{IF S1c = 1}

S1d. **Let me confirm that we have your name recorded correctly:**

We have you listed as: [NAME OF NEW TEACHER TO BE FILLED FROM SMS OR FROM S1a]. Is this correct?

- YES.....1 → GO TO S2
- NO.....0
- DON'T KNOW.....d
- REFUSED.....r

{IF S1d = 0,d,r}

S1e. **Could you please tell me how to spell your name?**

First name: _____

Middle name: _____

Last name: _____

(SECOND)

{IF S1b was not asked}

S2. **When did you become the teacher of this (ONE CLASS) classroom/(MORNING CLASS) this morning class/(AFTERNOON CLASS) this afternoon class)?**

DATATYPE

|_|_| / |_|_| / |_|_|_|_|
MONTH DAY YEAR

- DON'T KNOW.....d
- REFUSED.....r

(SECOND)
IF S2 < 1965 OR > 2010

[SOFT S2] YEAR RESPONDENT BECAME TEACHER MAY BE TOO EARLY OR TOO LATE

I may have mistyped something. I have entered [S2] as the year you became a teacher of this class.

Is that correct?

(SECOND)

S3. Before you became the teacher of (ONE CLASS) this classroom/(MORNING CLASS) this morning class/(AFTERNOON CLASS) this afternoon class, were you teaching in Head Start?

- YES.....1
 - NO.....0
 - DON'T KNOW.....d
 - REFUSED.....r
- } → GO TO S6

{tYesNo}

(SECOND)

{If S3 = 1}

S4. Where were you teaching before you came to this (ONE CLASS) classroom/(MORNING CLASS) this morning class/(AFTERNOON CLASS) this afternoon class)? Were you teaching . . .

CODE ONLY ONE

- in the same classroom as an assistant teacher,.....1
- in a different classroom at the same Head Start center,.....2
- at a different Head Start center operated by the same program,.....3
- at a Head Start center operated by a different program, or.....4
- somewhere else? (SPECIFY).....5
- _____
- DON'T KNOW.....d
- REFUSED.....r

{If S4 = 5}

S4Specify
STRING[50]

“Please tell me where you taught before coming to this classroom?”

(SECOND)

{IFS4=2,3,4,5,d,r}

S5. **What was your position at the center or classroom you were in before coming to this classroom?**

- LEAD TEACHER.....1
- ASSISTANT TEACHER/TEACHER AIDE.....2
- PART-TIME SUBSTITUTE TEACHER.....3
- VOLUNTEER.....4
- COORDINATOR/SUPERVISOR
(E.G., EDUCATIONAL COORDINATOR.....5
- CENTER DIRECTOR.....6
- OTHER POSITION (SPECIFY).....7

-
- DON'T KNOW.....d
 - REFUSED.....r

{IF S5 = 7}
S5Specify

“Please tell me what was your position at the center or classroom before coming to this classroom?”

STRING[50]

GO TO A0-1

{IF S3 = 0, D, R}

(SECOND)

S6. Before you became the teacher of this class, were you working . . .

CODE ONE

at an early childhood education or child care center, . . . 1

at a family-based child care setting (family day care), . . . 2

in a state sponsored preK program, . . . 3

in a kindergarten classroom, . . . 4

in an elementary school classroom, . . . 5

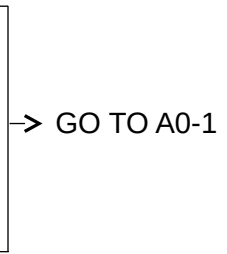
in a non-education setting, . . . 6

not working full-time, or . . . 7

somewhere else? (SPECIFY) . . . 8

DON'T KNOW . . . d

REFUSED . . . r



{IF S6 = 8}

S6Specify

“Please tell me where were you working before coming to this classroom as a teacher?”

STRING[50]

(SECOND)

{If S6 = 1, 3, 4,5}

S7. What was your position at the previous center or classroom?

LEAD TEACHER . . . 1

ASSISTANT TEACHER/TEACHER AIDE . . . 2

PART-TIME SUBSTITUTE TEACHER . . . 3

VOLUNTEER . . . 4

COORDINATOR/SUPERVISOR
(E.G., EDUCATIONAL COORDINATOR) . . . 5

CENTER DIRECTOR . . . 6

OTHER POSITION (SPECIFY) . . . 7

DON'T KNOW . . . d

REFUSED . . . r

{IF S7 = 7}

S7Specify

“Please tell me what was your position at the previous center or classroom?”

STRING[50]

A. CLASSROOM ACTIVITIES

(SECOND) {ALL}

First, I'd like to ask you some questions about your classroom activities and the children in (ONE CLASS) your classroom/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class).

IF TEACHER OF TWO CLASSES: After I have asked you about your morning class I will have a few further questions about your afternoon class.

(SECONDO {ALL} {SOFT 1 ..20} {HARD 1 ..30}

A0-1 How many children are enrolled in this class?

|_|_| CHILDREN

DON'T KNOW.....d

REFUSED.....r

(SECOND)

{ALL}

{SOFT 0 ..20}

A0-1A through A0-1C

As of today's date, how many children in this class are at each of the following age levels?

	CHILDREN	DON'T KNOW	REFUSED
A. 3 years old (or younger)	_ _	d	r
B. 4 years old	_ _	d	r
C. 5 years old (or older)	_ _	d	r

{IFA0-1A > 20}

[SOFT A0-1A] NUMBER OF 3 YEAR OLDS MAY BE TOO HIGH

I may have mistyped something. I have entered [A0-1A] as the number of children who are 3 years old (or younger) in your class.

Is that correct?

{IFA0-1B > 20}

[SOFT A0-1B] NUMBER OF 4 YEAR OLDS MAY BE TOO HIGH

I may have mistyped something. I have entered [A0-1B] as the number of children who are 4 years old in your class.

Is that correct?

{IFA0-1C > 20}

[SOFT A0-1C] NUMBER OF 5 YEAR OLDS MAY BE TOO HIGH

I may have mistyped something. I have entered [A0-1C] as the number of children who are 5 years old (or older) in your class.

Is that correct?

{IF A0-1 > A0-1A + A0-1B + A0-1C}

[HARD A0-1] NUMBER OF CHILDREN BY AGE HIGHER THAN TOTAL NUMBER

I may have mistyped something. I have entered [A0-1] as the number of children enrolled in your class, but with [A0-1A] 3-year-olds, [A0-1B] 4-year-olds, and [A0-1C] 5-year-olds which is [A0-1A+A0-1B+A0-1C] children total.

Is [A0-1] correct?

NOTE: IF R REPORTS A NEW TOTAL NUMBER OF CHILDREN ENROLLED, CHOOSE A0-1 AND CHANGE THAT ANSWER.

IF R REPORTS A NEW NUMBER OF CHILDREN WHO ARE 3 YEARS OLD OR YOUNGER, CHOOSE A0-1A AND CHANGE THAT ANSWER.

IF R REPORTS A NEW NUMBER OF CHILDREN WHO ARE 4 YEARS OLD, CHOOSE A0-1B AND CHANGE THAT ANSWER.

IF R REPORTS A NEW NUMBER OF CHILDREN WHO ARE 5 YEARS OLD OR OLDER, CHOOSE A0-1C AND CHANGE THAT ANSWER.

(SECOND)

{ALL}

{SOFT 1..5}

A0-2 How many lead teachers are usually with this class?

|_|_| LEAD TEACHERS

DON'T KNOW.....d

REFUSED.....r

(SECOND)

{ALL}

{SOFT 1..5}

A0-3 And how many assistant teachers?

|_|_| ASSISTANT TEACHERS

DON'T KNOW.....d

REFUSED.....r

(SECOND)

{ALL}

{SOFT 1..5}

A0-4 **And how many paid aides?**

|__|__| PAID AIDES

DON'T KNOW.....d

REFUSED.....r

(SECOND)

{ALL}

{DATA DEFINITION 1..7}

{SOFT1..5}

A0-5 **How many days a week does this class meet?**

|__|__| DAYS EACH WEEK

DON'T KNOW.....d

REFUSED.....r

{IFA0-5 > 5}

[SOFT A0-5] NUMBER OF DAYS MAY BE TOO HIGH

I may have mistyped something. I have entered [A0-5] as the number of days a week this class meets.

Is that correct?

(SECOND)

{ALL}

{ DATA DEFINITION 1..168}

{SOFT 5..40}

A0-6 **How many hours a week does this class meet?**

|__|__| HOURS EACH WEEK

DON'T KNOW.....d

REFUSED.....r

{IF A0-6<5 OR > 40 }

[SOFT A0-5] NUMBER OF HOURS CLASS MEETS MAY BE TOO LOW OR HIGH

I may have mistyped something. I have entered [A0-6] as the number of hours a week this class meets.

Is that correct?

(SECOND)

{All}

A1.



We would like you to tell us how a *typical day* is spent in (ONE CLASS) your classroom/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class). Not including lunch or nap breaks, how much time do the children spend in the following kinds of activities?

How about (READ ITEM)? Would you say the children spend no time, half an hour or less, about one hour, about two hours, or three hours or more in (READ ITEM AGAIN)?

	NO TIME	HALF HOUR OR LESS	ABOUT ONE HOUR	ABOUT TWO HOURS	THREE HOURS OR MORE	DON'T KNOW	REFUSED
a. teacher-directed whole class activities.....	1	2	3	4	5	d	r
b. teacher-directed small group activities.....	1	2	3	4	5	d	r
c. teacher-directed individual activities.....	1	2	3	4	5	d	r
d. child-selected activities.....	1	2	3	4	5	d	r

(SECOND)

A2.



How often do children in (ONE CLASS) your class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class) do each of the following reading and language activities? Would you say children (READ ITEM) never, about once a month or less, two or three times a month, once or twice a week, three or four times a week, or every day?

	NEVER	ONCE A MONTH OR LESS	TWO OR THREE TIMES A MONTH	ONCE OR TWICE A WEEK	THREE OR FOUR TIMES A WEEK	EVERY DAY	DON'T KNOW	REFUSED
a. work on learning the names of letters.....	1	2	3	4	5	6	d	r
b. practice writing the letters of the alphabet.....	1	2	3	4	5	6	d	r
c. discuss new words.....	1	2	3	4	5	6	d	r
d. dictate stories to a teacher, aide, or volunteer.....	1	2	3	4	5	6	d	r
e. work on phonics.....	1	2	3	4	5	6	d	r
f. listen to you read stories where they see the print (e.g., Big Books).....	1	2	3	4	5	6	d	r

g. listen to you read stories but they don't see the print.....	1	2	3	4	5	6	d	r
h. retell stories.....	1	2	3	4	5	6	d	r
i. learn about conventions of print (such as left to right orientation, book holding).....	1	2	3	4	5	6	d	r
j. write their own name.....	1	2	3	4	5	6	d	r
k. learn about rhyming words and word families.....	1	2	3	4	5	6	d	r
l. learn about common prepositions, such as over and under, up and down.....	1	2	3	4	5	6	d	r

(SECOND)

A3. **How often do children in (ONE CLASS) your classroom/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class do each of the following math activities? Would you say children (READ ITEM) never, about once a month or less, two or three times a month, once or twice a week, three or four times a week, or every day?**



	NEVER	ONCE A MONTH OR LESS	TWO OR THREE TIMES A MONTH	ONCE OR TWICE A WEEK	THREE OR FOUR TIMES A WEEK	EVERY DAY	DON'T KNOW	REFUSED
a. count out loud.....	1	2	3	4	5	6	d	r
b. work with geometric manipulatives (for example, parquetry blocks, or shape puzzles).....	1	2	3	4	5	6	d	r
c. work with counting manipulatives (things for children to count) to learn basic operations (for example, adding or subtracting).....	1	2	3	4	5	6	d	r
d. play math-related games.....	1	2	3	4	5	6	d	r
e. use music to understand math concepts.....	1	2	3	4	5	6	d	r
f. use creative movement or creative drama to understand math concepts.....	1	2	3	4	5	6	d	r
g. work with rulers, measuring cups, spoons, or other measuring instruments.....	1	2	3	4	5	6	d	r

A3. (continued)									
h.	engage in calendar-related activities.....	1	2	3	4	5	6	d	r
i.	engage in activities related to telling time.....	1	2	3	4	5	6	d	r
j.	engage in activities that involve shapes and patterns.....	1	2	3	4	5	6	d	r

VERSION BOX A3A

IF FALL, GO TO A3A.

IF SPRING, IF NEW RESPONDENT (S1=0,d,r OR S1c = 1), CONTINUE TO A3A, OTHERWISE GO TO A3E.

Next, I am going to ask you some questions about the languages you and others may speak.

{ALL}

A3A. **Do you speak any language other than English, either in the classroom or outside of the classroom such as at home?**

- YES.....1
 - NO.....0
 - DON'T KNOW.....d
 - REFUSED.....r
-

{tYesNo}

{IF A3A=1}

A3B. **What languages?**

PROBE: Any other languages?

A3B
CODE ALL THAT APPLY

SPANISH.....	2
VIETNAMESE.....	3
CHINESE.....	4
JAPANESE.....	5
KOREAN.....	6
A FILIPINO LANGUAGE.....	7
OTHER (SPECIFY).....	8

OTHER (SPECIFY).....	9

**ASK A3C and A3D FOR EACH LANGUAGE REPORTED IN A3B
{IF A3A=1 & A3B>1}**



A3C & A3D. How well do you . . .		
circle one per row		
	A3C. understand [FILL LANGUAGE A3B]? Would you say . . .	A3D. speak [FILL LANGUAGE A3B]? Would you say . . .
SPANISH	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r
VIETNAMESE	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r
CHINESE	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r
JAPANESE	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r
KOREAN	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r
A FILIPINO LANGUAGE	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r
OTHER (SPECIFY) _____	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r
OTHER (SPECIFY) _____	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r	Not at all,.....1 Not well,.....2 Well, or.....3 Very well?.....4 DON'T KNOW....d REFUSED.....r

(SECOND)

{ALL}

{SOFT 0..20}

A3E. **How many dual language learner children are there in [(ONE CLASS) your class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class]?**

PROBE: Dual language learners are children learning two (or more) languages at the same time, as well as those learning a second language while continuing to develop their first (or home) language. These children are also often referred to as Limited English Proficient (LEP), bilingual, English language learners (ELL), English learners, and children who speak a language other than English (LOTE).

|_|_| CHILDREN

DON'T KNOW.....d

REFUSED.....r

{IF A3E>20}

[SOFT A0-5] NUMBER OF CHILDREN MAY BE TOO HIGH

I may have mistyped something. I have entered [A03E] as the number of dual language learner children in this class.

Is that correct?

(SECOND)

{ALL}

A3F. **Thinking about all [FILL A0-1] children in [(ONE CLASS) your class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class] what languages do children enrolled in the class currently speak?**

(SECOND)

{ALL}

{DATA DEFINITION 0..100}

THEN ASK FOR EACH LANGUAGE IN A3F:

A3G. **Approximately what percent of children speak [FILL LANGUAGE(S) CODED IN A3F]?**

	A3F.	A3G.		
	CODE ALL THAT APPLY	ASK FOR EACH LANGUAGE IN A3F:		
	LANGUAGE SPEAK	PERCENT	DON'T KNOW	REFUSED
ENGLISH.....	1	_ _ _	d	r
SPANISH.....	2	_ _ _	d	r
VIETNAMESE.....	3	_ _ _	d	r
CHINESE.....	4	_ _ _	d	r
JAPANESE.....	5	_ _ _	d	r
KOREAN.....	6	_ _ _	d	r
A FILIPINO LANGUAGE.....	7	_ _ _	d	r
OTHER LANGUAGE (SPECIFY).....	8	_ _ _	d	r

OTHER LANGUAGE (SPECIFY).....	9	_ _ _	d	r

{IF A3F = 8, 9}

A3FSpecify **“Please tell me what other languages children enrolled in the class currently speak?”**

STRING[50]

(SECOND)

{ALL}

A4. **What languages are used for instruction in [(ONE CLASS) your class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class] by you or another adult? I am not asking about language lessons. We want to know if the children are taught using a language in addition to or other than English.**

CODE ALL LANGUAGES NAMED.

(SECOND)

{FOR EACH LANGUAGE NAMED IN A4}

A4A. **Who speaks [FILL LANGUAGE FROM A4]? Is it you/the lead teacher, the assistant teacher, a classroom aide, or a volunteer?**

A4. CODE ALL THAT APPLY	A4A. CODE FOR EACH LANGUAGE IN A4 CODE ALL THAT APPLY			
	LANGUAGE USED	YOU/ LEAD TEACHER	ASSISTANT TEACHER	CLASSROOM AIDE
ENGLISH.....1..	1	2	3	4
SPANISH.....2..	1	2	3	4
VIETNAMESE.....3..	1	2	3	4
CHINESE.....4..	1	2	3	4
JAPANESE.....5..	1	2	3	4
KOREAN.....6..	1	2	3	4
A FILIPINO LANGUAGE.....7..	1	2	3	4
SIGN LANGUAGE.....10.	1	2	3	4
OTHER LANGUAGE (SPECIFY).....9..	1	2	3	4
OTHER LANGUAGE (SPECIFY).....8..	1	2	3	4

{IF A4 = 8, 9}

A4Specify **“Please tell me what other languages are used for instruction in this classroom?”**

STRING[50]

(SECOND)

{ALL}

A5A. **What language do you use most often when you read to children in [(ONE CLASS) your class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class]?**

CODE ONLY ONE

ENGLISH.....	1
SPANISH.....	2
VIETNAMESE.....	3
CHINESE.....	4
JAPANESE.....	5
KOREAN.....	6
A FILIPINO LANGUAGE.....	7
SIGN LANGUAGE.....	10
OTHER LANGUAGE (SPECIFY).....	8
<hr/>	
OTHER LANGUAGE (SPECIFY).....	9
<hr/>	

{IF A5A = 8, 9}

A5ASpecify **“Please tell me what other language is used most often when you read to children in this classroom?”**

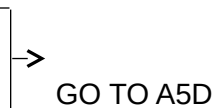
STRING[50]

(SECOND)

{ALL}

A5B. **Are there any other languages you use when you read to children in [(ONE CLASS) your class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class]?**

YES.....	1
NO.....	0
DON'T KNOW.....	d
REFUSED.....	r



{tYesNo}

(SECOND)

{IF A5B=1}

A5C. **What other languages are used when you read to children in this classroom?**

CODE ALL THAT APPLY

- ENGLISH..... 1
 - SPANISH..... 2
 - VIETNAMESE..... 3
 - CHINESE..... 4
 - JAPANESE..... 5
 - KOREAN..... 6
 - A FILIPINO LANGUAGE..... 7
 - SIGN LANGUAGE..... 10
 - OTHER LANGUAGE (SPECIFY)..... 9
-
- OTHER LANGUAGE (SPECIFY)..... 8

{IF A5C = 8, 9}

A5CSpecify **“Please tell me what other languages are used when you read to children in this classroom.”**

STRING[50]

(SECOND)

{ALL}

A5D. **What language do you use most often when you speak to a group of children to present information or give directions in [(ONE CLASS) your class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class]?**

CODE ONLY ONE

- ENGLISH..... 1
 - SPANISH..... 2
 - VIETNAMESE..... 3
 - CHINESE..... 4
 - JAPANESE..... 5
 - KOREAN..... 6
 - A FILIPINO LANGUAGE..... 7
 - SIGN LANGUAGE..... 10
 - OTHER LANGUAGE (SPECIFY)..... 9
-
- OTHER LANGUAGE (SPECIFY)..... 8

{IF A5D = 8, 9}

A5DSpecify **“Please tell me what other language is used most often when you speak to a group of children to present information or give directions in this classroom.”**

STRING[50]

(SECOND)

{ALL}

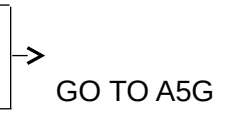
A5E. **Are there any other languages you use when you speak to a group of children in [(ONE CLASS) your class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class]?**

YES.....1

NO.....0

DON'T KNOW.....d

REFUSED.....r



{tYesNo}

(SECOND)

{IF A5E=1}

A5F. **What other languages are used when you speak to a group of children in this classroom?**

CODE ALL THAT APPLY

ENGLISH.....	1
SPANISH.....	2
VIETNAMESE.....	3
CHINESE.....	4
JAPANESE.....	5
KOREAN.....	6
A FILIPINO LANGUAGE.....	7
SIGN LANGUAGE.....	10
OTHER LANGUAGE (SPECIFY).....	9

OTHER LANGUAGE (SPECIFY).....	8

{IF A5F = 8, 9}

A5FSpecify **“Please tell me what other languages are used when you speak to a group of children in this classroom.”**

STRING[50]

{ALL}

A5G. **In what languages are printed materials like children’s books available in your class?**

CODE ALL THAT APPLY

ENGLISH.....	1
SPANISH.....	2
VIETNAMESE.....	3
CHINESE.....	4
JAPANESE.....	5
KOREAN.....	6
A FILIPINO LANGUAGE.....	7
BRAILLE.....	10
OTHER LANGUAGE (SPECIFY).....	8

OTHER LANGUAGE (SPECIFY).....	9

{IF A5G = 8, 9}

A5GSpecify "Please tell me what other languages printed materials are available in."
STRING[50]

My next questions are about the curriculum you use in your classroom.

{All}

A6. Is a specific curriculum or combination of curricula used in your program?

- YES, SPECIFIC CURRICULUM.....1
 - YES, COMBINATION.....2
 - NO CURRICULUM.....3
 - DON'T KNOW.....d
 - REFUSED.....r
- } → GO TO A18

{If A6 = 1, 2}

A7. What do you use?

PROBE: Any others?

CODE ALL CURRICULA NAMED. IF MORE THAN ONE CURRICULA IS NAMED, ASK A8, ELSE GO TO A9.

{If A6 = 1, 2 AND A7 HAS MORE THAN ONE RESPONSE CODED}

A8. What is your main curriculum?

	A7. CODE ALL THAT APPLY	A8. CODE ONLY ONE		
	CURRICULA	MAIN CURRICULUM	DON'T KNOW	REFUSED
CREATIVE CURRICULUM.....	11	11	d	r
HIGH/SCOPE.....	12	12	d	r
HIGH REACH.....	13	13	d	r
LET'S BEGIN WITH THE LETTER PEOPLE...	14	14	d	r
MONTESSORI.....	15	15	d	r
BANK STREET.....	16	16	d	r
CREATING CHILD CENTERED CLASSROOMS – STEP BY STEP.....	17	17	d	r
SCHOLASTIC CURRICULUM.....	18	18	d	r
LOCALLY DESIGNED CURRICULUM.....	19	19	d	r
CURIOSITY CORNER-JOHN HOPKINS.....	20	20	d	r
OTHER (SPECIFY).....	21	21	d	r

{If A8 = 21}

A8Specify "Please tell me what is your main curriculum?"
STRING[50]

{If A6 = 1, 2 }

A10. **How many hours of training in (IF A8 IS SKIPPED, USE RESPONSE FROM A7, ELSE FILL WITH A8) have you had in the past 12 months?**

0...299

NOTE: IF LESS THAN ONE HOUR, CODE AS 0. IF NO TRAINING IN PAST 12 MONTHS, CODE AS 0.

|_|_|_| HOURS

DON'T KNOW.....d

REFUSED.....r

{!FA10 > 299}

[HARD A10] NUMBER OF HOURS IN TRAINING MAY BE TOO HIGH

I may have mistyped something. I have entered [A10] as the number of hours of training you had in [MAIN CURRICULUM] in the past 12 months.

Is that correct?

{If A6 = 1, 2 }

A11. Listed on this card are the types of staff who typically provide training. Please tell me what type of staff provided you with the most training on (IF A7 OR A8 = d, r, THEN DISPLAY [this curriculum])/ (IF A8 IS SKIPPED, USE RESPONSE FROM A7, ELSE FILL WITH A8).



INTERVIEWER NOTE: IF RESPONSE IS HEAD START STAFF, ASK: **From this Head Start or another Head Start program?**

CODE ONE ONLY

- STAFF FROM THIS HEAD START PROGRAM.....1
 - STAFF FROM ANOTHER HEAD START PROGRAM.....2
 - STAFF OR CONSULTANT(S) FROM CURRICULUM DEVELOPERS (E.G., HIGH SCOPE, TEACHING STRATEGIES, ETC.).....3
 - FACULTY FROM SCHOOL OF EDUCATION.....4
 - HEAD START REGIONAL OFFICE TRAINING AND TECHNICAL ASSISTANCE STAFF.....5
 - OTHER (SPECIFY).....6
-
- DON'T KNOW.....d
 - REFUSED.....r

{IF A11 = 6}
A11Specify
STRING[50]

“Please tell me who provided the most training?”

A13. SPRING VERSION ONLY

{If A6 = 1, 2 }

A13. Listed on this card are some types of support teachers have told us they receive.



Please tell us which types of support you have received to help you use (IF A7 OR A8= d, r, THEN DISPLAY [this curriculum])/ (IF A8 IS SKIPPED, USE RESPONSE FROM A7, ELSE FILL WITH A8).

PROBE: Any others?

CODE ALL THAT APPLY

- HELP UNDERSTANDING THE CURRICULUM.....1
- PROVIDE OPPORTUNITIES TO OBSERVE
SOMEONE IMPLEMENTING THE CURRICULUM.....2
- REFRESHER TRAINING ON THE CURRICULUM.....3
- HELP IMPLEMENTING THE CURRICULUM.....4
- HELP PLANNING CURRICULUM-BASED ACTIVITIES.....5
- HELP INDIVIDUALIZING THE CURRICULUM FOR
CHILDREN.....6
- HELP IDENTIFYING AND/OR RECEIVING
ADDITIONAL RESOURCES TO EXPAND THE
SCOPE OF THE CURRICULUM AND ACTIVITIES.....7
- FEEDBACK ON IMPLEMENTING THE CURRICULUM.....8
- NO SUPPORT.....10
- OTHER (SPECIFY).....9

- DON'T KNOW.....d
- REFUSED.....r

{IF A13 = 9}

A13Specify
STRING[100]

“Please tell me what kind of support you received?”

A14. SPRING VERSION ONLY

{If A6 = 1, 2 }

A14. **From whom did you receive support?**

PROBE: **Anyone else?**

CODE ALL THAT APPLY

- MENTOR OR MASTER TEACHER.....1
 - OTHER HS TEACHERS IN PROGRAM.....2
 - SUPERVISOR/EDUCATION COORDINATOR.....3
 - STAFF FROM ANOTHER HEAD START PROGRAM.....4
 - STAFF OR CONSULTANT(S) FROM CURRICULUM
DEVELOPERS (E.G., HIGH SCOPE,
TEACHING STRATEGIES, ETC.).....5
 - FACULTY FROM SCHOOL OF EDUCATION.....6
 - HEAD START REGIONAL OFFICE TRAINING
AND TECHNICAL ASSISTANCE STAFF.....7
 - NO SUPPORT.....9
 - OTHER (SPECIFY).....8
-
- DON'T KNOW.....d
 - REFUSED.....r

{IF A14 = 9}
A14Specify
STRING[50]

“Please tell me from whom did you receive support?”

A15. SPRING VERSION ONLY

{If A6 = 1, 2}

A15. **What are the strengths of (DISPLAY IF A7 OR A8 = d, r [main curriculum]/ELSE [main curriculum, that is (IF A8 IS SKIPPED, USE RESPONSE FROM A7, ELSE FILL WITH A8)]?**

PROBE: **Any others?**

CODE ALL THAT APPLY

- PROVIDES CLEAR GUIDANCE ON HOW TO PLAN LESSONS/UNITS.....1
 - HAS ADEQUATE LEARNING MATERIALS/ RESOURCES/EXAMPLES OF ACTIVITIES.....2
 - IS EASY TO USE AND ADAPT.....3
 - ADDRESSES MULTIPLE DOMAINS OF LEARNING (E.G., COGNITIVE, SOCIO-EMOTIONAL, PHYSICAL, ETC.).....4
 - ADDRESSES EARLY LITERACY AND/OR NUMERACY.....5
 - INVOLVES PARENTS AS PARTNERS IN CHILDREN’S LEARNING.....6
 - PROVIDES ROOM FOR TEACHER CREATIVITY.....7
 - IS CULTURALLY SENSITIVE.....8
 - IS DEVELOPMENTALLY-APPROPRIATE.....9
 - PROVIDES INDIVIDUAL REPORTS ON CHILD ASSESSMENT FOR PARENTS.....10
 - PROVIDES GUIDANCE FROM CHILD ASSESSMENT TO PLAN FOR LEARNING ACTIVITIES.....11
 - IS CHILD-DIRECTED OR HAS CHILD-INITIATED ACTIVITIES.....13
 - PROVIDES GUIDANCE FOR SUPPORTING LANGUAGE DEVELOPMENT OF DLL CHILDREN.....14
 - OTHER (SPECIFY).....12
-
- DON’T KNOW.....d
 - REFUSED.....r

{IF A15 =12}
A15Specify
STRING[100]

“Please tell me what are the strengths of your main curriculum?”

A16. SPRING VERSION ONLY

A16. **What are the weaknesses or drawbacks of (IF A7 OR A8= d, r, THEN DISPLAY [this curriculum] ELSE DISPLAY [this curriculum, that is [FILL FROM A8]])?**

PROBE: **Any others?**

CODE ALL THAT APPLY

- DOES NOT PROVIDE CLEAR GUIDANCE ON HOW TO PLAN LESSONS/UNITS.....1
 - DOES NOT HAVE ADEQUATE LEARNING MATERIALS/RESOURCES/EXAMPLES OF ACTIVITIES.....2
 - NOT EASY TO USE AND ADAPT.....3
 - DOES NOT ADDRESS MULTIPLE DOMAINS OF LEARNING (E.G., COGNITIVE, SOCIO-EMOTIONAL, PHYSICAL, ETC.).....4
 - NOT ENOUGH INFORMATION ON EARLY LITERACY AND/OR NUMERACY.....5
 - DOES NOT INVOLVE PARENTS AS PARTNERS IN CHILDREN'S LEARNING.....6
 - DOES NOT PROVIDE ROOM FOR TEACHER CREATIVITY.....7
 - NOT CULTURALLY SENSITIVE.....8
 - NOT DEVELOPMENTALLY-APPROPRIATE.....9
 - DOES NOT PROVIDE INDIVIDUAL REPORTS ON CHILD ASSESSMENT FOR PARENTS.....10
 - DOES NOT PROVIDE GUIDANCE FROM CHILD ASSESSMENT TO PLAN FOR LEARNING ACTIVITIES....11
 - DOES NOT PROVIDE GUIDANCE FOR SUPPORTING LANGUAGE DEVELOPMENT OF DLL CHILDREN.....13
 - NO WEAKNESSES IDENTIFIED.....14
 - OTHER (SPECIFY).....12
-
- DON'T KNOW.....d
 - REFUSED.....r

{IF A16 =12}
A16Specify
STRING[100]

“Please tell me what are the weaknesses of your main curriculum?”

{ALL}

A18. In your center, who makes *most* of the decisions about the day-to-day instructional plans for children, such as the calendar or sequence of activities?

CODE ONLY ONE

- HEAD START PROGRAM ADMINISTRATORS.....1
- INDIVIDUAL CENTER DIRECTORS/MANAGERS.....2
- CONTENT AREA SPECIALISTS/COORDINATORS.....3
- INDIVIDUAL TEACHERS.....4
- PARENTS.....5
- SOMEONE ELSE (SPECIFY).....6

-
- DON'T KNOW.....d
 - REFUSED.....r

{IF A18 = 6}

A18Specify

“Please tell me who makes most of the decisions about instructional plan for children?”

STRING[50]

{ALL}

A19. Do you have a daily written plan for your classroom activities?

- YES.....1
- NO.....0
- DON'T KNOW.....d
- REFUSED.....r

{tYesNo}

{If A6 = 1, 2 AND A19 = 1}

A20. **How much do you use your (DISPLAY IF A7 OR A8 = d, r [main curriculum]/ ELSE[main curriculum, that is (IF A8 IS SKIPPED, USE RESPONSE FROM A7, ELSE FILL WITH A8)] in developing a daily written plan for classroom experiences? Would you say . . .**

- a great deal,.....1**
- somewhat,.....2**
- a little bit,.....3**
- hardly at all, or.....4**
- not at all?.....5**
- DON'T KNOW.....d**
- REFUSED.....r**

SPRING VERSION ONLY

These next questions are about the primary assessment tool you use in your classroom.

NOTE: USE SHOW CARD IF NEEDED

A21. SPRING VERSION ONLY

{All}

A21. What is the main child assessment tool that you use?

IF DIFFICULTY NAMING: Would you like to see a list of some assessment tools? You may be using one of these or something else.



CODE ONE ONLY

- THE CREATIVE CURRICULUM DEVELOPMENTAL CONTINUUM ASSESSMENT TOOLKIT FOR AGES 3-5....1
- HIGH/SCOPE CHILD OBSERVATION RECORD (COR)....2
- GALILEO.....3
- AGES AND STAGES QUESTIONNAIRES: A PARENT-COMPLETED, CHILD-MONITORING SYSTEM.....4
- DESIRED RESULTS DEVELOPMENTAL PROFILE (DRDP).....5
- WORK SAMPLING SYSTEM FOR HEAD START.....6
- LEARNING ACCOMPLISHMENT PROFILE SCREENING (LAP INCLUDING E-LAP, LAP-R AND LAP-D).....7
- HAWAII EARLY LEARNING PROFILE (HELP).....8
- BRIGANCE PRESCHOOL SCREEN FOR THREE AND FOUR YEAR OLD CHILDREN.....9
- ASSESSMENT DESIGNED FOR THIS PROGRAM.....10
- OTHER (SPECIFY).....12
- DO NOT USE A CHILD ASSESSMENT TOOL.....13
- DON'T KNOW.....d
- REFUSED.....r

→ GO TO A26

{IF A21 = 12}
A21Specify
STRING[50]

“Please tell me what is the main assessment tool you use.”

A22. SPRING VERSION ONLY

{If A21 = 1, 2, 3, 4, 5, 6, 7, 8, 9 10, 12}

A22. **What methods do you use for these assessments? Would you say . . .**

- ratings based on classroom observation or work sampling,.....1**
- testing with standardized tests or assessment instruments, or.....2**
- both observation-based ratings and direct assessment?.....3**
- OTHER (SPECIFY).....4**

- DON'T KNOW.....d**
- REFUSED.....r**

{IF A22 = 4}

A22Specify
STRING[150]

“Please tell what methods do you use for these assessments?”

A23. SPRING VERSION ONLY

{If A21 = 1, 2, 3, 4, 5, 6, 7, 8, 9 10, 12}

A23. **How do you use the information from those assessments in planning for each child?**

CODE ALL THAT APPLY

- TO IDENTIFY CHILD'S DEVELOPMENTAL LEVEL.....1**
- TO INDIVIDUALIZE ACTIVITIES FOR CHILD.....2**
- TO DETERMINE IF CHILD NEEDS REFERRAL FOR SPECIAL SERVICES.....3**
- TO DETERMINE CHILD'S STRENGTHS AND WEAKNESSES.....4**
- TO IDENTIFY ACTIVITIES FOR PARENTS TO DO WITH THE CHILD AT HOME.....5**
- OTHER (SPECIFY).....6**

- DON'T KNOW.....d**
- REFUSED.....r**

{IF A23 = 6}

A23Specify
STRING[150]

“Please tell me how do you use the information from those assessments in planning for each child?”

MENTORING

A26. SPRING VERSION ONLY

{All}

A26. **Next, I have a few questions about mentoring. Is there someone who mentors or coaches you in your classroom, that is someone who observes your teaching on a regular basis and provides feedback, guidance, and training?**

- YES.....1
- NO.....0
- DON'T KNOW.....d
- REFUSED.....r



{tYesNo}

A26A. SPRING VERSION ONLY

{If A26 = 1}

A26A. **Is this mentoring or coaching relationship a formal or informal one?**

PROBE: By formal we mean that a person was assigned to you or is part of program.

- FORMAL.....1
- INFORMAL.....2
- DON'T KNOW.....d
- REFUSED.....r

A27. SPRING VERSION ONLY

{If A26 = 1}

A27. **Who is the mentor or coach that usually comes to your classroom?**

CODE ONLY ONE

- ANOTHER TEACHER.....1
- EDUCATION COORDINATOR, SPECIALIST.....2
- CENTER/PROGRAM DIRECTOR.....3
- SOMEONE FROM OUTSIDE THE PROGRAM.....4
- OTHER (SPECIFY).....5
- DON'T KNOW.....d
- REFUSED.....r

{IF A27 = 5}

A27Specify

“Please tell me who is the mentor or coach that usually comes to your classroom?”

STRING[50]

A28. SPRING VERSION ONLY

{If A26 = 1}

A28. **In the past year, did your mentor or coach come for a concentrated visit that . . .**

NOTE: IF LESS THAN A DAY, CODE 0.

- lasted an entire week,.....1
- lasted an entire month or,.....2
- was the visit for a day or two at a time?.....3
- NO CONCENTRATED VISIT-LESS THAN A DAY.....0
- DON'T KNOW.....d
- REFUSED.....r

A29. SPRING VERSION ONLY

{If A26 = 1 }

A29. **How often does your mentor or coach come to your classroom? Would you say . . .**

- once a week or more,.....1
- once every two weeks,.....2
- once a month, or.....3
- less than once a month?.....4
- DON'T KNOW.....d
- REFUSED.....r

A30. SPRING VERSION ONLY

{If A26 =1}

A30. **Have you been to observe your mentor or coach in her or his classroom or gone with your mentor or coach to another classroom?**

- YES.....1
- NO.....0
- DON'T KNOW.....d
- REFUSED.....r

{tYesNo}

A31. SPRING VERSION ONLY

{All}

A31. **Have you acted as a mentor or coach for other Head Start teachers or teacher trainees?**

- YES.....1
- NO.....0
- DON'T KNOW.....d
- REFUSED.....r

{tYesNo}

A32. SPRING VERSION ONLY

{All}

A32. **Have you participated in training or Technical Assistance sessions with staff from the regional T/TA contractor (regional TA specialists, TA content specialists, or other TA contractor staff)?**

NOTE: TRAINING AND TECHNICAL ASSISTANCE (T/TA) IS PROVIDED BY REGIONAL CONTRACTORS.

YES.....1
NO.....0
DON'T KNOW.....d
REFUSED.....r

{tYesNo}

A32A through C. SPRING VERSION ONLY

{ALL}

A32A through C

0...40

During this Head Start year, how many trainings or workshops have you attended that were

	NUMBER	DON'T KNOW	REFUSED
A. less than one day?	_ _	d	r
B. one day?	_ _	d	r
C. more than one day?	_ _	d	r

IFA32A>40

[SOFT A32A] NUMBER OF LESS THAN ONE-DAY TRAININGS MAY BE TOO HIGH

I may have mistyped something. I have entered [A32A] as the number of trainings or workshops you attended this year that were less than one day long.

Is that correct?

IFA32B>40

[SOFT A32B] NUMBER OF ONE-DAY TRAININGS MAY BE TOO HIGH

I may have mistyped something. I have entered [A32B] as the number of trainings or workshops you attended this year that were one day long.

Is that correct?

IFA32C>40

[SOFT A32C] NUMBER OF MULTI-DAY TRAININGS MAY BE TOO HIGH

I may have mistyped something. I have entered [A32C] as the number of trainings or workshops you attended this year that were more than one day long.

Is that correct?

CHILDREN IN THE CLASSROOM

The next questions are about the children in your classroom.

(SECOND)

A33. SPRING VERSION ONLY

{All}

A33. **On an average day, how many children are absent from (ONE CLASS) this class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class)? Would you say . . .**

- none,.....1
- one or two,.....2
- three or four,.....3
- five or six, or.....4
- seven or more?.....5
- DON'T KNOW.....d
- REFUSED.....r

A34. SPRING VERSION ONLY

(SECOND)

{All}

A34. **About how many children are chronically absent from (ONE CLASS) this class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class)? Would you say . . .**

- none,..... 1
- one or two,..... 2
- three or four, or..... 3
- five or more?..... 4
- DON'T KNOW..... d
- REFUSED..... r

(SECOND)

{All}

A35. **At this point in the Head Start year, how would you rate the behavior of children in (ONE CLASS) this class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class) your class? Would you say . . .**

CODE ONLY ONE

- the group misbehaves very frequently and is almost always difficult to handle,..... 1**
- the group misbehaves frequently and is often difficult to handle,..... 2**
- the group misbehaves occasionally,..... 3**
- the group behaves well, or..... 4**
- the group behaves exceptionally well?..... 5**
- DON'T KNOW..... d
- REFUSED..... r

{All}

A35A. **How well does your program support teachers when they experience challenges in managing children's behavior? Would you say...**

- Not at all,..... 1**
- Not well,..... 2**
- Well, or..... 3**
- Very well?..... 4**
- NO CHALLENGES EXPERIENCED..... 0
- DON'T KNOW..... d
- REFUSED..... r

A35B. SPRING VERSION ONLY

{ALL}

{SOFT 0...20}

A35B. **During this Head Start year, for how many children did you seek advice or support to address concerns about their behavior?**

|__|__| CHILDREN

DON'T KNOW.....d

REFUSED.....r

{IF A35B>20}

[SOFT A35B] NUMBER OF CHILDREN MAY BE TOO HIGH

I may have mistyped something. I have entered [A35B] as the number of children you sought advice or support to address concerns about behavior this year.

Is that correct?

A35C. SPRING VERSION ONLY

{ALL}

A35C. **From whom is this advice or support available?**

CODE ALL THAT APPLY

OTHER TEACHERS.....1

EDUCATION COORDINATOR, SPECIALIST.....2

CENTER/PROGRAM DIRECTOR.....3

MENTAL HEALTH PROFESSIONAL.....4

OTHER (SPECIFY).....5

DON'T KNOW.....d

REFUSED.....r

{IF A35C = 5}

A35CSpecify **“Please tell me from whom is this advice or support available?”**

STRING[50]

A35D-A35G.

{ALL}

Does your program use any of the following to help teachers with children's behavior?

	YES	NO	DON'T KNOW	REFUSED
D. a social skills curriculum?.....	1	0	d	r
E. consultation for teachers from a mental health professional?.....	1	0	d	r
F. training materials from the Center for the Social and Emotional Foundations for Early Learning (CSEFEL)?.....	1	0	d	r
G. meetings with supervisor or mentor/coach for direction and guidance?.....	1	0	d	r

A36. FALL OR NEW SPRING CLASS
(SECOND)

A36. **We would like to know about equipment that is available to you. For each type I read please tell me if it is available in (ONE CLASS) your classroom/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class, in another part of the center, or not available**

NOTE: IF AVAILABLE IN BOTH CLASS AND CENTER, CODE IN CLASS.

	IN CLASS	IN CENTER	NOT AVAILABLE	DON'T KNOW	REFUSED
a. a television?.....	1	2	3	d	r
b. a computer for children to use?.	1	2	3	d	r
c. a computer for you to use?.....	1	2	3	d	r
d. a DVD or videotape player?.....	1	2	3	d	r

A38A. SPRING ONLY
(SECOND)

A38A. **Think for a moment about a typical day in your program during the last month. On a typical day, about how many minutes per day do the children in (ONE CLASS) your class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class play outside?**

NOTE: IF TEACHER REPORTS NO PLACE FOR OUTDOOR PLAY, CODE AS 0 MINUTES.

0..180

|_|_|_| MINUTES PER DAY

DON'T KNOW.....d

REFUSED.....r

[SOFT A38A] NUMBER OF MINUTES OUTSIDE MAY BE TOO HIGH

I may have mistyped something. I have entered [A38A] as the number of minutes per day the children have spent outside on a typical day during the past month.

Is that correct?

(SECOND)

SPRING VERSION ONLY

My next question is about drinks served to your class.

A40. SPRING VERSION ONLY

(SECOND)

{ALL}

A40. During the past 7 days, how many times did the children in (ONE CLASS) your class/(MORNING CLASS) your morning class/(AFTERNOON CLASS) your afternoon class drink 100% fruit juices such as orange juice, apple juice, or grape juice? Do not count punch, Sunny Delight, Kool-Aid, sports drinks, or other fruit-flavored drinks. Was it . . .



- four or more times a day,.....1
- two to three times a day,.....2
- once a day,.....3
- almost every day,.....4
- 1 to 3 times during the past 7 days, or.....5
- they did not drink these beverages?.....6
- DON'T KNOW.....d
- REFUSED.....r

A42. SPRING VERSION ONLY

{All}

A42. Now, I would like to ask you a few questions about special needs children in your class(es). What do you do when you first suspect a child might have a special need?

PROBE: Anything else?

CODE ALL THAT APPLY

- DOCUMENT CONCERN ON A SPECIAL REPORT FORM.....1
- NOTIFY YOUR PROGRAM DIRECTOR/DISABILITIES COORDINATOR/EDUCATION COORDINATOR.....2
- ARRANGE FOR A LOCAL SPECIALIST TO OBSERVE AND EVALUATE.....3
- ARRANGE A CONFERENCE WITH PARENTS

TO SHARE THE INFORMATION AND CONCERNS.....4

PARTICIPATE IN DEVELOPING AN INDIVIDUAL
EDUCATION PLAN (IEP) OR SIMILAR PLAN.....5

MONITOR AND RECORD THE CHILD'S PROGRESS
AND ACTIVITIES.....6

OTHER (SPECIFY).....7

DON'T KNOW.....d

REFUSED.....r

{IF A42 = 5}
A42Specify

“Please tell me what do you do when you suspect a child might have a special need?”

STRING[150]

A43. SPRING VERSION ONLY

{All}

A43. **When a special education specialist sees a child, what kind of feedback does the specialist provide you with?**

CODE ONLY ONE

WRITTEN REPORT DESCRIBING CHILD'S
SPECIFIC NEEDS.....1

ORAL ADVICE ONLY.....2

BOTH WRITTEN REPORTS AND ORAL ADVICE.....3

OTHER (SPECIFY).....4

DON'T KNOW.....d

REFUSED.....r

{IF A43 = 3}
A43Specify

“Please tell me what kind of feedback do you receive from the education specialist when she sees a child?”

STRING[100]

A44. SPRING VERSION ONLY

{All}

A44. **How often do you meet with the parents to discuss the progress or status of a child *with* special needs?**

CODE ONLY ONE

NEVER.....0

NO CHILDREN WITH SPECIAL NEEDS IN CLASS.....1

ONCE EVERY 6 MONTHS OR MORE.....2

ONCE EVERY 2 TO 6 MONTHS.....3

ONCE A MONTH.....4
 MORE THAN ONCE A MONTH.....5
 DON'T KNOW.....d
 REFUSED.....r

A44A. SPRING VERSION ONLY

{All}

A44A. **How often do you meet with the parents to discuss the progress or status of a child *without* special needs?**

CODE ONLY ONE

NEVER.....0
 ONCE EVERY 6 MONTHS OR MORE.....1
 ONCE EVERY 2 TO 6 MONTHS.....2
 ONCE A MONTH.....3
 MORE THAN ONCE A MONTH.....4
 DON'T KNOW.....d
 REFUSED.....r

{ALL}

A46. **How do you communicate with families who speak a language other than you speak? Do you . . .**

	CODE ONE PER ROW			
	YES	NO	DON'T KNOW	REFUSED
a. communicate only in English?	1	0	d	r
b. use an informal interpreter?	1	0	d	r
c. use physical cues or hand gestures?	1	0	d	r
d. use translated materials?	1	0	d	r
e. use any other ways? (SPECIFY)	1	0	d	r
-				

{IF A46e = 1}

A46eSpecify **“Please tell me any of other ways you communicate with families who speak a language other than you speak?”**

STRING[100]

B. TEACHER EXPERIENCES

Now, let's talk about your experiences as a teacher.

B2. SPRING VERSION ONLY

{All}

B2. **On average, how many times this school year did you conduct a home visit to a family?**

0..12

|__|__| NUMBER OF VISITS

DON'T KNOW.....d

REFUSED.....r

IFB2 > 4

[SOFT B2] NUMBER OF HOME VISITS CONDUCTED PER FAMILY MAY BE TOO HIGH

I may have mistyped something. I have entered [B2] as the number of home visits you conduct to a family in a school year.

Is that correct?

{All}

B3. Please tell me how much you agree with each of the following statements about teaching. Tell me whether you strongly disagree, disagree, neither agree nor disagree, agree, or strongly agree.



	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE	DON'T KNOW	REFUSED
(USE RESPONSE CARD)							
a. I really enjoy my present teaching job.....	1	2	3	4	5	d	r
b. I am certain I am making a difference in the lives of the children I teach.....	1	2	3	4	5	d	r
c. If I could start over, I would choose teaching again as my career.....	1	2	3	4	5	d	r

B4. SPRING VERSION ONLY

{All}

B4. The next questions are about the policies and procedures in your program. Remember, all your responses are confidential. Now, please tell me the extent to which you agree with each of the following statements. Tell me whether you strongly disagree, disagree, neither agree nor disagree, agree, or strongly agree. For this question, “teachers” refers to both teachers and teacher assistants.

Your Head Start Program . . .



	STRONGLY DISAGREE	DISAGRE E	NEITHER AGREE NOR DISAGREE	AGREE	STRONGL Y AGREE	DON'T KNOW	REFUSE D
a. helps teachers feel good about their jobs?.....	1	2	3	4	5	d	r
b. promotes teamwork among teachers?.....	1	2	3	4	5	d	r
c. helps teachers feel that they are part of a team?.....	1	2	3	4	5	d	r
d. ensures that teachers do not feel isolated?.....	1	2	3	4	5	d	r
e. provides enough assistance to teachers in the classroom?.....	1	2	3	4	5	d	r
f. provides orientation to new teachers?.....	1	2	3	4	5	d	r
g. helps new teachers adjust to the classroom?....	1	2	3	4	5	d	r
h. knows what teachers deal with in the classroom?.....	1	2	3	4	5	d	r
i. has timely delivery of materials for use in classrooms?.....	1	2	3	4	5	d	r
j. provides opportunities for teachers to identify their strengths and weakness?.....	1	2	3	4	5	d	r
k. provides an atmosphere that is free from destructive gossip?.....	1	2	3	4	5	d	r
l. provides freedom for teachers to create their own unique classrooms?...	1	2	3	4	5	d	r
m. has clear guidelines for ordering classroom materials efficiently.....	1	2	3	4	5	d	r

B4n through q SPRING VERSION ONLY

{ALL}

B4. The next questions are about the level of support for interactions between Head Start staff and parents. Please tell me the extent to which you agree with each of the following statements. Tell me whether you strongly disagree, disagree, neither agree nor disagree, agree, or strongly agree.

Your Head Start Program .



STRONGLY DISAGREE	DISAGRE E	NEITHER AGREE NOR DISAGREE	AGREE	STRONGL Y AGREE	DON'T KNOW	REFUSE D
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n. promotes cooperation between Head Start staff and parents?.....	1	2	3	4	5	d	r
o. ensures that parents do not feel isolated?.....	1	2	3	4	5	d	r
p. encourages parents to supplement classroom learning at home?.....	1	2	3	4	5	d	r
q. supports staff in their efforts to engage parents?.....	1	2	3	4	5	d	r

{All}

B5. How likely are you to continue working for Head Start through the next Head Start year (through 2008-2009)? Would you say you are . . .

- very likely,.....1
- somewhat likely,.....2
- somewhat unlikely, or.....3
- very unlikely?.....4
- DON'T KNOW.....d
- REFUSED.....r

VERSION BOX B6
 IF FALL, GO TO B6.
 IF SPRING, RESPONDENT IS NEW TO THE STUDY (S1=0,d,r OR S1c = 1),
 ASK B6, OTHERWISE GO TO VERSION BOX B7.

B6. I'm going to read some statements that some teachers have made about how children in Head Start should be taught and managed. Remember all your responses are confidential. Please tell me whether each statement agrees or disagrees with your personal beliefs about good teaching practice in Head Start.

(READ ITEM) Do you strongly disagree, disagree, neither agree nor disagree, agree, or strongly agree with that statement?



	STRONGLY DISAGREE	DISAGRE E	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE	DON'T KNOW	REFUSE D
a. Head Start classroom activities should be responsive to individual differences in development.....	1	2	3	4	5	d	r
b. Each curriculum area should be taught as a separate subject at separate times.....	1	2	3	4	5	d	r
c. Children should be allowed to select many of their own activities from a variety of learning areas that the teacher has prepared (writing, science center, etc.).....	1	2	3	4	5	d	r
d. Children should be allowed to cut their own shapes, perform their own steps in an experiment, and plan their own creative drama, art, and writing activities...	1	2	3	4	5	d	r
e. Children should work silently and alone on seatwork.....	1	2	3	4	5	d	r
f. Children in Head Start classrooms should learn through active explorations.....	1	2	3	4	5	d	r
g. Head Start teachers should use treats, stickers, or stars to encourage appropriate behavior.....	1	2	3	4	5	d	r

STRONGLY DISAGREE	DISAGRE E	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE	DON'T KNOW	REFUSE D
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hA3. (continued)

Head Start teachers should use punishments or reprimands to encourage appropriate behavior.....

1 2 3 4 5 d r

i. Children should be involved in establishing rules for the classroom.....

1 2 3 4 5 d r

j. Children should be instructed in recognizing the single letters of the alphabet, isolated from words.....

1 2 3 4 5 d r

k. Children should learn to color within predefined lines.....

1 2 3 4 5 d r

B6. (continued) Children in Head Start classrooms should learn to form letters correctly on a printed page.....

1 2 3 4 5 d r

m. Children should dictate stories to the teacher.....

1 2 3 4 5 d r

n. Children should know their letter sounds before they learn to read.....

1 2 3 4 5 d r

o. Children should form letters correctly before they are allowed to create a story.....

1 2 3 4 5 d r

VERSION BOX B7
 IF FALL, GO TO C1.
 IF SPRING, RESPONDENT IS NEW TO THE STUDY (S1=0,d,r OR S1c = 1), GO TO
 C1, OTHERWISE ASK B7.

B7. SPRING VERSION ONLY
 {S1=1 or S1c=0,d,r}

B7. **Since our interview with you last year, have you received a degree, certificate, or license?**

- YES.....1
 - NO.....0
 - DON'T KNOW.....d
 - REFUSED.....r
- } → GO TO C1

{tYesNo}

B8. SPRING VERSION ONLY
 {If B7 = 1}

B8. **What type of degree, certificate, or license did you receive?**

CODE ONLY ONE

- CHILD DEVELOPMENT ASSOCIATE (CDA)
 DEGREE PROGRAM.....1
 - TEACHING CERTIFICATE.....2
 - SPECIAL EDUCATION TEACHING DEGREE.....3
 - BACHELOR'S DEGREE.....4
 - GRADUATE DEGREE (MASTER'S, PH.D., OR ED.D.).....5
 - OTHER (SPECIFY).....6
-
- ASSOCIATE'S DEGREE 7
 - DON'T KNOW.....d
 - REFUSED.....r

{IF B8 = 6}
 B8Specify
 STRING[50]

“Please tell me what type of degree, certificate, or license did you receive?”

C. YOUR FEELINGS

The next questions are about how you have felt about yourself and your life in the past week. There are no right or wrong answers.

C1. I am going to read a list of ways you may have felt or behaved. Please tell me how often you have felt this way during the *past week*.

During the past week you have felt (READ ITEM). Have you felt this way: rarely or never, some or a little, occasionally or a moderate amount of time, or most or all of the time? . . .

SHOW
CARD

	RARELY OR NEVER	SOME OR A LITTLE	OCCASIONALLY OR MODERATELY	MOST OR ALL OF THE TIME	DON'T KNOW	REFUSED
a. bothered by things that usually don't bother you?.....	1	2	3	4	d	r
b. you did not feel like eating, your appetite was poor?.....	1	2	3	4	d	r
c. that you could not shake off the blues, even with help from your family and friends?	1	2	3	4	d	r
d. you had trouble keeping your mind on what you were doing?.....	1	2	3	4	d	r
e. depressed?.....	1	2	3	4	d	r
f. that everything you did was an effort?.....	1	2	3	4	d	r
g. fearful?.....	1	2	3	4	d	r
h. your sleep was restless?.....	1	2	3	4	d	r
i. you talked less than usual?....	1	2	3	4	d	r
j. lonely?.....	1	2	3	4	d	r
k. sad?.....	1	2	3	4	d	r
l. you could not get "going"?....	1	2	3	4	d	r

VERSION BOX D

IF FALL, CONTINUE TO D1.

IF SPRING RESPONDENT IS NEW TO THE STUDY (S1=0,d,r OR S1c = 1),
CONTINUE TO D1, OTHERWISE GO TO D24.

D. BACKGROUND INFORMATION

Finally, I'd like to ask some questions about you.

D1. In total, how many years have you been teaching (including all grades and preschool)?

0..50

|__|__| NUMBER OF YEARS

DON'T KNOW.....d

REFUSED.....r

{IFD1 > 50}

[SOFT D1] NUMBER OF YEARS TEACHING MAY BE TOO HIGH

I may have mistyped something. I have entered [D1] as the number of years you have been teaching all grades.

Is that correct?

D2. How many of those years have you been teaching Head Start or Early Head Start (as either lead or assistant teacher)?

0..30

|__|__| NUMBER OF YEARS

DON'T KNOW.....d

REFUSED.....r

{IFD2 > 30}

[SOFT D2] NUMBER OF YEARS TEACHING HEAD START MAY BE TO HIGH

I may have mistyped something. I have entered [D2] as the number of years you have been teaching Head Start.

Is that correct?

D2A. In what month and year did you start working for this Head Start program?

|_|_| MONTH |_|_|_|_| YEAR

DON'T KNOW.....d

REFUSED.....r

{Month 1-12}

{Year 1965-2009}

D3. Do you have any children living in your household who attend Head Start now?

YES.....1

NO.....0

DON'T KNOW.....d

REFUSED.....r

{tYesNo}

{IF D3=0,d,r}

D4. Did any child who lived in your household in the past attend Head Start?

YES.....1

NO.....0

DON'T KNOW.....d

REFUSED.....r

{tYesNo}

D5. What is the highest grade or year of school that you completed?

CODE ONE ONLY

UP TO 8TH GRADE.....	1	}	→	GO TO D11
9TH TO 11TH GRADE.....	2			
12TH GRADE BUT NO DIPLOMA.....	3			
HIGH SCHOOL DIPLOMA/EQUIVALENT.....	4			
VOC/TECH PROGRAM AFTER HIGH SCHOOL BUT NO VOC/TECH DIPLOMA.....	5			
VOC/TECH DIPLOMA AFTER HIGH SCHOOL.....	6			
SOME COLLEGE BUT NO DEGREE.....	7	→	GO TO D7	
ASSOCIATE'S DEGREE.....	8	}	→	GO TO D6
BACHELOR'S DEGREE.....	9			
GRADUATE OR PROFESSIONAL SCHOOL BUT NO DEGREE.....	10			
MASTER'S DEGREE (MA, MS).....	11			
DOCTORATE DEGREE (PH.D., ED.D.).....	12			
PROFESSIONAL DEGREE AFTER BACHELOR'S DEGREE (MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.).....	13			
DON'T KNOW.....	d	}	→	GO TO D11
REFUSED.....	r			

GO TO

C11

{IF D5 = 8, 9, 10, 11, 12, 13}

D6. In what field did you obtain your highest degree?

CHILD DEVELOPMENT OR DEVELOPMENTAL PSYCHOLOGY.....	1
EARLY CHILDHOOD EDUCATION.....	2
ELEMENTARY EDUCATION.....	3
SPECIAL EDUCATION.....	4
BILINGUAL EDUCATION.....	6
PSYCHOLOGY (OTHER THAN DEVELOPMENTAL, "1")...7	7
OTHER FIELD (SPECIFY).....	5
<hr/>	
DON'T KNOW.....	d
REFUSED.....	r

{IF D6 = 5}
D6Specify
STRING[50]

"Please tell me in what field did you obtain your highest degree?"

D7. **Did your schooling include 6 or more college courses in early childhood education or child development?**

YES.....1 → GO TO D9
NO.....0
DON'T KNOW.....d
REFUSED.....r

{tYesNo}

{If D7 = 0, d, r}

D8. **Have you completed 6 or more college courses in early childhood education or child development since you finished your degree?**

YES.....1
NO.....0
DON'T KNOW.....d
REFUSED.....r

{tYesNo}

{IF D5 = 7, 8, 9, 10, 11, 12, 13}

D8A. **Have you completed an entire course on dual language learner children?**

PROBE: Dual language learners are children learning two (or more) languages at the same time, as well as those learning a second language while continuing to develop their first (or home) language. These children are also often referred to as Limited English Proficient (LEP), bilingual, English language learners (ELL), English learners, and children who speak a language other than English (LOTE).

YES.....1
NO.....0
DON'T KNOW.....d
REFUSED.....r

{tYesNo}

CHECK BOX: DID RESPONDENT ATTEND COLLEGE (D5 EQUALS 7, 8, 9, 10, 11, 12, 13)?

YES.....1 → ASK D9
NO.....0 → GO TO D11

{If D5 = 7, 8, 9, 10, 11, 12, 13}

D9. **What is the name of the college or university (you attended/where you completed your highest degree)?**

INTERVIEWER NOTE: IF THE NAME OF THE COLLEGE IS NOT LISTED, ENTER "OTHER" HERE.

NAME OF COLLEGE/UNIVERSITY
DON'T KNOW.....d
REFUSED.....r

{IF D9 = "OTHER"}

D9Specify "PLEASE SPECIFY THE NAME OF THE COLLEGE OR UNIVERSITY"
STRING[50]

{If D5 = 7, 8, 9, 10, 11, 12, 13}

D10. **In what city and state is the college or university located?**

CITY:_____
STATE:_____
DON'T KNOW.....d
REFUSED.....r

USE GET ADDRESS TO OBTAIN AN ADDRESS

{All}

D11. **Do you have a Child Development Associate (CDA) credential?**

YES.....1
NO.....0
DON'T KNOW.....d
REFUSED.....r

{tYesNo}

{ALL}

D12. **Do you have a state-awarded preschool certificate?**

YES.....1
NO.....0
DON'T KNOW.....d
REFUSED.....r

{tYesNo}

{ALL}

D13. **Do you have a teaching certificate or license?**

- YES.....1
- NO.....0
- DON'T KNOW.....d
- REFUSED.....r

{tYesNo}

{ALL}

D14. **Including post-secondary school degrees, graduate degrees, etc., are you currently enrolled in any additional teacher-related training or education?**

- YES.....1
- NO.....0
- DON'T KNOW.....d
- REFUSED.....r



{D14=1}

D15. **What kind of training or education program are you enrolled in?**

CODE ONE ONLY

- CHILD DEVELOPMENT ASSOCIATE (CDA) DEGREE PROGRAM.....1
- TEACHING CERTIFICATE PROGRAM.....2
- SPECIAL EDUCATION TEACHING DEGREE PROGRAM.....3
- BACHELOR'S DEGREE PROGRAM.....4
- GRADUATE DEGREE PROGRAM (MASTER'S OR PH.D. OR ED.D.).....5
- OTHER (SPECIFY).....6
-
- ASSOCIATE'S DEGREE PROGRAM.....7
- DON'T KNOW.....d
- REFUSED.....r

{If D15 = 5}

D15Specify

“Please tell me what kind of training or education program you are enrolled in?”

STRING[50]

{ALL}

D16. Which of the following benefits are available to you through Head Start?

	YES	NO	DON'T KNOW	REFUSED
a. Paid vacation time?.....	1	0	d	r
b. Paid sick leave?.....	1	0	d	r
c. Paid (maternity/paternity) leave?.....	1	0	d	r
d. Unpaid (maternity/paternity) leave?.....	1	0	d	r
e. Paid family leave?.....	1	0	d	r
f. Fully or partially paid health insurance?.....	1	0	d	r
g. Fully or partially paid dental insurance?.....	1	0	d	r
h. Tuition reimbursement?.....	1	0	d	r
i. Retirement plan?.....	1	0	d	r

{ALL}

D17. What is your total annual salary (before taxes) as a teacher for the current school year?

{tDollar {(0-999999)}}

\$ |__|__|__|,|__|__|__| PER YEAR

DON'T KNOW.....d

REFUSED.....r

{ALL}

D18. How many hours per week does this salary cover (not including overtime)?

0..40

|__|__| HOURS AND |__|__| MINUTES PER WEEK

DON'T KNOW.....d

REFUSED.....r

{If D18 > 40}

SOFT D18] HOURS PER WEEK SALARY COVERS MAY BE TO HIGH

I may have mistyped something. I have entered [D18] as the number of hour per week your salary covers.

Is that correct?

{ALL}

D19. CODE GENDER OF RESPONDENT WITHOUT ASKING

- MALE.....1
- FEMALE.....2

{ALL}

D20. In what year were you born?

23..91

19 |__|__| YEAR

- DON'T KNOW.....d
- REFUSED.....r

{If D20 < 23 OR > 91}

[SOFT D20] YEAR BORN MAY BE TOO LOW OR TOO HIGH

I may have mistyped something. I have entered [D20] as the year you were born.

Is that correct?

{ALL}

D21. Are you of Spanish, Hispanic, or Latino origin?

- YES.....1
- NO.....0
- DON'T KNOW.....d
- REFUSED.....r

→ GO TO D23
GO TO

{tYesNo}

C11

{IF D21 = 1}

D22. Which one of these best describes you . . .

- Mexican, Mexican American, Chicano,.....1
- Puerto Rican,.....2
- Cuban, or.....3
- another Spanish/Hispanic/Latino group? (SPECIFY)....4
- _____
- DON'T KNOW.....d
- REFUSED.....r

{ALL}

D23. What is your race? You may name more than one if you like.

CODE ALL THAT
ARE MENTIONED

WHITE.....	11
BLACK OR AFRICAN AMERICAN.....	12
AMERICAN INDIAN OR ALASKA NATIVE (SPECIFY).....	13
<hr/>	
ASIAN INDIAN.....	14
CHINESE.....	15
FILIPINO.....	16
JAPANESE.....	17
KOREAN.....	18
VIETNAMESE.....	19
ASIAN (NOT FURTHER SPECIFIED).....	20
NATIVE HAWAIIAN.....	21
GUAMANIAN OR CHAMORRO.....	22
SAMOAN.....	23
OTHER PACIFIC ISLANDER (SPECIFY).....	24
<hr/>	
ANOTHER RACE.....	25
DON'T KNOW.....	d
REFUSED.....	r

{IF D23 = 13, 24, 25}

D23Specify "Please tell me what is your race?"
STRING[50]

{ALL}

D24. **Finally, what two things do you think your class does really well for children and their families? ASK TO CHOOSE ONLY TWO.**

1. _____

2. _____

DON'T KNOW.....d

REFUSED.....r

D25. SPRING VERSION ONLY

{ALL}

D25. **If you could change one thing (including staff, administration, classroom practices, and facilities) that you think would significantly improve the services you are providing, what would it be?**

DON'T KNOW.....d

REFUSED.....r

Those are all the questions I have. Thank you for your participation!

TRANSITION: **Now I want to ask some questions about your second class, that is the [FILL SECOND CLASSROOM] classroom.**

PROBE: **I will ask a smaller number of questions about the second class.**

PROGRAMMER: REPEAT QUESTIONS WITH UNIVERSE STATEMENT {SECOND} IF TEACHER HAS A SECOND CLASS.

Thank you for your participation!