Form Approved

OMB No.: 0920-XXXX Exp. Date:

A POST-IMPLEMENTATION SURVEY FOR PARENTS "LEARN THE SIGNS. ACT EARLY."

Public reporting burden of this collection of information is estimated to average 10 minutes including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-XXXX).

<u>Post-implementation Parent Survey</u>

put	Thank you for agreeing to complete this survey. Your answers are anonymous. Please do not put your name anywhere on the survey. Completing this survey is completely voluntary. You may skip any question that you do not feel comfortable answering.						
1.	How many children 5 years old or younger do you have?						
2.	As of today, how old is your youngest child?						

Dear Parent,

2.	As	of today, how old is your youngest child?					
3.	Dio	d you attend [insert "Learn the Signs. Act Early." Event] on [date] at [location]?					
4.	На	ve you heard of the "Learn the Signs. Act Early." campaign?					
	□ Y	es No (If your answer is No, please go directly to Question 7)					
5. The "Learn the Signs. Act Early" campaign is about which one of the following to [select only one]							
		Breast Cancer					
		Child Development					
		Stroke					
		HIV/AIDS					
		Type II Diabetes					
		Autism					

6. Where did you see/hear about the "Learn the Signs. Act Early." campaign? [select all that apply]

	TV
	Radio
	Internet/Online
	Doctor's Office
	My Child's Teacher or Child care Provider
	Family Member/Friend
	[Insert relevant event/program, e.g., WIC office, library, community center, health fair]
	Magazine
	Newspaper
	Advertising
	I don't remember
	Other (Please specify)
7.	Have you seen or heard anything recently about developmental milestones (things to look for in your child to tell if he is on track for his age?)
	Yes No (If No, please go directly to Question 9)
8.	Where did you see/hear about developmental milestones (things to look for in your child to tell if he is on track for his age?) [select all that apply]
	TV
	Radio
	Internet/Online
	Doctor's Office
	My Child's Teacher or Child care Provider
	. I, sima si susiner et ermu eure i reviue.
	Family Member/Friend

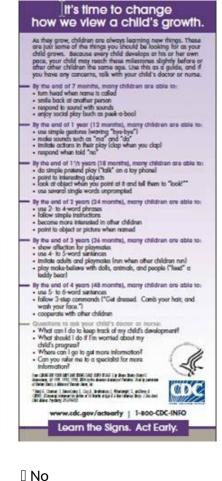
- Magazine
- Newspaper
- Advertising
- I don't remember
- Other (Please specify_____)

9. Have you seen any of these materials in your community?





☐ Yes ☐ No ☐ Yes ☐ No





 Yes

 No

 Yes

 No

10. If you recall seeing any of the materials shown above, do you remember reading the information on the material? [select only one]

☐ Yes, I read the information ☐ No, I did not read the information

 $\ensuremath{\mathbb{I}}$ I have not seen any of the materials shown above.

11. How old are you?

Under 21 years old

21 - 34

35 - 45

☐ 46 or older

12. Do you identify yourself as Hispanic or Latino?

	Yes, Hispanic or Latino					
	No, Not Hispanic or Latino					
13.	Which of these groups would you say best represents your race? (Please select all that					
	apply)					
	American Indian or Alaska Native					
	Asian					
	Black or African American					
	Native Hawaiian or other Pacific Islander					
	White					
14.	What is the highest level of education you have <u>completed</u> ?					
	Less than high school, no diploma					
	High school diploma or GED					
	Associate degree or some college (for example: AA, AS)					
	Bachelor's degree or more (for example: BA, BS, MPH, PhD)					
15.	What is your annual household income before taxes?					
	Less than \$15,080					
	<pre>\$15,081 - \$20,080</pre>					
	<pre>\$20,081 - \$31,200</pre>					
	<pre>\$31,201 - \$41,600</pre>					
	\$41,601 and above					
	Unemployed					
(Questions 16-20) If you became concerned about your child's development (how your child plays, learns, speaks, or acts), how likely would you be to do each of the following? (Circle one number for each statement)						
16. Wait for a few (1–3) months to see if your concerns are resolved.						
	Not at all likely 1 2 3 4 Extremely likely					

17. Wait for 6 months or more to see if your concerns are resolved.										
	Not at all likely	, 1	2	3	4	Extremely likely				
18. Talk with your child's doctor about your concerns as soon as possible.										
	Not at all likely	, 1	2	3	4	Extremely likely				
19.	19. Talk with your child's teacher or child care provider as soon as possible.									
	Not at all likely	, 1	2	3	4	Extremely likely				
	Not applicable (if your child does NOT have a teacher or child care provider)									
20. Contact your local intervention program, school, or another local organization as soon as possible.										
	Not at all likely	1	2	3	4	Extremely likely				
21. If you became concerned about your child's development (how your child plays, learns, speaks, or acts), when would you contact your child's doctor to discuss your concern? [select only one]										
	I would not co	ntact my chi	ld's do	ctor abo	ut thes	e concerns.				
	I would continue to watch my child's development for a few months before contacting my child's doctor.									
	I would discuss	s my concerr	n at my	child's r	next re	gularly scheduled doctor appointment.				
	I would make a special appointment to talk with my child's doctor if my child's next regularly scheduled appointment was more than a month away.									
22. Have you looked somewhere (for example, in a book, at a fact sheet, or on a website) to make sure your child's development (how your child plays, learns, speaks, and acts) is on track for his or her age?										
	Yes									
	□ No									
23. Do you talk to your child's doctor or nurse about your child's development (how your										
child plays, learns, speaks, and acts)? (Circle one number)										
	Strongly disagre	ee	1	2	3	4 Strongly Agree				

Thank you for your time!