

INFORMATION COLLECTION ACTIVITY #2

INSTRUMENT #2

**Child Support Noncustodial Parent
Employment Demonstration (CSPED)**

**Noncustodial Parent Focus Group
Protocol and Consent Form**

Spring 2014

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 number. The valid OMB control number of this information collection is XX-XX. This OMB number will expire on XXX. The time required to complete this information collection is estimated to average XX minutes per focus group. If you have any comments concerning the accuracy of the time estimates(s) or suggestion for improving this form, please write to: U.S. Department of Health and Human Services, Washington, D.C. 20201. If you have comments or concerns regarding the status of your individual submission of this form, write directly to:

Office of Child Support Enforcement, Administration for Children and Families, U.S. Department of Health and Human Services, 370 L'Enfant Promenade, S.W., Washington, D.C. 20447.



**INSTITUTE *for*
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UNIVERSITY OF WISCONSIN-MADISON

MATHEMATICA
Policy Research, Inc.

Child Support Noncustodial Parent Employment Demonstration (CSPED)

Site:	Interviewer:
Location:	Date/Time:
Interviewee(s):	

Note to interviewer: It is important that the group be comfortable and that they be fully aware of the purpose of the discussion and how the focus group will proceed. Time is limited, so be sure to allocate time accordingly. Strive for an informal atmosphere, and encourage broad participation to the extent possible. Pass out paper and markers to make name tag tents. Then go around the room so everyone can say their first name.

Focus Group: CSPED Noncustodial Parent Participants

Introduction

Thank you for speaking with us today. My name is [your name] and I am here with [other site visitor]. We are part of an independent research team contracted by the Office of Child Support Enforcement to study the employment program in which you are a participant. The study is taking place in 8 states throughout the country, and the purpose is to understand whether the program helps noncustodial parents with work, child support, and their relationships with their children.

To help us better understand how your program is helping families and how it can be improved, we would like to ask you some questions about your experiences and the services you are receiving through the program. This discussion will be kept strictly confidential and the information we collect from you will be used for research purposes only. **We will not provide information that identifies you to anyone outside the study team, except as required by law.** We will NOT report results in any way that would permit them to be identified with you or any other specific individual. We also will not share what this group discusses with staff in the program. Also, you should know that your participation is voluntary, and you do not have to respond to any questions you do not want to. Please let us know at any time if you would prefer not to participate.

Would it be all right if we record our discussion for note-taking purposes? No one outside the research team will hear the recording. If at any point anyone would like me to turn the recorder off, just let me know.

I hope you will feel free to be open and frank in our discussion. Please do not share what you hear with others outside the group. It will also help me if you speak clearly and if you speak one at a time. The discussion should last about one hour. Do any of you have any questions before we begin?

Let's get started. [HIT THE RECORD BUTTON]. I have hit the record button. Everyone in the room has consented to being taped. Let's begin by going around the room and doing introductions.

INTRODUCTIONS

1. Please tell me your first name, how long you have been in the program, and whether you are currently employed or unemployed.

MOTIVATION FOR ENROLLING IN PROGRAM

2. How did you find out about this program, and what made you decide to enroll? Did you have any hesitations? What did you expect or hope to get out of your time in the program?

Probe if not mentioned:

- a. Were you already receiving services through the child support office or a partner in the program?
 - b. Were you offered any incentives to enroll?
 - c. How did you feel about being a part of a program offered by the office of child support enforcement?
3. Before being invited to this program, did you receive any of the same types of services in the past, such as job placement services, support in paying child support, or fatherhood and parenting education classes?

Probe if not mentioned:

- a. Who provided these services to you in the past, and which services?
- b. Why did you participate in those services?
- c. Did you feel those services were useful to you?

CASE MANAGEMENT SERVICES

4. Can you tell me about your interaction with your case manager or managers? How would you describe your relationship with them? How satisfied are you with the amount and types of support they offer you?

Probe if not mentioned:

- a. How many case managers do you have, and where do you go to meet them?
 - b. How often do you see or communicate with your case managers?
 - c. Do you usually request to see them or do they reach out to you more often?
 - d. Do you have any challenges in getting help from them?
5. What types of support do your case managers provide to you, particularly your primary case manager if you have one? Which types do you find useful, and which are not useful? Are there other types of support you wish they provided?
 6. Do you feel more knowledgeable about the child support system and your obligations since enrolling in the program?

ENHANCED CHILD SUPPORT SERVICES

7. I believe you have received some exemptions or accommodations through the program to help you fulfill your child support obligations. Can you describe what help you have received, such as *a reduction of the amount of child support you have to pay, forgiveness for some of the child support you already owed, or protection from punitive measures [PERSONALIZE FOR SITE AS NEEDED]*?

Probe if not mentioned:

- a. How many times or how often did you have to meet with your case manager or a child support staff person in order to get this help and work out the details?
 - b. Did you encounter any challenges in the process of receiving these services?
8. Did you find this help useful and were you satisfied with the level of support you received? Did anyone at the child support office offer you help with regards to your child support payments that you didn't find very useful?

Probe if not mentioned:

- a. Did the opportunity to receive any of this support motivate you to participate in the employment program?
 - b. Are there other types of help in paying child support you wish the program would provide to clients like you?
9. What are your impressions of the staff in your child support office? Have these impressions changed since you started participating in the program? How? Why do you think the office of child support is offering this employment program?

FATHERHOOD AND PARENTING EDUCATION

10. How often do you participate in classes on fatherhood or parenting skills offered through this program? Where are your classes held?

Probe if not mentioned:

- a. Do you have any problems attending class on a regular basis?
 - b. Have you participated in this type of class before?
 - c. Did your program provide you with transportation or any other support to help you attend the classes?
11. What do you enjoy about the parenting class? Do you feel like you are learning skills that you can apply in your relationship with your children or with others? What kinds of skills?

Probe if not mentioned:

- a. Have you noticed changes in your relationship with your children or in how you act as a parent since you started taking these classes?
- b. Have the classes changes how you see yourself as a parent?
- c. How do you feel about the peer support group format?

12. Are there topics that you would like to discuss that aren't addressed in the class? Are there parts of the curriculum or class activities that you don't find helpful?

Probe if not mentioned:

- a. Do you feel that the classes adequately address the topic of domestic violence?

13. What is your impression of the instructor or facilitator for your class? Do you feel that they understand or are aware of the challenges you face in being a good parent?

Probe if not mentioned:

- a. Are they knowledgeable about the topics covered in the curriculum?
b. Are they good at answering questions and providing feedback?

EMPLOYMENT SERVICES

14. I would like to hear about the types of services you received through this program that are intended to help you find or keep a job. What has been helpful to you so far, and what has not been very effective?

Probe if not mentioned:

- a. Did the program provide you with any material or financial benefits to help you find or keep a job, such as bus passes, gas cards, work clothes, etc.?
b. Have you faced any difficulties in taking advantage of the services the program offers?

15. How has the program affected your job search or your career in general? Have you learned knowledge or skills that will be useful to you in the future? Has the program improved your ability to pay child support?

Probe if not mentioned:

- a. If you are employed, did you find your job through the program?
b. Did the program help you keep your job or get a better job since you started participating? How?

16. What is your impression of the staff that provided this employment support to you? Were they helpful, knowledgeable, and accessible when you needed support?

Probe if not mentioned:

- a. How often do you see or communicate with employment staff?
b. Were you satisfied with the information they were able to share with you?
c. Are there other services or information you would have liked to receive from them?

OVERALL IMPRESSIONS

17. How has your opinion about child support and its importance for children changed since you started participating in the program? Do you feel less hesitant about cooperating with child support staff because of your interaction with them and the program?

Probe if not mentioned:

- a. Would you be more willing to pay child support because of what you have learned through the program or because of what the program has offered you? Why?
18. Would you recommend this program to other parents paying child support? Is there anything that you can suggest to improve the program?
19. (IF TIME ALLOWS) Is there anything else you would like to share or comment on that we haven't discussed yet?

Thanks again for your time. We very much appreciate your participation in this important study.

**Child Support Noncustodial Parent Employment Demonstration (CSPED)
Informed Consent: Focus group**

Purpose

The Administration for Children and Families (ACF) of the U.S. Department of Health and Human Services (DHHS) requests clearance for the data collection for the evaluation of the Child Support Noncustodial Parent Employment Demonstration (CSPED). The purpose of the study is to document the intervention approaches and strategies implemented by states receiving funding from the Office of Child Support Enforcement, and to understand if these interventions help noncustodial parents with work, child support, and their relationships with their children. To this end, the evaluation will employ multiple data collection strategies.

To assist with the evaluation, we are asking noncustodial parents receiving services from the state to participate in focus groups. You will be asked about topics related to why you entered the program, what types of services you received, how the program is benefiting you, and your satisfaction with the program. The focus groups are designed to last no more than one hour.

Risks and Discomfort

There are few anticipated or known risks in participating in this study. Risks may include possibly feeling coerced to take part in the focus groups; however, you should know that your participation in this study is entirely voluntary. You will not be penalized in any way for not participating. If you decide to participate, you may discontinue your participation at any time without penalty or loss of benefits to which you are otherwise entitled.

Benefits

Your participation in the evaluation will contribute to an understanding of how this program was implemented and the potential for programs of this type to benefit noncustodial parents and children.

Freedom to Withdraw

Your participation in this research study is completely voluntary. You may pass on any question that is asked and you may withdraw from the study at any time.

Privacy

The University of Wisconsin-Madison and its subcontractors follow the confidentiality and data protection requirements of DHHS (Reform Act of 20XX, Title X, Part X, Section XXX). **Responses to this data collection will be used only for research purposes.** The reports prepared for the study will summarize findings across the sample and will not associate responses with a specific individual. We will not provide information that identifies you to anyone outside the study team, except as required by law.

More Information

If you would like more information about this study, you may contact the Principal Investigators, Maria Cancian or Dan Meyer, at the University of Wisconsin-Madison at [phone] or [email]. For questions regarding your rights as a subject participating in this research, please contact the Education Research and Social & Behavioral Science IRB Office at [email] or toll free at [phone].

Informed Consent

I have read the above information. I have asked questions and received answers. I consent to participate in the study.

Signature: _____

Date: _____

Print Name: _____

State: _____