OMB Control No.: xxxx- xxxx

Expiration Date: xx/xx/xxxx

**Respondent ID #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| HEALTHY MARRIAGE/  RESPONSIBLE FATHERHOOD PROGRAM  **PROGRAM OPERATIONS**  PRIVACY  Thank you for helping with this important study. This survey includes questions about your Healthy Marriage or Responsible Fatherhood Program. We want you to know that:  1. Your participation in this survey is voluntary.  2. We hope that you will answer all the questions, but you may skip any questions you do not wish to answer.   1. The answers you give will be kept private to the extent permitted by law. |

|  |
| --- |
| THE PAPERWORK REDUCTION ACT OF 1995  Public reporting burden for this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, 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. The information requested in this survey will be used to document how programs receiving HMRF grant funding operate and describe participant outcomes. The data gathered will allow ACF to better monitor grantee progress and performance. In accordance with the requirements of the Privacy Act of 1974, as amended ([5 U.S.C. 552a](http://www.gpo.gov/fdsys/pkg/USCODE-2013-title5/html/USCODE-2013-title5-partI-chap5-subchapII-sec552.htm)), ACF/OPRE established system of records titled: 09-80-0361 OPRE Research and Evaluation Project Records, HHS/ACF/OPRE. A Federal Register Notice ([80 FR 17893](http://r20.rs6.net/tn.jsp?f=001xlrCW7Kbemgm2d86h6ixrc9hwrKlVYiWeeUpWRSBaSQeSTVy-b1O2boPigC5PFJWNkgzlmBy9AMT5vvjMoHnom8GvL2rLKH4DKw5wcO6P8i8-p1cvtiYBPJw9iDe43ZybIlTx9TxEGhjZTlakiqRcO6tOOJwQHJF2mRdLTQCfCjtDQhJ5rGM4jq8MzZvDLmWMfLBjOTAwTs=&c=YKiZw_k3UKd3KgXVQ0a5ZUCuxqdQeLEOLmcOZvm0g9Px0WOviaWm5w==&ch=QGDLbmRP7fmn_ciScWk8PoDb30IyeupVS_YujyPfG75CRUr63VN6iQ==)) announced the system. |

**SECTION A. MASS MARKETING, OUTREACH, AND RECRUITMENT**

A1. Which of the following types of advertising did you purchase, have donated, or conduct in the previous reporting period?

MARK ALL THAT APPLY

1 ⬜ Newspaper ads

2 ⬜ TV spots

3 ⬜ Billboards, including those on public transportation or bus stop (that is, bench ads)

4 ⬜ Radio ad or announcement

5 ⬜ Internet ads

6 ⬜ Social marketing (such as Facebook, Twitter)

7 ⬜ Theater ads

8 ⬜ Flyers

9 ⬜ Presentations to program partners or community organization leaders or staff

10 ⬜ Word of mouth

11 ⬜ Other (Please specify): *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A2. Which recruitment methods did you use in the previous reporting period?

MARK ALL THAT APPLY

1 ⬜ Phone or mail outreach

2 ⬜ Street outreach

3 ⬜ Referrals from community agencies

4 ⬜ On-site recruitment at community agencies

5 ⬜ Other (Please specify): *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A3. Which agencies and organizations provided referrals in the previous reporting period?

MARK ALL THAT APPLY

1 ⬜ Hospitals, maternity clinics, doctors’ offices

2 ⬜ Schools

3 ⬜ Places of worship or faith-based community center

4 ⬜ Child support agencies (voluntary enrollment)

5 ⬜ Child support agencies (court ordered to enroll in a program like this)

6 ⬜ Employment assistance centers or one-stops

7 ⬜ TANF offices

8 ⬜ WIC agencies

9 ⬜ Head Start

10 ⬜ Healthy Start

11 ⬜ Child welfare agencies (voluntary enrollment)

12 ⬜ Child welfare agencies (court ordered to enroll in a program like this)

13 ⬜ Probation and parole

14 ⬜ Other community agencies or organizations

15 ⬜ Self-referrals

16 ⬜ Other (Please specify): *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A4. In the previous reporting period, did you conduct on-site recruitment for [PROGRAM] in any of the following?

MARK ALL THAT APPLY

1 ⬜ Hospitals, maternity clinics, doctors’ offices

2 ⬜ Schools

3 ⬜ Places of worship or faith-based community center

4 ⬜ Child support agencies (for voluntary enrollments)

5 ⬜ Child support agencies (for court ordered enrollments)

6 ⬜ TANF offices

7 ⬜ WIC agencies

8 ⬜ Head Start programs

9 ⬜ Healthy Start programs

10 ⬜ Child welfare agencies (for voluntary enrollments)

11 ⬜ Child welfare agencies (for court ordered enrollments)

12 ⬜ Probation and parole

13 ⬜ Other community agencies or organizations

14 ⬜ Other (Please specify): *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A5. What number of FTE staff were dedicated to recruitment in the previous reporting period?

MARK ONE ONLY

1 ⬜ < 0.5 FTE

2 ⬜ 0.5 to 0.9 FTE

3 ⬜ 1 to 1.4 FTE

4 ⬜ 1.5 to 1.9 FTE

5 ⬜ 2 to 2.4 FTE

6 ⬜ 2.5 to 2.9 FTE

7 ⬜ 3 or more FTE

**SECTION B. STAFF CHARACTERISTICS**

**B1a. What proportion of your facilitators has…**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. A high school diploma or less? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. An associate’s degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. A bachelor’s degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. A master’s or doctorate degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |

B1b. What proportion of your case management staff has…

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. A high school diploma or less? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. An associate’s degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. A bachelor’s degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. A master’s or doctorate degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |

B1c. What percent of your employment specialists has…

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. A high school diploma or less? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. An associate’s degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. A bachelor’s degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. A master’s or doctorate degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |

B1d. What proportion of your managerial/supervisory staff has…

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. A high school diploma or less? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. An associate’s degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. A bachelor’s degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. A master’s or doctorate degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |

B1e. What proportion of your other staff has…

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. A high school diploma or less? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. An associate’s degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. A bachelor’s degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. A master’s or doctorate degree? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |

B2a. What proportion of your facilitators has…

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. Fewer than 2 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. Between 2 and 4 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. Between 5 and 9 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. 10 or more years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |

B2b. What proportion of your case management staff has…

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. Fewer than 2 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. Between 2 and 4 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. Between 5 and 9 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. 10 or more years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |

B2c. What proportion of your employment specialists has…

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. Fewer than 2 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. Between 2 and 4 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. Between 5 and 9 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. 10 or more years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |

B2d. What proportion of your managerial/supervisory staff has…

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. Fewer than 2 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. Between 2 and 4 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. Between 5 and 9 years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. 10 or more years in this role? | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |

**SECTION C. QUALITY ASSURANCE AND MONITORING**

C1. In the previous reporting period, approximately what proportion of the following types of staff received training in the program curricula?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. Facilitators | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. Case managers | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. Employment specialists | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. Supervisors | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| e. Program managers | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| f. Other program staff (please specify): | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
|  |  |  |  |  |  |

C2. In the previous reporting period, approximately what proportion of the following types of staff received on-the-job training?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. Facilitators | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. Case managers | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. Employment specialists | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. Supervisors | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| e. Program managers | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| f. Other program staff (please specify): | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
|  |  |  |  |  |  |

C3. For the two types of facilitators shown below, what proportion of their workshops was observed by a supervisor or another experienced facilitator in the previous reporting period?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** | **ALL** |
| a. Facilitators hired in the previous reporting period | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. Experienced facilitators | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |

C4. In the previous reporting period, on average, how often did the following types of staff meet with their supervisors one-on-one?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | | |
|  | **AT LEAST WEEKLY** | **BIWEEKLY** | **MONTHLY** | **ONCE** | **NOT IN PREVIOUS REPORTING PERIOD** |
| a. Facilitators | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| b. Case managers | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| c. Employment specialists | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| d. Supervisors | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| e. Program managers | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
| f. Other program staff (please specify): | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ | 4 ⬜ |
|  |  |  |  |  |  |

C5. In the previous reporting period, approximately what proportion of applicants were screened for intimate partner violence?

MARK ONE ONLY

1 ⬜ None

2 ⬜ Fewer than half

3 ⬜ About half

4 ⬜ More than half

5 ⬜ All

**SECTION D. IMPLEMENTATION CHALLENGES**

**D1. Please indicate how much of a problem each of the following has been in the previous reporting period.**

|  |  |  |  |
| --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | |
|  | **NOT A PROBLEM** | **SOMEWHAT A PROBLEM** | **A SERIOUS PROBLEM** |
| a. Obtaining referrals from community organizations | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| b. Participant recruitment | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| c. Enrolling the intended target population | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| d. Getting enrollees to start participating in services | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| e. Getting enrollees to attend regularly | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| f. Keeping participants engaged during sessions | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| g. Getting enrollees to complete the program | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| h. Recruiting qualified staff | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| i. Staff performance | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| j. Ensuring facilitators understand content | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| k. Covering all program content in the time allotted | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| l. Implementing curriculum with fidelity | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| m. Program facilities | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| n. Cooperation of recruitment and referral sources | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| o. Service delivery partners | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| p. Extreme weather or natural disasters | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| q. Getting participants to complete pretest or posttest | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| p. Other (please specify): | 1 ⬜ | 2 ⬜ | 3 ⬜ |
|  |  |  |  |

**D2. Please indicate the proportion of staff who left or were removed from their position in the previous reporting period.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | MARK ONE BOX IN EACH ROW | | | |
|  | **NONE** | **FEWER THAN HALF** | **HALF** | **MORE THAN HALF** |
| a. Facilitators | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| b. Case managers | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| c. Employment specialists | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| d. Supervisors | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| e. Program managers | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ |
| f. Other program staff (please specify): | 0 ⬜ | 1 ⬜ | 2 ⬜ | 3 ⬜ |
|  |  |  |  |  |

**THANK YOU FOR COMPLETING THIS SURVEY!**