



**Erin Panzarella**  
*MIHOPE Study Survey Director*

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## **MATHEMATICA Policy Research**

P.O. Box 2393  
Princeton, NJ 08543-2393  
Telephone (609) 799-3535  
Fax (609) 799-0005  
www.mathematica-mpr.com  
**800-385-8046**



### **Mother and Infant Home Visiting Program Evaluation**

[DATE]

Dear [NAME],

We hope you and your family are doing well! It is time to check in with you again as part of the Mother and Infant Home Visiting Program Evaluation, or MIHOPE. As you may recall, you joined the MIHOPE study in [MONTH YEAR].

[IF NO PREPAY AND NO EARLY BIRD: The survey will only take about 30 minutes and will ask about how your family is doing since the last time we spoke with you. You will receive a **\$15 gift card** for completing it. Please complete the survey online by using the login information below.]

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**Website:**[WEBSITE]

**Username:**[USERNAME]

**Password:** [PASSWORD]

If you have any questions about the study or **prefer to complete the survey by telephone**, please call us toll free at **1-800-385-8046**.

The information gathered from the MIHOPE study will help policymakers design better programs for mothers of young children. Your participation in MIHOPE is voluntary but very important! This is your opportunity to help improve the health care and home visiting system. You cannot be replaced in the study.

As you may recall, the Administration for Children and Families of the U.S. Department of Health and Human Services is sponsoring MIHOPE. Mathematica Policy Research, an independent research company, is conducting the survey as part of the study. We'd like to let you know that taking part in MIHOPE will not affect any benefits you receive now or in the future. Also, all information you provide for MIHOPE will be kept private to the extent provided by law. Study results will be reported for groups of families. No names or individual information will be reported.

Thank you for your continued participation in the MIHOPE study. We look forward to speaking with you soon!

Sincerely,

Erin Panzarella

This collection of information is voluntary and will be used to learn how home visiting programs benefit families. Public reporting burden for this collection is estimated to average 30 minutes, 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 OMB control number for this collection is XXXX-XXXX and it expires on XX/XX/XXXX.

To: [RESPONDENT EMAIL]

Subject: Please complete your next survey for the MIHOPE home visiting study!



## Mother and Infant Home Visiting Program Evaluation

Dear [NAME],

[IF NO PREPAY AND NO EARLY BIRD: It is time to check in with you again as part of the Mother and Infant Home Visiting Program Evaluation (MIHOPE). The survey will only take about 30 minutes and will ask about how your family is doing since the last time we spoke with you. You will receive a **\$15 gift card** for completing it. Please complete the survey online by using the login information below.]

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**Website:**[WEBSITE]

**Username:**[USERNAME]

**Password:** [PASSWORD]

If you have any questions about the study or **prefer to complete the survey by telephone**, please call us toll free at **1-800-385-8046**.

The information gathered from the MIHOPE study will help policymakers design better programs for mothers of young children. Your participation in MIHOPE is voluntary but very important! This is your opportunity to help improve the health care and home visiting system. You cannot be replaced in the study.

Thank you for participating in MIHOPE. We look forward to speaking with you soon!

Sincerely,  
Erin Panzarella

*MIHOPE Study Survey Director*

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## **Mother and Infant Home Visiting Program Evaluation**

[DATE]

Dear [NAME],

We hope you and your family are doing well! In [MONTH YEAR OF LAST COMPLETED SURVEY], you were last contacted about the Mother and Infant Home Visiting Program Evaluation (MIHOPE). As you may remember, we said we would follow up with you again to see how your family is doing.

We have been trying to reach you so that you can complete the next brief survey. We will send you a [IF NO PREPAY: **\$15**/IF PREPAY: **\$10**] gift card as a thank you for completing the survey. There are two easy ways to complete the survey.

To complete the survey **online**, use the website and login information listed below.

Website:[WEBSITE]

Username:[USERNAME]

Password:[PASSWORD]

Or to complete the survey **by phone**, please call our toll-free number at **1-800-385-8046**. You can also call this phone number to ask any questions you may have about the MIHOPE study.

Your continued participation in the study is very important – you cannot be replaced! The information we receive will help policymakers design better programs for mothers of young children.

Thank you for participating in MIHOPE. We look forward to speaking with you soon!

Sincerely,  
Erin Panzarella

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To: [RESPONDENT EMAIL]

Subject: MIHOPE Project – There's Still Time to Complete the Next Brief Survey!



## Mother and Infant Home Visiting Program Evaluation

Dear [NAME],

About three years ago, you joined the Mother and Infant Home Visiting Program Evaluation (MIHOPE). As you may remember, we said we would follow up with you again to see how your family is doing since the last survey.

[IF NO PREPAY AND NO EARLY BIRD: It's time to conduct the next survey. For helping out, you will receive a **\$15 gift card**. Please complete the survey online by using the login information below.]

[IF NO PREPAY AND EARLY BIRD: It's time to conduct the next survey. For helping out, you will receive a **\$15 gift card**. If you complete the survey early, by [DATE], you can earn an extra **\$10** for a total of **\$25**. Please complete the survey online by using the login information below.]

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**Website:**[WEBSITE]

**Username:**[USERNAME]

**Password:** [PASSWORD]

If you have any questions about the study or **prefer to complete the survey by telephone**, please call us toll free at **1-800-385-8046**.

Thank you for participating in MIHOPE. Your participation in MIHOPE is voluntary but very important! This is your opportunity to help improve the health care and home visiting system. You cannot be replaced in the study. We look forward to hearing from you soon!

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To: [RESPONDENT CELL NUMBER]

Body: Hello! The MIHOPE study team has been trying to reach you. Please call us toll-free at 1-800-385-8046 to complete a brief survey and earn a [\$25/\$15/\$20/\$10] gift card. Thank you!



MIHOPE STUDY 50024.xx.xxx.xxx.xxx

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*the MIHOPE team has  
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We appreciate your continued participation  
in the MIHOPE home visiting study!

You cannot be replaced!

Complete a brief survey and receive [\$] as a thank you!

Two easy ways to complete:  
[website url] or Call us at 1-800-385-8046

Looking forward to hearing from you,  
*Erin Panzarella*



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Happy Birthday from  
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We'll be in touch soon.  
Please call 1-800-385-8046  
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Best wishes from the MIHOPE study  
on your child's birthday! We'll be in touch soon.  
Please call 1-800-385-8046 with any questions  
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Mother and Infant Home Visiting  
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# MIHOPE

Mother and Infant Home Visiting  
Program Evaluation

Other things may change us,  
but we start and end with family.

—Brandt



**MIHOPE**

**877-542-6727**

Keep in touch if your phone  
or address changes

Please let us know if you have moved.

**877-542-6727**

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## **Mother and Infant Home Visiting Program Evaluation**

DATE

Dear [NAME]:

Thank you for participating in the MIHOPE Study! Enclosed please find a [INCENTIVE AMOUNT] gift card for completing our survey.

We really appreciate your continued participation!

We encourage you to like our Facebook page: xxx. Here, we will provide updates about what is going on with the study.

We look forward to speaking with you again next year!

If you have any additional questions or concerns about the MIHOPE study, please call us toll-free at 1-800-385-8046.

Sincerely,

Erin Panzarella