

**APPENDIX 19**

**ASSISTANT TEACHER SURVEY**

OMB #  
Expiration:



THE  
CATHOLIC UNIVERSITY  
of AMERICA



## MSHS Assistant Teacher Survey Spring 2017

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## SURVEY INSTRUCTIONS FOR TEACHING ASSISTANTS

The Administration for Children and Families is conducting the Migrant and Seasonal Head Start (MSHS) Study under contract with Abt Associates Inc., in partnership with Westat and The Catholic University of America.

Please complete this brief survey, which asks about your classroom and your background as well as your thoughts about teaching. It will take about 20 minutes of your time to complete. As a thank you, we will give you \$15 for your time.

When completing the survey, please keep in mind:

- There are no right or wrong answers.
- Your responses will not be used for monitoring purposes.
- To answer a question, check the box next to your response with an "X", or write in your response on the line.
- Some questions may not apply to you, so you may be instructed to skip some questions
- Your participation in the study is voluntary and you may refuse to answer any questions you are not comfortable answering.

Your participation will make an important contribution to this nationally representative study of Migrant and Seasonal Head Start programs, although there is no direct benefit to you from participating in the study. There is minimal risk for participation in the study. There is a minimal risk of breach of privacy and we have many procedures in place to minimize this risk. For example, survey responses will be kept in secure and protected data files; encryption technology will be used whenever files are transferred electronically; data security scans will be conducted regularly; and only a very limited number of project staff will have access to these data.

**Please be assured that all information you provide will be kept private to the extent permitted by law.** To help us protect your privacy, we have obtained a Certificate of Confidentiality from the National Institutes of Health. We can use this Certificate to legally refuse to disclose information that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other proceedings, for example, if there is a court subpoena. We will use the Certificate to resist any demands for information that would identify you.

We will not personally identify either you in any report or materials developed from this study. We will use the information that we collect in this study only for research purposes. We will make sure that study researchers respect the privacy of the data and adhere to safeguards for security and privacy.

If you decide to be in this study, the study researchers will have information that links you to your survey responses, but this information will be kept secure and available only to selected members of the research team. The study researchers may also link MSHS survey responses to administrative data from the Head Start Enterprise System and Program Information Report datasets.

At the end of this study, we will give the information we collect to The Administration for Children and Families. We will also give this information to authorized researchers who will store the data, and who may use the data to answer other research questions. Any personal information that could identify you will be removed or changed before files are shared with The Administration for Children and Families and other researchers. However, The Administration for Children and Families and other researchers will receive MSHS center-level zip codes. These zip codes may be used to link MSHS survey responses and information about the MSHS center to information about the community, such as other resources in the community. This means that there is a possibility that centers could be identified in these datasets. To minimize this risk, other researchers will be required to sign a data use agreement before accessing the data. This means they must respect the privacy of the data, agree to use the data for research purposes only, and follow the rules for keeping your information secure and private.

If you have questions about the MSHS Study, please call us toll-free at **1-888-xxx-xxxx**. A study staff member will be happy to talk with you. If you have questions or concerns about your rights as a study participant, please call the Abt Institutional Review Board toll-free at 1-877-520-6835.

When finished, please return survey to study team by giving the survey to your on-site liaison, or mailing the survey to the following address: [Address here](#)



Institutional Review Board  
Study#: 0866  
Study Year: 3/30/16 -3/29/17

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**A. STAFF BACKGROUND, EXPERIENCE, EDUCATION, KNOWLEDGE, AND BELIEFS**

1. In total, how many years (including this year) have you been teaching (as either lead or assistant teacher)? *Please round to the nearest year.*

\_\_\_\_\_ years

2. In total, how many years (including this year) have you taught children birth to two years (as either lead or assistant teacher)? *Please round to the nearest year.*

\_\_\_\_\_ years

3. In total, how many years (including this year) have you taught children three to five years (as either lead or assistant teacher)? *Please round to the nearest year.*

\_\_\_\_\_ years

4. In total, how many years (including this year) have you been teaching in a Migrant and Seasonal Head Start (MSHS) program (as either lead or assistant teacher)? *Please round to the nearest year.*

\_\_\_\_\_ years

5. What experience do you have with migrant and seasonal families? Check all that apply.

- |   |  |
|---|--|
| <input type="checkbox"/> Family members are/were migrant and seasonal farmworkers | <input type="checkbox"/> Kitchen Staff                       |
| <input type="checkbox"/> You are/were a migrant or seasonal farmworker            | <input type="checkbox"/> Custodial Staff                     |
| <input type="checkbox"/> Teacher  | <input type="checkbox"/> Bus Driver                          |
| <input type="checkbox"/> Assistant Teacher  | <input type="checkbox"/> Bus Monitor                         |
| <input type="checkbox"/> Assistant Center Director                                | <input type="checkbox"/> Transportation Supervisor           |
| <input type="checkbox"/> Assistant Program Director                               | <input type="checkbox"/> Family Service Worker               |
| <input type="checkbox"/> Center Director  | <input type="checkbox"/> Counselor/ Mental Health Profession |
| <input type="checkbox"/> Area Coordinator   | <input type="checkbox"/> Social Worker                       |
| <input type="checkbox"/> Regional Director  | <input type="checkbox"/> Health Care Worker                  |
| <input type="checkbox"/> Program Director   | <input type="checkbox"/> Community Organizer                 |
| <input type="checkbox"/> Educational Specialist                                   | <input type="checkbox"/> Secretary                           |
| <input type="checkbox"/> Education Manager  | <input type="checkbox"/> Financial Officer                   |
| <input type="checkbox"/> Component Coordinator                                    | <input type="checkbox"/> Information Technology Director     |
| <input type="checkbox"/> Outreach Staff/Recruiter                                 | <input type="checkbox"/> Other (specify):                    |
|   | <input type="checkbox"/> _____                               |
|   | <input type="checkbox"/> None of the above                   |

**6. At times staff work in various positions at a center. Which of the following positions do you regularly work in MSHS in addition to being an assistant teacher? Check all that apply.**

- |   |  |
|---|--|
| <input type="checkbox"/> Family members are/were migrant and seasonal farmworkers | <input type="checkbox"/> Kitchen Staff                       |
| <input type="checkbox"/> You are/were a migrant or seasonal farmworker            | <input type="checkbox"/> Custodial Staff                     |
| <input type="checkbox"/> Teacher  | <input type="checkbox"/> Bus Driver                          |
| <input type="checkbox"/> Assistant Teacher  | <input type="checkbox"/> Bus Monitor                         |
| <input type="checkbox"/> Assistant Center Director                                | <input type="checkbox"/> Transportation Supervisor           |
| <input type="checkbox"/> Assistant Program Director                               | <input type="checkbox"/> Family Service Worker               |
| <input type="checkbox"/> Center Director  | <input type="checkbox"/> Counselor/ Mental Health Profession |
| <input type="checkbox"/> Area Coordinator   | <input type="checkbox"/> Social Worker                       |
| <input type="checkbox"/> Regional Director  | <input type="checkbox"/> Health Care Worker                  |
| <input type="checkbox"/> Program Director   | <input type="checkbox"/> Community Organizer                 |
| <input type="checkbox"/> Educational Specialist                                   | <input type="checkbox"/> Secretary                           |
| <input type="checkbox"/> Education Manager  | <input type="checkbox"/> Financial Officer                   |
| <input type="checkbox"/> Component Coordinator                                    | <input type="checkbox"/> Information Technology Director     |
| <input type="checkbox"/> Outreach Staff/Recruiter                                 | <input type="checkbox"/> Other (specify): _____              |
|   | <input type="checkbox"/> None of the above                   |

**7. How often was your teaching assignment changed in the last week?**

- Not changed
- Changed once
- Changed more than once

**8. What do you do when the center is closed for the season? Check all that apply.**

- Work at another Migrant and Seasonal Head Start center
- Work at a Head Start center
- Work at another early childhood program
- Work at another job part-time
- Work at another job full-time
- Look for another job
- Receive unemployment benefits
- Go to school
- Receive public assistance (such as Medicaid, food stamps, TANF)
- Self-employed
- None of the above
- Other (specify): \_\_\_\_\_

**9. What is the highest grade or year of school that you completed? Check one only.**

- No school → GO TO QUESTION 12
- Preschool → GO TO QUESTION 12
- Kindergarten → GO TO QUESTION 12
- 1st grade → GO TO QUESTION 12
- 2nd grade → GO TO QUESTION 12
- 3rd grade → GO TO QUESTION 12
- 4th grade → GO TO QUESTION 12
- 5th grade → GO TO QUESTION 12
- 6th grade → GO TO QUESTION 12
- 7th grade → GO TO QUESTION 12
- 8th grade → GO TO QUESTION 12
- 9th grade → GO TO QUESTION 12
- 10th grade → GO TO QUESTION 12
- 11th grade → GO TO QUESTION 12
- 12th grade without a diploma → GO TO QUESTION 12
- High school diploma/equivalent → GO TO QUESTION 12
- Vocational/technical program after high school without a diploma → GO TO QUESTION 12
- Vocational/technical diploma after high school → GO TO QUESTION 12
- Some college without a degree → GO TO QUESTION 10
- Associate's degree → GO TO QUESTION 9
- Bachelor's degree → GO TO QUESTION 9
- Some graduate or professional school without a degree → GO TO QUESTION 9
- Master's degree (MA, MS) → GO TO QUESTION 9
- Doctoral degree (Ph.D., Ed.D.) → GO TO QUESTION 9
- Professional degree after Bachelor's degree (Medicine/MD, Dentistry/DDS, Law/JD/LLB) → GO TO QUESTION 9
- Don't Know/Refused → GO TO QUESTION 12

**10. In what field did you obtain your highest degree? Check one only.**

- Child development, human development, or developmental psychology
- Early childhood education
- Elementary education
- Special education
- Curriculum development
- Administration
- Bilingual education or literacy
- Psychology, counseling, or social work
- Public health
- Other field (specify): \_\_\_\_\_

**11. Have you completed any college/university courses on bilingual/Dual Language Learner (DLL) children? Check one only.**

- Yes, a whole course was dedicated to bilingual/DLL children
- Yes, a large part of a course was dedicated to bilingual/DLL children
- Yes, one or two classes of a course was dedicated to bilingual/DLL children
- No



**12. Do you have, or are you in the process of, acquiring any of the following certifications?  
Check all that apply.**

	Already have	In the Process of Obtaining	Do not have/ Not in the process of obtaining
a. A Child Development Associate (CDA) credential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Another certification in early childhood development (Specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. A license or certificate in social work or nursing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. A bilingual certification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Other (Specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**13. Please only answer this question if you have ever taught preschoolers. If you have never taught preschoolers, please check the box “N/A”.**

**N/A – I HAVE NEVER TAUGHT PRESCHOOLERS. → GO TO QUESTION 13.**

**The following are statements that some teachers have made about how young children should be taught. Please indicate the extent to which you agree or disagree with each of these statements.**

	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neither agree nor disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>
a. MSHS classroom activities should be responsive to the needs and abilities of individual children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Each curriculum area should be taught as a separate subject at separate times.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Children should sit silently and do work on their own.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Children in MSHS classrooms should learn through active explorations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. MSHS teachers should use treats, stickers, or stars to encourage appropriate behavior.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. MSHS teachers should use punishments or reprimands to encourage appropriate behavior.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Children should be instructed in recognizing the single letters of the alphabet, isolated from words.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Children should learn to color within predefined lines.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Children in MSHS classrooms should learn to form letters correctly on a printed page.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. Please only answer this question if you have ever taught infants or toddlers. If you have never taught infants or toddlers, please check the box “N/A”.

N/A – I HAVE NEVER TAUGHT INFANTS OR TODDLERS. → GO TO QUESTION 14.

The following are statements that some teachers have made about how young children should be taught. Please indicate the extent to which you agree or disagree with each of these statements.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. It is likely that caregivers will spoil a baby if they respond every time the baby cries.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. One of the best ways to prepare a young child to be a good student is to teach him/her to be obedient.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I believe that it is important to spend a lot of time talking to infants and toddlers even before they can understand whatever it is I am saying.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Toddlers can be expected to sit still during group activities like singing and story time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I believe that the way I treat my teaching partners in the classroom will influence how the toddlers behave towards others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. In order to be fair, child care teachers must treat all children alike.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. I believe that teachers have to carefully supervise children's development to make sure that it is progressing normally.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Parents have valuable information to share about how teachers can work effectively with their children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Even though infants or toddlers enjoy their time in child care, parents are still the most important people in their children's lives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. It is good for infants and toddlers to experience many different child care providers so they can learn to modify their behavior to meet the demands of others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**15. What is your sex?**

- Male
- Female
- Other

**16. In what year were you born?**

1 9 \_\_\_\_

**17. What is your race/ ethnicity? (Select one or more.)**

- American Indian or Alaska Native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian or Other Pacific Islander \_
- White

**IF YOU SELECTED "HISPANIC OR LATINO" → GO TO QUESTION 17.**

**IF YOU DID NOT SELECT "HISPANIC OR LATINO" → GO TO SECTION B.**

**18. Which Hispanic or Latino origin best describes you? (Select one or more.)**

- Mexican, Mexican-American, Chicano/a
- Puerto Rican
- Cuban
- Another Hispanic, and/or Latino origin (specify): \_\_\_\_\_

**B. STAFF LINGUISTIC ABILITIES**

1. Please indicate how well you understand, speak, read, and write in the following languages. Please also indicate how you acquired that language.

	<i>How well do you _____ the language?</i>				<i>Did you speak this language at home with your family when you were a child?</i>
	<b>Understand</b>	<b>Speak</b>	<b>Read</b>	<b>Write</b>	
<b>English</b>	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Spanish</b>	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Haitian Creole</b>	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Mixtec</b>	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Kanjobal</b>	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Zapotec</b>	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Other</b>	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Not at all <input type="checkbox"/> Not well <input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Specify:</b> _____	<input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Well <input type="checkbox"/> Very Well	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. Please only answer this question if you currently teach toddlers or preschoolers. If you do not teach toddlers or preschoolers, please check the box “N/A”.

N/A – I CURRENTLY DO NOT TEACH TODDLERS OR PRESCHOOLERS. → GO TO QUESTION 3.

What languages do you use in your classroom for each of the following...

	Teaching children	Reading to children	Presenting information to children	Providing directions to children	Playing with children	Soothing children
a. English completely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Primary English, some Spanish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. English and Spanish equally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Primarily Spanish, some English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Spanish completely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Primarily English, some of another language (specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. English and another language equally (specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Primarily another language, some English (specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. English and multiple other languages (specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Other combination of language (specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Please only answer this question if you currently teach infants. If you do not teach infants, please check the box “N/A”.

N/A – I CURRENTLY DO NOT TEACH INFANTS. → GO TO QUESTION 4.

What languages do you use in your classroom for each of the following...

	Talking to children	Reading to children	Singing to children	Playing with children	Soothing children
a. English completely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Primarily English, some Spanish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. English and Spanish equally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Primarily Spanish, some English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Spanish completely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Primarily English, some of another language (specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. English and another language equally (specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Primarily another language, some English (specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. English and multiple other languages (specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Other combination of languages (specify: _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**4. How do you help facilitate language use in the classroom?**

- I lead classroom activities that use children's home language.
- I motivate students to use their home language in the classroom.
- I motivate students to use English in the classroom.
- I help the lead teacher communicate with children and families when the lead teacher does not speak their home language.
- I help parents feel comfortable in the classroom by speaking their home language.
- I help translate written materials into families' home language(s).
- Other, specify: \_\_\_\_\_
- None of the above



**C. STAFF WELL-BEING**

1. How much do you agree or disagree with each of the following statements about teaching?

	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neither agree nor disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>
a. I really enjoy my present teaching job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I am certain I am making a difference in the lives of the children I teach.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. If I could start over, I would choose teaching again as my career.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. In five years I think I will still be teaching young children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I feel that I am treated with respect in my present teaching job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. The next questions are about the level of support for interactions between MSHS staff and parents at your MSHS center. To what extent do you agree or disagree with each of the following statements?

<b>The staff at this center...</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neither agree nor disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>
a. Promote cooperation between MSHS staff and parents.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Support each other.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Help teachers to work effectively with families from different cultural groups.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Below is a list of ways you may have felt or behaved. Please choose how often you have felt this way during the past week.

During the past week, you...	Rarely or Never	Some or a Little	Occasionally or Moderately	Most or All of the Time
a. Were bothered by things that usually don't bother you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Did not feel like eating, your appetite was poor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Could not shake off the blues, even with help from your family and friends?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Had trouble keeping your mind on what you were doing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Felt depressed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Felt like everything you did was an effort?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Felt fearful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Had restless sleep.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Talked less than usual.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Felt lonely.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Felt sad.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Could not get "going."	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## D. INSTRUCTIONAL AND ASSESSMENT PRACTICES

1. What can help you in your teaching? Please check all that apply.

- Additional training in ....curriculum
- Additional training in ....assessment
- Additional training in.....behavioral class management
- Additional training in ....infant development
- Additional training in..... toddler development
- Additional training in..... preschooler development
- Additional training in.....Dual Language Learners and bilingual development
- Additional training in.....special needs/disabilities
- Additional training in.....the culture of MSHS families
- Additional training in.....the agricultural work of MSHS families
- Learning more English
- Learning more Spanish
- Learning other languages (Specify: \_\_\_\_\_)
- Additional coaching/mentoring
- Additional planning time
- More time/support to pursue degree

## E. STAFFING AND COMPENSATION

1. How many hours per week are you paid to work for MSHS?

\_\_\_\_\_ hours per week

2. How many months per year are you paid to work for MSHS?

\_\_\_\_\_ months per year

3. Does this work schedule present any problems for you? Check one only.

- Very much so
- Somewhat
- Not a problem → GO TO QUESTION 6.

4. Why does the work schedule present problems for you? Check all that apply.

- Hours are too long
- Start time too early
- End time too late
- Schedule not consistent over the year
- Other (specify): \_\_\_\_\_

5. What is your total yearly salary (before taxes) as an assistant teacher?

\$\_\_\_\_\_ per year

6. Which of the following benefits are available to you through MSHS? Check all that apply.

- Paid vacation time
- Paid sick leave
- Paid maternity or paternity leave
- Unpaid maternity or paternity leave
- Paid family leave
- Fully or partially paid health insurance
- Fully or partially paid dental insurance
- Tuition reimbursement or educational stipends to cover workshops
- Retirement plan
- Life insurance
- Vision care
- Personal or bonus days
- Mileage
- Anything else? (specify): \_\_\_\_\_