# Evaluation of the ACL Title VI Programs Title VI Tribal Elder Focus Group Moderator Guide 

| Questions | Probes | Time Guidelines |
| :---: | :---: | :---: |
| Introduction of Moderator/Guests and Purpose of Focus Group/ Logistics |  | 5 minutes |
| Read Consent Form/Confirm Verbal Consent/Confirm Permission to Audio Record |  | 5 minutes |
| Opening Question <br> 1. Please tell us your first name and let us know how long you have been using Title VI services. |  | 5 minutes |
| Introductory Question <br> 2. Can you tell me a little bit about the services you get through the program? | Provide examples of services specifically provided by the program: <br> - Meals <br> - Transportation <br> - Supportive services <br> o Home care, legal assistance, information/referral, etc. <br> - Nutrition education <br> - Exercise classes <br> - Chore services | 10 minutes |
| Transition Questions <br> 3. What do you like best about the services you receive through the program? | - Don't have to cook/can get a hot meal <br> - Don't have to worry about not having enough money for food <br> - Feel more independent/Don't have to rely on others as much <br> - Get out and see people <br> - Someone to talk to/ask for help/ask to explain things <br> - Stay connected to community/tribe <br> - Helps me to feel safe in my home | 10 minutes |
| Key Questions <br> 4. Which service is the most helpful to you? | - Does that service make it easier for you to live in your home? | 10 minutes |
| 5. What else do you wish that the program had? |  | 10 minutes |
| 6. If you could change something about the program, what would that be? |  | 10 minutes |

[^0] displays a currently valid OMB control number. The OMB control number for this project is $x x x x-x x x x$. Public reporting burden for this collection of information is estimated to average 5 minutes per respondent, per year, including the time to review instructions. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to [title], [address, city, state, zip].

| 7. What would happen if you didn't have this program? | Components to talk about: <br> - Meals - have fewer meals/cold meals <br> - Nutrition-eat less healthy meals <br> - Chances to socialize/visit with others-feel isolated/lonely <br> - Exercise classes-be less healthy <br> - Getting out of the house-feel isolated/lonely <br> - Transportation to places I couldn't get otherwise <br> - Chore services <br> - Mental/Emotional - More depressed/anxious/worried | 15 minutes |
| :---: | :---: | :---: |
| 8. Can you talk a little bit about the different ways that the program helps you? | - How has the program helped you stay connected to traditional American Indian, Alaska Native, Native Hawaiian (Al/AN/NH) ways of life (food choices, spirituality, language, music and so on) <br> - Are there other ways that the program helps you feel connected to your community? <br> - I can talk to someone if I have a problem or if I think someone is trying to take advantage of me <br> - How does the program help you get around your house or community? <br> - How does the program help with your day-to-day activities? <br> - Help you to stay in the community <br> - Help you to be healthier <br> - Contributed to your quality of life | 15 minutes |
| 9. What is the best/most important thing that the program has done for you? | - If you were telling someone else about the program, what would be the first thing you would tell them about? <br> - Do you think the program makes a difference in people's lives? Can you share an example? | 15 minutes |
| Ending Question <br> 10. Thank you so much for sharing your stories with us today. Is there anything that we have missed? Is there anything that you came wanting to say that you didn't get a chance to? |  | 5 minutes |
| Total Time |  | 120 minutes |


[^0]:    Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it

