OMB Control No: 0970-XXXX

Expiration date: XX/XX/XXXX

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**Prenatal Alcohol and Other Drug Exposures:**

# Focus Group Questions for Foster Parents, Adoptive Parents, and/or Relative/Kinship Caregivers

[NOTE: Text in ***BOLD ITALICS*** represents introductory/explanatory text that should be read aloud by the moderator. Text in *PLAIN* *ITALICS* represents moderator directions or group management strategies that should NOT be read aloud. Key questions are in **BOLD**.]

*Materials: at each seat, place a color-coded packet which will include:*

* *a folded card to report their first name and record basic background information*
* *color-coded stickers that match the color of their name card to use during various activities*
* *colored paper to indicate agreement/interest (green) somewhat agreement/interest (yellow) or disagreement (red) with various statements throughout the focus group.*

*As participants arrive, ask them to fill out the name card/participant background card and engage in informal dialogue as an icebreaker. When the full group has arrived, have participants go around to introduce themselves and share some**information they wrote on the card, using Question 1 as a guide. You will collect the cards at the end of the focus group.*

Background Information

*Please provide any information below as you feel comfortable. Skip any items you would like.*

1. Please select the type of caregiver you consider yourself to be:

\_\_\_short-term foster care \_\_\_\_long-term foster care

\_\_\_therapeutic foster care \_\_\_\_respite care

\_\_\_kinship caregiver or guardian \_\_\_\_foster-to-adopt or adoptive parent

\_\_\_ other; please describe\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How many foster/adoptive children have you ever cared for? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. How long have you been a caregiver for (years/months)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. What ages were they at the time you started caring for them (provide a range if you’ve

cared for multiple children)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you also have biological/step children? If so, how many? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Please say a word or two about why you became a foster or adoptive parent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Before we begin, please remember we are not going to report on what you say in any way that identifies you or the children you’ve cared for. We are gathering information from all over the country, and we have this same policy everywhere. We’d like to remind everyone to please respect the privacy of what others share by not repeating what others have said outside of this group. Also, please remember that you are always free to pass and not answer a question.***

1. **First, I’d like to begin by asking you each to tell me and the group a little more about your experiences as a caregiver or guardian.** 
   1. By a show of hands, how many of you currently are or were previously foster parents? Relative or kinship caregivers? Adoptive parents? Prospective adoptive parents? Biological or step-parents?

***Thanks for sharing that! For the rest of our time together today, we’ll be using the word “caregiver” to talk about all of those categories.***

* 1. If you raised your hand to indicate that you are/were a foster/adoptive parent or a relative guardian, how many foster/adoptive children have you cared for and what are/were their ages?
  2. When did you first begin providing care to children from [the local child welfare agency] or first become the caregiver or guardian for relatives?

***Thank you all for sharing! To help facilitate our conversation, we created a list of substances on this chart paper that you can refer to at any time during the focus group. It lists the various substances that we would like you to consider as you think about your responses.***  *[Read list: alcohol, tobacco, marijuana, prescription medication, misused or recreationally used, illicit drugs]*

***First, I’d like to know a little bit more about any training that you may have received from [YOUR LOCAL CHILD WELFARE AGENCY].***

1. **When you first were becoming caregivers (that is, foster parents, relative or kinship caregivers, or were considering adoption), what information or training did [LOCAL CHILD WELFARE AGENCY] offered to you?**
   1. [*If needed:* Were these trainings required? Do you remember any of the specifics topics discussed in that training?]
   2. What about information or training that has been offered to you since then? What, if any, training opportunities have there been?
      1. What format were those offered in (e.g., formal in-person training, webinar, handout/brochure, one-on-one discussion, etc.)?
      2. In what ways, if any, does your [local child welfare agency] generally communicate with you about training opportunities?
         1. [*If not discussed:* Did this communication work well for you?]

***Now we would like to know what information or training, if any, you have received about specific topics. I’ll give you some instructions, and then ask you all to get up and place stickers on the poster to indicate what information or training you received from the child welfare agency or staff at the [LCOAL CHILD WELFARE AGENCY] on the following topics:***

* Prenatal exposure to alcohol or other drugs
* Parenting children with special needs (e.g., medical, physical, developmental, or social/emotional disabilities as well as other conditions impacting the child.)
* Navigating systems such as medical systems to obtain care, educational systems to establish an IEP, government systems such as Medicaid or Social Security, or other systems of care

***For each subject that you have received training, or information on a particular child, from the child welfare agency or staff at [the child welfare agency], please select the appropriate column if you received the training or information either:***

* During your initial orientation with the child welfare agency to become a relative caregiver, foster parent, or adoptive parent;
* During a training from the child welfare agency after you were approved to become a caregiver;
* During a training sponsored by [local child welfare agency], after you were approved to become a caregiver;
* Informally from an agency brochure, handout, website, caseworker;
* From child welfare agency staff to address the unique needs of a particular child or children in your care;
* From another foster parent or adoptive parent whom you met through the child welfare agency;
* Or, if you haven’t ever received any information or training on these topics.

***You can put stickers in multiple columns in each row. Feel free to now get up and place your stickers in the blocks that represent your experiences. If you haven’t had training or received information on a particular topic, that’s completely fine – you don’t need to put a sticker up on the board.***

*[Using the created poster paper with each of the three topics, have participants place a sticker under each category if they did have any training on the topic. Once they have placed those stickers, ask the probes below for the substance exposure category.]*

|  | Prenatal exposure to alcohol or other drugs | Parenting children with special needs | Navigating systems (e.g., medical, educational) |
| --- | --- | --- | --- |
| **Received training on this topic from [LOCAL CW AGENCY] during my initial orientation or training to become a relative caregiver, foster parent, or adoptive parent** | (Sticker) | (Sticker) | (Sticker) |
| **Received training on this topic from [LOCAL CW AGENCY] after I was approved to become a caregiver** |  |  |  |
| **Received training on this topic, sponsored by [LOCAL CW AGENCY] after I was approved to become a caregiver** |  |  |  |
| **Received general information on this topic from [LOCAL CW AGENCY] informally through a brochure, handout, website, caseworker, etc.)** |  |  |  |
| **Received information on this topic from [LOCAL CW AGENCY] or agency staff for a particular child in my care.** |  |  |  |
| **Received information from another foster parent or adoptive parent whom you met through the child welfare agency.** |  |  |  |
| **Never received any training from [LOCAL CW AGENCY] on this topic.** |  |  |  |

1. **Now I’d like to know a little more for those who placed a sticker under training for prenatal substance exposure.**

*[Allow for brief discussion on these topics, but not necessarily using each probe]*

* 1. What types of information or training were you given on prenatal substance exposure?

*[Probe for what types of substances were included, if not stated. If certain substances not offered, ask about them specifically. E.g,: Did any of you receive training that discussed the effects of prenatal alcohol exposure? What about Fetal Alcohol Spectrum Disorders (FASDs)?]*

* 1. *If no one places a sticker by prenatal exposure:* If you didn’t place a sticker by prenatal substance exposure, do you know whether any training on this is offered on this topic by [LOCAL CW AGENCY]?

1. **Let’s talk for a minute about parenting a child with special needs. What types of information or skills were provided from the agency for those of you who received training on this topic?**
   1. *If needed:* Did this information include parenting strategies about the possible challenges involved with caring for a child with special needs?
      1. Did these strategies include specific helpful techniques that you could implement to care for a child with special needs?
2. **Looking now at the ‘navigating systems’ column: for those of you who received training or information on that, did this include information about resources or steps to obtain appropriate assessment, diagnosis, or medical care for children who may have been prenatally exposed to substances**?
3. **Let’s go back to prenatal substance exposure, our main focus today. By a show of hands, who would like more information about prenatal substance exposure?**
4. **Are there topics related to prenatal substance exposure that you would like to learn more about? If so, what would you like to learn more about?** *If needed:* This could include information about the effects of specific substances, strategies for working with children at various ages, etc.

*[Assistant record responses on chart paper. Once list is compiled, read through and ask participants to hold up a yellow triangle card if the topic is somewhat of a priority/interest and a green circle if it is a high priority/interest. Instruct participants to not hold anything up if the topic is of low priority or low interest]*

* 1. *[For top 1-3 responses]* Who would like to say a word or two about why you selected topics as a high a priority/interest?

***For the next series of questions, I’d like to learn more about your experiences providing care for a child that you know or suspect has had prenatal exposure to alcohol or other drugs. Please consider the child or children in your care now as well as ones you cared for in the past. If you haven’t cared for any children who have been prenatally exposed to substances, please share about a child you’ve cared for who with special needs. Please remember that everything you share today will be kept private by our study team. We would ask that you would not share what you hear today outside of this group.***

1. **First, have you provided care for a child that you knew or suspected may have had special needs?** 
   1. For those who weren’t initially told that the child had special needs, what made you suspect that?
2. **Have you provided care for a child that you suspected may have been prenatally exposed to alcohol or other drugs?** 
   1. What made you suspect that?
3. **Thinking about those children that you all just discussed, before you began caring for the child, what type of background information did you receive from the child welfare agency on the child?** 
   1. Did you receive any information on known prenatal substance exposures, and/or the birth mother’s substance use history?
      1. If so, what information did you receive?
         1. How was this information communicated to you?
         2. When was the information provided (e.g., during placement, pre-adoption, or at adoption)?
   2. Did you receive information related to the birth mother’s prenatal care, and/or the child’s birth?
      1. If so, how and when did you receive this information?
   3. Did you receive any new or additional information on prenatal substance exposure, the mother’s substance use history, or information about the child’s birth **after** you were already caring for the child?
      1. If so, did you ask the agency for this information or was it provided to you?
   4. If you did suspect prenatal exposure to alcohol or other drugs, in what ways, if any, did you communicate with agency staff about what support you needed, or what you or the child in your care were experiencing?
      1. For those of you that did communicate with agency staff, what was the response?
         1. *If needed:* Did you feel like you were treated respectfully and that agency staff acknowledged your concerns?
   5. **If you suspected prenatal exposure to alcohol or other drugs, what additional services or supports, if any, did child welfare agency staff provide you with?**

*[If unclear, probe: connect you with agency staff person, pediatrician, teacher, respite care, assessment/diagnostic services/specialized clinic, etc.]*

1. **Thinking about the situations each of you just described, to what extent did you feel the [local child welfare agency] prepared you to parent these children and meet their needs?**

***If you didn’t feel at all prepared, please hold up a red square card . If you felt fully prepared, please hold up a green circle card. And if you fall somewhere in the middle and felt somewhat prepared, please hold up a yellow triangle card.***

*[Have note take record counts and participants who indicated both cards]*

* 1. For those who held up a yellow triangle or red square card, tell me a little more about what would have helped prepare you better. If you aren’t sure what would have helped prepare you better, you can just say what types of issues you experienced that you would have liked to be more prepared for.
  2. For those who held up a green circle card, please explain what helped you to feel prepared.

1. **What other thoughts, if any, do you have regarding the care or treatment of children who were prenatally exposed to substances that you would like to share at this time?**
2. **The information you have provided is really useful for increasing our understanding of current practices related to prenatal substance exposure, and our understanding of the needs of parents and caretakers. In addition to what we have already discussed, is there anything else that you would like to share about how the [local child welfare agency] could better support your needs in caring for these children, or the needs of these children?**

*[After the conclusion of the questions, collect all participants name cards/background information cards and store all of the poster paper used to record responses.]*

***Thank you very much for taking time to share your thoughts. Please remember what you shared is private and you will not be identified in any reports or publications. You may also reach out with further questions or additional information if you wish using the contact information included in your copy of the consent form.***

End