

# NSLI-Y Evaluation Parent Survey

**Note: Survey will be online in Dexis' SurveyGizmo system. Therefore, formatting of specific questions may differ in the final presentation.**

**Entry Screen:**

Thank you for taking the time to participate in the NSLI-Y evaluation!

The National Security Language Initiative for Youth (NSLI-Y) is funded by the U.S. Department of State, Bureau of Educational and Cultural Affairs (ECA), which has contracted the Dexis Consulting Group to conduct an independent evaluation of NSLI-Y programs between 2008 and 2017. You have received an invitation to participate in this survey because ECA's records show that your daughter or son participated in a NSLI-Y program in that period.

The purpose of this evaluation is to assess NSLI-Y's progress to date and to provide ECA and its partners with lessons learned and recommendations to improve the impact and effectiveness of programs in the future. You have a unique perspective to contribute to this evaluation. We would like to learn about your observations of the NSLI-Y program to better understand the progress, successes, and challenges of NSLI-Y so far. This survey will take approximately 8-9 minutes to complete.

**Please note that your participation in this survey is voluntary, and you are free to end the survey at any time. By clicking the "Consent and enter survey" button below, you are consenting to the following terms:**

- Any response you provide may be reported in the final report as part of the aggregated quantitative analysis or de-identified qualitative analysis of open-ended responses.
- Responses may be reported by specific demographic category, program year, or program site. The only identifying information used will be the demographic information provided in the final section of the survey.
- De-identified data files will be submitted to ECA at the completion of the evaluation (without names or any contact information).
- The data you provide may be reanalyzed at a later date for a follow-up study or other purpose as approved by ECA.

If you have any questions about this survey or the NSLI-Y evaluation more broadly, you can contact the Dexis evaluation team at [insert email address].

Please answer the questions to the best of your ability and use the comment boxes to provide fuller answers and more insight on your experiences with NSLI-Y. Thank you in advance for your time and input!

**CONSENT TO PARTICIPATE**

By clicking the button to enter the survey below, you are giving your consent to participate in this evaluation. If you do not wish to participate, please click the exit survey link below.

<p>OMB Control Number: 1405-XXXX Burden Estimate: 8.6 minutes Expiration Date: XX-XX-XXXX</p>	<p><b>PRA Statement</b> Public reporting burden for this collection of information is estimated to average 8.6 minutes per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please access the internet by going to <a href="http://www.regulations.gov">www.regulations.gov</a>. You can search for the document by entering "docket number: DOS-2019-0001" in the search field, then clicking the "Comment Now" button.</p>
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Consent and Enter Survey

Refuse and Exit Survey

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**PRA Statement**

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Thank you for taking the time to complete this NSLI-Y Parent Survey. There are no right or wrong answers, and no personal information and no individual level data will be released by Dexis Consulting Group. Please answer each question to the best of your ability. Thank you.

[Note: Depending on how the data are received, we hope to be able to provide a link that is personalized so year and country of study questions do not need to be asked. If parent database does not include fields for student's year and country of study, we will need to add those questions in the demographic section at the end of the survey, as included here. Ideally, we will be able to screen the parent list to verify whether multiple children in one family might have participated as well – if they have, we will ask them to respond based on their experience with the first participating child.]

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## INTRODUCTION

In this section, we would like to understand your connection to the NSLI-Y program.

1. How many of your children participated in NSLI-Y programs? \_\_\_\_\_ [validation field – no more than 3 should be permitted]
2. What was the time frame of your child's/children's program(s)? *[Please select no more than one response per child that participated.]*

- Summer (6-week program) (01)
- Academic year (9-month program) (02)
- Semester (4-month program) (03)
- Multiple programs – Summer and academic year (same child) (04)
- Multiple programs – Summer and semester (same child) (05)
- Multiple programs – Semester and academic year (same child) (06)
- Multiple programs – Multiple summers (same child) (07)

3. Location of child's/children's NSLI-Y program site(s): *(Please select all that apply.)*

- a. \_\_\_\_\_ China (01)
- b. \_\_\_\_\_ Egypt (07)
- c. \_\_\_\_\_ Estonia (09)
- d. \_\_\_\_\_ India (04)
- e. \_\_\_\_\_ Jordan (08)
- f. \_\_\_\_\_ Latvia (10)
- g. \_\_\_\_\_ Moldova (11)
- h. \_\_\_\_\_ Morocco (05)
- i. \_\_\_\_\_ Oman (06)
- j. \_\_\_\_\_ Russia (12)
- k. \_\_\_\_\_ South Korea (03)
- l. \_\_\_\_\_ Taiwan (02)
- m. \_\_\_\_\_ Tajikistan (13)
- n. \_\_\_\_\_ Turkey (14)

4. Year your child/children began his/her/their NSLI-Y program(s): *(Please select all that apply.)*

- a. \_\_\_\_\_ 2008 (01)
- b. \_\_\_\_\_ 2009 (02)
- c. \_\_\_\_\_ 2010 (03)
- d. \_\_\_\_\_ 2011 (04)
- e. \_\_\_\_\_ 2012 (05)
- f. \_\_\_\_\_ 2013 (06)
- g. \_\_\_\_\_ 2014 (07)
- h. \_\_\_\_\_ 2015 (08)
- i. \_\_\_\_\_ 2016 (09)
- j. \_\_\_\_\_ 2017 (10)

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**FOREIGN LANGUAGE BACKGROUND**

*We would like to start by understanding a little bit about your and your child’s experiences with foreign language learning and travel prior to NSLI-Y.*

5. Did your son(s) or daughter(s) speak/understand some of the target language before he/she/they participated in the NSLI-Y Program?

Yes (01)      No (02)      One (or more) did, but one (or more) did not (03)

6. Had your child/children traveled outside of the U.S. prior to participating in the NSLI-Y program?

Yes (01)      No (02)      One (or more) had, but one (or more) had not (03)

7. Had your child/children traveled to his/her country of study prior to participating in the NSLI-Y program?

Yes (01)      No (02)      One (or more) had, but one (or more) had not (03)

8. Had your child/children traveled to any other country that speaks the target language prior to participating in the NSLI-Y program?

Yes (01)      No (02)      One (or more) did, but one (or more) did not (03)

8a. If yes, which country(ies)? \_\_\_\_\_ [write in]

9. Had you traveled to your child’s/children’s country(ies) of study prior to participating in the NSLI-Y program?

Yes (01)      No (02)      Yes to one (or more), but not to another (03)

10. Had you traveled to another country that speaks the target language(s) prior to your child/children participating in the NSLI-Y Program?

Yes (01)      No (02)      Yes to one (or more), but not to another (03)

10a. If yes, which country(ies)? \_\_\_\_\_ [write in]

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**THE NSLI-Y PROGRAM EXPERIENCE**

*In this section of the survey, we would like to capture your thoughts about the NSLI-Y program itself. If more than one child participated in the program or your child participate more than once, please provide your overall impressions across those experiences.*

11. Overall, how did the NSLI-Y program compare to your expectations?

Better than expected (01)	Met my expectations (02)	Worse than expected (03)
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12. What recommendations or suggestions would you make to improve the NSLI-Y Program?

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13. Based on your child's/children's experience(s) with the program, would you encourage (your) other children to participate in the NSLI-Y program?

Yes (01) No (02)

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**EFFECTS OF THE NSLI-Y PROGRAM**

*In this section, we would like you to share your perceptions of the results and impacts of the NSLI-Y experience. If more than one child participated in the program or your child participate more than once, please provide your overall impressions across those experiences.*

**14.** To what extent, if at all, did the NSLI-Y program affect your child’s personal development? (Some areas might include self-confidence, leadership maturity, problem-solving skills, etc.)

Not at all (01) (Go to 15)	To a small extent (02) (Go to 15)	To a moderate extent (03) (Go to 14a)	To a great extent (04) (Go to 14a)	Don’t know (05) (Go to 15)
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**14a.** Please describe one example of the change(s) you observed in your child’s personal development.

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**15.** To what extent, if at all, did the NSLI-Y program affect your child’s academic development? (Some areas might include leadership, maturity, problem-solving, study habits, motivation to study, improved performance in foreign language study or other subjects, clearer or new direction in future studies, etc.)

Not at all (01) (Go to 16)	To a small extent (02) (Go to 16)	To a moderate extent (03) (Go to 15a)	To a great extent (04) (Go to 15a)	Don’t know (05) (Go to 16)
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**15a.** Please describe one example of the change(s) you observed in your child’s academic development.

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**16.** To what extent, if at all, did the NSLI-Y program affect your child’s career development? (Some areas might include clearer or new direction of interest, pursuit of internships or fellowships, competitiveness as a job applicant, etc.)

Not at all (01) (Go to 17)	To a small extent (02) (Go to 17)	To a moderate extent (03) (Go to 16a)	To a great extent (04) (Go to 16a)	Not applicable (child has not yet started to focus on career) (06) (Go to 17)	Don’t know (05) (Go to 17)
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**16a.** Please describe one example of the change(s) you observed in your child’s career development.

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**17.** To what extent, if at all, did the NSLI-Y program affect your child’s community service activities? (Some areas might include working with new populations, undertaking different kinds of activities, engaging to a greater or lesser degree than before, taking on leadership roles, etc.)

Not at all (01) (Go to 18)	To a small extent (02) (Go to 18)	To a moderate extent (03) (Go to 17a)	To a great extent (04) (Go to 17a)	Don’t know (05) (Go to 18)
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**17a.** Please describe the one example of the change(s) you observed in your child’s community service activities.

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**18.** In your view, how and in what contexts is your child using the skills he/she gained through the NSLI-Y program?

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**19.** Do you believe your child gained greater understanding about his/her host culture or society from the NSLI-Y Program?

Yes (01) No (02)

**20.** To what extent, if at all, did your child share information with you about his/her program location with you during and after the program?

*[Please check only one response for each topic.]*

	Topics	No Sharing (01)	Minimal Sharing (02)	Moderate Sharing (03)	Substantial Sharing (04)	Unsure/Don’t Know (09)
a.	Daily life in program location(s)					
b.	Education system in program location(s)					
c.	Culture in program location(s)					
d.	Religious and ethnic diversity in program location(s)					
e.	Predominant national values in					

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	program location(s)					
f.	Political system in program location(s)					
g.	Economy in program location(s)					

**21.** To what extent did the information he/she shared change your knowledge of and attitudes toward the country/countries in which your child studied?

No Change (01) (Go to 22)	Minimal Change (02) (Go to 22)	Moderate Change (03) (Go to 21a)	Significant Change (04) (Go to 21a)	Don't Know (09) (Go to 22)
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**21a.** Please briefly describe how your knowledge and/or attitude changed.

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**22.** To what extent, if at all, did your child share information with others in his/her personal network of family, friends, peers, or others his/her program location?

*[Please check only one response for each topic.]*

	Topics	No Sharing (01)	Minimal Sharing (02)	Moderate Sharing (03)	Substantial Sharing (04)	Unsure/ Don't Know (05)
a.	Daily life in program location(s)					
b.	Education system in program location(s)					
c.	Culture in program location(s)					
d.	Religious and ethnic diversity in program location(s)					
e.	Predominant national values in program location(s)					
f.	Political system in program location(s)					
g.	Economy in program location(s)					

**23.** To what extent did the information he/she shared change others' knowledge of and attitudes toward the program location(s)?

No Change (01) (Go to 24)	Minimal Change (02) (Go to 24)	Moderate Change (03) (Go to 23a)	Significant Change (04) (Go to 23a)	Don't know (05) (Go to 24)
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23a. Please briefly describe how their knowledge and/or attitude changed.

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24. In your view, in what ways, if any, did the NSLI-Y experience enable your child to help the wider community?

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**DEMOGRAPHIC ITEMS**

25. Sex:            Male (01)                            Female (02)                            Other (03)

26. Do you speak a language other than English?                            Yes (01)                            No (02)

26a. If so, which one(s)? \_\_\_\_\_

27. Where do you live (or reside most of the time)?

- Rural area (population less than 2,500) (01)
- Small city or town (2,501 – 50,000) (02)
- Medium-sized city (50,001 – 500,000) (03)
- Major city (500,001 or greater) (04)

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You have completed the NSLI-Y Parent survey. Thank you again for your time and contribution to this important study!

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