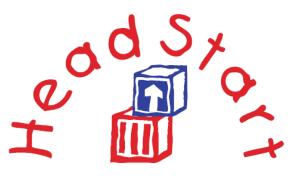
OMB Number: 0970-0151 Expiration Date: XX/XX/20XX





American Indian and Alaska Native

family and child experiences survey

AI/AN FACES 2019

Experiences in Head Start

American Indian and Alaska Native Head Start Family and Child Experiences Survey 2019 (AI/AN FACES 2019)

Center Director Survey

Spring 2020

AFFIX LABEL HERE

Paperwork Reduction A a person is not required OMB control number for collection of information gather the data needed time estimate(s) or sugge Washington, DC 20002, Attention: Lizabeth Malone. not conduct or sponsor, and ontrol number. The valid ired to complete this h existing data resources, cerning the accuracy of the 00 1st Street, NE, 12th Floor,

Introduction

Mathematica Policy Research is conducting the American Indian and Alaska Native Head Start Family and Child Experiences Survey 2019 (AI/AN FACES 2019) under contract with the Administration for Children and Families (ACF) of the U.S. Department of Health and Human Services (DHHS).

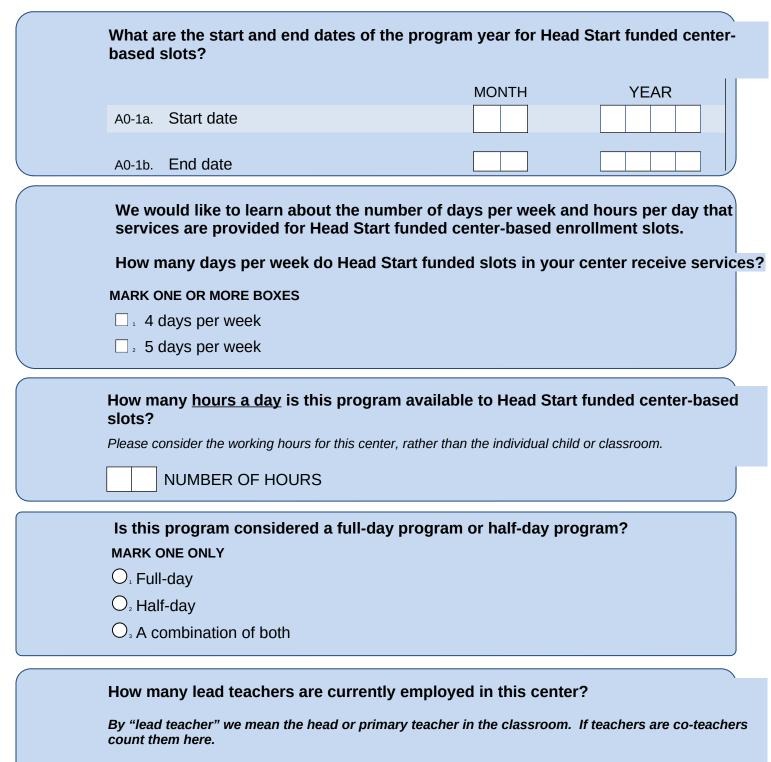
We need for you to complete this brief survey which asks you about your center and staff as well as your thoughts about program management and your background.

Thank you for taking the time to complete this survey. Questions are not always numbered sequentially, so please answer questions in the order they appear, regardless of the question number. Additionally, you may be told to skip some questions because they do not apply to you.

Your participation in the study is voluntary and you may refuse to answer any questions you are not comfortable answering. Your answers will not be shared with other staff at your center, or anybody else not working on this study. Please be assured that all information you provide will be kept private to the extent permitted by law. The information you provide to the study will be protected and will only be seen by selected members of the study team. The survey will take about 20 minutes of your time to complete.

A. Staffing and Recruitment

First, we have some questions about your center, staffing and recruitment.





How many of these lead teachers were new to the center this year?
By "lead teacher" we mean the head or primary teacher in the classroom. If teachers are co-teacher count them here.
LEAD TEACHERS
In the past 12 months, how many lead teachers left and had to be replaced?
By "lead teacher" we mean the head or primary teacher in the classroom. If teachers are co-teacher count them here.
LEAD TEACHERS
Does your center serve any children or families who speak a language other than English at home?
O Yes
O NO GO TO SECTION AB, PAGE 5
Other than English, what languages are spoken by the children and families who ar part of your center?
MARK ONE OR MORE BOXES
□ _s Native language(s) – <i>Specify</i>
□ ₁₂ Spanish
Other – Specify
Do you have any lead teachers or assistant teachers who are bilingual?
By "lead teacher" we mean the head or primary teacher in the classroom. If teachers are co-teache count them here.
O ₁ Yes
O₀ No GO TO A_C3j

Other than English, which of the languages that are spoken by the children and families in your center are also spoken by any lead teachers or assistant teachers in your center?
By "lead teacher" we mean the head or primary teacher in the classroom. If teachers are co-teachers count them here.
MARK ONE OR MORE BOXES
□ ₃₅ Native language(s) – <i>Specify</i>
□ 12 Spanish
Other – Specify
Are you unable to provide interpreters or translate written materials in any of the languages spoken by children and families that are part of your center because you do not have staff members that speak those languages? O_1 Yes O_2 No

AB. NATIVE CULTURE/LANGUAGE AT CENTER

These next questions are about use of Native culture and language at your center.

Does your center have a cultural/language elder or specialist?
By cultural/language elder or specialist we mean someone that you may rely on or consult with in regards to culture or language. Though culture and language are interrelated, sometimes an elder specialist might only be consulted on one or the other, and not both.
O Yes
Who is your cultural/language elder or specialist?
MARK ONE OR MORE BOXES
□ A spiritual leader
\Box_{2} An influential member of the tribal or cultural community
$\Box_{\mathfrak{s}}$ A member of the tribal or cultural community
□₄ Other – Specify
Do children at your center receive Native language lessons? O Yes O NO GO TO AB13, PAGE 7
What languages are they taught through Native language lessons? Please list all Native languages taught:
1
2
2 3
3

Who teaches the Native language lessons?

MARK ONE OR MORE BOXES

- Lead classroom teacher
- □₂ Assistant classroom teacher
- □ Paid aides
- □ Cultural/language elder or specialist
- □ Other Specify

In what ways does your center support parent engagement in children's Native language learning?

MARK ONE OR MORE BOXES

- \Box_1 Offering language lessons to parents
- \Box_2 Sending home flyers about the words and phrases children are learning
- Sending home language curriculum materials (e.g. curriculum manuals)
- Offering single events or workshops about the Native language and Native language learning (e.g. family nights)
- □ Sharing multimedia such as CDs or videos with language resources (e.g., audio or video of the language being spoken)
- □ Language communities
- □ , Other Specify

During this program year, how often have children in your center done the following as part of their Head Start activities?

		MARK ONE FOR EACH ROW						
		DAILY	WEEKLY	MONTHLY	YEARLY	NEVER	NOT APPROPRIATE IN OUR COMMUNITY	
a.	Listened to Elders or cultural knowledge holders tell traditional stories	O_1	O_2	\bigcirc_{3}	\bigcirc_4	\bigcirc_{5}	$\bigcirc_{\scriptscriptstyle 6}$	
b.	Participated in traditional activities such as gathering/preparing food, hunting, fishing, planting, harvesting, or other traditional activities	O,	\bigcirc_2	O ₃	O 4	Os	\bigcirc_{ϵ}	
C.	Observed or listened to presentations about gathering/preparing food, hunting, fishing, planting, harvesting, or other traditional activities	O1	\bigcirc_2	O ₃	0.4	0,5	\bigcirc_{6}	
d.	Participated in some aspect of a community's social dancing, singing, or drumming traditions during the Head Start day	O_1	\bigcirc_2	O ₃	\bigcirc_4	\bigcirc_{5}	$\bigcirc_{\mathfrak{s}}$	
e.	Participated in a program event outside the Head Start day that included traditional dancing, singing or drumming	\bigcirc_1	\bigcirc_2	\bigcirc_3	\bigcirc_4	\bigcirc_{5}	$\bigcirc_{\mathfrak{s}}$	
f.	Participated in traditional craft making activities, (for example: beading, weaving, making pottery, jewelry, or dance regalia)	\bigcirc_1	\bigcirc_2	O3		\bigcirc_5	O 6	
g.	Had the opportunity to observe or participate in a							

What percentage of center administrative staff and teachers are AI/AN members? Include both staff who come from the same or different tribes as the children and families served.

PERCENT OF TEACHERS OR ASSISTANT TEACHERS

PERCENT OF ADMINISTRATIVE STAFF

The next questions are about efforts to promote staff education and training.

di	Programs and centers can support staff's professional development in a lot of different ways. Does your program or center offer the following to teachers, family child care providers, or home visitors?							
		MARK ONE FO	R EACH ROW					
		YES	NO					
2.	Support/funding to attend Tribal, regional, state, or national early childhood conferences	O_{i}	\bigcirc_{\circ}					
5.	Paid substitutes to allow teachers time to prepare, train, and/or plan	$\bigcirc_{_{1}}$	\bigcirc_{\circ}					
6.	MCoaching/mentoring		\bigcirc_{\circ}					
1.	Other types of consultants hired to work directly with staff to address a specific issue or concern	$\bigcirc_{_{1}}$	\bigcirc_{\circ}					
7.	Workshops/trainings sponsored by the program	$\bigcirc_{_{1}}$	\bigcirc_{\circ}					
8.	Workshops/trainings provided by other organizations	O_1	\bigcirc_{\circ}					
9.	A community of learners, also called a peer learning group (PLG) or professional learning community (PLC), facilitated by an expert	O_1	O,					
	1 Time during the regular work day to participate in Office of 0. Head Start T/TA webinars		0.					
	1 1. Tuition assistance for Associate's or Bachelors' courses	O_1	\bigcirc_{\circ}					
	1 2. Onsite Associate's or Bachelor's courses	\bigcirc_1	O_{\circ}					
	$\frac{1}{3}$. Tuition assistance for courses toward getting a credential	O_1	\bigcirc_{\circ}					
	9 9 Other – <i>Specify</i>	$\bigcirc_{_{1}}$	\bigcirc_{\circ}					

How often do the following staff typically participate in training and technical assistance activities? Is it every week, 2 or 3 times a month, monthly, once every few months, or once a year or less?

By "lead teacher" we mean the head or primary teacher in the classroom. If teachers are co-teachers count them here.

			MARK	ONE FOR	EACH RC	w
	WEEKLY	2 OR 3 TIMES PER MONTH	MONTHLY	ONCE EVERY FEW MONTHS	ONCE A YEAR OR LESS	DON'T KNOW
a1Lead teachers	O_1	O_2	\bigcirc_{3}	\bigcirc_4	\bigcirc_{5}	Od
a2Assistant teachers	O_{1}	O_2	\bigcirc_{3}	$\bigcirc_{_4}$	$\bigcirc_{{}^{5}}$	Od
b. Family service workers	O_1	O_2	O ₃	\bigcirc_4	$\bigcirc_{{}^{5}}$	Od

Who conducts the professional development activities?

MARK ONE OR MORE BOXES

- Center or grantee staff
- Community resources
- Consultants
- □ 11 AI/AN T/TA provider
- National Head Start Association
- □₁₀ State conferences
- □ 15 Regional conferences
- □₁₆ National conferences
- Tribal conferences
- Private companies or organizations
- □ 13 OHS Regional T/TA Providers
- □₁₄ OHS National Centers
- □ 12 Cultural/language elder or specialist
- Other Specify

□ , Do not have professional development activities

	Has your center consulted with a regional T/TA specialist? O ₁ Yes O ₆ No
	Has your center consulted with <u>AI/AN</u> T/TA specialists, either early childhood education (ECE) specialists or grantee specialists? O ₁ Yes O ₆ No
	How often are teachers given a formal performance evaluation?
1	O_1 Two or more times per year
	O_2 Once a year
	O_{3} Once every two years
	O_4 Once every three years
	$O_{\rm s}$ Once every four years or more
	O_{\circ} No formal evaluations are conducted

E. Curriculum and Assessment

The next questions are about curriculum and assessment.

			MA	RK ONE FOR E	ACH ROW	
		NEVER	ONCE AT THE BEGIINNING OF THE YEAR	ONCE AT THE END OF THE YEAR	BEGINNING AND END OF YEAR	MORE OFTE THAN TWIC PER YEAF
a.	Reported to parents	O_{1}	\bigcirc_2	\bigcirc_{3}	\bigcirc_4	O_{5}
b.	Reported to program administrators	$\bigcirc_{_{1}}$	\bigcirc_2	O,	\bigcirc_4	\bigcirc_{5}
С.	Recorded in child's record	O_1	$\bigcirc_{\scriptscriptstyle 2}$	$\bigcirc_{\mathfrak{s}}$	\bigcirc_4	O ₅

A parent education or support curriculum aims to build parents' knowledge and give parents the opportunity to practice parenting skills that support their children's learning and development. Parents are the intended audience of this type of curriculum.

 \bigcirc

No GO TO SECTION K, PAGE 12

K. Physical Activity and Nutrition

The next questions are about physical activity and nutrition in your program.

Does your center have a policy stating the amount of gross motor activity time children should receive each day? Gross motor activity for children includes activities where the children use their large muscles for running, walking, dancing, kicking, keeping their balance, jumping, throwing, catching, and other types active play. Questions in this part of the survey are about how children spend their active play time inside and outside, the ways in which you encourage activities, and communication with parents about the importance of gross motor activity. O ₁ Yes O ₂ No GO TO K3
On a typical day, how much time does your policy state the children should spend doing gross motor activity <u>outdoors</u> and <u>indoors</u> ?
HOURS MINUTES
Have you talked with any of your teachers about children's weight?
O. Yes
Have you talked with any of your teachers about how to talk to parents about children's weight?
O. Yes
O_{\circ} No

How ofte	n do you do any of the following?					
			MA	RK ONE F	OR EACH	ROW
		NEVER	ABOUT ONCE OR TWICE A YEAR	A FEW TIMES A YEAR	ABOUT ONCE A MONTH	MORE FREQUENT THAN ONCE MONTH
a.	Send information about physical activity home to parents			$\bigcirc_{\scriptscriptstyle 3}$		O_5
b.	Invite parents to participate in program education activities about physical activity		O_2	O ₃	O_4	\bigcirc_{5}
C.	Share information with parents about programs that can help foster physical activity outside of the classroom such as programs at a local community center	O,	02	O ₃	04	O _s
d.	Invite parents to participate in					

H. Overview of Program Managemen

The next questions are about program management.

	MARK ONE FOI EACH ROW		
		YES	NO
a.	College or university course(s) related to your role as a manager or leader (for example, a course on leadership, management and administration, human resources, or a course for a specific license, certificate, or other type of credential)	\bigcirc_1	0.
b.	Visits to other Head Start or early childhood programs to improve your own work as a center director	O_{i}	0
C.	Formal coaching/mentoring that is provided by your program	O_1	\bigcirc
d.	A network or community of Head Start and other early childhood program leaders organized by someone outside of your program, for example a professional organization	O_1	\bigcirc
e.	A leadership institute offered by Head Start A leadership institute is a type of conference or workshop that provides an opportunity to learn new skills or discuss important issues related to leadership. Sometimes leadership institutes are specifically for staff who have named leadership roles in their centers or programs (like directors or managers), but leadership institutes can also include other types of staff who want to learn about leadership issues.	\bigcirc_1	O
f.	A leadership institute offered by an organization other than Head Start	O_1	0
g.	Trainings related to your role as a manager or leader (for example: NIHSDA Management Training Conference, Native American Child and Family Conference, Head Start governance training, CLASS training	\bigcirc_1	\bigcirc

What do you need additional help with to do your job as a center director more effectively? Select the top three.
MARK UP TO THREE (3) BOXES
Program improvement planning
□ ₅ Budgeting
□ . Staffing (hiring)
\Box_{10} Data-driven decision making
\Box_{15} Establishing good relationship with OHS, program and/or grant specialist
\Box_{13} Leadership skills (for example, diplomacy skills, coaching skills)
Teacher evaluation
\Box $_{\circ}$ Evaluation of other program staff
\square $_{\circ}$ Teacher professional development (for example, conducting classroom observation
Educational/curriculum leadership
\Box_{12} Integrating Native culture and language into the curriculum
\Box $_{\circ}$ Creating positive learning environments

S)

- Child assessment
- \Box_{11} Working with parents, extended family and community caregivers
- □ Building relationships with Tribal leadership
- $\Box_{\mbox{\tiny 16}}$ Working with and partnering in the community
- □₁₇ Assessing community needs

I. Employment and Educational Background

Now, we'd like to ask you some questions about your professional background and your job with Head Start.

In total, how many years have you been a director
Please round your response to the nearest whole year.
NUMBER OF YEARS
IO. In <u>any</u> early childhood program
I2a. In <u>any</u> Head Start program
I2b. Of <u>this</u> Head Start center
In total, how many years have you worked
Please round your response to the nearest whole year.
NUMBER OF YEARS
I2. With <u>any</u> Head Start program
I2c. As part of <u>any</u> Head Start program's management team.
I2d. As a teacher or home visitor in <u>any</u> Head Start program
In what month and year did you start working for this Head Start program?
MONTH
How many hours per week are you paid to work for Head Start?
HOURS
What is your total annual salary (before taxes) as a center director for the current
program year?
\$. 0 0 DOLLARS PER YEAR

What is the highest grade or year of school that you completed?

MARK ONE ONLY

- O_1 Up to 8th Grade
- O₂ 9th to 11th Grade
- \bigcirc 12th Grade, but No Diploma
- O₄ High School Diploma/Equivalent
- O₅ Vocational/Technical Program after High School
- Or Some College, but No Degree **GO TO I14, PAGE 18**
- O₁ Associate's Degree
- O₃ Bachelor's Degree
- O ... Graduate or Professional School, but No Degree
- O_{11} Master's Degree (MA, MS)
- O₁₂ Doctorate Degree (Ph.D., Ed.D.)
- O₁₃ Professional Degree after Bachelor's Degree (Medicine/ MD, Dentistry/ DDS, Law/JD, etc.)

In what field did you obtain your highest degree?

MARK ONE ONLY

- O Child Development or Developmental Psychology
- O₂ Early Childhood Education
- O₃ Elementary Education
- Special Education
- O ... Education Administration/Management & Supervision
- O ... Business Administration/Management & Supervision
- \bigcirc Other field *Specify*

	your schooling include 6 or more college courses in early childhood education
\bigcirc	Id development?
	Yes GO TO I15b
	No IF YOU COMPLETED SOME COLLEGE, BUT DO NOT HAVE A DEGREE,
	GO TO I15b, OTHERWISE GO TO I15
	ve you completed 6 or more college courses in early childhood education or child velopment since you finished your degree?
O_1	Yes
\bigcirc	No
	you currently hold a license, certificate, and/or credential in administration of ea Idhood/child development programs or schools?
	Yes
\bigcirc	No
Do	you have a Child Development Associate (CDA) credential?
\bigcirc	Yes
\bigcirc	No
Do	you have a state-awarded preschool teaching certificate or license?
	you have a state-awarded preschool teaching certificate or license? teaching certificate or license" is usually granted to a teacher by a state department or agency th
A "t has	teaching certificate or license" is usually granted to a teacher by a state department or agency th authority over the education and/or early childhood system in that state. The certificate or licens
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A "thas is g dep thos O DO pre A "thas is g dep	teaching certificate or license" is usually granted to a teacher by a state department or agency the authority over the education and/or early childhood system in that state. The certificate or licentiven when the teacher has met certain education or experience requirements that are set by the partment or agency. Usually a teacher would have to apply for a certificate or license after meeting requirements. Yes No you have a state-awarded teaching certificate or license for ages/grades other the sechool? teaching certificate or license" is usually granted to a teacher by a state department or agency the authority over the education and/or early childhood system in that state. The certificate or license is usually granted to a teacher by a state department or agency the authority over the education and/or early childhood system in that state. The certificate or license is usually granted to a teacher by a state department or agency the authority over the education and/or early childhood system in that state. The certificate or license is usually granted to a teacher by a state department or agency the authority over the education and/or early childhood system in that state. The certificate or license is usually departed to a teacher by a state department or agency the authority over the education and/or early childhood system in that state. The certificate or license is usually departed to a teacher by a state department or agency the authority over the education and/or early childhood system in that state. The certificate or license is usually a teacher would have to apply for a certificate or license after meeting is usually a teacher would have to apply for a certificate or license after meeting is usually a teacher would have to apply for a certificate or license after meeting is usually a teacher would have to apply for a certificate or license after meeting is usually a teacher would have to apply for a certificate or license after meeting is usually a teacher would have to apply for a certificate or licens

	Including your post-secondary degree, graduate degree, and certification progetric etc., are you currently enrolled in any additional training or education?					
	O ₁ Yes					
	What kind of training or education program are you enrolled in?					
	MARK ONE OR MORE BOXES					
	Child Development Associate (CDA) Degree Program					
	Teaching Certificate Program					
	Special Education Teaching Degree Program					
	A Associate's Degree Program					
	Bachelor's Degree Program					
□。Graduate Degree Program (MA, MS, PH.D. or Ed.D.)						
	License, certificate and/or credential in administration of early childhood/ child development programs or schools					
	\Box_* Continuing Education Units (CEUs)					
	Other – Specify					
	What is your sex?					
	O ₃ Prefer not to answer					
	In what year were you born?					
	YEAR					
	Are you of Spanish, Hispanic, or Latino origin?					
	O No					

What is your race? MARK ONE OR MORE BOXES					
Black or African American					
American Indian or Alaska Native					
ar Asian					
Native Hawaiian, or other Pacific Islander					
another race – Specify					
De you energy a large ather than English					
Do you speak a language other than English					
O Yes O No GO TO SECTION IJ, PAGE 21					
What languages other than English do you speak?					
□ ³³ Your Native language – <i>Specify</i>					
\Box Other Netive language(a) - Creatify					
□ Multion Other Native language(s)– <i>Specify</i>					
 Spanish Other - Specify 					

IJ. YOUR FEELINGS ABOUT YOUR JOB AND CENT

The next questions are about how you feel about your job and the services provided by your center.

In your current Head Start position(s), how much do the following make it harder for you to do your job well? Do they make it a great deal harder, somewhat harder, or not at all harder for you to do your job well?

		MARK ONE FOR EACH ROW		
		GREAT DEAL HARDER	SOMEWHAT HARDER	NOT AT ALL HARDER
a.	Time constraints (not enough hours in the day)	O_{3}	O_2	O_1
b.	Too many conflicting demands	\bigcirc_{3}	O_2	O_1
C.	Not a high enough salary for the job demands	O ₃	O_2	
d.	Lack of support staff	\bigcirc_{3}	O_2	O_1
e.	Not enough training and technical assistance for professional development	O ₃	O_2	
f.	Not enough support and communication from administration	\bigcirc_{3}	O_2	O_1
g.	Not enough funds for supplies and activities	\bigcirc_{3}	O_2	
h.	Dealing with a challenging population	\bigcirc_{3}	O_2	O_1
i.	Staff turnover	\bigcirc_{3}	O_2	
j.	Lack of parent support	O ₃	O_2	
k.	Lack of qualified teaching staff	\bigcirc_{3}	O_2	O_1
0.	Tribal leadership changes	\bigcirc_{3}	O_2	
I.	Anything else? Specify	\bigcirc_{3}	\bigcirc_2	O_1

End

Thank you very much for participating in AI/AN FACES 2019!