Attachment L. Participant Protocol

OMB No. 0584-[NEW]

*Job Search as a Supplemental Nutrition Assistance Program (SNAP) Employment and Training (E&T) Component*

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**Project Officer: Danielle Deemer**

Office of Policy Support

Food and Nutrition Service

U.S. Department of Agriculture

1320 Braddock Place

Alexandria, VA 22314

703.305.2952

danielle.deemer@fns.usda.gov

E&T Participant Interview Protocol

**OMB Number: 0584-XXXX**

**Expiration Date: XX/XX/XXXX**

My name is *[name],* and I’m a researcher at Insight Policy Research*.* As you may know, Insight is conducting a study for the U.S. Department of Agriculture’s Food and Nutrition Service (FNS) about the role of job search and job search training activities in employment and training programs run through the Supplemental Nutrition Assistance Program (or SNAP, also known as Food Stamps). The study seeks to better understand the overall role of these activities in serving people like yourself and how well these activities work in helping people find a job.

My colleagues and I are interviewing other current and former SNAP participants to learn about their experiences. Before this interview, we also spoke with State officials and training providers to learn more about the job search programs in your State.

I expect our conversation will take about 30 minutes, and you will receive a generic $30 gift card in the mail after completing the interview.

I want to let you know that your participation in this interview is voluntary. You don’t have to answer any questions you don’t want to, and you can end the interview at any time. What you say will be kept private, except as otherwise required by law. The study team will summarize what we talk about today and put it together with information that we gather from other participants like you. Nothing you say will ever be linked to your name and your name will never appear in our report. We will not share the information you provide with anyone outside the study team, including your caseworkers or anyone associated with your State’s SNAP agency. Nothing you say will affect your SNAP benefits or eligibility for SNAP [*name used by State*] or any other programs.

I will take notes over the course of the interview and would like to audio record the conversation to help me complete my notes after the call. The recording will not be shared with anyone outside the study team.

Do you have any questions before we get started?

Do I have your permission to record our conversation? You may stop the recording at any time.

*[Confirm permission before recording starts. Do not record without respondent permission.]*

*[Interviewer Note*: *In question B.1, confirm the job search activity the client participates/participated in. In subsequent questions, refer to this activity directly, whenever “[activity]” appears in the question.]*

*According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-xxxx. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the following address: U.S. Department of Agriculture, Food and Nutrition Services, Office of Policy Support, 1320 Braddock Place, Alexandria, VA 22314, ATTN: PRA (0584-xxxx\*). Do not return the completed form to this address.*

1. Understanding and Awareness of Job Search Objectives
2. I want to learn a little more about you and your experience with *[SNAP E&T program name*]. Information we received from *[SNAP agency*] says you participated in a job search activity through [*the SNAP Employment and Training program/or <insert local program name>*]. By job search activity, I mean [*describe job search activities offered by State and listed in State plans (e.g. assistance in writing resumes and cover letters, financial literacy classes, or career assessments*)].
3. Are you currently participating in something like this? If not, when did you last participate?
4. What is the name of the provider(s)/organization(s) where you participate(d) in these activities?
5. How long have/did you participate(d) in job search activities?
6. Please tell me a little about the job search activity in which you participate(d).

[*Probe for details: What did [activity] involve? How did the provider help during [activity]? Etc.*]  
[*Probe*: Are there any other activities you participate(d) in?]

[*If the participant cannot recall activity, vaguely describe the job search activities the State offers and ask if he or she participated in one of these.*]

1. You did [*activity*]. Were other services offered to you? Did you get to choose what you wanted to participate in or did the provider tell you what you had to do?
2. [*If given choice*] How did you find out about each service offered to you?

[*Probe for*: activities offered by State but not mentioned by participant]

* + 1. What made you choose the activity you were/are in?

1. [*If not given choice*] Do you know of any other job search activities available to SNAP participants?

[*Probe for*: specific activities offered by State]

1. What made you decide to participate in [*activity*]?

[*Probe for voluntary participants*: What made you decide to work with [*provider*] instead of searching for a job on your own?

1. Expectations and Experiences of Participating in Job Search
2. Before you started participating in [activity], what did you think it would be like?
3. How did that compare to what it was actually like?
4. Did you work with your case manager to create a plan that described what you were hoping to get out of [*activity*]? [*Interviewer Note*: We are asking whether the client completed an Individualized Employment Plan (IEP)]
5. [*If yes*] What where your short and long-term goals?
6. [*If no*] What were you hoping to get out of [*activity*]?
7. [*Current only*] How long have you been participating in [*activity*]?
8. How long do you think you will continue to participate in [*activity*]? Why?
   * 1. Does [*activity*] have an end date? Or can you keep attending as long as you want? How will you know that you finished [*activity*]*?*
9. Who do you report your participation in [*activity*] to? How? [*Probe for:* in person, online, via phone]
10. [*Former only*] When you started, how long did you think you would be participating in [*activity*] through SNAP?
11. [*Former only*] About how long did you actually participate?
12. Why did you stop participating? What would have kept you involved?
13. Were you able to participate for as long as you wanted or did the provider tell you when to stop?
    * 1. [*If as long as you wanted*] How did you decide to stop participating?
14. What do you imagine would be a successful result of participating in [*activity*]? [*Probe*: finding a job faster, finding a better job, gaining interview skills, etc.]
15. [*Current only*] Do you expect that will happen? How come? [I*f no, probe for barriers such as transportation, children, etc.*]
16. [*Former only*] Did that happen? If not, how come? [*If no, probe for barriers such as transportation, children, etc.*]
17. [*If not discussed earlier*] Other than achieving that successful result, what are/were you hoping to get out of participating in job search?
18. [*Former only*] How did participating in [*activity*] affect your SNAP benefits? Please explain. [*Probe for*: maintaining/losing eligibility, deciding to stop participating in SNAP, finding employment and not needing SNAP]
19. Satisfaction

We talked about expectations you had for [*activity*], but I also want to discuss what you needed out of [*activity*].

1. How satisfied are/were you with the job search activity? Did you get what you needed from it?
2. [*If yes*] How so?
3. [*If no*] Why not? What would you change about it if you could? [*Probe for*: activities, support services, and administrative changes]
4. What other services could be offered to help meet SNAP participants’ needs? [*Probe for job search activities not enrolled in*]
5. What did you like best about participating in [*activity*]?
6. *[Current only]* Has that changed since you first began participating?
7. Barriers
8. What are some of the challenges you experience(d) while participating in [*activity*]?
9. Did these challenges keep you from completing [*activity*]?
10. Are you aware of any support services available to job search participants, such as transportation assistance, childcare, providing clothing for interviews, or [*add other examples from State plan]*
11. [*If yes*] Have you used any of these support services while participating in job search?
    * 1. [*If yes*] Which ones?
      2. What kinds of support services would have been useful to you?
12. [*If no*] What kinds of support services would you have used if you had known they were available to you?
13. Participation in Other E&T Activities
14. Including past experiences with SNAP E&T, what other E&T activities have/are you participated/ing in, other than [*activity*]? [*Probe*: How about GED classes? Classes that lead to other certifications, i.e., the ServSafe certification? Vocational skills training, which can include training for specific jobs like a phlebotomist or commercial truck driver?]
15. How did/does that activity compare to [*activity*]?
16. Which activity was most helpful to you?
17. Outcomes
18. *[Former only]* After you finished participating in [*activity*], what came next? [*Probe for*: employment, new career path, participation in a subsequent E&T activity]
19. *[If client dropped out of E&T and did not secure employment]* What made you stop participating in [*activity*]? Could any changes to the program or any additional supports have kept you engaged?
20. *[If client found employment/career path]* Do you think participating in [*activity*]helped you get a job? How so?
21. Has participating in [*activity*] affected the kinds of jobs that you are looking for? How so?
22. Wrap Up

Thank you for answering all our questions.

1. Is there anything else you would like to share with us?
2. Is there anything we did not ask about that you think is important for us to know?

Before we end this call, I want to confirm the address where we should send your $30 gift card. Is your address [*insert address from State data file*]?

[*If yes*] Thank you. Please allow at least 2 weeks to receive the gift card in the mail.

[*If no*] Can you provide me your updated address? Thank you. Please allow at least 2 weeks to receive the gift card in the mail.

That completes our questions for you. Thank you very much for speaking with us.