



ADMINISTRATION FOR  
**CHILDREN & FAMILIES**  
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**TO:** Josh Brammer, ACF Desk Officer  
Office of Information and Regulatory Affairs  
Office of Management and Budget

**FROM:** Amy Madigan, Program Officer  
Office of Planning, Research, and Evaluation  
Administration for Children and Families

**DATE:** October 21, 2019

**SUBJECT:** Non-substantive change for the Early Head Start Family and Child Experiences Survey (Baby FACES 2020) OMB control number 0970-0354

While programming the recently approved instruments for the Early Head Start Family and Child Experiences Survey (Baby FACES 2020) (OMB #0970-0354), we identified several small issues that may cause confusion. We would like to correct these issues prior to fielding the spring 2020 data collection. These changes are minor and do not impact burden estimates. The following table shows the original items and the changes side by side, with the differences highlighted in yellow. A third column provides the rationale for each change.

The updated instruments include the following:

- Teacher Child Report
- Parent Survey

- Baby FACES 2020 – Requested changes to OMB approved instruments

Item approved in OMB package	Requested change (highlighted in yellow)	Rationale
<b>From the Teacher Child Report</b>		
<p><b>A1. Are you currently the Early Head Start teacher for this child?</b></p> <p>1 <input type="checkbox"/> Yes            2 <input type="checkbox"/> Not currently, but I was this child's teacher within the past 2 months            0 <input type="checkbox"/> No</p> <p>PROGRAMMER: IF A1=1, 2, OR MISSING</p> <p><b>A1b. Are you this child's "primary" teacher? That is, do you have primary responsibility for this child's care and instruction during the day?</b></p> <p>1 <input type="checkbox"/> Yes            2 <input type="checkbox"/> No, someone else in the classroom serves as the child's primary teacher            3 <input type="checkbox"/> No, children are not assigned a primary teacher</p>	<p><b>A1. Are you currently the Early Head Start teacher for this child?</b></p> <p>1 <input type="checkbox"/> Yes            2 <input type="checkbox"/> Not currently, but I was this child's teacher within the past 2 months            0 <input type="checkbox"/> No</p> <p>PROGRAMMER: IF A1=1, 2, OR MISSING  <b>PROGRAMMER: IF A1=1 OR MISSING, FILL "Are" and "do" and "serves". IF A1=2, FILL "Were" and "did" and "served".</b></p> <p>Source: New Item</p> <p><b>A1b. (Are/Were) you this child's "primary" teacher? That is, (do/did) you have primary responsibility for this child's care and instruction during the day?</b></p> <p>1 <input type="checkbox"/> Yes            2 <input type="checkbox"/> No, someone else in the classroom (serves/served) as the child's primary teacher            3 <input type="checkbox"/> No, children are not assigned a primary teacher</p>	<p>This change is needed to eliminate a possible source of error/confusion in the response to A1b, based on the response to item A1. For example, a respondent who answers 'no currently' (2) to A1 would come to A1b and likely (correctly) report that they are not the primary teacher (because they are not anymore) when they may have been 2 months ago.</p>
<b>From the Parent Survey</b>		
<p><b>A10d. When your schedule changes, how far in advance do you usually know what days and hours you will be working? Do you find out... (READ)</b></p>	<p><b>A10d. When your schedule changes, how far in advance do you usually know what days and hours you will be working? Do you find out... (READ)</b></p> <p>One week or less ahead of time            Between one and two weeks ahead</p>	<p>This change corrects a typo in the response options for this item.</p>

Item approved in OMB package	Requested change (highlighted in yellow)	Rationale
<p>One week or less ahead of time</p> <p>Between one and two weeks ahead of time</p> <p>Between three to four weeks ahead of time, or</p> <p>Four weeks of more ahead of time?</p> <p>DON'T KNOW</p> <p>REFUSED</p>	<p>of time</p> <p>Between three to four weeks ahead of time, or</p> <p>Four weeks <b>or</b> more ahead of time?</p> <p>DON'T KNOW</p> <p>REFUSED</p>	
<p>18. Below is a list of ways you may have felt or behaved. Please mark how often you have felt this way in the <u>past week or so</u>.</p>	<p>18. <b>Next, I am going to read a list of ways you may have felt or behaved. Please tell me how often you have felt this way in the <u>past week or so</u>. [FILL ITEM a-t]. Would you say: less than 1 day, 1 to 2 days, 3 to 4 days, 5 to 7 days in the past week, or nearly every day for 2 weeks?</b></p>	<p>In the version of the parent survey submitted to OMB, we inadvertently used the self-administered introduction text for the CESD. We are requesting this change to provide appropriate introduction for the interviewer-administered version.</p>
	<p><b>I8_info1. PROGRAMMER: IF ITEM I8N OR I8O IS GT 0, DISPLAY AFTER ADMINISTRATION OF I8T</b></p> <p><b>Based on some of your responses, it sounds like you may be having a hard time. I'm sorry. At the end of the interview, I can give you a number to call if you feel you need some support.</b></p>	<p>In the Baby FACES 2018 parent survey, we included this statement at the end of the CESD. It was inadvertently left off the parent survey in the version submitted to OMB for Baby FACES 2020. We would like to add this language.</p>
	<p><b>I8_info2. PROGRAMMER: JUST PRIOR TO "THANKS," DISPLAY IF ITEM I8N OR I8O IS GT 0</b></p> <p><b>I mentioned earlier that there is a toll-free helpline that I can give you. This national Lifeline offers free and confidential support for people in distress, and is available 24 hours a day. Please let me know when you are ready to write it down. PAUSE. The number is 1-800-273-8255.</b></p>	<p>In the Baby FACES 2018 parent survey, we included this statement at the end of the instrument, corresponding to the language included at the end of the CESD. It was inadvertently left off the parent survey in the version submitted to OMB for Baby FACES 2020. We would like to add this language.</p>

Item approved in OMB package	Requested change (highlighted in yellow)	Rationale
<b>From the Parent Survey</b>		
B7. Is [CHILD] of Hispanic, Latino/a, or Spanish origin?	B7. Is [CHILD] of Hispanic, Latino/a, or Spanish origin? <b>You may choose one or more.</b>	To align better with OMB guidance.
B8. What is [CHILD]'s race? You may say yes to one or more. Is it...	B8. What is [CHILD]'s race? You may <b>choose</b> one or more. Is it...	To align better with OMB guidance.
C6. Is (he/she/this person) of Hispanic, Latino/a, or Spanish origin?	C6. Is (he/she/this person) of Hispanic, Latino/a, or Spanish origin? <b>You may choose one or more.</b>	To align better with OMB guidance.
C7. What is (his/her/this person's) race? You may say yes to one or more. Is it...	C7. What is (his/her/this person's) race? You may <b>choose</b> one or more. Is it...	To align better with OMB guidance.