

# **Attachment 6a**

## **2019 NSECE Classroom Staff (Workforce) Questionnaire**

November 2018



NATIONAL SURVEY OF **EARLY CARE & EDUCATION** | **2019**

# *Classroom Staff (Workforce) Questionnaire*

*(revised November 2018)*

## Classroom Staff (Workforce) Questionnaire

### QUEXLANG

PLEASE SELECT THE LANGUAGE IN WHICH YOU WOULD LIKE TO CONDUCT THE INTERVIEW

**ENGLISH**  
**SPANISH**

Thank you for taking part in this study, which is about the experiences of people who work in early care and education programs for children not yet in kindergarten. It is funded by the U.S. Department of Health and Human Services, and conducted by NORC at the University of Chicago. Your participation in this study will help the government better support the people who care for our nation's children.

This interview takes about 20 minutes, and your participation is voluntary. You may choose not to answer any questions you don't wish to answer, or end the interview at any time. All personnel associated with this study must sign a legal document in which they pledge to protect the privacy of the information collected in the survey. We have systems in place to protect your identity and keep your responses private. There is only a small chance that your information could be accidentally disclosed. For that reason we avoid questions that could cause difficulty for you. This study also has a Federal Certificate of Confidentiality from the government which protects researchers and other staff from being forced to release information that could be used to identify participants in court proceedings.

Data collected for this study will be used for statistical purposes only, so that no individuals or organizations can be identified directly or indirectly in research findings. Identifiers such as your name, your organization's name or addresses will be considered private and can only be accessed for the study's research purposes by authorized personnel associated with this study.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number for this information collection is 0970-0391 and the expiration date is 10/31/2019. Please send comments regarding the time required for this survey or any other aspect of this information collection to: NORC at the University of Chicago, 55 E Monroe St, Ste 3000, Chicago, IL, 60603, Attention: A. Rupa Datta.

Please enter your login ID and password below and then click the "Continue" button.

You can click on the 'PREVIOUS' button to go back and change your answers if needed. Clicking 'STOP' will save your responses and allow you to return to the last question you answered the next time you access the survey.

Please enter your login ID and password below.

This questionnaire asks about your work at [PROGRAM].

## Section A. Qualifications and Experience

### A1.

The first questions are about your experiences providing early or school-age care and education and your training to do this work.

How long have you worked in your program?

Years       Months

### A2.

How many years of paid experience do you have working with children other than your own, who are under age 13? Please include any paid experience in a home or center-based setting, including relatives, or paid experience you may have from another country.

Years       Months

### A2a.

Since you turned 18, have you done paid work with children under age 13 in a home-based setting?

- 1  YES  
2  NO

### A3.

What is the highest grade or level of schooling that you have ever completed?

[INTERVIEWER: READ IF NECESSARY]

- 1  8th GRADE OR LESS (SKIP TO A6A\_M)  
2  9th-12th GRADE NO DIPLOMA (SKIP TO A6A\_M)  
3  GED OR HIGH SCHOOL EQUIVALENCY  
4  HIGH SCHOOL GRADUATE  
5  SOME COLLEGE CREDIT BUT NO DEGREE  
6  ASSOCIATE DEGREE (AA, AS)  
7  BACHELOR'S DEGREE (BA, BS, AB)  
8  GRADUATE OR PROFESSIONAL DEGREE

[Programmer: only ask A12 if response to A3 = 3-8. Otherwise skip to instruction before A5\_M]

### A12.

Are you currently enrolled in a degree program at a college or university?

- 1  YES
- 2  NO

[Programmer: only ask A5\_M if response to A3 = 5-8 or A12 = 1. Otherwise skip to A6A\_M.]

**A5\_M.**

What was your major for the highest degree you have or have studied for?

- 1  ELEMENTARY EDUCATION
- 2  SPECIAL EDUCATION
- 3  CHILD DEVELOPMENT, PSYCHOLOGY, OR FAMILY STUDIES
- 4  EARLY CHILDHOOD EDUCATION OR EARLY OR SCHOOL-AGE CARE
- 5  OTHER \_\_\_\_\_

**A6A\_M.**

Do you have a Child Development Associate (CDA) certificate?

- 1  YES
- 2  NO

**A6B\_M.**

Do you have a state certification or endorsement for early care and education?

- 1  YES
- 2  NO

**A7.**

In the past 12 months, have you done any of the following to improve your skills or gain new skills in working with children?

a. Participated in any workshops, for example, those offered by professional associations, resource and referral networks, etc.?

1  YES      2  NO

b. (In the past 12 months, have you done any of the following to improve your skills or gain new skills in working with children?) Participated in coaching, mentoring or ongoing consultation with a specialist?

1  YES      2  NO

d. (In the past 12 months, have you done any of the following to improve your skills or gain new skills in working with children?) Attended a meeting of a professional organization (such as Zero-to-Three, Association for Education of Young Children; Association for Family Child Care, National After School Association, or another group)?

1  YES      2  NO

e. (In the past 12 months, have you done any of the following to improve your skills or gain new skills in working with children?) Enrolled in a course at a community college or four-year college or university relevant to your work with children under age 13?

1  YES      2  NO

[IF YES TO ANY ITEM FROM A7A TO A7E, ASK A8a\_M. ELSE GO TO A15]

**A8a\_M.**

Did you participate in any of these activities with other staff from your classroom?

1  YES  
2  NO

[If A7a=1, ask A7a\_1\_M. Else go to instruction before A13]

**A7a\_1\_M.**

Did you attend a series of two or more workshops?

1  YES  
2  NO

[IF A7e=1 or A12=1, ask A13. Else go to A15]

**A13.**

Did you take a college or university course in the past 12 months where you were asked to demonstrate skills related to working with children while being observed?

- 1  YES
- 2  NO

**A15.**

In the past 12 months, have you participated in a health or safety training?

- 1  YES
- 2  NO →SKIP TO INSTRUCTION BEFORE A8c\_M

**A16.**

Did you participate in any on-line health or safety trainings in the past year?

- 1  YES
- 2  NO

[IF YES TO ANY ITEM FROM A7A TO A7E, ASK A8c\_M. ELSE GO TO A18]

**A8c\_M.**

Please think about the **topics** addressed in your activities to improve or gain skills in working with children. **Aside from health and safety in the classroom, what topic was most recently addressed in an activity you participated in?** For example, working with families, preparing children to do well in school, techniques for discipline and classroom management, or some other topic?

[READ IF NECESSARY] [IF SELF-ADMINISTERED, RECORD VERBATIM/DO NOT SHOW CODES]

- 1  NO TOPICS OTHER THAN HEALTH AND SAFETY
- 2  COGNITIVE DEVELOPMENT, INCLUDING EARLY READING OR MATH
- 4  HELPING CHILDREN'S SOCIAL OR EMOTIONAL GROWTH, INCLUDING HOW TO BEHAVE WELL.
- 5  PHYSICAL DEVELOPMENT AND HEALTH
- 6  HOW TO WORK WITH FAMILIES
- 7  SERVING CHILDREN WITH SPECIAL PHYSICAL, EMOTIONAL OR BEHAVIORAL NEEDS.
- 8  WORKING WITH CHILDREN WHO SPEAK MORE THAN ONE LANGUAGE
- 9  PLANNING ACTIVITIES THAT MEET THE NEEDS OF THE WHOLE CLASS
- 11  WORKING WITH CHILDREN FROM DIFFERENT RACES, ETHNICITIES AND CULTURES
- 10  OTHER \_\_\_\_\_ Please specify what the main topic of the most recent activity you participated in to improve or gain skills in working with children was.

**A17.**

Have you received any training in the past 12 months on strategies for working with children and families of different races, ethnicities or cultures?

- 1  YES
- 2  NO

**A14.**

The last time you participated in an activity to improve your skills working with children, did you do so to fulfill a requirement? Requirements might include needing continuing education credits for a certificate/credential, licensing, your local quality rating program, or a training required by your program.

- 1  YES
- 2  NO

**A8b.**

During the past 12 months, did you receive any of the following types of assistance with the costs of improving your skills, either from your employer or from a local or state agency, college or university?

- 1. Assistance with direct costs such as tuition or registration fees  
1  YES    2  NO

- 2. (During the past 12 months, did you receive) Help with other costs of participation such as travel or child care for your own children  
1  YES    2  NO

- 3. (During the past 12 months, did you receive) Release time to participate in the activity  
1  YES    2  NO

**A18.**

In the past 12 months, did a supervisor or advisor help you develop or update a plan for your professional development?

- 1  YES
- 2  NO

**A19.**

On average, how many hours a month do you spend on activities to improve or gain skills in working with children?

- 1  0 hours per month
- 2  1-2 hours per month



- 3  More than 2 hours but less than a day per month
- 4  1 day per month
- 5  More than 1 day per month

**A20.**

Have you ever taken a college or university course, participated in training, or received a credential where you had to demonstrate skills related to working with children and were observed?

- 1  YES
- 2  NO

**A9.**

Are you a member of a professional association focused on caring for children (such as the National Association for the Education of Young Children, the National Family Child Care Association, the National Institute on Out of School Time, a religiously identified child care organization, or a similar organization)?

- 1  YES
- 2  NO

**A10.**

Are you a member of a union (such as Service Employees International Union, American Federation of Teachers, American Federation of State, County and Municipal Employees (AFSCME) or the Teamsters)?

- 1  YES
- 2  NO

**A11.**

Which one of the following best describes the main reason that you work with young children?  
[CODE ONE ONLY.]

- 1  It is my career or profession
- 2  It is a step towards a related career
- 3  It is my personal calling
- 4  It is a job with a paycheck
- 5  It is work I can do while my own children are young
- 6  It is a way to help children
- 7  It is a way to help parents
- 8  None of these reasons apply

## Section B. Employment Schedule and Compensation

These next questions are about your work hours and compensation.

**B1.**

Approximately how many hours per week do you usually work at this program?

NUMBER OF HOURS

**B1a.**

How many different classrooms or groups do you work with during a usual week?

\_\_\_\_\_ Number of classrooms or groups

**B2.**

How many months out of the last twelve have you worked at this or another child care program?

\_\_\_\_\_ NUMBER (RANGE: 0 TO 12)

**B4\_M.**

How much are you paid before taxes and deductions? Is it per....

[PROBE FOR BEST ESTIMATE IF NEEDED.]

- \$ \_\_\_\_\_ per
- 1  hour
  - 2  day
  - 3  week
  - 8  every 2 weeks
  - 4  month
  - 5  year
  - 6  other \_\_\_\_\_

**B5.**

In this job, do you work mostly with children who have mental, physical or other disabilities or delays?

- 1  YES
- 2  NO

**B6.**

What is your title at this program?

- 1  Director and Teacher

- 2  Program Coordinator
- 3  Lead Teacher or Lead Instructor
- 4  Teacher or Instructor
- 5  Assistant Teacher or Instructor
- 6  Aide
- 7  or Something else (please specify: \_\_\_\_\_)

**B7\_M.**

What kind of health insurance or health care coverage do you have for yourself?  
[CODE ALL MENTIONS, USE CATEGORIES TO PROBE AS NEEDED]

- 1  PRIVATE HEALTH INSURANCE PLAN FROM YOUR EMPLOYER OR WORKPLACE
- 2  PRIVATE HEALTH INSURANCE PLAN THROUGH YOUR SPOUSE OR PARTNER'S EMPLOYMENT
- 3  PRIVATE HEALTH INSURANCE PLAN PURCHASED DIRECTLY
- 4  PRIVATE HEALTH INSURANCE PLAN THROUGH A STATE OR LOCAL GOVERNMENT, A HEALTH INSURANCE EXCHANGE, OR COMMUNITY PROGRAM
- 10  PRIVATE HEALTH INSURANCE PLAN THROUGH PARENTS
- 5  MEDICAID
- 6  MEDICARE
- 7  MILITARY HEALTH CARE/VA OR CHAMPUS/TRICARE/CHAMP-VA
- 8  NO COVERAGE OF ANY TYPE
- 9  OTHER (SPECIFY)

**B7\_Other.**

Please specify the kind of health insurance or health care coverage you have for yourself.

**B9.**

In the past 3 months, have you done anything to look for a new job or an additional job?

- 1  YES (ASK B9A\_M)
- 2  NO (SKIP TO B10)

**B9a\_M.**

What is the main reason you have looked for work?  
[IF INTERVIEWER ADMINISTERED, USE CATEGORIES ONLY TO PROBE. IF SELF-ADMINISTERED, RECORD VERBATIM WITH NO FRAME PRESENT.]

- 1  TO FIND A SECOND JOB
- 2  TO FIND A JOB THAT PAYS MORE
- 3  WORRIED THAT THIS JOB MAY END
- 4  HOPE TO REDUCE COMMUTE OR IMPROVE SCHEDULE
- 5  TO FIND IMPROVED WORK CONDITIONS IN PROGRAM
- 6  WANT TO LEAVE THIS FIELD
- 7  TO SEE WHAT ELSE IS AVAILABLE

8  TO FIND SUMMER EMPLOYMENT

13  TO FIND A JOB FOR PROFESSIONAL GROWTH AND/OR ADVANCEMENT WITHIN FIELD OF CHILD CARE

14  TO FIND A JOB THAT IS A BETTER FIT WITH TRAINING/EXPERIENCE

9  OTHER \_\_\_\_\_

IF B9A\_M=9, ASK B9\_REASON\_OTHER. ELSE, GO TO B10.

**B9\_reason\_other**

What is the main reason you have looked for work?

**B10.**

What is your home ZIP code?

\_\_\_\_\_ [5-digit only]

## Section C. Activities in the Classroom

### C1\_1\_M.

This section is about the [CLASSROOM NAME] classroom for children aged {xx} to {yy} where you were working during the week of [DATE] at {PROGRAM}. Are you familiar with the children and practices in that classroom?

- 1  YES (GO TO C1A)
- 2  NO (ASK C1\_2\_M)

### C1\_2\_M.

Please answer the classroom questions in this questionnaire about the classroom where you spend the most time. What age children does that classroom mostly serve?

- 1  Infant and Toddler (birth to age 3)
- 2  Pre-school (age 3 years to kindergarten)
- 3  Other (specify\_\_\_\_\_)

### C1A.

Do you use a curriculum or prepared set of learning and play activities?

- 1  YES
- 2  NO

[IF C1A=1, ASK C1B\_M. ELSE GO TO C3.]

### C1B\_M.

What is the name of the curriculum or approach used?

0.  A curriculum we developed ourselves  
[drop down of common curricula]
6.  Other (specify\_\_\_\_\_)
7.  None

**Curriculum List**

**Infants and Toddlers**

- 2 - Creative Curriculum
- 3 - Funshine Express
- 4 - High Reach
- 5 - High Scope Infant-Toddler Curriculum
- 6 - Mother Goose Time: Experience Baby
- 7 - Little Goose without full Mother Goose Time curriculum system
- 8 - Little Goose with full Mother Goose Time curriculum system
- 9 - Baby Doll Circle Time
- 10 - Beyond Cribs & Rattles
- 11 - Edu 1st VESS Curriculum
- 12 - FLEX Goddard Pre-K
- 13 - Frog Street Toddler
- 14 - Kiddie Academy Life Essentials
- 15 - Kids R Kids
- 16 - Knowledge Universe Early Foundations
- 17 - Learn Every Day
- 18 - Learn from the Start
- 22 - Learning Experience Academic Program (LEAP)
- 23 - O2B Kids

- 24 - World at their Fingertips
- 25 - Montessori
- 26 - Active Learning Series
- 27 - Foundations for Success
- 28 - Innovations: Infant/Toddler Development
- 29 - Wee Learn
- 30 - Bank Street Developmental Interaction Approach
- 31 - The Ounce Scale
- 32 - Waldorf
- 33 - The Project Approach
- 34 - Reggio Emilia
- 35 - The Program for Infant and Toddler Care (PITC)
- 36 - 1-2-3 Learn Curriculum
- 37 - Carol's Affordable Curriculum
- 38 - Early Learning Success
- 39 - Gee Whiz Education
- 40 - HELP at Home
- 41 - Learn from the Start (Curriculum of the Learning Care Group preschool programs)
- 42 - Learn As We Grow (Curriculum of the La Petite

- programs)
- 43 - World at their Fingertips (Curriculum in Bright Horizons programs)
- 44 - Alpha Skills
- 45 - Pinnacle Early Childhood
- 46 - WINGS

**Preschool**

- 47 - We Can Voyager
- 48 - Creative Curriculum for Preschoolers
- 49 - High Scope Preschool Curriculum
- 50 - Montessori
- 51 - Investigator Club
- 52 - DLM Early Childhood Express (McGraw-Hill)
- 53 - Opening the World of Learning (OWL)
- 54 - Houghton Mifflin Pre-K
- 55 - Core Knowledge Sequence
- 56 - Funshine Express
- 57 - High Reach
- 58 - Mother Goose Time
- 59 - Scholastic: Big Day for Pre-K

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60 - DIG: Develop, Inspire, Grow	82 - Starfall Pre-K Curriculum	105 - Early Learning Success
61 - Beyond Centers & Circle Time	83 - Tools of the Mind	106 - Gee Whiz Education
62 - Early Literacy and Learning Model Plus (ELLM) or ELLM Plus	84 - We Can	107 - Houghton Mifflin Pre-K
63 - Edu 1st VESS Curriculum	85 - Wee Learn	108 - Learn Every Day: The Preschool Curriculum
64 - Empowered Child	86 - World at their Fingertips	109 - Journey (Curriculum in Learning Care Group preschool programs)
65 - FLEX Goddard Pre-K	87 - Active Learning Series	110 - Learn As We Grow (Curriculum in La Petite programs)
66 - Frog Street Pre-K	88 - All About Preschoolers	111 - World at their Fingertips (Curriculum in Bright Horizons programs)
67 - Frog Street Summer	89 - Innovations	112 - Connect4Learning
68 - Galileo	90 - Links to Literacy	113 - ExCell (Exceptional Coaching for Early Language and Literacy)
69 - Get Set for School	91 - Promoting Preschool Friendships	114 - Building Blocks (Clements, early math)
70 - Kiddie Academy Life Essentials	92 - Saxon	115 - Big Math for Little Kids (Ginsburg, early math)
71 - Kids R Kids	93 - Bank Street Developmental Interaction Approach	116 - The Incredible Years (Webster-Stratton)
72 - Knowledge Universe Early Foundations	94 - Little Treasures (MacMillan/McGraw Hill)	117 - Head Start REDI (Research-based, Developmentally Informed; Penn State)
73 - Learn Every Day	95 - Curiosity Corner (Success for All)	118 - EPIC (Evidence-based Program for Integrated Curricula, John Fantuzzo)
74 - Learn Every Day & Nemours BrightStart! Superset	96 - Teaching Strategies	119 - Abeka
75 - Learning Experience Academic Program (LEAP)	97 - Waldorf	120 - Alpha Skills
76 - Let's Begin with the Letter People	98 - The Project Approach	121 - Pinnacle Early Childhood
77 - LifeSmart	99 - Reggio Emilia	
78 - Literacy Express	100 - Everyday Math	
79 - Little Treasures	101 - Project Early Kindergarten	
80 - O2B Kids	102 - Scholastic Early Childhood Program	
81 - Splash into Pre-K	103 - 1-2-3 Learn Curriculum	
	104 - Carol's Affordable Curriculum	

122 - WINGS

**C5.**

Have you received 4 or more hours of training on how to use this curriculum?

- 1  YES
- 2  NO

**C3.**

Do you plan or help plan the daily activities of the children in this classroom or group?

- 1  YES → (ASK C3A\_M)
- 2  NO → (SKIP TO C4\_M)

**C3a\_M.**

When do you plan daily activities?

- 1  While caring for children
- 2  Time while at work, but not caring for children
- 3  I don't make specific plans
- 4  Personal time when I am not at work

**C4\_M.**

In this classroom, on most days, how much time do children spend doing something with a screen, such as watching TV or a movie, or working or playing a game on a computer or tablet?

- 1  1 ½ hours or more
- 2  30 minutes to 1 ½ hours
- 3  Less than 30 minutes
- 4  Children do not use screens while in this classroom

[IF C1\_1\_M = YES (1) AND THE UPPER AGE RANGE IN C1\_1\_M (yy) IS 35 MONTHS OR LESS ASK G\_ACTIVITY\_IT, ELSE ASK G\_ACTIVITY\_PK. IF C1\_1\_M = NO (2) OR DK/REF AND C1\_2\_M = 1 ASK G\_ACTIVITY\_IT, ELSE ASK G\_ACTIVITY\_PK]

**G\_ACTIVITY\_IT.**

Please describe a typical day in your classroom. Not including lunch or nap breaks, **how much time is spent** in the following kinds of activities throughout the day?

**[READ ITEM]. Would you say no time, 30 minutes or less, about one hour, about two hours, or three hours or more?**

CLASSROOM/SETTINGS WITH INFANTS/TODDLERS



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	1 No time	2 30 min or less	3 About one hour	4 About two hours	5 Three hours or more	6 Don't know/ refused
A. Learning activities with the whole group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Learning activities done with small group (with 2 or more children)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Learning activities one-on-one (with individual children)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Activities selected by the child (e.g., time for children to explore freely)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Routine care (such as diapering, feeding, and bathroom needs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Vigorous physical activity either indoors or outdoors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Singing/rhyming planned in advance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Book reading or sharing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[SKIP TO SECTION CL]

**G\_ACTIVITY\_PK.**

Please describe a typical day in your classroom. Not including lunch or nap breaks, **how much time is spent** in the following kinds of activities throughout the day?

**[READ ITEM].** Would you say **no time, 30 minutes or less, about one hour, about two hours, or three hours or more?**

SETTINGS WITH PRESCHOOLERS (3 and 4 year-olds)

	1 No time	2 30 min or less	3 About one hour	4 About two hours	5 Three hours or more	6 Don't know/ refused
A. Learning activities with the whole group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Learning activities done with small group (with 2 or more children)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Learning activities one-on-one (with individual children)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Activities selected by the child (e.g., time for children to explore freely)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Routine care (such as bathroom needs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Vigorous physical activity either indoors or outdoors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Singing/rhyming planned in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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advance						
I. Book reading or sharing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Section CL: About the People in the Classroom

### CL1.

Please think about the teachers, assistant teachers and aides who usually work in this classroom. How many people are there, including yourself? \_\_\_\_\_

Range 1 - 99

### CL2.

Are any of these [CL1] people:

- A. Black or African American  
1  Yes                      2  No
- B. Hispanic or Latino  
1  Yes                        2  No
- C. White  
  
1  Yes                        2  No
- D. Asian  
1  Yes                        2  No

### CL5.

How many children are enrolled in this classroom?

Number of children: \_\_\_\_\_

Range 1 - 999

### CL6.

How many of these [CL5] children are Hispanic or Latino? \_\_\_\_\_

Range 0 - CL5

### CL6a.

As far as you know, how many of the children who are not Hispanic or Latino are....

Category	Number of Children
a. White	
b. Black or African-American	
c. Asian	
d. Mixed race, another race, or you are not	

certain	
---------	--

Range 0 - CL5

**CL9.**

How many of the children in your classroom speak a language other than English at home?

	Number of children
--	--------------------

[IF DK/REF FOR CL9 ASK CL10, ELSE SKIP TO CL11]

**CL10.**

About what percent of the children in your classroom speak a language other than English at home?

	Percent of children
--	---------------------

**CL11.**

How many of the children in this classroom have a parent who needs the help of an interpreter or a child to speak with their child's teacher?

	Number of children
--	--------------------

**CL8a.**

As far as you know, how many children in this classroom sometimes don't have enough food to eat at home because there is not enough money to buy it?

Number of children: \_\_\_\_\_

Range 0 - CL5

## Section D. Staff Attitudes and Orientation to Caregiving

Attitudes toward education and caregiving are important parts of how people do their work.

### D1.

Please indicate how much you personally agree or disagree with the following statements.

		STRONGLY DISAGREE 1	DISAGREE 2	NEITHER AGREE NOR DISAGREE 3	AGREE 4	STRONGLY AGREE 5
<b>A</b>	In my opinion, children should always obey their parents.					
<b>B</b>	In my opinion, children will not do the right thing unless they must.					
<b>C</b>	In my opinion, the most important thing to teach children is absolute obedience to whomever is the authority.					
<b>D</b>	In my opinion, a child's ideas should be considered in family decisions.					
<b>E</b>	In my opinion, children have a right to their own point of view and should be allowed to express it.					
<b>F</b>	In my opinion, children should be allowed to disagree with their parents if they feel their own ideas are better.					
<b>G</b>	In my opinion, children will be bad unless they are taught what is right.					
<b>H</b>	In my opinion, children should always obey the teacher.					
<b>I</b>	In my opinion, it is alright for a child to disagree with his or her own parents.					
<b>J</b>	In my opinion, parents should go along with the game when their child is pretending something.					

**D3.**

How often did the following things happen to you last week at this program?

**D3a.**

Parents came late to pick up their children. Would you say never, once, or more than once in the last week?

- 1  Never
- 2  Once
- 3  More than once

**D3b.**

Parents blamed their child's bad behavior on the program. (Would you say never, once, or more than once in the last week?)

- 1  Never
- 2  Once
- 3  More than once

**D3c.**

There were children with behavior problems that were hard to deal with. (Would you say never, once, or more than once in the last week?)

- 1  Never
- 2  Once
- 3  More than once

**D3d\_M.**

I knew the children were happy with me. (Would you say never, once, or more than once in the last week?)

- 1  Never
- 2  Once
- 3  More than once

**D3e.**

There were major sources of stress in the children's lives that I couldn't do anything about (Would you say never, once, or more than once in the last week?)

- 1  Never
- 2  Once

3  More than once

**D3f.**

I knew that I was appreciated by the parents. (Would you say never, once, or more than once in the last week?)

- 1  Never
- 2  Once
- 3  More than once

**D3h\_M.**

In the last week, I was moved from my normal classroom(s) or group(s) of children to one I don't normally work with. (Would you say never, once, or more than once in the last week?)

- 1  Never
- 2  Once
- 3  More than once

**D4.**

How often last week did you talk with a parent about something happening in the child's family (for example child-parent relationships, stresses like parent's finances and employment; family tensions)? (Would you say not at all, once or twice, or three or more times in the last week?)

- 1  Not at all
- 2  Once or twice
- 3  Three or more times

**D7.**

How often have you and your supervisor (such as a center director, program director, or lead teacher) discussed each of the following in the last 12 months?

a. How you can improve your skills helping children learn? Would you say...

- 1  Once a year
- 2  Several times a year
- 3  Once a month
- 4  A few times a month
- 5  Once a week or more
- 6  Never

b. How you can improve your skills working with children's behavior? Would you say...



- 1  Once a year
- 2  Several times a year
- 3  Once a month
- 4  A few times a month
- 5  Once a week or more
- 6  Never

**D8.**

Do you receive a formal review and feedback on your performance at least once a year?

- 1  Yes
- 2  No

**D9.**

How much do you agree or disagree with the following statements about working in this program?

**D9A.**

My co-workers and I are treated with respect on a day-to-day basis. (Would you say you strongly agree, agree, neither agree or disagree, disagree or strong disagree with this statement?)

- 1  Strongly agree
- 2  Agree
- 3  Neither agree nor disagree
- 4  Disagree
- 5  Strongly disagree

**D9B.**

Team work is encouraged. (Would you say you strongly agree, agree, neither agree or disagree, disagree or strong disagree with this statement?)

- 1  Strongly agree
- 2  Agree
- 3  Neither agree nor disagree
- 4  Disagree
- 5  Strongly disagree

**D9C.**

I have help dealing with difficult children or parents. (Would you say you strongly agree, agree, neither agree or disagree, disagree or strong disagree with this statement?)

- 1  Strongly agree
- 2  Agree
- 3  Neither agree nor disagree
- 4  Disagree

5  Strongly disagree

**D\_BKGD.**

We are interested in your opinions about policies that require people working in child care settings to get background checks. How much do you agree or disagree with the following statements: [Strongly Agree, Agree, Disagree, Strongly Disagree]

- a. Background checks on staff protect children.
- c. Background checks discourage good candidates from applying for or taking jobs in child care.
- d. It is easy and inexpensive to get fingerprinted for a background check.

**D11.**

Below is a list of some of the ways you may have felt or behaved.

Please indicate how often you have felt this way during the past week by checking the appropriate box for each question.

	<b>Rarely or none of the time</b> (less than 1 day)	<b>Some or a little of the time</b> (1-2 days)	<b>Occasionally or a moderate amount of time</b> (3-4 days)	<b>All of the time</b> (5-7 days)
1. I did not feel like eating; my appetite was poor.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I had trouble keeping my mind on what I was doing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I felt depressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I felt that everything I did was an effort.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. My sleep was restless.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I was sad.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I could not "get going."	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The following questions are about your beliefs about education and caregiving.

**D12.**

A small group of children is painting on paper at a table. One child asks if they can paint some rocks they collected earlier in the day. The best thing to do is:

- 1 Get the rocks and let the child paint them.
- 2 Tell them rocks aren't for painting.
- 3 Tell them it would make too much of a mess.
- 4 Tell the child that is something they can do at home, not at school.

**D13.**

A child is crying at drop-off because she misses her mom. Which of the following is most likely to help the child in that moment:

- 1 Let the child sit alone for a while until she calms down.
- 2 Talk with the parent to figure out what happened.
- 3 Encourage the child's friends to try to distract her.
- 4 Spend time with her until the child feels better.

**D14.**

A child hits another child. The most effective response is to:

- 1 Separate the children by moving the child who was hit into another center.
- 2 Remind the child that hands are not for hitting, then help re-engage him in an Activity.
- 3 Ignore the behavior.
- 4 Tell the child's parents about the misbehavior.

**D15.**

A child is trying to put together a puzzle that is too difficult for her. The best thing to do is:

- 1 Sit with her and give her hints that help her complete the puzzle.
- 2 Provide her a puzzle that is easier for her to complete.
- 3 Encourage her to keep trying it on her own.
- 4 Complete the puzzle for her as a demonstration.

## Section E. Demographics

We finish the interview with some questions about your personal characteristics.

**E1.**

[IF INTERVIEWER ADMINISTERED: I am required to ask if you] Are you male or female?

- 1  Male
- 2  Female

**E2.**

In what year were you born? \_\_\_\_\_  
[RANGE = 1900...2006]

**E3\_M.**

What is your ethnicity?

- 1  Hispanic or Latino
- 2  Not Hispanic or Latino

**E4\_M.**

What is your race? (Select one or more.)

- 5  American Indian or Alaska Native
- 3  Asian
- 2  Black or African American
- 4  Native Hawaiian or Other Pacific Islander
- 1  White

**E5.**

Do you speak any languages other than English?

- 1  Yes
- 2  No

**E6.**

About what percent of the time that you are working with children do you speak English?

\_\_\_\_\_ % of time speaking English

**E19.**

What language(s) do you speak with children or parents as part of your job at this center?

E9.

In what country were you born?

[DROP DOWN]

**Country List:**

1. Please select
2. Afghanistan
3. Akrotiri
4. Albania
5. Algeria
6. American Samoa
7. Andorra
8. Angola
9. Anguilla
10. Antarctica
11. Antigua and Barbuda
12. Argentina
13. Armenia
14. Aruba
15. Ashmore & Cartier Islands
16. Australia
17. Austria
18. Azerbaijan
19. Bahamas
20. Bahrain
21. Bangladesh
22. Barbados
23. Bassas da India
24. Belarus
25. Belgium
26. Belize
27. Benin
28. Bermuda
29. Bhutan
30. Bolivia
31. Bosnia and Herzegovina
32. Botswana
33. Bouvet Island
34. Brazil
35. British Indian Ocean Territory
36. British Virgin Islands
37. Brunei
38. Bulgaria
39. Burkina Faso
40. Burma
41. Burundi
42. Cambodia
43. Cameroon
44. Canada
45. Cape Verde
46. Cayman Islands
47. Central African Republic
48. Chad
49. Chile
50. China

51. Christmas Island
52. Clipperton Island
53. Cocos (Keeling) Islands
54. Colombia
55. Comoros
56. Congo
57. Cook Islands
58. Coral Sea Islands
59. Costa Rica
60. Cote d'Ivoire
61. Croatia
62. Cuba
63. Cyprus
64. Czech Republic
65. Denmark
66. Dhekelia
67. Djibouti
68. Dominica
69. Dominican Republic
70. Ecuador
71. Egypt
72. El Salvador
73. Equatorial Guinea
74. Eritrea
75. Estonia
76. Ethiopia
77. Europa Island
78. Falkland Islands (Islas Malvinas)
79. Faroe Islands
80. Fiji
81. Finland
82. France
83. French Guiana
84. French Polynesia
85. French Southern & Antarctic Lands
86. Gabon
87. Gambia
88. Gaza Strip
89. Georgia
90. Germany
91. Ghana
92. Gibraltar
93. Glorioso Islands
94. Greece
95. Greenland
96. Grenada
97. Guadeloupe
98. Guam
99. Guatemala
100. Guernsey

101. Guinea
102. Guinea-Bissau
103. Guyana
104. Haiti
105. Heard Isl. & McDonald Islands
106. Holy See (Vatican City)
107. Honduras
108. Hong Kong
109. Hungary
110. Iceland
111. India
112. Indonesia
113. Iran
114. Iraq
115. Ireland
116. Isle of Man
117. Israel
118. Italy
119. Jamaica
120. Jan Mayen
121. Japan
122. Jersey
123. Jordan
124. Juan de Nova Island
125. Kazakhstan
126. Kenya
127. Kiribati
128. North Korea
129. South Korea
130. Kuwait
131. Kyrgyzstan
132. Laos
133. Latvia
134. Lebanon
135. Lesotho
136. Liberia
137. Libya
138. Liechtenstein
139. Lithuania
140. Luxembourg
141. Macau
142. Macedonia
143. Madagascar
144. Malawi
145. Malaysia
146. Maldives
147. Mali
148. Malta
149. Marshall Islands
150. Martinique
151. Mauritania

## 2019 NSECE Classroom Staff (Workforce) Questionnaire

- |                                      |                             |
|--------------------------------------|-----------------------------|
| 152. Mauritius                       | Islands                     |
| 153. Mayotte                         | 215. Spain                  |
| 154. Mexico                          | 216. Spratly Islands        |
| 155. Micronesia, Federated States of | 217. Sri Lanka              |
| 156. Moldova                         | 218. Sudan                  |
| 157. Monaco                          | 219. Suriname               |
| 158. Mongolia                        | 220. Svalbard               |
| 159. Montserrat                      | 221. Swaziland              |
| 160. Morocco                         | 222. Sweden                 |
| 161. Mozambique                      | 223. Switzerland            |
| 162. Namibia                         | 224. Syria                  |
| 163. Nauru                           | 225. Taiwan                 |
| 164. Navassa Island                  | 226. Tajikistan             |
| 165. Nepal                           | 227. Tanzania               |
| 166. Netherlands                     | 228. Thailand               |
| 167. Netherlands Antilles            | 229. Timor-Leste            |
| 168. New Caledonia                   | 230. Togo                   |
| 169. New Zealand                     | 231. Tokelau                |
| 170. Nicaragua                       | 232. Tonga                  |
| 171. Niger                           | 233. Trinidad and Tobago    |
| 172. Nigeria                         | 234. Tromelin Island        |
| 173. Niue                            | 235. Tunisia                |
| 174. Norfolk Island                  | 236. Turkey                 |
| 175. Northern Mariana Islands        | 237. Turkmenistan           |
| 176. Norway                          | 238. Turks & Caicos Islands |
| 177. Oman                            | 239. Tuvalu                 |
| 178. Pakistan                        | 240. Uganda                 |
| 179. Palau                           | 241. Ukraine                |
| 180. Panama                          | 242. United Arab Emirates   |
| 181. Papua New Guinea                | 243. United Kingdom         |
| 182. Paracel Islands                 | 244. United States          |
| 183. Paraguay                        | 245. Uruguay                |
| 184. Peru                            | 246. Uzbekistan             |
| 185. Philippines                     | 247. Vanuatu                |
| 186. Pitcairn Islands                | 248. Venezuela              |
| 187. Poland                          | 249. Vietnam                |
| 188. Portugal                        | 250. Virgin Islands         |
| 189. Puerto Rico                     | 251. Wake Island            |
| 190. Qatar                           | 252. Wallis and Futuna      |
| 191. Reunion                         | 253. West Bank              |
| 192. Romania                         | 254. Western Sahara         |
| 193. Russia                          | 255. Yemen                  |
| 194. Rwanda                          | 256. Zambia                 |
| 195. Saint Helena                    | 257. Zimbabwe               |
| 196. Saint Kitts and Nevis           | 258. DON'T                  |
| 197. Saint Lucia                     | KNOW/REFUSED/NO             |
| 198. St Pierre & Miquelon            | ANSWER                      |
| 199. St Vincent & the Grenadines     |                             |
| 200. Samoa                           |                             |
| 201. San Marino                      |                             |
| 202. Sao Tome and Principe           |                             |
| 203. Saudi Arabia                    |                             |
| 204. Senegal                         |                             |
| 205. Serbia and Montenegro           |                             |
| 206. Seychelles                      |                             |
| 207. Sierra Leone                    |                             |
| 208. Singapore                       |                             |
| 209. Slovakia                        |                             |
| 210. Slovenia                        |                             |
| 211. Solomon Islands                 |                             |
| 212. Somalia                         |                             |
| 213. South Africa                    |                             |
| 214. S. Georgia & S Sandwich         |                             |

**E10.**

[IF BORN OUTSIDE OF THE U.S.] In what year did you move to the U.S. to stay?

Range: 1919 to 2019.

**E11.**

What is your current marital status?

- 1  Never married, not living with a partner
- 2  Married or living with a partner
- 3  Separated
- 4  Divorced
- 5  Widowed

**E20.**

Overall, would you say your health is excellent, very good, fair, or poor?

- 1  EXCELLENT
- 2  VERY GOOD
- 3  FAIR
- 4  POOR

**E14.**

Approximately what was your total household income in 2018, before taxes or deductions? Please include income from wages and salaries earned by you or other adults in your household. Also include government assistance, gifts, or other income you may have had.

Dollars → GO TO E17

[IF DK/REF, GO TO E15\_M, ELSE GO TO E17 ]

**E15\_M.**

It can be difficult to remember or report these numbers and an approximate range is fine. What was your total household income in 2018 before taxes or deductions...

- 1  Less than \$15,000
- 2  \$15,001 to \$30,000
- 3  \$30,001 to \$45,000
- 4  \$45,001 to \$60,000
- 5  \$60,001 or more

**E17.**

Approximately how much of your household income in 2018 came from your work with children under age 13?

- 1  All
- 2  Almost all
- 3  More than half
- 4  About half
- 5  Less than half
- 6  Very little
- 7  None

**E18.**

Do you currently receive financial or in-kind assistance from any government programs for needy families, such as cash assistance for disabilities, housing assistance, free-reduced lunch for your children or food stamps?

- 1  YES
- 2  NO

**E12.**

How many children age 5 or less are living in your household?

\_\_\_\_\_Number

**E13.**

How many children between 6 and 12 are living in your household?

\_\_\_\_\_Number

**Thank you for taking the time to complete this survey. CLICK NEXT TO END THE SURVEY.**