Attachment 24  
  
Fall 2021 Special Telephone Script and Recruitment Information Collection for Program Directors, Region XI

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Fall 2021 Special Telephone Script And Recruitment Information Collection For Program Directors, Region XI

Introduction

My name is [AIAN FACES WORKGROUP MEMBER NAME], from [ORGANIZATION] and I am calling about the American Indian and Alaska Native Head Start Family and Child Experiences Survey, which we refer to as AIAN FACES. I am calling about [PROGRAM NAME], which is GRANT NUMBER [#] and PROGRAM NUMBER [#].

Your program participated in AIAN FACES in the fall of 2019 and spring of 2020. When we last communicated with you last spring, we did not plan on additional study activities. However, the Office of Head Start is interested in learning about how Head Start families are faring during the COVID-19 pandemic. As a result, we have added data collection in fall 2021 and spring 2022 to focus on family and teacher well-being. This data collection will be completely remote; study staff will not visit your program. Surveys will be conducted on the web or by telephone.

The study is being conducted by the Administration for Children and Families of the U.S. Department of Health and Human Services. The Administration for Children and Families contracted with Mathematica Policy Research, an independent research organization, to conduct the survey. You should have received a letter from Ann Linehan with the Office of Head Start that describes the AIAN FACES study and your program’s participation. I want to introduce you to [LIAISON NAME] from Mathematica [PAUSE FOR INTRODUCTION].

Mathematica also sent you a letter recently to let you know that your program has been asked to continue with the study. We included a fact sheet with information about the study. Did you receive a letter about the study, along with other materials? And have you had a chance to look at them? [HAVE LETTER AVAILABLE TO PROVIDE INFORMATION IF PERSON IS NOT FAMILIAR WITH THE STUDY.]

We would like to talk with you a little bit about the data collection, answer any questions you may have, assess your program’s interest in participation, and ask for your recommendations on the best next steps we should take. Is this a good time for you to talk?

[ALLOW TIME FOR QUESTIONS, RESPOND TO QUESTIONS OR DEFER QUESTIONS UNTIL LATER IN THE CALL WHEN THE TOPIC IS PRESENTED.]

[IF PERSON CANNOT TALK, ARRANGE FOR A MORE CONVENIENT TIME TO CALL BACK. NOTE THAT THE CONVERSATION SHOULD TAKE 45 MINUTES, BUT MAY TAKE UP TO 60 MINUTES.]

[IF GOOD TIME]: Great. Now that you have met [LIAISON NAME], we are going to give you a little more background on the study and answer any questions you may have.

[LIAISON OR WORKGROUP MEMBER]: Thank you for speaking with us today. We are excited to be working on the continuation of this important study with Region XI.

To begin, I want to let you know that your continued participation is voluntary. 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 control number for this information collection is 0970-0151, and it expires on XX/XX/XXXX.

Study Purpose and Basic Activities

First, I would like to briefly review some of the details about the purpose and design of the study described in the letter, and some of the activities that will take place. Please stop me at any time if you have questions.

* AIAN FACES 2019 is a follow-up to AIAN FACES 2015, which was the first study designed to gather in-depth descriptive information about the characteristics, experiences, and outcomes of children and families served by Head Start programs in Region XI. AIAN FACES 2015 was also the first study to observe the relationships among family and program characteristics, classroom quality, and school readiness in Region XI.
* AIAN FACES 2015 filled an important information gap and allowed Head Start to better serve the needs of Region XI programs, children, and families. We have decided to continue AIAN FACES to help OHS understand children’s and families’ needs in fall 2021, over a year and a half after the start of the COVID-19 pandemic.
* The design of AIAN FACES 2019 grew out of a collaborative process involving Region XI Head Start directors, Region XI Office of Head Start leaders, representatives of the Office of Planning, Research, and Evaluation, and tribal child development researchers. These individuals make up the AIAN FACES Workgroup. The AIAN FACES Workgroup is committed to ensuring that the study is responsive to the unique characteristics of Region XI. It is also committed to ensuring that tribal voices are at the forefront in determining how the study will be designed and carried out and deciding how the information from the study will be presented. The AIAN FACES Workgroup will continue to guide the study as it moves into this continued data collection and, later, to analysis and reporting on the fall 2021 data.

[IF WORKGROUP MEMBER IS LEADING]:[LIAISON NAME] will now talk a little bit about data collection.

Data Collection

To give you a little more information on what is involved, in the fall, we will invite a representative sample of about 800 3- and 4-year-old Head Start families in Region XI to participate in a new wave of the study. Your program has been asked to continue to participate in this important data collection to collect important information about children and families so OHS can understand needs coming out of the COVID-19 pandemic. If your program decides to continue participating and your tribe approves your program’s continued participation in the study, we will use a variety of data-gathering approaches that ensure the efficient collection of high quality data (for example, person­al interviews and surveys). We will use methods that are sensitive to and respectful of cultural differences.

* First I’ll describe what will happen this fall.
* All study activities will be conducted remotely.
* We will select three centers for participation in AIAN FACES. If your program has three or fewer centers, we will select all of them.
* As in 2019 and 2020, in each selected center, we will select two teachers for participation. Then, we will select approximately 13 children per teacher and will invite their families to participate.
* We will ask each selected teacher to complete a brief questionnaire about the social and emotional development of each AIAN FACES child. This questionnaire will be available both on the web and on paper. Teachers are expected to complete the questionnaires on their own time and will receive $10 for each completed questionnaire. We will also ask teachers to complete a brief survey about their well-being in the context of the pandemic.
* We will conduct a survey of parents of children participating in the study. As with past rounds of AIAN FACES data collection, we will offer parents a $30 gift card after they complete the survey.
* In spring 2022, we will repeat the parent survey and teacher-child report. We will also ask you, the center directors, and selected teachers to complete surveys.
* In both the spring and fall, we will work with an on-site coordinator, whom I will talk about in just a few minutes.

Now, moving to three other important points:

**First, all information collected during the course of AIAN FACES will be kept private to the extent permitted by law.** Wewill not share the information we collect with anyone outside the research team, including your program staff or parents. Programs, Head Start staff, children, families, and tribal communities will never be identified by name in any data files or reports of the study’s findings. The parent survey includes a few open-ended questions. We may quote responses parents provide to those open-ended questions in order to illustrate a point, but any specific names or places (or any other information that could identify an individual, program, or community) mentioned will be omitted from study reports. Additionally, we may be required by law to report information regarding child abuse or neglect. The study will obtain a Certificate of Confidentiality from the National Institute of Health to assure participants that the information will be kept private to the fullest extent the law permits.

**Second, information collected during the study is not used for accountability or monitoring purposes.** We want to assure you that information will be reported in aggregate form for all of the 22 Region XI Head Start programs that participate. Federal staff will not receive information about specific programs, only for the entire group of programs together. It will not be reported by program, center, or child. Do you have any questions so far?

Next Steps

We want to ask for your help in determining the best way to proceed in asking for permission and approval to continue conducting the study in your program. Mathematica has already obtained Institutional Review Board (IRB) approval from its own IRB for the AIAN FACES study. IRB approval helps to ensure that our study meets scientific standards to protect study participants.

* Do you know who needs to review and approve the continuation of this research in your community, such as a specific committee or tribal council?
* What do you recommend as next steps?
* Are there any particular concerns, such as privacy, associated with continuing to conductthe study in your program that we need to address in our future correspondence with and presentations to tribal leaders?

[ADDRESS ANY QUESTIONS OR CONCERNS. ALLOW DIRECTOR TO RESPOND BY SPECIFYING NEXT STEPS. COLLECT INFORMATION ABOUT FORMS NEEDED AND MEETING DATES OR TIMELINES AND THEN ENTER INFORMATION INTO THE AIAN FACES DATABASE.]

We very much appreciate all your time in talking with us today. We hope that we will get to continue work with [PROGRAM NAME] on this important study. We will now [LIST NEXT STEPS DISCUSSED]. We will be back in touch with you to speak further about the next steps in asking for continued approval for the study.

If we receive approval to continue with the study, we will request information on all the centers in the program in order to select the teachers for the study. We will ask you to designate an on-site coordinator—someone from your program who can help us with our preparations.

In the meantime, what is the easiest way to contact you—by phone or email? [CONFIRM THAT THIS PERSON IS THE ONE WHO SHOULD BE YOUR REGULAR CONTACT.] Do you have any questions at this point? If questions or concerns come up, please feel free to contact me at [PHONE or E-MAIL ADDRESS].

[WORKGROUP MEMBER], is there anything else we have not covered?

[WORKGROUP MEMBER THANKS DIRECTOR AND ENDS CALL.]

**[AS TIME PERMITS ON FIRST CALL, BELOW MAY REQUIRE FOLLOW-UP ONCE TRIBAL APPROVAL IS OBTAINED.]**

Next, I want to confirm and update some basic information about your Head Start program. [CONFIRM AND/OR UPDATE THE FOLLOWING IN THE AIAN FACES DATABASE]:

* CONFIRM CONTACT INFORMATION: Please confirm the following information: program director name, physical and mailing addresses, phone numbers, email addresses
* PROGRAM OPTION: Under non-pandemic conditions, is your program center-based, home-based, a mix of the two, or is it a locally designed program?
* How many lead teachers are associated with each center? How many home visitor caseloads are affiliated with each center? [NOTE: ALL CASELOADS NEED TO BE ASSIGNED TO ONE AND ONLY ONE CLASSROOM-BASED CENTER.]

Now I’d like to ask some questions about changes your program may have implemented as a result of the COVID-19 pandemic. [IF CONVERSATION TAKING PLACE BEFORE THE START OF THE PROGRAM YEAR]: When answering these questions, please think about what your plans are for the 2021-2022 program year.

* Will classes meet in person? Will home visitors be working with families in their homes, virtually/remotely, or a combination of both, sometimes referred to as a hybrid approach?
* [IF NOT FULLY VIRTUAL/REMOTE] Will all children receive in-person class instruction on the same days, or is in-person instruction alternated for small groups?
* Do you expect there will be children receiving Head Start services in fall 2021 but no instruction or home visits, or a “service-only group”? For example, children receiving food services only?
* Is there anything else you'd like us to know about how your program operations have changed as a result of the pandemic that would help us work together this fall?

Center, Teacher, and Child Selection

Next, I want to explain to you how we will choose the centers, teachers, and children that will be asked to participate in the study.

* **Center selection.** To select centers, I’ll need some information from you.
* In AIAN FACES, we consider a center to be eligible if it has at least one preschool Head Start classroom (in-person or virtual/remote) with at least one preschool Head Start child. However, child care partnership centers and family child care centers are not eligible. From the Head Start Enterprise System, I see that you have [NUMBER] centers. These include [LIST CENTERS]. Is this correct? Do you operate any additional Head Start centers that I did not mention? Are any of the centers I listed no longer in operation? Are any of these center-based child care partner organizations or family child care centers? [READ IF NECESSARY] The PIR defines a child care partner as an individual child care center, umbrella organization operating multiple child care centers, child care resource and referral (CCR&R) network, or other entity with whom the Head Start program has formal contractual agreements to provide child care services to enrolled children that meet the Head Start Program Performance Standards.
* What is the estimated percentage of dual language learners in each center?
* Typically, three centers will be randomly selected for participation. If a program has three or fewer centers, we will include all of them in the study.
* **Teacher and child selection.** Unlike in the fall of 2019, this fall we will conduct the teacher and child sampling remotely. We will need to collect a lot of information from you about teachers, center staff, and families. Since it is a lot of information and some of it is private, we ask on-site coordinators to use a secure file sharing website called Box to share this information with us. Will you have access to a computer and internet so that you can share this information with us securely? If necessary, this information could be provided over the phone.
* Approximately two teachers will be randomly selected in each center. If a center has only one or two teachers, we will include all of them. I will ask the OSC to provide a list of all teachers and home visitors associated with each selected center.
* After teachers have been selected for the sample, children will be randomly selected for the study. I will ask for a list of the names, dates of birth, enrollment date into preschool Head Start, whether the child participated in Early Head Start, funding source(s), and mode of instruction for all children assigned to the selected teachers or in the selected home visitors’ caseloads. We will select approximately 13 children per teacher and will invite their families to participate. The non-selected children assigned to each teacher may be used as backup sample if parental consent rates for the selected children are lower than expected.

Identify On-Site Coordinator

As I mentioned earlier, we would like to work with an on-site coordinator (which we refer to as the OSC) from your program—someone you designate—to help us with our preparations. You may designate one or two people, depending on your preference. Last time, we worked with [OSC NAME]. We will need this person’s help as we prepare for data collection. It is important that we establish a close working partnership—this is the [person/people (IF MORE THAN ONE ON-SITE COORDINATOR/COORDINATORS)] who will ensure that our data collection plan conforms to your local requirements. We will work with the OSC to minimize the burden on your program, and we will be respectful of staff, families, children, and the community. Together, the OSC and I will develop the data collection plan, and then we will submit a copy to you. The coordinator(s) will be responsible for:

* Working with me to identify eligible teachers and children to be sampled for the study.
* Helping us obtain parental consent and track the receipt of consent forms.

The OSC will receive an honorarium of $500 for helping us in fall 2021. If there are two coordinators, each will receive $250. We expect there will be another, smaller honorarium in spring 2022. We will provide a check in that amount as an honorarium for the coordinator’s or coordinators’ help. If you wish, this gesture of appreciation can be made directly to the program. Do you give us permission to pay the OSC directly? [RECORD RESPONSE IN PROGRAM NOTES].

Do you know who you would like this person [these people] to be or do you want to think about it? I will call you at another time to discuss this matter if you are not yet sure. [ENTER THE IDENTIFIED NAME(S) INTO THE AIAN FACES DATABASE. BE SURE TO HAVE A CONTACT PERSON OTHER THAN THE ON-SITE COORDINATOR(S) JUST IN CASE THERE IS A CHANGE IN COORDINATOR(S)!]

[IF THE ON-SITE COORDINATOR(S) IS (ARE) NAMED] With your permission, I would like to contact the individual(s) to explain our AIAN FACES procedures and our expectations of the on-site coordinator(s). [GET THE ON-SITE COORDINATOR’S(S’) NAME(S) AND CONTACT INFORMATION, BUT WAIT FOR PERMISSION TO CONTACT THE INDIVIDUAL(S).]

It is important that we establish a good working partnership with the on-site coordinator(s), as he or she is the person we will work with to ensure that we develop a data collection plan that conforms to your local requirements and minimizes the burden on your program. I will work with the on-site coordinator(s) to develop that plan, and we will send you a copy of the completed plan, which will include:

* The number of Head Start teachers in each selected center
* A schedule for selecting the sample of teachers and children
* The procedures for obtaining parental consent
* A schedule for the data collection

Next Steps

* [IF ON-SITE COORDINATOR(S) NOT NAMED EARLIER] Once you have identified the on-site coordinator(s), I would like to send the individual(s)—with your permission—detailed information about the study and arrange a time to discuss coordination responsibilities. It would be helpful if you could identify the on-site coordinator(s) within the next few days.
* [IF ON-SITE COORDINATOR NAMED EARLIER] With your permission, I would like to send the on-site coordinator you selected detailed information about the study and arrange a time to discuss his or her coordination responsibilities. It would be helpful if that could be accomplished soon, ideally within one week.
* In case I need to follow up with you for any reason, what is the easiest way to contact you—by phone or email? [CONFIRM THAT THIS PERSON IS THE ONE WHO SHOULD BE YOUR REGULAR PROGRAM-LEVEL CONTACT.]
* Do you have any questions at this point? If questions or concerns come up, please feel free to contact me at [LIAISON PHONE] or [E-MAIL].

Thank you for participating in this important study. We appreciate your cooperation, and I look forward to continuing to work with your program!