**Instrument 3 - SIRF Reflections from Fathers**

*MDRC will develop an electronic data collection approach using Qualtrics that the Learning Cycle Manager and staff at each site can use to solicit reflections from fathers to be used in each site’s learning cycle reflection process. All possible questions are noted below but the exact deployment of them will depend on the interventions being tested with each site.*

Hello! [name the program] is partnering with [MDRC](http://www.mdrc.org), a nonprofit organization, to learn how to better support fathers in their program. The project is called Strengthening the Implementation of Responsible Fatherhood Programs, or [SIRF](https://www.mdrc.org/project/strengthening-implementation-responsible-fatherhood-programs-sirf#overview). [Name the program] is one of 10 fatherhood programs involved in this project.

As part of this project, we’d like to hear about your experiences with [name the program] by asking you a few questions. Your responses will help the program to better engage fathers in their services. Your responses will also be combined with those from the other programs participating in the project to come up with ideas for how fatherhood programs nationwide can be better in the future.

It will take about 15 minutes to give your feedback. We will not ask you to provide any personal information. Your responses will be kept private. Providing your feedback is your choice. There is no penalty for not answering these questions.

If you have questions about this project you can reach out to MDRC by email ([SIRF@mdrc.org](mailto:SIRF@mdrc.org)) or call the SIRF hotline at (877) 375-9340.

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PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to gather preliminary information about the fatherhood field and explore with fatherhood programs the research questions that are of interest and the design options that are feasible. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. The answers you give will be kept private. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0531 and the expiration date is 07/31/2022. If you have any comments on this collection of information, please contact; Charles.Michalopoulos@mdrc.org, and Dina Israel; Dina.Israel@mdrc.org; Attn: OMB-PRA (0970-0531).

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| Consent | Given what you just read about the purpose of this project, please select a response below.   * I agree to provide my feedback about [name of program] to help the program and the SIRF project to learn how to better support fathers. I understand that no personal information will be collected about me. [move to **2. Recruit or 7. Participated,** depending on site and timing in cycle] * I do not agree to provide my feedback about [name of program]. I understand that there is no penalty for now answering these questions. [move to **Exit\_no\_consent**] | |
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| 1. **Recruit** | How did you hear about [name the program]?  Select one. | * Family, friend, or associate [move to **4. Wait\_time**] * Social media [move to **4. Wait\_time**] * Flyer or billboard [move to **4. Wait\_time**] * Radio or TV [move to **4. Wait\_time**] * Another organization [move to **4. Wait\_time**] * An event in the community [move to **4. Wait\_time**] * Something else [move to **3. Recruit\_other**] |
| 1. **Recruit\_other** | How did you hear about [name the program]? | [short form response]  [move to **4. Wait\_time**] |
| 1. **Wait\_time** | How long did you wait before reaching out to [name the program]?  Select one. | * Less than a week * 2 to 3 weeks * Less than a month * More than a month   [move to **5. Impression**] |
| 1. **Impression** | What were your first impressions of [name the program]? | [short form response]  [move to **6. Enroll\_reason**] |
| 1. **Enroll\_reason** | What was your main reason for enrolling in [name the program]?  Select one. | * To get help with employment * To get help with parenting issues * To get help to strengthen my relationships with others * To get help with child support * To get help with court or criminal justice issue * I was encouraged by someone else to enroll * Another reason   [move to **7. Participated** or **exit\_responder**, depending on site and timing in cycle] |
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| 1. **participated** | Have you attended any services from [name the program] in [timeframe]?  Select one. | * Yes, in person [skip to **17. attendance**] * Yes, online [skip to **17. attendance**] * Yes, both in person and online [skip to **17. attendance**] * no [move to **8. reason\_no\_attend**] |
| *Question series for fathers who did not attend any services during timeframe in question.* | | |
| 1. **Reason\_no\_attend** | What was the main reason you did not attend?  Select one. | * Not supposed to attend (didn’t sign up or sessions weren’t scheduled) [skip to **exit\_responder**] * Difficult to attend [skip to **9. difficult**] * No longer interested in services [skip to **13. not\_interested**] * Forgot [skip to **exit\_responder**] * Something else [skip to **16. other\_reason**] |
| 1. **Difficult** | What was the main reason it was difficult to attend?  Select one. | * Not convenient time or location [skip to **10. not\_convenient**] * Issue with computer or internet access [skip to **Exit\_responder**] * Personal/family issues [skip to **11. personal\_issues**] * Something else [skip to **12. difficult\_text**] |
| 1. **not\_convenient** | Why was the time or location inconvenient?  Select one. | * Lack of childcare * Work scheduling conflict * Other scheduling conflict * Not easy to get to/transportation * Something else   [move to **Exit\_responder**] |
| 1. **personal\_issues** | What type of personal or family issue?  Select one. | * Lack of childcare * Living situation * Legal or law enforcement issues * Conflict with child’s other parent * Something else   [move to **Exit\_responder**] |
| 1. **Difficult\_text** | What made it difficult to attend? | [short form response]  [move to **Exit\_responder**] |
| 1. **Not\_interested** | Why are you no longer interested in services?  Select one. | * Achieved my goals [move to **Exit\_responder**] * My goals changed [move to **Exit\_responder**] * Found a different program to attend [move to **Exit\_responder**] * Did not like the program [skip to **14. not\_like**] * I have another reason for not being interested [move to **Exit\_responder**] |
| 1. **Not\_like** | What did you not like about the program?  Select one. | * Do not like the way it was delivered [move to **Exit\_responder**] * Topics were not helpful to me [move to **Exit\_responder**] * Too many program hassles [move to **Exit\_responder**] * Something else [move to **15. Other\_not\_like**] |
| 1. **Other\_not\_like** | What did you not like about the program? | [short form response]  [move to **Exit\_responder**] |
| 1. **Other\_reason** | What was the reason you did not attend? | [short form response]  [move to **Exit\_responder**] |
| *Question series for fathers who did attend during the timeframe in question.* | | |
| 1. **Attendance** | About how many times have you met with someone from [name the program] since [timeframe]?  Select one. | * 1 or 2 times * 3 to 5 times * 6 times or more   [move to **18. challenge\_part**] |
| 1. **Challenge\_part** | Do you ever find it challenging to attend services offered by [name the program]? | * Yes [move to **19. Main\_challenge**] * No [skip to **27. support\_goals**] |
| 1. **Main\_challenge** | What is the main challenge you have to attend services offered by [name the program]?  Select one. | * Personal/family issues [skip to **20. personal\_issues2**] * Not convenient time or location [skip to **21. not\_convenient2**] * Need more motivation [skip to **22. motivation**] * Issue with computer or internet access [skip to **Exit\_responder**] * Something else [skip to **27. support\_goals**] |
| 1. **personal\_issues2** | What type of personal or family issue?  Select one. | * Lack of childcare * Living situation * Legal or law enforcement issues * Conflict with child’s other parent * Something else   Move to [**27. support goals**] |
| 1. **not\_convenient2** | What specifically made it inconvenient?  Select one. | * Work scheduling conflict * Other scheduling conflict * Not easy to get to/transportation * Something else   Move to [**27. support goals**] |
| 1. **Motivation** | What could help you be more motivated?  Select one. | * Different program topics * Fewer program hassles * Different staff * Different program format * Something else   Move to [**23. support goals**] |
| 1. **Other\_challenge** | What is the another challenge you have to attend services offered by [name the program]? | * Personal/family issues [skip to **24. personal\_issues3**] * Not convenient time or location [skip to **25. not\_convenient3**] * Need more motivation [skip to **26. motivation**] * Issue with computer or internet access [skip to **Exit\_responder**] * Something else [skip to **27. support\_goals**] |
| 1. **Personal\_issues3** | What type of personal or family issue?  Select one. | * Lack of childcare * Living situation * Legal or law enforcement issues * Conflict with child’s other parent * Something else * Move to [**27. support goals**] |
| 1. **Not\_convenient3** | What specifically made it inconvenient?  Select one. | * Work scheduling conflict * Other scheduling conflict * Not easy to get to/transportation * Something else * Move to [**27. support goals**] |
| 1. **Motivation3** | What could help you be more motivated?  Select one. | * Different program topics * Fewer program hassles * Different staff * Different program format * Something else * Move to [**27. support goals**] |
| *Question series for fathers who did attend during the timeframe in question.* | | |
| 1. **support\_goals** | Do you feel that [name the program]’s support is helping you to reach your goals? | * Yes [skip to **29. most\_useful**] * No [move to **28. support\_needed**] |
| 1. **support\_needed** | What additional support do you need to reach your goals? | [short free-form response]  [move to **29. most\_useful**] |
| 1. **most\_useful** | What aspect of [name the program] do you think is most useful for you to meet your goals?  Select one. | * The program topics * Help with employment * Help with parenting issues * Help to strengthen my relationships with others * Help with child support * Help with court or criminal justice issue * Other services * The staff * Other fathers * Nothing   [move to **Exit\_responder**] |
|  | | |
| **Exit\_responder** | Thank you for responding! Your input will help [name the program] to improve! We wish you success in reaching your goals. | |
| **Exit\_no\_consent** | Thanks for considering. We wish you all the best on your fatherhood journey. | |