

## PROGRAM STAFF SURVEY FOR SIMR

**Note to reviewers:** This instrument includes a universe of items and questions relevant to a broad range of strategies that will be tested in the Strengthening the Implementation of Marriage and Relationship Education (SIMR) project. The instrument will be tailored and shortened for each individual site and the strategy that it is testing.

### Introduction

Thank you for participating in this pilot for the Strengthening the Implementation of Marriage and Relationship Programs (SIMR) study. SIMR is a study sponsored by the Administration for Children and Families within the U.S. Department of Health and Human Services. Through this project, [Program] is designing and testing [strategy] to address [topic], a common challenge for many healthy marriage and relationship education programs.

The purpose of this information collection is to learn about your experience using [strategy]. You may be asked to complete this survey multiple times during the pilot period. It should take about 10 minutes each time to complete this survey.

Participation in this information collection is voluntary. There are no penalties or negative repercussions for leaving any questions blank or declining to participate. However, you are encouraged to respond to as many questions as possible. The information you provide will be used to refine and improve the strategy. All individual responses that are collected are kept private to the extent permitted by law. Please do not include any personal information, such as your name or contact information, on this form.

NOTE: The Paperwork Reduction Act Statement: This collection of information is voluntary and will be used to gather information for the purpose of rapid-cycle learning activities to strengthen programs. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. 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 and expiration date for this collection are OMB #: 0970-0531, Exp: 07/31/2022. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Robert Wood; RWood@Mathematica-mpr.com

## Section A. Use of [strategy]

1. *Required:* Did you use [strategy] in the past [survey time interval]?

- a. Yes (Skip to Section C)
- b. No (Proceed to Section B)

## Section B. Didn't use [strategy]

2. You responded that you didn't use [strategy]. Why not?

- a. Open-ended response

3. Thinking about this past [survey time interval], please rate your agreement with the following statements:

Statement	Strongly disagree	Disagree	Agree	Strongly agree
a. I feel like I have the support I need to use [strategy].	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. My supervisor encourages me to use [strategy].	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. My colleagues encourage me to use [strategy].	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. [Strategy] contributes to improved recruitment of program participants.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
e. [Strategy] contributes to improved retention of program participants.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
f. [Strategy] contributes to participants better engaging with the program (for example: more attention, interest, or active participation in program activities).	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

4. Do you have any additional comments about trying out [strategy] in your organization? [Skip to Section E]

- a. Open-ended response

## Section C. Details about use of [strategy]

5. About how often did you use [strategy] in the past [survey time interval]?

- a. Multiple choice [insert options relevant to strategy, e.g. daily, every workshop session, more than half of case management meetings, etc.]

6. About how many times did you use [strategy] in the past [survey time interval]?

a. Multiple choice [insert options relevant to strategy]

7. Thinking about your use of [strategy] in the past [survey time interval], please rate your agreement with the following statements:

Statement	Strongly disagree	Disagree	Agree	Strongly agree
a. I feel comfortable using [strategy].	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. Using [strategy] makes my job easier.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. Using [strategy] makes my job more complicated.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. Using [strategy] creates more work for me.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
e. I feel like I have the support I needed to use [strategy].	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
f. My supervisor encourages me to use [strategy].	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
g. My colleagues encourage me to use [strategy].	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
h. [Strategy] contributes to improved recruitment of program participants.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
i. [Strategy] contributes to improved retention of program participants.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
j. [Strategy] contributes to participants better engaging with the program (for example: more attention, interest, or active participation in program activities).	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
k. [Strategy] contributes to improved [participant outcome].	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

## Section D. Open-ended questions about [strategy]

8. [If applicable] You answered “agree” or “strongly agree” that [strategy] contributes to improved recruitment. Please explain what made you give that answer. [Insert skip logic from 7g]

a. Open-ended response

9. [If applicable] You answered “agree” or “strongly agree” that [strategy] contributes to improved participants’ retention in the program. Please explain what made you give that answer. [Insert skip logic from 7h]

a. Open-ended response

10. *[If applicable]* You answered “agree” or “strongly agree” that [strategy] contributes to improved participants’ engagement with the program. Please explain what made you give that answer. [Insert skip logic from 7i]
  - a. Open-ended response
11. *[If applicable]* You answered “agree” or “strongly agree” that [strategy] contributes to improved [participant outcome]. Please explain what made you give that answer. [Insert skip logic from 7j]
  - a. Open-ended response
12. What part of [strategy] worked well? Why?
  - a. Open-ended response
13. How did participants respond to [strategy]?
  - a. Open-ended response
14. What part of [strategy] did not work very well? Why?
  - a. Open-ended response
15. What suggestions for improvement do you have for [strategy]?
  - a. Open-ended response
16. Do you have any additional comments about trying out [strategy] in your organization?
  - a. Open-ended response

## Section E. Information

17. *[If applicable]* Select the location where you work.
  - a. Option A
  - a. Option B
  - b. Option C
18. *[If applicable]* Select your position.
  - c. Option A
  - d. Option B
  - e. Option C
19. *[If applicable]* Enter your SIMR ID number.