Instrument 3

Head Start Enrolled Families Focus Group Guide

*OMB#: XXXX-XXXX*

*Expiration Date: XX/XX/XX*

**SPRING 2022 HEAD START REACH CASE STUDY SITE VISITS**

**HEAD START ENROLLED FAMILIES**

**FOCUS GROUP GUIDE**

In spring 2022, the Head Start REACH team will use this guide to conduct 90-minute focus groups with families enrolled in six Head Start programs. Each focus group will include 8-10 families; only one parent from each family will be asked to participate. We will ask parents to fill out a consent form. We will seek parents’ permission to record all focus groups.

***NOTE****:* This is a guide, not a script. The guide has been developed to apply to families with young children who are enrolled in Head Start. Moderators will need to tailor questions to the specific programs and add probes to further explore the experiences recounted by group members.

A. INTRODUCTION

A. Moderator and co-facilitator introductions

Thank you for taking the time to speak with us today. We are from Mathematica, an independent research firm; and we are here to learn about how parents make decisions about child care for their children and experiences with [PROGRAM NAME]. My name is [NAME] and my colleague is [NAME].

B. Explanation of Project and Purpose of Group Discussion

We are conducting a study called Head Start REACH on behalf of the Administration for Children and Families (ACF) in the U.S. Department of Health and Human Services. We are interested in hearing about your experiences as part of a broader research study that is looking at how programs like [PROGRAM NAME] conduct outreach and serve families with young children. We are interviewing staff at this program and other organizations that work with the program and holding discussion groups with participants like yourselves to ask about your experiences with the program. A discussion group, also called a focus group, is a way to find out what people think through group discussion. We are interested in learning about your ideas, feelings, and opinions. We also are interested in learning about how you came to be involved in this program; what your enrollment experience was like; what program activities you have participated in; what you find helpful about this program; and what you think should be improved. We will use the information you share with us to write a summary of what we have learned, but we will not use any of your names in our final report, so please feel free to talk openly about your opinions.

C. Confidentiality and Taping

The information we collect will be summarized only for the project. Although we will be taping the session and taking notes, we will not use any names; if we use quotes, we won’t attribute them to anyone. We will not share any information you tell us with [PROGRAM NAME]. We value the information you will share with us and want to make sure we capture it all. Only the study team will listen to the recordings and we will destroy the recording at the end of the project. Data from this discussion will be transmitted to the [Child & Family Data Archive](https://nam12.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.childandfamilydataarchive.org%2Fcfda%2Fpages%2Fcfda%2Findex.html%3Futm_source%3DALLMEDIA-TO-ARCHIVE%26utm_medium%3DALLMEDIA-TO-ARCHIVE%26utm_campaign%3DALLMEDIA-TO-ARCHIVE&data=04%7C01%7CHShah%40mathematica-mpr.com%7Cb16cab3097794f8834e408d8fdffde34%7C13af8d650b4b4c0fa446a427419abfd6%7C0%7C0%7C637538622674863635%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=gWbQCF9dlRJ%2BpRkDgmEV4IT14KxNWHJ7HFntTFYySXY%3D&reserved=0) or a similar data archive at the end of the study so it can be used by other researchers. No personal information that could identify you or the programs you serve will remain in the interview notes that are shared with the data archive.

Is it okay for us to start the recording?

D. Ground Rules for Discussion

Before we start, we want to provide guidance about how our time together will go:

* This will be an informal discussion.
* The discussion will last about 1 and 1/2 hours. There will be no formal breaks. If needed, please feel free to stretch or go to the bathroom.
* There are no right or wrong answers to the questions we will ask. We are interested in learning each of your opinions. We very much appreciate your input.
* We would like only one person to talk at a time so the recorder can pick up everyone. But we hope that each of you will speak up and tell us your thoughts and feelings.
* Everyone’s circumstances are different and what is shared here should not be discussed outside of this gathering.
* To keep us on schedule, I may change the subject or move the discussion ahead from time to time.
* Each person here today will receive a $25 gift card to show our appreciation for your feedback.

B. QUESTIONS

E. Introductions

*To get things started, I’m going to go around the room and ask each of you for your first name, how long you’ve been in the program, how many children you have in the program, and what their ages are. Then we will discuss your experiences in [PROGRAM NAME]. We would like everyone to participate in the discussion.*

1. Please introduce yourself and share how long you have been participating in [PROGRAM NAME].
2. Please also tell us how many children you have who are attending [PROGRAM NAME] and what their ages are.

F. Recruitment, Enrollment, and Motivation for Enrolling in Program

*First, we’d like to talk about how you learned about [PROGRAM NAME] and why you were interested in joining it.*

1. How did you first learn about [PROGRAM NAME]? PROBE: Was it through staff at [PROGRAM NAME], staff at another organization, or through other parents, family, or friends?
2. If you learned about the program through another organization, which organization was it?
3. How did the organization staff introduce the program to you?
4. How did they put you in touch with the program?
5. What did you hear about [PROGRAM NAME]’s services before you signed up?
6. Did you consider any other child care options?
7. What convinced you [or your family] to participate in [PROGRAM NAME]?
8. Who was your first point of contact from [PROGRAM NAME]?
9. Which program staff helped you understand the services available and what steps you needed to take to sign up?
10. How was your experience signing up for the program?

USE QUESTIONS BELOW AS PROBES TO UNDERSTAND THE LOGISTICS OF SIGNING UP AS WELL AS THE TONE SET BY THE PROGRAM IN THE INITIAL CONTACT:

1. How easy or difficult was it to complete paperwork? PROBE: For example, filling out forms and obtaining and submitting the required documents you needed to provide, like pay stubs, proof of address, etc.
2. How did staff at [PROGRAM NAME] help you in completing paperwork? PROBE: For example, help with filling out forms and obtaining and submitting the required documents you needed to provide, like pay stubs, proof of address, etc.
3. How else did staff at [PROGRAM NAME] help you sign up?
4. If you learned about the program through another organization, did their staff help you sign up for the child care program here? How did they help? PROBE: This could include help with completing paperwork and obtaining documents, providing child care so you could complete enrollment requirements, etc.
5. What were your interactions with staff at [PROGRAM NAME] like during the signing up process?
6. What about the signing up experience did you like?
7. Was there anything that made signing up difficult?
8. Were you ever on the waitlist to receive services from [PROGRAM NAME]?
9. IF YES: What was that experience like?

Attendance, engagement, and retention in program (Experience post-enrollment)

*Now we’d like to discuss your experience after you signed up for the program.*

1. How quickly did your family start attending Head Start or receiving home visits after enrolling into the program?

Attendance in program

*Now I want to talk about how frequently your child goes to child care at the program or how often you receive home visits.*

1. Some people say their child goes to school every day or they have regular visits with their home visitors, while other parents find it hard to get their child to class every day or meet with the home visitor. How about for you?
2. What makes it hard for you to get your child to school every day, or to make time to see the home visitor?
3. Do staff from [PROGRAM] help you so your child can go to school or so you can meet with your home visitor?
4. If yes, in what ways?
5. Which program staff help you so your child can go to school and you can meet with your home visitor?
6. What happens if your child misses class or you miss an appointment with the home visitor? [PROBE: For example, does someone from the program call you? Does your home visitor call you to schedule another appointment with you?]
7. What has helped your child go to school regularly or helped you meet with your home visitor regularly?
8. Could the program do anything else to help you to participate regularly?
9. How would you describe your relationship with program staff?
10. Do you know other families enrolled in this program?
11. Has knowing other families been helpful to you? In what way?

Participation in program activities

*Head Start programs often have activities that parents participate in, such as workshops, program events, group socialization activities for parents and their children, and volunteer opportunities for parents (such as participating in the Parent Council or volunteering in their child’s classroom).*

1. How often do you participate in such activities at [PROGRAM NAME]?
2. Do staff from [PROGRAM NAME] encourage you to participate in these activities?
3. If yes, which staff members provide this encouragement?
4. How do these staff members encourage you to participate in these activities?
5. Did this encouragement affect your decision to participate in program activities?
6. What, if anything, has made it hard for you to participate in these activities at the program?
7. Thinking about the program activities you have participated in, which have been the most helpful you?
8. Can you tell me why?

Identifying interests and needs and connecting families to services

*Families might need supports and help directly from the program but the program may also connect families to other services, such as health or social services. We’d like to ask you about how helpful the program has been in identifying your needs, being responsive to your interests, providing services, and connecting you to other services. At this time, we will not discuss specific needs or the specific services the program connects you to.*

1. How helpful has the program been in identifying your goals and needs?
2. How helpful has the program been in connecting you to services? This could include services such as medical, dental, needs related to job training, social services, housing, and food assistance.

Retention in program

1. Children naturally move out of the program when they enter kindergarten. If your child is still eligible for Head Start next year, how likely are you to stay enrolled in [PROGRAM NAME]?
2. Has anyone from [PROGRAM NAME] talked to you about re-enrolling next year?
3. What are the factors (if any) that might lead you to leave the program?
4. What are your reasons for wanting to stay enrolled in the program?

**Overall satisfaction with program**

*We will wrap up today’s discussion with a few questions about your overall experience with [PROGRAM NAME].*

1. Thinking about the overall program, how satisfied have you been with your experience in [PROGRAM NAME]?
2. What aspects of the program are you most satisfied with?
3. Which, if any, aspects of the program do you think can be improved?
4. What would make these aspects of the program better?
5. How likely are you to recommend [PROGRAM NAME] to other families in the community?
6. Why?
7. Is there anything else you’d like to share with us today about your experience in [PROGRAM NAME]?

*This concludes our questions for today. Thank you again for taking time to answer our questions. Does anyone have a question or comment they’d like to share before we end?*

[Distribute gift cards and get signed receipt].