Appendix N. Instrument 10 In-depth participant interview guide

Next Generation of Enhanced Employment Strategies Project In-depth participant interview guide

Introduction & Consent

Thank you so much for meeting with me today. My name is _____ and I am with an independent research organization called Mathematica. We are conducting the Next Generation of Enhanced Employment Strategies (NextGen) Project for the Office of Planning, Research, and Evaluation (OPRE) within the U.S. Department of Health and Human Services, [FOR SITES FUNDED BY SSA: in partnership with the Social Security Administration]. The NextGen Project is conducting a study to learn more about how programs like [INTERVENTION NAME] can better support participants and help them find jobs. As part of this study, we are talking to people like you to better understand the personal stories of those being served by these programs. We are also interested in hearing about your experiences with [INTERVENTION NAME] specifically.

You first heard about the potential to participate in this interview when you read and signed the consent form and agreed to enroll in the study. Your participation in this interview is voluntary—the choice is yours. If you choose not to participate there will be no effect on any services that you or your family receive, or your relationship with [INTERVENTION NAME]. Our conversation will take about 2 hours. At the end, you will receive a \$60 gift card. During our conversation, anything you say will be kept private to the extent allowed by law. We also won't use your name or any other identifying information when we report the results of our study. We won't share what you say with staff from the [INTERVENTION NAME]. If you do not feel comfortable answering a question, just let me know and we can skip that question and move on to the next question.

According to the Paperwork Reduction Act, a government 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-XXXX and the expiration date is XX/XX/XXXX.

I would like to record our conversation so I don't miss anything. No one will listen to the recording except for people on my study team and the person who types it up. These people are required to keep the information on the recording private and secure. Is it okay with you if I record this conversation? If you want me to turn the recorder off for any reason or at any time, just say so. [*Interviewer: Turn the recorder on*]

Okay, I have now turned on the recorder. Now that I have the recorder on, I need to ask you again, is it okay if I record this conversation? [*Interviewer: Get verbal consent to tape on the tape recording.*]

Do you have any questions before we begin?

[Interviewer: State your name, the respondent's first name only, the location, and the date.]

Public Burden Statement

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is xxxx-xxxx. The time required to complete this information collection is estimated to average 120 minutes including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate to XXX OMB expiration date xylxy/xyxxy.

A. Respondent background

- 1. To start off, could you tell me a little bit about yourself and your family? Do you have any kids? What are their names? How old are they? Which of them live with you right now?
- 2. Did you grow up in this area? If so, where? If not, where did you grow up? How long have you lived here? Tell me a little bit about the neighborhood where you live now. Do you like it? What are some of the good things about it? What are some of the challenges?
 - 3. What three things about you or your life are you most proud of?
- 4. What, if anything, would you like to be different about your life in the next six months? *Probe: Think about things that might be a little challenging, but still possible for you.*
- a. What changes would you need to make so that six months from now your life looks like that?
- b. What could get in the way of you making those changes? *Probes: Things that can get in the way could be external to you, like transportation and child care, or internal, like telling yourself that you can't succeed, putting things off, or just generally feeling unmotivated or down.*

B. Experience with work

Let's transition a little bit and talk about your recent experience with work.

- 1. Tell me about the last time you worked—this can be now or in the recent past. It could be something that you did for hourly pay or something you did more on your own, like driving for Lyft or Uber or doing side jobs. [Interviewer: If person responds that they have never worked, skip to question 7]
- 2. Are you still working in that job? If yes, when did you last go into work? If no, how long ago did you last work at that job?
 - [Interviewer: Text is written in present tense. Adapt to past tense if person is no longer working at that job.]
- 3. How did you find out about the job? What made you interested in the job? How did you finally get it? What was the process? Who helped you along the way? Did you learn about the job or get the job with the help of [INTERVENTION NAME]?
- 4. Tell me more about the job itself, like:
 - a. Where is it physically located? How close is that to your home?
 - b. Who is your employer or are you self-employed?
 - c. How many hours do you work each week? How predictable is your work schedule? What are your typical start and end times?
 - d. Are you able to take time off if you're sick or if you have to take care of a sick family member? Are you ever concerned about losing your job if you do take this time off? Are there other things that make you concerned that you might lose your job?
 - e. How do you spend your time at your job? What kind of things do you do?

- f. What do you like best about the job? What do you like least?
- g. Did you ever earn a promotion? Could you share more about that? Did you ever get a pay raise?
- 5. [If the participant is no longer working at that job:] Why are you no longer working at that job? What happened? *Probes: lack of resources (e.g., transportation, child care)*, *internal factors (e.g., motivation)*, *external factors (e.g., company layoffs, inflexible schedules)*
 - a. Looking back, what did you learn from that job? What went well? What might you have done differently? What did you learn about your strengths? What did you learn that you might do differently in the future?
 - b. Are you looking for a job now? [If yes:] Have you been looking for a job for a long time? Tell me about that experience. What have you been doing to find a job? What has been happening? Did you have any help? From whom?
 - c. [If not working and not looking for work:] Why aren't you looking for work?
- 6. Now, let's talk about a job that you have had in the past that you really enjoyed. Tell me about that job with the same kind of detail that you described in your recent job. What about this job made it so enjoyable for you?
- 7. Thinking specifically about your future work, what would you like to be doing six months from now? Where would you be working? How much money would you be making? What would you need in order to work in that job?
- 8. What might get in the way of you getting that job that you just described?
- 9. Throughout your life, what challenges have you faced when looking for work or keeping a job once you have one? What support have you received in looking for work or keeping a job? *Probe for support from friends, family, coworkers, employers, or a program they were participating in.*
- C. Experiences with [INTERVENTION NAME]

I'm going to ask you a few questions about what you have been doing as part of [INTERVENTION NAME] and what you think about your experience so far. As a reminder, I'm not at all connected to the program so please share what you really think.

First, are you still participating in [INTERVENTION NAME]?

[Interviewer: Text below is written in present tense. Adapt to past tense if person is no longer participating in the intervention.]

Initial experience

- 1. Walk me through what happened when you first heard about [INTERVENTION NAME]? How did you hear about it? When was that? What were your first impressions? What made you decide to sign up? What really got your attention? What were you most excited about?
- 2. How long have you been involved with [INTERVENTION NAME]?
 - 3. How have your initial hopes about [INTERVENTION NAME] compared to your actual experience? What is similar? What is different?

Relationships with intervention staff

- 1. Tell me about the people at [INTERVENTION NAME] you work with the most.
 - a. What are their names and job titles or roles? [Interviewer: For each person named, ask questions 1.b 1.f.]
 - b. How often do you talk with them?
 - c. What kinds of things do you talk about (for example, your goals, getting a job, dealing with personal and family challenges)?
 - d. Do you talk with them mostly in person, by phone, touch base with them by email?
 - e. How do you feel after you talk with [name of person]? How would you describe your level of motivation or excitement after you talk?
 - f. What is most helpful about [name of person]? What would you like to be different in your relationship with [name of person]? Is there something that he/she could do better?
- 2. Are there other people that you work with at [name of the program]? What are their names? What are their job titles or roles? [Interviewer: For each person named, ask questions 2.a 2.c.]
 - a. What kinds of things do you work on with them?
 - b. What has been most helpful?
 - c. Is there anything else that you need that you haven't gotten from them? If so, what?

Participation

- 1. Walk me through what happened from when you first went to [INTERVENTION NAME] until now. What did you do when you first started the program?
- 2. What activities do you remember doing as part of [INTERVENTION NAME]?
 - a. How did you decide to participate in these activities? Were you told to participate in them or were you given a choice?
 - b. [If given a choice]: Why did you choose to do them? What information did you have about them?
 - c. Which activities did you like the most? Which ones have helped you the most?
 - d. Which activities did you not like? Which ones were not helpful or felt challenging for you?
 - e. Are there any activities that you could have participated in, but chose not to? Why?
- 3. [If participated in work or work experience through the program, ask:] Tell me more about the job/work experience you did as part of [INTERVENTION NAME], like:
 - a. Who was your employer?
 - b. How many hours did you work each week? What were your typical start and end times?
 - c. Were you paid or provided a stipend for your work? Did you receive any benefits (e.g., health insurance, holidays, and vacation)?

- d. How did you spend your time at your job/work experience? What kind of things did you do?
- e. How was your work supervised (e.g., did you meet one-on-one with a supervisor, did you have performance reviews)?
- f. How long did you participate?
- g. Did you advance into other positions at the company? If so, what were they?
- h. How did your job/work experience end? Did they offer you a full-time job? If so, did you take it? Why or why not?
- i. What did you like best about the job/work experience? What did you like least? What, if anything, would you have changed about your work experience?
- 4. [If still participating in the intervention, ask:] What activities are you doing now?
- 5. What supports and services have you received? *Probe: These can be things like transportation, mental health treatment, or assistance with housing, food, or work-related clothing.* How did you find out what was available to you?
- 6. Have you been sent by [INTERVENTION NAME] to any other program or organization to participate in any activities or receive services?
- a. [If yes:] Which ones? For what?
- b. Tell me about how [INTERVENTION NAME] told you about or sent you to the other program for the service(s). *Probe for level of involvement of the staff person, for example, if the staff person gave the participant a contact person at the organization, or called the contact person directly.*
- 7. Tell me about your participation in the program overall. Do you participate pretty steadily, do you go through periods where you drop off and then start up again?
- a. [If dropped out and started participating again:] What made you decide to start back? Was it something in your life that motivated you to go back? Was it something that the program did to reengage you?
- b. Who has supported you in participating in the program and meeting the program's goals? *Probe for family members, friends, program case managers or other program staff, other program participants.* How have they done so?
- 8. [If not currently participating and did not complete the intervention:] Tell me about when and why you stopped participating in the program.
- a. What was happening in your life when you stopped participating in the program?
- b. What made you stop participating?
- 9. Overall, when participating in [INTERVENTION NAME], what motivates you most?
- 10. Do you feel that participating in the program has changed or benefited your life? If yes, in what ways?

D. Wrap up and reflections

- 1. On a scale of 1 to 10, how would you describe your experience with [INTERVENTION NAME] (1 being not at all helpful and 10 being very helpful)? What would the program need to do to bump that score up one or two numbers higher?
- 2. What about [INTERVENTION NAME] has been really helpful for you?
- 3. Looking back at your overall experience, what would you say to someone in a situation that is similar to yours that had expressed interest in [INTERVENTION NAME]? What advice would you give him/her?
- 4. Is there anything you would like for people to know about your experience with [INTERVENTION NAME] that we haven't talked about? What else do you think would be useful for the researchers studying this program to know about your experience?

Do you have any questions for me?

Thank you so much for your time and sharing your story with me. Your input is really important for our research. If you have any further questions, you can contact XXX.

[Interviewer: Give the participant his/her gift card.]