

## Instrument 1:

### **Matrix and Starfish EHS/HS Parent Interview and Focus Group Protocol**

#### **Introduction**

Thank you for participating in this [interview/focus group]. This is an important part of the Behavioral Interventions to Advance Self-Sufficiency Next Generation (BIAS-NG) project. We want to learn about how we can use behavioral science to make your experience with Early Head Start/Head Start better. We want to hear your thoughts about working with [EHS/HS program name] and your ideas about how to improve the experience for individuals and families.

This interview/focus group is completely voluntary. Program staff will not see these responses. The research team working with [program name] on the project will summarize all responses. In sharing what we learn from talking with you and others, we will never use your name or otherwise identify you.

[If a focus group] We ask that you not share anything that is said here outside of this group. However, we cannot guarantee that others will not do so. You can also share any comments with us privately.

Please read and sign the consent form. Then we can get started. I will record the conversation so we don't miss anything you say. Only members of the research team will hear the recording, but you can also share any comments with us at the end, when we've turned the recorder off.

*Your participation is voluntary. The [interview/focus group] will take about one hour of your time.* According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13), 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 for this collection is 0970-0502 and the expiration date is 08/31/2022.

## **Informed Consent: Participant Interviews and Focus Groups**

You are invited to participate in [an interview/a focus group] for the Behavioral Interventions to Advance Self-Sufficiency Next Generation (BIAS-NG) project.

### **What is the study about?**

MDRC, a nonprofit social policy research organization, and its partner MEF Associates are conducting this project on behalf of the Office of Planning, Research, and Evaluation in the Administration for Children and Families. This project's goal is to use behavioral science, which incorporates ideas from psychology and economics, to improve communication with and engagement for individuals who participate in Early Head Start/Head Start services with [program name].

### **What will I need to do?**

We are talking with individuals with children in [program name's] Early Head Start/Head Start and asking them to share their thoughts and experiences. This [interview/focus group] will take up to 1 hour and gives you an opportunity to share your perspective.

### **Does the [interview/focus group] involve any risk to me?**

There are no major risks from participating. The main risk is feeling uncomfortable discussing your experiences. You can choose not to answer any of the questions that make you uncomfortable. We have very strong security measures in place and will make every effort to protect your privacy. There is a small possibility of someone outside of the study staff hearing or seeing your responses [or someone in the focus group] repeating your answers.

### **Will the [interview/focus group] help me?**

Participating in the [interview/focus group] will probably not help you directly, but sharing your thoughts and experiences may help improve the experiences of future individuals and families.

### **Do I have to [do the interview/participate in the focus group]?**

You do not have to [do the interview/participate in the focus group] if you do not want to. You can [stop the interview/leave the focus group] at any time. Your participation in the [interview/focus group] will have no effect on services you or your family receive from [program name] Early Head Start/Head Start or any other organizations. We would like to record the [interview/focus group] so we can concentrate on what you are saying and to help with our notes. However, if you do not want us to record, we will not. If there is anything you would like to say without being recorded, you can ask to pause the recording at any time.

### **Will I receive anything for my time?**

To express our appreciation for your participation, we will give you a \$25 gift card for participating in the [interview/focus group].

**Will you tell people what I say?**

The study team will not share your answers with anyone, unless you say something about hurting yourself or others or if you describe someone else being hurt. [Focus group only: There is a possibility of someone in the focus group repeating your answers, but we are asking all participants to keep this conversation private.] Otherwise, only the study team will read the notes or listen to the recording and no one at [program name] will hear your answers. We may use some specific quotes, but we won't include anyone's name. When the project is over, we will destroy our notes and recordings.

**Questions:**

If you have questions about the study, you can call the project director, Clinton Key at MDRC at 212-340-4489.

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**[For Written Consent] Statement**

"I have read this form and agree to participate in the interview or focus group. I know that my participation is voluntary and that MDRC follows strict rules to protect my privacy. I know that I can refuse to answer any questions and that I can stop participating at any point."

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Name of Study Participant (Print)

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Signature of Study Participant

**[For Verbal Consent]**

Are you willing to participate in this interview?

Do you feel comfortable with me recording our discussion?

Record response.

- If yes, proceed

- If no: "No problem. Thank you for your time today."

### ***Draft Parent Interview and Focus Group Guide***

#### **Introduction**

1. [Focus group only:] Please go around and quickly introduce yourself.
2. Can you tell me about your children?
  - a. How many children do you have, and how old are they?
    - i. How many children do you currently have in Early Head Start or Head Start?
    - ii. (If applicable): Have any of your other children ever been involved in Early Head Start or Head Start?

#### **Finding Out About and Enrolling in Services**

3. Do you remember how you first heard about Early Head Start or Head Start and got involved?
  - a. What did you know about the program when you decided to apply and enroll your child?
4. How did you apply and enroll? Walk me through all of the steps.
  - a. How did you know you were successfully enrolled?
  - b. How did you know the details of the first day (where, when, expectations, etc.)?
5. Was there anything in particular that you liked about the enrollment process? Why?
6. Are there any changes or improvements you would suggest? (If yes): How come?

#### **Parent-Oriented Service Receipt and Engagement**

7. After you first enrolled your child in Early Head Start or Head Start, what were you told about things you had to do, meaning things that seemed like requirements, to stay enrolled in the program? Can you describe them to me?
  - a. How did you know what those steps/requirements were?
    - i. *Probe:* What type of information was shared and how (e.g., email, call, text, letter)?
    - b. Who did you contact or who contacted you?
    - c. What do you think about those steps or requirements?
8. What about other activities or opportunities that the program has for parents – things that may or may not be required? Can you describe them to me?
  - a. *Probe on specific events, such as:*
    - i. Individual parent meetings (in school and home visiting)
    - ii. Group parent meetings
    - iii. Additional activities
9. Which activities have you attended or participated in? How come? Which have you not attended? Why not?
10. Which of these activities are you most interested in? How come?
11. Which activities are you not interested in? Why not?
12. Which activities are most important?

- a. (If different from activities parents are most interested in): Why do you think this/these is/are most important?
13. Are there any activities or services you wish were offered that you haven't heard about?
14. Do you have a family service guide (or whatever the program calls them)?
  - a. What kinds of things do you typically do with your family service guide?
  - b. How often do you communicate or interact with your family service guide?
15. What kinds of questions or topics do you discuss with your family service guide?
  - a. (If not mentioned organically): What about the goal-setting process? What does that look like? How helpful is that process?
  - b. How often do you discuss or check in on goals?
  - c. How does the family service guide or other program staff, like teachers, help you with those goals?
16. Who do you generally go to for questions about the program? How do you typically communicate (e.g., in person, email, call, text)?
  - a. (If person is different from child's teacher): How often do you communicate with your child's teacher?
  - b. What kinds of questions or topics do you discuss?
17. How do you think the program is helping you as a parent? What else could the program do to be helpful?

### **Child Attendance and Experiences**

18. How do you get your child to Early Head Start/Head Start?
  - a. What can be challenges to attendance?
  - b. How do you deal with these challenges?
19. Has your child had to miss any days or weeks of school?
  - a. (If yes): [Probe into why and how it was reported to the school]
20. In what ways has your experience in the program matched what you expected for your child?
21. In what ways has it been different than you expected?
22. What do you hope your child will get out of being involved in the program?
  - a. What are your goals for them?
  - b. How is the program helping your child achieve those goals?

### **Conclusion**

23. What is your favorite aspect of the program?
24. How could the program better work with you and other families?
  - a. *Probe:* For example, if you could change something, what would you change or try to improve to help families like yourself?