Appendix Q  
  
FACES 2019 and AIAN FACES 2019 Content Matrices

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Table Q.1. FACES measures of Head Start program environments

| Measure | Instrument | Used in FACES Fall 2019 or Spring 2020? | Fall 2021 | Spring 2022 | Also asked in AIAN FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- |
| Family Recruitment (Section A) |  |  |  |  |  |
| Difficulty recruiting families in community | Program Director Survey | No | NP | √ | Yes |
| Efforts to recruit different families compared to prior years | Program Director Survey | No | NP | √ | Yes |
| Staff Well-Being and Mental Health (Section C) |  |  |  |  |  |
| Center for Epidemiologic Studies-Depression (CES-D) Short Form (Ross et al. 1983) | Center Director Survey Program Director Survey | No No | NP NP | √ √ | Yes Yes |
| Generalized Anxiety Disorder Assessment (GAD-7) (Spitzer et al. 2006) | Center Director Survey Program Director Survey | No No | NP NP | √ √ | Yes Yes |
| Job-related stress due to COVID-19 | Center Director Survey Program Director Survey | No No | NP NP | √ √ | Yes Yes |
| Activities to address trauma in staff | Program Director Survey | No | NP | √ | Yes |
| Services or supports to support staff wellness and well-being | Center Director Survey | No | NP | √ | Yes |
| Offer training to staff on providing trauma-informed care and who conducts training | Center Director Survey | No | NP | √ | Yes |
| Dual Language Learners (DLLs) (Sections A and E) |  |  |  |  |  |
| Whether DLLs in center | Center Director Survey | Yes | NP | √ | Yes |
| Languages spoken by children and families in the center | Center Director Survey | Yes | NP | √ | Yes |
| Limitations on ability to provide interpreters or translated materials for DLL families due to lack of staff that speak language | Center Director Survey | Yes | NP | √ | Yes |
| Strategies for assessing English language abilities of DLLs and frequency of use; whether DLLs abilities in home language are assessed | Center Director Survey | Yes | NP | √ | No |
| Program Management (Sections A and H) |  |  |  |  |  |
| Staffing and recruitment and turnover (lead teachers) | Center Director Survey | Yes | NP | √ | Yes |
| Problems due to staff turnover | Center Director Survey | No | NP | √ | Yes |
| Problems due to other staffing challenges (finding classroom coverage, having enough staff to operate at full capacity) | Center Director Survey | No | NP | √ | Yes |
| Staffing of bilingual teachers (language speak, how determine proficiency) | Center Director Survey | Yes | NP | √ | No |
| Center/program director responsibilities and time needed | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | No No |
| Education coordinator responsibilities | Program Director Survey | Yes | NP | √ | No |
| Center/program director participation in professional development (courses, workshops/trainings, leadership institutes) – in past 12 months or ever | Center Director Survey Program Director Survey | Yesb Yesb | NP NP | √ √ | Yes Yes |
| Support needed to lead center/program more effectively | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Program Schedules (Section A) |  |  |  |  |  |
| Start and end dates of program year | Center Director Survey | Yes | NP | √ | Yes |
| Center-based service days per week | Center Director Survey | Yes | NP | √ | Yes |
| Center-based service hours per day | Center Director Survey | Yes | NP | √ | Yes |
| Which hours per day option fills up fastest | Center Director Survey | Yes | NP | √ | No |
| Center has a waiting list | Center Director Survey | Yes | NP | √ | No |
| Resources/Funding (Section O) |  |  |  |  |  |
| Cumulative program enrollment | Program Director Survey | Yes | NP | √ | Yes |
| Whether and what additional sources of funding secured | Program Director Survey | Yes | NP | √ | Yes |
| Purposes and uses of additional funding (e.g., professional development, additional slots, specific services for children and families) | Program Director Survey | Yes | NP | √ | No |
| Center licensing (whether has license, exemptions, support for licensing) | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | No No |
| Participation in quality rating and improvement system (how joined, why not participating) | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | No No |
| Other Head Start/Early Head Start grants received by agency | Program Director Survey | Yes | NP | √ | No |
| Number of centers operated by program that provide Head Start services | Program Director Survey | Yes | NP | √ | No |
| Funding for individual children in addition to Head Start | Center Director Survey Program Director Survey | Yes Yes | NP NP | √  √ | No No |
| Classroom composition by funding source | Program Director Survey | Yes | NP | √ | No |
| External quality monitoring (whether occurred, who conducted) | Center Director Survey | Yes | NP | √ | No |
| Staff involved in center/program financial management (staff involved) | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | No No |
| Use of Program Data and Information (Section N) |  |  |  |  |  |
| Use of management information or data systems | Program Director Survey | Yes | NP | √ | Yes |
| Child assessment tool’s web-based option for storing data/use of the tool | Program Director Survey | Yes | NP | √ | No |
| Data linked electronically to child assessment information | Program Director Survey | Yes | NP | √ | No |
| Staff responsible for analyzing program data and training received | Program Director Survey | Yes | NP | √ | Yes |
| Do supervisors, mentors/coaches, or other specialists review individual children’s data in one-on-one meetings with teachers | Center Director Survey | Yes | NP | √ | No |
| Barriers to teachers using child-level data to guide and individualize instructions | Center Director Survey | Yes | NP | √ | No |
| Manager Characteristics (Section I) |  |  |  |  |  |
| Start date working for this Head Start program | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Years experience as director with any early childhood program, any Head Start program, and current Head Start program | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Hours per week paid to work with Head Start? | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Highest grade completed/degrees | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Field of highest degree | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Field include 6+ college courses in ECE/CD | Center Director Survey Program Director Survey | Yes Yes | NP NP | -- -- | Yes Yes |
| Have you completed 6+ college courses in ECE/CD? | Center Director Survey Program Director Survey | Yes Yes | NP NP | -- -- | Yes Yes |
| Currently hold a license, certification, and/or credential in administration of EC/CD programs or schools | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes No |
| Have CDA? | Center Director Survey | Yes | NP | √ | Yes |
| Have state preschool teaching certificate or license? | Center Director Survey | Yes | NP | √ | Yes |
| Have state teaching certificate or license for ages/grades other than preschool? | Center Director Survey | Yes | NP | √ | Yes |
| Salary | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Gender | Center Director Survey Program Director Survey | Yesc Yesc | NP NP | √ √ | Yes Yes |
| Birth year | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Race/ethnicity | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Speak a language other than English? What? | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Whether completed entire course on children who speak a language other than English | Center Director Survey | Yes | NP | √ | No |
| Transition to Kindergarten (Section G) |  |  |  |  |  |
| Number of Local Education Agencies / elementary schools in program service area | Program Director Survey | Yes | NP | √ | No |
| Coordination with elementary schools (types of information discussed) | Program Director Survey | Yes | NP | √ | No |
| Discussions as part of a district wide effort to support children’s transition to kindergarten | Program Director Survey | No | NP | √ | No |
| Major changes in the way the program helps transition children to kindergarten due to the COVID-19 pandemic | Program Director Survey | No | NP | √ | No |
| Program Community (Section P) |  |  |  |  |  |
| Substance use in the community | Program Director Survey | Yes | NP | √ | Yes |
| Staff supports for working with families with substance use issues | Program Director Survey | Yes | NP | √ | Yes |
| Staff Compensation and Benefits (Section Z) |  |  |  |  |  |
| Activities / expenses implemented with quality improvement funds in the first year | Program Director Survey | No | NP | √ | No |
| Activities / expenses implemented around increasing staff wages, adding or expanding staff compensation, and hiring staff in the past 12 months | Program Director Survey | No | NP | √ | Yes |
| Increases in staff wages (which positions, whether positions were paid the minimum wage or less prior to increase) | Program Director Survey | No | NP | √ | Yes |
| Types of staff compensation currently offered (which positions) | Program Director Survey | No | NP | √ | Yes |
| Adding or expanding staff compensation in the past 12 months (types, which positions) | Program Director Survey | No | NP | √ | Yes |
| Types of supports for staff well-being currently in place (which positions) | Program Director Survey | No | NP | √ | Yes |
| Adding or expanding supports for staff well-being in the past 12 months (types, which positions) | Program Director Survey | No | NP | √ | Yes |

aConstructs that were also captured in AIAN FACES Fall 2021 or Spring 2022 may differ in source items and construction.

bIn Spring 2020, we asked about participation in college or university courses, visits to other Head Start or early childhood programs, a network or community of Head Start and other early childhood program leaders, a leadership institute offered by Head Start or an organization other than Head Start, and trainings related to managerial or leadership role in the past 12 months or ever. In Spring 2022, we asked about participation in a network or community of early care and education center directors or managers or a leadership institute, course, coaching, or other leadership development program in the past 12 months.

cIn Spring 2020, we asked directors about their sex. In Spring 2022, we changed the question wording to ask directors if they describe themselves as male, female, or another gender identity.

**Key:**

√ = Present in protocol

-- = Absent in protocol

NP = No protocol for R in time period

Table Q.2. FACES measures of teacher well-being and characteristics

| Measure | Instrument | | Used in FACES Fall 2019 or Spring 2020? | Fall 2021 | Spring 2022 | Also asked in AIAN FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- | --- |
| Teacher Well-Being (Teacher Survey, Section C) |  | |  |  |  |  |
| Center for Epidemiologic Studies-Depression (CES-D) Short Form (Ross et al. 1983) | Teacher Survey | | Yes | √ | √ | Yes |
| Generalized Anxiety Disorder Assessment (GAD-7) (Spitzer et al. 2006) | Teacher Survey | | No | √ | √ | Yes |
| Job-related stress due to COVID-19 | Teacher Survey | | No | √ | √ | Yes |
| Job-related stress | Teacher Survey | | No | -- | √ | Yes |
| Primary caregiver for children at home | Teacher Survey | | No | √ | -- | Yes |
| Current level of stress or anxiety as a caregiver | Teacher Survey | | No | √ | -- | Yes |
| Parenting behaviors | Teacher Survey | | No | √ | -- | Yes |
| Instruction mode for their child(ren) in 2021-2022 school/program year | Teacher Survey | | No | √ | -- | Yes |
| Child(ren)’s school, school district, or child care provider changed in-person instruction plans | Teacher Survey | | No | √ | -- | Yes |
| Unmet childcare needs | Teacher Survey | | No | √ | -- | Yes |
| General health | Teacher Survey | | No | √ | √ | Yes |
| Supports for staff wellness and overall well-being offered and received | Teacher Survey | | No | -- | √ | Yes |
| Were supports for staff wellness and overall well-being offered at a convenient location and convenient time | Teacher Survey | | No | -- | √ | Yes |
| Supports for staff wellness and overall well-being that would have been useful | Teacher Survey | | No | -- | √ | Yes |
| Supports for staff wellness and overall well-being received from program met teacher needs | Teacher Survey | | No | -- | √ | Yes |
| Whether received training on providing trauma-informed care in the past year | Teacher Survey | | No | -- | √ | Yes |
| Who provided training on trauma-informed care | Teacher Survey | | No | -- | √ | Yes |
| Teacher Characteristics (Teacher Survey, Sections A and D) |  | |  |  |  |  |
| Years teaching | Teacher Survey | | Yes | √ | N | Yes |
| Years teaching/working in Head Start (this and any program) | Teacher Survey | | Yes | √ | N | Yes |
| Highest grade completed/degrees | Teacher Survey | | Yes | √ | N | Yes |
| Field of highest degree | Teacher Survey | | Yes | √ | N | Yes |
| 6+ college courses in Early Childhood Education (ECE) or Child Development (CD)? | Teacher Survey | | Yes | √ | N | Yes |
| Have CDA? | Teacher Survey | | Yes | √ | N | Yes |
| Have state-awarded preschool certificate or license? | Teacher Survey | | Yes | √ | N | Yes |
| Have teaching certificate or license for ages/grades other than preschool? | Teacher Survey | | Yes | √ | N | Yes |
| Salary and time period covered | Teacher Survey | | Yes | -- | √ | Yes |
| Gender | Teacher Survey | | Yesb | √ | N | Yes |
| Birth year | Teacher Survey | | Yes | √ | N | Yes |
| Race/ethnicity | Teacher Survey | | Yes | √ | N | Yes |
| Languages other than English personally speak | Teacher Survey | | Yes | -- | √ | Yes |
| Completed course on working with children who speak a language other than English | Teacher Survey | | Yes | -- | √ | No |
| COVID-19 Impact on Teachers (Teacher Survey, Section E) |  |  | | | | |
| Mode of working with children (in person, virtual/remote, hybrid) | Teacher Survey | | No | √ | -- | Yes |
| What have been the biggest challenges for you and your family during the COVID-19 pandemic? | Teacher Survey | | No | √ | -- | Yes |
| What have been the biggest challenges for you as a teacher during the COVID-19 pandemic? | Teacher Survey | | No | √ | -- | Yes |
| What supports from Head Start have been most helpful during the pandemic? | Teacher Survey | | No | √ | -- | Yes |

a Constructs that are also captured in AIAN FACES Fall 2021 or Spring 2022 may differ in source items and construction.

bIn Spring 2020, we asked teachers about their sex. In Fall 2021 and Spring 2022, we changed the question wording to ask teachers if they describe themselves as male, female, or another gender identity.

**Key:**

√ = Present in protocol

-- = Absent in protocol

N = Only asked of new respondents

Table Q.3. FACES measures of classroom environments

| Measure | Instrument | Used in FACES Fall 2019 or Spring 2020? | Fall 2021 | Spring 2022 | Also asked in AIAN FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- |
| Classroom Environment (Teacher Survey, Sections A and B; Program and Center Director Surveys, Section E) | | | | | |
| Child/adult counts | Teacher Survey | Yes | -- | √ | Yes |
| Time spent in teacher vs. child directed activities; large vs. small group or individual activities | Teacher Survey | Yes | -- | √ | Yes |
| Determination of group membership and activities when children work in small groups and in teacher-directed individual activities | Teacher Survey | Yes | -- | √ | No |
| Frequency of various language- and literacy-oriented activities | Teacher Survey | Yes | -- | √ | Yes |
| Frequency of various mathematics activities | Teacher Survey | Yes | -- | √ | Yes |
| Frequency of language/literacy, math, science, social studies, arts, and social-emotional instruction | Teacher Survey | Yes | -- | √ | Yes |
| Whether teachers use a specific curriculum or combination of curricula | Teacher Survey | Yes | -- | √ | Yes |
| Name(s) of curricula used in classroom/program (including main curriculum) and frequency of use | Teacher Survey Program Director Survey | Yes Yes | -- NP | √ -- | Yesb Yesb |
| Name(s) of curricula used to teach math and literacy | Teacher Survey | Yes | -- | √ | No |
| Whether center uses parent support curriculum, which one | Center Director Survey | Yes | NP | √ | Yes |
| Rate behavior of group of children in class | Teacher Survey | Yes | -- | √ | Yes |
| Beliefs about teaching practice | Teacher Survey | Yes | -- | √ | Yes |
| Skill level of classroom | Teacher Survey | Yes | -- | √ | No |
| Demographics of class | Teacher Survey | Yes | -- | √ | Yes |
| Number of co-teachers and assistants | Teacher Survey | Yes | -- | √ | Yes |
| Teacher Professional Development (Teacher Survey, Sections A and B; Program and Center Director Surveys, Section B) | | | | | |
| Whether teacher has been trained on curriculum in past year | Teacher Survey | Yes | -- | √ | Yes |
| How many hours of curriculum training | Center Director Survey | Yes | NP | √ | No |
| Use of activities and tools related to the curriculum | Center Director Survey | Yes | NP | √ | No |
| Support for curriculum implementation/monitoring curriculum fidelity | Center Director Survey | Yes | NP | √ | No |
| Who provided curriculum training | Teacher Survey | Yes | -- | √ | No |
| Used tool or checklist to assess use of main curriculum in past year | Teacher Survey | Yesc | -- | √ | No |
| Type of ongoing support for curriculum and who provides | Teacher Survey | Yes | -- | -- | Yes |
| Extent to which teacher agrees has received training and support needed to use main, math, and literacy curriculum(s) | Teacher Survey | Yesd | -- | √ | No |
| How many hours of assessment training | Center Director Survey | Yes | NP | √ | No |
| Any mentor? Who? Frequency? Formal or informal? Is mentor also supervisor? | Teacher Survey | Yes | -- | √ | Yes |
| Are you a mentor? | Teacher Survey | Yes | -- | √ | No |
| Any coaches/mentors? How many? Role (including whether staff are coached by the same person who supervises them)? | Program Director Survey | Yes | NP | √ | No |
| Coaching/mentoring model/approach (e.g., practice-based; MyTeachingPartner); whether there is a remote component | Program Director Survey | Yes | NP | √ | No |
| Percent time committed to mentoring/coaching by staff with that role | Program Director Survey | Yes | NP | √ | No |
| All staff receive coaching/mentoring? | Program Director Survey | Yes | NP | √ | No |
| How program determines who receives intensive coaching/mentoring and how coaches/mentors assess staff needs | Program Director Survey | Yes | NP | √ | No |
| Methods used by coaches/mentors (e.g., discussion, written feedback, modeling) | Program Director Survey | Yes | NP | √ | No |
| Mentoring supports (approaches, meeting topics) | Teacher Survey | Yes | -- | √ | No |
| Professional development supports received (meetings, conferences, workshops/trainings, etc.) | Teacher Survey | Yes | -- | √ | Yes |
| Satisfaction with teaching | Teacher Survey | Yes | -- | √ | Yes |
| Likelihood of continuing with Head Start through next year | Teacher Survey | Yes | -- | √ | Yes |
| Reasons teachers might leave or stay at Head Start through the next year | Teacher Survey | No | -- | √ | Yes |
| Support for enhancing qualifications (provision of credential and AA/BA support) | Center Director Survey Program Director Survey | Yes Yese | NP NP | √  √ | Yes Yes |
| How often provide training to teachers and assistant staff? | Center Director Survey | Yes | NP | √ | Yes |
| Who conducts professional development activities? | Center Director Survey | Yes | NP | √ | Yes |
| Interaction with regional T/TA (consulted with, accessed resources through) | Center Director Survey | Yes | NP | √ | Yes |
| How use Head Start funds for professional development | Program Director Survey | Yes | NP | -- | Yes |
| Professional development opportunities offered (attendance at conferences, mentoring or coaching, workshops, etc.) | Center Director Survey Program Director Survey | Yes Yesf | NP NP | √ √f | Yes Yes |
| Teacher performance evaluation (frequency) | Center Director Survey | Yes | NP | √ | Yes |
| Planning and Assessment (Teacher Survey, Section A; Program Director Surveys, Section E) |  |  |  |  |  |
| What is your main child assessment tool? | Teacher Survey Program Director Survey | Yes Yes | -- NP | √ √ | Yes Yes |
| How use this assessment in planning | Teacher Survey | Yes | -- | √ | No |
| Children with Developmental Concerns (Teacher Survey, Section A) |  |  |  |  |  |
| How often meet with parents to discuss progress of child with developmental concerns | Teacher Survey | Yesg | -- | √ | Yes |
| Children Who Speak a Language Other Than English (Teacher Survey, Section A) |  |  |  |  |  |
| Language(s) spoken by children in classroom who speak a language other than English (including percentage/number of children who speak language) | Teacher Survey | Yes | -- | √ | Yesh |
| Language(s) of instruction | Teacher Survey | Yes | -- | √ | Yes |
| Staff member who speaks language(s) of instruction | Teacher Survey | Yes | -- | √ | Yes |
| Language(s) of printed materials like children’s books | Teacher Survey | Yes | -- | √ | Yes |
| Parent-Teacher Interaction (Teacher Survey, Section A) |  |  |  |  |  |
| How often meet with parents to discuss progress of child | Teacher Survey | Yes | -- | √ | Yes |
| Ways of communicating with parents who speak a language other than teacher | Teacher Survey | Yes | -- | √ | Yes |
| Teacher Perspective of Program Management (Teacher Survey, Section B) |  |  |  |  |  |
| Views about program support for interactions between staff and parents | Teacher Survey | Yes | -- | √ | Yes |

aConstructs that were also captured in AIAN FACES Fall 2021 and Spring 2022 may differ in source items and construction.

bIn AIAN FACES, we only ask teachers about their main curriculum used in classrooms and do not ask about frequency of use.

cIn FACES 2019, we asked teachers about use of tools or checklists for all the curricula they use. For Spring 2022, teachers reported only on use of tools or checklists to assess how they use their main curriculum.

dIn FACES 2019, we asked teachers about their experience with trainings on all the curricula they use. For Spring 2022, teachers reported only on their main curriculum, math curricula, and literacy curricula.

eIn Spring 2020, directors were asked about support for credentials and AA/BA support. In Spring 2022, directors were asked about only AA/BA support.

fIn Spring 2020, directors were asked whether the following professional development activities were offered, attendance at regional, state conferences, and national conferences; paid substitutes to allow teachers time to prepare, train, and/or plan; coaching/mentoring; other types of consultants hired to work directly with staff to address a specific issue or concern; workshops/trainings sponsored by the program or provided by other organizations; a community of learners facilitated by an expert; time during the regular work day to participate in Office of Head Start T/TA webinars; and tuition assistance for courses toward getting a credential. In Spring 2022, directors were asked only if coaching/mentoring was offered.

gIn FACES 2019, we asked teachers about children with special needs. For Spring 2022, we changed the question wording to developmental concerns.

hIn AIAN FACES, we ask teachers about the number of children who speak each language other than English. In FACES, we ask teachers about the percentage of children who speak each language other than English.

**Key:**

√ = Present in protocol

-- = Absent in protocol

NP = No protocol for R in time period

Table Q.4. FACES measures of child and family demographics and home environments

| Measure | Instrument | Used in FACES Fall 2019 or Spring 2020? | Fall 2021 | Spring 2022 | Also asked in AIAN FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- |
| Child Demographic Characteristics (Sections A) |  |  |  |  |  |
| Genderb | Parent Survey | Yes | √ | N | Yes |
| Birth date | Parent Survey | Yes | √ | N | Yes |
| Race/ethnicity | Parent Survey | Yes | √ | N | Yes |
| Mother’s Demographic Characteristics (Sections SC and J) |  |  |  |  |  |
| Is the mother alive? | Parent Survey | No | √ | N | Yes |
| How frequently child saw/sees mother | Parent Survey | No | √ | -- | Yes |
| Respondent relationship to child | Parent Survey | Yes | √ | N | Yes |
| Birth date | Parent Survey | Yes | √ | N | Yes |
| Country of birth and time in U.S. | Parent Survey | Yes | √ | N | No |
| If mother not in household, why? | Parent Survey | Yes | √ | N | Yes |
| Marital status and relationship with biological father | Parent Survey | Yesc | √ | N | Yes |
| Highest grade or degree completed | Parent Survey | Yes | √ | N | Yes |
| Employment status, whether actively looking for work, hours usually worked in a week | Parent Survey | Yes | √ | √ | Yes |
| Ever worked (in past year/since last survey) | Parent Survey | Yes | √ | √ | Yes |
| Whether employment situation has changed as a result of COVID-19 | Parent Survey | No | √ | -- | Yes |
| Father’s Demographic Characteristics (Sections SC and K) |  |  |  |  |  |
| Is the father alive? | Parent Survey | No | √ | N | Yes |
| How frequently child saw/sees father | Parent Survey | No | √ | -- | Yes |
| Respondent relationship to child | Parent Survey | Yes | √ | N | Yes |
| Birth date | Parent Survey | Yes | √ | N | Yes |
| Country of birth and time in U.S. | Parent Survey | Yes | √ | N | No |
| If father not in household, why? | Parent Survey | Yes | √ | N | Yes |
| Highest grade or degree completed | Parent Survey | Yes | √ | N | Yes |
| Employment status, whether actively looking for work, hours usually worked in a week | Parent Survey | Yes | √ | √ | Yes |
| Ever worked (in past year/since last survey)? | Parent Survey | Yes | √ | √ | Yes |
| Whether employment situation has changed as a result of COVID-19 | Parent Survey | No | √ | -- | Yes |
| Characteristics of Parent Who is Not Birth or Adoptive Parent (Sections SC and L) | | | | | |
| Respondent relationship to child | Parent Survey | Yes | √ | N | Yes |
| Birth date | Parent Survey | Yes | √ | N | Yes |
| Country of birth and time in the U.S. | Parent Survey | Yes | √ | N | No |
| Highest grade or degree completed | Parent Survey | Yes | √ | N | Yes |
| Employment status, whether actively looking for work, hours usually worked in a week | Parent Survey | Yes | √ | √ | Yes |
| Ever worked (in past year/since last survey)? | Parent Survey | Yes | √ | √ | Yes |
| Whether employment situation has changed as a result of COVID-19 | Parent Survey | No | √ | -- | Yes |
| Home Learning Environment (Section D) and Routines and Virtual Learning (Section H) | | | | | |
| Reading in past week: frequency | Parent Survey | Yes | √ | √ | Yes |
| Number of days per week that family eats evening meal together | Parent Survey | Yes | √ | √ | Yes |
| Child’s typical sleep hours (time to bed and wake up, regularity of bedtime, sleep disruptions -nighttime waking) | Parent Survey | Yes | √ | √d | Yes |
| Learning/educational activities for the child using a computer, phone, or tablet for Head Start or not required by Head Start; satisfaction with activities | Parent Survey | No | √ | √ | No |
| Household Composition (Section B) |  |  |  |  |  |
| Household members: name, age, relationship of adults to child | Parent Survey | Yes | √ | √ | Yes |
| Temporary household members: name, age, relationship of adults to child | Parent Survey | No | √ | √ | Yes |
| Whether parent’s spouse/partner lives with them, who it is, and what their relationship status is | Parent Survey | No | √ | √ | Yes |
| Home Language Environment (Section D) |  |  |  |  |  |
| If English is spoken in household | Parent Survey | Yes | √ | N | Yes |
| Languages other than English spoken in household | Parent Survey | Yes | √ | N | Yes |
| Language parent usually uses to speak to child | Parent Survey | Yes | √ | N | Yes |
| Household Income, Food Security, Financial Strain and Hardships, Housing and Receipt of Public Assistance (Section M) and Family Income (Section MM) | | | | | |
| Total family income | Parent Survey | No | √ | √ | Yes |
| Total household income | Parent Survey | Yes | √ | √ | Yes |
| Whether the household received a stimulus payment during the COVID-19 pandemic | Parent Survey | No | √ | -- | Yes |
| Change in household income during COVID-19 pandemic | Parent Survey | No | √ | -- | Yes |
| Housing situation – whether they live with another family, or in transitional housing | Parent Survey | No | √ | √e | Yes |
| Whether changed housing in the last 12 months/since last interview, plus the number of moves and reason for most recent move | Parent Survey | No | √ | √ | Yes |
| Housing quality and number of rooms in housing | Parent Survey | No | √ | N | Yes |
| Food Security Scale – Short Form (Bickel et al. 2000) | Parent Survey | Yes | √ | N | Yes |
| Economic strain (Conger et al. 1993) | Parent Survey | Yes | √ | N | Yes |
| Material conditions (e.g., difficulties in past 12 months paying utility bills, having to move) (Health Profession Opportunity Grants [HPOG] study) | Parent Survey | Yes | √ | N | Yes |
| Receipt of welfare, supplemental nutrition assistance program or SNAP, etc. | Parent Survey | Yes | √ | √ | Yes |
| Parent Mental Health (Section U) |  |  |  |  |  |
| Depressive symptoms: Center for Epidemiologic Studies-Depression (CES-D) Short Form (Ross et al. 1983) | Parent Survey | Yes | √ | √ | Yes |
| Anxiety level: General Anxiety Disorder-7 (GAD-7) (Spitzer et al. 2006) | Parent Survey | No | √ | √ | Yes |
| Parenting behaviors and stress | Parent Survey | No | √ | √ | Yes |
| Stress and anxiety level compared to pre-COVID-19 pandemic | Parent Survey | No | √ | -- | Yes |
| Parent Head Start Involvement (Section I) |  |  |  |  |  |
| Parent involvement in Head Start (frequency of various activities) | Parent Survey | Yes | -- | √ | Yes |
| Preference for involvement in virtual Head Start activities | Parent Survey | No | -- | √ | Yes |
| Program Satisfaction and Practices (Section W) |  |  |  |  |  |
| Satisfaction with Head Start | Parent Survey | Yes | -- | √ | Yes |
| Culturally responsive services: Strength-Based Practices Inventory (Green et al. 2004) | Parent Survey | Yes | -- | √ | Yes |
| Child Care (Section N) |  |  |  |  |  |
| Reasons why parent chose Head Start for child’s care, plans for child’s care next year, and reasons why sending child some place new | Parent Survey | Yesf | -- | √ | Yes |
| How child/children currently attend school | Parent Survey | No | √ | -- | No |
| Assisting children in online learning (who assists, is it during work hours, number of hours spent helping them) | Parent Survey | No | √ | -- | No |
| How child care needs outside of regular child care arrangements are being met | Parent Survey | No | √ | √ | Yes |
| Child and family health (Section P) |  |  |  |  |  |
| Where child receives regular well-child care | Parent Survey | Yes | √ | -- | Yes |
| Parent’s health status | Parent Survey | No | √ | √ | Yes |
| COVID health impacts on household – whether any household or close friend/family had COVID-19, was hospitalized for COVID-19, or passed away from COVID-19 | Parent Survey | No | √ | -- | Yes |
| Community Services/Resources (Section S) and Social Support (Section T) | | | | | |
| Type of social support received (someone to watch child, give ride, place to stay, emergency cash) | Parent Survey | Yes | √ | N | No |
| Whether certain services would have been useful in the last 12 months or right now (i.e. help with housing, referral to medical or dental services, assistance applying for unemployment) | Parent Survey | No | √ | √ | Yes |
| Knowledge about community resources: Mobilizing Resources Scale (Healthy Families Parenting Inventory; LeCroy and Milligan 2017) | Parent Survey | No | -- | √ | No |
| Child Behavior and Parent-Child Relationship (Section G) |  |  |  |  |  |
| Parent-child relationship | Parent Survey | No | √ | √ | No |
| Community Connections (Section V) |  |  |  |  |  |
| Challenges of COVID-19 pandemic and events related to racial injustice | Parent Survey | No | √ | -- | No |
| Coping mechanisms/supports for the COVID-19 pandemic and events related to racial injustice | Parent Survey | No | √ | N | Yes |

aConstructs that were also captured in AIAN FACES Fall 2021 or Spring 2022 may differ in source items and construction.

b In Fall 2019, parents were asked if their child was a boy or girl. In Fall 2021, parents were asked if their child is a boy, a girl, another gender identity, or they prefer not to answer.

cThe father’s marital status is captured for fathers in the household or who are in a relationship with the biological or adoptive mother. FACES does not capture this information for fathers who are not in the household and are in relationship with someone other than the child’s mother.

dIn Spring 2022, parents will not be asked about the regularity of their child’s bedtime.

eIn Spring 2022, parents will not be asked whether they live with another family for financial reasons.

fIn Fall 2019 and Spring 2020, the response options for these items were more comprehensive than those proposed for Spring 2022. We have revised/reduced the response options to align with those most commonly endorsed in FACES 2019.

**Key:**

√ = Present in protocol

-- = Absent in protocol

N = Only asked of new respondent

Table Q.5. FACES measures of child outcomes

| Measure | Instrument | Used in FACES Fall 2019 or Spring 2020? | Fall 2021 | Spring 2022 | Also asked in AIAN FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- |
| Literacy Knowledge and Skills – Early Writing (TCR, Section B) | | | | | |
| Pretends to write, write/draw, write name | Teacher Child Report | Yes | √ | √ | Yes |
| Literacy Knowledge and Skills – Alphabet Knowledge and Phonological Awareness (TCR, Section B) | | | | | |
| Recognizes first name in print, recognizes letters | Teacher Child Report | Yes | √ | √ | Yes |
| Phonology sounds, recognizes words other than own name in print, identifies rhyming words | Teacher Child Report | Yes | √ | √ | Yes |
| Mathematics Knowledge and Skills (TCR, Section B) |  |  |  |  |  |
| How high can child count? | Teacher Child Report | Yes | √ | √ | Yes |
| Identifies basic shapes, describes differences between shapes | Teacher Child Report | No | √ | √ | Yes |
| Sorts objects by attributes, orders objects by length or height | Teacher Child Report | No | √ | √ | Yes |
| Subitize objects | Teacher Child Report | No | √ | √ | Yes |
| Basic addition | Teacher Child Report | No | √ | √ | Yes |
| Social-Emotional Development and Approaches to Learning (TCR, Section C (copyrighted), Section D (parts copyrighted), and Section H; Parent Survey, Section G) | | | | | |
| 26 items from Behavior Problems Index (Peterson and Zill 1986), Personal Maturity Scale (Entwisle et al., 1987), and Social Skills Rating Scale (Gresham and Elliott, 1990) | Teacher Child Report | Yes | √ | √ | Yes |
| ECLS-K Approaches to Learning Scale (U.S. Department of Education 2002; adapted for parent survey) | Teacher Child Report | Yes | √ | √ | Yes |
| Parent Survey | No | √ | √ | Yes |
| Internalizing and externalizing behaviors | Parent Survey | No | √ | -- | Yes |
| Physical Health and Development (TCR, Section B and Section F; Parent Survey, Section P) | | | | | |
| Ever diagnosed with a disability? Which? | Teacher Child Report | Yes | √ | √ | Yes |
| Any concerns about child’s health or development? What? | Teacher Child Report | Yes | √ | √ | Yes |
| What has been done to address condition or concerns? | Teacher Child Report | Yes | √ | √ | Yes |
| IEP or IFSP: Have one? | Teacher Child Report | Yes | √ | √ | Yes |
| Whether teacher participated in child’s IEP or IFSP meeting | Teacher Child Report | Yes | √ | √ | Yes |
| Services child has received for special conditions/how services were delivered | Teacher Child Report | Yes | √ | √ | Yes |
| Child’s health status | Parent Survey | Yes | √ | √ | Yes |
| Child’s Exposure to Head Start Program (TCR, Section A and Section F; Teacher Survey, Section A) | | | | | |
| Days absent | Teacher Child Report | Yes | -- | √ | Yes |
| Days and hours per week the class meets | Teacher Survey | Yes | -- | √ | Yes |
| Mode child currently attends class (in-person, virtual/remote, hybrid) | Teacher Child Report | No | √ | √ | Yes |
| Days and hours per week the teacher sees the child in-person | Teacher Child Report | No | √ | √ | Yes |
| Days and hours per week the teacher sees the child virtually | Teacher Child Report | No | √ | √ | Yes |

TCR = Teacher Child Report

aConstructs that are also captured in AIAN FACES Fall 2021 and Spring 2022 may differ in source items and construction.

**Key:**

√ = Present in protocol

-- = Absent in protocol

Table Q.6. FACES measures of the impact of COVID-19 pandemic on Program and Center operations and Program Emergency preparedness

| Measure | Instrument | Used in FACES Fall 2019 or Spring 2020? | Fall 2021 | Spring 2022 | Also asked in AIAN FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- |
| COVID-19 Impact and Emergency Preparedness (Section X) |  |  |  |  |  |
| Largest lasting change to center/program as a result of COVID-19 | Center Director Survey Program Director Survey | Yes Yes | NP NP | √  √ | Yes Yes |
| Topics covered in the program emergency management/disaster preparedness and response plan | Program Director Survey | No | NP | √ | Yes |
| Emergency management and disaster preparedness activities program has conducted | Program Director Survey | No | NP | √ | Yes |

aConstructs that are also captured in AIAN FACES Fall 2021 and Spring 2022 may differ in source items and construction.

**Key:**

√ = Present in protocol

NP = No protocol for R in time period

Table Q.7. AIAN FACES measures of Region XI Head Start program environments

| Measure | Instrument | Used in AIAN FACES Fall 2019 or Spring 2020? | Fall 2021 | Spring 2022 | Also asked in FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- |
| Children Who Speak a Language Other Than English (Center and Program Director Surveys, Section A) | | | | | |
| Whether children who speak a language other than English in program/center; languages spoken by children and families in the center/program | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes No |
| Limitations on ability to provide interpreters or translated materials for children who speak a language other than English families due to lack of staff that speak language | Center Director Survey | Yes | NP | √ | Yes |
| Family Recruitment (Center and Program Director Surveys, Section A) | | | | | |
| Difficulty recruiting families in community | Program Director Survey | No | NP | √ | Yes |
| Efforts to recruit different families compared to prior years | Program Director Survey | No | NP | √ | Yes |
| Program Management (Program Director Survey, Section H; Center Director Survey, Sections A, AB, B, and H) | | | | | |
| Program details (start/end date, days per week and hours per day in session, full-day or half-day) | Center Director Survey | Yes | NP | √ | Yes |
| Staffing and recruitment and turnover (lead teachers) | Center Director Survey | Yes | NP | √ | Yes |
| Problems due to staff turnover | Center Director Survey | No | NP | √ | Yes |
| Problems due to other staffing challenges (finding classroom coverage, having enough staff to operate at full capacity) | Center Director Survey | No | NP | √ | Yes |
| Staffing of bilingual teachers (language speak) | Center Director Survey | Yes | NP | √ | Yes |
| Percentage of center administrative staff and teachers who are AIAN | Center Director Survey | Yes | NP | √ | No |
| Center/program director participation in professional development | Center Director Survey Program Director Survey | Yesb  Yesb | NP NP | √  √ | Yes Yes |
| Support needed to lead center/program more effectively | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Professional development opportunities offered (attendance at conferences, mentoring or coaching, workshops, etc.) | Center Director Survey | Yes | NP | √ | Yes |
| Types of tribal or community support for language and culture program | Center Director Survey | No | NP | √ | No |
| Staff Well-Being and Mental Health (Center and Program Director Surveys, Section C) | | | | | |
| Center for Epidemiologic Studies-Depression (CES-D) Short Form (Ross et al. 1983) | Center Director Survey Program Director Survey | No No | NP NP | √ √ | Yes Yes |
| Generalized Anxiety Disorder Assessment (GAD-7) (Spitzer et al. 2006) | Center Director Survey Program Director Survey | No No | NP NP | √ √ | Yes Yes |
| Job-related stress | Center Director Survey Program Director Survey | No No | NP NP | √ √ | No No |
| Job-related stress due to COVID-19 | Center Director Survey Program Director Survey | No No | NP NP | √ √ | Yes Yes |
| Activities to address trauma in staff | Program Director Survey | No | NP | √ | Yes |
| Services or supports to support staff wellness and well-being | Center Director Survey | No | NP | √ | Yes |
| Offer training to staff on providing trauma-informed care and who conducts training | Center Director Survey | No | NP | √ | Yes |
| Resources/Funding (Program Director Survey, Sections A and O) | | | | | |
| Cumulative program enrollment | Program Director Survey | Yes | NP | √ | Yes |
| Whether and what additional sources of program funding | Program Director Survey | Yes | NP | √ | Yes |
| Use of Program Data and Information (Program Director, Section N) | | | | | |
| Use of management information or data systems | Program Director Survey | Yes | NP | √ | Yes |
| Staff responsible for analyzing program data and training received | Program Director Survey | Yes | NP | √ | Yes |
| Kinds of data and information being collected by program; usage; barriers to usage | Program Director Survey | Yes | NP | √ | No |
| Manager Characteristics (Center and Program Director Surveys, Section I ) | | | | | |
| Start date for working in this Head Start program | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Years as director in any early childhood program, any Head Start program, and current Head Start program | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Years experience with any Head Start program, part of any Head Start program’s management team, and as teacher or home visitor in any Head Start program | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | No No |
| Hours per week paid to work with Head Start? | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Highest grade completed/degrees | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Field of highest degree | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Field include 6+ college courses in ECE/CD | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | No No |
| Completed 6+ college courses in ECE/CD? | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | No No |
| Currently enrolled in any additional training or education; what kind | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | No No |
| Currently hold a license, certification, and/or credential in administration of EC/CD programs or schools | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Have CDA? | Center Director Survey | Yes | NP | √ | Yes |
| Have state preschool teaching certificate or license? | Center Director Survey | Yes | NP | √ | Yes |
| Have state teaching certificate or license for ages/grades other than preschool? | Center Director Survey | Yes | NP | √ | Yes |
| Salary | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Gender | Center Director Survey Program Director Survey | Yesc Yesc | NP NP | √ √ | Yes Yes |
| Birth year | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Race/ethnicity | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Speak a language other than English? What? | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes Yes |
| Program Community (Program Director Survey, Section P) | | | | | |
| Substance use in the community | Program Director Survey | Yes | NP | √ | Yes |
| Staff supports for working with families with substance use issues | Program Director Survey | Yes | NP | √ | Yes |
| Staff Compensation and Benefits (Section Z) |  |  |  |  |  |
| Activities / expenses implemented around increasing staff wages, adding or expanding staff compensation, and hiring staff in the past 12 months | Program Director Survey | No | NP | √ | Yes |
| Increases in staff wages (which positions, whether positions were paid the minimum wage or less prior to increase) | Program Director Survey | No | NP | √ | Yes |
| Types of staff compensation currently offered (which positions) | Program Director Survey | No | NP | √ | Yes |
| Adding or expanding staff compensation in the past 12 months (types, which positions) | Program Director Survey | No | NP | √ | Yes |
| Types of supports for staff well-being currently in place (which positions) | Program Director Survey | No | NP | √ | Yes |
| Adding or expanding supports for staff well-being in the past 12 months (types, which positions) | Program Director Survey | No | NP | √ | Yes |

aConstructs that were also captured in FACES Fall 2021 and Spring 2022 may differ in source items and construction.

bIn Spring 2020, we asked about participation college or university courses, visits to other Head Start or early childhood programs, a network or community of Head Start and other early childhood program leaders, a leadership institute offered by Head Start or an organization other than Head Start, trainings related to managerial or leadership role in the past 12 months. In Spring 2022, we asked about participation in a network or community of early care and education center directors or managers, a leadership institute, course, coaching, or other leadership development program, and Native language courses or language mentorship with first speakers in the past 12 months.

cIn Spring 2020, we asked directors about their sex. In Spring 2022, we changed the question wording to ask directors if they describe themselves as male, female, or another gender identity.

**Key:**

√ = Present in protocol

NP = No protocol for R in time period

Table Q.8. AIAN FACES measures of teacher well-being and characteristics

| Measure | | Instrument | Used in AIAN FACES Fall 2019 or Spring 2020? | | | | Fall 2021 | | Spring 2022 | Also asked in FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Teacher Well-Being (Teacher Survey, Section C) | | | | | | | | | | |
| Center for Epidemiologic Studies-Depression (CES-D) Short Form (Ross et al. 1983) | | Teacher Survey | | Yes | √ | | | √ | | Yes |
| Feeling overwhelmed, frustrated, or not valued or supported at work | | Teacher Survey | | Yes | √ | | | √ | | No |
| Generalized Anxiety Disorder Assessment (GAD-7) (Spitzer et al. 2006) | | Teacher Survey | | No | √ | | | √ | | Yes |
| General health | | Teacher Survey | | No | √ | | | √ | | Yes |
| Job-related stress | | Teacher Survey | | No | -- | | | √ | | Yes |
| Job-related stress due to COVID-19 | | Teacher Survey | | No | √ | | | -- | | Yes |
| Primary caregiver for children at home | | Teacher Survey | | No | √ | | | -- | | Yes |
| Current level of stress or anxiety as a caregiver | | Teacher Survey | | No | √ | | | -- | | Yes |
| Parenting behaviors | | Teacher Survey | | No | √ | | | -- | | Yes |
| Instruction mode for their child(ren) in 2021-2022 school/program year | | Teacher Survey | | No | √ | | | -- | | Yes |
| Child(ren)’s school, school district, or child care provider changed in-person instruction plans | | Teacher Survey | | No | √ | | | -- | | Yes |
| Unmet childcare needs | | Teacher Survey | | No | √ | | | -- | | Yes |
| Supports for staff wellness and overall well-being offered and received | | Teacher Survey | | No | -- | | | √ | | Yes |
| Were supports for staff wellness and overall well-being offered at a convenient location and convenient time | | Teacher Survey | | No | -- | | | √ | | Yes |
| Supports for staff wellness and overall well-being that would have been useful | | Teacher Survey | | No | -- | | | √ | | Yes |
| Supports for staff wellness and overall well-being received from program met teacher needs | | Teacher Survey | | No | -- | | | √ | | Yes |
| Whether received training on providing trauma-informed care in the past year | | Teacher Survey | | No | -- | | | √ | | Yes |
| Who provided training on trauma-informed care | | Teacher Survey | | No | -- | | | √ | | Yes |
| Teacher Characteristics (Teacher Survey, Sections A and D) | | | | | | | | | | |
| Years teaching | | Teacher Survey | | Yes | √ | | | N | | Yes |
| Years teaching/working in Head Start (this and any program) | | Teacher Survey | | Yes | √ | | | N | | Yes |
| Highest grade completed/degrees | | Teacher Survey | | Yes | √ | | | N | | Yes |
| Field of highest degree | | Teacher Survey | | Yes | √ | | | N | | Yes |
| 6+ college courses in Early Childhood Education (ECE) or Child Development (CD)? | | Teacher Survey | | Yes | √ | | | N | | Yes |
| Currently enrolled in any additional training or education; what kind | | Teacher Survey | | Yes | -- | | | √ | | No |
| Have CDA? | | Teacher Survey | | Yes | √ | | | N | | Yes |
| Have state-awarded preschool certificate or license? | | Teacher Survey | | Yes | √ | | | N | | Yes |
| Have teaching certificate or license or ages/grades other than preschool? | | Teacher Survey | | Yes | √ | | | N | | Yes |
| Salary and time period covered | | Teacher Survey | | Yes | -- | | | √ | | Yes |
| Gender | | Teacher Survey | | Yesb | √ | | | N | | Yes |
| Birth year | | Teacher Survey | | Yes | √ | | | N | | Yes |
| Race/ethnicity | | Teacher Survey | | Yes | √ | | | N | | Yes |
| Languages other than English personally speak | | Teacher Survey | | Yes | -- | | | √ | | Yes |
| COVID-19 Impact on Teachers (Teacher Survey, Sections AB and E) | | | | | | | | | | |
| Mode of working with children (in person, virtual/remote, hybrid) | Teacher Survey | | | No | | √ | | -- | | Yes |
| What have been the biggest challenges for you and your family during the COVID-19 pandemic? | Teacher Survey | | | No | | √ | | -- | | Yes |
| What have been the biggest challenges for you as a teacher during the COVID-19 pandemic? | Teacher Survey | | | No | | √ | | -- | | Yes |
| What supports from Head Start have been most helpful during the pandemic? | Teacher Survey | | | No | | √ | | -- | | Yes |
| Has the way that children experience Native language and culture in your classroom changed due to the COVID-19 pandemic? How? | Teacher Survey | | | No | | -- | | √ | | No |

a Constructs that are also captured in FACES Fall 2021 or Spring 2022 may differ in source items and construction.

b In Spring 2020, we asked teachers about their sex. In Fall 2021 and Spring 2022, we changed the question wording to ask teachers if they describe themselves as male, female, or another gender identity.

**Key:**

√ = Present in protocol

-- = Absent in protocol

N = Only asked of new respondents

Table Q.9. AIAN FACES measures of classroom environments

| Measure | Instrument | Used in AIAN FACES Fall 2019 or Spring 2020? | Fall 2021 | Spring 2022 | Also asked in FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- |
| Classroom Environment (Teacher Survey, Sections AB, A, and B; Program and Center Director Surveys, Section E) | | | | | |
| Child/adult counts | Teacher Survey Classroom Observation | Yes Yesb | -- NP | √ NP | Yes NP |
| Number of teaching staff who are American Indian or Alaska Native (AIAN) | Teacher Survey | Yes | -- | √ | No |
| Early Childhood Environment Rating Scale (ECERS-R; abbreviated form; 21 items) | Classroom Observation | Yesb | NP | NP | NP |
| Classroom Assessment Scoring System (CLASS; Pianta et al. 2008) | Classroom Observation | Yesb | NP | NP | NP |
| Time spent in teacher vs. child directed activities; large vs. small group or individual activities | Teacher Survey | Yes | -- | √ | Yes |
| Frequency of various language- and literacy-oriented activities | Teacher Survey | Yes | -- | √ | Yes |
| Content of centers or interest areas in classroom | Classroom Observation | Yesb | NP | NP | NP |
| Frequency of mathematics activities | Teacher Survey | Yes | -- | √ | Yes |
| Frequency of language/literacy, math, science, social studies, and arts instruction | Teacher Survey | Yes | -- | √ | Yes |
| Whether use specific or combination of curricula; name(s) of main curricula used in classroom/program | Teacher Survey Program Director Survey | Yes Yes | -- NP | √ √ | Yes Yes |
| Whether center uses parent support curriculum | Center Director Survey | Yes | NP | √ | Yes |
| Rate behavior of group of children in class | Teacher Survey | Yes | -- | √ | Yes |
| Beliefs about teaching practice | Teacher Survey | Yes | -- | √ | Yes |
| Demographics of class | Teacher Survey | Yes | -- | √ | Yes |
| Number of co-teachers and assistants | Teacher Survey | Yes | -- | √ | Yes |
| Native Culture/Language in Classroom (Teacher Survey, Section AB; Program and Center Director Surveys, Section AB) | | | | | |
| Does center/program/classroom have a cultural/language elder or specialist? Who? | Center Director Survey Program Director Survey Teacher Survey | Yes Yes Yes | NP NP -- | -- √ √ | No No No |
| Whether children at center receive Native language lessons; languages taught; who teaches | Center Director Survey | Yes | NP | √ | No |
| Whether children at center receive Native language lessons; languages taught; who teaches; frequency and length of lessons | Teacher Survey | Yes | -- | √ | No |
| Kind of Native language program within program (immersion or partial immersion for some or all classrooms; structured language use; words used in classroom) | Program Director Survey | Yes | NP | √ | No |
| Whether classroom is full immersion; whether program is full or partial immersion and if program is partial, percentage of Native language used in immersion classrooms | Teacher Survey Program Director Survey | Yesc Yesc | -- NP | √ √ | No No |
| If program has ever had a Native language immersion program (partial or full); if no longer have an immersion program, why | Program Director Survey | Yes | NP | √ | No |
| How are Native culture and language activities integrated into classroom activities | Teacher Survey | Yes | -- | √ | No |
| Frequency with which Native language is used in classroom (by teachers, by children, teachers and children conversing together, incorporating Native language words into English language sentences, speaking full sentences in Native language) | Teacher Survey | Yes | -- | √ | No |
| Center support of parent engagement in children’s Native language use | Center Director Survey | Yes | NP | √ | No |
| Whether program uses a cultural curriculum | Program Director Survey Teacher Survey | Yes Yes | NP -- | √ √ | No No |
| Whether program uses locally designed tool to assess children’s Native language development | Program Director Survey Teacher Survey | Yes Yes | NP -- | √ √ | No No |
| Presence and use of cultural items | Classroom Observation | Yesb | NP | NP | NP |
| Native language use observed | Classroom Observation | Yesb | NP | NP | NP |
| Storytelling observed | Classroom Observation | Yesb | NP | NP | NP |
| Storytelling occurrence, formally or informally and language(s) used | Teacher Survey | Yes | -- | √ | No |
| Cultural activities in the center in past 12 months (listened to Elders tell stories, participated in traditional activities) | Center Director Survey | Yes | NP | √ | No |
| Other cultural events or practices observed | Classroom Observation | Yesb | NP | NP | NP |
| Using or have used Making It Work framework; if so, how used | Program Director Survey | Yes | NP | √ | No |
| Used other resources from the Office of Head Start National Centers for training and technical assistance to help implement Native language and culture activities in program in the past year, which National Centers resources | Program Director Survey | No | NP | √ | No |
| Changes in the way children experience Native language and culture in program due to the COVID-19 pandemic | Center Director Survey Program Director Survey | No No | NP NP | √ √ | No No |
| Teacher Professional Development (Teacher Survey, Sections A and B; Program and Center Director Surveys, Section B) | | | | | |
| Who provided curriculum training | Teacher Survey | Yes | -- | -- | Yes |
| Type of ongoing support for curriculum and who provides | Teacher Survey | Yes | -- | √ | No |
| Any mentor? Who? Formal/informal relationship? Frequency and length of visit? | Teacher Survey | Yes | -- | √ | Yesd |
| Professional development supports (meeting with supervisor, support/funding attend conferences/workshops/trainings, incentives to participate in professional development) | Teacher Survey | Yes | -- | √ | Yes |
| Satisfaction with teaching | Teacher Survey | Yes | -- | √ | Yes |
| Likelihood of continuing with Head Start through next year | Teacher Survey | Yes | -- | √ | Yes |
| Reasons teachers might leave or stay at Head Start through the next year | Teacher Survey | No | -- | √ | Yes |
| Support for enhancing qualifications (provision of AA/BA support) | Program Director Survey | Yes | NP | √ | Yes |
| How often provide professional development to staff? | Center Director Survey Program Director Survey | Yes Yes | NP NP | √ √ | Yes No |
| Who conducts professional development activities? | Center Director Survey | Yes | NP | √ | Yes |
| Whether participated in AIAN training and technical assistance (T/TA) | Teacher Survey | Yes | -- | √ | No |
| Whether received T/TA related to culture from Administration for Native Americans (ANA) or other organization | Teacher Survey | Yes | -- | √ | No |
| Whether consulted with a regional T/TA specialists | Center Director Survey | Yes | NP | √ | No |
| Whether consulted with AIAN T/TA specialists | Center Director Survey | Yes | NP | √ | No |
| How use Head Start funds for professional development | Program Director Survey | Yes | NP | √ | No |
| Teacher performance evaluation frequency | Center Director Survey | Yes | NP | √ | Yes |
| Planning and Assessment (Teacher Survey, Section A; Program and Center Director Surveys, Section E) | | | | | |
| What is your main child assessment tool? | Teacher Survey  Program Director Survey | Yes Yes | --  NP | √ -- | Yes  Yes |
| Whether use this assessment in planning | Teacher Survey | Yes | -- | -- | Yes |
| Frequency of reporting of assessment results | Center Director Survey | Yes | NP | √ | No |
| Physical Activity and Nutrition (Center Director Survey, Section K) | | | | | |
| If there is a policy on daily gross motor activity and time required | Center Director Survey | Yes | NP | √ | No |
| Staff support for discussing child’s weight with parents | Center Director Survey | Yes | NP | √ | No |
| Share information about physical activity and nutrition with parents | Center Director Survey | Yes | NP | √ | No |
| Children with Developmental Concerns (Teacher Survey, Section A) | | | | | | |
| How often meet with parents to discuss progress of a child with developmental concerns | Teacher Survey | Yese | -- | √ | Yes |
| Children Who Speak a Language Other Than English (Teacher Survey, Section A) | | | | | |
| Number/percentage of children who speak a language other than English in classroom | Teacher Survey | Yes | -- | √ | Yesf |
| Language(s) spoken by children who speak a language other than English in classroom | Teacher Survey | Yes | -- | √ | Yes |
| Language(s) of instruction | Teacher Survey | Yes | -- | √ | Yes |
| Staff member who speaks language(s) of instruction | Teacher Survey | Yes | -- | √ | Yes |
| Language(s) used when reading books to children, talking to groups of children | Teacher Survey | Yes | -- | √ | No |
| Language(s) of printed materials like children’s books | Teacher Survey | Yes | -- | √ | Yes |
| Parent-Teacher Interaction (Teacher Survey, Section A) | | | | | |
| How often meet with parents to discuss progress of child | Teacher Survey | Yes | -- | √ | Yes |
| Ways of communicating with parents who speak a language other than teacher | Teacher Survey | Yes | -- | √ | Yes |
| Teacher Perspective of Program Management (Teacher Survey, Section B) | | | | | |
| Views about program support for interactions between staff and parents | Teacher Survey | Yes | -- | √ | Yes |

a Constructs that are also captured in FACES Fall 2021 or Spring 2022 may differ in source items and construction.

b In Spring 2020, classroom observations were completed in 7 of 22 programs before in-person data collection was cancelled due to the COVID-19 pandemic.

c Percentage of Native language used in immersion classrooms is only asked in the Program Director Survey.

d In FACES, we will not ask teachers how long their mentor or coach stays in their class when they visit.

e In AIAN FACES 2019, we asked teachers about children with special needs. For Spring 2022, we changed the question wording to developmental concerns.

f In FACES, we ask teachers about the percentage of children who speak each language other than English. In AIAN FACES, we ask teachers about the number of children who speak each language other than English.

**Key:**

√ = Present in protocol

-- = Absent in protocol

NP = No protocol in time period

Table Q.10. AIAN FACES measures of child and family demographics and home environments

| Measure | | Instrument | | Used in AIAN FACES Fall 2019 or Spring 2020? | Fall 2021 | Spring 2022 | Also asked in FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Child Demographic Characteristics (Section A) | |  | |  |  |  |  |
| Genderb | | Parent Survey | | Yes | √ | N | Yes |
| Age (birth date) | | Parent Survey | | Yes | √ | N | Yes |
| Race/ethnicity | | Parent Survey | | Yes | √ | N | Yes |
| Mother’s Demographic Characteristics (Sections SC and J) | |  | |  |  |  |  |
| Is the mother alive? | | Parent Survey | | No | √ | N | Yes |
| How frequently child saw/sees mother | | Parent Survey | | No | √ | -- | Yes |
| Birth date | | Parent Survey | | Yes | √ | N | Yes |
| Marital status | | Parent Survey | | Yes | √ | N | Yes |
| Highest grade or degree completed | | Parent Survey | | Yes | √ | N | Yes |
| Employment status, whether actively looking for work, hours usually worked in a week | | Parent Survey | | Yes | √ | N | Yes |
| Ever worked (in past year/since last survey) | | Parent Survey | | Yes | √ | N | Yes |
| Whether employment situation has changed as a result of COVID-19 | | Parent Survey | | No | √ | -- | Yes |
| Father’s Demographic Characteristics (Sections SC and K) | |  | |  |  |  |  |
| Is the father alive? | | Parent Survey | | No | √ | N | Yes |
| How frequently child saw/sees father | | Parent Survey | | No | √ | -- | Yes |
| Birth date | | Parent Survey | | Yes | √ | N | Yes |
| Highest grade or degree completed | | Parent Survey | | Yes | √ | N | Yes |
| Employment status, whether actively looking for work, hours usually worked in a week | | Parent Survey | | Yes | √ | N | Yes |
| Ever worked (in past year/since last survey)? | | Parent Survey | | Yes | √ | N | Yes |
| Whether employment situation has changed as a result of COVID-19 | | Parent Survey | | No | √ | -- | Yes |
| Characteristics of Parent Who is Not Birth or Adoptive Parent (Sections SC and L) | |  | |  |  |  |  |
| Respondent relationship to child | | Parent Survey | | Yes | √ | N | Yes |
| Birth date | | Parent Survey | | Yes | √ | N | Yes |
| Highest grade or degree completed | | Parent Survey | | Yes | √ | N | Yes |
| Employment status, whether actively looking for work, hours usually worked in a week | | Parent Survey | | Yes | √ | N | Yes |
| Ever worked (in past year/since last survey)? | | Parent Survey | | Yes | √ | N | Yes |
| Whether employment situation has changed as a result of COVID-19 | | Parent Survey | | No | √ | -- | Yes |
| Home Learning Environment (Sections D and E) and Routines (Section H) | |  | |  |  |  |  |
| Reading in past week: frequency | | Parent Survey | | Yes | √ | √ | Yes |
| Told stories in past week: frequency | | Parent Survey | | Yes | √ | √ | No |
| Cultural activities within the community in past 12 months (listened to elders tell stories, participated in traditional ceremonies) | | Parent Survey | | Yes | √ | N | No |
| Activities that involve technology/electronics (watching TV, playing video games) | | Parent Survey | | Yes | -- | √ c | No |
| Number of days per week that family eats evening meal together | | Parent Survey | | Yes | √ | √ | Yes |
| Child’s typical sleep hours (time to bed and wake up, regularity of bedtime, sleep disruptions -nighttime waking) | | Parent Survey | | Yes | √ | √ d | Yes |
| Household Composition (Section B) | |  | |  |  |  |  |
| Household members: age, relationship of adults to child | | Parent Survey | | Yes | √ | √ | Yes |
| Temporary household members: name, age, relationship of adults to child | | Parent Survey | | No | √ | √ | Yes |
| Whether parent’s spouse/partner lives with them, who it is, and what their relationship status is | | Parent Survey | | No | √ | √ | Yes |
| Home Language Environment (Section D) | |  | |  |  |  |  |
| If English is spoken in household | | Parent Survey | | Yes | √ | N | Yes |
| Languages other than English spoken in household | | Parent Survey | | Yes | √ | N | Yes |
| Language parent usually uses to speak to child | | Parent Survey | | Yes | √ | N | Yes |
| Native language activities in past month (spoke Native language with child, used Native language in prayer or songs with child) | | Parent Survey | | Yes | √ | N | No |
| How important it is for child to learn Native language | | Parent Survey | | Yes | √ | N | No |
| Household Income, Food Security, Financial Strain and Hardship, and Receipt of Public Assistance (Section M) and Family Income (Section MM) | |  | |  |  |  |  |
| Total family income | | Parent Survey | | No | √ | √ | Yes |
| Receipt of welfare, supplemental nutrition assistance program or SNAP, etc. | | Parent Survey | | Yes | √ | √ | Yes |
| Total household income | | Parent Survey | | Yes | √ | √ | Yes |
| Change in household income during COVID-19 pandemic | | Parent Survey | | No | √ | -- | Yes |
| Whether the household received a stimulus payment during the COVID-19 pandemic | | Parent Survey | | No | √ | -- | Yes |
| Food Security Scale – Short Form (Bickel et al. 2000) | | Parent Survey | | Yes | √ | N | Yes |
| Economic strain (Conger et al. 1993) | | Parent Survey | | Yes | √ | N | Yes |
| Housing situation – whether they live with another family, or in transitional housing | | Parent Survey | | No | √ | √ e | Yes |
| Housing quality and number of rooms in home | | Parent Survey | | Yes | √ | Nf | Yes |
| Material conditions (e.g., difficulties in past 12 months accessing transportation, paying utility bills, having to move) (Health Profession Opportunity Grants [HPOG] study, Multi-Site Implementation Evaluation of Tribal Home Visiting [MUSE]) | | Parent Survey | | Yes | √ | N | Yes |
| Number of times moved in the past year | | Parent Survey | | Yes | √ | -- | Yes |
| Home and Neighborhood Characteristics (Section R) | |  | |  |  |  |  |
| Community/neighborhood problems (crime/violence, run-down housing, not enough good housing, police not available) | | Parent Survey | | Yes | -- | -- | No |
| Community/neighborhood problems (alcohol/drug abuse) | | Parent Survey | | Yes | √ | -- | No |
| Child witnessed violent crime, domestic violence? | | Parent Survey | | Yes | -- | -- | No |
| Child victim of violent crime, domestic violence? | | Parent Survey | | Yes | -- | -- | No |
| Criminal records or jail time of anyone in the home | | Parent Survey | | Yes | -- | -- | No |
| Cultural Connections (Section V) | |  | |  |  |  |  |
| Thoughts on tribe or cultural group (importance, level of pride) | | Parent Survey | | Yes | -- | √ | No |
| Cultural activities in the last month (made traditional Native cultural food, taught child importance of family in Native culture) | | Parent Survey | | Yes | -- | √ | No |
| Number of relatives and friends that live in community | | Parent Survey | | Yes | √ | N | No |
| Impact of losses and challenges of COVID-19 pandemic and current events related to racial injustice on community | | Parent Survey | | No | √ | N | No |
| Coping mechanisms/supports of the COVID-19 pandemic and events related to racial injustice | | Parent Survey | | No | √ | N | Yes |
| Parent Mental Health (Section U) | |  | |  |  |  |  |
| Center for Epidemiologic Studies-Depression (CES-D) Short Form (Ross et al. 1983) | | Parent Survey | | Yes | √ | √ | Yes |
| Anxiety level: General Anxiety Disorder-7 (GAD-7) (Spitzer et al.) | | Parent Survey | | No | √ | √ | Yes |
| Stress and anxiety level compared to pre-COVID-19 pandemic and racial injustice | | Parent Survey | | No | √ | -- | Yes |
| Parenting behaviors and stress | | Parent Survey | | No | √ | √ | Yes |
| Parent Head Start Involvement (Section I) |  | |  | |  |  |  |
| Parent involvement in Head Start (frequency of various activities) | Parent Survey | | No | | -- | √ | Yes |
| Preference for involvement in virtual Head Start activities | Parent Survey | | No | | -- | √ | Yes |
| Child Care (Section N) | |  | |  |  |  |  |
| Reasons why parent chose Head Start for child’s care, plans for child’s care next year, and reasons why sending child some place new | | Parent Survey | | Yesg | -- | √ | Yes |
| How child/children currently attend school | | Parent Survey | | No | -- | -- | No |
| Assisting children in online learning (who assists, is it during work hours, number of hours spent helping them) | | Parent Survey | | No | -- | -- | No |
| How child care needs outside of regular child care arrangements are being met | | Parent Survey | | No | -- | √ | Yes |
| Child and family health (Section P) | |  | |  |  |  |  |
| Where child receives well-child care | | Parent Survey | | Yes | √ | N | Yes |
| Parent’s health status | | Parent Survey | | No | √ | √ | Yes |
| COVID health impacts on household – whether any household or close friend/family had COVID-19, was hospitalized for COVID-19, or passed away from COVID-19 | | Parent Survey | | No | √ | -- | Yes |
| Child with special condition or need (whether professional suggest evaluation, type of condition or need, received diagnosis) | | Parent Survey | | Yes | -- | √ | No |
| Family Health (Section Q) | |  | |  |  |  |  |
| Smoking/alcohol usage (frequency, amount, inside the home) | | Parent Survey | | Yes | -- | -- | No |
| Whether anyone in household has received help or treatment for alcohol use, substance abuse, or mental health | | Parent Survey | | Yes | -- | -- | No |
| Community Services (Section S) and Social Support (Section T) | |  | |  |  |  |  |
| Whether Head Start has provided or connected the household with certain services since the program year began (i.e. help with housing, referral to medical or dental services, assistance applying for unemployment) | | Parent Survey | | No | -- | √ | No |
| Whether certain services would have been useful in the last 12 months or right now (i.e. help with housing, referral to medical or dental services, assistance applying for unemployment) | | Parent Survey | | No | -- | √ | Yes |
| Type of social support received (someone to watch child, place to stay, emergency cash) | | Parent Survey | | Yes | √ | N | Yes |
| Participation in group activities | | Parent Survey | | No | √ | N | No |
| Program Experiences (Section W) | |  | |  |  |  |  |
| Whether program provides transportation for child | | Parent Survey | | No | -- | √ | No |
| Satisfaction with Head Start | | Parent Survey | | Yes | -- | √ | Yes |
| Culturally responsive services: Strength-Based Practices Inventory (Green et al. 2004) | | Parent Survey | | Yes | -- | √ | Yes |

aConstructs that are also captured in FACES Fall 2021 or Spring 2022 may differ in source items and construction.

b In Fall 2019, parents were asked if their child was a boy or girl. In Fall 2021, parents were asked if their child is a boy, a girl, another gender identity, or they prefer not to answer. cIn Spring 2022, parents will only be asked about the child’s total amount of screen time.

dIn Spring 2022, parents will not be asked about the regularity of their child’s bedtime.

eIn Spring 2022, parents will not be asked whether they live with another family for financial reasons.

fIn Spring 2022, parents will not be asked about whether their households are just the right size, old and aged, or kept in good condition.

gIn Fall 2019 and Spring 2020, the response options for these items were more comprehensive than those proposed for Spring 2022. We have revised/reduced the response options to align with those most commonly endorsed in FACES 2019.

**Key:**

√ = Present in protocol

-- = Absent in protocol

N = Only asked of new respondent

Table Q.11. AIAN FACES measures of child outcomes

| Measure | Instrument | Used in AIAN FACES Fall 2019 or Spring 2020? | Fall 2021 | Spring 2022 | Also asked in FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- |
| Literacy Knowledge and Skills – Early Writing (Teacher Child Report, Section B) | | | | | |
| Pretends to write, write/draw, write name | Teacher Child Report | Yes | √ | √ | Yes |
| Literacy Knowledge and Skills – Alphabet Knowledge and Phonological Awareness (Teacher Child Report, Section B) | | | | | |
| Recognizes first name in print, recognizes letters | Teacher Child Report | Yes | √ | √ | Yes |
| Phonology sounds, recognizes words other than own name in print, identifies rhyming words | Teacher Child Report | Yes | √ | √ | Yes |
| Mathematics Knowledge and Skills (Teacher Child Report, Section B) | | | | | |
| How high can child count? | Teacher Child Report | Yes | √ | √ | Yes |
| Identifies basic shapes, describes differences between shapes | Teacher Child Report | No | √ | √ | Yes |
| Sorts objects by attributes, orders objects by length or height | Teacher Child Report | No | √ | √ | Yes |
| Subitize objects | Teacher Child Report | No | √ | √ | Yes |
| Basic addition | Teacher Child Report | No | √ | √ | Yes |
| Social-Emotional Development and Approaches to Learning (Teacher Child Report, Section C (copyrighted), Section D (parts copyrighted), and Section H; Parent Survey. Section G) | | | | | |
| 26 items from Behavior Problems Index (Peterson and Zill 1986), Personal Maturity Scale (Entwisle et al., 1987), and Social Skills Rating Scale (Gresham and Elliott, 1990) | Teacher Child Report | Yes | √ | √ | Yes |
| ECLS-K Approaches to Learning Scale (U.S. Department of Education 2002; adapted for parent survey) | Teacher Child Report | Yes | √ | √ | Yes |
| Parent Survey | No | √ | -- | Yes |
| Internalizing and externalizing behaviors | Parent Survey | No | √ | -- | Yes |
| Physical Health and Development (Teacher Child Report, Section B and Section F; Parent Survey, Section P) | | | | | |
| Child’s health status | Parent Survey | Yes | √ | √ | Yes |
| Ever diagnosed with a disability? Which? | Teacher Child Report | Yes | √ | √ | Yes |
| Any concerns about child’s health or development? What? | Teacher Child Report | Yes | √ | √ | Yes |
| What has been done to address condition or concerns? | Teacher Child Report | Yes | √ | √ | Yes |
| IEP or IFSP: Have one? | Teacher Child Report | Yes | √ | √ | Yes |
| Whether teacher participated in child’s IEP or IFSP meeting | Teacher Child Report | Yes | √ | √ | Yes |
| Services child has received for special conditions/how services were delivered | Teacher Child Report | Yes | √ | √ | Yes |
| Child’s Exposure to Head Start Program (Teacher Child Report, Section A and F; Teacher Survey, Section A) | | | | | |
| Days absent | Teacher Child Report | Yes | -- | √ | Yes |
| Days and hours per week the class meets | Teacher Survey | Yes | -- | √ | Yes |
| Mode child currently attends class (in-person, virtual/remote, hybrid) | Teacher Child Report | No | √ | √ | Yes |
| Days and hours per week the teacher sees the child in-person | Teacher Child Report | No | √ | √ | Yes |
| Days and hours per week the teacher sees the child virtually | Teacher Child Report | No | √ | √ | Yes |

aConstructs that are also captured in FACES Fall 2021 and Spring 2022 may differ in source items and construction.

**Key:**

√ = Present in protocol

-- = Absent in protocol

Table Q.12. AIAN FACES measures of the impact of COVID-19 pandemic on Program and Center operations and Program Emergency preparedness

| Measure | Instrument | Used in FACES Fall 2019 or Spring 2020? | Fall 2021 | Spring 2022 | Also asked in FACES Fall 2021 or Spring 2022?a |
| --- | --- | --- | --- | --- | --- |
| Largest lasting change to center/program as a result of COVID-19 | Center Director Survey Program Director Survey | Yes Yes | NP NP | √  √ | Yes Yes |
| Topics covered in the program emergency management/disaster preparedness and response plan | Program Director Survey | No | NP | √ | Yes |
| Emergency management and disaster preparedness activities program has conducted | Program Director Survey | No | NP | √ | Yes |

aConstructs that are also captured in FACES Fall 2021 and Spring 2022 may differ in source items and construction.

**Key:**

√ = Present in protocol

NP = No protocol for R in time period

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