

Appendix E

Individuals/Households in-depth interview guide

Evaluation of Child Support Cooperation Requirements in SNAP

CLIENT IN-DEPTH INTERVIEW GUIDE

Introduction

Thank you so much for meeting with me today. My name is _____ and I am with a company called Mathematica/MEF Associates. We are independent researchers helping the U.S. Department of Agriculture on a study to learn more about the experiences of families seeking and receiving benefits through [NAME OF STATE SNAP PROGRAM]. In particular, this study focuses on requirements that ask people with children to cooperate with the child support agency to keep their SNAP benefits. Whether or not to have this type of child support cooperation requirement is a choice left up to each State to decide. [STATE] currently [HAS/DOES NOT HAVE] a child support cooperation requirement.

As part of this study: we are talking to people like you to understand their views on and experiences with these requirements.

- [IF IN A STATE WITH A CHILD SUPPORT COOPERATION REQUIREMENT IN SNAP]: We are interested in speaking with individuals with children who participate in the [NAME OF STATE PROGRAM] to better understand their experiences with this requirement. Your participation will help the government better understand the effect of child support cooperation requirements on individuals and families. There are no known risks to your participation. Your participation will not affect your SNAP benefit or your child support order in any way.
- [IF IN A STATE THAT IS CONSIDERING HAVING A CHILD SUPPORT COOPERATION REQUIREMENT IN SNAP]: [STATE SNAP PROGRAM NAME] does not have a child support cooperation requirement. We are interested in speaking with individuals who receive [STATE SNAP PROGRAM NAME] to understand their views about this type of policy and what it might mean for you and your family. Your participation will help the government better understand the effect of child support cooperation requirements on individuals and families. There are no known risks to your participation. Your participation will not affect your SNAP benefit or your child support order in any way.

Your participation in this study is voluntary. You do not have to answer any question you don't want to answer. Be assured there will be no penalties if you decide not to participate in whole or to any particular questions. Our conversation will take about 90 minutes. During our conversation, anything you say will be private, except as required by law. I want to assure you that this discussion is private. We won't use your name or any other identifying information when we report the results of our study and we won't share what you say with [NAME OF STATE SNAP PROGRAM] or any other program.

This information is being collected under the authority of Section 9 of the Food and Nutrition Act of 2008, as amended, 7 U.S.C. 2018. Disclosure of the information is voluntary. The information is being collected to evaluate Child Support Cooperation Requirements in United States Department of Agriculture (USDA) Supplemental Nutrition Assistance Program (SNAP). The information may be shared with SNAP contract researchers and USDA SNAP research and administrative staff.

Please remember that we are interested in your experiences and opinions: there are no right or wrong answers. If at any time I ask you a question, and you don't feel comfortable talking about the topic, feel free to say so, and we will move on. In appreciation for your participation in the interview and to help you cover any costs that you may incur as a result of this interview, such as child care costs, we will give you a \$50 cash card at the end of our conversation.

I would like to record our conversation, so I don't miss anything. No one will hear the recording except for the research team and the person who transcribes it, and the recording will be permanently deleted after this study is completed. 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.

Do you have any questions for me before we get started?

[INTERVIEWER: TURN THE DIGITAL RECORDER ON]

Okay, I have now turned the tape recorder on. Is it okay if I tape this conversation? [INTERVIEWER: GET VERBAL CONSENT TO TAPE ON THE RECORDING.]

[INTERVIEWER: TURN THE RECORDER ON, SPECIFY YOUR NAME, THE DATE, LOCATION, AND RESPONDENT'S ASSIGNED ID NUMBER]

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 0584-xxxx. The time required to complete this information collection is estimated to average 90 minutes per response, 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 or any other aspect of this collection of information, including suggestions to reducing this burden, to the following address: U.S. Department of Agriculture, Food and Nutrition Services, Office of Policy Support, 1320 Braddock Place, Alexandria, VA 22314, ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

A. Respondent background

1. Why don't we start with you telling me a little bit about yourself and your family?

B. Family and household composition

Now I'm going to take out a piece of paper, and we're going to do something you probably haven't done for a long time—draw a family tree! This will help guide our conversation today. I'm going to start by putting you in the middle, and we will add on from there.

INTERVIEWER: REPEAT QS 1-6 IN THIS SECTION FOR EACH CHILD UNDER AGE 18.

1. Okay, let's begin filling this in with the name(s) of the child/ren who live(s) with you, starting with the youngest. What's his/her first name? If you aren't comfortable sharing their name, you can make one up. I'll add [CHILD] right here, beneath you.

- a. How old is [CHILD]?
 - b. If you are taking care of this child because neither of their biological parents are able to do so at this time, please let me know that as well. [IF YES]: What is your relationship to child (for example, grandparent, aunt/uncle, older sibling or other relative, nonrelative caretaker).
[INTERVIEWER: SKIP TO Q7]
2. Now what about [CHILD's OTHER PARENT]. What's their first name? I'll include them too. Does [OTHER PARENT] live with you?
 - a. [IF LIVING TOGETHER] Are you two married?
 - b. [IF NOT LIVING TOGETHER] Where does [OTHER PARENT] live—in the same state, or out of state?

Now let's map out this tree a little more. Tell me about any children you have who don't live with you, starting again with the youngest.

3. What's his/her first name? How old is [CHILD]?
4. And [CHILD's OTHER PARENT]. What's their first name? I'll include them too, over here.
5. Were you two ever married? [IF MARRIED] Are you now legally divorced or separated?
6. Does [CHILD] live with [OTHER PARENT]?
7. Now let's add anyone else (for example, relatives or roommates) whom live with you.

C. Participation in [NAME OF STATE PROGRAM]

Let's first talk a little about your participation in [NAME OF STATE SNAP PROGRAM].

1. About when did you start receiving [NAME OF STATE SNAP PROGRAM]?
2. About how much do you get in [NAME OF STATE SNAP PROGRAM] benefits each month?

D. Child support arrangements

Now I'd like to turn to your child support arrangements for [CHILD/REN]—what you pay/receive and how that is working out for you.

1. Do you have an open child support case that is handled by the child support agency?
 - a. [IF MORE THAN ONE CHILD] Which children are part of that case?
 - b. Any other open child support cases? For which children?
2. Did [CUSTODIAL PARENT] open the child support case(s) because it was required in order to get [NAME OF STATE SNAP PROGRAM] or other types of assistance—for example, Temporary Assistance for Needy Families (TANF), Medicaid, or subsidized child care? Tell me more about that.
3. [For CUSTODIAL PARENT] Do you have any children for whom you pay child support? [IF YES] I'll make a note of that, but let's focus on your child support arrangement for [CHILD/REN] who live with you.

4. How much is [NONCUSTODIAL PARENT] supposed to pay every month in child support (for child/ren included in this case)? How much do you typically pay/get? Is that on a regular basis?
 - a. Does all the child support paid go directly to [CUSTODIAL PARENT], or does some go to the welfare agency? [IF BOTH] About how much goes to the welfare agency? How do you feel about that?
5. Lots of parents who owe child support fall behind on their child support payments. What has your experience been? Is [NONCUSTODIAL PARENT] up to date on child support payments? Tell me more about this.
6. [IF HAS OPEN CASE BUT NO ORDER] For the open child support case that doesn't yet have a support order established, what is happening with that case?
7. [If NO CHILD SUPPORT CASE] Are there any particular reasons why a case hasn't been opened with the child support system for [CHILD/REN].
8. Does [NONCUSTODIAL PARENT] provide any type of informal support? Tell me more about that.
9. How do you feel about providing/getting cash or other types of support directly to/from [OTHER PARENT] versus having the child support agency collect the financial support on your behalf? What has your experience been?
10. Are there any reasons why you think it is better to go through the formal child support system instead of providing support directly (that is, outside of the system) to the [OTHER PARENT/CHILD]?

E. Child support cooperation requirement experiences

[INTERVIEWER: This section is for respondents in states that currently have a cooperation requirement IN SNAP. for respondents in states that are considering implementing a cooperation requirement, skip to section F.]

As I mentioned, this study is particularly interested in your experiences with the requirement to cooperate with the child support system in order to receive [NAME OF STATE SNAP PROGRAM] benefits.

1. I want you to take a minute and think about your overall experience with the child support requirement in [NAME OF STATE SNAP PROGRAM]. Tell me about your experience.
2. When did you first learn that you had to cooperate with the child support agency to get [NAME OF STATE SNAP PROGRAM]? [IF LEARNED BEFORE SNAP APPLICATION] How did knowing about this requirement affect your decision to apply for [NAME OF STATE SNAP PROGRAM] (for example, lead them to put off applying for benefits)?
3. Take me through the [NAME OF STATE SNAP PROGRAM] application/recertification steps that you went through, and when in the process you were informed about the requirement.
4. [IF LEARNED AT POINT OF APPLICATION] If you had known about this requirement before you applied for [NAME OF STATE SNAP PROGRAM], would you have put off applying or done anything differently? Tell me more about that.
5. What, if anything, about the requirement didn't make sense to you or concerned you?

6. Now I want to hear more about what happened after you were told about the requirement by [NAME OF STATE SNAP PROGRAM] and the child support agency got involved. Tell me all about what that was like and what you had to do—break it down for me if you can.
7. What did you have to do to meet the cooperation requirement? What information did you have to provide? [IF NONCUSTODIAL PARENT HAS ARREARAGES] How was the issue of the back child support you mentioned previously dealt with?
8. Are you aware that there are some circumstances for which people may be excused from the requirement to cooperate with the child support program? This is sometimes referred to as a good cause exemption. Tell me about how you heard about this exemption and what you know about it.
9. Did you ever try to get a good cause exemption? [IF YES] Please tell me about your experience and what happened. [IF NO] Did you ever consider trying to get this exemption? Why did you decide not to apply for one?
10. Have your [NAME OF STATE SNAP PROGRAM] benefits ever been cut because you did not meet the child support cooperation requirement? [If YES] Tell me all about your experience with having the amount of your assistance reduced for this reason.

F. Economic stability and well-being

Now that we've talked specifically about child support and [NAME OF STATE SNAP PROGRAM], I want to hear more generally about your financial situation.

1. In general, how would you describe your financial circumstances?
 - a. Would you say that you have enough to make ends meet?
 - b. Would you describe your financial situation as stable right now? Why or why not?
2. How are things going for you in terms of your own employment situation? You mentioned at the very beginning of our conversation that you were employed/unemployed [INTERVIEWER: RECAP WHAT HAS ALREADY BEEN COVERED REGARDING EMPLOYMENT].
3. [IF RESPONDENT HAS A FORMAL CHILD SUPPORT ORDER] How does the child support you provide/receive affect your (and your family's) financial condition?
4. Do you receive any other assistance from the government?

G. Effect of cooperation requirement on relationships

1. In general, how would you describe your relationship with [OTHER PARENT]?
2. What difference, if any, has being involved in the formal child support system had on your relationship with the [OTHER PARENT]? Tell me more about that.
3. What difference, if any, has being involved in the formal child support system had on your relationship with your [CHILD/REN]?

H. Participant views on child support requirement

1. [IN STATES THAT ARE CONSIDERING A REQUIREMENT, SKIP TO Q.H5] Overall, what do you think about the child support cooperation requirement?
2. What concerns, if any, do you have about it?
3. Is there anything about the cooperation requirement process—what you had to do and when you had to do it—that you think worked well or did not work well?
4. What are some things you wish the [NAME OF STATE SNAP PROGRAM] agency or the child support agency would have done differently? Why?

[IN STATES THAT ARE CONSIDERING A REQUIREMENT] As I mentioned in the beginning of our conversation, we are interested in talking with people who are currently receiving [NAME OF STATE SNAP PROGRAM] but live in states like [STATE] that don't have a child support cooperation requirement. I'd like to hear about what you think about this requirement and what you think it might be like if there was one in [STATE].

5. Overall, what do you think about the child support cooperation requirement?
6. How do you/would you feel about having a cooperation requirement for both noncustodial parents and custodial parents? How about for relatives—like a grandparent—who are the primary caretakers of some kids in the family when the parents can't take care of them?
7. Do you think there are/would be differences between how custodial parents, relatives who are caretakers, and noncustodial parents might respond to this requirement? How so?
8. What do you think would happen to you and your family if this requirement was put in place?
9. More generally, how do you think people will likely react to a requirement like this?

I. Conclusion

1. What is your overall opinion of the child support program?
2. What is your overall opinion of the [NAME OF STATE SNAP PROGRAM] program?
3. Is there anything else you'd like to tell me before we finish? Is there anything you think I've missed or that I should know?

Thank you for your time. Here is my contact information should you have any additional questions or concerns about the study.

[INTERVIEWER: PROVIDE RESPONDENT WRITTEN COPY OF YOUR CONTACT INFORMATION, INCLUDING NAME, TITLE, ORGANIZATION, PHONE, EMAIL ADDRESS]

Privacy Act Statement

Authority: This information is being collected under the authority of Section 9 of the Food and Nutrition Act of 2008, as amended, (7 U.S.C. 2018). Disclosure of the information is voluntary.

Purpose: The information is being collected to evaluate Child Support Cooperation Requirements in United States Department of Agriculture (USDA) Supplemental Nutrition Assistance Program (SNAP).

Routine Use: The information may be shared with SNAP contract researchers and USDA SNAP research and administrative staff.

Disclosure: Disclosure of the information is voluntary. If all or any part of the information is not provided, interviews may not be admissible in data sets.

The Systems of Records Notices relevant to this collection are FNS-8 FNS Studies and Reports located at <https://www.govinfo.gov/content/pkg/FR-1991-04-25/pdf/FR-1991-04-25.pdf> and FNS-10 Persons Doing Business with the Food and Nutrition Service (FNS) located at <https://www.federalregister.gov/documents/2000/03/31/00-8005/privacy-act-proposed-new-system-of-records>.