ACF Behavioral Health Survey

Formative Data Collections for Program Support

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Supporting Statement Part B

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Submitted By: Immediate Office of the Assistant Secretary Administration for Children and Families U.S. Department of Health and Human Services

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Overview of Study Objectives

The objectives for this information collection are to:

- 1. Determine how ACF can better support parents, youth, and caregivers with relevant behavioral health information and resources
- 2. Assess parent, caregiver, and youth interest in planned behavioral health training for parents and caregivers, resources, and information.
- 3. Determine the specific behavioral health topics, age groups of children, and special population considerations that youth, parents, and caregivers want information and resources on.
- 4. Use information to identify and inform opportunities for collaboration across departments and agencies to fill gaps in desired information and resources.

1. Respondent Universe and Sampling Methods

Target Population

The survey will aim to collect information from approximately 500 total respondents, including 250 parents and kinship/relative caregivers and 250 youth. The survey will be offered in English and Spanish to provide two options for accessibility. The sampling frame will include parents and caregivers subscribed to ACF program office email newsletters and listservs; parents, caregivers, and youth reached through ACF social media channels; parents, caregivers, and youth served by ACF grantees and partner organizations; and parents, caregivers, and youth that ACF has previously worked with through roundtables and other forums and can directly contact.

The team will use non-probability, convenience sampling and will send the survey to each of the four distribution channels outlined above and allow individuals to self-select into participation. Because survey participants will determine their own participation, the resulting sample may not be representative of the overall ACF beneficiary population or youth, parents, and caregivers more broadly. Instead, the survey will target specific listservs, newsletters, and partner organizations to achieve racial, ethnic, gender, geographic, and linguistic diversity among respondents. If adequate diversity is not reached through the initial 500 respondents, the survey will remain open to collect additional responses.

Sampling

The survey respondents will be sampled using non-probability, convenience sampling and will self-select into participation. The team selected a non-probability sampling method because data on the total number of youths, parents, and caregivers that are served by any ACF service is available only on a state-by-state basis. To ensure representativeness of the entire sample, ACF would need access to the number of unique individuals receiving ACF services, and this data is not readily available at this time. Additionally, to provide resources that benefit the greatest number of people, the survey aims to collect data reflecting multiple forms of diversity (e.g., racial, ethnic, gender, geographic, linguistic). Non-probability sampling will allow the team to intentionally design a sampling frame that includes adequate diversity to support qualitative idea generation rather than quantitative representativeness.

Appropriateness of Study Design and Methods for Planned Uses

The data collected through the survey will provide ACF with information from the desired end users for ACF's webpage and mental health trainings. The survey data is not intended to be representative of the entire population. Instead, the team is seeking to maximize the diversity of voices represented in the survey to best develop resources and information in response to user needs. This information is not intended to be used as the principal basis for public policy decisions and is not expected to meet the threshold of influential or highly influential scientific information.

2. Procedures for Collection of Information

Data Collection Processes

The survey will be distributed broadly to ACF grantee and stakeholder lists. There will be no mandatory questions, except the first question asking whether the respondent would like to take the survey in English or Spanish and the second question asking whether the respondent is a youth, a parent/caregiver, both a youth and a parent/caregiver, or neither a youth nor a parent/caregiver. The question types will be multiple choice. All respondents will be shown questions related to the behavioral health webpage, while only those who identify themselves as parents/caregivers, including youth who also identify as a parent/caregiver, will be shown questions related to the child mental health webinar.

Data Handling

The behavioral health survey will be administered and analyzed in Qualtrics. To identify potential errors within the survey, the team will pre-test the survey internally. During pre-testing, the team will conduct checks for grammar, language clarity, and technical access across multiple platforms and browsers. If there are errors with the survey once it has been deployed, the team will close the survey and relaunch it once the errors have been corrected. The team will conduct survey quality checks on a weekly basis to identify and address errors.

The survey is fully multiple choice with some questions allowing the option of open-ended responses if the respondent chooses. Therefore, manual data entry by respondents or staff is not required. Responses are both collected and analyzed in Qualtrics. The survey responses in English and Spanish will be combined and analyzed together.

However, to minimize errors to data coding and processing, a member of the team will maintain an updated codebook documenting all variables, including raw variables and any variables computed during analysis. The codebook will also include any decisions related to data coding, cleaning, and analysis.

Data Analysis

Under the umbrella generic for Program Support, information is meant to inform and support ACF activities and the development of resources about behavioral health for ACF beneficiaries. These findings are made public via websites or social media.

The following are some examples of ways in which we may share information resulting from these data collections: informational resources, presentations, infographics, communications, or other documents relevant to the field, such as federal leadership and staff, grantees, local implementing agencies, and/or

T/TA providers. We are requesting information to inform the development of resources for youth, parents, and caregivers, including a webpage and training for parents and caregivers.

The information collected will be used or interpreted in conjunction with two small focus groups (one with youth and another with parents/caregivers) to gather feedback on the landing page of the ACF behavioral health webpage. We will not ask the same question of more than 9 people.

Data Use

The data will not be shared publicly. It will be used to inform planned efforts at ACF related to the development of resources and trainings for ACF beneficiaries related to behavioral health.

3. Methods to Maximize Response Rates and Deal with Nonresponse

Response Rates

The survey is not designed to produce statistically generalizable findings and participation is wholly at the respondent's discretion. Response rates will not be calculated or reported.

NonResponse

As participants will not be randomly sampled and findings are not intended to be representative, non-response bias will not be calculated. Respondent demographics will be documented and reported in written materials associated with the data collection.

4. Test of Procedures or Methods to be Taken

Development of Data Collection Instruments

Instrument and questions were developed to solicit only information that will directly inform planned activities.

5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

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Attachments

Behavioral Health Webpage and Webinar Survey Behavioral Health Webpage and Webinar Survey (Spanish version)