**Appendix E2.1 Massachusetts Participant Survey Specifications**

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OMB Clearance Number: 0584-0680

Expiration Date: 03/31/2026

Rapid Cycle Evaluation of Operational Improvements in SNAP E&T Programs

Participant Survey:

Massachusetts

 2023

**Public Burden Statement**

This information is being collected to assist the Food and Nutrition Service in evaluating operational improvements in Supplemental Nutrition Assistance Program (SNAP) Employment and Training (E&T) programs that aim to improve delivery of services and program outcomes. This is a voluntary collection and FNS will use the information to assess the effectiveness of changes made to the SNAP E&T program. This collection does request any personally identifiable information under the Privacy Act of 1974. 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 0584-0680. The time required to complete this information collection is estimated to average 15 minutes (0.25 hours) 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 for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22306 ATTN: PRA (0584-0680). Do not return the completed form to this 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 operational improvements in Supplemental Nutrition Assistance Program (SNAP) Employment and Training (E&T) programs using rapid cycle evaluation.

**Routine Use:** The information may be shared with SNAP contract researchers and United States Department of Agriculture (USDA) SNAP research and administrative staff.

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

**I. Introduction**

|  |
| --- |
| ALL |
| [SNAP E&T RCE INTERVENTION SITE]IF MODE = CATI, fill: **Hi, my name is [INTERVIEWER NAME]. I work for a company called Mathematica and I am calling on behalf of the U.S. Department of Agriculture, Food and Nutrition Service, or FNS, about an important study.**IF MODE = Web, fill: **the U.S. Department of Agriculture, Food and Nutrition Service (FNS)**IF MODE = CATI, FILL: **FNS** |

**Intro.**

 **CATI ONLY: [Hi, my name is [INTERVIEWER NAME]. I work for a company called Mathematica and I am calling on behalf of the U.S. Department of Agriculture, Food and Nutrition Service, or FNS, about an important study.**

**[SNAP E&T RCE INTERVENTION SITE] is participating in a study that [the U.S. Department of Agriculture, Food and Nutrition Service (FNS) / FNS] is sponsoring. This study will help the agency learn more about ways to improve the Supplemental Nutrition Assistance Program Employment and Training (SNAP E&T) programs for participants. E&T programs are intended to help SNAP participants gain skills and find work.** **[SNAP E&T RCE INTERVENTION SITE] is one of eight sites seeking to understand the impact of changes to SNAP E&T program processes on SNAP participants’ engagement with E&T services. Mathematica is leading this study on behalf of FNS.**

|  |
| --- |
| All |
| [SNAP E&T RCE INTERVENTION SITE] |

**I0. By giving permission to be in the study, you agree to take a short 15 minute survey. The survey asks about barriers to engaging with services and seeking employment, program satisfaction, and reasons for engagement decisions.**

**Here are some other things to know about the study:**

* **The study will use your data for research purposes only.**
* **Study reports will summarize all participants’ findings and will not identify you. None of the reports prepared for this study will include information that identifies you. All confidential information will be stored safely and destroyed at the end of the study.**
* **Taking the survey is completely voluntary. You can skip any question that you don’t want to answer. If you are unsure of how to answer a question, please give the best answer you can, rather than leaving it blank.**
* **Participating in the study has no known risks and will not affect your benefits. Your participation will help us learn about how to improve SNAP E&T programs and services to help SNAP participants gain skills and find work.**
* **You will receive a $30 gift card to thank you for your time completing the survey.**

**WEB ONLY = Please indicate below whether you agree to be in the study. If you have any questions about the study or would like a copy of the above information, please contact Mathematica’s survey director, Kim McDonald, at 855-831-1718 or email her at** **SNAPETsurvey@mathematica-mpr.com****.**

**CATI ONLY = In a moment, I will read a statement for you to provide your consent to participate. If you have any questions about the study or would like a copy of the above information, please contact Mathematica’s survey director, Kim McDonald, at 855-831-1718 or email her at** **SNAPETsurvey@mathematica-mpr.com****.**

🔾 I understand the study description and I **agree** to participate in the study 1

* I **do not** **agree** to participate in the study 2

|  |
| --- |
| PROGRAMMER:If I0 = 2, status non-consent and exit surveyCATI/CAWI HARD CHECK: **AN ANSWER MUST BE PROVIDED FOR THIS QUESTION.**  |

|  |
| --- |
| I0 = 2 |
| IF mode = web, fill “**Your feedback is important. Please give us a call at 855-831-1718**.” |

**NoConsent. Thank you very much for your time. [Your feedback is important. Please give us a call at 855-831-1718.]**

 CODE ONE ONLY

[CATI] ENTER 1 TO CONTINUE 1 CATI SKIP BOX THANKS

|  |
| --- |
| PROGRAMMER SKIP BOX NoConsentIf I0 = 2, status ADAMANT REFUSAL (DialDisp = 39, sms status 1209) and exit survey. Apply refusal loctype and schedule for 2053do not change confirmit status in case of conversion |

|  |
| --- |
| I0 = 1ALL |
|  |

**I1. First, we’d like to verify that we are reaching the correct person. What is your date of birth?**

 | | | / | | | / | | | | |

 MONTH DAY YEAR

 (1-12) (1-31) (1918-2010)

|  |
| --- |
| VALIDATION CHECK:2 of 3 fields at I1 must match records to continue |

|  |
| --- |
| ALL 3 DATE FIELDS (MM/DD/YYYY) MUST BE COMPLETE. ELSE: CATI HARD CHECK: **AN ANSWER MUST BE PROVIDED FOR THIS QUESTION**. CAWi hard check: **an anSwer must be provided to go to the next question. this is to protect your privacy to make sure no one accesses the information provided in the survey.**  |

|  |
| --- |
| IF WEB AND I1\_validation check not passed *(web mode and DOB does not match)* |
|  |

**I1b. Thank you for your time. We need to check our records before continuing. Please contact us at** **855-831-1718 to complete the survey.**

|  |
| --- |
| PROGRAMMER:STATUS 1380 FOR SUP REVIEW and EXIT WEB interviewCONFIRMIT STATUS = INCOMPLETE |

|  |
| --- |
| IF PHONE AND I1\_validation check not passed *(telephone mode and DOB does not match)* |
|  |

**I1c. Thank you for your response. I need to check our records before continuing the interview. Please hold on a moment while I get my supervisor.**

 CATI HARD CHECK: BEFORE PROCEEDING, CONTACT SUPERVISOR FOR VERIFICATION CONFIRMATION

|  |
| --- |
| IF PHONE AND I1\_validation check not passed *(telephone mode and DOB does not match)* AND SUPERVISOR ID PASSED |
|  |

**I1d.** SUPERVISOR: PLEASE VALIDATE THE RESPONDENT IDENTITY USING ADDRESS OR OTHER CONTACT INFORMATION AVAILABLE

CORRECT RESPONDENT 1 GO TO I1f

WRONG RESPONDENT 0 GO TO I1e

|  |
| --- |
| I1d = 0 (wrong respondent) |
|  |

**I1e. Thank you for your response.** **There may be a problem with some of our records. A representative from Mathematica will give you a call to verify our information.**

 What is the best number to reach you?

🞏 The caller does not have a phone number 0

|  |
| --- |
| CATI/CAWI HARD CHECK: **AN ANSWER MUST BE PROVIDED FOR THIS QUESTION**.  |

|  |
| --- |
| I1d = 0 (wrong respondent) |
|  |

**I1h. We need to review and confirm our records before continuing with the interview. Thank you for your help.**

|  |
| --- |
| PROGRAMMER BOX I1d:IF I1d = 0: UPDATE SMS STATUS 1400 FOR locating (wrong respondent) and EXIT interviewconfirmit status = incompleteConfirmit DIALDisp = 40 (Physical/cognitive barrier)EXIT AND pull case from cati by setting loctype = 4 and scheduling the case to the year 2053.reset to blank upon re-entry of the case |

|  |
| --- |
| I1d = 1 (correct respondent) |
|  |

**I1i. Thank you for your response. I will hand the phone back to the interviewer to continue the interview.**

CONTINUE 1 GO TO A1

**A. Employment**

|  |
| --- |
| ALL |
|  |

**A1. The first questions are about current or recent jobs.**

 **Are you currently working at a job for pay, or self-employed?**

Yes 1

No 0

|  |
| --- |
| All |
| FILL MONTH WITH 3 MONTHS PRIOR TO SURVEY |

**A2. Were you working at a job for pay, or self-employed, in [MONTH]?**

Yes 1

No 0

|  |
| --- |
| ALL |
|  |

**A3. Some people have challenges that make it hard to find a new job or keep a current job. First, please think about the challenges you may have had finding or qualifying for a job. Did any of the following make it hard for you to find or keep a job in the last year?**

|  |  |  |
| --- | --- | --- |
|  | No | Yes |
| a. Could not find work or lack of jobs available in the area | 0 | 1 |
| b. Do not have the right schooling | 0 | 1 |
| c. Do not have the right job search skills or experience *For example: resume writing, interviewing, or networking* | 0 | 1 |
| d. Have difficulty speaking, reading, and/or writing English | 0 | 1 |

|  |
| --- |
| ALL |
|  |

**A4. Next, consider any circumstances that might have made it hard for you to find or keep a job. Did any of the following make it hard for you to find or keep a job in the last year?**

|  |  |  |
| --- | --- | --- |
|  | No | Yes |
| a. Physical or mental health challenges (including a disability) | 0 | 1 |
| b. Housing problems *For example: homelessness, unstable housing or no regular place to stay, or no affordable housing* | 0 | 1 |
| c. Transportation issues or problems *For example:* *no car or no public transportation available, transportation costs too much, public transportation takes too much time* | 0 | 1 |
| d. Family responsibilities, like caring for children, spouse, or parent | 0 | 1 |

|  |
| --- |
| ALL |
|  |

**A5. Are there any other challenges that made it hard for you to find a new job or keep a current job in the last year?**

Yes 1

No 0

|  |
| --- |
| IF A5 = 1 |
|  |

**A6. What other challenges made it hard for you to find a new job or keep a current job in the last year?**

**B. Intervention Information (Recruitment)**

|  |
| --- |
| IF RA\_STATUS = T1 or T2 |
| FILL SNAP E&T PROGRAM NAME BY SITE |

**B0. Next, we’re going to ask you some questions about communication you might have received about the [SNAP Employment &Training program/E&T PROGRAM NAME], encouraging you to enroll and participate.**

 **If you are now participating in the [SNAP E&T program/E&T PROGRAM NAME], please answer the following questions thinking about the information you received about the program before you joined.**

 *The [SNAP E&T program / E&T PROGRAM NAME] helps SNAP participants gain skills and find work, providing participants access to employment training and support services.*

|  |
| --- |
| PROGRAMMER BOX B0IF T1/T2 AND did not respond, GO TO B1IF T1/T2 AND responded AND Screener\_Complete = 0, GO TO B5IF T1/T2 AND responded AND Screener\_Complete = 1, GO TO B8IF Control\_Text, GO TO B15 |

|  |
| --- |
| IF RA\_STATUS = T1 or T2 AND Responded to Text = No  |
| FILL TIME RANGE BY SITE |

**B1. Our records show that we sent you a text in [DATE(S)] inviting you to learn more about [SNAP E&T program/E&T PROGRAM NAME] services and you did not respond to this message.**

 **Do you remember getting this message?**

Yes 1 GO TO B2

No 0 GO TO B3

|  |
| --- |
| B1 = 1 *(T1/T2, remembers getting message and did not respond)* |
|  |

**B2. Why didn’t you respond to this message?**

 *Select all that apply*

You were too busy to respond 1

You thought it was spam 2

You meant to respond but forgot 3

You didn’t know what to do 4

You already had the information they were sending you 5

You weren’t interested in participating in the program 6

You didn’t think program staff would be available to help you 7

Something else (SPECIFY) 99

|  |
| --- |
| PROGRAMMER BOX B2IF B1 = 1, GO TO B15 (*T1/T2, remembers getting message but did not respond*) |

|  |
| --- |
| B1 = 0 *(T1/T2, does not remember getting message and did not respond)* |
|  |

**B3. The message invited you to learn more about enrolling in employment and training services.**

**Does that sound familiar?**

Yes 1 GO TO B18

No 0 GO TO B4

|  |
| --- |
| B3 = 0 *(T1/T2, does not remember getting message and did not respond)* |
|  |

**B4. [The SNAP E&T program/E&T PROGRAM NAME] sent you a text to XXX-XXX-XXXX. Is that the correct phone number for you?**

Yes 1 GO TO B18

No 0 GO TO B18

|  |
| --- |
| PROGRAMMER BOX B4:IF B3 = 0, GO TO B15 (*T1/T2, does not remember getting message & did not respond*)IF Screener\_Complete = 0, GO TO B5IF Screener\_Complete = 1, GO TO B8 |

|  |
| --- |
| T1/T2 AND RespondText= 1 AND Screener\_Complete = 0 |
| FILL TIME RANGE BY SITE |

**B5. Our records show that after you replied “YES” to our initial text, we sent you a text on [DATE(S)] inviting you to learn more about [SNAP E&T program/E&T PROGRAM NAME] services. This message invited you to answer a few questions online.**

 **Do you remember getting this message?**

Yes 1 GO TO B6

No 0 GO TO B5b

|  |
| --- |
| B5 = 0 |
|  |

**B5b. The message invited you to answer a few questions online related to employment.**

**Does that sound familiar?**

Yes 1 GO TO B6

No 0 GO TO B15

|  |
| --- |
| B5 = 1 OR B5b = 1 |
|  |

**B6. Did you start answering any of the questions online?**

Yes 1 GO TO B7

No 0 GO TO B7

I don’t remember d GO TO B7

|  |
| --- |
| B5 = 1 OR B5b = 1 |
| FILL “finish answering” IF B6 = 1FILL “answer” if B6 = 0 or d |

**B7. Why didn’t you [answer/finish answering] those questions?**

 *Select all that apply*

You were too busy to respond 1

You thought it was spam 2

You meant to answer the questions but forgot 3

You didn’t know how to answer the questions 4

You didn’t understand how the information would be used 5

You weren’t interested in participating in the program 6

You were having difficulty accessing the questions online 7

Something else (SPECIFY) 99

|  |
| --- |
| T1/T2 AND responded AND Screener\_Complete = 1 |
| FILL TIME RANGE BY SITE |

**B8.** **Our records show that after you replied “YES” to our initial text, we sent you a text on [DATE(S)] inviting you to learn more about [****SNAP E&T program/E&T PROGRAM NAME] services. This message invited you to respond to about 6 questions online, which you completed in [DATE].**

 **How much do you agree or disagree with the following statements regarding questions you answered?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree |
| a. The questions were easy to understand | 1 | 2 | 3 | 4 | 5 |
| b. You were able to complete the questions without any difficulties  | 1 | 2 | 3 | 4 | 5 |
| c. You understood why you were being asked to answer these questions | 1 | 2 | 3 | 4 | 5 |
| d. You would have preferred to answer these questions another way (by phone, in person, or something else) | 1 | 2 | 3 | 4 | 5 |
| e. It was clear to you what your next steps were after answering the questions  | 1 | 2 | 3 | 4 | 5 |

|  |
| --- |
| PROGRAMMER BOX B8IF Assessment\_complete = 0, go to b9IF Assessment\_Complete = 1, GO TO B10If ScreenFail = 1 OR Assessment\_Control = 1, GO TO B15 |

|  |
| --- |
| Assessment\_complete = 0 (*Full assessment offered but not taken)* AND MA\_ScreenFail = 0 |
|  |

**B9. After completing the questions online, someone from the [SNAP E&T program/E&T PROGRAM NAME] called you to complete an interview. Our records show that you did not complete this interview.**

 **Why didn’t you complete the interview?**

 *Select all that apply*

You were too busy to talk 1

You thought it was a spam call 2

You meant to call back but forgot 3

You didn’t receive a phone call 4

You tried calling back but were unable to reach the [SNAP E&T program/E&T PROGRAM NAME] 5

You didn’t understand how the interview responses would be used 6

You weren’t interested in participating in the program 7

Something else (SPECIFY) 99

|  |
| --- |
| Assessment\_complete = 1 (*Full assessment offered and taken*) |
| FILL TIME RANGE BY SITE |

**B10. After completing the questions online, someone from DTA’s employment and training team contacted you to complete an interview in [DATE].**

**How much do you agree or disagree with the following statements regarding the telephone interview you completed?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree |
| a. The interview helped you better understand your own needs or goals related to your career and employment | 1 | 2 | 3 | 4 | 5 |
| b. The interview questions were easy for you to understand and answer | 1 | 2 | 3 | 4 | 5 |
| c. It was easy for you to find a time to connect with [SNAP E&T program/E&T PROGRAM NAME] to complete the interview | 1 | 2 | 3 | 4 | 5 |
| d. The interview was a good use of your time | 1 | 2 | 3 | 4 | 5 |
| e. You preferred talking with someone one-on-one more than answering questions online on your own  | 1 | 2 | 3 | 4 | 5 |
| f. It was clear to you what your next steps were after completing the interview | 1 | 2 | 3 | 4 | 5 |

|  |
| --- |
| Assessment\_complete = 1 (*Full assessment offered and taken*) and Work\_ready = NO (referred to barrier reduction services)  |
|  |

**B11.** **After completing your telephone interview, you were referred to an E&T specialist to learn more about available support services. Have you received any support from an E&T specialist?**

Yes 1 GO TO B11a

No 0 GO TO B11a

|  |
| --- |
| Assessment\_complete = 1 (*Full assessment offered and taken*) and Work\_ready = NO (referred to barrier reduction services) |
|  |

**B11a. How much do you agree or disagree with the following statements regarding the referral to an E&T specialist?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree | N/A |
| a. You understood what services you could receive | 1 | 2 | 3 | 4 | 5 |  |
| b. It was clear who you could talk to in order to learn more about services | 1 | 2 | 3 | 4 | 5 |  |
| c. It was easy for you to get in touch with someone at [BARRIER REDUCTION SERVICES] | 1 | 2 | 3 | 4 | 5 | 6 |
| d. It was clear to you what your next steps were to receive services at [BARRIER REDUCTION SERVICES] | 1 | 2 | 3 | 4 | 5 |  |

|  |
| --- |
| PROGRAMMER BOX B11IF Treatment\_Career = 1, GO TO b12 IF Treatment\_Career = 0, GO TO B15IF Work\_Ready = 0, GO TO B18 |

|  |
| --- |
| Treatment\_Career = 1 (warm handoff complete) |
|  |

**B12. After completing your telephone interview, you were referred to the MassHire career center for career planning support. Did you receive information about how to receive services from the career center?**

Yes 1 GO TO B13

No 0 GO TO B18

|  |
| --- |
| B12 = 1  |
|  |

**B13. After receiving information about the MassHire career center, did you take any of the following steps to receive services?**

*Select all that apply*

Spoke with someone at a MassHire career center 1

Attended an orientation at a MassHire career center 2

Signed up for career center services at a MassHire career center 3

[EXCLUSIVE] None of the above 4

Some other step (specify) 99

|  |
| --- |
| Treatment\_Career = 1 (*warm handoff complete) and B12 = 1*  |
|  |

**B14. How much do you agree or disagree with the following statements regarding the referral to the MassHire career center?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree |
| a. You understood what services you could receive at the career center | 1 | 2 | 3 | 4 | 5 |
| b. It was clear to you who you could talk to at the career center to learn more about services | 1 | 2 | 3 | 4 | 5 |
| c. It was easy for you to get in touch with someone at the career center | 1 | 2 | 3 | 4 | 5 |
| d. It was clear to you what your next steps were to receive services at the career center | 1 | 2 | 3 | 4 | 5 |

|  |
| --- |
| PROGRAMMER BOX B14IF REFERRED TO CAREER CENTER WEBSITE (at any point in the process) or B3 = 0, GO TO B15ELSE, GO TO B18 |

|  |
| --- |
| IF REFERRED TO CAREER CENTER WEBSITE (at any point in the process) or (B3 = 0 (does not remember text) AND Work\_Ready NE 0)  |
| FILL “After answering the questions online, you were referred to” if ScreenFail = 1FILL “After your telephone interview, you were referred to” if Control\_Assessment = 1ELSE FILL “Have you visited the MassHire career center website”. |

**B15. [[After answering the questions online, you were referred to / After your assessment, you were referred to] the MassHire career center website.] Have you visited the MassHire career center website?**

Yes 1 GO TO B16

No 0 GO TO B17

|  |
| --- |
| IF B15 = 1 (*Went to the website)* |
|  |

**B16. Did you take any of the following steps after looking at the MassHire career center website?**

*Select all that apply*

Reached out to the MassHire career center 1

Spoke with someone at a MassHire career center 2

Signed up for career center services at a MassHire career center 3

[EXCLUSIVE] None of the above 4

Some other step (SPECIFY) 99

|  |
| --- |
| IF B15 = 0 (*Did not go* *to the website)* |
|  |

**B17. Why didn’t you go to the MassHire career center website?**

*Select all that apply*

You had gone to the website before 1

You didn’t think a website would be helpful 2

You didn’t want to look through a website on your own 3

You already had the information you needed 4

You weren’t interested in participating in the program 5

You found it hard to look up the website on your phone 6

Something else (SPECIFY) 99

|  |
| --- |
| ALL |
|  |

**B18. How much do you agree or disagree with the following statement about the steps needed to take to enroll in SNAP E&T services?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree |
| a. You understood what steps you needed to take to enroll in SNAP E&T services | 1 | 2 | 3 | 4 | 5 |

|  |
| --- |
| ALL  |
| PROGRAMMER: Randomize/rotate options 1 and 3 |

**B19. Would you say the SNAP E&T staff provided…**

**Too much support** 1

Just the right amount of support 2

**Not enough support** 3

I did not talk to SNAP E&T staff 4

|  |
| --- |
| IF B19 = 1, 2, 3  |
|  |

**B20. How much do you agree or disagree with the following statement about your interactions with [the SNAP E&T program/E&T PROGRAM NAME]?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree |
| a. I had a positive experience with program staff  | 1 | 2 | 3 | 4 | 5 |

|  |
| --- |
| ALL |
|  |

**B21. What is the best way to contact you or provide you with information about [the SNAP E&T program/E&T PROGRAM NAME]?**

*Select one only*

Text message 1

Email 2

Phone call 3

Mail 4

Some other way (SPECIFY) 99

|  |
| --- |
| Treatment\_Career = 1 (*warm handoff complete*) AND Enrolled = Yes |

**B22. It looks like you were referred to a MassHire career center for E&T services. Thinking back to the steps you took before you started working with your career specialist from MassHire , how much do you agree or disagree with the following statements?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree |
| a. The steps you took to start working with your career specialist took up the right amount of time  | 1 | 2 | 3 | 4 | 5 |
| b. The steps you took to start working with your career specialist felt worth your time | 1 | 2 | 3 | 4 | 5 |

|  |
| --- |
| PROGRAMMER BOX C0IF Referred to Career Center Website (at any point in the process) OR Work\_Ready NE 0 , Go to C1a ELSE, GO TO C2  |

**C. Program Motivation**

|  |
| --- |
| IF REFERRED TO CAREER CENTER WEBSITE (at any point in the process) OR Work\_Ready NE 0  |
|  |

**C1a. Which of the following describes your status with the MassHire career center?**

You are currently receiving services 1 GO TO C2

You are not currently receiving services 2 GO TO C1b

|  |
| --- |
| C1a = 2 |
|  |

**C1b. Have you received any services from the MassHire career center in the last 3 months?**

Yes 1 GO TO C2

No 0 GO TO C2

|  |
| --- |
| ALL  |
| Fill “Besides the MassHire career center, are” / “other” IF C1a = 1 or C1b = 1Fill “Are” IF C1b = 0 OR WORK READY = 0  |

**C2. [Besides the MassHire career center, are / Are] you receiving services from any [other] providers to help you further your education or training or help you prepare for or find a job?**

Yes 1 GO TO C3

No 0

|  |
| --- |
| IF C1a = 1 OR C1b = 1 OR C2 = 1 |
| IF C1a or C1b = 1, fill “services from the MassHire career center”IF C2 = 1 and C1a NE 1 and C1b NE 1, fill “those services”PROGRAMMER: Randomize response options |

**C3. What were the main reasons you decided to receive [services from the MassHire career center/those services]?**

*Select all that apply*

To keep SNAP benefits 1

To receive help with child care 2

To get help with the costs of training or employment 3

To improve your English 4

To gain job search skills 5

To learn about self-employment *(for example, how to work for yourself or start your own business)* 6

To earn a certification/credential/license 7

To gain work experience 8

To get promoted 9

To get a raise 10

To get a job 11

To find a better job 12

Some other reason (SPECIFY) 99

|  |
| --- |
| IF (C1a = 2 AND C1b=0) OR Workready=0 AND C2 = 0  |
| PROGRAMMER: Randomize response optionsIF C1a = 2 AND C1b = 0, fill “services from the MassHire career center”IF WORK READY = 0 and C2 = 0, fill “any services” |

**C4. What were the main reasons you haven’t received [services from the MassHire career center/any services]?**

*Select all that apply*

You lacked information about the program 1

The program didn’t match your needs 2

You had transportation issues or problems

*For example: no car or public transportation available, transportation costs too much, public transportation takes too much time* 3

You didn’t think the program would help you find a job 4

You got a job 5

You had physical or mental health challenges (including a disability) 6

You had housing issues or moved 7

You needed to care for a child or family member 8

Some other reason (SPECIFY) 99

|  |
| --- |
| IF C1b = 1 |
| PROGRAMMER: Randomize response options |

**C5. What were the main reasons you stopped receiving services from the MassHire career center?**

*Select all that apply*

The program didn’t match your needs 1

You didn’t think the program would help you find a job 2

You got a job 3

You had transportation issues or problems

*For example: no car or public transportation available, transportation costs too much, public transportation takes too much time* 4

You had physical or mental health challenges (including a disability) 5

You needed to care for a child or family member 6

You had housing issues or moved 7

You completed the program 8

You did not complete the program, but you no longer needed services 9

Some other reason (SPECIFY) 99

|  |
| --- |
| Treatment\_Career = 1 AND (C1a = 1 OR C1b = 1) *(warm handoff complete, and received services before or currently)* |
|  |

**C6. How much do you agree or disagree with the following statements regarding the MassHire career center services?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree |
| a. The career center has helped you better understand your own needs and goals related to your career and employment | 1 | 2 | 3 | 4 | 5 |
| b. The career center has helped you make progress towards your career | 1 | 2 | 3 | 4 | 5 |
| c. The career center has met your needs  | 1 | 2 | 3 | 4 | 5 |
| d. You would recommend the career center services to someone else  | 1 | 2 | 3 | 4 | 5 |
| e. You are satisfied with the services you’ve received at the career center  | 1 | 2 | 3 | 4 | 5 |

|  |
| --- |
| IF C1a = 1 or C1b = 1*If ever received services* *from MassHire* |
|  |

**C7a. T****he next questions are about the MassHire career center program offerings.**

 **For each category, please rank your satisfaction with the MassHire career center program offerings.**

 **Training location and times**

Very satisfied 1

Satisfied 2

Neither satisfied nor dissatisfied 3

Dissatisfied 4

Very dissatisfied 5

|  |
| --- |
| IF C1a = 1 or C1b = 1*If ever received services* *from MassHire* |
|  |

**C7b. Online training or meeting options**

Very satisfied 1

Satisfied 2

Neither satisfied nor dissatisfied 3

Dissatisfied 4

Very dissatisfied 5

|  |
| --- |
| IF C1a = 1 or C1b = 1*If ever received services* *from MassHire* |
|  |

**C7c. Support with career planning or job placement services**

Very satisfied 1

Satisfied 2

Neither satisfied nor dissatisfied 3

Dissatisfied 4

Very dissatisfied 5

|  |
| --- |
| IF C1a = 1 or C1b = 1*If ever received services* *from MassHire* |
|  |

**C7d. Additional support services, for example transportation assistance or child care**

Very satisfied 1

Satisfied 2

Neither satisfied nor dissatisfied 3

Dissatisfied 4

Very dissatisfied 5

|  |
| --- |
| IF C1a = 1 or C1b = 1*If ever received services* *from MassHire* |
|  |

**C7e. Customer service and availability of MassHire career center staff**

Very satisfied 1

Satisfied 2

Neither satisfied nor dissatisfied 3

Dissatisfied 4

Very dissatisfied 5

|  |
| --- |
| IF C1a = 1 or C1b = 1*If ever received services* *from MassHire* |
|  |

**C7f. The number of MassHire career center staff who look like you or who speak your preferred language**

Very satisfied 1

Satisfied 2

Neither satisfied nor dissatisfied 3

Dissatisfied 4

Very dissatisfied 5

|  |
| --- |
| IF (C1a = 2 and C1b = 0) OR WORK READY = 0*If never received services from MassHire or not work ready* |
| FILL “the MassHire career center” IF C1a = 2 and C1b = 0FILL “employment and training service” IF WORK READY = 0  |

**C8a. The next questions are about [the MassHire career center/employment and training service] program offerings.**

**For each category, please indicate whether the item would affect your decision to participate in [the MassHire career center/employment and training services].**

 **More convenient training location and times**

Much more likely to participate 1

More likely to participate 2

Unlikely to affect your participation 3

|  |
| --- |
| IF (C1a = 2 and C1b = 0) OR WORK READY = 0*If never received services from MassHire or not work ready* |
|  |

**C8b. More online training or meeting options**

Much more likely to participate 1

More likely to participate 2

Unlikely to affect your participation 3

|  |
| --- |
| IF (C1a = 2 and C1b = 0) OR WORK READY = 0*If never received services from MassHire or not work ready* |
|  |

**C8c. More support with career planning or job placement services**

Much more likely to participate 1

More likely to participate 2

Unlikely to affect your participation 3

|  |
| --- |
| IF (C1a = 2 and C1b = 0) OR WORK READY = 0*If never received services from MassHire or not work ready* |
|  |

**C8d. Additional support services, for example transportation assistance or additional child care**

Much more likely to participate 1

More likely to participate 2

Unlikely to affect your participation 3

|  |
| --- |
| IF (C1a = 2 and C1b = 0) OR WORK READY = 0*If never received services from MassHire or not work ready* |
| FILL “MassHire career center” IF C1a = 2 and C1b = 0 |

**C8e. Additional [MassHire career center] staff training and availability**

Much more likely to participate 1

More likely to participate 2

Unlikely to affect your participation 3

|  |
| --- |
| IF (C1a = 2 and C1b = 0) OR WORK READY = 0*If never received services from MassHire or not work ready* |
| FILL “MassHire career center” IF C1a = 2 and C1b = 0 |

**C8f. More [MassHire career center] staff who look like you or who speak your preferred language**

Much more likely to participate 1

More likely to participate 2

Unlikely to affect your participation 3

|  |
| --- |
| ALL |
| FILL “consider” if C1a = 2 OR WORK READY = 0 FILL “continue” if C1a = 1FILL “the MassHire career center” IF C1a = 2 and C1b = 0FILL “employment and training services” IF WORK READY = 0  |

**C9. Are there any other program offerings or features not mentioned that would make you more likely to [consider/continue] participating in [the MassHire career center/employment and training services]?**

Yes 1

No 2

|  |
| --- |
| C9 = 1 |
| Fill “consider” IF C1a = 2 OR WORK READY = 0Fill “continue” IF C1a = 1FILL “the MassHire career center” IF C1a = 2 and C1b = 0FILL “employment and training services” IF WORK READY = 0 |

**C10. Tell us more about the program offerings or services that you feel would make you more likely to [consider/continue] participating in [the MassHire career center/employment and training services].**

**D. Respondent Characteristics**

|  |
| --- |
| IF ANY QUESTIONS ASKED IN SECTION D |
|  |

**D0. Finally, we have some questions about your background.**

|  |
| --- |
| ALL |
|  |

**D1. What is your gender?**

*Select all that apply*

Male 1

Female 2

Non-binary/third gender 3

You use another term (SPECIFY) 99

You do not wish to answer r

|  |
| --- |
| ALL |
|  |

D2. Are you of Hispanic, Latino/a, or Spanish origin?

No, not of Hispanic, Latino/a, or Spanish origin 1

Yes, Hispanic, Latino/a or Spanish origin 2

|  |
| --- |
| ALL |
|  |

**D3. What is your race?**

*Select all that apply*

American Indian or Alaska Native 1

Asian 2

Black or African American 3

Native Hawaiian or Pacific Islander 4

White 5

Other (SPECIFY) 99

|  |
| --- |
| ALL |
|  |

**D4. What is the highest degree or level of school you have completed?**

*Select one only*

Less than 8th grade 1

8th to 12th Grade, no diploma 2

High School Diploma or GED 3

Adult Basic Education (ABE) certificate 4

Some college but no degree 5

Vocational/Technical degree or certificate (for example: cosmetology, automotive repair, Certified Nursing Assistant (CNA)) 6

Business degree/certificate 7

Associate’s degree (AA) 8

Bachelor’s degree or equivalent (for example: BA/BS) 9

Master’s degree (for example: MA/MS) or higher (for example: MD, PhD) 10

Other (SPECIFY) 99

**E. END**

|  |
| --- |
| PROGRAMMER CONTACT INFO FILL BOXIN THIS SECTION [SM FIRST] IS THE SAMPLE MEMBER’S FIRST NAMEFILL **your / you** IF (REPTYPE = 0 OR 1) (SAMPLE MEMBER OR TRANSLATOR)FILL SMFIRSTNAME IF REPTYPE = 2 (PROXY) |

|  |
| --- |
| PAYMENTTYPE OR SMUPDATENAME OR SMUPDATEADDRESS OR SMUPDATEPHONE OR SMUPDATEEMAIL = 1 |

BeginTracking. Thank you for completing the interview today. You’re almost done. Now we need to verify [your/[SM FIRST]’s] contact information.

 CODE ONE ONLY

Continue 1 MAILTO

|  |
| --- |
| PAYMENTTYPE = 1 – 3 AND ((DIALNUMBER = 1, 2, 5, OR 6) OR (DIALNUMBER = 4 AND (FIELDcalls = 0 OR (fieldcalls = 1 AND (CALLINTYPE = 1 OR (CALLINTYPE = 2 and FIELDPAYMENTS = 0)))) OR MODE = CAWI) |

MailTo.

CATI/CAPI

Would you like us to send the payment to you or someone else?

CAWI

Would you like your payment sent to you or someone else?

 CODE ONE ONLY

SEND TO ME 1 SKIP BOX MAILTO

SEND TO SOMEONE ELSE 2 SKIP BOX MAILTO

REFUSED / DO NOT WANT PAYMENT R SKIP BOX ALTCONTACTS

|  |
| --- |
| PROGRAMMER SKIP BOX MAILTOIF PAYMENTTYPE = 1 (MAIL), GO TO PAYADDR.IF PAYMENTTYPE = 2 (EMAIL), GO TO PAYEMAIL.IF PAYMENTTYPE = 3, GO TO MAILOREMAIL. |

|  |
| --- |
| PAYMENTTYPE = 3 AND (MAILTO = 1 OR 2) |

MailorEmail.

CATI/CAPI

Should we send the thank you payment by mail or electronically by email?

CAWI

Should the thank you payment be sent by mail or electronically by email?

 CODE ONE ONLY

Mail 1

Email 2

|  |
| --- |
| PROGRAMMER SKIP BOX MAILOREMAIL.IF MAILOREMAIL = 1 (MAIL), GO TO payaddr.IF MAILOREMAIL = 2 (EMAIL), GO TO PAYEMAIL. |

|  |
| --- |
| (PAYMENTTYPE = 1 OR MAILOREMAIL = 1) and (MAILTO = 1 OR 2) |
| **confirm** IF MAILTO = 1 AND RESPONDENT ADDRESS LOADED; **get** IF MAILTO = 2  |
| if MAILTO = 1 AND RESPONDENT ADDRESS LOADED, FILL NAME AND ADDRESS WITH RESPONDENT INFORMATION; IF MAILTO = 2, DO NOT FILL NAME AND ADDRESS FIELDS |

PayAddr.

CATI/CAPI

INSTRUCTION: CONFIRM spelling of name and ADDRESS WITH RESPONDENT BEFORE CONTINUING

 I would like to [confirm / get] the name and address where we should send the payment.

CAWI

Please [confirm / enter] the name and address where we should send the payment.

 CATI/CAPI: What is the first name?

 (STRING 20)

First Name

CATI/CAPI: Middle initial

 (STRING 1)

Middle Initial

CATI/CAPI: Last name?

 (STRING 30)

Last Name

CATI/CAPI: What is the first line of the payment address?

 (STRING (60))

Street Address Line 1

CATI/CAPI: Is there an apartment or unit number for this address?

 (STRING (60))

Street Address Line 2

CATI/CAPI: Town or city?

 (STRING (20))

City

 CATI/CAPI: State?

 (STRING (2))

State

 CATI/CAPI: And what is the zip code?

 (STRING (10))

ZIP Code

DON’T KNOW d

REFUSED r

|  |
| --- |
| PROGRAMMER SKIP BOX PAYADDR.ALL RESPONSES GO TO SKIP BOX ALTCONTACTS. |

|  |
| --- |
| (PAYMENTTYPE =2 OR MAILOREMAIL = 2) and (mailto = 1 OR 2) |
| IF MAILTO=1 AND respondent EMAIL LOADED, show “confirm”, “THE EMAIL ADDRESS WE HAVE IS:” AND “IS THIS EMAIL ADDRESS CORRECT” and Fill email address with respondent emailif mailto=2 or no respondent email loaded, show “provide me”  |
| **confirm** IF MAILTO = 1 AND RESPONDENTEMAIL LOADED; **provide me** IF MAILTO = 2 |
| **The email address we have is:** AND **Is this email address correct?** IF MAILTO = 1, ELSE NO FILL |
| if MAILTO = 1 FILL EMAIL ADDRESSIF MAILTO = 2, DO NOT FILL EMAIL ADDRESS |

PayEmail.

CATI/CAPI

INSTRUCTION: CONFIRM EMAIL ADDRESS WITH RESPONDENT BEFORE CONTINUING

 I would like to [confirm / get] the email address where we should send the payment.

 [The email address we have is:]
[RESPONDENTEMAILADDR]

 Is this email address correct?

CAWI

Please [confirm / enter] the email address where we should send the payment.

 (STRING 50)

 Email

DON’T KNOW d

REFUSED r

|  |
| --- |
| PROGRAMMER SKIP BOX PAYemail.ALL RESPONSES GO TO SKIP BOX ALTCONTACTS. |

|  |
| --- |
| PROGRAMMER: SKIP BOX ALTCONTACTSIF SMALTCONTACTS = 1, GO TO ALTCONTACT LOOP.IF SMALTCONTACTS = 0, GO TO THANKS AND SET DISP = 13. |