

2022 National Child Abuse Prevention Month Website Survey

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13). The purpose of this information collection is to gather feedback on the National Child Abuse Prevention Month website to enhance future special initiative campaign websites and resources. Public reporting burden for this collection of information is estimated to average 5 minutes per respondent, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The control number for this project is 0970-0401. The control number expires on 6/30/2024. If you have any comments on this collection of information, please contact Lyscha Marcynyszyn, Child Welfare Information Gateway, by e-mail at Lyscha.Marcynyszyn@icf.com.

Please let us know how you are using this year's National Child Abuse Prevention Month (NCAPM) website! Your input will help enhance the NCAPM website and resources to better meet your needs. Your participation in this survey is voluntary, and your responses will be reported anonymously. **This survey is intended for customers who are at least 18 years old.** If you have any questions or require accessibility assistance with this survey, please contact Child Welfare Information Gateway staff by email at info@childwelfare.gov or by telephone at [800.394.3366](tel:800.394.3366). Thank you for helping us help you.

1. Please describe why you are visiting the National Child Abuse Prevention Month (NCAPM) website. Select all that apply.

- ☐ To find resources and outreach tools that I can use to promote awareness of NCAPM.
- ☐ To find resources and information for my work.
- ☐ To find general information on child abuse prevention/for my personal use/for my education.
- ☐ Other (Please describe in the textbox below.) _____

2. Which of the following best describes your background or role?

- ☐ Professional
- ☐ Advocate
- ☐ Student
- ☐ Kinship caregiver
- ☐ Foster youth (current or former)
- ☐ Foster parent
- ☐ Adoptive parent
- ☐ Parent (i.e., biological/birth)

☐ Member of the general public

☐ Other (Please describe in the textbox below.) _____

2a. [If answered *Professional* to Q2] Which of the following best describes your professional background?

- ☐ Prevention/family support services
 - ☐ Child protective services
 - ☐ Foster care services
 - ☐ Adoption services
 - ☐ Youth services
 - ☐ Juvenile justice
 - ☐ Law enforcement
 - ☐ Health/mental health services
 - ☐ Substance use services
 - ☐ Legal/courts (e.g., GAL, CASA, attorney)
 - ☐ Researcher/evaluator/consultant
 - ☐ Early childhood educator (0–5yrs)
 - ☐ Teacher (K–12)
 - ☐ Professor/faculty (higher education)
 - ☐ Media
 - ☐ Other (Please describe in the textbox below.) _____
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2b. [If answered *Professional* to Q2] Which of the following best describes your workplace?

- ☐ Local or county public/private agency
- ☐ State agency

- ☐ Tribal agency/organization
 - ☐ Federal agency
 - ☐ Community-based organization
 - ☐ Faith-based organization
 - ☐ National organization (e.g., nonprofit, advocacy)
 - ☐ Training and technical assistance service provider
 - ☐ Educational institution (early education, K–12, college, university)
 - ☐ Other (Please describe in the textbox below.) _____
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2c. [If answered *Professional* to Q2] Which of the following best describes your position? (Check one.)

- ☐ Frontline worker (e.g., caseworker, direct service worker)
- ☐ Supervisor/manager
- ☐ Director/administrator
- ☐ Training specialist
- ☐ Licensing specialist
- ☐ Outreach/communications coordinator
- ☐ Other (Please describe in the textbox below.) _____

3. Which of the following best describes your involvement in NCAPM campaigns?

- ☐ I am currently leading/will lead a campaign within my organization or agency this year
- ☐ I will be involved in a local campaign in my community

- ☐ I am not aware of any campaigns
- ☐ Other (Please explain in the textbox below.) _____

4. How useful are the information and resources available on the NCAPM website?

- ☐ Very useful (Please explain in the textbox below.) _____
- ☐ Useful (Please explain in the textbox below.) _____
- ☐ Somewhat useful (Please explain in the textbox below.) _____
- ☐ Not useful (Please explain in the textbox below.) _____

5. On a scale of 1 (poor) to 5 (excellent), please rate the following about your experience on the NCAPM website and provide an explanation for your ratings in the space provided.

	1	2	3	4	5	N/A
Ease of finding information on the NCAPM Month website	☐	☐	☐	☐	☐	☐
Ease of sharing information and resources from the NCAPM website	☐	☐	☐	☐	☐	☐
Appeal of the NCAPM website design	☐	☐	☐	☐	☐	☐
Content that matches my needs	☐	☐	☐	☐	☐	☐

5a. Please provide an explanation for your ratings above. _____

6. The following resources and tools are available to help you and your organization/agency to raise awareness about preventing child maltreatment and promoting well-being. Select the resources and tools you and your organization/agency have used or intend to use to raise awareness about preventing child maltreatment and promoting well-being. Check all that apply. Please describe how you have used/intend to use the resources you selected.

- Shareable graphics (e.g., Facebook profile frame and GIFs) _____
- Videos in multimedia gallery _____
- Child maltreatment statistics _____
- Conversation Guides for parents and caregivers _____
- Email signatures _____
- Sample press release _____
- Sample Op-Ed _____
- Sample proclamation _____
- Sample social media posts _____
- Protective Factors and Adverse Childhood Experiences (ACEs) resources _____

7. How have you used or intend to use the resources offered on the NCAPM website? (Select all that apply and please provide details in the textboxes below.)

- ☐ I have not used nor intend to use the resources offered on the NCAPM website.
- ☐ Support public awareness or advocacy efforts for NCAPM _____
- ☐ Support protective capacities of families and communities _____
- ☐ Increase my knowledge or transform my attitudes _____
- ☐ Share with families and/or clients _____
- ☐ Share with professionals or colleagues _____
- ☐ Implement, sustain, or improve programs (e.g., program management, logic model development, program evaluation) _____
- ☐ Share in a formal training environment _____
- ☐ Support practice improvement and/or sustain good practice _____
- ☐ Support policy change and/or sustain good policies _____
- ☐ Conduct research or evaluation _____
- ☐ Grant writing/fundraising _____
- ☐ My own professional development _____
- ☐ Personal use _____
- ☐ Class assignment _____
- ☐ Other (please describe): _____

8. Please rate the extent to which you agree with the following statements.

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
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The NCAPM website provided quality tools and resources to spread the word about the NCAPM campaign.	0	0	0	0	0
The information on the NCAPM website increased my knowledge on how to support the protective capacities of families and communities.	0	0	0	0	0
The information and resources on the NCAPM website increased my knowledge of how communities can tailor prevention efforts to meet their individual needs.	0	0	0	0	0

8a. Please provide an explanation for your ratings above. _____

9. Please indicate with whom you plan to share the information found today. Select all that apply.

- Families or clients
- Community-based service providers
- Staff who report directly to me
- Colleagues
- Friends and family
- I plan to use the information to increase or enhance my own knowledge
- Other (please describe in the textbox below.) _____

10. How did you hear about the NCAPM website this year?

- ☐ Search engine (e.g., Google, Yahoo)
- ☐ Notification (e.g., email, intranet posting) from my local or state agency
- ☐ Linked from another website (Please describe in the textbox below.) _____
- ☐ Conference or presentation
- ☐ Email from the Child Welfare Information Gateway or the Children's Bureau (If the email is known [e.g., E-blast!, E-lert], please describe in the textbox below.) _____
- ☐ Email from another organization (Please describe in the textbox below.) _____
- ☐ Browsing the Child Welfare Information Gateway website
- ☐ Colleague or friend told me about it
- ☐ Social media (e.g., Facebook, Twitter)
- ☐ Hardcopy publication
- ☐ Podcast/webinar
- ☐ Mobile app search
- ☐ Other (Please describe in the textbox below.) _____

11. How likely are you to use the tools from the Spread the Word section of this website (e.g., sample social media posts, graphics, etc.) to help spread awareness for NCAPM in your network or community?

- Very unlikely (*Respond to question 11a; Skip question 11b*)
- Unlikely (*Respond to question 11a; Skip question 11b*)
- Likely
- Very likely
- I'm not sure yet (*Respond to question 11a; Skip question 11b*)
- I'm not familiar with the Spread the Word tools (*Respond to question 11a; Skip question 11b*)

11a. Please provide more information about your response to the question above. _____

11b. [If answered very likely or likely to Q11] Please select all of the ways in which you plan to use the Spread the Word tools to spread awareness of NCAPM.

- Post on Twitter
- Post on Facebook
- Post on Instagram

- Post on LinkedIn
- Update my social media profile picture and/or banners
- Post a link on an organization's website
- Provide information to colleague or child welfare professional
- Provide information in an email newsletter
- Post information on my organization's internal website or intranet
- Other: _____

12. Please share any additional comments or suggestions about the NCAPM website that you may have. _____