Form Approved

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Office of Population Affairs Grantee Satisfaction Survey 2024

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**Office of Population Affairs (OPA)**

**Embryo Adoption Awareness (EAA), Teen Pregnancy Prevention (TPP),**

**Title X Family Planning Services, and Research and Evaluation Grants**

**2024 Annual Grantee Satisfaction Survey**

**Introduction/Consent:**

You have received this survey because your organization has one or more federal awards (grant or cooperative agreement) funded by the Office of Population Affairs (OPA). The purpose of this survey is to assess your satisfaction with OPA grantee support, communications, and resources. We are also interested in your suggestions for how to improve the services, technical assistance (TA) products, and support from OPA and our contractors. OPA plans to use the results of the survey for continuous quality improvement efforts, including more effective customer service and to identify areas for improvement. Below is additional information:

* This survey is voluntary and will not affect your current award or eligibility for or receipt of future services or funding.
* This survey is anonymous (do not put your name or your organization’s name on the survey).
* This survey should take about 20 minutes to complete.
* You can skip any item.
* Results will be reported to OPA in a manner that does not identify an individual or an organization and will be used only for continuous quality improvement.
* OPA may use aggregated results to share with selected stakeholders (e.g., grantees, federal partners, contractors) for knowledge-sharing and improving processes.

You are encouraged to consult with others within your organization as needed to answer the questions, but you should only submit one survey per organization. If you have more than one federal award from OPA, you will see some questions repeated for each grant project. You may stop and start the survey at any time. Once you click the submit button, you cannot revise any responses.

If you have questions about this survey, please email Dr. Jessica Salas-Brooks at OPASupport@norc.org. Thank you for your participation.

1. Is this the organization’s first OPA grant?
	1. Yes
	2. No
	3. Unsure

**OPA GUIDANCE, TRAINING AND TECHNICAL ASSISTANCE**

Project Office Monitoring and Support

1. Please rate your satisfaction with your Project Officer (PO) in the following areas: [PROGRAMMING LOGIC: QUESTION WILL REPEAT FOR EACH GRANT/PROJECT OFFICER]

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Very satisfied | Satisfied | Neutral | Dissatisfied | Very dissatisfied | Not applicable |
| 1. Guidance on grant program expectations
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Guidance on programmatic reporting
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Frequency of communication (e.g., email, phone calls)
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Promptness in responding to inquiries
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Clarity of communication
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Consistency in messaging
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Oversight and monitoring of your grant project
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Adequacy of TA resource(s) and support(s) to help your grant project succeed (e.g., connecting to other grantees, sharing TA)
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Level of professionalism (e.g., courteousness, responsiveness, respectfulness)
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Overall performance
 | **○** | **○** | **○** | **○** | **○** | **○** |

1. Please describe how the support and technical assistance you have received from OPA POs has affected your project.

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|  |

1. Use this space to provide any suggestions for improving support from OPA POs.

|  |
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|  |

1. How often do you typically speak with your PO(s)?
	1. Biweekly
	2. Monthly
	3. Every other month
	4. Quarterly
	5. Do not have recurring meetings scheduled
2. Would you like more or less communication from your PO(s)?
	1. More communication
	2. Stay the same
	3. Less communication
3. What type of PO communication is most helpful?
	1. Emails
	2. 1:1 calls
	3. Office hours

Programmatic Guidance and PO Feedback

1. Please consider written communications and resources that you have received from OPA and rate your level of agreement with the statements below: [PROGRAMMING LOGIC: QUESTION WILL REPEAT FOR EACH GRANT.]

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Progress Reports Guidance** | Strongly agree | Agree | Neutral | Disagree | Strongly disagree | Not applicable |
| 1. The guidance was clear and easy to understand.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. The guidance was provided in sufficient time.
 | **○** | **○** | **○** | **○** | **○** | **○** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **PO Feedback on Progress Reports** | Strongly agree | Agree | Neutral | Disagree | Strongly disagree | Not applicable |
| 1. The feedback was clear and easy to understand.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. The feedback was helpful in identifying areas of continuous improvement for our grant.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. The feedback was consistent with the expectations outlined in the Notice of Funding Opportunity(ies) (NOFO)
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. The feedback received was timely.
 | **○** | **○** | **○** | **○** | **○** | **○** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **OPA Non-Competing Continuation Application (NCC) Guidance** | Strongly agree | Agree | Neutral | Disagree | Strongly disagree | Not applicable |
| 1. The guidance was clear and easy to understand.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. The guidance was timely.
 | **○** | **○** | **○** | **○** | **○** | **○** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **PO Feedback on Non-Competing Continuation (NCC) Applications**  | Strongly agree | Agree | Neutral | Disagree | Strongly disagree | Not applicable |
| 1. The feedback was clear and easy to understand.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. The feedback was helpful in identifying areas of continuous quality improvement for our grant.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. The feedback was consistent with the expectations outlined in the Notice of Funding Opportunity(ies) (NOFO)
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. The feedback received was timely.
 | **○** | **○** | **○** | **○** | **○** | **○** |

1. Use this space to provide any suggestions for improving OPA programmatic guidance and/or PO feedback on reports and NCC applications.

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Program and Site Reviews

[PROGRAMMING NOTE: THE SECTION BELOW WILL ONLY SHOW FOR TITLE X, FY 20 TPP Tier 2 Phase 2, AND TPP GRANTEES. FOR TITLE X PROGRAMS, THE PHRASE “OPA Program Review (In-person or virtual)” will be used instead of “OPA site visit” for these questions.]

1. Did your organization participate in a PO monitoring site visit within your project period? This includes Title X Program Reviews.
	1. Yes à GO TO 11
	2. No à GO TO 12

[PROGRAMMING NOTE: IF Q10=YES, RESPONDENTS WILL SEE TABLE BELOW. OTHERWISE, THEY WILL CONTINUE TO QUESTION 12.]

1. Please rate your level of agreement with each statement shown. [PROGRAMMING NOTE: THIS QUESTION WILL ONLY BE DISPLAYED FOR TPP GRANTEES, FY20 TPP Tier 2 Phase 2, AND/OR TITLE X GRANTEES]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **OPA Site Visit (TPP) or OPA Program Review (Title X)**  | Strongly agree | Agree | Neutral | Disagree | Strongly disagree |
| 1. The notice provided for the site visit allowed adequate time to prepare.
 | **○** | **○** | **○** | **○** | **○** |
| 1. The TA and support provided during the site visit were helpful.
 | **○** | **○** | **○** | **○** | **○** |
| 1. OPA recommendations were consistent with what was discussed during the site visit.
 | **○** | **○** | **○** | **○** | **○** |
| 1. OPA recommendations resulting from the site visit were clear and easy to understand.
 | **○** | **○** | **○** | **○** | **○** |
| 1. OPA recommendations following the site visit were helpful for the continuous quality improvement of our grant.
 | **○** | **○** | **○** | **○** | **○** |

**Other OPA Staff/TA Contractor/****OPA-funded National Training Centers Support:** The following questions will ask you to rate your satisfaction with the training, technical assistance, and support received from other OPA staff (i.e., Evaluation Team, Connect.gov), contractors and training centers.

1. From the list below, please select the entities from which you have received individual support.
	1. OPA TPP Evaluation Technical Assistance (Mathematica)
	2. Reproductive Health National Training Center (RHNTC)
	3. Clinical Training Center for Sexual and Reproductive Health (CTC-SRH) (Formerly National Clinical Training Center for Family Planning (NCTCFP) Support)
	4. GAM (Grants and Acquisitions Management) Office and Specialist (e.g., support on a financial or budget question)
2. Please rate your satisfaction with overall support from:

[PROGRAMMING NOTE: QUALIFYING QUESTION: PIPE RESPONSES INTO MATRIX QUESTION.]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very satisfied | Satisfied | Neutral | Dissatisfied | Very dissatisfied |
| 1. OPA TPP Evaluation Technical Assistance (Mathematica)
 | **○** | **○** | **○** | **○** | **○** |
| 1. Reproductive Health National Training Center (RHNTC)
 | **○** | **○** | **○** | **○** | **○** |
| 1. CTC-SRH (formerly NCTCFP)
 | **○** | **○** | **○** | **○** | **○** |
| 1. GAM (Grants and Acquisitions Management) Office and Specialist (e.g., support on a financial or budget question)
 | **○** | **○** | **○** | **○** | **○** |

1. Overall, how satisfied are you with the ***individual*** ***support*** you’ve received from OPA (inclusive of all OPA TA contractors/training centers and GAM) for your project?
	1. Very satisfied
	2. Satisfied
	3. Not sure
	4. Dissatisfied
	5. Very dissatisfied
2. As it pertains to the support received from OPA TPP Evaluation Technical Assistance (Mathematica), please rate your level of agreement with each statement shown.

[PROGRAMMING NOTE: THIS QUESTION IS ONLY DISPLAYED IF OPTION A IS SELECTED OR FOR TPP GRANTEES]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **OPA TPP Evaluation Technical Assistance (Mathematica)**  | Strongly agree | Agree | Neutral | Disagree | Strongly disagree |
| 1. My evaluation TA liaison is knowledgeable
 | **○** | **○** | **○** | **○** | **○** |
| 1. My evaluation TA liaison provides timely and helpful support
 | **○** | **○** | **○** | **○** | **○** |
| 1. The resources shared with me by my evaluation TA liaison are credible
 | **○** | **○** | **○** | **○** | **○** |
| 1. Evaluation TA resources are easy to understand
 | **○** | **○** | **○** | **○** | **○** |

1. Use this space to provide any suggestions for improving individual support from OPA staff, TA contractors, OPA-funded National Training Centers Support, and GAM.

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1. From the list below, please select the training or technical support you received or participated in the last year.
	1. OPA Webinars
	2. OPA Evaluation Technical Assistance Opportunities (Mathematica) (e.g., webinars, written resources such as tip sheets, templates, and research briefs, peer learning groups etc.)
	3. OPA Virtual Conferences and/or Trainings
	4. RHNTC webinars, resources, and group TA
	5. CTC-SRH (formerly NCTCFP) webinars
2. Of those you participated in, please indicate how satisfied you were with the support you received?

 [PROGRAMMING NOTE: QUESTION WILL REPEAT FOR EACH GRANT.]

[DISPLAY ONLY THOSE ITEMS SELECTED IN QUESTION 17.]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very satisfied | Satisfied | Not Sure | Dissatisfied | Very dissatisfied |
| 1. OPA Webinars
 | **○** | **○** | **○** | **○** | **○** |
| 1. OPA Evaluation Technical Assistance Opportunities (Mathematica) (e.g., webinars, resources, etc.)
 | **○** | **○** | **○** | **○** | **○** |
| 1. OPA Virtual Conferences and/or Trainings
 | **○** | **○** | **○** | **○** | **○** |
| 1. RHNTC webinars, resources, and group TA
 | **○** | **○** | **○** | **○** | **○** |
| 1. CTC-SRH (formerly NCTCFP) webinars
 | **○** | **○** | **○** | **○** | **○** |

1. Use this space to provide any suggestions for improving other types of support from OPA-funded contractors (Mathematica, ICF, etc.) and OPA-funded National Training Centers here (RHNTC, CTC-SRH (formerly NCTCFP), etc.).

|  |
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OPA Training and TA Products

1. How do you hear about OPA and OPA-funded National Training Centers training and TA product(s)? Select all that apply.
2. Connect.gov (formerly known as MAX.gov) (e.g., through alerts and announcements on my grantee page)
3. Grantee listservs *(TPP Tier 1, TPP Tier 2 RI, TPP 2 Hubs, Title X only)*
4. Searching the OPA website (opa.hhs.gov)
5. OPA Grantee Digest (Weekly e-newsletter on Tuesdays)
6. OPA LinkedIn
7. RHNTC Newsletter
8. CTC-SRH (formerly NCTCFP) Newsletter
9. Project Officer
10. Program TA Liaison
11. Evaluation TA Liaison
12. Other (please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)
13. What is your preferred method for learning about events from OPA and our partners? Select all that apply.
	1. Connect.gov (formerly known as MAX.gov) (e.g., through alerts and announcements on my grantee page)
	2. Grantee Cohort listservs *(TPP Tier 1, TPP Networks, Title X only)*
	3. Searching the OPA website (opa.hhs.gov)
	4. OPA Grantee Digest (Weekly e-newsletter on Tuesdays)
	5. OPA LinkedIn
	6. RHNTC Newsletter
	7. CTC-SRH (formerly NCTCFP) Newsletter
	8. Project Officer
	9. Program TA Liaison
	10. Evaluation TA Liaison
	11. Other (please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)
14. What is your preference for format or modality for learning or resources? Select all that apply.
15. Checklists
16. e-Learning modules
17. Individual TA
18. Peer Learning Group
19. Printable pdfs
20. In-person meetings/conferences
21. Templates
22. Tip sheets
23. Toolkits
24. Videos
25. Webinars
26. Drop-in Active Learning Sessions
27. Factsheets
28. Interactive Case Studies
29. Job aids
30. Podcasts
31. Other (please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

**WEB-BASED COMMUNICATIONS/RESOURCES**

Connect.gov (formerly known as MAX.gov)

[PROGRAMMING NOTE: THIS SECTION WILL BE SKIPPED FOR EAA RECIPIENTS AND RESEARCH GRANTEES – EXCEPT FY20 TPP Tier 2 Phase 2 Grant- IN THE ONLINE SURVEY.]

1. Please indicate the extent to which you agree with these statements about the components of Connect.gov (formerly known as MAX.gov) (click here to view). [PROGRAMMING NOTE: QUESTION WILL REPEAT FOR EACH GRANT.]

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Connect.gov (formerly known as MAX.gov)** | Strongly agree | Agree | Neutral | Disagree | Strongly disagree | Have not used/done yet |
| 1. Log-in procedures are clear.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Visual design/user experience is pleasing.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Files upload smoothly.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Connect.gov (formerly known as MAX.gov) provides useful information.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. The site is easy to use.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. I understand when to use this system.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Technical issues are addressed in a timely manner.
 |  |  |  |  |  |  |
| 1. Technical issues are sufficiently addressed.
 |  |  |  |  |  |  |

1. How satisfied are you with Connect.gov (formerly known as MAX.gov)?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Satisfaction with Connect.gov (formerly known as MAX.gov)** | Verysatisfied | Satisfied | Not sure | Dissatisfied | Very dissatisfied | Not applicable |
|  | m | m | m | m | m | m |

1. Have you received support from OPA Staff for any technical issues or questions encountered while using Connect.gov (formerly known as MAX.gov)?
	1. Yes
	2. No
2. [If YES to #25] Did OPA Staff address your questions sufficiently and in a timely manner?
	1. Yes
	2. No
	3. If Applicable, Provide Additional Information Below
3. Use this space to provide any suggestions for Connect.gov (formerly known as MAX.gov).

|  |
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TPP Performance Measures/Title X Family Planning Annual Report (FPAR)/Title X Clinic Locator Database

The next set of items is about your project’s perceptions of the Performance Measures (PMs).

***For TPP:***

1. Please indicate the extent to which you agree with these statements about the TPP Performance Measures (PMs), PM submission process, and support you receive to submit the PMs.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **TPP Performance Measures (PM) Attributes** | Strongly agree | Agree | Neutral | Disagree | Strongly disagree | Have not used/done yet |
| 1. The PM submission process is easy.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Sufficient support (one-on-one, webinars, published resources, etc.) is provided to submit and/or update the PMs.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. PM reports are useful for our project’s Continuous Quality Improvement (CQI) process.
 | **○** | **○** | **○** | **○** | **○** | **○** |

1. How satisfied are you with the TPP Performance Measures (PM) website and support?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Very satisfied | Satisfied | Neutral | Dissatisfied | Very dissatisfied | Not applicable |
| 1. TPP PM website
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. TPP PM technical support offered via email or phone
 | **○** | **○** | **○** | **○** | **○** | **○** |

***For Title X:***

1. The next set of items is about your project’s perceptions of the Family Annual Reporting (FPAR).

Please indicate the next to which you agree with these statements about the Family Planning Annual Report (FPAR).

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Family Planning Annual Report (FPAR) Attributes** | Strongly agree | Agree | Neutral | Disagree | Strongly disagree | Have not used/done yet |
| 1. The FPAR submission process is easy.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Sufficient support (one-on-one, webinars, published resources, etc.) provided to submit and/or update information for FPAR
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. FPARs are useful for our project’s Continuous Quality Improvement (CQI) process.
 | **○** | **○** | **○** | **○** | **○** | **○** |

1. How satisfied are you with the FPAR Data System and support?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Very satisfied | Satisfied | Neutral | Dissatisfied | Very dissatisfied | Not applicable |
| 1. FPAR Data System
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. FPAR Data System **Help Desk**
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. **FPAR Roll-out/2022 Data Submission (submitted early 2023)**
 | **○** | **○** | **○** | **○** | **○** | **○** |

***For Title X:***

1. The next set of items is about your project’s experience with the Title X Clinic Locator Database.

Please indicate the extent to which you agree with these statements about the Clinic Locator Database. (<https://opa-fpclinicdb.hhs.gov/>)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Clinic Locator Database Attributes** | Strongly agree | Agree | Neutral | Disagree | Strongly disagree | Have not used/done yet |
| 1. I can easily make changes (adding, removing, updating entries) in the Clinic Locator Database.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Sufficient support (one-on-one, webinars, published resources, etc.,) is provided by OPA for the Clinic Locator Database.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. I can obtain accurate information from the Clinic Locator Database for reporting purposes.
 | **○** | **○** | **○** | **○** | **○** | **○** |

1. How satisfied are you with the Title X Clinic Locator Database and the technical assistance provided?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Very satisfied | Satisfied | Neutral | Dissatisfied | Very dissatisfied | Not applicable |
| 1. Clinic Locator Database as a resource to promote awareness of grantee Title X services.
 | **○** | **○** | **○** | **○** | **○** | **○** |
| 1. Clinic Locator Database technical assistance provided with the OPA support mailbox (OPAsupport@icf.com)
 | **○** | **○** | **○** | **○** | **○** | **○** |

**Overall Digital and Electronic Communication Tools (e.g. web, e-newsletters, and social media) Feedback**

OPA Website

The next set of questions is about the OPA website: opa.hhs.gov.

1. How often have you used the OPA website in the past year?
2. Frequently/often
3. Sometimes
4. Occasionally
5. Almost never à SKIP TO QUESTION 36
6. Never à SKIP TO QUESTION 36
7. Please indicate how useful resources in the following sections of the OPA website have been for your project in the past year. (Check “not used” if you have not used the resources.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Usefulness of the OPA Website Resources** | Very useful | Useful | Somewhat useful | Not at all useful | Not used |
| 1. Adolescent Development: Information on adolescent health topics
 | **○** | **○** | **○** | **○** | **○** |
| 1. Reproductive Health: Information on reproductive health topics
 | **○** | **○** | **○** | **○** | **○** |
| 1. Evaluation and Research: Information on expanding evidence and advancing best practices
 | **○** | **○** | **○** | **○** | **○** |
| 1. Grant Programs: Information on OPA grant programs
 | **○** | **○** | **○** | **○** | **○** |

[PROGRAMMING NOTE: IF QUESTION 34=1, 2, OR 3, SKIP TO QUESTION 35.]

1. Please let us know why you rarely use the OPA website.

|  |
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|  |

The next set of questions is about OPA’s weekly Grantee Digest email:

Grantee Digest (weekly)

1. How often do you read the OPA *Grantee Digest* email that is sent each Tuesday?
2. Frequently/often
3. Sometimes
4. Occasionally
5. Almost never à SKIP TO QUESTION 39
6. Never (SKIP TO QUESTION 39)
7. Please rate your satisfaction with the information and resources provided in the *Grantee Digest*, which is emailed to grantees every Tuesday*.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very satisfied | Satisfied | Neutral | Dissatisfied | Very dissatisfied |
| 1. Organization of information
 | **○** | **○** | **○** | **○** | **○** |
| 1. Sufficiency of detail to meet your program needs
 | **○** | **○** | **○** | **○** | **○** |
| 1. Relevance to your areas of need
 | **○** | **○** | **○** | **○** | **○** |
| 1. Timeliness of information (e.g., “Enough notice of events and activities to participate in terms of interest.)
 | **○** | **○** | **○** | **○** | **○** |
| 1. Comprehensiveness in addressing the scope of issues that you face
 | **○** | **○** | **○** | **○** | **○** |

[PROGRAMMING NOTE: IF QUESTION 37=1, 2, OR 3, SKIP TO QUESTION 38.]

1. Please let us know why you rarely read the OPA *Grantee Digest* sent each Tuesday.

|  |
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The next set of questions is about the *OPA Bulletin*:

OPA Bulletin

1. How often do you read the *OPA Bulletin* (the OPA e-newsletter that comes out every other month)?
2. Frequently/often
3. Sometimes
4. Occasionally
5. Almost never à SKIP TO QUESTION 42
6. Never (SKIP TO QUESTION 42)
7. Please rate your satisfaction with the information and resources provided in the *OPA Bulletin*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very satisfied | Satisfied | Neutral | Dissatisfied | Very dissatisfied |
| 1. Organization of information
 | **○** | **○** | **○** | **○** | **○** |
| 1. Sufficiency of detail to meet your program needs
 | **○** | **○** | **○** | **○** | **○** |
| 1. Relevance to your areas of need
 | **○** | **○** | **○** | **○** | **○** |
| 1. Comprehensiveness in addressing the scope of issues that you face
 | **○** | **○** | **○** | **○** | **○** |

[PROGRAMMING NOTE: IF QUESTION 40=1, 2, OR 3, SKIP TO QUESTION 41.]

1. Please let us know why you rarely read the OPA *Bulletin* that is published every other month.

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The next set of questions is about OPA’s social media accounts:

1. Social Media What social media platforms to you regularly use for professional/work purposes? *Please select all that apply.*
2. Instagram
3. LinkedIn
4. X/Twitter
5. Facebook
6. YouTube
7. Other (please specify: \_\_\_\_\_\_\_\_\_\_\_\_)
8. I do not use social media. à SKIP TO QUESTION 47
9. [DISPLAY ONLY IF ‘3’/X/TWITTER IS SELECTED IN QUESTION 43] How often do you read the tweets from OPA’s X/Twitter account @HHSPopAffairs?
10. Frequently/often
11. Sometimes
12. Occasionally
13. Almost never
14. Never
15. [DISPLAY ONLY IF ‘3’/X/TWITTER IS SELECTED IN QUESTION 43] How useful do you find the information and resources shared on OPA’s X/Twitter account @HHSPopAffairs?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very satisfied | Satisfied | Neutral | Dissatisfied | Very dissatisfied |
| 1. Timeliness of the information shared
 | **○** | **○** | **○** | **○** | **○** |
| 1. Usefulness of the OPA X/Twitter posts
 | **○** | **○** | **○** | **○** | **○** |
| 1. Relevance to your areas of need
 | **○** | **○** | **○** | **○** | **○** |

1. [DISPLAY ONLY IF ‘5’/YOUTUBE IS SELECTED IN QUESTION 43] How useful do you find the information and resources shared on OPA’s YouTube Channel?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very satisfied | Satisfied | Neutral | Dissatisfied | Very dissatisfied |
| 1. Timeliness of the information shared
 | **○** | **○** | **○** | **○** | **○** |
| 1. Usefulness of the OPA’s videos
 | **○** | **○** | **○** | **○** | **○** |
| 1. Relevance to your areas of need
 | **○** | **○** | **○** | **○** | **○** |

1. Do you have a mission-critical need to receive OPA written information or materials in a language other than English?
2. Yes
3. No à SKIP TO QUESTION 49
4. If yes, which of the following languages?
5. Arabic
6. Traditional Chinese
7. Simplified Chinese
8. French
9. Haitian Creole
10. Korean
11. Russian
12. Spanish
13. Tagalog
14. Vietnamese
15. Other languages (please specify: \_)
16. Use this space to provide any other suggestions for improving OPA web-based and digital communications/resources (e.g., content, frequency, relevance, etc.).

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**OVERALL SATISFACTION WITH OPA’S RESOURCES AND SUPPORT**

1. Overall, how satisfied are you with OPA’s support and resources for your grant project?
2. Very satisfied
3. Satisfied
4. Not sure
5. Dissatisfied
6. Very dissatisfied
7. [DISPLAY ONLY IF '4’/Dissatisfied or ‘5’/Very dissatisfied IS SELECTED IN QUESTION 50]

What other resources or support would be helpful?

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|  |

Thank you for your cooperation.

[END OF SURVEY]