

Advancing Best Practices and Cultural Relevance of Healthy Marriage and Responsible Fatherhood Programs for Indigenous Communities (I-HMRF)

Formative Data Collections for Program Support

0970 – 0531

Supporting Statement

Part A

August 2024

Submitted By:
Office of Planning, Research, and Evaluation
Administration for Children and Families
U.S. Department of Health and Human Services

4th Floor, Mary E. Switzer Building
330 C Street, SW
Washington, D.C. 20201

Project Officers: Aleta Meyer and Kathleen McCoy

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

Part A

Executive Summary

- **Type of Request:** This Information Collection Request is for a generic information collection under the umbrella generic, Formative Data Collections for Program Support (0970-0531).
- **Description of Request:**
The Advancing Best Practices and Cultural Relevance of Healthy Marriage and Responsible Fatherhood Programs for Indigenous Communities (I-HMRF) project proposes to conduct qualitative data collection activities (focus groups, interviews, talking circles, or photovoice activities) with staff and participants of Healthy Marriage and Responsible Fatherhood (HMRF) programs that serve Indigenous communities or other non-HMRF human service programs that service Indigenous communities, and Indigenous community members. These activities aim to better understand why participation in HMRF programs by Indigenous people is limited and how these programs can be more relevant and culturally responsive to this community.

We do not intend for this information to be used as the principal basis for public policy decisions.

- **Time Sensitivity:** We would like to begin data collection activities in September 2024 to allow ample time to analyze findings and develop an internal memo with recommendations for federal staff regarding programming and technical assistance needs, prior to the anticipated next round of HMRF grants being awarded in September 2025.

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

A1. Necessity for Collection

For nearly 20 years, the Administration for Children and Families (ACF) has served families and individuals through the Healthy Marriage and Responsible Fatherhood (HMRF) grant program. However, recent data suggest a very small proportion of the 3.7 million people in the United States who identify as American Indian/Alaska Native (AIAN or Indigenous) are participating in HMRF programs.^{1, 2} Currently, only two responsible fatherhood grants serve primarily Indigenous people (Capacity Builders, Inc. and Johns Hopkins University). This suggests that there is a significant gap between Indigenous individuals who could be served by HMRF programming and those who are served.

Working with Indigenous populations requires human services programs to be thoughtful and knowledgeable of Indigenous cultures in order to be culturally responsive, respectful, and relevant to Indigenous communities and participants. For example, many Indigenous communities and individuals operate from a relational worldview, where balance and harmony in relationships, including spiritual aspects, comprise the main thought system. Knowledge is often passed down generationally, shared in oral form, and learned through experience and apprenticeship. Additionally, the history of Indigenous communities includes significant historical trauma (e.g., removal from ancestral lands, boarding schools) that has caused great suffering to Indigenous peoples and has contributed to outcomes such as poor emotional health, low self-esteem, a disruption of Tribal familial roles, and increased rates of domestic violence and substance abuse. Therefore, working with Indigenous populations requires careful cultural considerations. Yet, commonly used HMRF curricula are not tailored or designed to serve Indigenous populations, often making the curricula not culturally responsive or appropriate to be utilized with Indigenous populations. Additionally, guidance on how to effectively adapt HMRF curricula to be culturally responsive for Indigenous populations is lacking, leaving many programs ill equipped to adequately serve Indigenous communities and potentially making existing HMRF programs not desirable for potential Indigenous participants.

With I-HMRF, ACF is seeking to understand how HMRF programs can be made more relevant and culturally responsive to this population.

There are no legal or administrative requirements that necessitate this collection. ACF is undertaking the collection at the discretion of the agency. ACF has contracted with Mathematica to carry out this data collection effort.

A2. Purpose

Purpose and Use

The purpose of this information request is to understand how to make HMRF programming more accessible and culturally responsive, in order to serve more Indigenous people and communities, as well as to understand barriers that may exist for Indigenous communities applying for federal HMRF grant programs. Currently, there are only 2 HMRF grantees that serve Indigenous communities, yet, other

¹ Healthy Marriage and Responsible Fatherhood. "nForm Resources." 2022.

<https://www.HMRFgrantresources.info/nform2-resources>.

² U.S. Census Bureau. "Measuring America's People, Places, and Economy." 2022. <https://www.census.gov/>.

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

federal grant programs have many more Indigenous communities as grantees. The lessons learned through these activities will inform recommendations made to federal staff on how to best align HMRF programming requirements with Indigenous values and priorities, and shape guidance for the development of a toolkit which will help future HMRF programs be more culturally relevant in Indigenous communities. Information gathered will help inform future programmatic technical assistance, as well as inform future ACF program development related to HMRF Indigenous grantees.

This proposed information collection meets the following goals of ACF's generic clearance for formative data collections for program support (0970-0531):

- Planning for provision of programmatic or evaluation-related training and/or technical assistance.
- Obtaining feedback about processes and/or practices to inform ACF program development or support.

Information collected through this information collection will inform the development of internal documents, such as an internal memo for federal staff administering programs, grants, and services for Indigenous communities, and external products, such as a public facing toolkit for practitioners serving Indigenous families and communities.

The information collected is meant to contribute to the body of knowledge on ACF programs. It is not intended to be used as the principal basis for a decision by a federal decision-maker and is not expected to meet the threshold of influential or highly influential scientific information.

Research Questions

1. How do social services and/or related grants—including HMRF—currently meet the needs of Indigenous peoples?
2. What lessons learned or promising practices for designing and delivering culturally responsive engagement services for Indigenous populations can be shared with the broader HMRF field?
3. How can HMRF grants be more culturally responsive and relevant to Indigenous peoples to improve engagement more broadly? This includes considerations about programming content, recruiting, and retention.

Study Design

The study team plans to collect qualitative data with a total of 6 program organizations or sites: 2 in-person site visits will be conducted and 4 will be held virtually. The sites will be a combination of programs conducting HMRF programming in Indigenous communities, as well as programs providing other types of healthy relationship or other human service programming with Indigenous communities. This mix of programs will allow us to understand current experiences of HMRF grantees serving Indigenous communities, as well as to understand barriers to applying for HMRF grants by including non HMRF grantees. As only two current HMRF grantees are serving Indigenous communities, it is important to expand beyond current HMRF grantees to get a more diverse perspective as to how HMRF programming can be more accessible and culturally relevant.

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

The current request includes five main data collection efforts talking with five distinct groups of individuals:

- (1) HMRF administrators and facilitators focus group protocol (Instrument 1):** Through these focus groups we will engage:
 - a. HMRF administrators and program leaders to (1) understand why and how their program operates HMRF services and why they applied for the funding, (2) discuss how they find information about HMRF and other grant opportunities, and (3) provide perspective on their HMRF program's high-level goals and promising practices, and the successes and challenges they face in administering these services for Indigenous participants.
 - b. HMRF facilitators to (1) provide perspectives into the promising practices and successes and challenges they face in serving Indigenous participants and (2) uncover any best or promising practices.
- (2) Non-HMRF administrators and facilitators interview protocol (Instrument 2):** These interviews will engage administrators and facilitators in programs that have not applied for HMRF funding, but who work with Indigenous participants to (1) help elucidate promising practices and successes and challenges in serving Indigenous communities and (2) understand the likelihood and/or feasibility of their organization operating HMRF services in the future.
- (3) HMRF and non-HMRF service participants focus group protocol (Instrument 3):**
 - a. For sites where HMRF services are currently offered, these focus groups will engage current HMRF participants—couples, fathers, and/or young adults—to provide insights into the benefits of HMRF services and current barriers to service participation.
 - b. For sites where HMRF services are not currently offered, these focus groups will engage potential HMRF participants—people who are participating in other human service programs that might be eligible for HMRF services—to provide insights into the benefits of these other community services and current barriers to service participation, as well as learn about ways that HMRF services might or might not meet the needs of their community.
- (4) HMRF and non-HMRF young adult service participants photovoice (Instrument 4):**
 - a. For sites where HMRF services are currently offered, this data collection activity will engage current young adult HMRF participants—young adults between 18 and 24 years old—to provide insights into the benefits of HMRF services and current barriers to service participation.
 - b. For sites where HMRF services are not currently offered, this data collection activity will engage potential young adult HMRF participants—young adults between 18 and 24 who are participating in other human services programs that might be eligible for HMRF services—to provide insights into the benefits of these other community services and current barriers to service participation, as well as learn about ways that HMRF services might or might not meet the needs of their community.
- (5) Community members talking circle protocol (Instrument 5):** This effort will engage community leaders and/or Elders who have not participated in HMRF services to learn about ways that HMRF services might or might not meet the needs of their community. An Elder is someone who is considered a respected knowledge bearer and cultural steward within Indigenous communities.

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

<i>Data collection activity</i>	<i>Instruments</i>	<i>Respondent, content, purpose of collection</i>	<i>Mode and duration</i>
HMRF Administrator and Facilitator Focus Group	HMRF Administrator and Facilitator Focus Group Protocol (Instrument 1)	<p>Respondents: HMRF program administrators and facilitators</p> <p>Content: Understanding current program services, promising practices, successes, and challenges, and motivations for pursuing HMRF funding.</p> <p>Purpose: To learn about why current HMRF programs pursued funding and to learn about promising practices in service provision for Indigenous communities to inform ACF programs/services and that may be of interest to others in the field</p>	<p>Mode: In-person or virtual (video conference) focus group</p> <p>Duration: 60-90 minutes (average of 75 minutes)</p>
Non-HMRF Administrator and Facilitator Interview	Non-HMRF Service Provider Interview Protocol (Instrument 2)	<p>Respondents: Non-HMRF administrators and facilitators</p> <p>Content: Understanding current program services, promising practices, successes, and challenges, and the potential for pursuing HMRF funding in the future.</p> <p>Purpose: To learn about why programs have not pursued HMRF funding and elevate lessons learned or promising practices in service provision for Indigenous communities.</p>	<p>Mode: In-person or virtual interview</p> <p>Duration: 30-60 minutes (average of 45 minutes)</p>
HMRF and non-HMRF Participant Focus Group	HMRF and non-HMRF Participant Focus Group Protocol (Instrument 3)	<p>Respondents: HMRF participants and non-HMRF human service participants.</p> <p>Content: Understanding participants' perceptions of strong families, program participation and barriers, and how current HMRF or other non-HMRF human service programming is or is not supporting strong families.</p> <p>Purpose: To provide insights into the benefits of HMRF services and non-HMRF human services and current barriers to participation.</p>	<p>Mode: In-person or virtual focus group</p> <p>Duration: 60-90 minutes (average of 75 minutes)</p>
HMRF and non-HMRF Young Adult Participant Photovoice	HMRF and non-HMRF Young Adult Participant Photovoice Guide (Instrument 4)	<p>Respondents: Young adult HMRF participants and young adult non-HMRF human service participants.</p> <p>Content: Reflecting on what is important in current relationships, how participation in HMRF services or non-HMRF human services support current relationships, and how services might better support them in the future.</p> <p>Purpose: To learn about ways that HMRF services or non-HMRF human services might or might not meet their needs of their community.</p>	<p>Mode: In-person or virtual (video conference) photovoice discussions</p> <p>Duration: One 15-30-minute information session and one 30-60-minute meaning making session (average of 67.5 minutes)</p>

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

Community Members Talking Circle	Community Members Talking Circle protocol (Instrument 5)	<p>Respondents: Community leaders and/or Elders.</p> <p>Content: Understanding community values around strong families, perceptions of how families in the community are doing, and how current HMRF or other human service programming is or is not supporting strong families.</p> <p>Purpose: To learn about ways that HMRF services or non-HMRF human services might or might not meet the needs of their community.</p>	<p>Mode: In-person or virtual talking circle</p> <p>Duration: 90-120 minutes (average of 105 minutes)</p>
----------------------------------	--	---	---

Other Data Sources and Uses of Information

This information will be used in concert with information gathered through a literature review, as well as from active engagement conversations with 6 Community Working Group (CWG) members who are experts for working with Indigenous communities. This data collection is not a part of any larger ICRs.

A3. Use of Information Technology to Reduce Burden

The study team plans to use information technology wherever possible. The I-HMRF study team plans to conduct data collection activities by video conference at four of the six sites and in-person at two sites. This approach offers flexibility to participating sites to select which option they would prefer. For virtual site visits, the format will reduce participant burden as they will not need to travel to activities. For in-person site visits, the study team will work with site staff to minimize burden where possible, such as offering data collection engagements in close proximity to other services to minimize participant travel.

A4. Use of Existing Data: Efforts to reduce duplication, minimize burden, and increase utility and government efficiency

The I-HMRF study team is not collecting information that is available elsewhere. None of the instruments ask for information that can be reliably obtained through other sources. To date, there has only been one federal HMRF sub study (CHARMED³) conducted to explore strategies to support AIAN fathers. Yet, this study only focused on fathers and did not involve talking directly with participants or staff of HMRF programs or other social service programs; only three AIAN experts were involved in the data collection.

A5. Impact on Small Businesses

We expect most of the programs in the study will be small, non-profit organizations. The I-HMRF study team will only request information required for the stated use. The burden for respondents will be minimized by restricting the interview and survey length to the minimum required, by conducting

³ OMB #: 0970-0540

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

interviews at times convenient for the respondents, and by not requiring record-keeping on the part of the programs.

A6. Consequences of Less Frequent Collection

A key goal of the study is to be able to gather community experiences to improve the provision and uptake of HMRF services and their positive impact on participants and their families. As Indigenous communities are currently underserved by HMRF programming, without this data collection, it will be hard to understand what barriers Indigenous programs experience related to applying to HMRF programming. Additionally, it will be hard to understand how to make HMRF programs more culturally relevant. Lastly, as Indigenous communities have a history steeped in both cultural and historical trauma, it is important to talk directly with Indigenous individuals in order to understand how to make programs more accessible and how to provide technical assistance in a culturally relevant way. Without this data collection, it will be hard to do so.

A7. Now subsumed under 2(b) above and 10 (below)

A8. Consultation

Federal Register Notice and Comments

In accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104-13) and Office of Management and Budget (OMB) regulations at 5 CFR Part 1320 (60 FR 44978, August 29, 1995), ACF published a notice in the Federal Register announcing the agency's intention to request an OMB review of this information collection request to extend approval of the umbrella generic with minor changes. The notice was published on January 28, 2022, (87 FR 4603), and provided a sixty-day period for public comment. ACF did not receive any comments on the first notice. A second notice was published, allowing a thirty-day period for public comment, in conjunction with submission of the request to OMB. ACF did not receive any comments on the second notice.

Consultation with Experts

The data collection plan and protocol were developed with a focus of interconnectedness of culture, honoring Indigenous wisdom and tradition, and centering community values. The study team engaged the I-HMRF CWG members in feedback on the data collection plan, research questions and protocol development to ensure insights are being gathered from Indigenous communities and practitioners. CWG members have been and will continue to be engaged at all phases of the project to ensure Native voices and perspectives are elevated throughout the lifecycle of the study.

The CWG members external to the federal and contractor teams who have contributed to the development of the protocols to date include:

- Lori Hunter, Program Director, Grand Lakes Inter-Tribal Council (GLITC)
- Tina Gray, Senior Project Director, Capacity Builders
- Ariel Richer, Co-Founder of Urban Indigenous Collective (UIC)

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

- Chris Custalow, Co-Founder and Director of Eastern Woodlands Revitalization
- Albert Pooley, Founder/President, Native American Fatherhood and Families Association
- Neil Tift, Outreach Coordinator/Court Navigator, Native American Fatherhood and Families Association
- Jennifer Richards, Project Director, Johns Hopkins University
- Tiffani Begay, Research Associate, Johns Hopkins University

A9. Tokens of Appreciation

It is extremely important to provide those with lived experience, experts, staff, and others providing their feedback for these efforts with equitable compensation or tokens of appreciation for participation. As noted in a 2022 report by the Office of the Assistant Secretary for Planning and Evaluation⁴ this “helps ensure a diverse population with varied views can participate.” As such, we plan to provide honoraria to respondents, as described in section A13.

A10. Privacy: Procedures to protect privacy of information, while maximizing data sharing

Personally Identifiable Information

This data collection effort will collect personally identifiable information (PII) from program staff (names, work email addresses, and telephone numbers) and program participants and community members (names, email addresses, and telephone numbers) for the purposes of arranging data collection (including scheduling and sending invitations to in-person or virtual data collection activities) and potentially to send honoraria.

Assurances of privacy

Information collected will be kept private to the extent permitted by law. Issues of privacy will be discussed during training sessions with staff working on the project, including how to maintain privacy of participants across multiple data collection activities within a site visit and how to properly collect, protect, and store PII while on site or conducting virtual data collection activities. All Mathematica staff complete online security awareness training when they are hired and receive annual refresher training thereafter. Training topics include the security policies and procedures found in the Mathematica Corporate Security Manual. Program staff will transfer records to Mathematica using a secure file transfer protocol site in case the files contain PII.

At least some of the information collected under this ICR will likely be retrieved by an individual's personal identifier in a way that triggers the Privacy Act of 1974, as amended (5 U.S.C. 552a). The system of records notice (SORN) for this collection is OPRE Research and Evaluation Project Records, 09-80-0361. Each individual will be provided with information that complies with 552a(e)(3) prior to being asked for information that will be placed into that system of records. This means respondents will receive information about the authority, the purposes for use, the routine uses, that the request is voluntary, and any effects of not providing the requested information.

⁴ chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://aspe.hhs.gov/sites/default/files/documents/230a8fe8986f162910b9f29f6d050f35/Recruiting-Lived-Experience.pdf

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

For all data collection activities, invited participants will be assured that information requested from them is for research purposes only and that their identities will not be disclosed to anyone outside the study team. With participant permission, focus group, interview, or photovoice sessions will be recorded, and participants will be assured that their recorded comments will be saved only until transcribed, and specify that the transcription summaries will not reveal their identities. The talking circle sessions will not be recorded.

Photovoice participants will be given the opportunity to opt into releasing their selected photo(s) for use in public products. This option to release photos will be voluntary and will not impact the participant's token of appreciation or their receipt of program or other services. Photovoice participants will be instructed to not take any photos that have any identifying information in them, such as a person's face, in order for individuals to remain anonymous if the photos are used at a later data in publication with the participant's permission, per the consent form.

Data security and monitoring

No information will be given to anyone outside of the I-HMRF study team and ACF, unless a photovoice participant has voluntarily granted a release of their photo(s). All PII, typed notes, and audio recordings will be stored on restricted, encrypted folders on Mathematica's network, which is accessible only to the study team.

A11. Sensitive Information⁵

There are no sensitive questions as part of the data collection activities with HMRF administrators and facilitators (focus groups), or with non-HMRF administrators and facilitators (interviews).

The HMRF and non-HMRF participant focus group protocol includes questions about relationships with family and peers and challenges with participating in the program, which some participants might consider sensitive. Similarly, the young adult photovoice guide and community member talking circle protocol includes questions about relationships with family and peers. However, these questions are essential to understanding how programs might better support Indigenous communities in strengthening relationships through HMRF programming. The I-HMRF study team will obtain active consent in all sites and will inform potential study participants of the purpose of the data collection and that they may decline to answer any question.

A12. Burden

Burden Estimates

⁵ Examples of sensitive topics include (but not limited to): social security number; sex behavior and attitudes; illegal, anti-social, self-incriminating and demeaning behavior; critical appraisals of other individuals with whom respondents have close relationships, e.g., family, pupil-teacher, employee-supervisor; mental and psychological problems potentially embarrassing to respondents; religion and indicators of religion; community activities which indicate political affiliation and attitudes; legally recognized privileged and analogous relationships, such as those of lawyers, physicians and ministers; records describing how an individual exercises rights guaranteed by the First Amendment; receipt of economic assistance from the government (e.g., unemployment or WIC or SNAP); immigration/citizenship status.

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

Overall burden for this effort is informed by two estimated assumptions: (1) two of the six sites will offer HMRF programming; four of the sites will offer other non-HMRF human services, and (2) no more than 100 participants will be recruited across all six sites (estimating 18 participants at two HMRF sites and 16 participants at four non-HMRF sites). For each activity, we have estimated a range for the time of each response, which may vary by site depending on which questions are relevant for each site or participant. We have averaged that range to calculate estimated burden.

- **HMRF administrators and facilitators focus group protocol (Instrument 1):** HMRF program staff will be invited to participate in focus groups. These will be facilitated at the two HMRF sites. For burden calculations, the study team assumes that one focus group at each site will engage one administrator and three facilitators in these 60-to-90-minute focus groups for a total of 8 participants (*1 focus group * 2 sites * 4 participants*).
- **Non-HMRF administrators and facilitators interview protocol (Instrument 2):** Non-HMRF program staff will be invited to participate in individual interviews. These will be facilitated at the four non-HMRF sites. The study team assumes that one administrator and one facilitator will be interviewed at each site, with each interview taking between 30 to 60 minutes, for a total of 8 participants (*2 interviews * 4 sites * 1 participant*).
- **HMRF and non-HMRF service participants focus group protocol (Instrument 3):** HMRF and non-HMRF human services program participants will be invited to participate in focus groups. The study team estimates that there will be one 60-to-90-minute focus group at each of the six sites with an average of five participants, for a total of 30 participants (*1 focus group * 6 sites * 5 participants*).
- **HMRF and non-HMRF young service participants photovoice (Instrument 4):** Young adult HMRF participants and non-HMRF human services participants between 18-24 will be guided through the photovoice activities in two sessions. The first information session will be between 15 to 30 minutes, and the follow-up meaning making session will be between 30-60 minutes. The study team estimates that there will be five participants in these sessions, for a total of 30 participants (*1 photovoice engagement * 6 sites * 5 participants*). We estimate that one photovoice engagement will occur at each site.
- **Community members talking circle protocol (Instrument 5):** Community leaders and/or Elders who have not participated in HMRF services but who have unique perspectives and insights about the community will be invited to participate in one talking circle facilitated at each site. The study team estimates that there will be four participants at the 90-to-120-minute session, for a total of 24 participants (*1 talking circle * 6 sites * 4 participants*).

The instruments as written and submitted deliberately include more topics/questions than there is time for in the length allocated to the data collection activities in the burden table, which is why time range estimates are provided above for each instrument. Some sites may be asked more questions than others, necessitating a range for time to complete the instruments. Individual study team members working with the sites will select the questions most relevant to what their sites are working on and drop irrelevant questions. It is anticipated that all questions and topics included in the instruments submitted as a part of this information request will be asked in at least one of the participating sites.

Cost Estimates

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

To compute the total estimated annual cost, the total burden hours were multiplied by the estimated average hourly wage for program staff and participants (see table above). According to the Bureau of Labor Statistics' Current Population Survey 2023, the median hourly wage for full-time social and community service managers is \$37.03 (program managers, leaders, and supervisors) and \$23.89 for community and social service specialists (frontline staff). The hourly wage (\$7.25) for participants and community members represents the federal minimum wage.

Instrument	Respondent	Total/ annual number of respondents	Number of responses per respondent	Average burden hours per response	Annual burden hours	Average hourly wage	Total annual cost
HMRF Administrator and Facilitator Focus Group Protocol	HMRF Administrators	2	1	1.25	2.5	\$37.03	\$92.58
	HMRF Facilitators	6	1	1.25	7.5	\$23.89	\$179.18
Non-HMRF Administrators and Facilitators Interview Protocol	Non-HMRF Administrators	2	1	0.75	1.5	\$37.03	\$55.55
	Non-HMRF Facilitators	6	1	0.75	4.5	\$23.89	\$107.51
HMRF and non-HMRF Participant Focus Group Protocol	HMRF and non-HMRF Participants	30	1	1.25	37.5	\$7.25	\$271.88
HMRF and non-HMRF Young Adult Participant Photovoice Guide	HMRF and non-HMRF Young Adult Participants	30	1	1.125	37.5	\$7.25	\$271.88
Community Members Talking Circle	Community Members	24	1	1.75	42	\$7.25	\$304.50
Estimated Totals:		100	1		133		\$1,283.08

A13. Costs

Directly engaging the communities ACF serves and including these individuals in ACF research is in line with the following priorities of the current Administration and HHS:

- Advancing Racial Equity and Support for Underserved Communities Through the Federal Government (EO 13985)
- Further Advancing Racial Equity and Support for Underserved Communities Through the Federal Government
- Presidential Memorandum on Restoring Trust in Government through Scientific Integrity and Evidence-Based Policy Making
- ACF Evaluation Policy
- HHS Strategic Plan FY 2022-2026,

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

- ASPE's Methods and Emerging Strategies to Engage People with Lived Experience (2021)
- ASPE's Recruiting Individuals with Lived Experience (2022)

Consistent with the guidance documents referenced, and to ensure involvement with a variety of people with diverse experiences and perspectives in relevant fields, we propose to offer participants an honorarium for their time spent providing their expertise and experience. Specifically, we propose to offer an honorarium of \$50 to respondents in each of the five data collection activities for non-HMRF grantee sites. For HMRF grantee sites, a \$50 honorarium will only be offered to the focus group participants, the young adult photo voice participants, and Community Members who participate in the talking circle. Qualitative data collected from these activities are not intended to be representative of the experiences of all participant and staff experiences in HMRF and similar programs serving Indigenous communities. However, it is important to recruit respondents with a range of background characteristics to capture a range of possible program experiences.

Equitable compensation is in line with leading practices for ethical engagement of those with lived expertise and advancing equity for populations who have been historically underserved (as noted in section A1, advancing equity is a priority, as highlighted in the referenced EOs in that section). Providing equitable compensation recognizes the value of the time provided by participants, helps to remove barriers to participation, and affirms that the contributions from those with lived experience are as valuable as those from other experts.

As noted in the 2022 report by ASPE this “helps ensure a diverse population with varied views can participate.” Additionally, in an earlier report it was noted that “Providing [those with lived experience] with compensation commensurate with the rates that other experts—i.e., experts engaged based on their expertise as practitioners or researchers, rather than lived experience—receive helped recognize the valuable and unique expertise that people with lived experience lend, which promoted meaningful engagement.” The report goes on to specify that not doing so could result in “unintended consequences when lived experience engagements have scarce resources and experts are undercompensated, which can undermine, disregard, and/or marginalize people with lived experience.”

A14. Estimate annualized costs to the federal government

The total estimated cost for the federal government for the data collection activities under this current request will be \$102,255. This includes personnel effort plus other direct and indirect costs.

Cost category	Estimated costs
Data collection	\$69,195
Data analysis plan	\$5,222
Analysis	\$22,368
Dissemination	\$5,470
Total costs over the request period	\$102,255

A15. Reasons for changes in burden

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

This is for an individual information collection under the umbrella formative generic clearance for program support (0970-0531).

A16. Timeline

The information collected under this request will be used to help the federal government better align HMRF programs to serve Indigenous populations. Upon OMB approval, the study team will begin scheduling in-person and virtual site visits with six identified sites who have expressed interest in participating. Data collection is estimated to occur starting in fall 2024 through spring 2025, with activities beginning after OMB approval. Data will be analyzed in Spring/Summer 2025. The study team will develop a final internal memo for ACF by late Summer 2025 and an external toolkit for practitioners serving Indigenous communities by late Summer 2026. These products will share lessons learned from engagements with these sites, such as promising practices for aligning HMRF services with the values and priorities of Indigenous communities.

A17. Exceptions

All instruments will display the expiration date for OMB approval. No exceptions are necessary for this information collection.

Attachments

Instrument 1 – I-HMRF: HMRF Administrator and Facilitator Focus Group Protocol

Instrument 2 – I-HMRF: Non-HMRF Administrator and Facilitator Interview Protocol

Instrument 3 – I-HMRF: HMRF and non-HMRF Participant Focus Group Protocol

Instrument 4 – I-HMRF: HMRF and non-HMRF Young Adult Participant Photovoice Guide

Instrument 5: – I-HMRF: Community Members Talking Circle

Attachment A – I-HMRF Recruitment Notifications

Attachment B – I-HMRF Site Recruitment Flyer