SAVES Data Collection for Safety in Child Support Program Research

OMB Information Collection Request
New Collection

Supporting Statement Part B

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Type of Request: New

Submitted By:
Office of Child Support Enforcement
Administration for Children and Families
U.S. Department of Health and Human Services

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Part B

B1. Objectives

Study Objectives

The Safe Access for Victims' Economic Security (SAVES) Demonstration is a five-year project funded by the Office of Child Support Enforcement (OCSE) in the Administration for Children and Families (ACF). The goal is to increase safe access to child support, parenting time, and establishing paternity for survivors of domestic violence (DV). The data collection will include qualitative interviews and surveys with DV survivors, a survey of DV advocates, focus groups with child support staff at the 13 SAVES demonstration sites, and qualitative interviews with clients who have received safety-focused intervention services at those sites.

The purpose of this data collection is for ACF to better understand the experiences of DV survivors with the child support program, DV advocate perspectives on support needs for DV survivors, and child support program staff reflections on the implementation of safety-focused interventions. ACF intends to use this information to increase effective child support services for survivors of DV. This study is not an evaluation of SAVES.

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. Response rates will not be calculated or reported (see B5).

Study objectives include:

- **Understand how survivors of DV describe their experiences with the child support program**, including safety-related concerns, barriers to engagement, and factors influencing their decision to pursue or avoid child support services. This will be accomplished through qualitative interviews and an online survey of DV survivors.
- **Identify the programmatic challenges and supports observed by DV advocates** when assisting survivors with child support, including collaboration with child support staff, survivor access issues, and procedural barriers. This will be accomplished through an online survey of DV advocates.
- **Understand child support staff perspectives on the implementation, impact, and sustainability of safety-focused interventions introduced through SAVES.** This will be accomplished through focus groups with child support staff working on safety-related interventions at SAVES demonstration sites.
- **Document the experiences of DV survivors with safety-focused services** offered at demonstration sites, such as trauma-informed intake procedures, safe parenting time arrangements, modified court processes, or specialized staff. This will be accomplished through qualitative interviews with DV survivors receiving safety-focused intervention services at SAVES demonstration sites.

ACF has contracted with the Center for Policy Research (CPR), one organization of the SAVES Center, to conduct this work.

Generalizability of Results

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

This study is intended to present an internally-valid description of the experiences of DV survivors eligible for child support, the perspectives of DV advocates supporting survivors who are seeking or accessing child support, the implementation of safety-focused practices by child support staff at SAVES demonstration sites, and the experiences of clients receiving those safety-focused services at those sites, not to promote statistical generalization to other sites or service populations. Although findings will not be statistically generalizable, the study aims to capture a broad range of experiences that can inform practice improvements applicable to varied contexts by purposefully sampling DV survivors across different demographics and geographic locations.

Appropriateness of Study Design and Methods for Planned Uses

This mixed-methods, descriptive study is appropriate for exploring how DV survivors experience the child support program and how safety-focused practices are implemented across the 13 SAVES demonstration sites. The combination of qualitative interviews, focus groups, and online surveys allows for both in-depth exploration and identification of patterns across a diverse but non-representative sample. The design supports internal learning, technical assistance, and cross-site practice improvement, rather than generalizable or causal conclusions. Findings are not intended to be representative or used to assess program impacts, and these limitations will be clearly noted in all reports and briefs. This study is intended to inform practice improvements and increase the field's understanding of how to enhance safe access to child support for DV survivors.

As noted in Supporting Statement A, this information is not intended to be used as the principal basis for public policy decisions and is not expected to meet the threshold of influential or highly influential scientific information.

B2. Methods and Design

Target Population

This study will collect information from five distinct respondent groups: (1) DV survivors who are eligible for child support and have either engaged or not engaged with the child support program (2) DV survivors completing a national, anonymous online survey, (3) DV advocates helping survivors in the child support program, (4) child support staff implementing safety-focused practices at SAVES demonstration sites, and (5) DV survivors who have directly received those safety-focused services. The unit of analysis is the individual respondent for all instruments. The research team will use non-probability, purposive sampling to identify potential respondents who can provide information on the study's key constructs. Because participants will be purposively selected, they will not be representative of the population. This sampling method will allow the study to capture a range of experiences across demographic groups, geographic locations, and engage with federal, state, county or tribal child support programs.

The sample includes approximately 100 DV survivors for in-depth interviews (Instrument 1: SAVES Qualitative Interviews with DV Survivors), 2,000 DV survivors for the quantitative survey (Instrument 2: SAVES Quantitative Survey with DV Survivors), 1,200 DV advocates (Instrument 3: SAVES Quantitative Survey with DV Advocates), 65 child support staff across intervention-specific focus groups (Instrument 4: SAVES Focus Groups with Child Support Staff at Demonstration Sites), and 65 DV survivors who received safety-focused services at SAVES demonstration sites (Instrument 5: SAVES Qualitative Interviews with Clients Receiving Safety-Focused Intervention Services at Demonstration Sites). These samples are not intended to be representative of their broader populations but are designed to support varied insights into the experiences of survivors and program implementation.

Sampling
CPR will administer all data collection. CPR will lead all sampling, recruitment, screening, and administration of instruments. The study uses purposive, non-probability sampling to identify respondents who can provide meaningful insights aligned with each instrument's goals. Recruitment protocols are tailored to each respondent group and data collection method.

Instrument 1: SAVES Qualitative Interviews with DV Survivors

Respondent recruitment size goal: 100 respondents (50 engaged with a county, state, or tribal child support program; 50 not engaged with a child support program).

Context: Respondents will be recruited through collaboration with SAVES demonstration site staff, state and local DV coalitions, and community-based advocacy organizations. Interested individuals will be given IRB-approved consent and information materials and referred to CPR and directed to complete a brief eligibility screener hosted on Qualtrics. To be eligible, individuals must be adult DV survivors who are parents who have experienced DV perpetrated by the other parent of their child(ren), and who either have engaged with a county, state, or tribal child support program or those who are eligible but have decided or chosen not to pursue child support. CPR will review the screener responses and contact eligible individuals to schedule and conduct interviews directly. Recruitment will aim to include variation by child support engagement status (engaged vs. not engaged), geographic location, and demographic characteristics. We anticipate screening about 200 respondents to reach a target of 100 respondents. This target is consistent with prior qualitative studies examining survivors' experiences with public systems, which have shown that this range typically achieves thematic saturation across subgroups.

Instrument 2: SAVES Quantitative Survey with DV Survivors

Respondent recruitment size goal: Approximately 2,000 survivors, representing a mix of those who have and have not engaged with a child support program.

Context: To achieve a respondent size of approximately 2,000, CPR will collaborate with the National Domestic Violence Hotline to post the Qualtrics survey link on its website and promote it via social media and newsletters. Additional outreach will occur through DV coalitions, advocacy networks, and SAVES demonstration site partners, who will share the survey link with their networks. Respondents will self-screen for eligibility before beginning the survey. Prior web-based surveys using this approach (e.g., National Network to End Domestic Violence (NNEDV)'s DV Counts Census) have successfully reached similar recruitment sizes of DV survivors using similar recruitment models (NNEDV, 2019). We anticipate screening about 4,000 respondents to reach a target of 2,000 respondents. Although the respondent recruitment size is not representative, the approach is designed to reach a large and demographically varied group of survivors to support subgroup comparisons.

Instrument 3: SAVES Quantitative Survey with DV Advocates

Respondent recruitment size goal: Approximately 1,200 DV advocates across national networks

Context: Advocates will be recruited through state and national DV networks (e.g., the National Resource Center on Domestic Violence (NRCDV)), statewide coalitions, and SAVES demonstration site contacts. CPR will disseminate the survey link via email, newsletters, and professional listservs.

Participation is open to advocates with experience supporting DV survivors navigating or considering child support. This is a non-representative respondent recruitment intended to reflect a range of geographic, organizational, and professional perspectives.

The respondent recruitment size of 1,200 is based on past national surveys of DV advocates, such as the 2017 NRCDV survey on benefits access[1], which have yielded similar response rates. Recruitment will prioritize experience working with child support seeking survivors. Participation is voluntary and open to advocates with relevant experience, regardless of professional role or title.

Instrument 4: SAVES Focus Groups with Child Support Staff at Demonstration Sites

Respondent recruitment size goal: Approximately 65 respondents across all focus groups.

Context: Respondents will be recruited through convenience sampling directly from the 13 SAVES demonstration sites. CPR will coordinate with demonstration site leads to identify staff involved in implementing safety-focused services. Site leads will nominate staff, based on their ongoing involvement in designing or implementing safety-related interventions, such as specialized staffing, modified court services, or screening and referral processes. These participants will include caseworkers, supervisors, and other relevant roles working on safety-focused interventions at sites. CPR will moderate one focus group for each type of intervention. The specific interventions will depend on what interventions the sites are using when we collect the data. This approach aligns with multi-site implementation studies and ACF-supported process evaluations, which frequently use site-based focus groups of this size to explore system adaptations and frontline experiences. We will ensure each focus group holds no more than 7 respondents and estimate approximately 65 respondents across all focus groups.

Instrument 5: SAVES Qualitative Interviews with Clients Receiving Safety-Focused Intervention Services at Demonstration Sites

Respondent recruitment size goal: Approximately 65 DV survivors who are clients of the child support program across the 13 SAVES demonstration sites.

Context: DV survivors who are child support clients will be referred by staff at SAVES demonstration sites who are implementing enhanced safety practices. Eligible respondents are DV survivors who have received services from child support agencies at one of the 13 demonstration sites. CPR will provide IRB-approved consent and information materials to demonstration sites, who will share them with potential participants. CPR will conduct screening of these interested participants and schedule interviews directly with approximately five participants per site (65 total). This structure follows precedent in multi-site DV service evaluations where 50–75 interviews are used to capture diverse survivor perspectives across intervention types. The sample is designed to include a variety of experiences across different interventions and is focused on capturing the perspectives of survivors on how interventions have affected their experience with the child support program.

B3. Design of Data Collection Instruments

[1] National Resource Center on Domestic Violence. (2018, October). *The difference between surviving and not surviving: Public benefits programs and domestic and sexual violence victims* (Updated October 2018). https://vawnet.org/sites/default/files/assets/files/2018-10/NRCDV-TheDifferenceBetweenSurvivingandNotSurviving-UpdatedOct2018_0.pdf

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

Development of Data Collection Instruments

All instruments were developed by the research team at CPR, with input from survivor advisors, DV advocates, child support professionals, and technical assistance partners. Items were drawn from prior studies, practitioner tools, and newly developed questions tailored to the SAVES research objectives.

Instruments were reviewed to ensure language consistency, minimize burden, and eliminate redundancy. Every effort was made to streamline data collection by ensuring each question aligns with study objectives and research questions, removal of redundancies across instruments, ensuring relevancy of questions, and use of plain language through survivor and advocate review of instruments. All items were assessed for their alignment with the analysis plan and contribution to the core research objectives outlined in Section B1.

To minimize measurement error:

- Surveys were programmed with skip logic and validation checks
- Interview and focus group guides use structured prompts and follow-ups
- Instruments avoid sensitive questions that are not central to the study objectives
- Open-ended responses are designed to allow for participant-led clarification

Instrument	Study Objective	Development Approach	Sources and Streamlining	Use in Analysis	Types of Questions Used
Instrument 1: SAVES Qualitative Interviews with DV Survivors	• Understand how DV survivors describe their experiences with the child support program, including safety-related concerns, barriers to engagement, and factors influencing their decision to pursue or avoid child support services. • Capture variation in safety-related practices across demonstration sites.	Developed by CPR with input from survivor advisors and DV advocates.	Newly developed based on SAVES research objectives and prior CPR studies. Reviewed by <10 survivor advisors. Streamlined to focus on safety and access.	Thematic coding will explore the survivor's decision-making, safety concerns, and perceived staff response. Used in cross-site comparisons.	Open-ended interview questions on safety, barriers, and decision-making.
Instrument 2: SAVES Quantitative Survey with DV Survivors	• Understand how DV survivors describe their experiences with the child support program, including safety-related concerns, barriers to engagement, and factors influencing their decision to pursue or avoid child support services.	Developed by CPR with feedback from survivor reviewers and DV coalition partners.	Newly developed based on SAVES research objectives and prior CPR studies. Reviewed for clarity by survivor advisors. Reduced burden using skip logic	Used to identify trends in survivor engagement, safety perceptions, and barriers across demographic and contextual subgroups.	Close-ended survey questions with Likert scales, skip patterns, and open-text items for deeper insights.

			and concise formatting.		
Instrument 3: SAVES Quantitative Survey with DV Advocates	• Identify the programmatic challenges and supports observed by DV advocates when assisting survivors with child support, including collaboration with child support staff, survivor access issues, and procedural barriers.	Developed by CPR in collaboration with DV coalitions, SAVES demonstration sites, and other SAVES Center partners.	Adapted from NRCDV's 2017 Public Benefits Survey. Streamlined to focus on child support-specific barriers and interagency collaboration.	Descriptive analysis of challenges and supports; open-text responses will be coded thematically to supplement quantitative trends.	Close-ended survey questions with Likert scales, skip patterns, and open-text items for deeper insights.
Instrument 4: SAVES Focus Groups with Child Support Staff at Demonstration Sites	• Understand child support staff perspectives on the implementation, impact, and sustainability of safety-focused interventions introduced through SAVES.	Developed by CPR with input from SAVES demonstration sites and other SAVES Center partners.	Guide structured around the safety interventions at the SAVES demonstration sites. Reviewed internally by the SAVES demonstration sites and the SAVES Center for alignment and clarity.	Thematic analysis will assess implementation processes, and perceived impact.	Semi-structured focus group prompts covering delivery, training, and perceived impact.
Instrument 5: SAVES Qualitative Interviews with Clients Receiving Safety-Focused Intervention Services at Demonstration Sites	• Document client experiences with safety-focused services offered at demonstration sites (e.g., trauma-informed intake, safe parenting time, modified court processes). • Capture variation in safety-related practices across demonstration sites.	Developed by CPR with input from survivor advisors and demonstration site staff.	Custom-developed to reflect site-level interventions. Reviewed for trauma-informed language and streamlined length.	Thematic analysis will assess client perceptions of safety-focused services and variation in experience across sites.	Open-ended interview questions on service access, safety, satisfaction, and unmet needs.

B4. Collection of Data and Quality Control

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

Instrument	Data Collectors	Recruitment Protocol	Mode of Data Collection	Quality Control Measures
Instrument 1: SAVES Qualitative Interviews with DV Survivors	CPR research team	Recruitment will focus on **DV survivors who are parents and are eligible for child support**, including those who have engaged with the child support program and those who have not. Recruitment will occur through a combination of targeted outreach and referral. Eligible participants will be identified via DV coalitions, local advocacy organizations and SAVES demonstration sites. CPR will provide recruitment language to these organizations. Interested participants will be directed to a secure screening form hosted by CPR on Qualtrics. CPR will review the eligibility screening and schedule interviews directly with selected participants.	Virtual (e.g., Zoom) or phone-based	Interviews will be conducted by trained qualitative researchers who have experience in trauma-informed interviewing practices. An open-ended interview guide will be used to ensure consistency across interviews. All interviews will be audio recorded (with consent), transcribed verbatim, and reviewed for completeness. Transcripts will be de-identified and stored securely. CPR will develop a codebook and pilot it on a subset of transcripts. Double coding and regular coder meetings will ensure reliability.
Instrument 2: SAVES Quantitative Survey with DV Survivors	Self-administered online survey on Qualtrics	Recruitment will target **DV survivors who are parents and are either eligible for or have previously engaged with the child support program**. Unlike Instrument 1, which involves direct referrals and scheduled interviews, this survey is open to a broad, national audience. The National Domestic Violence Hotline will promote the survey through its website, targeted social media posts, and e-newsletters. SAVES demonstration site staff, state DV coalitions, and advocacy organizations will also share the link. Respondents will self-screen via an online form to confirm eligibility before accessing the full survey. The recruitment strategy emphasizes accessibility, anonymity, and national reach, while encouraging participation across diverse survivor experiences.	Online (e.g., Qualtrics)	The survey will be hosted on a secure platform (Qualtrics) with programmed logic and validation checks to reduce missing or inconsistent responses. The instrument has been reviewed by survivor advisors to improve clarity and reduce burden. CPR staff will monitor data collection, review incoming data for completeness and unusual patterns, and conduct data cleaning and coding using standardized procedures.
Instrument 3:	Self-administered	Recruitment will target **DV**	Online (e.g.,	The survey will be hosted

SAVES Quantitative Survey with DV Advocates	online survey on Qualtrics	**advocates who provide direct support to survivors navigating or considering child support**. Recruitment will occur through direct email outreach and listserv announcements coordinated with national and state-level DV advocacy partners. CPR will collaborate with SAVES demonstration sites, DV coalitions, and national organizations (e.g., NRCDV) to distribute the survey link to advocates with relevant experience. The recruitment materials will describe the study purpose and eligibility criteria (i.e., direct support of DV survivors involved with or considering child support). Participation will be voluntary and anonymous. Respondents will self-screen via an online form to confirm eligibility before accessing the full survey.	Qualtrics)	on a secure platform (e.g. Qualtrics) with programmed logic and validation checks to reduce missing or inconsistent responses. The instrument has been reviewed by advocates to improve clarity and reduce burden. CPR staff will monitor data collection, review incoming data for completeness and unusual patterns, and conduct data cleaning and coding using standardized procedures.
Instrument 4: SAVES Focus Groups with Child Support Staff at Demonstration Sites	CPR research team	Recruitment will focus on **child support staff at SAVES demonstration sites who are directly involved in implementing safety-focused interventions**. Demonstration site leads will identify child support staff directly involved in implementing safety-focused practices (e.g., specialized caseworkers, supervisors). CPR will coordinate with these contacts to invite a balanced mix of roles at each site. CPR will provide background on the study, obtain informed consent, and schedule participants into 90-minute focus groups. Recruitment aims to capture a range of experiences across the 13 sites while minimizing burden on staff.	Virtual (e.g., Zoom)	Focus groups will be conducted by moderators trained in group facilitation and qualitative methods. Standardized guides will be used across sites. All sessions will be recorded (with consent), transcribed verbatim, and reviewed for completeness. Transcripts will be de-identified and stored securely. CPR will develop a codebook and pilot it on a subset of transcripts. Double coding and regular coder meetings will ensure reliability.
Instrument 5: SAVES Qualitative Interviews with Clients Receiving Safety-Focused Intervention Services at Demonstration Sites	CPR research team	Recruitment will focus on **DV survivors who have recently received safety-focused child support services at SAVES demonstration sites.** Child support staff at SAVES demonstration sites will refer clients who have recently received	Virtual (e.g., Zoom) or phone-based	Trained qualitative researchers who have experience in trauma-informed interviewing practices will conduct interviews. An open-ended interview guide will be used to ensure consistency across interviews. All

		safety-focused services (e.g., enhanced screening, modified court processes). CPR will provide staff with eligibility criteria and standardized recruitment materials. CPR staff will screen referrals using a brief form to confirm eligibility and obtain consent. Interviews will be scheduled directly with the participant. The process ensures that only clients with experience of the interventions are included while protecting confidentiality.		interviews will be audio recorded (with consent), transcribed verbatim, and reviewed for completeness. Transcripts will be de-identified and stored securely. CPR will develop a codebook and pilot it on a subset of transcripts. Double coding and regular coder meetings will ensure reliability.

B5. Response Rates and Potential Nonresponse Bias

Response Rates

The interviews, focus groups, and surveys are not designed to produce statistically generalizable findings, and participation is wholly at the respondent's discretion. Response rates will not be calculated or reported.

Nonresponse

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

B6. Production of Estimates and Projections

The data will not be used to generate population estimates, either for internal use or dissemination.

B7. Data Handling and Analysis

Data Handling

Instrument 1: SAVES Qualitative Interviews with DV Survivors

Interview data will be collected via audio recordings with participant consent and transcribed verbatim. The research team will review the transcripts for completeness, accuracy, and to ensure removal of any identifiable information. A structured coding framework will be applied using qualitative analysis software (e.g., NVivo). Trained researchers at CPR will do the coding. The research team will develop a structured codebook based on the interview guide (deductive codes) and content that emerges from early transcript review (inductive codes). The codebook will be refined through iterative team discussions and piloting a subset of transcripts. Regular team meetings and intercoder reliability checks will be conducted to address discrepancies, refine codes, and maintain quality and accuracy throughout the analysis process. All transcripts and coding files will be securely stored on encrypted servers with access restricted to authorized project team members per CPR's data security policy.

Instrument 2: SAVES Quantitative Survey with DV Survivors (Online Survey) & Instrument 3: SAVES Quantitative Survey with DV Advocates

Survey data will be collected via a secure online platform (e.g., Qualtrics) with built-in logic and

validation checks to reduce missing or inconsistent responses. Responses will be automatically captured into a structured database, minimizing the risk of manual data entry errors. Data will be reviewed by research staff for anomalies or inconsistencies, and descriptive statistics will be used to detect outliers or patterns of missing data. All variables will be cleaned and coded using standardized procedures. Any re-coding or imputation will be documented, and quality checks will be conducted prior to analysis. Open-ended responses will be reviewed for clarity and coded systematically using a qualitative coding framework. All data and coding files will be securely stored.

Instrument 4: SAVES Focus Groups with Child Support Staff at Demonstration Sites
Focus groups will be audio recorded with participant consent and transcribed verbatim. Research staff at CPR will review transcripts for completeness, accuracy, and confidentiality. Identifiable information will be redacted during the transcription process. Transcripts will be imported into qualitative analysis software (e.g., NVivo) for structured coding. The research team will develop a codebook to guide the analysis, drawing on the study's implementation research questions and themes that emerge from early transcript review. Trained CPR team members will do the coding. Intercoder agreement checks, and regular team discussions will ensure consistency and accuracy throughout the coding process. All transcripts and coding files will be securely stored in encrypted environments in compliance with federal data protection standards.

Instrument 5: SAVES Qualitative Interviews with Clients Receiving Safety-Focused Intervention Services at Demonstration Sites
Interviews with DV survivors will be audio recorded with participant consent and transcribed verbatim. Transcripts will be reviewed to ensure accuracy and to redact any identifiable information. Transcripts will be imported into qualitative analysis software (e.g., NVivo) for structured coding. A standardized codebook will be developed for this instrument prior to full analysis, incorporating deductive codes based on the interview guide as well as inductive codes emerging from early data review. Trained researchers at CPR will code with intercoder agreement checks to ensure reliability and consistency. All transcripts and coding files will be securely stored in encrypted environments in compliance with federal data protection standards.

Data Analysis

Instrument 1: SAVES Qualitative Interviews with DV Survivors
A thematic analysis approach will be applied to examine how DV survivors describe their decision-making around engaging with the child support program, their safety concerns, and their experiences with agency staff. The analysis will focus on identifying patterns related to:

- Reasons for engaging or avoiding the child support program
- Perceived risks and protective strategies
- Positive and negative interactions with child support staff and courts
- Structural barriers (e.g., financial disincentives, lack of trauma-informed practices)

Transcripts will be coded using NVivo, and a codebook will be developed through a combination of deductive codes (drawn from interview guide topics and research questions) and inductive codes (emerging from the data). Codes will be grouped into thematic categories and subthemes. Researchers will examine theme frequency, co-occurrence, and variation across survivor characteristics (e.g., whether the survivor has accessed or not accessed child support services, state, parental status). Double-coding and team discussions will ensure consistency and validity.

Instrument 2: SAVES Quantitative Survey with DV Survivors

Survey data will be analyzed to describe and compare the experiences of survivors with the child support program, focusing on:

- Perceived safety risks and supports
- Barriers to access or engagement (e.g., housing, income, abuser behavior)
- Motivations for using or avoiding the child support program
- Program responsiveness and satisfaction

Data will be downloaded from Qualtrics and then uploaded into SPSS for data analysis. After reviewing and cleaning the data, CPR researchers will analyze descriptive statistics for the sample. These descriptive statistics will include summarizing key variables, including frequencies, means, and standard deviations. Additionally, tests for statistical significance, such as chi-square tests, t-tests, or ANOVA will also be conducted to compare responses by survivor type (engaged with child support vs. not engaged with child support), demographics, geography, income level, and presence of ongoing abuse. Open-ended responses will be thematically analyzed to support interpretation of patterns in the quantitative data.

Instrument 3: SAVES Quantitative Survey with DV Advocates

Responses from DV advocates will be analyzed to understand:

- Challenges within the child support program that affect the ability of survivors to access safe and supportive services
- Perceived effectiveness of safety-focused interventions
- Interagency collaboration and staff responsiveness
- Gaps in policy, training, or survivor accommodations

Data will be downloaded from Qualtrics and then uploaded into SPSS for data analysis. After reviewing and cleaning the data, CPR researchers will analyze descriptive statistics for the sample. Descriptive statistics including frequencies, means, and standard deviations will be used to summarize trends across items. Subgroup comparisons to determine statistical significance may be conducted using chi-square, t-tests, or ANOVA where sample sizes allow. Open-text responses will be coded thematically using NVivo to extract common recommendations, observed barriers, and success stories from the advocate's perspective.

Instrument 4: SAVES Focus Groups with Child Support Staff at Demonstration Sites

A thematic analysis approach will be used to explore staff experiences with implementing safety-focused interventions.

Areas of analysis include:

- Staff expectations and evolving perceptions of the intervention
- Implementation successes and challenges
- Impact on staff roles, workflows, and daily operations
- Perceived effects on the experiences and safety of survivors
- Changes in internal and external collaboration
- Shifts in agency culture and communication around safety and trauma
- Lessons learned and recommendations for the field
- Staff perspectives on sustainability and future needs

Transcripts will be coded using NVivo and a codebook structured around the core implementation research questions. Comparative analysis across demonstration sites will be conducted to identify shared challenges and promising practices.

Instrument 5: SAVES Qualitative Interviews with Clients Receiving Safety-Focused Intervention Services at Demonstration Sites

Analysis will focus on the DV survivor's firsthand experience with newly implemented safety-focused interventions (e.g., trauma-informed intake, safe parenting time arrangements, specialized staff). Key domains include:

- Accessibility and responsiveness of services
- Sense of safety during and after engagement
- Outcomes (e.g., continued use, improved safety or support)
- Recommendations for improvement

Data will be coded thematically using a survivor-informed codebook developed in consultation with survivor advisors. Themes will be compared across intervention types and sites to identify patterns in participant feedback.

Data Use

Instrument 1: SAVES Qualitative Interviews with DV Survivors

The data will inform efforts to strengthen child support agency practices that promote safety for DV survivors navigating the child support program. Findings will help identify survivor-defined safety concerns and barriers to engagement. The SAVES Center will summarize results in reports and briefs to support local implementation and shared learning. While not generalizable, the insights will guide practice refinement and trauma-informed service design. Results will not be generalizable, and this limitation will be clearly stated in all reporting.

Instrument 2: SAVES Quantitative Survey with DV Survivors

Survey findings will support efforts to improve safety and access in the child support programs. Data will be used to assess patterns in the experiences of survivors, informing local adaptations and technical assistance. A findings report and summary brief will be developed to share key findings with sites and the broader field, with the understanding that results are not intended to be generalizable.

Instrument 3: SAVES Quantitative Survey with DV Advocates

The data will inform improvements in how child support programs collaborate with DV advocates. The survey will highlight advocate-identified barriers and recommendations to strengthen support for survivors. Findings will be summarized in a brief and could be shared publicly to inform broader conversations on cross-system coordination. Results will not be generalizable, and this limitation will be clearly stated in all reporting.

Instrument 4: SAVES Focus Groups with Child Support Staff at Demonstration Sites

Focus group data will help describe the implementation and perceived impact of safety-focused interventions at SAVES demonstration sites. Results will inform local adjustments and highlight emerging practices. The SAVES Center will summarize findings in reports and briefs to support continuous learning and guide improvements at the site level. Results will not be generalizable, and this limitation will be clearly stated in all reporting.

Instrument 5: SAVES Qualitative Interviews with Clients Receiving Safety-Focused Intervention Services at Demonstration Sites

The data will provide the perspective of survivors on the safety-focused interventions implemented at the 13 SAVES demonstration sites. Insights will be used to assess how these changes are experienced by survivors and to identify the remaining gaps. The SAVES Center will share findings with sites to highlight clients' perceived outcomes from the safety-focused interventions and future program support program improvement. Results will not be generalizable, and this limitation will be clearly stated in all reporting.

B8. Contact Persons

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Attachments

Instruments

- Instrument 1: SAVES Qualitative Interviews with DV Survivors
- Instrument 2: SAVES Quantitative Survey with DV Survivors
- Instrument 3: SAVES Quantitative Survey with DV Advocates
- Instrument 4: SAVES Focus Groups with Child Support Staff at Demonstration Sites
- Instrument 5: SAVES Qualitative Interviews with Clients Receiving Safety-Focused Intervention Services at Demonstration Sites

Appendices

- Appendix A: Information and Consent Sheet for Instrument 1
- Appendix B: Information and Consent Sheet for Instrument 2
- Appendix C: Information and Consent Sheet for Instrument 3
- Appendix D: Information and Consent Sheet for Instrument 4
- Appendix E: Information and Consent Sheet for Instrument 5