State PREP and Competitive PREP Grantee Evaluation Activities Survey

Introduction

Thank you for taking the **State PREP and Competitive PREP Grantee Evaluation Activities Survey**!

What is the purpose of the survey? Your Local Evaluation Support providers would like to learn about your State (SPREP) or Competitive PREP (CPREP) project's current evaluation plans and any local evaluation support needs your project might have now or in the future. Your answers will help us provide the most helpful resources and support. *The survey should take about 10 minutes to complete.*

What kinds of questions does it ask? This survey includes questions about your SPREP/CPREP project, contact information, plans or activities related to data collection and dissemination, and evaluation-related topics where you'd like to know more or need support. *This survey is about your current SPREP or CPREP grant only.*

Who should fill out the survey? All SPREP and CPREP grantees—whether you're planning evaluation activities or not. If your PREP project has a local evaluator or someone else who works with program data, you may wish for them to complete the survey on your project's behalf. Your grant's survey link is unique, so you can share it between staff members, save your answers, and submit it when you are done filling it out.

Please complete the survey by DATE.

For more background on the purpose of the survey, continue reading. If you are ready to proceed to the first question, click HERE.

[Button to go to first survey question – here and at the bottom of the page, after Background]

Background

The PREP Local Evaluation Support and Dissemination (PLESD) project is funded by the Family and Youth Services Bureau and overseen by the Office of Planning, Research, and Evaluation, both within the Administration for Children and Families (ACF). As part of this project, Abt Global (formerly Abt Associates) and Child Trends are working to provide local evaluation support (often referred to as evaluation "technical assistance" or TA) to Personal Responsibility Education Program (PREP) grantees. Specifically, we are conducting this survey to better understand any local evaluations State and Competitive PREP grantees have planned or are considering and their needs for support or technical assistance.

The purpose of this information collection is to understand the local evaluation plans of State and Competitive PREP grantees, and their support needs. Public reporting burden for this collection of information is estimated to average 10 minutes per respondent, including the time for reviewing instructions, gathering, and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0531 and the expiration date is 9/30/2025. If you have any comments on this collection of information, please contact Selma Caal (Selma.Caal@acf.hhs.gov).

Local evaluations are separate from performance measurement and are conducted by an independent evaluator or "local evaluator." Local evaluations may focus on how a program is being implemented in practice or may focus on program outcomes. For more information about the differences between performance measurement and local evaluation, see this resource from the PLESD team.

Who should complete the survey and why? We encourage each SPREP and CPREP grantee to complete the survey to help ensure their needs are reflected in upcoming local evaluation-related resources and support. While State and Competitive PREP grantees are not required to conduct a local evaluation of their program, some grantees may opt to do so. Even if you are not planning to conduct a local evaluation right now, we ask that you still complete the survey. While the survey responses should reflect the grantee's current plans or expectations, these responses are *non-binding*; they are simply a means of understanding grantees' plans, goals, and needs for data collection and other local evaluation activities. This survey is voluntary.

What kinds of questions does this survey ask? This survey covers the following topics:

- Grantee organization and staff information
- Program models, priority populations, etc.
- Types of data you are collecting or plan to collect
- Plans for using data
- Partnerships for conducting evaluation-related activities
- Plans for engaging an IRB
- Dissemination plans
- Local evaluation support interests

You may need input from other project staff, including a local evaluator, to answer all the questions in this survey.

Who sees the information you provide? This survey collects information that will be seen by two different groups:

1. Information about your project (e.g., priority/target population, program setting, curricula/program models used) and contact information of key project personnel (name, role on the project, and professional email address) will be placed on the PLESD internal website in a grantee profile so you and other grantees can connect for networking purposes. This information will be accessible to the PLESD project team, OPRE, the Family and Youth Services Bureau (FYSB), and other PREP grantees.
2. We will also ask you about your local evaluation plans including data collection activities and interest in local evaluation support. Your responses to these questions will **not** be shared with other PREP grantees. Individual program responses will not be shared with OPRE or FYSB. Instead, the study team will combine responses from all State and Competitive PREP programs to help assess overall evaluation activities and determine the types of group-based local evaluation supports that would likely benefit most grantees.

Any other questions? Contact PREPLES@abtglobal.com.

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Let's begin the survey!

[Button going to next page]

Grantee information

1. **Are you completing this survey on behalf of a State PREP or Competitive PREP grant? *(select one)***
    a. State PREP (SPREP)
    b. Competitive PREP (CPREP)

2. *[If selected 'b' for question 1 (CPREP)]* **Are you a *continuing* Competitive PREP grantee? In other words, did you receive Competitive PREP funding in the last funding cycle (from 9/30/2021-9/29/2024)?**
    a. Yes
    b. No
    c. Not sure

3. *[If selected 'a' for question 1 (SPREP) or 'a' for question 2 (a continuing CPREP grantee)]* **Are you continuing any program delivery or other implementation activities from the previous grant cycle?**
    a. No, starting all new implementation activities.
    b. Yes, continuing some implementation activities from the previous grant cycle, but some are new for this cycle.
    c. Yes, all implementation activities planned for this PREP grant cycle are ones that were delivered in the previous grant cycle.

4. *[If selected 'a' for question 1 (SPREP) or 'a' for question 2 (a continuing CPREP grantee)]* **Are you continuing any evaluation-related activities from the previous grant cycle (aside from collecting and reporting the required performance measures)?**
    a. No, starting all new evaluation-related activities.
    b. Yes, continuing some evaluation-related activities from the previous grant cycle, but some are new for this cycle.
    c. Yes, all evaluation-related activities planned for this PREP grant cycle are ones that were conducted in the previous grant cycle.

5. **What is your name, email address, and role on your PREP grant? (the primary person completing this survey)**
    First name: _____
    Last name: _____
    Email address: _____
    Organization: _____
    Role: _____

6. **What is the name of the grantee organization or entity that received funds from FYSB/ACF for this PREP grant?**

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Grantee name: _____

7. **Who is the main point of contact for this PREP grant (in other words, who oversees day-to-day operations)?**
   [Include check-box for "Same as the person completing this survey? Yes/No" and remove the rest of the response fields for this question if they select "Yes"]
   First name: _____
   Last name: _____
   Email address: _____
   Organization: _____
   Title/Role on PREP Grant: _____

8. **What is the name and email address of the *Lead Evaluator* (if applicable) of this PREP grant?**
   [User does not need to fill in any of these fields to submit survey]
   [Include check-box for "Same as the person completing this survey? Yes/No" and remove the rest of the response fields for this question if they select "Yes"]
   __Not applicable
   First name: _____
   Last name: _____
   Email address: _____
   Organization: _____

Program information

9. **What *program models* are you implementing for this PREP grant?**
   The "program model" includes the core curriculum plus other lessons or activities that may be integrated with the core curriculum to meet the PREP funding objectives (for example, to include adulthood preparation subjects) **(Select all that apply).**

   a. Be Proud! Be Responsible!
   b. Draw the Line/Respect the Line
   c. Love Notes
   d. Making Proud Choices!
   e. Reducing the Risk
   f. Teen Outreach Program
   g. Not sure yet
   h. Other
      Please specify: _____

10. **What *age groups* do you plan to serve with this PREP grant? (Select all that apply.)**

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a. Ages 11 or below
b. Ages 12-14
c. Ages 15-18
d. Age 19 and above

11. Which of the following *priority populations* do you plan to serve with this PREP grant? (Select up to 5 from this list.)

a. Youth in high-need geographic areas (e.g., a county, school district, or other geographic area with a high teen birth rate)
b. Primarily male youth
c. African American youth
d. Hispanic/Latino youth
e. Youth in foster care
f. Youth in adjudication systems
g. Native American youth
h. Pregnant or parenting youth
i. Homeless or runaway youth
j. Youth in residential treatment for mental health issues
k. Out-of-school or dropout youth
l. Trafficked youth
m. Youth living with HIV/AIDS
n. LGBTQ youth
o. Not sure yet
p. Other
Please specify: _____

12. In what *setting(s)* do you plan to implement this PREP grant? (Select all that apply.)

a. In non-charter public school during the school day
b. In private or charter school during the school day
c. After school, in a school setting
d. In a community-based organization
e. In a clinic
f. In a foster care setting
g. In a juvenile detention center
h. In a residential mental health treatment facility
i. Virtual classroom
j. Virtual self-paced (e.g., an app)
k. In another setting
Please specify: _____
l. Not sure yet

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Evaluation information

Some grantees may only be collecting and reporting the required performance measures, others may be conducting additional activities to answer project-specific research questions; some may be just starting out with evaluation planning, whereas others may be continuing ongoing data collection and other evaluation-related activities. The questions below will help us to gain a sense of your plans and where you are with your evaluation activities and to anticipate what supports may be helpful.

13. **What are the sources of the data you are collecting or plan to collect as part of this PREP grant? (Select all that apply.)**
    a. Surveys (including required participant entry and exit surveys and/or other surveys)
    b. Focus groups
    c. Interviews
    d. Observations of program delivery
    e. Fidelity logs
    f. Attendance logs
    g. Administrative data
    (Data collected as part of the management and operations of a publicly funded program or service.)
    h. Not sure yet
    i. Other
    Please specify: _____

14. **What types of surveys are you administering or planning to administer? (Select all that apply.)**
    a. Required participant entry and exit surveys with *no additional survey questions added*
    b. Required participant entry and exit surveys with *additional survey questions added*
    c. Other youth surveys (separate from required surveys)
    d. Parent/caregiver surveys
    e. Staff surveys (e.g., facilitators, other program staff, partner staff)
    f. Not sure yet
    g. Other surveys
    Please specify: _____

15. **Are you planning on linking any surveys over time? (By "linking" we mean matching surveys completed by the same person over time, using personal identifiers or a unique study ID.) (Select one.)**
    a. Yes – we plan to link some or all surveys over time
    b. No – we do not plan to link any surveys over time
    c. Not sure

16. *[If 'b' is selected in Q13]* **What types of focus groups are you conducting or planning to conduct? (Select all that apply.)**
    m. Youth focus groups
    n. Parent focus groups
    o. Facilitator and/or other program staff focus groups

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p. Implementation partner focus groups
q. Not sure yet
r. Other focus groups
Please specify: _____

17. *[If 'c' is selected in Q13]* **What types of interviews are you conducting or planning to conduct? (Select all that apply.)**
    a. Youth interviews
    b. Parent interviews
    c. Facilitator and/or other program staff interviews
    d. Implementation partner interviews
    e. Not sure yet
    f. Other interviews
    Please specify: _____

18. How do you plan to use the data collected? (Select all that apply.)
    a. To report the required performance measures to FYSB/ACF
    b. To monitor program implementation or outcomes in order to make the program better in real time (continuous quality improvement)
    c. To assess how the program is being implemented in practice (process evaluation)
    d. To evaluate the program without a comparison/control group (descriptive evaluation)
    e. To evaluate the program with a comparison/control group (impact evaluation)
    f. To report data to interested parties (for example, subrecipients, community partners, program participants)
    g. To support fundraising, program buy-in, and other program sustainability efforts
    h. To use or report data for another purpose
    Please specify: _____
    i. Not sure yet

19. *[If 'd', 'e', or 'f' is selected in Q18]* **At what stage of your evaluation (for the newest PREP grant/funding cycle) are you now? (Select all that apply.)**
    a. Planning
    b. Working with an institutional review board (IRB)
    c. Recruitment
    d. Data collection
    e. Data analysis
    f. Interpreting results
    g. Preliminary reporting
    h. Final reporting
    i. Dissemination
    j. Not sure
    k. Other
    Please specify: _____

20. Are you working with an evaluator?

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a. No, not working with an evaluator and do not plan to
b. Not yet, but plan to work with an evaluator who is internal to the grantee organization/agency for this PREP grant
c. Not yet, but plan to work with an evaluator who is external to the grantee organization/agency for this PREP grant
d. Yes, evaluator is internal to the grantee organization/agency
e. Yes, evaluator is external to the grantee organization/agency
f. Not sure yet
g. Other
Please specify: _____

21. Have you engaged with an institutional review board (IRB) for this PREP grant?

a. No, not working with an IRB and do not plan to
b. Yes, IRB is internal to the grantee organization/agency
c. Yes, IRB is external to the grantee organization/agency
d. Not yet, but plan to work with an IRB who is internal to the grantee organization/agency for this PREP grant
e. Not yet, but plan to work with an IRB who is external to the grantee organization/agency for this PREP grant
f. Not familiar with the role of an IRB
g. Unsure
h. Other
Please specify: _____

22. *[If 'b' or 'c' or 'd' or 'e' is selected in Q21]* **What is the current status of your engagement with an institutional review board for this PREP grant?**

a. Working to identify an IRB
b. Plan to apply for IRB review
c. Applied for IRB review (no response yet)
d. Approved by IRB
e. Plan to apply for an IRB exemption for our data collection plans
f. Applied for exemption (no response yet)
g. An IRB determined that our data collection plans are exempt from review
h. We are not conducting research therefore an IRB has determined that our data collection plans do not require approval or exemption
i. Unsure
j. Other
Please specify: _____

23. **What are your plans for communicating the results from data you collect and analyze for this PREP grant? (Select all that apply.)**

a. A grant report shared with FYSB/ACF
b. A written report or summary that will be shared only internally within your agency/organization

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c. A written report, summary, or presentation to be shared with external partners
d. A presentation at a professional conference or grantee meeting
e. An academic journal article
f. Shorter products that translate evaluation findings for non-research audiences (e.g., briefs, infographics, tip sheets)
g. We do not have any formal communication strategies planned
h. Unsure
i. Other
Please specify: _____

Local Evaluation Support

The PREP Local Evaluation Support and Dissemination (PLESD) Team can provide CPREP and SPREP grantees with local evaluation support (often referred to as evaluation technical assistance or TA) through office hours, webinars, written resources, and through discussions via requests made through the PREP LES website (https://www.preplesd.com) or by email at PREPLES@abtassoc.com.

24. **Please select the topics for which you would most like to receive local evaluation support for this PREP grant. (Select all that apply.)**
    a. Evaluation planning and design
    b. Involving youth in the evaluation process
    c. Working with an IRB
    d. Participant recruitment, tracking, and consent
    e. Quantitative data collection
    f. Quantitative data analysis
    g. Qualitative data collection
    h. Qualitative data analysis
    i. Reporting and dissemination
    j. Other
    Please specify:_____
    k. None

25. **How helpful are each of the following approaches for receiving local evaluation support? (Not helpful, Somewhat helpful, Very helpful, Unsure)**

    a. Unfacilitated conversations with other grantees
    b. Facilitated conversations with other grantees
    c. Office hours
    d. One-page guidance documents
    e. Multi-page guidance documents
    f. Webinar trainings
    g. One-on-one support as needed
    h. Other
    Please specify:_____

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26. **Which of the following topics would you or someone from your project team be comfortable helping another PREP grantee navigate? (For example, through one-on-one conversations, participating in a workshop or community of learning, or providing examples or other content to be used in a webinar or written resource.) (Select all that apply.)**
    a. Evaluation planning and design
    b. Involving youth in the evaluation process
    c. Working with an IRB
    d. Participant recruitment, tracking, and consent
    e. Quantitative Data collection
    f. Quantitative data analysis
    g. Qualitative data collection
    h. Qualitative data analysis
    i. Reporting and dissemination
    j. Other
       Please specify:_____
    k. None

27. **Do you have any other requests or suggestions for how the PLESD team can best support CPREP and SPREP evaluations?**

    _____
    _____
    _____

Website access and email communication

28. **The PLESD team has developed a website to help provide local evaluation support to PREP grantees. Please provide the contact information of members of your project team (including those from the grantee organization and partner organizations) that will need access to log in to the PLESD website for local evaluation support.**

    These team members will also be added to the PLESD email list to receive email communication about PREP local evaluation support. Emails will be sent from PREPLES@abtglobal.com.

    a. First name: _____
    b. Last name: _____
    c. Email address: _____
    d. Organization: _____
    e. Role on grant: _____

    + Add another person

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Submit

Once you have completed the survey, please select the "submit" button, below.

SUBMIT SURVEY *[<-"submit survey" button]*

[Thank-you page after they complete the survey]:

Thank you for completing the State PREP and Competitive PREP Grantee Evaluation Activities Survey!

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