CATI ON
C:Lane County Agency Survey Final Draft

Q:HELLO1
T:
  Hello, may I please speak with   (name)   ?

        1 YES
          NO ---> REFER TO INTERVIEWER INSTRUCTIONS

T14:
May I speak to _____

(Hello,) this is _____ calling back from the University of Oregon Survey
Research Laboratory to finish a survey we started earlier.

      1 --> TO CONTINUE
I:
Key 1

Q:HELLO2

T:
  Hello, this is _____ calling from the University of Oregon Survey Research
Laboratory. The Lane County Commission on Children and Families has asked us to
conduct a survey of agencies and programs that provide child and family
services. Did you receive the letter from Patricia Rogers explaining the survey?

  PROBE FOR "YES": Do you have any questions about the survey before we begin?

  PROBE FOR "NO": I can read you a copy of the letter if you wish. (I have it
right here.) The Lane County Commission on Children and Families has asked us to
conduct a 15-minute survey of agencies and programs that provide services to
families and children in the county. I want to assure you that your answers are
completely confidential and voluntary. Do you have any questions about the
survey before we begin?

    1 NO QUESTIONS OR QUESTIONS ANSWERED
    HAS QUESTIONS ---> REFER TO INTERVIEWER INSTRUCTIONS

I:
Key 1

Q:COOPERAT

T:
   We appreciate your cooperation. (I'd like to begin the survey now.)

         1 OK
         CTRL/END NO, SCHEDULE CALLBACK OR REFUSED

I:
Key 1
QAL NOQAL

Q:DBNAME
T:
   To begin, I would like to verify your agency or program name from the database
that the Commission on Children and Families provided us. Is your agency or
program name _____?

       1 YES --> SKIPTO AGENPROG
       2 NO
   Emery – the agency name(and, in most, the program within agency name)
   should pop up here in bright letters.
   Examples: Birth-to-Three Warm Line, or Birth-to-Three Welcome Baby.
   Birth-to-Three is the agency. Warm Line and Welcome Baby are within-agency
programs.

       7 REFUSED
       8 DON'T KNOW
       9 NO ANSWER

I:
Key 1,2, 7-9

Q:DBNAME2
T:
   What is your (agency's/program's) actual name?

   OPEN-ENDED

     TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:AGENPROG
T:
   Is this a program within an agency, or is it an agency itself?

       1 PROGRAM
       2 AGENCY --> SKIPTO NONPROF
       3 BOTH
       4 OTHER--> SKIPTO NONPROF

       7 REFUSED
       8 DON'T KNOW
       9 NO ANSWER

I:
Key 1-4, 7-9
SKIPTO NONPROF 2
SKIPTO NONPROF 4

Q:PROGRAM
T:
  READ TO ALL RESPONDENTS ABOUT PROGRAMS WITHIN AGENCIES

  When I ask you these survey questions, please think only about *this program*
within your agency, not about the agency as a whole.

     1 CONTINUE

I:
Key 1

Q:NONPROF
T:
  Is your (agency/program) a private nonprofit or is it public?

     1 PRIVATE NONPROFIT--> SKIPTO GRANT
     2 PUBLIC

     7 REFUSED
     8 DON'T KNOW
     9 NO ANSWER

I:
Key 1,2, 7-9
SKIPTO GRANT 1

Q:GOVT
T:
  Is your (agency/program) part of the city, county, state, or federal
government?

  PROBE: Is that city, county, state, or federal (government)?

     1 YES, CITY
     2 YES, COUNTY
     3 YES, STATE
     4 YES, FEDERAL
     5 YES, A COMBINATION
     6 NO/OTHER

     7 REFUSED
     8 DON'T KNOW
     9 NO ANSWER

I:
Key 1-9

Q:GRANT1
T:
  Do grant monies fund your (agency/program) (wholly or partly)?

1 YES
        2 NO --> SKIPTO STABLE
        3 PARTIALLY

        7 REFUSED
        8 DON'T KNOW
        9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO STABLE 2

Q:GRANT2
T:
   Is grant money less than one-third of your (agency's/program's) funding,
between one-third and two-thirds, or more than two-thirds?

        1 LESS THAN 1/3
        2 BETWEEN 1/3 AND 2/3
        3 MORE THAN 2/3

        7 REFUSED
        8 DON'T KNOW
        9 NO ANSWER

I:
Key 1-3, 7-9

Q:STABLE
T:
   Is your (agency's/program's) funding stable for the next 6 to 12 months?

        1 YES
        2 NO
        3 PARTIALLY

        7 REFUSED
        8 DON'T KNOW
        9 NO ANSWER

I:
Key 1-3, 7-9

Q:SETTING
T:
   Do you take your services to clients, or do clients come to (you/your
agency/your program)?

        1 TAKE TO CLIENTS
        2 CLIENTS COME
        3 IF VOLUNTEERED: BOTH
        4 IF VOLUNTEERED: OTHER

        7 REFUSED
        8 DON'T KNOW

9 NO ANSWER

I:
Key 1-4, 7-9

Q:BILING1
T:
   How much of your (agency/program) materials are available in languages other
than English - all, most, some, or none?

        1 ALL
        2 MOST
        3 SOME
        4 NONE

        7 REFUSED
        8 DON'T KNOW
        9 NO ANSWER

I:
Key 1-4, 7-9

Q:BILING2
T:
   In the past 12 months, have any non-English speakers come to your
(agency/program) seeking help or services?

        1 YES
        2 NO --> SKIPTO DISAB1

        7 REFUSED
        8 DON'T KNOW
        9 NO ANSWER

I:
Key 1,2, 7-9

Q:BILING3
T:
   When non-English speakers come to your (agency/program), who translates most
often - the person's family members or friends, a bilingual staff member, a
bilingual staff member from another (agency/program), or someone else?

        1 CLIENT'S FAMILY, FRIENDS
        2 STAFF MEMBER
        3 OTHER AGENCY'S STAFF MEMBER
        4 SOMEONE ELSE
        5 IF VOLUNTEERED: NO TRANSLATION AT ALL

        7 REFUSED
        8 DON'T KNOW
        9 NO ANSWER

I:
Key 1-5, 7-9

Q:DISAB1
T:
  Can clients with physical disabilities get into your (agency's/program's)
office?

    1 YES
    2 IF VOLUNTEERED: YES, WITH DIFFICULTY; PARTIAL YES
    3 NO

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-3, 7-9

Q:DISAB2
T:
  Can your (agency/program) serve clients who have developmental, cognitive or
emotional disabilities?

    1 YES
    2 NO

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1,2, 7-9

Q:SEX
T:
  Does your (agency/program) primarily serve members of one sex only?

  IF "YES", PROBE: Is that males or females?

    1 YES, MALES ONLY
    2 YES, FEMALES ONLY
    3 NO

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-3, 7-9

Q:FAMILY
T:
  Is your (agency's/program's) mission primarily to serve families (that is,
parents and their children)?

    1 YES
    2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9

Q:AGE
T:
  Is your (agency/program) designed to serve clients of all ages?

  PROBE: Does your agency serve people of all ages (from senior citizens to
teenagers to parents with babies)?

   1 YES --> SKIPTO RACE
   2 NO

   7 REFUSED
   8 DON'T KNOW
   9 NO ANSWER

I:
Key 1,2, 7-9
SKIPTO RACE 1

Q:AGE1
T:
  (Do you/ Does your (agency/program)) serve families with children ages zero to
8?

   1 YES
   2 NO

   7 REFUSED
   8 DON'T KNOW
   9 NO ANSWER

I:
Key 1,2, 7-9

Q:AGE2
T:
  (Do you/ Does your (agency/program) serve families with children age 9 to 18?

   1 YES
   2 NO

   7 REFUSED
   8 DON'T KNOW
   9 NO ANSWER

I:
Key 1,2, 7-9

Q:AGE3
T:

(Do you/ Does your (agency/program) serve youths age 9 to 18, apart from their parents?

    1 YES
    2 NO

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1,2, 7-9

Q:RACE
T:
  Is your (agency's/program's) mission primarily to serve clients of certain race or ethnic groups?

    1 YES
    2 NO

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1,2, 7-9

Q:DISAB
T:
  Is your (agency's/program's) mission primarily to serve clients with certain disabilities (such as, physical, developmental, cognitive, emotional, social, or learning disabilities)?

    1 YES
    2 NO

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1,2, 7-9

Q:RELIG
T:
  Is your (agency's/program's) mission primarily to serve clients of certain religions?

    1 YES
    2 NO

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1,2, 7-9

Q:FEE1
T:
  Are your (agency's/program's) services free to clients, or do clients pay a
fee for service?

    1 FREE --> SKIPTO NUMSER1
    2 PAY FEE
    3 IF VOLUNTEERED: BOTH, IT DEPENDS, IT VARIES

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO NUMSER 1

Q:FEE2
T:
  Is that fee based on a sliding scale?

    1 YES
    2 NO
    3 IF VOLUNTEERED: PARTIAL YES

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1,2, 7-9

Q:NUMSER1
T:
  Could your (agency/program) serve more eligible clients than you do now, given
your current budget?

    1 YES --> SKIPTO SERV1
    2 NO
    3 IF VOLUNTEERED: MAYBE

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERV1 1

Q:NUMSER2
T:
  Is your (agency/program) able to serve all eligible clients who want or need
your help?

1 YES --> SKIPTO SERV1
2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9
SKIPTO SERV1 1

Q:WAITLIST
T:
  Does your (agency/program) now have a waiting list for people you are unable
to serve right away?

1 YES
2 NO
3 IF VOLUNTEERED: PARTIAL YES

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9

Q:SERV1
T:
  Now I need to ask you about specific services your (agency/program) provides.
For each one, please tell me if your (agency/program) provides this service
directly, if you help people to get this service but you don't provide it
directly, or if this service is outside your mission and scope. The first one is
temporary or permanent housing.

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

1 PROVIDE
2 HELP GET
3 OUTSIDE SCOPE
4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV2

T:
  The next one is help for persons and families needing food, clothing, or help
paying utility bills (including school lunches and free food boxes).

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

     1 PROVIDE
     2 HELP GET
     3 OUTSIDE SCOPE
     4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

     7 REFUSED
     8 DON'T KNOW
     9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV3
T:
  (What about/The next one is) transportation services (including van service,
or bus tokens).

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

     1 PROVIDE
     2 HELP GET
     3 OUTSIDE SCOPE
     4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

     7 REFUSED
     8 DON'T KNOW
     9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV4
T:
  (What about/The next one is) helping people find jobs.

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help

people to get it (but not provide it directly), or is this service is outside
your scope?

    1 PROVIDE
    2 HELP GET
    3 OUTSIDE SCOPE
    4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV5
T:
  (What about/The next one is) adult education, job skills, or job training.

  PROBE: Employment assistance for people who are not job ready.

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

    1 PROVIDE
    2 HELP GET
    3 OUTSIDE SCOPE
    4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV6
T:
  (What about/The next one is) child development or childcare (such as
therapeutic settings for the children of disabled adults).

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

    1 PROVIDE
    2 HELP GET
    3 OUTSIDE SCOPE
    4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

7 REFUSED
        8 DON'T KNOW
        9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV7
T:
  (What about/The next one is) child, youth or teen services (such as mentoring,
tutoring, positive role models, support groups, and drug and alcohol abuse
prevention).

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

    1 PROVIDE
    2 HELP GET
    3 OUTSIDE SCOPE
    4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV8
T:
  (What about/The next one is) child out-of-home placement, such as foster care
or help for runaways.

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

    1 PROVIDE
    2 HELP GET
    3 OUTSIDE SCOPE
    4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV9
T:
  (What about/The next one is) help for children and youth who have learning
disabilities, are delayed learners, or who need school enrichment.

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

     1 PROVIDE
     2 HELP GET
     3 OUTSIDE SCOPE
     4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

     7 REFUSED
     8 DON'T KNOW
     9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV10
T:
  (What about/The next one is) help for children and youth who have permanent
physical, developmental, cognitive, or emotional disabilities.

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

     1 PROVIDE
     2 HELP GET
     3 OUTSIDE SCOPE
     4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

     7 REFUSED
     8 DON'T KNOW
     9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV11
T:
  (What about/The next one is) mental health care, counseling, or crisis
intervention for children, youth, and families (including problems with
teenagers and marriages).

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within

your agency (not about the agency as a whole).

   PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

     1 PROVIDE
     2 HELP GET
     3 OUTSIDE SCOPE
     4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

     7 REFUSED
     8 DON'T KNOW
     9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV12
T:
  (What about/The next one is) higher levels of mental health care, counseling,
or crisis intervention for children, youth, and families, for things such as
violence, arson, guns at school, and other inappropriate behavior.

   PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

   PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

     1 PROVIDE
     2 HELP GET
     3 OUTSIDE SCOPE
     4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

     7 REFUSED
     8 DON'T KNOW
     9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV13
T:
  (What about/The next one is) health or medical treatment for children and
youth, including dental, vision, alcohol and drug treatment, or teen pregnancy.

   PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

   PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

     1 PROVIDE

2 HELP GET
3 OUTSIDE SCOPE
4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV14
T:
 (What about/The next one is) health or medical wellness and preventative
services, including immunizations or sex education.

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

   1 PROVIDE
   2 HELP GET
   3 OUTSIDE SCOPE
   4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

   7 REFUSED
   8 DON'T KNOW
   9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV15
T:
 (What about/The next one is) parenting education or support.

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

   1 PROVIDE
   2 HELP GET
   3 OUTSIDE SCOPE
   4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

   7 REFUSED
   8 DON'T KNOW
   9 NO ANSWER

I:

Key 1-4, 7-9

Q:SERV16
T:
  (What about/The next one is) legal services or referrals.

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

    1 PROVIDE
    2 HELP GET
    3 OUTSIDE SCOPE
    4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV17
T:
  (What about/The next one is) community recreation, culture, or art programs
for children and families.

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

  PROBE: (Do you/Does your (agency/program)) provide this service directly, help
people to get it (but not provide it directly), or is this service is outside
your scope?

    1 PROVIDE
    2 HELP GET
    3 OUTSIDE SCOPE
    4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV18
T:
  (What about/The next one is) domestic violence, child abuse, or child
neglect.

  PROBE FOR PROGRAMS: Please remember to think only about *this program* within
your agency (not about the agency as a whole).

PROBE: (Do you/Does your (agency/program)) provide this service directly, help people to get it (but not provide it directly), or is this service is outside your scope?

    1 PROVIDE
    2 HELP GET
    3 OUTSIDE SCOPE
    4 IF VOLUNTEERED: BOTH PROVIDE AND HELP GET

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:SERV19
T:
  If a person or family needs help from (AFS/Adult and Family Services), does your (agency/program) have a set procedure for helping them get those services? (For example, do you have the name of an AFS staff member who will assist them, or does an AFS staff member come to your (agency/program) certain days of the week)?

    1 YES
    2 NO

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1,2, 7-9

Q:BARR1
T:
  Now I need your impressions of what barriers may prevent children, youth, and families from getting the services they need in your (agency/program). For each one I read, please tell me if you think it is often, sometimes, or rarely a barrier (for people you see in your (agency/program)). The first one is people not knowing what services are available or where to look.

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:

Q:BARR2
T:
  What about inability to pay costs and fees for service?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARE
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR3
T:
  What about literacy issues (that is, people not being able to read or write well enough in English)?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR4
T:
  What about lack of childcare or elder care?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR5
T:
  What about fear of the law (such as fear of being caught for something done wrong, or fear of being deported?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR6
T:
  What about people not having enough time, or they think it will be too much hassle?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR7
T:
  What about people thinking they will have to give too much personal information?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR8
T:
  What about lack of transportation or lack of a telephone?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in
your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR9
T:
  What about shame, embarrassment or pride?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in
your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR10
T:
  What about people thinking they don't need the help when they actually do need
it?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in
your (agency/program).

    1 OFTEN
    2 SOMETIMES

3 RARELY
4 IF VOLUNTEERED: NEVER

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR11
T:
  What about your (agency/program) being too far away or in an inconvenient
location?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in
your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR12
T:
  (What about) your (agency/program) having inconvenient hours of operation?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in
your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR13
T:
  (What about) staff members being too busy to be nice to clients (such as being
distracted, rude, not answering questions, or ignoring people)?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in
your (agency/program).

1 OFTEN
2 SOMETIMES
3 RARELY
4 IF VOLUNTEERED: NEVER

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR14
T:
  (What about) staff members being culturally insensitive (such as acting in a racist manner, not knowing traditional holidays, or speaking only English)?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

1 OFTEN
2 SOMETIMES
3 RARELY
4 IF VOLUNTEERED: NEVER

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR15
T:
  (What about) a waiting list to get your (agency's/program's) help?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

1 OFTEN
2 SOMETIMES
3 RARELY
4 IF VOLUNTEERED: NEVER

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR16
T:
  (What about) too much red tape (too many rules, or confusing eligibility requirements) to get your (agency's/program's) help?

PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR17
T:
  (What about) your (agency's/program's) services not being available in some parts of Lane County?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:BARR18
T:
  (What about) your (agency/program) not giving information or help when people ask for it?

  PROBE: Is this often, sometimes, or rarely a barrier for people you see in your (agency/program).

    1 OFTEN
    2 SOMETIMES
    3 RARELY
    4 IF VOLUNTEERED: NEVER

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-4, 7-9

Q:ENDING1
T:
  That's the end of the survey! Is there anything else you would like to add
about the quality or delivery of services to families and their children in your
(agency/program)?

  OPEN-ENDED

    TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:INTCOMM
T:
  (Thank you.) On behalf of the Lane County Commission on Children and Families,
I thank you sincerely for your time and opinions on these questions. (Have a
nice day). Good-bye.

  INTERVIEWERS: PLEASE ADD ANY COMMENTS PERTINENT TO THE STUDY GOALS.

    TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:INTID
T:
INTERVIEWER: NICE JOB! PLEASE ENTER YOUR ID NUMBER BELOW.
I:
num 1 999 3 0 20 10
CPL
DISPOS = 26
ENDQUEST

Q:NOQAL
T:
SINCE THIS IS A LIST SAMPLE THERE SHOULD BE NO NOQUALS
I:
KEY 1
DISPOS = 22