

Fresno FAWDB Fire Program Evaluation

Clinicaltrials.gov ID: NCT05239754

Study Protocol

1/16/2025

PROGRAM BACKGROUND

1. PROGRAM SUMMARY

Please provide a brief summary of your grant project including the needs to be addressed, the services provided, and the population served.

The Fresno region of California, at both the city and county levels, is a region impacted by high rates of poverty and unemployment. Prior research suggests that poverty is often inextricably linked to high crime rates. High crime rates can then lead to high rates of incarceration, thereby contributing to chronic father absenteeism and the breakdown of healthy families. The purpose of the Fresno Fatherhood program is to employ a comprehensive and holistic healthy marriage, responsible parenting and economic stability education and related services to at-risk adult community fathers (i.e., 18 and older) who have children aged 24 years or younger and reside in areas of high poverty. While the program does not plan on serving only fathers who are housed in treatment facilities, non-custodial, or justice involved, the grantee (FAWIC) expects that many will have these characteristics.

The core services of Fresno Fatherhood include: healthy marriage, responsible parenting, and economic stability education and services. These services will be delivered by using a primary workshop focused on fatherhood skills using the National Fatherhood Initiative's 24/7 Dad evidence-based/evidence-informed curricula; job readiness services, including career exploration and planning; job-driven employment services, including development of skills tied to demand jobs in growth sectors of the local economy; job placement assistance; intensive case management and service navigation support; mentoring to encourage and support fathers in applying the knowledge and skills they acquire through the project; supplemental workshops focused on life skills, financial literacy and personal development; and referrals to a full array of support services through both grant-funded and leveraged resources. FAWIC will provide parenting and relationship instruction via a primary workshop to 63 fathers in year 1 and 125 annually in years 2-5.

The purpose of the Fresno Fatherhood program evaluation is to determine whether Fresno Fatherhood program participants experience significant improvements in outcomes around parenting, co-parenting, employment, job readiness, and financial stability. Understanding the ways in which the Fresno Fatherhood program is effective in supporting healthy parenting and financial stability outcomes is extremely important for providers to replicate evidence-based practices for other at-risk father populations.

2. EVALUATION GOALS

Please briefly describe key goals of your evaluation and what you hope to learn below.

The goals of the Fresno Fatherhood evaluation project are to determine whether Fresno Fatherhood program participants will experience significant improvements in the following areas:

- Parenting attitudes and behaviors
- Co-parenting behaviors
- Financial stability attitudes and behaviors
- Employment attitudes and behaviors

3. EVALUATION ENROLLMENT

Please provide the expected start and end dates for program and evaluation enrollment using the tables below. For impact studies, please indicate expected start and end dates for each study group.

IMPLEMENTATION EVALUATION		
<i>Please leave blank if not conducting an implementation study.</i>		
	Program Enrollment	Study Enrollment
Start Date	4/1/2021	4/1/2021
End Date	3/31/2025	3/31/2025
Definition	All participants in 1 st year of study with no pilot program	All participants enrolled in study

DESCRIPTIVE EVALUATION		
<i>Please leave blank if not conducting a descriptive outcome evaluation.</i>		
	Program Enrollment	Study Enrollment
Start Date	4/1/2021	4/1/2021
End Date	7/1/2025	5/10/2024
Definition	All participants in 1 st year of study with no pilot program	All participants enrolled in study

4. EVALUATION TIMELINE

Please include a timeline for key activities of the evaluation below. Example of activities may include IRB submission, staff training, waves of data collection, analysis period, and report writing and submission.

Evaluation Activity	Start Date	End Date
Additional Evaluation staff hiring and onboarding	1/15/2021	2/15/2021
Evaluation staff training	1/22/2021	2/20/2021
Evaluation Kickoff meeting and orientation with all program staff	2/10/2021	2/10/2021
IRB training and certification by all program and evaluation staff	10/1/2020	2/28/2021
Development and submission of Evaluation Plan document	1/15/2021	2/19/2021
Evaluation Tools Development	10/1/2020	3/15/2021
IRB Approval	3/1/2021	3/15/2021
CQI Team Formed and Meeting bi-weekly	3/15/2021	7/1/2025
Training for CQI Team	3/15/2021	3/28/2021
Training for all Program Staff on Research Methods and process	3/15/2021	3/28/2021
Evaluation Data Collection	4/1/2021	5/10/2025
- Baseline Data	4/1/2021	5/10/2024
- Post Test Data	5/15/2021	7/1/2024
- Follow-up Data	4/1/2022	5/31/2025
Implementation Evaluation Activities related to I1 – I3 questions i.e. CQI Team meetings to review reports around monitoring service data and cleanliness of data, etc.	4/1/2022	8/15/2025
Final Report Submitted	9/1/2025	9/29/2025

** you may add rows by hitting the tab button, or right click and select insert row below*

EVALUATION PLAN

1. RESEARCH QUESTIONS

1.1.OVERVIEW OF RESEARCH QUESTIONS

Please state the research questions(s) that the evaluation intends to answer and for each research question indicate the type: implementation or outcome.

- *Implementation Questions: Identifying whether a program has been successful in attaining desired implementation goals (e.g., reaching intended target population, enrolling intended number of participants, delivering training and services in manner intended, etc.)*
- *Outcome Questions: Identifying whether program is associated with intended outcomes for participants (e.g., do participants' knowledge, attitudes, behaviors, or awareness change?)*

No	Research Question	Implementation or Outcome?
I1	To what extent were services offered and provided as intended?	Implementation
I2	To what extent is the Fresno Fatherhood curriculum and services offered to and completed by participants?	Implementation
I3	To what extent did the CQI Team carry out the steps in the CQI Plan each program year?	Implementation
R1	Will Fresno Fatherhood program participants experience significant increases in healthy parenting attitudes/beliefs/expectations after completing the Fresno Fatherhood program?	Outcome
R2	Will Fresno Fatherhood program participants experience significant increases in healthy parenting behaviors one year after program enrollment?	Outcome
R3	Will Fresno Fatherhood program participants experience significant increases in healthy co-parenting behaviors one year after program enrollment?	Outcome
R4	Will Fresno Fatherhood program participants experience significant increases in healthy employment attitudes/beliefs/expectations after completing the Fresno Fatherhood program?	Outcome

R5	Will Fresno Fatherhood program participants experience significant increases in healthy employment behaviors one year after program enrollment?	Outcome
R6	Will Fresno Fatherhood program participants experience significant increases in healthy financial attitudes/beliefs/expectations after completing the Fresno Fatherhood program?	Outcome
R7	Will Fresno Fatherhood program participants experience significant increases in healthy financial behaviors one year after program enrollment?	Outcome

* you may add rows by hitting the tab button, or right click and select insert row below

1.2. OUTCOME RESEARCH QUESTIONS

For each outcome research question listed above, whether a descriptive or impact design, summarize the inputs (e.g., program components, program supports, implementation features, etc.), target population (e.g., the population for which the effect will be estimated) and the outcomes (e.g., child well-being, father-child engagement, etc.) that will be examined to answer the research question(s). Comparisons for descriptive evaluations may reflect circumstances before the grant, pre-treatment, or pre-determined benchmark from other studies with similar interventions.

Research Question Number <i>Should correspond to the number indicated in Table 1.1 above</i>	Intervention <i>Program component or set of activities that the evaluation will test or examine</i>	Target Population <i>Population for which the effect of the treatment will be estimated</i>	Comparison <i>What the intervention will be compared to (e.g., pre-intervention for descriptive designs)</i>	Outcome <i>Changes that are expected to occur as a result of the intervention</i>	Confirmatory or Exploratory? <i>Confirmatory: those upon which conclusions will be drawn</i> <i>Exploratory: those that may provide additional suggestive evidence</i>
R1	Interventions to be tested are the combination of the curriculum and services provided: 24/7 Dad curriculum,	Community fathers (ages 18 and older), who have children ages 24 and younger and reside in communities	Pre-intervention responses will be compared with responses collected immediately following program completion	We expect that program participants will experience a significant increase in healthy parenting attitudes/beliefs/expectations after completing the Fresno Fatherhood program.	Exploratory

	Job Readiness and Post-Employment support	with high rates of poverty.	(post-intervention).		
R2	Interventions to be tested are the combination of the curriculum and services provided: 24/7 Dad curriculum, Job Readiness and Post-Employment support	Community fathers (ages 18 and older), who have children ages 24 and younger and reside in communities with high rates of poverty.	Pre-intervention responses will be compared with responses collected 1-year post-enrollment (follow up).	We expect that program participants will experience a significant increase in healthy parenting behaviors one year after program participation.	Exploratory
R3	Interventions to be tested are the combination of the curriculum and services provided: 24/7 Dad curriculum, Job Readiness and Post-Employment support	Community fathers (ages 18 and older), who have children ages 24 and younger and reside in communities with high rates of poverty.	Pre-intervention responses will be compared with responses collected 1-year post-enrollment (follow up).	We expect that program participants will experience a significant increase in healthy co-parenting behaviors one year after program participation.	Exploratory
R4	Interventions to be tested are the combination of the curriculum and services provided: 24/7 Dad curriculum, Job Readiness	Community fathers (ages 18 and older), who have children ages 24 and younger and reside in communities with high	Pre-intervention responses will be compared with responses collected immediately following program completion(post-intervention).	We expect that program participants will experience a significant increase in healthy employment attitudes/beliefs/expectations after completing the Fresno Fatherhood program.	Exploratory

	and Post-Employment support	rates of poverty.			
R5	Interventions to be tested are the combination of the curriculum and services provided: 24/7 Dad curriculum, Job Readiness and Post-Employment support	Community fathers (ages 18 and older), who have children ages 24 and younger and reside in communities with high rates of poverty.	Pre-intervention responses will be compared with responses collected 1-year post-enrollment (follow up).	We expect that program participants will experience a significant increase in healthy employment behaviors one year after program participation.	Exploratory
R6	Interventions to be tested are the combination of the curriculum and services provided: 24/7 Dad curriculum, Job Readiness and Post-Employment support	Community fathers (ages 18 and older), who have children ages 24 and younger and reside in communities with high rates of poverty.	Pre-intervention responses will be compared with responses collected immediately following program completion (post-intervention).	We expect that program participants will experience a significant increase in healthy financial attitudes/beliefs/expectations after completing the Fresno Fatherhood program.	Exploratory
R7	Interventions to be tested are the combination of the curriculum and services provided: 24/7 Dad curriculum, Job Readiness and Post-	Community fathers (ages 18 and older), who have children ages 24 and younger and reside in communities with high rates of poverty.	Pre-intervention responses will be compared with responses collected 1-year post-enrollment (follow up).	We expect that program participants will experience a significant increase in healthy financial behaviors one year after program participation.	Exploratory

Employment
support

* you may add rows by hitting the tab button, or right click and select insert row below

2. BACKGROUND

For each outcome research question listed in 1.1, whether descriptive or impact design, briefly summarize the previous literature or existing research that informs the stated research question and how the evaluation will expand the evidence base. Explain why the research questions are of specific interest to the program and/or community. Only a short summary paragraph description is needed below. Additional documentation, such as a literature review, may be appended to this document.

Research Question	Existing Research	Contribution to the Evidence Base	Interest to the Program and/or Community
R1	<i>Many fathers lack the skills to engage in healthy parenting, co-parenting, partner relationship, and financial behaviors. There is limited research about the effectiveness of fatherhood and employment support services on parenting and financial stability outcomes among at-risk, community fathers in the Fresno, CA region.</i>	Results from the Fresno Fatherhood evaluation project will help us better understand the ways in which fatherhood and employment support services can contribute to healthy parenting attitudes/beliefs/expectations among at-risk, community fathers in the Fresno, CA region.	Findings will help providers have a better understanding of evidence-based practices that enhance healthy parenting attitudes/beliefs/expectations among at-risk, community fathers in the Fresno, CA region.
R2	<i>Many fathers lack the skills to engage in healthy parenting, co-parenting, partner relationship, and financial behaviors. There is limited research about the effectiveness of fatherhood and employment support services on</i>	Results from the Fresno Fatherhood evaluation project will help us better understand the ways in which fatherhood and employment support services can contribute to healthy parenting behaviors among at-risk, community fathers in the Fresno, CA region.	Findings will help providers have a better understanding of evidence-based practices that enhance healthy parenting behaviors among at-risk, community fathers in the Fresno, CA region.

	parenting and financial stability outcomes among at-risk, community fathers in the Fresno, CA region.		
R3	<p><i>Many fathers lack the skills to engage in healthy parenting, co-parenting, partner relationship, and financial behaviors. There is limited research about the effectiveness of fatherhood and employment support services on parenting and financial stability outcomes among at-risk, community fathers in the Fresno, CA region.</i></p>	<p>Results from the Fresno Fatherhood evaluation project will help us better understand the ways in which fatherhood and employment support services can contribute to healthy co-parenting behaviors among at-risk, community fathers in the Fresno, CA region.</p>	<p>Findings will help providers have a better understanding of evidence-based practices that enhance healthy co-parenting behaviors among at-risk, community fathers in the Fresno, CA region.</p>
R4	<p><i>Many fathers lack the skills to engage in healthy parenting, co-parenting, partner relationship, and financial behaviors. There is limited research about the effectiveness of fatherhood and employment support services on parenting and financial stability outcomes among at-risk, community fathers in the Fresno, CA region.</i></p>	<p>Results from the Fresno Fatherhood evaluation project will help us better understand the ways in which fatherhood and employment support services can contribute to healthy employment attitudes/beliefs/expectations among at-risk, community fathers in the Fresno, CA region.</p>	<p>Findings will help providers have a better understanding of evidence-based practices that enhance healthy employment attitudes/beliefs/expectations among at-risk, community fathers in the Fresno, CA region.</p>

R5	<p><i>Many fathers lack the skills to engage in healthy parenting, co-parenting, partner relationship, and financial behaviors. There is limited research about the effectiveness of fatherhood and employment support services on parenting and financial stability outcomes among at-risk, community fathers in the Fresno, CA region.</i></p>	<p>Results from the Fresno Fatherhood evaluation project will help us better understand the ways in which fatherhood and employment support services can contribute to healthy employment behaviors among at-risk, community fathers in the Fresno, CA region.</p>	<p>Findings will help providers have a better understanding of evidence-based practices that enhance healthy employment behaviors among at-risk, community fathers in the Fresno, CA region.</p>
R6	<p><i>Many fathers lack the skills to engage in healthy parenting, co-parenting, partner relationship, and financial behaviors. There is limited research about the effectiveness of fatherhood and employment support services on parenting and financial stability outcomes among at-risk, community fathers in the Fresno, CA region.</i></p>	<p>Results from the Fresno Fatherhood evaluation project will help us better understand the ways in which fatherhood and employment support services can contribute to healthy financial attitudes/beliefs/expectations among at-risk, community fathers in the Fresno, CA region.</p>	<p>Findings will help providers have a better understanding of evidence-based practices that enhance healthy financial attitudes/beliefs/expectations among at-risk, community fathers in the Fresno, CA region.</p>
R7	<p><i>Many fathers lack the skills to engage in healthy parenting, co-parenting, partner relationship, and financial behaviors. There is limited research about the effectiveness of</i></p>	<p>Results from the Fresno Fatherhood evaluation project will help us better understand the ways in which fatherhood and employment support services can contribute to healthy financial behaviors among at-risk, community</p>	<p>Findings will help providers have a better understanding of evidence-based practices that enhance healthy financial behaviors among at-risk, community fathers in the Fresno, CA region.</p>

	<i>fatherhood and employment support services on parenting and financial stability outcomes among at-risk, community fathers in the Fresno, CA region.</i>	fathers in the Fresno, CA region.	
--	--	-----------------------------------	--

* you may add rows by hitting the tab button, or right click and select insert row below

3. LOGIC MODEL

Clearly demonstrate how the research question(s) (and the related implementation features and/or participant outcomes) link to the proposed logic model and the theory of change for the program. You may append a copy of your logic model to this document.

Appendix B presents a logic model to specify a theory of change for delivering *the services and supports provided by the Fresno Fatherhood program*. Service delivery processes specified in the model are linked to the desired outcomes for parenting, co-parenting, and economic stability. Model specification incorporates a descriptive study design to describe the secondary and primary outcomes of the *Fresno Fatherhood curriculum* by comparing pre- and follow-up survey responses after participation.

Service delivery processes: Key aspects of service delivery processes in the theory of change—goals, inputs, activities, and outputs—articulate the experiences that are designed to solve specific problems for those who agree to participate in the *Fresno Fatherhood program*. As a result, three broad service delivery goals are identified to maximize participation benefits as explained below:

- **Goal 1 - Deliver core curricula as primary services to participants:** The primary, core curricula that participants receive through the *Fresno Fatherhood* program is the 24/7 Dad curriculum. Participants who receive the primary curriculum will understand that they will receive *24/7 Dad curriculum* to develop their skills to engage in healthy *behaviors of parenting, co-parenting, and financial stability*.
- **Goal 2 – Deliver employment support services as secondary services to participants:** Candidates who receive employment support services will understand that they will receive services that include: *job readiness support services* to develop their soft job skills training and remove barriers to employment (e.g., transportation, bus passes, childcare referrals, etc.), as well as *post-employment support services* to help successfully transition participants into steady employment. Secondary services will also help participants to develop their skills to engage in healthy *behaviors for parenting, co-parenting, and economic stability*.
- **Goal 3 – Provide job readiness/placement and other supportive follow up services as secondary services to participants:** Candidates who receive job readiness/placement and other support services will understand that they will receive services that will help them obtain and maintain ongoing employment. The ongoing follow up support is important to

ensure that participants will increase their ability to financially provide for their children and families.

- **Goal 4 - Conduct Continuous Quality Improvement (CQI) to ensure full implementation of RISE services to both study groups:** Reports prepared and presented to the CQI Team by evaluators will use a series of performance indicators to track key outputs over time to identify any **Fresno Fatherhood services** that is delivered to participants that might fall short of the intended amounts to be offered (i.e., fidelity standards) and received (i.e., dosage thresholds). The CQI Team will then work with project staff to develop and implement performance interventions to address any outputs that need improvement to ensure the services offered to and received by participants meet the intended amounts by the end of each program year.

Desired Outcomes: Outcomes specified in the logic model theorize the primary and secondary outcomes that are desired for participants in each study group after they receive **Fresno Fatherhood primary and secondary services**. Secondary outcomes are the improved attitudes and expectations that indicate and reflect participant engagement in parenting, co-parenting, and financial stability. Primary outcomes are the healthy behaviors exhibited by participants for parenting, co-parenting, and economic stability that ultimately define the benefits of **Fresno Fatherhood** program participation. Outcomes specified in the logic model are confirmatory since it is expected that participation in the **Fresno Fatherhood** curriculum will result in positive increases in primary and secondary outcomes related to parenting, co-parenting, and financial stability.

4. HYPOTHESES

For each specified research question, state the hypothesized result(s) and briefly describe why these results are anticipated.

Research Question	Hypothesized Result
I1	We expect that services will be offered and provided as intended.
I2	We expect that Fresno Fatherhood curriculum and services will be offered to and completed by participants.
I3	We expect that the CQI Team will carry out the steps in the CQI Plan during each program year.
R1	Fresno Fatherhood <i>program participants will experience significant positive increases in healthy parenting attitudes/beliefs/expectations</i> immediately following program completion.
R2	Fresno Fatherhood <i>program participants will experience significant positive increases in healthy parenting behaviors</i> one year after program enrollment.
R3	Fresno Fatherhood <i>program participants will experience significant positive increases in healthy co-parenting behaviors</i> one year after program enrollment.

R4	Fresno Fatherhood <i>program participants will experience significant positive increases in healthy employment attitudes/beliefs/expectations</i> immediately following program completion.
R5	Fresno Fatherhood <i>program participants will experience significant positive increases in healthy employment behaviors</i> one year after program enrollment.
R6	Fresno Fatherhood <i>program participants will experience significant positive increases in healthy financial attitudes/beliefs/expectations</i> immediately following program completion.
R7	Fresno Fatherhood <i>program participants will experience significant positive increases in healthy financial behaviors</i> one year after program enrollment.

* you may add rows by hitting the tab button, or right click and select insert row below

5. RESEARCH DESIGN

For each research question, briefly describe why the research design proposed will answer each research question(s). State whether the proposed evaluation is a descriptive or impact evaluation and justify why the proposed research design is best suited to answer the research question(s).

Research Question	Design	Justification
I1	Implementation: Ongoing monitoring of the number of services offered and provided as intended.	Ongoing monitoring of service data will help to ensure that services are being offered and provided in alignment with the program design, Monitoring of this data is beneficial, such that we will have more confidence in the results of the study.
I2	Implementation: Ongoing monitoring of the level of Fresno Fatherhood curriculum and services offered to and completed by participants.	Ongoing monitoring of service data and program participation completion rates will help to ensure that services are being offered and completed by participants as intended. Monitoring of this data is beneficial, such that we will have more confidence in the hypothesized results of the study.
I3	We expect that the CQI Team will carry out the steps in the CQI Plan during each program year.	Incorporating a CQI process will allow the program to identify problems, solutions, and implementation interventions with respect to meeting specific enrollment and completion targets throughout program implementation. Further, the CQI process will also allow the CQI team to test the

		effectiveness of interventions. This process will help the program produce more robust results for the program and the study.
R1	<i>Descriptive:</i> Pre to post assessment will examine the association of Fresno Fatherhood program participation on healthy parenting attitudes/beliefs/expectations immediately following program completion.	Healthy change reported by participants in their parenting attitudes/beliefs/expectations from pre to post assessment estimates the maximum amount of benefit that can be attributed to Fresno Fatherhood services in the absence of a counterfactual.
R2	<i>Descriptive:</i> Pre to follow-up assessment will examine the association of Fresno Fatherhood program on healthy parenting behaviors one year after program enrollment.	Healthy change reported by participants in their parenting behaviors from pre to follow-up assessment estimates the maximum amount of benefit that can be attributed to Fresno Fatherhood services in the absence of a counterfactual.
R3	<i>Descriptive:</i> Pre to follow-up assessment will examine the association of Fresno Fatherhood program on healthy co-parenting behaviors one year after program enrollment.	Healthy change reported by participants in their co-parenting behaviors from pre to follow-up assessment estimates the maximum amount of benefit that can be attributed to Fresno Fatherhood services in the absence of a counterfactual.
R4	<i>Descriptive:</i> Pre to post assessment will examine the association of Fresno Fatherhood program on healthy employment attitudes/beliefs/expectations immediately following program completion.	Healthy change reported by participants in their employment attitudes/beliefs/expectations from pre to post assessment estimates the maximum amount of benefit that can be attributed to Fresno Fatherhood services in the absence of a counterfactual.
R5	<i>Descriptive:</i> Pre to follow-up assessment will examine the association of Fresno Fatherhood program on healthy employment behaviors one year after program enrollment.	Healthy change reported by participants in their employment behaviors from pre to follow-up assessment estimates the maximum amount of benefit that can be attributed to Fresno Fatherhood services in the absence of a counterfactual.
R6	<i>Descriptive:</i> Pre to post assessment will examine the association of Fresno Fatherhood program on healthy financial attitudes/beliefs/expectations	Healthy change reported by participants in their financial attitudes/beliefs/expectations from pre to post assessment estimates the maximum amount of benefit that can be attributed to

	immediately following program completion.	Fresno Fatherhood services in the absence of a counterfactual.
R7	<i>Descriptive:</i> Pre to follow-up assessment will examine the association of Fresno Fatherhood program on healthy financial behaviors one year after program enrollment.	Healthy change reported by participants in their financial behaviors from pre to follow-up assessment estimates the maximum amount of benefit that can be attributed to Fresno Fatherhood services in the absence of a counterfactual.

* you may add rows by hitting the tab button, or right click and select insert row below

6. ONGOING GRANTEE AND LOCAL EVALUATOR COORDINATION

Describe how the grantee and local evaluator collaboratively worked together to identify the research question(s) and research design to ensure its feasibility and relevance. Describe how the grantee and local evaluator will continue to work together throughout the evaluation to proactively address unforeseen challenges as they arise and ensure the rigor and relevance of the evaluation and its findings. Describe how the grantee and local evaluator will coordinate dissemination efforts. Describe how these processes will occur while maintaining the independence of the evaluation.

The basis for ongoing coordination between FAWIC (the grantee) and MER (the local evaluator) is regular communication, by way of recurring meetings and daily interactions with embedded staff. Throughout the original proposal process, and now during the evaluation planning phase, MER worked in consort with FAWIC to design a study with research questions that are appropriate to the intervention. MER guides the process, given our experience designing and running evaluations, and FAWIC provides expertise on their community, target population, and program/curricula specifics.

Recurring meetings will include a bi-weekly project CQI Team meeting. Under the leadership of the Data Manager and Lead MER Evaluator, the CQI Team reviews data from the nFORM and local evaluation systems to identify and mitigate implementation or data issues, and closely examine trends and accomplishments. This team includes FAWIC organizational and project leadership, the MER Evaluation team, and front-line staff representatives (e.g., Case Managers).

In addition to CQI Team meetings, overall project team meetings occur monthly (at a minimum), with project leaders across MER and FAWIC in attendance, to ensure the partnership remains strong and that coordination across organizations is on track. This recurring, ongoing meeting structure is conducive to close coordination, ensuring that challenges can be quickly addressed, and promising strategies can be efficiently maximized.

One of the key components of this coordination effort is the CQI Data Manager, who is an employee of FAWIC. The CQI Data Manager functions to bridge the gap between MER and FAWIC. They will interact with FAWIC staff daily while completing their job duties and play a leadership role in the recurring meetings outlined above. *See Section II.D. above for more details about this role and others.* Both the meetings and the roles outlined above will continue throughout the entire project period, providing opportunities to ensure the rigor and relevance of the evaluation

and its findings, and to discuss and coordinate dissemination efforts (which will also be shared across MER and FAWIC).

MER has experience operating prior descriptive evaluations using this exact process.

Clearly outlining roles and responsibilities maintains the independence of the evaluation. That is, the evaluation team helps identify and illuminate areas of concern or improvement (for the program and the evaluation), but the program staff have responsibility for implementing improvements and providing direct services to participants. In this way, FAWIC and MER acknowledge our shared interest in and responsibility for a well-executed project and evaluation, but that MER is also an independent and external organization with a high level of integrity and is not responsible for nor invested in the specific outcomes of the program. This allows for close coordination without allowing for co-dependence, or for personal interests to influence evaluation findings.

7. LEAD STAFF

Define the roles of lead staff for the evaluation from both organizations below.

Name	Organization	Role in the Evaluation
Dr. Matthew Shepherd	Midwest Evaluation and Research (MER)	Principal Investigator
McKenna LeClear	MER	Senior Research Consultant
Jennifer Leveille	MER	Evaluation Project Manager
Tim Giles	Fresno Area Workforce Investment Corporation (FAWIC)	CQI Data Manager

** you may add rows by hitting the tab button, or right click and select insert row below*

Articulate the experience, skills, and knowledge of the staff for the evaluation (including whether they have conducted similar studies in this field), as well as their ability to coordinate and support planning, implementation, and analysis related to a comprehensive evaluation plan.

Dr. Matthew Shepherd will serve as the Principal Investigator for this grant. As such, he has corporate responsibility for all evaluation activities. Dr. Shepherd has over 25 years' experience in program design and implementation, applied research, program evaluation, policy analysis, and evaluative technical assistance.

McKenna LeClear will serve as the Senior Research Consultant and provide oversight for HMRF evaluation activities as needed. Ms. LeClear has 5 years of evaluation research experience and oversees numerous other HMRF evaluations for MER.

Jennifer Leveille will serve as the Evaluation Project Manager. Ms. Leveille has experience managing and conducting research and evaluation projects for other youth and adult HMRE programs. Ms. Leveille will lead the effort to conduct a descriptive study and a Continuous Quality Improvement (CQI) process for the grant.

Tim Giles will serve as the CQI Data Manager for this project. He possesses the managerial and analytic skills to successfully serve in this position. The CQI Data Manager will work closely with the grantee and community partners on-site to complete data collection and management activities for the descriptive study and a Continuous Quality Improvement (CQI) process.

8. SAMPLE

8.1.TARGET POPULATION(S)

For each target population identified in Section 1.2, please describe the target population(s), and explicitly state whether the population(s) differs from those who will be broadly served by the grant. Describe how the target population will be identified. Explicitly state the unit of analysis (e.g., non-residential father, unmarried couple).

Description of Target Population	How is the population different from those who will be broadly served by the grant?	How will the target population be identified?	Unit of Analysis
Target population is community fathers (ages 18 and older), who have children ages 24 and younger and reside in communities with high rates of poverty.	No difference, all program participants will be study participants.	The sample will be identified and recruited by community partner referrals and program staff.	Community adult fathers

8.2. METHODS TO PROMOTE SUFFICIENT PROGRAM PARTICIPATION

Please describe methods to promote sufficient program participation in the table below.

What methods will you use to ensure sufficient sample is recruited, enrolls, and participates in the program?	FAWIC and their community partners will recruit program participants, and Fresno Fatherhood will provide incentives for program retention and completion. The CQI process will address issues regarding program recruitment and enrollment to ensure targets are met.
Who will be responsible for recruiting the evaluation sample?	The evaluation sample will not differ from the program population, in that all participants will be invited to participate in the evaluation. Enrollment into the evaluation will be conducted by the CQI Data Manager who will conduct the informed consent process and proctor the baseline data collection efforts.
Please describe any incentives to be offered for program participation and/or completion and/or data collection and/or participation in the evaluation.	Evaluation Participation – No incentives will be used for the first two data collection waves at baseline and post-test while participants are beginning or still engaged in services. A \$50 incentive in the form of a Giftogram gift card will be given to participants who complete the 1-year follow-up survey.

9. DATA COLLECTION

9.1. CONSTRUCTS AND MEASURES

Clearly articulate the constructs of interest, measures to evaluate those constructs, and specific data collection instruments. Provide any information on the reliability and validity of the data collection instruments. For standardized instruments, you may provide the citation for the instrument.

Construct	Measure	Instrument	Reliability and Validity <i>(if standardized instrument, you provide a citation for the instrument)</i>
Parenting Attitudes	7 items: frequency of key attitudes (categories, 5-point scale)	nFORM Community-Based Fathers Survey (A3: a-g)	nFORM entrance to exit
Parenting Behavior	1 item: hours spent w/ children in last 30 days (interval); 1 item:	nFORM Community-Based Fathers Survey (A2b,	nFORM entrance to OLLE follow-up

	frequency reach out to children (categories, 5 point scale); 7 items: frequency engage in key behaviors (categories, 5-point scale)	A2c, A5b: b-d, f-i)	
Co-Parenting Behavior	11 items: frequency of agreement with key co-parenting behaviors (interval, 5-point scale)	nFORM Community-Based Fathers Survey (A13: a-k)	nFORM entrance to OLLE follow-up
Financial Behavior	2 items: yes or no questions for having a checking/savings account (categories, yes/no response choices)	nFORM Community-Based Fathers Survey (B3 – B3a)	nFORM entrance to OLLE follow-up
Financial Attitudes	7 items: levels of agreement with key financial attitudes (categories, 5-point scale)	OLLE (Online Local Evaluation) Survey:	OLLE pre to post
Employment Behavior	1 item: yes or no do you have an updated resume to give employers (yes/no response choices)	nFORM Community-Based Fathers Survey (B2)	nFORM entrance to OLLE follow-up
Employment Attitudes	8 items: levels of agreement with key employment attitudes (categories, 5-point scale)	OLLE (Online Local Evaluation) Survey:	OLLE pre to post

* you may add rows by hitting the tab button, or right click and select insert row below

9.2. CONSENT

Describe how and when program applicants will be informed of the study and will have the option of agreeing (i.e., consenting to) or declining to participate in the study.

To secure informed consent, participants will attend an orientation/enrollment session (in person) where the Data Manager will describe the evaluation process, the risks, and benefits of participating in the project. Those people that wish to participate in the evaluation will complete an informed consent process and sign an informed consent document / form. All participants will receive a copy of the consent form with contact information for evaluation staff and how to contact the IRB if needed. Informed consent will take place prior to program enrollment and the collection of evaluation data.

9.3. METHODS OF DATA COLLECTION

If the evaluation will collect multiple waves of data, describe the timing of these waves below. When describing follow-up periods, specify whether the follow-up period will be post-baseline, post-random assignment, or post-program completion.

Wave of Data Collection (e.g., baseline, short-term follow-up, long-term follow-up)	Timing of Data Collection
Baseline	Collected immediately following informed consent and enrollment – during the orientation session or first workshop
Post-Test	Collected after the completion of core curriculum programming -during the last workshop session – approximately 4 weeks after enrollment.
1 year Follow-up (post-baseline)	Collected approximately one year after program enrollment/ baseline. Participants who did not complete the program will still be eligible for a follow-up survey as long as they consented to be in the study and took a baseline survey.

For each measure, describe how data will be collected detailing which data collection measures will be collected by which persons, and at what point in the programming or at what follow-up point.

Measure	Timing of Data Collection (baseline, wave of data collection)	Method of Data Collection	Who Is Responsible for Data Collection?	<i>Impact Evaluations Only:</i> Will Methods or Collection Procedures Differ by Study Group?	<i>Administrative Data Only:</i> Will data access require data sharing agreement?
Online Local Evaluation (OLLE) Baseline Survey	Baseline	Participant self-enters survey using online Qualtrics data collection platform	Case Manager and/or facilitator will proctor data collection and assist participants as necessary	N/A	N/A
nFORM Community Fathers Entrance Survey	Baseline	Participant self-enters survey using online nFORM data collection platform	Case Manager and/or facilitator will proctor data collection and assist participants as necessary	N/A	N/A
OLLE Post-Test Survey	Post-Test (approx. 4 weeks after enrollment)	Participant self-enters survey using online Qualtrics data collection platform	Case Manager and/or facilitator will proctor data collection and assist participants as necessary	N/A	N/A
nFORM Community Fathers Exit Survey	Post-Test (approx. 4 weeks after enrollment)	Participant self-enters survey using online nFORM data collection platform	Case Manager and/or facilitator will proctor data collection and assist participants as necessary	N/A	N/A

OLLE 1 Year Follow-up Survey	1 year after enrollment / baseline	Participant self-enters survey using online data collection platform and link – or – Phone interview data collection with evaluation staff	MER survey tracking team member	N/A	N/A
------------------------------	------------------------------------	--	---------------------------------	-----	-----

* you may add rows by hitting the tab button, or right click and select insert row below

9.4. ENSURING AND MONITORING DATA COLLECTION

Describe plans for training data collectors and for updating or retraining data collectors about procedures. Detail plans to regularly review data that have been submitted and to assess and swiftly address problems.

This evaluation will utilize both post-program surveys (completed at the completion of core programing) and follow-up surveys collected one year after enrollment / baseline. The methods for these data collections differ. The primary driver for post-program survey completion is high rates of program retention. This data point will be collected during the last workshop session – after (but during the same session of) the completion of the nFORM post-program data collection. As such only those individuals who complete the program and who are at the data collection session will participate in the post-program data collection. All program participants, even those who do not complete the program, will be sent a 1-year follow-up survey if they consent to be part of the evaluation and have taken a baseline survey.

All program staff and evaluation staff will undergo a rigorous set of trainings to prepare for the evaluation. All staff receive an overview and introductory training to present the goals and objectives of the evaluation effort and its importance to the overall project. Next, all staff receive training on human subject's protection and are required to pass a certification test on the subject matter. All staff will also receive a detailed training on the details of the evaluation including the evaluation tools, timing, and data collection process and the role and importance of data accuracy.

In addition, the data manager and the primary local evaluation staff will undergo a rigorous training process to better understand the context of HMRF research, training on data collection procedures they will be responsible for, and training on the nFORM system and use of nFORM data in a CQI process. MER is creating networks of CQI data managers and Evaluation Project Managers across the 12 projects that we are evaluating so that all staff have access to experienced data managers and evaluation staff who have done this work previously. This training takes the form of weekly training sessions that are currently under way.

Members of the CQI Team will also receive specific training on the MER CQI process that has been developed prior to the launch of data collection or program services. As described elsewhere MER is assisting the program staff in implementing a robust CQI process that will focus on retention as one of the primary areas of program improvement and as such we are anticipating relatively modest levels of attrition for this data collection.

On a bi-weekly basis the data manager, the local evaluation staff and MER technical specialists will be responsible for downloading data from the nFORM and MER On-Line Local Evaluation (OLLE) systems for processing and presentation to the CQI Team for tracking and monitoring performance measurement outcomes (recruitment, enrollment, dosage, completion, referrals, etc.) so that near real time adjustments can be made to program implementation to ensure compliance with program goals and objectives.

All MER training is currently being recorded and as new staff come on board with projects, project staff turnover, or there is a need for refresher training, recorded training material can be shared and accessed with follow-up one-on-one training with the primary Lead Evaluator.

10. IRB/PROTECTION OF HUMAN SUBJECTS

Please describe the process for protection of human subjects, and IRB review and approval of the proposed program and evaluation plans. Name the specific IRB to which you expect to apply.

Solutions IRB, a private commercial Association for the Accreditation of Human Research Protection Programs Inc. (AAHRPP) fully accredited Institutional Review Board, will ensure that this study is approved before any research activities take place. MER has had 14 research studies approved by Solutions IRB over the past four years, has completed over 15 annual check-in reports, and has submitted timely amendments when changes to studies needed to take effect.

All submissions are completed online, so turnaround for a new study approval is between 24 to 72 hours, though the full approval process can take approximately one to two weeks depending on the number of questions and requested revisions that the IRB makes. In the IRB application submission, we will include descriptions of project staff, locations of study sites, the funding source, incentives, summary of activities, participant population, recruitment plans, risks and benefits, confidentiality of data, and the informed consent process along with all materials to be used in the study such as participant forms and surveys.

This project will be submitted for IRB approval in early March 2021 to receive official approval to begin enrollment and data collection beginning in April 2021.

11. DATA

11.1. DATABASES

For each database used to enter data, please describe the database into which data will be entered (i.e., nFORM and/or other databases), including both performance measure data you plan to use in your local evaluation and any additional local evaluation data. Describe the process for data entry (i.e., who will enter the data into the database).

Database Name	Data Entered	Process for Data Entry
nFORM	Performance Measurement Data	Entered directly by participants, and by program staff

Qualtrics	Local evaluation data, participant outcomes (OLLE survey)	Entered directly by participants, and by MER evaluation staff
-----------	---	---

* you may add rows by hitting the tab button, or right click and select insert row below

11.2. DATA REPORTING AND TRANSFER

For each database provided in the table above, please indicate the ability to export individual-level reports to an Excel or comma-delimited format and whether identifying information is available for linking to data from other sources.

Database Name	Ability to Export Individual Reports?	What identifying information is available to facilitate linking to other data sources?
nFORM	Yes	nFORM Client ID, Name, DOB
Qualtrics	Yes	nFORM Client ID, Name, DOB

* you may add rows by hitting the tab button, or right click and select insert row below

11.3. CURRENT SECURITY AND CONFIDENTIALITY STANDARDS

For each database provided in Section 11.1, please Indicate the ability to be able to encrypt data access during transit (for example, accessed through an HTTPS connection); be able to encrypt data at rest (that is, when not in transit), have in place a data backup and recovery plan; require all users to have logins and passwords to access the data they are authorized to view; and have current anti- virus software installed to detect and address malware, such as viruses and worms.

Database Name	Ability to encrypt data during transit?	Ability to encrypt at rest?	Data Backup and Recovery Plan?	Require all users to have logins and passwords?	Current Anti-Virus Software Installed?
Qualtrics	Yes	Yes	Yes	Yes	Yes

* you may add rows by hitting the tab button, or right click and select insert row below