**Tell us what you think about Just in Time Parenting!**

Informed Consent

The purpose of this survey is to obtain more specific feedback on the Just in Time Parenting newsletter. Because you are a reader of the Just in Time Parenting newsletter, we are extremely interested in your feedback. The survey should take no more than 15 minutes to complete.

There are no known risks to you to take this survey. You must be at least 18 or older (19 or older in Nebraska and Alabama) to participate. Your answers to the questions are anonymous. Any reports prepared will be released only as summaries in which no individual’s answers can be identified. This survey is voluntary. You are free to decide not to participate and withdraw at any time without harming your relationship with the researchers or institutions involved. The University of Nevada Reno Institutional Review Board has approved the evaluation of this program.

Do you want to continue with the survey?

 Yes (1) (Continue to page 2)

 No (2)

If you have questions or comments about the survey, please contact the following person:

* YaeBin Kim (JITP Evaluation Committee): (702) 257-5521, [kimy@unce.unr.edu](mailto:kimy@unce.unr.edu)

Sometimes survey participants have questions or concerns about their rights. In that case, you should call the University of Nevada – Reno Institutional Board at (775) 327-2368.

1. In which country do you live?
   * United States (1)
   * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Enter name of country)
2. If you live in the United States, write the name of the state (i.e., Nevada) and county (i.e., Brown County)
   * State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Are you responding as a parent/caregiver or a professional working with families?
   * Parent/caregiver (1)
   * Professional (2)
4. Indicate how much you agree that the newsletters influenced you with your child.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Reading the Just in Time Parenting newsletters caused me to . . .** | **Strongly Disagree (1)** | **Disagree (2)** | **Agree (3)** | **Strongly Agree (4)** |
| Know more about what to be able to do at each age. (1) |  |  |  |  |
| Use the parenting tips in taking care of my child. (2) |  |  |  |  |
| Provide more opportunities for my child to explore and learn. (3) |  |  |  |  |
| Feel more confident in my skills as a parent. (4) |  |  |  |  |
| Feel less stressed about parenting. (5) |  |  |  |  |
| Notice my child’s cues more (what my child needed and was trying to tell me.) (6) |  |  |  |  |
| Have more patience when my child was fussy or did something that was annoying. (7) |  |  |  |  |
| Use ideas about how to get my child to behave (like having a few good rules, explaining them to my child, and sticking to them). (8) |  |  |  |  |
| Help my child learn and use new words, such as by naming things, reading books together, and talking about what we were doing. (9) |  |  |  |  |
| Have ideas to support my child’s healthy eating. (10) |  |  |  |  |

1. How did you find out about Just in Time Parenting? *Check all that apply.*
   * Internet search (1)
   * Friend or family member (2)
   * Community agency/Cooperative Extension office or staff (3)
   * Link from another website (4)
   * Other (please specify) (5): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Parents/caregivers get information or advice about children or parenting from different sources.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **How useful were the following sources of information during the past year?** | **Did not use (1)** | **Not very useful (2)** | **Somewhat useful (3)** | **Very useful (4)** |
| Just in Time Parenting Newsletters (1) |  |  |  |  |
| Other parenting websites (2) |  |  |  |  |
| Books or magazines (3) |  |  |  |  |
| Brochures or newsletters (4) |  |  |  |  |
| Parenting classes (5) |  |  |  |  |
| TV shows or videos (6) |  |  |  |  |
| Doctors or other health professionals (7) |  |  |  |  |
| Child care providers (8) |  |  |  |  |
| Family or friends (9) |  |  |  |  |
| Social media (Facebook, Instagram, etc.) (10) |  |  |  |  |

1. Tell us what you value about Just in Time Parenting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Do you have any suggestions to improve Just in Time Parenting? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. When a Just in Time Parenting email arrives, how do you use it?
   * Save it and read it later (1)
   * Read it right away (2)
   * Read it more than once (3)
   * Share it with someone else (4)
   * I don’t read it (5)
4. If you share it with someone else, with who did you share the Just in Time Parenting newsletters? *Check all that apply.*
   * Spouse or partner (1)
   * Child’s grandparents (2)
   * Other relatives or friends (3)
   * Child care provider/early childhood teacher (4)
   * Other (please specify) (5): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. If you share it with someone else, how did you share? *Check all that apply.*
   * Email (1)
   * Printed copy (2)
   * Read together (3)
   * Other (please specify) (4): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. How much of the Just in Time Parenting Newsletters do you usually read? *Check one answer.*
   * None of it (1)
   * One or two articles per issue (2)
   * Most articles in most issues (3)
   * All articles in all issues (4)
7. How much do these statements look like your life?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Not at all like my life (1)** | **Not much like my life (2)** | **Somewhat like my life (3)** | **Quite a lot like my life (4)** | **Just like my life (5)** |
| The future looks good for our family. (1) |  |  |  |  |  |
| In my family, we take time to listen to each other. (2) |  |  |  |  |  |
| There are things we do as a family that are special just to us. (3) |  |  |  |  |  |
| My child misbehaves just to upset me. (4) |  |  |  |  |  |
| I feel like I’m always telling my kids “no” and “stop.” (5) |  |  |  |  |  |
| I have frequent power struggles with my kids. (6) |  |  |  |  |  |
| How I respond to my child depends on how I’m feeling. (7) |  |  |  |  |  |
| I have people who believe in me. (8) |  |  |  |  |  |
| I have someone in my life who gives me advice, even when it’s hard to hear. (9) |  |  |  |  |  |
| When I am trying to work on achieving a goal, I have friends who will support me. (10) |  |  |  |  |  |
| When I need someone to look after my kids on short notice, I can find someone I trust. (11) |  |  |  |  |  |

1. I have people I trust to ask for advice about: (*check all that apply)*
   * Money/bills/budgeting (1)
   * Food/nutrition (2)
   * Parenting/my kids (3)
   * Relationships and/or my love life (4)
   * Stress, anxiety, and/or depression (5)
   * None of the above (6)
2. In the past month, were you unable to pay for: (*check all that apply)*
   * Rent or mortgage (1)
   * Utilities or bills (electricity/gas/heat, cell phone, etc.) (2)
   * Groceries/food (including baby formula, diapers) (3)
   * Child care/daycare (4)
   * Medicine, medical expenses, or health insurance or co-pays or charges (5)
   * Basic household or personal hygiene items (6)
   * Transportation (including gas, bus passes, shared rides) (7)
   * I was able to pay for all of these. (8)
3. In the past year, have you: (*Check all that apply*)
   * Delayed or not gotten medical or dental care (1)
   * Been evicted from your home or apartment (2)
   * Lived at a shelter, in a hotel/motel, in an abandoned building, or in a vehicle (3)
   * Moved in with other people, even temporarily, because you could not afford to pay rent, mortgage, or bills (4)
   * Lost access to your regular transportation (e.g., vehicle totaled or repossessed) (5)
   * Been unemployed when you really needed and wanted a job (6)
   * None of these apply to me (7)
4. I have trouble affording what I need each month.
   * Never (1)
   * Rarely (2)
   * Sometimes (3)
   * Often (4)
   * Almost always (5)
5. I am able to afford the food I want to feed my family.
   * Never (1)
   * Rarely (2)
   * Sometimes (3)
   * Often (4)
   * Most always (5)

This is the last section of the survey. We’d like to know a little about the parents who are reading the newsletters. Again, all your answers are confidential.

1. What is your relationship to the child? *Choose one answer.*
   * Mother (1)
   * Father (2)
   * Other caregiver (please specify) (3): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Is your child attending child care or preschool?
   * Yes (1)
   * No (2)
3. How old are you? \_\_\_\_\_\_\_\_\_\_\_
4. How old is your child you are/were using this Just in Time Parenting information with? \_\_\_\_\_\_\_\_\_\_\_\_
5. Are you: (*Check one answer*)
   * Single, not in a committed relationship (1)
   * Not married, but in a committed relationship (2)
   * Married (3)
   * Other (please specify) (4): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. If you are married or in a committed relationship, are you currently living with your partner?
   * No (1)
   * Yes (2)
   * Other (please specify) (3): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. Are you an active military duty family?
   * Yes (1)
   * No (2)
8. Are you (*check all that apply*):
   * Asian/Pacific Islander (1)
   * Black/African American (2)
   * Hispanic/Latino/Latina (3)
   * Native American Indian/Alaskan Native (4)
   * White (5)
   * Other (please specify) (6): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. What is the highest level of education you have completed? (*Check one answer*)
   * Less than high school (1)
   * High school diploma or GED (2)
   * Some college/Vocational training (3)
   * College degree(s) (4)

**Thank you for your interest in Just in Time Parenting. If you filled out the survey, your answers will be combined with those of other participants to help us improve Just in Time Parenting. We appreciate your help!**