Effective Child Welfare Research and Evaluation Using Remote Methods

Introduction: COVID-19 and the "New Normal"

In response to COVID-19, child welfare agencies must deliver services remotely, and evaluators must shift to remote research methods. This guide provides an overview of challenges child welfare researchers and evaluators may face in conducting research and collecting data remotely, and it offers concrete strategies and recommendations to address these challenges.

COVID-19 and Child Welfare Practice

The pandemic has required rapid adaptations to child welfare services. The Children's Bureau has developed resources to help guide services provided by states to children and families (Children's Bureau, 2020). States have already addressed the unique situations created by COVID-19 by implementing such initiatives as extending the age of emancipation of foster youth.[1] Caseworkers have conducted investigations and visits with families remotely, and virtual court hearings are being held to avoid viral transmission. Many community services, such as substance abuse treatment programs and parenting classes, were initially closed but have since transitioned to remote delivery.

Whether conditions created by the pandemic have increased rates of child maltreatment is unclear. The pandemic has brought job losses, reduced wages, and financial instability to all income levels, though lower income individuals are more likely to report negative effects (Pew Research Center, 2020). Stay-at-home orders may have increased parenting stress by removing families from

---

[1] California extended benefits to young adults in foster care in April 2020. See Governor Newsom Announces $42 Million to Protect Foster Youth and Families Impacted by COVID-19, accessed July 2020.

sources of social support (Griffith, 2020). School closures have isolated children from their peers, and from adults who may observe signs of child abuse and neglect. A study by Baron, Goldstein, and Wallace (2020) suggests that school closures during the pandemic may be associated with reduced reports of child maltreatment; however, whether adverse conditions created by COVID-19 have affected child maltreatment rates remains unknown—some studies that examined the relationship between depressed economic conditions and rates of child abuse and neglect showed mixed results (Nguyen, 2013). Regardless, for child welfare organizations, the pandemic has created new challenges in identifying and contacting families that could benefit from services and supports.

COVID-19 and Child Welfare Research

Researchers must revisit their understanding of child welfare services. Child welfare agencies have had to implement changes in state and local policies, contend with funding cuts and staff layoffs/furloughs, delay implementation of new projects, and adapt initiatives that have already been launched. Researchers need to know how COVID-19 has affected child welfare service delivery, including the implementation and impact of new initiatives intended to improve services. Understanding how services have been modified may prompt new research questions and suggest changes in study methods.

Researchers must adapt traditional research methods to the new virtual environment. COVID-19 has affected the way child welfare data are collected. Plans developed pre-pandemic, which relied on in-person data collection, must be revised in light of travel restrictions and safety precautions. Like child welfare practitioners, researchers must learn new technologies, revisit methods, and develop skills to continue to provide critical information on service delivery and its impact on children and families.

This guide will highlight considerations for building and adapting evaluation plans in the COVID-19 environment. It is not an exhaustive review of all technology and remote approaches; rather, it outlines strategies to consider when planning, budgeting, designing studies, selecting outcomes, and conducting data collection for child welfare evaluations in a remote environment.

There is a 40 percent decrease in calls received by the Child Abuse Hotline, while calls to 211 for support on food, housing, etc., have increased by 400 percent.

— **FEDERAL CHILD WELFARE GRANTEE, CALIFORNIA**

Evaluation Planning: Start-Up and Rebooting

Partner with the program you are evaluating to understand changes to program capacity, service delivery, and priorities.

Engage in honest conversations with program staff about changes to capacity and resources. In response to COVID-19, many staff in child welfare departments have been reassigned to special emergency response task forces, management has had to gather resources and develop policies for telework (many for the first time), and programs have shifted or ceased usual service delivery to focus on urgent community needs. These changes often mean less time to dedicate to evaluation planning. Having honest conversations with program staff about their obligations and priorities is an important first step in continuing with an evaluation. Exhibit 1 highlights potential programmatic changes in response to the pandemic and prospective evaluation adaptations.

Ask program staff about any new technological resources they are using and how these tools are working. As more staff work remotely, many are leveraging technology to improve productivity and have developed ways to meet and work together in virtual settings. Determine if staff are familiar with or are using virtual collaboration tools such as those that allow users to share computer screens or virtual whiteboards. Consider employing technology that program staff already have access to—and are familiar with—for planning, communication, and data collection. Adapting existing tools for new purposes can save time and resources.

> **Strategies to Minimize Program Burden During Evaluation Planning**
>
> - Schedule evaluation planning meetings or calls before or after other regularly scheduled meetings.
>
> - Keep agendas brief and targeted.
>
> - When seeking feedback, give staff adequate time to review documents.
>
> - Use communication tools that are user-friendly and with which staff are already familiar.

We continue to brainstorm ways to convene groups of people through the use of technology and continue to hold in mind the capacity and ability of our partners and families during this crisis.

— **FEDERAL CHILD WELFARE GRANTEE, CALIFORNIA**

Exhibit 1. Planning Evaluation Adaptations in Response to Programmatic Changes

Service delivery	Implications for evaluation design
Have services been changed? If so, how/why were adaptations made or selected?	Review and revise the theory of change/logic model as necessary.
What remote technology is being used for these services?	Consider whether the technology used to deliver remote services could generate potential data sources.
Have any services been discontinued?	Determine if evaluation activities are no longer applicable, and, if so, consider how evaluation resources could be reassigned.
Are there any changes in who is receiving services?	Assess whether changes in population may require shifts in sample size/instruments.
Are there anticipated changes in how many children/families will receive services?	Determine if evaluation design and/or analysis methods may need adjustments.
Have time frames for service delivery been extended or shifted?	Determine if evaluation activities need scheduling adjustments, or if the evaluation workplan needs to be revised.
Have collaborative partnerships changed? If so, who is no longer involved? Who is newly involved?	Consider whether process data collection design/methods need to be changed.
Are meetings of collaborative partners, or meetings of agency staff, being conducted using remote methods? If yes, what platform/software is used?	Review meeting platforms used and determine if they may provide digital process evaluation data.

Virtual Methods, Real Money: Evaluation Planning and Budgeting

Technology costs are not limited to hardware and software.

Costs of remote data collection are often associated with helping people learn to use the technology effectively. The evaluation considerations described in exhibit 2 also have potential implications for the evaluation workplan and associated costs.

Exhibit 2. Workplan and Budget Implications in a Remote Environment

| Evaluation changes	Potential workplan shifts	Possible budget implications
Remote data collection activities replacing traditional in-person or onsite methods (e.g., interviews, focus groups, observations) Changes in number, type, or burden on respondents Data security practices needing to be enhanced and updated	Time to review and select hardware and software that will meet data collection needs Extended time frames to allow for recruitment, scheduling, and data collection Time for Institutional Review Board (IRB) revisions	Travel costs reduced Increased or decreased staff time to recruit participants, schedule data collection activities, and collect remote data Reduced/no costs needed for transcription Incentive adjustments due to changes in the number of respondents, or respondent burden Staff time to review, revise, and resubmit to IRB
Hardware and internet access needed for program staff, or families, to collect data	Time allocated to purchase, set up, distribute, and train staff on new technologies	Purchase of devices and insurance IT support Training for staff to operate devices Staff time to orient families, if they will provide data via a remote device
New software platforms for communication and remote data collection (e.g., survey design, meetings)	Time allocated to purchase, set up, distribute, and train staff on new technologies	Purchase of software Purchase of add-on features to enhance data collection (e.g., chat functions, in-presentation surveys) Training for staff to use software

Evaluation Design and Redesign

Programmatic changes made as a result of the COVID-19 pandemic may require revisions to planned or approved evaluation designs.

Consider revisions to the program's theory of change and logic model to reflect modifications in service delivery. Social distancing has forced many programs to suspend in-person service delivery; some services have been adapted to a virtual platform, while others have been delayed or canceled. These changes, whether temporary or permanent, may require staff and evaluators to reassess their programs' theories of change and logic models; they may need to be updated to reflect new activities, outputs, and outcomes.

Multiple stakeholders can explore these questions remotely by using a variety of existing online collaboration tools and platforms. Exhibit 3 shows an example of one federal grantee's use of an online collaboration platform—Trello—to create and modify a theory of change.

Exhibit 3. Example of a Theory of Change Developed Remotely Using the Online Project Management Software Trello
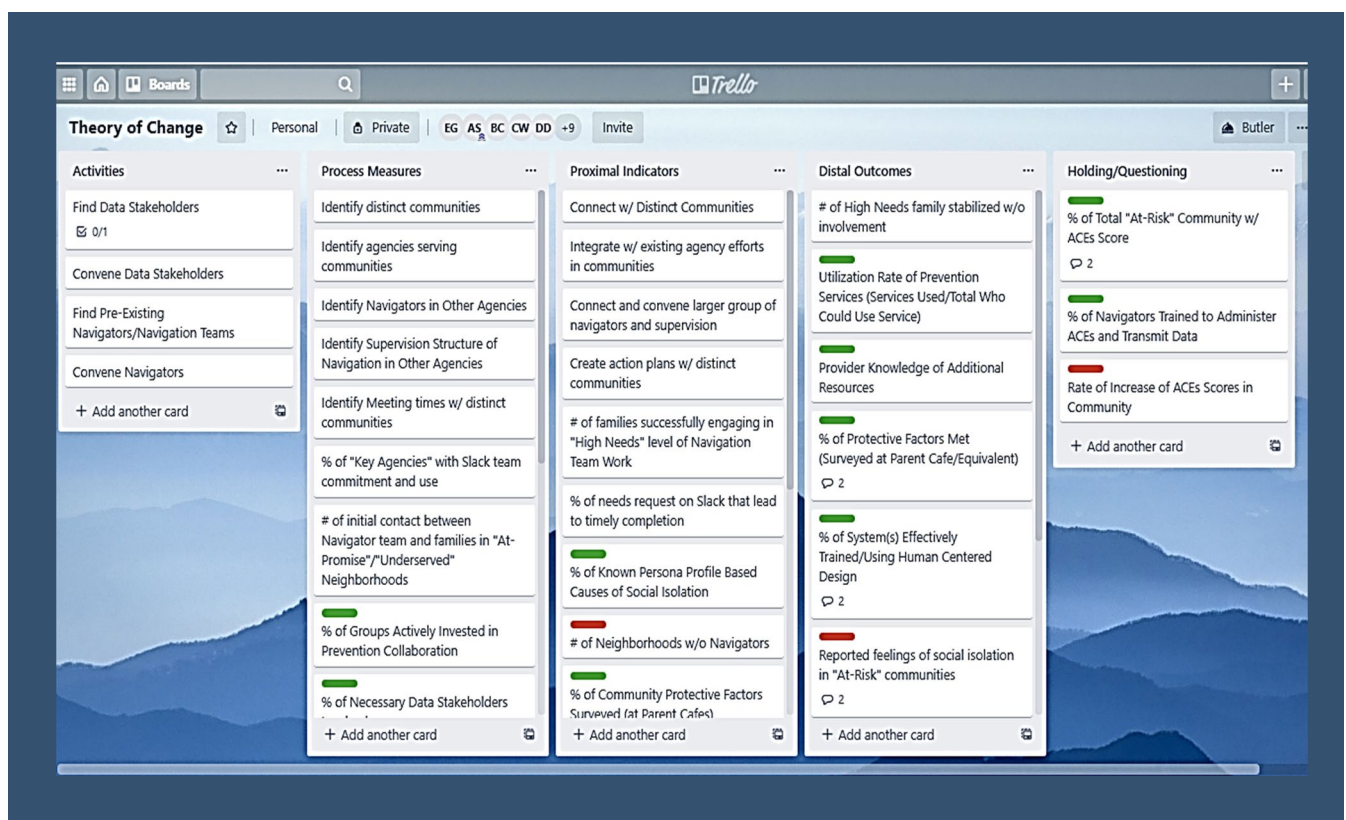
Source: Larimer County, Colorado Department of Human Services

Consider the following important questions when assessing changes to service delivery:

- How has service delivery changed?

- How has service delivery remained the same?

- What adaptations made in response to the pandemic are likely to continue after the crisis is over?

- How do these changes affect our understanding of how our program works and of the outcomes we expect it to achieve?

When significant changes are made to services, shifts in evaluation design may be warranted. Exhibit 4 describes some options evaluators may want to consider.

Exhibit 4. Evaluation Design Decisions in Response to Service Changes

Questions	If yes, consider …
Has service delivery changed?	Pausing summative evaluation activities to conduct a formative evaluation
Are there opportunities for comparison between in-person and remote service delivery?	A substudy comparing outcomes among participants receiving services before and during the COVID-19 pandemic
Are you interested in generalizable results about "business as usual"?	Using a retrospective design with pre-COVID-19 pandemic administrative data
Does the evaluation involve the use of administrative data to assess the program's impact on long-term outcomes (e.g., number of child abuse reports, length of time in foster care)? Was the collection of these data affected by the COVID-19 pandemic (e.g., delayed collection, less complete or lower quality data)?	Using intermediate child and family measures to link program services to shorter term outcomes

Due to the impacts of COVID-19 on the child welfare data, our evaluation team will be tasked with controlling for the anomalies of our comparison group.

—**FEDERAL CHILD WELFARE GRANTEE, COLORADO**

Consider a shift toward formative evaluation. Formative evaluation focuses on early implementation and service quality before more rigorous summative evaluation, and it can be used to confirm that outputs and outcomes are still appropriate and moving in the right direction. Ongoing summative evaluations may benefit from a pause to reevaluate whether the program is still meeting its goals.[2]

Make sure your data analysis plan carefully tracks service delivery dates. The pandemic has created a separate treatment "condition" for all program participants receiving services since the onset of COVID-19. This treatment condition can be compared with pre-COVID-19 participants or controlled for in statistical analyses. Consider case studies, interviews, and focus groups to understand how the pandemic has affected participants. If you are interested in generalizable findings, use only pre-pandemic data in a retrospective study design.

Changes in services offer a chance to test whether the same outcomes can be achieved via remote methods. For example, using the same survey instruments, compare training outcomes among participants who completed in-person training pre-COVID-19 with those who completed an online version during the pandemic. Substudies can be added to your research design to test if remote service delivery generates any time or cost savings without a loss of effectiveness.

Shifts in evaluation designs and data collection activities may require increased data security and human subject protections. Collecting digital information may involve updating data

Participant Safety

The pandemic has heightened stress and increased isolation for children, parents, *and* professionals. Take actions during planning and evaluation design to help protect the safety of study respondents.

- Ensure the research team is familiar with mandated reporting responsibilities. Create protocols that direct staff responses when maltreatment is suspected.

- Routinely seek program partner input when selecting recruitment and data collection activities. This is especially critical for studies seeking information from populations at risk for abuse and violence.

- When designing online surveys, incorporate information to inform respondents about local services, such as child abuse, domestic violence, and mental health services.

---

[2] For more information and tools to design and conduct formative evaluations, see Formative Evaluation Toolkit: A Step-by-Step Guide and Resources for Evaluating Program Implementation and Early Outcomes.

security practices and reviewing data sharing agreements. Data from video and text recordings may give the evaluation greater access to sensitive information, which will require IRB review and revised informed consent procedures.

Selecting Outcomes: Go Deep, Go Wide

Child welfare outcomes can be measured using remote data collection methods.

Consider using "quick hit" methods to measure short-term outcomes within a large sample. For example, a one-question text message survey or brief survey administered via social media could be used to assess common short-term outcomes, such as the following:

- Increases in knowledge
- Changes in attitudes or beliefs
- Service quality

Rapid feedback data collected in this way can also be used for continuous quality improvement (CQI) purposes to monitor and improve program services on an ongoing basis. When selecting short-term outcomes, be clear about which will be used for evaluation purposes and which will be used for CQI (it is also possible for the same short-term outcomes to be used for both purposes).

Focus in depth on intermediate outcomes. Data from the Adoption and Foster Care Analysis and Reporting System (AFCARS) and the National Child Abuse and Neglect Data System (NCANDS) are often used in child welfare research to measure long-term outcomes; however, changes that child welfare agencies have made during the COVID-19 pandemic will significantly affect the completeness and quality of these data. For example, an evaluation of a county's parenting program designed to reduce risk of future child abuse may have planned to use NCANDS[3] data to assess recurrence of child maltreatment within 6 months; however, this measure could be invalid if decreased in-person school attendance significantly lowers the overall number of child abuse reports. An alternative approach could be to measure family relationships if the program's theory of change hypothesizes improved relationships lead to reduced child maltreatment.

---

[3] NCANDS. Outcome 1.1 Recurrence of maltreatment within 6 months. For additional information on NCANDS data, see About NCANDS, accessed July 2020.

Measure intermediate outcomes using standardized measures. Many instruments can be used to measure changes at the child, parent, and family level. Exhibit 5 describes some examples of instruments used in evaluations of federal child welfare grant programs.

Exhibit 5. Sample Intermediate Measures to Assess Program Impact[4]

| Outcome level	Potential domains	Examples of measures
Child level	Development	Battelle Developmental Inventory, 2nd Edition (Bliss, 2007)
	Behavioral issues	Eyberg Child Behavior Inventory (Rich & Eyberg, 2001)
	Cognitive/academic performance	The Woodcock-Johnson Tests of Cognitive Abilities (Woodcock, 1997)
	Mental health	Child Depression Inventory (Finch et al., 1987)
	Social relationships	Youth Connections Scale (Jones & LaLiberte, 2013)
	Resilience and protective factors	Children's Hope Scale (Snyder et al.,1997)
	Trauma impact	Child PTSD Symptom Scale (Foa et al., 2001)
Caregiver/ parent level	Parenting skills	Parenting Sense of Competence Scale (Gilmore & Cuskelly, 2009)
	Employment status	Job Search Attitudes Inventory (Liptak, 2002)
	Mental health	Edinburgh Postnatal Depression Scale (Cox et al., 1987)
	Social supports and connections	Maternal Social Support Index (Pascoe et al., 1987)
	Domestic violence	Domestic Violence Inventory—Short Form (Lindeman & Khandaker, 2011)
	Substance use	Substance Abuse Problem Checklist (Carroll, 1984)
Family level	Overall family functioning	Family Assessment Form (McCroskey et al., 1997)
	Interfamilial relationships	Parenting Interactions with Children: Checklist of Observations Linked to Outcomes (Roggman et al., 2013)

Source: James Bell Associates (2015)

---

[4] For an extensive list of standardized instruments that can be used to assess child and family outcomes, see Measuring Child Welfare Outcomes: A Compendium of Standardized Instruments.

Data Collection: Start With What You Have

Select technology your respondents can use.

Access to the internet and technology is unequal. It is critical to know if your respondents—and program staff—can go online. Exhibit 6 shows demographics associated with whether individuals can *afford* internet service and whether they can *access* it in their location.

Exhibit 6. Availability of Broadband and Home Internet
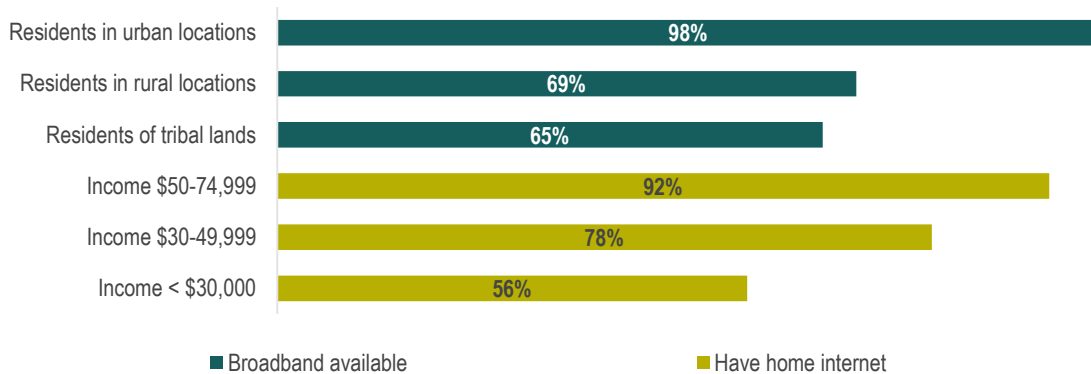
Sources: Federal Communications Commission (2020); Pew Research Center (2019)

Understand what devices are used by respondents. A survey meant to be delivered on laptops will not be effective if your population does not use them. Certain populations are more likely to have access to and use devices, as illustrated in exhibit 7. Consult with program partners to understand more specific local community access issues.

Exhibit 7. Access to Devices
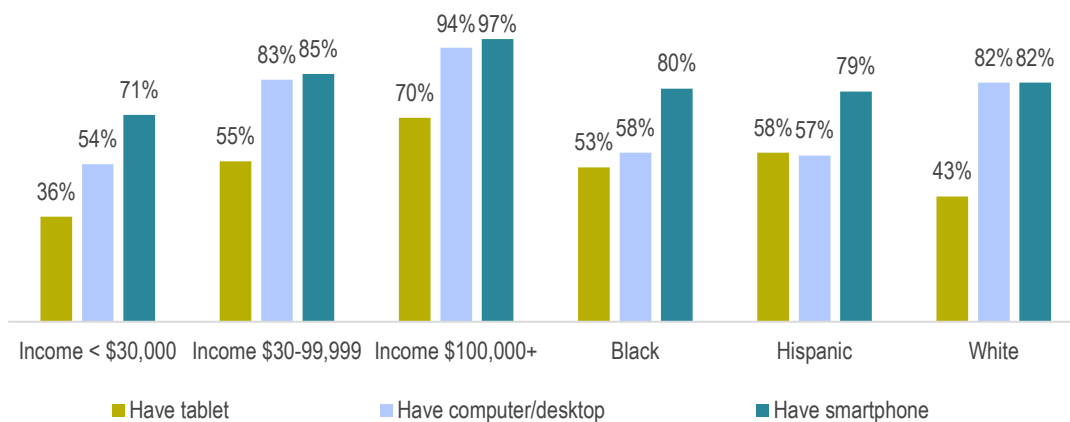
Source: Pew Research Center (2019)

Survey Instrument Design and Administration

Deliver and design surveys so that respondents receive them and want to complete them.

Evaluators may use paper-based surveys or remote tools, such as computer assisted telephone interviews (CATI) and electronic surveys. CATI and paper surveys have the advantage of a well-established base of research and best practices, whereas electronic survey technology is continually evolving—with research only starting to catch up to these advancements. Phone surveys may be preferable for individuals with no internet access or for those who have lower literacy levels. For those without stable or consistent phone or internet, paper surveys will be necessary; however, for many researchers, the increasing availability of technology and the cost savings provided by electronic surveys make this data collection method a favored choice.

Many virtual meeting platforms can help collect data through polls and chat boxes. Platforms such as Zoom, Go to Meeting, and WebEx allow for live polling, and results can be displayed onscreen to facilitate discussion among participants. This method may also be used to capture brief question responses during online meetings, interviews, or focus groups.

Evaluating Survey Programs

Herzing (2019) identifies seven questions for evaluating survey software:

1. What should the software/application track?

2. Does the software/application adjust to different devices/browsers?

3. Which question formats are available, and how are they designed?

4. How can the question format/screen layout be adjusted for your purposes?

5. Have fieldwork monitoring features been implemented?

6. How and in which format are the data delivered?

7. On which operating systems and browsers does the survey software/application work?

Electronic Survey Design Principles

Antoun et al. (2018) note the following components of effective survey design:

- **Readability**: The font size should be easy to read.

- **Ease of selection**: Response options should be large enough to tap accurately.

- **Visibility across the page**: Content should fit the width of the screen so there is no horizontal scrolling.

- **Simplicity of design**: Design features should be simple for respondents to use (avoid sliders, embedded video, auto advance of questions, etc.).

- **Predictability across devices**: The survey should function the same across devices.

Electronic surveys vary in costs and the types of data they can collect. Some of the most innovative and interactive data collection procedures allow respondents to take or upload pictures, videos, or voice recordings (Herzing, 2019). Survey software or apps can be downloaded on a smartphone to gather additional information, which can increase accuracy by avoiding recall or social favorability biases while also reducing burden on respondents. Data collection using smartphone-based technologies is a relatively new alternative that requires careful consideration of potential data privacy and security issues.

When selecting a survey program, think about the types of features that will enhance your data collection. Systems such as Salesforce and REDcap allow users to download and analyze data for greater efficiency. If current data collection systems are inadequate, consider what features will be needed. Surveys that are designed to be completed on mobile phones must be optimized for use on mobile devices. Some online survey programs like Qualtrics provide side-by-side views of how questions will look in a web browser compared with a mobile device.

Mobile surveys must be designed carefully to ensure adequate response rates. Surveys administered via mobile phone require special attention to ensure they display and function properly. Poor design can negatively affect response rates, both to the survey overall and to individual questions.

Qualitative Data Collection: Using Digital Technology to Obtain Human Perspectives

Remote data collection creates special challenges for conducting qualitative research.

Remote communication technology limits our ability to read individuals' social cues, such as gestures, facial expressions, and vocalization (Vinciarelli et al., 2008). Facial expressions are an especially important source of cues that help individuals successfully navigate conversations. We read facial expressions to know whether another person has finished speaking, has another thought, or is feeling stressed. When interviewers see these cues, they can use them to decide whether to move to another question, ask a prompt, or stay silent.

Remote methods may require active facilitation and structures that amplify social cues for participants. Communication technology can limit or prevent access to the visual and vocal cues that are present in face-to-face data collection, making it more difficult for participants to "take turns" in the conversation. A moderator who creates organizing structures and actively leads discussions can facilitate a smoother conversation and interactions. That said, moderators must also avoid dominating the discussion to ensure information sharing is not reduced.

What Type of Information Do You Need?

- **Focus groups collect a broad range of information**. They do this through a group process of sharing and comparing information and experiences among multiple participants, which encourages the collection of data from a variety of perspectives.

- **Individual interviews allow for the collection of rich and in-depth information on one or more topics related to a person's experience**. They are sometimes used to collect sensitive information that respondents would not want to disclose in a group setting, and they may be more convenient because they can be scheduled around respondents' availability.

Select remote methods that respondents can access and that match their preferences when possible. Some communication devices, software programs, and social media platforms are preferred by certain demographic groups (Chen & Neo, 2019; Ford et al., 2019). Giving respondents the option to select their preferred communication mode can increase their satisfaction with the

interview process (Hershberger & Kavanaugh, 2017) and potentially ameliorate some of the limitations of remote communication technology noted above.

Video Communication

Video-based communication can help us read some social cues—but not all. Video helps participants see one another's facial expressions and gestures, which facilitates the flow of information. But video-based methods do not allow participants to make direct eye contact because of the placement of the camera on most computers. For example, a facilitator who looks at the image of the respondent to address her will not be looking directly at the camera lens; therefore, to the respondent it will appear the facilitator is looking past her rather than engaging in simultaneous and direct eye contact.

Video may be more suitable for collecting less personal or sensitive information from those participants with access to and comfort with technology. Research suggests the decreased anonymity of video focus groups may explain why they are less successful in collecting information on sensitive topics (Gothberg et al., 2013). The required audio-video technology is not universally accessible, which may increase sample bias, and technical challenges are common (Daniels et al., 2019). Privacy issues should also be considered—for example, the possibility of someone entering the room where the interview is taking place. Exhibit 8 lists common challenges in using audiovisual communication methods, and strategies to address them.

Participant Privacy

Video methods pose additional challenges in maintaining participant privacy.

- When sending study information and consent materials to respondents prior to interviews and focus groups, include information on community resources.

- In materials sent to participants before interviews and focus groups, include an explanation of the importance of maintaining an environment that ensures privacy. Before beginning interviews, remind respondents of the importance of maintaining privacy.

- Remind participants at the beginning, and throughout interviews, that they may decline to answer questions or stop at any time.

- Stop interviews and focus groups if/when you perceive nonrespondents are present. Offer to reschedule for individuals who are unable to maintain privacy.

The most difficult part is building trust virtually.

—**FEDERAL CHILD WELFARE GRANTEE, WASHINGTON STATE**

Exhibit 8. Audiovisual Interviews and Focus Groups: Common Challenges and Strategies

Challenges	Strategies
Frequent technical difficulties	• Offer a practice session with respondents prior to the interview or focus group. • Shorten the protocol to build in time to solve potential technology issues. • Use two interviewers: one to facilitate the discussion and one to prevent and solve technical issues. • Choose a video conferencing platform that includes audio, video, and text functions to help members with technical issues contribute to the discussion.
Participants' inability to read interviewer's social cues	• Begin interviews with informal small talk to build rapport. • Adjust your ambient lighting to help respondents see your facial expressions. • When speaking, look at the camera lens to make eye contact; look at the screen to attend to the respondent's social cues. • Show you are listening by nodding and using verbal cues (e.g., "yes," "I see").
Reduced visual and social cues impeding group interactions	• Shorten the protocol to account for a slower pace of discussion, which can occur as individuals try to avoid interrupting each other. • Use more active moderation with groups, such as asking specific group members to build on prior responses. • Build in structured interactions using other tools (e.g., polls, chat boxes), which can help draw in participants who may be less comfortable speaking.
Privacy issues	• Communicate to respondents the importance of setting up their home or work environments to protect the group's privacy (e.g., ensuring nonparticipants will not interrupt or walk in). • Be prepared to pause the group to maintain privacy and confidentiality (e.g., if a nonparticipant enters the room of a participant).

Sources: Abrams et al. (2015); Archibald et al. (2019); Daniels et al. (2019); Gothberg et al. (2013); Iacono et al. (2016); Kite & Phongsavan (2017)

Telephone Communication

Telephone interviews and focus groups involve technology that is easy to use and accessible. Telephones, particularly mobile phones, are widely used, even by populations that may lack access to other technologies, such as computers and tablets (Pew Research Center, 2019). As such, mobile phones create opportunities for data collection that can reduce selection bias and reach respondents who may otherwise be difficult to interview. They offer flexibility to participants, who can dial in from most locations.

While the lack of visual cues can require more active moderation, it also offers anonymity—which can help when collecting more sensitive and personal information. Exhibit 9 describes

common challenges of interviews and focus groups conducted by telephone, and strategies to address them. Without visual social cues, facilitators may need to give more verbal hints to ensure respondents understand the questions asked and can provide complete responses. This may be a particular challenge for telephone focus groups, during which it may be difficult for participants and moderators to track the discussion. However, telephone discussions can increase participants' sense of anonymity, which may encourage the disclosure of more sensitive information (Graffigna & Bosio, 2006). Personal information may be more easily shared in focus groups when it consists of members with shared experiences who can quickly develop a group identity (Frazier et al., 2010).

Exhibit 9. Telephone Interviews and Focus Groups: Common Challenges and Strategies

Challenges	Strategies
Sound quality	• Schedule the call when the participant can be in a quiet location. If mobile phones will be used, ensure, to the extent possible, that coverage and reception is good.
No visual social cues leading to respondent confusion in conversations	• Send protocol questions beforehand so the respondent knows what questions will be asked and how the conversation will be structured. • Keep protocol questions clear and brief. • Reduce the number of questions to account for possible gaps in the conversation. • Limit focus group size to no more than four people. • Use the same tag line to each question to cue respondents that it is their turn (e.g., "Mary, could you speak to that?").
Less detailed responses	• Be prepared to use prompts that encourage respondents to provide more information.

Sources: Allen (2014); Frazier et al. (2010); Gothberg et al. (2013); Hershberger & Kavanaugh (2017); Irvine et al. (2013); Opdenakker (2006)

Online Communication and Mobile Phone Messaging

Digital text-based methods collect information that is exchanged intermittently or relayed immediately. *Asynchronous* interactions, such as email exchanges, do not require people to be present at the same time to communicate. *Synchronous* interactions, such as online chats, are "live" communications that take place simultaneously. Both are useful remote data collection strategies.

Asynchronous Online Interviews

Asynchronous interviews may work best for respondents who have a greater interest or investment in the results and need more flexibility to respond. Asynchronous, online interview formats, such as email or discussion boards, collect information in a way that does not require an

immediate response. The information collected will lack spontaneity; however, the information may be richer and more detailed because respondents have more time to elaborate. Data can be collected at the respondent's convenience, but because asynchronous interviews require sustained interaction over time, they may work best for respondents who are invested in the results. Exhibit 10 describes strategies to address common challenges of asynchronous interviews.

Exhibit 10. Asynchronous Online Interviews: Common Challenges and Strategies

Challenges	Strategies
No visual or verbal social cues	• Make social connections, by offering some personal information, in first email. • Refer to previous email responses for clues to respondents' feelings, reactions, etc. • Develop an interview structure, including time limits for the "conversation." Clearly convey these limits to the respondent.
Number of emails and delays in responses fragmenting the discussion	• Have clear protocols for the length of each interview. • Limit the number of interviews conducted simultaneously to keep better track of responses and help select effective prompts.

Sources: Bowden & Galindo-Gonzalez (2015); Hershberger & Kavanaugh (2017); Opdenakker (2006)

Synchronous Interviews and Focus Groups: Web Based and Mobile Phone

Information can be collected in "real time" using web-based or mobile phone chat or messaging software. These online discussions can mimic the flow and interactions of in-person conversations and include a larger group of participants. The amount of information collected may be reduced because of the time needed to type questions and responses (Jowett et al., 2011). The anonymity of online communication may also encourage participants to disclose more information.

Any selection of web-based or mobile phone messaging should consider population access and use of technology. Web-based data collection may be best for respondents who have home computers and are comfortable using online chat platforms. Mobile phone chat methods take advantage of broadly used technology. Virtual focus groups conducted using mobile phone chat apps may be especially suitable for teens and young adults, who routinely communicate by text. Exhibit 11 illustrates the challenges and strategies for web-based and mobile phone synchronous data collection.

Exhibit 11. Internet and Phone Chat and Messaging: Common Challenges and Strategies

Challenges	Strategies
Individual interviews	
Facilitator cannot rely on visual or verbal cues to guide the discussion	• Begin with an informal chat to establish rapport. • Match respondent's communication style (e.g., level of formality, use of emoticons).
Reduced amount of information	• Reduce the length of the interview protocol. • Allow more time for the interview or divide it into several sessions.
Focus groups	
Dropouts and no-shows	• Provide several time slots for groups and assign participants based on their time preference. • Assign participants who are available at multiple times to the first group and reinvite nonattendees to subsequent groups.
Difficulty tracking discussion in large groups	• Use two moderators/facilitators with clear roles (e.g., one person posts the primary content and another person engages participants and asks follow-up questions). • Help orient members by referring to question numbers when asking follow-up questions (e.g., "As we discussed in question 4 …").
Difficulty obtaining input from all group members	• Invite responses from specific participants who do not type as quickly as others.
Difficulty keeping participants engaged for longer periods	• Schedule focus groups that feature questions in a series that are spread out over several days.
Privacy concerns	• Select a messaging platform with privacy features that conceal personal information such as participants' phone numbers.

Sources: Abrams et al. (2015); Chen & Neo (2019); Graffigna & Bosio (2006); Jowett et al. (2011); Opdenakker (2006); Thrul et al. (2017)

Conclusion

Remote data collection creates both challenges and opportunities for child welfare evaluators and researchers.

Remote methods are uniquely suited to study the effects of remote child welfare service delivery and practices. COVID-19 has disproportionately affected families involved in the child welfare system, with social and economic stressors exacerbating already difficult family situations. Child welfare agencies across the country have had to quickly adapt by providing services virtually and developing new processes to ensure the safety of children. This new reality creates a unique opportunity to study and understand the implementation and effects of remote child welfare services. The methods described in this guide demonstrate it is possible to collect high-quality data using remote and virtual technologies. The quantity, completeness, and validity of data collected remotely can approach or even equal that of data collected in person, with proper attention to the needs and preferences of respondents, well-designed data collection protocols, and adequate safeguards to protect respondents' privacy and avoid technical pitfalls.

Remote research may encourage the development of new methods that had not been considered previously. The current necessity of collecting information remotely may spur the development or refinement of strategies for collecting information from children and families. For example, researchers could pilot interviews or focus groups with youth using text messaging or conduct online focus groups with relative caregivers. Data collection methods that are integrated into routine interactions among service providers could gather more information without increasing staff burden. For example, periodic polls could be integrated into recurring web-based project meetings.

Research is an integral part of building knowledge about effective child welfare services and practices. The changes to the nation's child welfare system that have occurred in response to the COVID-19 pandemic may in some cases be permanent, and additional adaptations may be necessary. Similarly, data collection and communication technologies will continue to evolve, which will in turn create new opportunities for conducting research and evaluation in the child welfare field. Child welfare researchers must stay attuned to both changes in child welfare practices and emerging technologies to enhance their understanding of an evolving child welfare system and to foster further improvements in services for children and families.

We've come to the conclusion that we've waited long enough.… Now we just need to find creative ways to start reaching our community.

—**FEDERAL CHILD WELFARE GRANTEE, FLORIDA**

References

Abrams, K. M., Wang, Z., Song, Y. J., & Galindo-Gonzalez, S. (2015). Data richness trade-offs between face-to-face, online audiovisual, and online text-only focus groups. *Social Science Computer Review, 33*(1), 80–96.

Allen, M. D. (2014). Telephone focus groups: Strengths, challenges, and strategies for success. *Qualitative Social Work, 13*(4), 571–583.

Antoun, C., Katz, J., Argueta, J., & Wang, L. (2018). Design heuristics for effective smartphone questionnaires. *Social Science Computer Review, 36*(5), 557–574.

Archibald, M. M., Ambagtsheer, R. C., Casey, M. G., & Lawless, M. (2019). Using Zoom videoconferencing for qualitative data collection: Perceptions and experiences of researchers and participants. *International Journal of Qualitative Methods, 18*, 1–8.

Baron, E. J., Goldstein, E. G., & Wallace, C. T. Suffering in silence: How COVID-19 school closures inhibit the reporting of child maltreatment (July 29, 2020). *Journal of Public Economics, forthcoming*. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3601399 .

Bliss, S. (2007). Review of the Battelle Developmental Inventory—second edition. *Journal of Psychoeducational Assessment, 25,* 409–415.

Bowden, C., & Galindo-Gonzalez, S. (2015). Interviewing when you're not face-to-face: The use of email interviews in a phenomenological study. *International Journal of Doctoral Studies, 10*, 79–92.

Carroll, J. (1984). The Substance Abuse Problem Checklist: A new clinical aid for drug and/or alcohol treatment dependency. *Journal of Substance Abuse Treatment, 1*(1), 31–36.

Chen, J., & Neo, P. (2019). Texting the waters: An assessment of focus groups conducted via the WhatsApp smartphone messaging application. *Methodological Innovations, 12*(3), 1–10.

Children's Bureau (June 25, 2020). *A message on COVID-19 from the Children's Bureau*. https://www.acf.hhs.gov/cb/resource/covid-19-resources .

Cox, J., Holden, J., & Sagovsky, R. (1987). Detection of postnatal depression: Development of the 10-item Edinburgh Postnatal Depression Scale. *British Journal of Psychiatry, 150*(6), 782–786.

Daniels, N., Gillen, P., Casson, K., & Wilson, I. (2019). STEER: Factors to consider when designing online focus groups using audiovisual technology in health research. *International Journal of Qualitative Methods, 18*, 1–11.

Federal Communications Commission. (2020). *2020 broadband report: Inquiry concerning deployment of advanced telecommunications capability to all Americans in a reasonable and timely fashion*. Author.

Finch, A., Saylor, C., Edwards, G., & McIntosk, J. (1987). Children's Depression Inventory: Reliability over repeated administrations. *Journal of Clinical Child Psychology, 16*(4), 339–341.

Foa, E., Johnson, K., Feeny, N., & Treadwell, K. (2001). The Child PTSD Symptom Scale: A preliminary examination of its psychometric properties. *Journal of Clinical Child Psychology, 30*(3), 376–384.

Ford, K. L., Albritton, T., Dunn, T. A., Crawford, K., Neuwirth, J., & Bull, S. (2019). Youth study recruitment using paid advertising on Instagram, Snapchat, and Facebook: Cross-sectional survey study. *Journal of Medical Internet Research Public Health and Surveillance, 5*(4), e14080. https://publichealth.jmir.org/2019/4/e14080/ .

Frazier, L. M., Miller, V. A., Horbelt, D. V., Delmore, J. E., Miller, B. E., & Paschal, A. M. (2010). Comparison of focus groups on cancer and employment conducted face to face or by telephone. *Qualitative Health Research, 20*(5), 617–627.

Gilmore, L., & Cuskelly, M. (2009). Factor structure of the Parenting Sense of Competence Scale using a normative sample. *Child Care, Health, and Development, 35*(1), 48–55.

Gothberg, J., Reeves, P., Thurston, L., Applegate, B., Kohler, P., & Peterson, L. (2013). Is the medium really the message? A comparison of face-to-face, telephone, and internet focus group venues. *Journal of Ethnographic & Qualitative Research, 7*(3), 108-127.

Graffigna, G., & Bosio, A. C. (2006). The influence of setting on findings produced in qualitative health research: A comparison between face-to-face and online discussion groups about HIV/AIDS. *International Journal of Qualitative Methods, 5*(3), 55–76.

Griffith, A. K. (2020). Parental burnout and child maltreatment during the COVID-19 pandemic. *Journal of Family Violence*, 1–7. https://doi.org/10.1007/s10896-020-00172-2 .

Hershberger, P. E., & Kavanaugh, K. (2017). Comparing appropriateness and equivalence of email interviews to phone interviews in qualitative research on reproductive decisions. *Applied Nursing Research, 37*, 50–54.

Herzing, J. M. E. (2019). *Mobile web surveys*. FORS Guide No. 01, Version 1.0. Lausanne: Swiss Centre of Expertise in the Social Sciences FORS. https://doi.org/10.24449/FG-2019-00001 .

Iacono, V. L., Symonds, P., & Brown, D. H. (2016). Skype as a tool for qualitative research interviews. *Sociological Research Online, 21*(2),12. https://doi.org/10.5153%2Fsro.3952 .

Irvine, A., Drew, P., & Sainsbury, R. (2013). 'Am I not answering your questions properly?' Clarification, adequacy and responsiveness in semi-structured telephone and face-to-face interviews. *Qualitative Research, 13*(1), 87-106.

James Bell Associates. (2015). *Measuring child welfare outcomes: A compendium of standardized instruments*. Children's Bureau, U.S. Department of Health and Human Services.

James Bell Associates. (2018). *Formative evaluation toolkit: A step-by-step guide and resources for evaluating program implementation and early outcomes*. Children's Bureau, U.S. Department of Health and Human Services.

Jones, A. S., & LaLiberte, T. (2013). Measuring youth connections: A component of relational permanence for foster youth. *Children and Youth Services Review, 35*(3), 509–517.

Jowett, A., Peel, E., & Shaw, R. (2011). Online interviewing in psychology: Reflections on the process. *Qualitative Research in Psychology, 8*(4), 354–369.

Kite, J., & Phongsavan, P. (2017). Insights for conducting real-time focus groups online using a web conferencing service. *F1000Research, 6,* 122. https://doi.org/10.12688/f1000research.10427.1 .

Lindeman, H., & Khandaker, R. (2011). Domestic Violence Inventory: Introduction and standardization in a large sample of domestic violence offenders. *Family & Intimate Partner Violence Quarterly*, *4*(1), 49–66.

Liptak, J. (2002). *Job search attitude inventory*. JIST Publishing.

McCroskey, J., Sladen, A., & Meezan, W. (1997). *Family Assessment Form: A practice-based approach to assessing family functioning*. CWLA Press.

Nguyen, L. H. (2013). The relationship between unemployment and child maltreatment: A county-level perspective in California. *Children and Youth Services Review, 35*(9), 1543–1555.

Opdenakker, R. (2006, September). Advantages and disadvantages of four interview techniques in qualitative research. *Forum Qualitative Sozialforschung/Forum Qualitative Social Research 7*(4). https://www.qualitative-research.net/index.php/fqs/article/view/175 .

Pascoe, J., Ialongo, N., Horn, W., Reinhart, M., & Perradatto, D. (1987). The reliability and validity of the Maternal Social Support Index. *Family Medicine, 20*(4), 271–276.

Pew Research Center. (2019, June). *Mobile technology and home broadband 2019*.

Pew Research Center. (2020, April). *About half of lower-income Americans report household job or wage loss due to COVID-19*.

Rich, B., & Eyberg, S. (2001). Accuracy of assessment: The discriminative and predictive power of the Eyberg Child Behavior Inventory. *Ambulatory Child Health, 7*(3–4), 249–257.

Roggman, L. A., Cook, G. A., Innocenti, M. S., Jump Norman, V., & Christiansen, K. (2013). Parenting interactions with children: Checklist of observations linked to outcomes (PICCOLO) in diverse ethnic groups. *Infant Mental Health Journal, 34*(4), 290–306.

Snyder, C. R., Hoza, B., Pelham, W. E., Rapoff, M., Ware, L., Danovsky, M., ... & Stahl, K. J. (1997). The development and validation of the Children's Hope Scale. *Journal of Pediatric Psychology, 22* (3), 1997, 399–421.

Thrul, J., Belohlavek, A., Kaur, M., & Ramo, D. E. (2017). Conducting online focus groups on Facebook to inform health behavior change interventions: Two case studies and lessons learned. *Internet Interventions, 9*, 106–111.

Vinciarelli, A., Pantic, M., Bourlard, H., & Pentland, A. (2008, October*).* Social signals, their function, and automatic analysis: A survey. In *Proceedings of the 10th international conference on multimodal interfaces* (pp. 61–68). https://dl.acm.org/doi/10.1145/1452392.1452405 .

Woodcock, R. W. (1997). The Woodcock-Johnson Tests of Cognitive Ability—Revised. In D. P. Flanagan, J. L. Genshaft, & P. L. Harrison (Eds.), *Contemporary intellectual assessment: Theories, tests, and issues* (pp. 230–246). Guilford Press.

Disclaimer

The views expressed in this publication do not necessarily reflect the views or policies of the Children's Bureau, the Administration for Children and Families, or the U.S. Department of Health and Human Services. For more information, please visit the Children's Bureau website at https://www.acf.hhs.gov/cb.