

Return to Learn Survey – Family

October 1 - 30, 2020

Return to Learn Survey - Family

Directions

Please help us to better support you by answering these questions. Your responses will assist us to better understand your first quarter experience and inform school and state plans as we move forward. Your answers will be anonymous. If you prefer not to answer any question, you can skip it. As you answer these questions, please think about your experience during the first quarter transition back to school. If you have more than one child enrolled in public schools, please answer these questions about your oldest child. If you wish, you can retake the survey for your other children.

	Question	Response Options
1	How would you describe the level of COVID-related health and safety measures on your child's school campus to keep students healthy and safe?	Not enough safety measures Too many safety measures About the right amount of safety measures My child is only learning at home
2	How difficult or easy has it been for your child to follow the COVID-related safety measures on their school campus?	Very difficult Somewhat difficult Slightly difficult Slightly easy Somewhat easy Very easy My child is only learning at home
3	Overall, how satisfied are you with the first quarter transition back to school for your child?	Very satisfied satisfied Somewhat Satisfied Not Satisfied
4	What school learning model did your child mostly participate in?	Full Distance Learning Full In-Person Combination of Distance Learning and In-Person (Blended) Don't know
5	What aspects of your child's school learning model worked well for you during the first quarter? Select all that apply.	Child's schedule Health and safety practices Technology Communication from the school Attending to my child's individual needs Other Nothing worked well
6	If you responded "other" to the previous question, please specify.	Free response

7	What challenges related to your child's school model did you experience during the first quarter? Select all that apply.	Child's schedule Health and safety practices Technology Communication from the school Attending to my child's individual needs Other Nothing was challenging
8	If you responded "other" to the previous question, please specify.	Free response
9	How concerned are you about your child's academic growth right now?	Not at all concerned Slightly concerned Somewhat concerned Quite concerned Extremely concerned
10	Are there enough devices within the household for each family member to use at the same time?	Yes No
11	Does your child have a school-issued laptop or tablet for distance learning?	Yes No
12	Does your child have a home computer to use for distance learning?	Yes No
13	Do you have reliable internet access in your home?	Yes No
14	How helpful have your teachers been in supporting your child's learning during the first quarter?	Not at all helpful Slightly helpful Somewhat helpful Quite helpful Extremely helpful Not aware
15	How well has your school met your child's academic needs?	Not at all met Slightly met Mostly met Met Exceeded expectations
16	How engaged was your child in learning activities during the first quarter?	Not engaged Slightly engaged Somewhat engaged Mostly Engaged Fully Engaged
17	How comfortable have you become with a technology-rich curriculum (e.g. online content, use of device, interactive	Was already comfortable Slightly comfortable Somewhat comfortable Comfortable Much more comfortable

	instructional platform) during the first quarter?	
18	In what ways were you comfortable with a technology-rich curriculum during the first quarter? Select all that apply.	Use of device Online program Interactive platform for instruction and communication Troubleshooting Online resources Other Did not become comfortable
19	How concerned are you about your child's social and emotional well-being right now?	Not at all concerned Slightly concerned Somewhat concerned Quite concerned Extremely concerned
20	How satisfied are you with the way the school/teachers/counselors/related service providers are addressing your child's social and emotional well being?	Very satisfied Satisfied Somewhat satisfied Not satisfied I do not have concerns about my child's social and emotional well being
21	How helpful has the communication from your child's school been for the first quarter?	Not at all helpful Slightly helpful Somewhat helpful Quite helpful Extremely helpful
22	How comfortable do you feel communicating with your child's school?	Not at all comfortable Slightly comfortable Somewhat comfortable Quite comfortable Extremely comfortable
23	When you need to, how difficult or easy is it to get in contact with your child's teacher(s)?	Very difficult Somewhat difficult Slightly difficult Neither difficult nor easy Slightly easy Somewhat easy Very easy I have not needed to contact my child's teacher(s) this past quarter
24	What is the best way for your child's school and teacher(s) to communicate with you?	Text message Phone call Email School web-based platform Home visit Other
25	How confident are you in your ability to support your child's education during distance learning?	Not at all confident Slightly confident Somewhat confident Quite confident Extremely confident My child is not participating in distance learning
26	When most schools switched to full distance learning, who primarily supervised your child's learning?	Parent/Guardian Grandparent Aunt or uncle Other relative or friend Sibling Sitter Childcare provider Child works independently without direct adult supervision My child is old enough to be unsupervised Other

27	If you selected "other" for the previous question, please specify.	Free response
28	How satisfied are you with training that has been provided for families from the school?	Very satisfied Satisfied Somewhat satisfied Not satisfied Training was not available Did not need training Chose not to participate
29	How satisfied are you with access to learning resources that have been provided for families from the school?	Very satisfied Satisfied Somewhat satisfied Not satisfied Learning resources were not available Did not need learning resources
30	If you used the new Ohana Help Desk during the first quarter, how satisfied were you with the service?	Very satisfied Satisfied Somewhat satisfied Not satisfied Did not use the Ohana Help Desk
31	If you used any Hawaii Department of Education teleHealth services, how satisfied were you with the service?	Very satisfied Satisfied Somewhat satisfied Not satisfied Did not use the teleHealth services
32	What supports would help you as a parent, guardian, or caretaker of your child? Select all that apply.	<input type="checkbox"/> Access to resources <input type="checkbox"/> Learning activities for the home <input type="checkbox"/> Technology support <input type="checkbox"/> Training on my child's online programs <input type="checkbox"/> Training on social and emotional learning <input type="checkbox"/> Training on using technology devices <input type="checkbox"/> Other
33	If you selected "Access to resources" or "other" for the previous question, please specify.	Free response
Background Information		
34	For Elementary Grades Only: Did you participate in the ASU Prep Digital Pilot for distance learning?	Yes No Not applicable-my child is not in an elementary grade

35	What is your relationship to the child?	Mother Father Guardian Grandmother Grandfather Aunt Uncle Sibling Cousin Other
36	What race or ethnicity do you primarily identify with?	Asian (excluding Filipino) Black Filipino Hispanic Native Hawaiian Pacific Islander White Native Hawaiian Other
37	Select all the race and ethnicity groups you identify with.	Asian (excluding Filipino) Black Filipino Hispanic Native Hawaiian Pacific Islander White Native Hawaiian Other
38	If you selected "other" for the previous question on all races and ethnicity groups that you identify with, please specify.	Free response
39	Please indicate the primary language you speak at home.	Cebuano Chinese - Cantonese Chinese - Mandarin Chuukese English Hawaiian Ilocano Japanese Korean Marshallese Samoan Spanish Tagalog Tongan Vietnamese Other/multiple languages
40	What grade is your child?	Pre-Kindergarten Kindergarten 1st 2nd 3rd 4th 5th 6th 7th 8th 9th 10th 11th 12th
41	Has your child ever received the following services? Select all that apply.	English Language (EL) Homeless Support Migrant Support Special Education (SPED)
42	Is your child currently in foster care?	Yes No
43	Do you live in a homeless shelter?	Yes No

44	Does your family live with another family or other person because of loss of housing or as a result of economic hardship?	Yes No
45	Do you live in Hawaii Public Housing Authority housing? A list of HPHA sites can be found here .	Yes No

Do you need help?

Hope you are doing well. If your child is sad, needs help, feels disconnected, feels sick, or if you are not sure if your child should go to the hospital, call (844) 436-3888 (Monday through Friday, 9am - 4pm) to speak with a nurse for the Telehealth for Hawaii DOE Students service at no cost to families. <https://bit.ly/HawaiiKeikiHIDOE>

Additional information can be found on the Hawaii Department of Health website <https://covidhawaii.info/> and Aloha United Way 211, dial 2-1-1.