



CX Discovery: Birth and Early Childhood Research Plan — DRAFT

V1: April 27, 2022

PRE-DECISIONAL/DELIBERATIVE — NOT FOR DISTRIBUTION

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This plan outlines the research activities that will be undertaken for CX Discovery: Having a child and early childhood for low-income families. Contents are as follows:

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OVERVIEW

Core Team

The core team conducting this research will consist of staff from the Office of Management and Budget (OMB). Other Federal agencies and nonprofit organizations may support the execution of the research, as well as guiding the research process.

Deliverables

Under OMB's project model, projects consist of a set of standard releases, comprised of two-week sprints. This plan covers activities to be conducted as part of Release 3: Research. During this release, the core team will conduct human-centered design research — interviews and observational research with people — in addition to desk research dedicated to multiple topics.

The deliverable at the end of this release will be preliminary research findings— a compilation of research data that has been selected, anonymized, and sorted, but is otherwise unmediated. Meaning-making and artifact creation based on this data is the task of Release 4: Synthesize. For overall CX Discovery outcomes, see Appendix A.



Timeline

Activities for Release 3: Research will be conducted over the course of three two-week sprints of work within the activity period. Activities and dates for those sprints are provided below.

SPRINT #	SPRINT ACTIVITIES	START DATE	END DATE
S1	<ul style="list-style-type: none">• Conduct interviews with subject matter experts• Conduct desk research including: Existing system precedent research, Legal and policy research, and Procurement research• Conduct quantitative analysis of administrative data to inform research findings	5/9/22	6/15/22
S2	<ul style="list-style-type: none">• Continue desk research• Continue quantitative administrative data analysis• Conduct interviews and observational research with frontline staff and members of the public	5/9/22	6/30/22
S3	<ul style="list-style-type: none">• Analyze research• Share research findings	5/9/22	7/15/22



**BY THE PEOPLE
FOR THE PEOPLE
WITH THE PEOPLE**

INQUIRY AREAS

Research activities for CX Discovery: Having a child and early childhood for low-income families are intended to collect information related to three primary areas of inquiry:

1. What are the most critical moments of this journey, and what are families' key wants and needs in these moments?
2. What services and programs best address families' needs and wants while also addressing system requirements?
3. What government actions, structures, and infrastructures support holistic, community-based care models?

Further components of these inquiry areas are described below. These top-level inquiry areas and sub-elements will guide the direction of desk research activities and the substance of the discussion guides (see Appendix B) for human research.

Inquiry Area 1: People's Wants & Needs

To understand *What are the most critical moments of the 'having a child and early childhood for low-income families journey', and what are families' key wants and needs in these moments?*, we will explore:

- What are the key drivers of/barriers to awareness of benefits, care, and support available?
- What are the key drivers of/barriers to accessing benefits, care, and support?
- What are the key triggers for families to enroll or un-enroll in benefits or support programs?

Inquiry Area 2: Best Services & Programs

To understand *What services and programs best address families' needs and wants while also addressing system requirements?* — while also addressing the acute state administrative challenges during the unwinding of the public health emergency, and facilitating ongoing administrative improvements for states — we will explore:



- What are people's preferred mechanisms for enrolling in, checking, and updating information for their benefits, and what user experience best meets their wants and needs?

Inquiry Area 3: System, Policy, and Financial Models

To understand *What government actions, structures, and infrastructures support community-based care models?* — defined as a holistic approach to addressing physical/behavioral health and social determinants of health — we will explore:

- What state-level programs and policies support or block community-based care models?
- What federal policy actions best support community-based care models, to serve large numbers of families, that can be deployed and measured within one to two years and also don't require new funding streams or Congressional authorization? Specific areas of inquiry will include:
 - How might federal policy actions support categorical eligibility and automation of benefits for pregnant Medicaid-eligible people?
 - How might federal Medicaid policy actions incentivize bundles of care for new parents?
 - How might federal policy actions support simplification and modernization of application and enrollment processes for Head Start and federally supported child care services?
 - How might federal policy actions smooth access to federal and state cash benefits programs for families with a child under five years of age?
 - How might federal policy actions make a kindergarten readiness standard more accessible to all kids under five?
- What are the most effective interactions between states, providers, vendors, and the federal government?
- What are the ideal reporting requirements, guidance and interpretation?
- What technical, data and policy, and payment models best respond to stakeholder needs?
- What service-level performance indicators are the most meaningful



METHODOLOGY

Selected Methods

Research for CX Discovery: *Having a child and early childhood for low-income families* will be conducted using a mixed-method approach, outlined below.

Human research will consist of 30- to 60-minute semi-structured interviews, which may be conducted in person or via remote video calls, as well as in-person contextual observation. The purpose of these forms of qualitative human research is to understand the experiences of people currently using, providing, and administering services and systems.

Desk research will consist of the review of existing materials or information (documents, reports, memos, design artifacts, data sets, etc.) related to project inquiry areas. The purpose of desk research is to parse best practices and operational details from existing services, systems, and policies, and to analyze constraints and opportunities for future improvement.

Method Teams & Timing

RESEARCH METHOD	INTENTION	TEAM	TIMING
Human Research			
30- to 60-minute semi-structured interviews	Understand the experiences of people currently using, providing, and administering services and systems.	OMB PPM Team	May 9–Jun 30 (R3, S1-2)
Contextual observation			
Desk Research			
Existing system precedent research	Review/analyze reports, memos, data sets, and other materials on existing models and systems to parse best practices and operational details from existing: <ul style="list-style-type: none">• Government models (global, state, local)• Social-sector models• Private-sector models	OMB PPM Team	Apr 11–May 30 (R3, S1-2)
Data analysis			



• Predatory models/dark patterns			
Legal and policy research	Analyze constraints and opportunities provided by current legal regulations, guidance, and policies including gaps/needs and best practices	OMB USDS Team	Before May 15
Procurement research	Analyze constraints and opportunities provided by current procurement policies, including spend, vendors, and contracts.	OMB USDS Team	Before May 15



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PARTICIPANTS

Participant Types

Participants in this research will include subject matter experts, frontline staff, and members of the public.

Subject Matter Experts (SME)

SME participants have insights on policy and program operations, implementation, and service management, but usually do not have direct contact with members of the public. Examples of SMEs include policy experts, advocates, government agency senior staff, and NGO/CBO administrators.

The core project team and agency partners will collectively submit names of potential SMEs to interview. The project team will then reach out to the individuals to schedule a time to speak. These conversations will likely be conducted via video call.

Frontline Staff (FLS)

FLS participants directly engage with members of the public to whom they provide services. They can speak to both their own day-to-day work experiences, as well as to their observations of common public experiences. Examples of FLS include nurses, workers at benefits offices or call centers, and public-facing NGO/CBO staff.

The core project team and agency partners will collectively submit names of potential FLS to interview. Additionally, state/CBO partners in the research locations listed below will be asked to provide further referrals to FLS networks. The project team will then reach out to the individual FLS participants to schedule a time to speak. These conversations may be conducted in person or via video call.

Members of the Public (MOP)

MOP participants directly experience the life event being researched and can speak to their personal experience of the systems and services they encounter.



Through engagements with FLS, nonprofit organizations, and community stakeholders in key locations (see Location Selection), the core project team will identify members of the public interested in participating in interviews. The project team will then reach out to the individuals to schedule a time to speak. These conversations may be conducted in person or via video call.

Participant Sample

The core project team will identify research participants that meet the following sampling criteria. Note that this sample size will be split across all four locations identified. While we expect to speak with ~65 people for each CX Discovery life experience, given the overlap between the having a child and early childhood experiences, the total sample for both experiences is not expected to exceed 110. Of the total sample for both experiences, approximately 70 will be engaged in-person, while 40 will be engaged via remote means.

PARTICIPANT TYPE	SAMPLE BREAKDOWN	# OF PARTICIPANTS (n=)
SME	• State program administrator	2
	• State delivery + implementation SME	2
	• State legal + procurement expert	2
	• CBO directors	2
	• Healthcare providers at management level, e.g.: care network CEOs	2
	• International policy experts	2
	• WIC and Medicare experts	3
		n=15
FLS	• NICU staff	3
	• Social workers	3
	• State Benefit support coordinators	2
	• Non-profit volunteers	3
	• Childcare staff	2
	• [other]	2
		n=15



MOP	People experiencing/who are:	n=35
	<ul style="list-style-type: none">• Families who have children with disabilities• Families experiencing homelessness or housing insecurity• Families experiencing behavioral disorders including substance abuse• Families experiencing interpersonal violence• Families who are justice-system involved• Families experiencing food insecurity• Families with 'non-nuclear' structure, including inter-generational households• Families with LGBTQ+ parents• Families who are members of tribal nations or live on reservations	

Total: n=65



LOCATIONS

Selected Locations

Based on four selection criteria—previous exemplary and innovative models of benefit delivery; diverse low-income populations; a mix of urban, suburban and rural populations; and the potential capacity to run future pilot programs based on research outcomes— the project team selected the following four locations for in-person research:

- Louisiana: New Orleans/Baton Rouge
- Michigan: Detroit
- Minnesota: Minneapolis/St. Paul
- North Carolina: Raleigh

Selected Sites (for confirmation in the next Sprint)

Location	Site Name	Sites Address	Description
Louisiana	Site 1		
	Site 2		
	Site 3		
Michigan	Etc		
Minnesota			
North Carolina			