

Supplementary File 2. The survey is completed by facilitators on a weekly basis.

Feasibility Survey Administered to Facilitators

Week \_\_\_\_

1. Were there any technical difficulties during this session?

\_\_\_\_ Yes                      \_\_\_\_ No

2. Were there any situations when participants were not present during this session? (Select all that apply)

- Nothing at all
- People turning off their video cameras
- Disruptions & temporarily not being present during the session (e.g. left the screen to calm or attend to the baby)
- Early sign-off
- Late sign-in
- Other: \_\_\_\_\_

3. This space is for any additional comments/explanations you would like to include.