PERMANENCY RESOURCE CONSENT FORM

TO BE PRINTED ON WESTAT LETTERHEAD

INTRODUCTION AND PURPOSE OF STUDY

Westat, a company hired by the U.S. Department of Health and Human Services, is studying special services being providing by a group working with the Los Angeles County Department of Children and Family Services (DCFS). The study is to find out if the special services help children stay out of foster care or leave foster care sooner. It will also help groups in your community come up with better ways to serve children and families.

We are asking you to take part in this study because you currently provide or will be providing care for a child receiving these special services. We will also ask the child if we can interview him or her.

You do not have to be in the study. You can stop being in the study at any time. Your choice will not affect the services that you and your family get.

PROCEDURES

Collection and use of interview responses:

While you are getting the special services, Westat will be studying how much these services help children. Part of the study includes getting information about you, the child receiving special services, and how you feel about similar children.

A Westat worker is going to be asking you questions up to 2 different times. The first interview will be soon after you start participating in the special services from the group working with DCFS. The worker will meet with you again once more before services end.

A Westat worker will visit you at home at a time that is best for you. You can ask questions at any time. You can also skip questions that you do not want to answer. The questions will take about 1 hour to answer. There are no right and wrong answers. We just want you to be honest when you answer.

Studying your interview responses and foster care client records:

During the study Westat workers will review the information from questions we ask you and will also review information from foster care client records. These records have information that is already collected on children that are part of the foster care system. We are asking if you will agree to let us to study your answers together with the answers the child gives us and the information we get from the child's foster care records. We will use this information only for the study.

DIFFERENT WAYS TO PARTICIPATE

There are no other ways to participate in the study other than completing the interviews.

PARTICIPANT AND DATA PRIVACY

Only Westat workers will see your answers and we will keep your information private to the extent permitted by law. We will use your information only for research. We will not include information that identifies you or your family in reports we write.

To help us protect your information, we have a Certificate of Confidentiality from the U.S. Department of Health and Human Services. This Certificate means that no one can force us to share information that may identify you. This is true even in any court or legal proceeding, under a court order or subpoena. But we do have to take any needed action, including reporting to authorities, to prevent harm to yourself or others. This includes reporting suspected child abuse or neglect. To make sure that Westat workers are collecting the data correctly, another Westat worker may ask to sit in on the interview. We will ask you ahead of time so you can decide if the other worker can come or not.

The collection of information described in this consent is voluntary. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 0970-0408 and it expires XX/XX/XXXX.

INCENTIVE FOR PARTICIPATING IN THE STUDY

You will receive a \$20 gift card for taking part in each interview.

BENEFITS

There are no direct benefits to you. But by taking part, you will help groups in your community come up with better ways to serve children and families.

RISKS

We do not expect that there are any risks from your taking part in the study. If some of the questions make you feel upset or sad, you can talk with a caseworker. The worker also has a list of local mental health agencies that he or she can give you, if you ask. You can also skip questions that you do not want to answer or end the interview at any time.

TREATMENT FOR INJURY RELATED TO THIS STUDY

We do not expect that you will experience any injuries because of participating in the study. Therefore, no treatment will be available to address any injuries.

CONFLICT OF INTEREST

Westat has no financial or other relationships with your agency that will affect our role in conducting the study, including interpreting and reporting the study results.

SIGNATURE

Signing this form means that you read or listened to someone read this form to you, that you understand what it says, and that you agree to be in this study. Please provide your response to participating in the study by checking Yes or No in box A and B. Then, sign your name and give this form to the Westat researcher. You will receive a copy of the consent form.

A Do you agree that you have received a copy of the F collection and use of your interview answers in this study	
Yes, I agree to the collection and use of my interview answers in this study and I have received a copy of the Research Participant's Bill of Rights. [Please proceed with answering the question in box B.].	No, I do not agree to let Westat collect and use my interview answers in this study but I agree that I have received a copy of the Research Participant's Bill of Rights. [You may skip box B and proceed with signing this form].
B. Do you agree to have Westat study your interview ar child name] and the foster care records for this child's concluded Yes, I agree to let Westat study my interview answers with the interview answers provided by [insert child name] and the foster care records for this child.	

Participant's Signature
Print Name
Date

CONTACT

For questions about the study, please contact:

Jaymie Lorthridge, Westat Study Contact 1-800-WESTAT1 (937-8281), x5871 JaymieLorthridge@westat.com You can learn more about your rights as a part of the study from the *Research Participant's Bill of Rights* document. For questions about your rights as a participant in this study, contact: *The Committee for the Protection of Human Subjects*, (916) 326-3660.

Date of IRB approval of this consent: Expiration date of IRB approval of this consent:

ATTACHMENT B7: RISE PERMANENCY RESOURCE CONSENT AND INTERVIEW RISE IDENTIFIED PERMANENCY RESOURCE INTERVIEW

DATE:	
EVALUATION ID:	
INTERVIEWER:	
INTERVIEW TASK:	
BASELINE	
□FOLLOW-UP	

Burden Statement: Public reporting burden for this collection of information is estimated to average 60 minutes. This estimate includes the time for reviewing instructions and completing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 0970-0408 and it expires XX/XX/XXXX.

Permanent Connections Inventory Adult Version

You were identified by **[INSERT YOUTH'S NAME]** as a person who would be a permanency resource for him/her. A permanency resource is a person who is willing to provide a home for a youth and be a life-long source of emotional support.

	pport. RCLE RESPONSE OPTION BELOW EACH QUESTION]
1.	Would you say that you fit this definition?
	1 = yes 0 = no [SKIP TO QUESTION 3]
2.	What is the likelihood that you will remain as a dependable, supportive person throughout this young person's life?
	1 = not likely 2 = a little likely 3 = somewhat likely 4 = very likely
3.	What is your relationship with [YOUTH'S NAME]?
	1 = biological parent 2 = stepparent 3 = adoptive parent 4 = guardian 5 = relative (specify
No	w I would like to ask you about some characteristics of you and your family.
4.	What is your gender? (If not obvious)
	1 = male 2 = female 3 = transgender 4 = other
5.	What is your age?
6.	What is your race? (Select one or more.) 1 = American Indian/AK Native 2 = Asian 3 = Black/African American 4 = Hawaiian/Pacific Islander

5 = White

	6 = Other (specify)
7.	What is your ethnicity?
	1 = Hispanic, Latino origin 0 = No Hispanic, Latino origin
8.	How many people live in your household?
9.	What is the highest level of education you have obtained?
	1 = less than high school 2 = high school degree/or equivalent 3 = some college 4 = college 5 = graduate courses 6 = graduate degree
10.	Do you have any biological children?
	1 = yes If yes, how many? 0 = no
11.	Have you ever been a foster parent?
	1 = yes 0 = no
12.	Do you have any experience working with children/youth?
	1 = yes 0 = no
13.	Do you have any experience working with or being around gay/lesbian/bisexual/transgender/questioning youth?
	1 = yes 0 = no 8 = don't know
14.	Do you have any experience caring for gay/lesbian/bisexual/transgender/questioning youth?
	1 = yes 0 = no 8 = don't know
15.	Are you comfortable being around gay/lesbian/bisexual/transgender/questioning people?
	1 = yes 0 = no 8 = don't know

16.	Are you willing to le	earn about how to	best support	gay/lesbian/bisexu	ıal/transgender/que	stioning youth?

1 = yes

0 = no

8 = don't know

Emotional Permanency Survey

We are doing a study about youth in the child welfare system. We want to get the opinions and attitudes of caregivers who make permanent homes for these youth. Please answer yes or no when I ask the questions.

[CIRCLE THE RESPONSE.]

1.	Do you think that [INSERT YOUTH NAME HERE] will be a part of your family for the rest of his or her life?	Υ	N
2.	If another family member needs to move into your home, will you ask [INSERT YOUTH NAME HERE] to leave?	Υ	N
3.	If your family moves out of state, will you ask [INSERT YOUTH NAME HERE] to go with you?	Υ	N
4.	If you or the other caregiver (parent) becomes disabled, do you have a plan for [INSERT YOUTH NAME HERE] ?	Υ	N
5.	Do you or will you include [INSERT YOUTH NAME HERE] in decisions that your own children help make? [IF THERE ARE NO OTHER CHILDREN, WRITE N/A HERE]	Y	N
6.	If you or the other caregiver (parent) is hurt and a life-or-death decision needs to be made, would you include [INSERT YOUTH NAME HERE] in the family decision-making?	Υ	N
7.	Does [INSERT YOUTH NAME HERE] know your family and close friends?	Υ	N
8.	Does [INSERT YOUTH NAME HERE] benefit from knowing your family and close friends (e.g. receive gifts or be Facebook or Twitter friends)?	Υ	N
9.	Do you or will you invite [INSERT YOUTH NAME HERE] to visit relatives and go to holiday parties?	Υ	N
10	. Do you or will you allow [INSERT YOUTH NAME HERE] to have arguments within the home without being made to leave?	Υ	N
11	. Do you or will you allow [INSERT YOUTH NAME HERE] to have arguments within the home without fear of being made to leave?	Y	N
12	. Would you ask [INSERT YOUTH NAME HERE] to leave for mistakes or behavior that you would not ask the other children to leave for? [IF THERE ARE NO OTHER CHILDREN, WRITE N/A HERE]	Υ	N
13	. Does/will [INSERT YOUTH NAME HERE] go on family vacations?	Υ	N
14	Do you or will you budget the same amount of money for [INSERT YOUTH NAME HERE] as for other children in the family (like, for music lessons, sports camp, housing, school)? [IF THERE ARE NO OTHER CHILDREN, WRITE N/A HERE]	Y	N
15	Do you or will you offer the same amount of guidance, job advice, and emotional support as you do to your own children and/or other children in the home? [IF THERE ARE NO OTHER CHILDREN, WRITE N/A HERE]	Υ	N
16	. Will [INSERT YOUTH NAME HERE] be included in any inheritance like the other children in the home? [IF THERE ARE NO OTHER CHILDREN, WRITE N/A HERE]	Υ	N

Is there anything else that you have experienced (or anticipate) with [INSERT YOUTH NAME HERE] that shows that the two of you feel close?

Supporting/Rejecting Attitudes Scale (MHI) Adult

NOTE: HAND THE RESPONDENT THE RATING CARD AND READ THE FOLLOWING STATEMENT ALOUD.

We are doing a study about youth in the child welfare system. We want to get the opinions and attitudes of caregivers who provide temporary and permanent homes to these youth. We want to know your beliefs and attitudes about youth sexuality and youth sexual orientation.

I am going to read you some statements. I would like you to rate how much you agree or disagree with each of the statements. Use one of the phrases on this card **[POINT TO CARD]** to answer:

- strongly disagree,
- disagree,
- somewhat disagree,
- neither agree or disagree,
- somewhat agree,
- agree, or
- strongly agree.

There are no right or wrong answers. We want this information so that we can better provide services to youth and their caregivers.

		Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree or Disagree	Somewhat Agree	Agree	Strongly Agree
1.	I prefer the youth in my care to be heterosexual.							
2.	I prefer the youth in my care NOT be gay/lesbian/bisexual.							
3.	I prefer the youth in my care NOT be gay/lesbian/bisexual because it will affect the way people treat them.							
4.	If I found out a youth in my care is gay/lesbian/bisexual, I would support him/her.							
5.	If I found out a youth in my care was discriminated against because he/she is gay/lesbian/bisexual, I would help him/her.							
6.	I prefer the youth in my care NOT be gay/lesbian/bisexual because religious institutions reject these people.							
7.	If I found out a youth in my care is gay/lesbian/bisexual, I would feel comfortable with their boyfriend/girlfriend coming to my home.							
8.	I prefer the youth in my care NOT be gay/lesbian/bisexual because it will be harder for them to adopt or have children.							

		Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree or Disagree	Somewhat Agree	Agree	Strongly Agree
9.	I prefer the youth in my care NOT be gay/lesbian/bisexual because they won't be able to marry the person they love.							
10.	I have at least one gay/lesbian/bisexual friend.							
11.	At least one of my family members is gay/lesbian/bisexual.							
12.	Gay/lesbian/bisexual people should not talk about their sexuality. It should be a private thing.							
13.	I believe being gay/lesbian/bisexual is wrong.							
14.	I watch TV shows that have a gay/lesbian/bisexual character.							
15.	I am uncomfortable watching a TV show that has a gay/lesbian/bisexual character.							
16.	I know a gay/lesbian/bisexual person who has children.							
17.	Discrimination against gay/lesbian/bisexual people almost doesn't exist today.							
18.	Most people treat gay/lesbian/bisexual people as fairly as they treat everyone else.							
19.	I believe gay/lesbian/bisexual people should get therapy. They should learn to be attracted to people of the opposite sex.							
20.	I believe gay/lesbian/bisexual people should not be able to adopt or raise children.							
21.	Children raised by a gay/lesbian/bisexual parent are worse off than children raised by a heterosexual parent.							
22.	Children raised by gay/lesbian/bisexual people turn out just as well as those raised by a heterosexual parent.							
23.	I know gay/lesbian/bisexual people who are successful.							
24.	I believe that gay/lesbian/bisexual people should be allowed to get married.							
25.	Gay/lesbian/bisexual marriage will result in the breakdown of the family.							

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree or Disagree	Somewhat Agree	Agree	Strongly Agree
26. I believe that gay/lesbian/bisexual people should not be allowed to work with children.							
27. Gay/lesbian/bisexual people are good members of society.							
28. Bisexual people just want to have sex with a lot of people. They need to learn to have sex only with members of the opposite sex.							

NOTE: this instrument is based on the Multidimensional Heterosexism Inventory (MHI) developed by Walls, 2005. See Walls, N. (2008) Toward a Multidimensional Understanding of Heterosexism: The Changing Nature of Prejudice, *Journal of Homosexuality*, Vol. 55, No. 1: 20-70.

Supportive/Rejecting Attitudes-Genderism and Transphobia Scale

NOTE: HAND THE RESPONDENT THE RATING CARD AND READ THE FOLLOWING STATEMENT ALOUD.

We are conducting a study about youth in the child welfare system. As part of this study, we want to capture the opinions and attitudes of caregivers who provide temporary and permanent homes to these youth. Specifically, we are interested in your beliefs and attitudes about youth sexuality and gender variant youth or those that identify as transgender (born one sex but identify with the opposite sex).

I am going to read some statements and I would like for you to rate how strongly you agree or disagree with each of the statements by looking at this card **[POINT TO CARD]** and selecting one of the following options:

- strongly disagree,
- disagree,
- somewhat disagree,
- neither agree or disagree,
- somewhat agree,
- agree, or
- strongly agree.

There is no right or wrong answer. We want your opinion about youth sexuality and gender variant youth so that we can better provide services to youth and their caregivers.

		Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree or Disagree	Somewhat Agree	Agree	Strongly Agree
1.	Children should be encouraged to explore their masculinity and femininity.							
2.	Children should play with toys appropriate to their own sex.							
3.	God made two sexes and two sexes only.							
4.	Masculine girls should be cured of their problem.							
5.	I have teased a woman because of her masculine appearance or behavior.							
6.	It is all right to make fun of people who cross-dress.							
7.	Masculine women make me feel uncomfortable.							
8.	I have behaved violently toward a woman because she was too masculine.							
9.	Feminine boys should be cured of their problem.							
10.	I have teased a man because of his feminine appearance or behavior.							

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree or Disagree	Somewhat Agree	Agree	Strongly Agree
11. If I saw a man on the street that I thought was really a woman, I would ask him if he was a man or a woman.							
12. Men who shave their legs are weird.							
13. Men who act like women should be ashamed of themselves.							
14. I have behaved violently toward a man because he was too feminine.							
15. Men who cross-dress for sexual pleasure disgust me.							
16. Feminine men make me feel uncomfortable.							
17. I cannot understand why a woman would act masculine.							
Women who see themselves as men are abnormal.							
19. It is morally wrong for a woman to present herself as a man in public.							
If I found out that my best friend was changing their sex, I would freak out.							
21. If I found out that my lover was the other sex, I would get violent.							
 If a friend wanted to have his penis removed in order to become a woman, I would openly support him. 							
23. I would avoid talking to a woman if I knew she had a surgically created penis and testicles.							
24. I would go to a bar that was frequented by males who used to be females.							
25. If a man wearing makeup and a dress, who also spoke in a high voice, approached my child, I would use physical force to stop him.							
I would be alarmed if my child's teacher was a woman who dressed like a man.							
27. If I encountered a male who wore high- heeled shoes, stockings, and makeup, I would consider beating him up.							

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree or Disagree	Somewhat Agree	Agree	Strongly Agree
28. I have beat up men who act like sissies.							
29. A man who dresses as a woman is a pervert.							
30. My friends and I have often joked about women who look like men.							
31. I would go to a bar that was frequented by females who used to be males.							
32. Sex change operations are morally wrong.							
33. Passive men are weak.							
34. People are either men or women.							
35. My friends and I have often joked about men who dress like women.							
36. Individuals should be allowed to express their gender freely.							

NOTE: this instrument is based on a standardized scale developed by Hill and Willoughby, 2005. See Hill, D.B., and Willoughby, B.L.B. 2005. The Development and Validation of the Genderism and Transphobia Scale, *Sex Roles*, Vol. 53, No. 7/8: 531-544.