



PARTICIPANT ID: _____

Young Adult Consent Form for Participation in the TLP Outcomes Study

The **TLP Outcomes Study** is a study about a program called the Transitional Living Program (TLP), like **<<Name of TLP>>**. The study is being run by a company called Abt Associates. It is paid for by the Administration for Children and Families in the U.S. Department of Health and Human Services. This form gives information about the study and your role if you decide to be part of the study. At the end of the form, you can tell us whether or not you want to be in the study. **It is really important that you read the entire form.**

What is the study about? The study focuses on young adults like you and how well programs like **<<Name of TLP>>** can help them find a place to live, build relationships, find education and employment, and feel good about themselves. The information learned from the study will help improve programs for young adults like you. About 600 young adults will be part of this important study.

How long will the study last? The study will last for about 12 months.

Why am I being asked to be in a study? All people who enroll in **<<Name of TLP>>** are invited to be in the study.

Do I have to be in the study? No. Being in the study is completely up to you. This means you get to decide if you want to be in the study or not. Your decision will not result in the loss of services, including services provided by **<<Name of TLP>>**. It also means you can decide to quit the study at any time. Leaving the study will not harm you in any way or result in the loss of services, including services provided by **<<Name of TLP>>**.

Do I have to be in <<Name of TLP>> to be in the study? You have to enroll in this program to be invited to be in the study. But if you leave the program you can stay in the study.

What will I be asked to do if I am in the study? Everyone who agrees to be in the study will be asked to take 3 surveys. Each survey takes about 37 minutes. Agreeing to participate also means that you give the **<<Name of TLP>>** staff and the study team permission to use information that was collected about you by this program or other programs in this community to locate you for surveys. It also means that the **<<Name of TLP>>** staff may share information such as your program entry and exit dates with the study team.

Do I receive anything for completing the surveys? Each time you finish a survey, you will get an electronic gift card (e-gift card) to Amazon.com to thank you for your time. You can get up to a total of \$100 in e-gift cards to Amazon.com if you complete all the surveys. You will get a \$30 e-gift card for each of the first two surveys you complete. For the last survey, at the end of the study, you will get a \$40 e-gift card.

Where will I take the surveys? The first time you take a survey will be right after you agree to be in the study. The second time will be 6 months after you complete the first survey. The third time will be 12 months after you complete the first survey. A staff member at <<Name of TLP>> will help you get set up on a secure tablet (like an iPad), a laptop, or other computer, where you will take the first survey. For the last 2 surveys, you can complete them at <<Name of TLP>> or do them by yourself in any place where you have access to a computer or tablet, for example at a library, school, or cafe. A staff member at <<Name of TLP>> may try to get in touch with you to complete the last 2 surveys.

How will you find me for the last 2 surveys? If you are still staying at <<Name of TLP>>, a staff member will remind you about the survey. If you have left <<Name of TLP>>, we will use the contact information you give the study or the program to reach you. The staff at the <<Name of TLP>> may also contact other service providers in the community in an effort to find you.

What kinds of questions are on the surveys? The surveys have some general questions about your background. The surveys also ask about your experiences, feelings, thoughts, and opinions on different parts of your life, like your housing, education, employment, and relationships. Some of the questions are sensitive and ask about your feelings and behaviors, including actions that are unlawful, alcohol and drug use, sexual experiences, mental health care, violence, and trauma. *All questions are completely voluntary.* This means that you can skip any question you do not want to answer.

What are the possible benefits if I agree? By being in the study, you will help us learn more about the issues affecting young adults and the kinds of programs and services that can help them build strong futures. The information learned from the study will improve services for young adults like you. There are no direct benefits to you.

What are the possible risks if I agree? There is very little risk for you to participate in this study. All your answers to the survey will be kept private. Only the study team and authorized researchers will see your answers. You may feel uncomfortable answering some questions on the survey. *But you can skip any survey question you do not want to answer, and you can stop the survey at any time.*

Privacy. The study team will keep your answers to the survey private, as much as the law allows. This means that the staff at the <<Name of TLP>>, your family members, guardians, friends, teachers, and other service providers *will never see your answers.* Only the study team and authorized study team members can see your answers to the survey. It is possible that at the end of the study, a data file with all the answers to all the surveys will be made available to the funder of the study (Administration for Children and Families) and other authorized researchers. If so, all names and other identifying information would be deleted.

We train all the people who work on the study to follow strict rules to protect your privacy. There is *very little risk* of your survey answers and personal information being seen by people who do not have permission. We have many safety measures to prevent this from happening.

The study team will write reports about what was learned from the study. When we write a report, the information you give us will be combined and reported with information from all the other people in the study. Your name will never be used in a report.

Certificate of Confidentiality. To help protect your privacy, the researchers have received a Certificate of Confidentiality. The certificate is issued by the National Institutes of Health. It adds special protection to your information. It is important to understand what the Certificate can and cannot do. Because the researchers have this certificate, they can:

- (1) Legally refuse to give information that may identify you in any federal, state, or local proceedings. This includes if there is a court subpoena.
- (2) Resist any demands for information that would identify you.

In other words, because of the Certificate, the researchers do not have to tell anyone who you are or that you are in the study.

However, even with the Certificate, the researchers may:

- (1) Tell state or local authorities if they find out that you or someone else could be hurt or in danger.
- (2) Not resist a request from the study's funder (the U.S. Department of Health and Human Services) to view the study data to audit the project or evaluate the program.

Also, you should know that, at any time, you or your family, may tell someone about your involvement in this research. The Certificate does not prevent this. Also, if you give someone your written permission to receive research information, such as an employer, then the researchers will not use the Certificate to withhold that information.

Who should I contact if I have any questions about the study? If you have any questions about the study, contact Alvaro Cortes, Abt Associates Study Director. You can call him at 301-634-1857 (toll call) or email him at Alvaro_Cortes@abtassoc.com. For questions about your rights in the study, contact the Institutional Review Board (IRB) at Abt Associates. You can call the IRB at 877-520-6835 (toll-free call) or IRB@abtassoc.com.

Consent: Here, you tell us if you agree to be in the study. Please read this carefully and ask a staff member if you have any questions about what you are agreeing to.

Young Adult Statement:

- I have read the description of the **TLP Outcomes Study** being conducted by Abt Associates.

Please select one:

- **Yes, I agree** to be in the study and agree to allow the staff at the **<<Name of TLP>>** to share information about me with the study team and to contact other service providers in the community to help find me for surveys.
- **No, I do not** agree to be in the study.

To confirm your selection, please enter your full legal name.

First Name: _____

Middle Name (leave blank if you do not have a middle name): _____

Last Name: _____

OMB Control No: 0970-0383
Expiration Date: xx/xx/xxxx

Public reporting burden of this collection of information is estimated to average 0.62 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing 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.

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