

Attachment 16: MIHOPE Qualitative Interviews Consent Script

Thank you for agreeing to take part in the Mother and Infant Home Visiting Program Evaluation (MIHOPE). As you were told, this is a research project about the effects of home visiting services.

I'm ___[NAME]___ and I work for MDRC, a non-profit research organization that is leading the study.

My organization, along with a few others, is conducting a study for the U.S. Department of Health and Human Services to improve services for parents with young children.

I want to talk to you today to learn more about your experiences with [LOCAL HOME VISITING PROGRAM], as well as other aspects of your life during the time when your child(ren) was(were) very young. The information you share will be incredibly valuable in helping us understand your particular circumstances and experiences. It will also provide more information for the study, MIHOPE that you have been participating in.

This is your chance to add your own voices and opinions on your day-to-day experiences as a parent of a young child, beyond what you might have already shared through the surveys and the in-home observations.

There are some risks to talking to me today. I will ask you some sensitive questions during the interview. There is also a small risk that your information will be seen outside the study team. However, the study team follows strict rules to protect your privacy. Any information collected for the study will be used only for research purposes. We use secure computers and data storage systems to protect data from being seen by anyone other than the researchers. All study staff are trained to protect privacy. All study staff sign the MDRC Confidentiality Pledge.

We will keep your information private unless there is concern that you or someone else may be harmed. For example, if someone from the study team sees or learns about evidence of child abuse or neglect, they would tell someone. In this case, we may report this to Child Protective Services.

Also, you should know that this interview has been approved by the federal Office of Management and Budget, or OMB. 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 number for this information collection is 0970-0402 and the expiration date is 11/30/2021.

I would like to audio-record our discussion. I am recording our discussion so I can listen to it later when I write up my notes, and so that I can focus on what you are saying during our time together.

Researchers who listen to the tape or who view the transcripts have to agree not to try to identify you. If you want to say anything that you don't want to be taped, please let me know and I will be glad to pause the recorder.

I will also use a pseudonym (fake name) for you and your child, as well as other people you might mention, when referring to anything you might say in any written summary from this project. This is done to protect your identity, your child's identity, and any other individuals.

Do you have any objections to being audio-recorded?