

## **G9. Parent Consent Talking Points (Infants)**

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## Talking Points for Parent Recruitment and Consent

### Parent of an Infant Participant

*Note to reviewers: The onsite point-of-contact will distribute the recruitment letter and brochure to sampled parents and direct them to the study website. When parents call the help desk, the home office help desk team will use the talking points below to describe the study and complete the consent process.*

#### The study

1. For the next few months, [sampled site name], where your infant receives child care, is part of a national study sponsored by the U.S. Department of Agriculture, or USDA.
2. This study is the second Study of Nutrition and Activity in Child Care Settings, referred to as SNACS-II. Mathematica and its partner, Westat, are conducting SNACS-II for USDA.
3. [Sampled site name] is one of about 1,300 child care providers across the country that are helping USDA understand the food and activities provided in child care settings. Part of the study will look at infant feeding practices, infant food intake, and infant activity levels while in child care. We are inviting you and your infant, [child name], to participate in this new and exciting study!

*Do you have any questions?*

#### Study activities

4. If you decide to participate, your infant's child care provider will complete a survey about the foods and drinks offered to your infant on one day when your infant is in care. This is scheduled to happen around [day(s) and date(s) of data collection visit].
5. We will ask you to provide your infant's date of birth and weight at the time of their last medical visit.

*Do you have any questions?*

The Food and Nutrition Service (FNS) is collecting this information to understand the nutritional quality of CACFP meals and snacks, the cost to produce them, and dietary intakes and activity levels of CACFP participants. This is a voluntary collection and FNS will use the information to examine CACFP operations. The collection does request personally identifiable information under the Privacy Act of 1974. Responses will be kept private to the extent provided by law and FNS regulations. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-xxxx. The time required to complete this information collection is estimated to average 0.334 hours (20 minutes) 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22314. ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

## **Privacy**

6. Researchers and program staff must follow all federal and state laws to protect your privacy.
7. Study reports will combine your answers with those from others to summarize what we found. We will never report names or addresses. This way, no one can identify you, your infant, or your child care provider.

*Do you have any questions?*

## **Risks or benefits**

8. You will not benefit directly from being in the study, but you will help USDA and child care providers like yours understand how the programs operate and better help children learn and grow.
9. Although there is a very small chance someone could see your answers, the study team has taken many steps to reduce this risk.

*Do you have any questions?*

## **The study is voluntary**

10. Taking part in the study is voluntary. It will not affect the child care or any other programs or benefits that your family receives or may apply for in the future.
11. You may change your mind at any time about participating in the study.

*Do you have any questions?*

## **Consent process**

12. If you agree to be in the study, you must read and sign a consent form. The consent form explains your rights and the study activities that we will ask you to complete. The form is also where we ask you for your infant's weight.
13. You can mail the consent form to the study team or return it to [Name of onsite Point-of-Contact]. You can also complete it online by visiting the study website and using your passcode.
14. Whether you agree to be in the study or not, please submit or mail the consent form as soon as possible. You may save a copy of the form for your records, or we can email you a copy.

*[Review the consent form line by line with respondent, as needed].*

*Do you have any questions?*

Thank you so much for your time today.

If you have any questions, please call the study toll-free number, [telephone number] or send an email to <study email address>.