Attachment J (NEW). Adoptive Parent Respondent Pre-Interview Outreach and Post-Interview Scripts

# **ADOPTIVE PARENT PRE-INTERVIEW OUTREACH SCRIPTS**

# **For adoptive parents who call-in to study 1-800 number**:

Thank you for calling the Survey of Family Well-Being sponsored by the Administration for Children and Families. My name is <INTERVIEWER NAME> from RTI International. How may I assist you?

# **Answering Machine message to be left by telephone interviewers**:

I am calling today on behalf of the Administration for Children and Families. We are trying to reach [INSERT R NAME] because they participated in an opportunity sponsored by this agency several years ago. We are calling today because we are continuing this opportunity and have some follow-up questions. We recently sent some information by mail that further describes this effort. Please call 1-800-XXX-XXXX and refer to case id [FILL CASE ID]. Thanks so much!

**Adoptive Parent Outreach Script**

**LEAD\_IN1**:

**Hello, my name is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and I am trying to reach [INSERT R NAME]. May I speak with [INSERT R NAME]?**

1 R IS AVAILABLE, CONTINUE WITH CASE (GOTO R\_CONFRM)

2 DOES NOT KNOW SAMPLE MEMBER (GOTO INTRO2)

3 DOES NOT LIVE HERE ANYMORE (GOTO INTRO3)

4 WILL NOT ALLOW US TO SPEAK WITH SAMPLE MEMBER (GOTO INTRO4)

5 DECEASED (GOTO INTRO5)

6 INCAPABLE (GOTO INTRO6)

7 INCARCERATED/INSTITUTIONALIZED (GOTO INTRO6)

8 OUT OF COUNTRY (GOTO INTRO6)

9 OTHER CODES (GO TO INT12)

**R\_CONFRM**. (Hello, my name is \_\_\_\_\_\_\_\_.)

I am calling today about a research study, called the Survey of Family Well-Being sponsored by the Administration for Children and Families (ACF). Several years ago, your family participated in another study sponsored by ACF (called the National Survey of Child and Adolescent Well-Being). We are following up with families who participated in that previous study to see how things may have changed over time. At the time of the previous study, your family indicated interest in future research opportunities.

TI: IF RESPONDENT DOES NOT REMEMBER THE STUDY, PLEASE SAY: *The last survey we conducted with your family was conducted in <INSERT YEAR OF LAST NSCAW INTERVIEW>. An interviewer visited your home and interviewed your family using a laptop computer.*

Before we begin, I would like to confirm that I have the correct person. Can you please tell me your date of birth?

INTERVIEWER: **DO NOT READ THE DOB TO THE RESPONDENT**. ALLOW THE RESPONDENT TO CONFIRM WHAT IS SHOWN ON THE SCREEN.

**RESPONDENT DOB**: <FILL DOB>

1 = DOB MATCHES (CONFIRMED) (GO TO NEW\_RESP)

2 = DOB DOES NOT MATCH (GO TO R\_NODOB)

3 = DOB IS BLANK (GO TO R\_NODOB)

4 = R REFUSES TO PROVIDE DOB (GO TO R\_NODOB)

**R\_NODOB**.

Did you ever or do you currently live at:

<INSERT STREET ADDRESS 1 FROM NSCAW INTERVIEW>

<INSERT STREET ADDRESS 2 FROM NSCAW INTERVIEW>
<INSERT CITY, STATE, ZIP FROM NSCAW INTERVIEW>

1 = YES (GO TO NEW\_RESP )

2 = NO (GO TO R\_NOADD)

**R\_NOADD**.

Do you remember participating in the National Survey of Child Adolescent Well-Being study in <INSERT YEAR OF NSCAW COMPLETE> where an interviewer visited your home and asked you questions using a laptop computer?

**TI IF NEEDED**: The interviewer would have asked questions about your child’s learning, behavior at home or school, and relationships with friends. The interviewer may have provided headphones to you so that you could listen and answer questions privately. Your child (depending on their age at the time of the interview) may have been assessed on their language skills and asked to respond to certain tasks using pictures displayed in an easel. Parents received $50 for participating and children received a gift card for taking part.

1 = YES (GO TO NEW\_RESP)

2 = NO (GO TO THANKS)

**LAND\_CELL.**

Is this a landline or cell phone?

(INTERVIEWER NOTE: IF R SAYS “cable, VOIP (voice over), or satellite phone” CODE AS LANDLINE PHONE.

IF NECESSARY: “By landine we mean any phone in your house that is not a cell phone.”)

LANDLINE PHONE……………………………………………….……………………..1

CELL PHONE…………………………………………………………..…………………..3

SCHEDULE A CALLBACK (CATI GOES TO CALLBACK SCREEN)………..8

OTHER CODES (CATI GOES TO OTHER CODES SCREEN)………………..9

[IF LAND\_CELL = 1 then go to LOCTYPE,

Else if LAND\_CELL = 2 then go to CELLSAFE,

Else if LAND\_CELL = 3 then go to INT06,

Else go to ALTB]

**LOCTYPE.**

First, have I reached you at a residential household, such as an apartment, a house, or a mobile home?

YES………………………………………01

NO, NON-RESIDENCE…………..02

DK………………………………………..98

REFUSED………………………………99

[IF LOCTYPE = 01 then go to START,

else go to /INT05.]

**CELLSAFE.**

Before we continue, are you driving or doing anything that requires your full attention right now?

YES (R IS DRIVING/DOING SOMETHING)…………………………………..1

NO……………………………………………………………………………………………2

NOT A CELL PHONE………………………………………………………………..3

[If CELLSAFE = 1 then go to /INT06,

Else if CELLSAFE = 2 then go to /START,

Else go to LAND\_CELL]

**INTRO1A** [for respondents identified as the NSCAW adoptive parent]

Great, thank you for confirming this information. As I mentioned earlier, RTI talked to your family as a part of a previous study many years ago, the National Survey of Child and Adolescent Well-Being (NSCAW). Now, in this new Survey of Family Well-Being, we are following up with those same participants approximately 7 to 14 years after the last time your family was interviewed. We are interested in interviewing parents of children who were adopted.

[**IF PARENT OF MINOR OF ADULT CHILD WHO IS ELIGIBLE FOR INTERVIEW]** By doing this study, we hope to understand the experiences of families who have been involved with the child welfare system – both from the perspective of the parents as well as your child. We would like to learn more about families’ experiences with adoption.

[**IF PARENT OF CHILD INELLIGBLE TO COMPLETE INTERVIEW]** By doing this study, we hope to understand the experiences of families who have been involved with the child welfare system. We would like to learn more about families’ experiences with adoption.

We want to make participation as easy as possible for you. We offer two ways for you to participate based on your schedule and preference. You can participate by telephone or you can complete the survey online. Choosing the online version of the survey allows you to work at your own pace. I can provide the web survey link over the phone along with your PIN for accessing the survey. If you choose the telephone version, we can get started now. You will receive a $30 gift card for taking part in this study.

Which option would you prefer?

1 = BY WEB (GO TO Mode\_ByWeb)

2 = BY PHONE (GO TO Mode\_ByPhone)

3 = SCHEDULE AN APPOINTMENT (GO TO CB)

4 = NEEDS MORE INFORMATION (GO TO Remail)

# **Mode\_ByWeb**

Great, let me take a moment to collect your e-mail address. What is your e-mail address? I am collecting your e-mail address so that I can send you the survey link along with your PIN for accessing the survey for future reference.

TI: EMAIL SHOULD BE FORMATTED AS NAME@HOST.DOMAIN (E.G., YOURNAME@GMAIL.COM)

 PLEASE ENTER E-MAIL ADDRESS AND CONFIRM WITH RESPONDENT BY READING IT BACK TO THEM.

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [open fill, constraint: 80 letters, Mask: $@) (GO TO WEBEMAIL\_LINK)

**WEBEMAIL\_LINK**

Message to the interviewer: Web Survey Login Instructions

Question long label:

Hi <FIRST NAME> <LAST NAME>,

Thank you for your interest in the Survey of Family Well-Being. Here is your requested login information. We recommend completing your web survey where a private setting can be established.

To access your web survey, please click on the survey link below. You will be asked to enter a PIN to access your survey.

{a href=”VOXCO\_ONLINE\_SURVEY\_NAME\_WITH\_EMBEDDED PIN”}Click here{/a} to begin or go to [INSERT VOXCO ONLINE PARENT SURVEY LINK] and log in:

{b}Survey Access Code{/b}: <INSERT PIN>

If you need further assistance or have any questions, simply reply to this message or call the SFWB Help Desk toll-free at 1-800-XXX-XXXX.

Thank you for your participation in this important study!Stephanie Parker

RTI International

**PROV\_WEBCRED**

# To access the survey by web, you will need to visit XXX.RTI.ORG. Your PIN for accessing the survey is:

**PIN:** <INSERT PIN>

Your PIN needs to be typed exactly as provided to access the survey. If you experience any issues with the web survey or your PIN, you can reach us at (800) XXX-XXXX or e-mail us at SFWB@rti.org.

Please try to complete your survey within the next three days.

ENTER 1 TO CONTINUE.

**MC\_PARPERM**

**[IF PARENTTYP = 1] AND IF WEBEMAIL\_LINK=1**

As a part of this study, we are also interested in speaking with your child, [INSERT CHILD NAME], about their experiences. The interview with your child will last around 30 minutes and will take place over the phone. Your child will also receive a $30 gift card for taking part. Due to your child’s age, the interview must be completed by telephone.

Would you like me to review the permission form with you now or schedule an appointment for another time? The appointment should be scheduled for a time when both you and your child are available.

1 = YES (GOTO CHANGE\_CASE)

2 = NO, SCHEDULE APPOINTMENT (GOTO EXIT\_GOTOCH)

3 = REFUSED

**CHANGE\_CASE**

**INTERVIEWER: BELOW YOU WILL FIND THE CHILD ID CONNECTED TO THIS PARENT CASE. YOU MUST RECORD THE CHILD ID ON PAPER.**

**EXIT THE PARENT CASE NOW AND OPEN THE CHILD CASE USING THE ID BELOW. YOU MUST ADMINISTER THE PARENT PERMISSION FORM BEFORE PROCEEDING TO INTERVIEW THE CHILD.**

**CHILD ID**: <FILL CHILD ID CONNECTED TO THIS PARENT CASE>

**EXIT\_GOTOCH**

TI: PLEASE EXIT THE PARENT CASE AND OPEN CHILD ID <INSERT CHILD ID CONNECTED TO PARENT CASE> AND RECORD THE APPOINTMENT TO CALL THIS FAMILY BACK TO REVIEW THE PARENT PERMISSION FORM.

**FOR WEB RESPONDERS ONLY**

**WEB\_LANDINGPAGE**



**[IF RESPONDENT AGREES, INSERT WEB PARENT CONSENT, SEE OMB ATTACHMENT G]**

**[IF NO CONSENT]** Thank you for your time today and considering this research.

# **INTRO2** [for respondents who say we have reached an incorrect number or that they do not know the identified NSCAW adoptive parent]

**Let me verify that I have dialed the correct number, that is [INSERT PHONE NUMBER]?**

0 YES CORRECT NUMBER DIALED (GO TO THANKS)

4 NUMBER NOT DIALED CORRECTLY, NOT VERIFIED (GOTO SUPERVISOR REVIEW)

# **INTRO3** [for respondents who say the NSCAW adoptive parent respondent does not live at the address anymore]

**Could you tell me how to reach them or do you know of anyone else who might know how to reach them?**

TI: IF CONTACT ANSWERS YES, THEN ASK: Are you able to provide contact information for <RESPONDENT NAME> or someone else who might know how to reach them?

1 = YES, CONTACT WILL GIVE <RESPONDENT NAME>’S NUMBER (GO TO ADD\_ROSTERFN)

2 = YES, CONTACT WILL GIVE OTHER CONTACT INFO (GO TO ADD\_ROSTERFN)

3 = NO (GOTO INTRO6)

# **INTRO4** [for respondents who say the NSCAW adoptive parent respondent is not home]

**Would you be willing to take a message for <INSERT R NAME>?**

1 YES (GOTO LEFT\_MESSAGE)

2 NO (GOTO THANKS)

# LEFT\_MESSAGE

I am calling today on behalf of the Administration for Children and Families. We are trying to reach [INSERT R NAME] because they participated in an opportunity sponsored by this agency several years ago. We are calling today because we are continuing this opportunity and have some follow-up questions. We recently sent some information by mail to them that further describes this effort. Please ask [INSERT R NAME] to call 1-800-XXX-XXXX and refer to case id [FILL CASE ID]. Thanks so much for sharing this information with them.

(GO TO THANKS)

# **INTRO5** [for a deceased NSCAW adoptive parent]

# My condolences. I am sorry to hear this. Is <INSERT PRELOADED PARENT>’s spouse or partner available?

# 1 = YES, CONTACT IS <INSERT PRELOADED PARENT>’S SPOUSE/PARTNER (GOTO ADD\_ROSTERFN)

2 = SPOUSE/PARTNER NOT CURRENTLY AVAILABLE (GO TO CB)

# 3 = REFUSED (GO TO Thanks)

# ADD\_ROSTERFN

Great, thank you. [IF INTRO5 = 1: I am calling today about a research study, called the Survey of Family Well-Being sponsored by the Administration for Children and Families (ACF). Several years ago, your family participated in another study sponsored by ACF (the National Survey of Child and Adolescent Well-Being). We are following up with families who participated in that previous study to see how things may have changed over time. /ELSE: NO FILL]

[IF INTRO5 = 1 OR INTRO6 = 1: [May I please have your first name?/IF INTRO3 = 2: May I please have this person’s first name?/ELSE: NO FILL]

FIRST NAME:

[IF INTRO3 = 1: TI: TYPE CONTACT’S FIRST NAME FROM CATI HEADER INTO TEXTBOXES/ELSE: NO FILL]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [open fill, 50 letters]

(GO TO ADD\_ROSTERLN)

# ADD\_ROSTERLN

[IF INTRO5 = 1 OR INTRO6 = 1: [May I please have your last name?/IF INTRO3 = 2: May I please have this person’s last name?/ELSE: NO FILL]

LAST NAME:

[IF INTRO3 = 1: TI: TYPE CONTACT’S LAST NAME FROM CATI HEADER INTO TEXTBOXES/ELSE: NO FILL]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [open fill, 50 letters]

(GO TO ADD\_PHONO)

# ADD\_PhoNo.

What is the best telephone number for [IF INTRO5 =1 OR INTRO6 =1: you/ELSE: this person]?

1 = CURRENT ROSTERLINE

2 = ADD NEW ROSTERLINE

(IF XXX THEN GO TO NEW\_RESP,

ELSE GO TO THANKS)

# NEW\_RESP

What is [IF LEAD\_IN = 1 OR INTRO5 = 1 OR INTRO6 =1:your relationship/ELSE: this person’s relationship] to <INSERT CHILD’s NAME>?

**TI:** **CHILD NAME MAY HAVE CHANGED OVER TIME** **AND MAY NOT MATCH EXACTLY**. IF NEEDED: *This was the name we had on file based on the last time [IF LEAD\_IN = 1 OR INTRO5 = 1 OR INTRO6 =1:your/ELSE: this] family was interviewed.*

1 = adoptive mother

2 = adoptive father

3 = birth or biological grandmother

4 = birth or biological grandfather

5 = birth or biological mother (GO TO INELIG)

6 = birth or biological father (GO TO INELIG)

7 = other relative

8 = other non-relative

# **INTRO6** (for an NSCAW adoptive parent who is now incapable/incarcerated/out of country)

# Thank you for this information. I am calling today about a research study, called the Survey of Family Well-Being sponsored by the Administration for Children and Families (ACF). Several years ago, <RESPONDENT NAME>’s family participated in another study sponsored by ACF (the National Survey of Child and Adolescent Well-Being). We are following up with families who participated in that previous study to see how things may have changed over time.

# Is <INSERT PRELOADED PARENT>’s spouse or partner available? We would like to interview <INSERT PRELOADED PARENT FIRST NAME>’s spouse or partner for this new study.

# 1 = YES (GOTO ADD\_ROSTERFN)

2 = SPOUSE/PARTNER NOT CURRENTLY AVAILABLE (GOTO CB)

3 = REFUSED (GOTO OUTCOUNTRY)

# OUTCOUNTRY

Will <INSERT PRELOADED PARENT FIRST NAME> be available for contact by September 15, 2021?

1 = YES (GOTO CB)

2 = NO (GOTO THANKS)

# INELIG

We sincerely thank you and appreciate your time. Based on your responses, those are all the questions I have.

**TI IF NEEDED**: For this study, we are only interviewing adoptive parents.

# CB

When would be the best time to call back?

(FOR MANUAL ENTRY OF CALLBACK TIME THE FORMAT IS YYYYMMDDTTTT, WITH THE T’S BEING MILITARY TIME)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [open fill, constraint: 12 letters (GO TO THANKS)]

# THANKS

Thank you very much for your time.

TI: WAIT UNTIL CONTACT IS DONE SPEAKING AND THEN HANG UP CALL.

**ADOPTIVE PARENT POST-INTERVIEW SCRIPT**

# Contact Information for Parent-Child Script

[**IF ADOPTIVE PARENT OF CHILD OR ADULT ELIGIBLE TO COMPLETE INTERVIEW** ] As a part of this study, we are also interested in speaking with your child about their experiences. Would you be willing to provide your child’s address, telephone number, or e-mail address so that we can send your child some information about this opportunity? Your child will also receive $30 for taking part.

What is the best address for your child?

What is the best telephone number for your child?

What is the best e-mail address for your child?

[Programmer: constraint: 30 letters, put an email validation mask on this question]

# Incentive Script

# INCENT\_P

This is the end of the survey. Thank you so much for your time. We really appreciate your input.

To show our appreciation for completing the survey, we would like to send you a $30 gift card. Would you like to receive this gift card for your time?

1 = YES (GO TO INCENT\_SEND)

0 = NO (GO TO THANKS)

# INCENT\_SEND

[[BY PHONE] We can either email you a link for the gift card or mail it to an address./[BY WEB] Please let us know if you would prefer to receive an email with a link for the gift card or mail it to an address.]

How would you like to receive the gift card?

1 EMAIL (GO TO INCENT\_ELEC)

2 MAIL TO ADDRESS (GO TO INCENT\_NAM)

3 I do not wish to receive the incentive.

# INCENT\_ELEC

What email address would you like your $30 gift card link sent to?

TI: EMAIL SHOULD BE FORMATTED AS NAME@HOST.DOMAIN (E.G., YOURNAME@GMAIL.COM)

PLEASE ENTER E-MAIL ADDRESS AND CONFIRM WITH RESPONDENT BY READING IT BACK TO THEM.

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [(open fill, constraint: 80 letters, Mask: $@) (GO TO WEBEMAIL\_INC)]

Thank you again. Please allow about a week for the gift card to be processed and sent.

**WEBEMAIL\_INC**

Message to the interviewer: Thank you!

Question long label:

Dear <INSERT R NAME>,

Thank you for participating in the Survey of Family Well-Being. Your time and effort are greatly appreciated.

It is our pleasure to send you this Amazon.com Gift Card\* that can be redeemed towards millions of items at [www.amazon.com](http://www.amazon.com). Do not delete this message – you will need the gift card claim code below. You may want to print a copy of this message for easy reference later.

Gift Card Amount: **[$30]**

Claim Code: **[ENTER CODE]**

| [Apply To Account](https://www.amazon.com/gp/css/gc/payment/view-gc-balance?claimCode=111-111-111) | [How to Use](file:///%5C%5CRTPNFIL03%5CExcelQuality%5CData_Collection%5CSpring_2020%5C5_Teacher%5CPrefielding%20Plan%5Cwww.amazon.com%5Cgc-redeem) |

**To redeem your gift card, follow these steps:**

1. Visit [www.amazon.com/redeem](http://www.amazon.com/redeem)
2. Enter the Claim Code when prompted.
3. Gift card funds will be applied automatically to eligible orders during the checkout process.
4. You must pay for any remaining balance on your order with another payment method.

Your gift card claim code may also be entered when prompted during checkout. To redeem your gift card using the Amazon.com 1-Click® service, first add the gift card funds to Your Account.

If you have questions about redeeming your gift card, please visit [www.amazon.com/gc-redeem](http://www.amazon.com/gc-redeem).

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Sincerely,

Stephanie Parker

SFWB Data Collection Task Leader

# INCENT\_NAM

Please give us the best address to mail this gift card. Please allow up to XX weeks for delivery.

First, please confirm your name:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [open fill, 80 letters]

# INCENT\_ADD

(Please give us the best address to mail this gift card.) Please provide your street address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [open fill, 80 letters]

# INCENT\_APT

(Please give us the best address to mail this gift card.) Please provide your apartment number:

TI: IF RESPONDENT DOES NOT HAVE AN APARTMENT NUMBER, PLEASE LEAVE TEXTBOX BLANK AND CLICK “NEXT”

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [open fill, 10 letters]

# INCENT\_CITY

(Please give us the best address to mail this gift card.) Please provide your city:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [open fill, 50 letters]

# INCENT\_ST

(Please give us the best address to mail this gift card.) Please provide your state:

[DROPDOWN WITH STATE NAMES]

# INCENT\_ZIP

(Please give us the best address to mail this gift card.) Please provide your Zip code:

TI: PLEASE ENTER ZIP CODE USING THE FOLLOWING FORMAT:#####

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [open fill, 5 letters, Mask: 99999]

# INCENT\_EMAIL

In case we have a question about sending the gift card, could you please confirm your other contact information?

Please confirm your email address:

TI: EMAIL SHOULD BE FORMATTED AS NAME@HOST.DOMAIN (E.G., YOURNAME@GMAIL.COM)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [(open fill, constraint: 80 letters, Mask: $@) (GO TO WEBEMAIL\_INC)]

**SCRIPTS FOR TELEPHONE ADOPTIVE PARENT NON-RESPONDERS**

# **Refusal Conversion Script**

Hello, my name is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ calling on behalf of the Administration for Children and Families. My supervisor asked me to follow up with you concerning a call you received from one of our interviewers several days ago. This is about a research study you participated in several years back. We are continuing this research because we are interested in learning about changes over time. I understand you may have some concerns so I wanted to provide a link to our survey where you can find more information about this effort. Please know that you can refuse to answer any questions that you do not want to answer, and as a thank you for your time, we will send you a $30 gift card.

The survey website: <INSERT WEB LINK>

PIN: <INSERT PIN>

For your convenience, I can also send this link and your unique PIN to you via e-mail. Some participants like that option because they can access the survey by simply clicking the link within the body of the e-mail.

What is your e-mail address?

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [open fill, constraint: 30 letters]

# **Telephone Prompting Script for Web Breakoff: Need Assistance?**

Hello, my name is \_\_\_\_\_\_\_\_\_\_\_\_\_. I am trying to reach <INSERT R NAME>. May I speak with <R NAME>?

I am contacting you today to follow up on a web survey you started for the Administration for Children and Families. Thank you for taking the time to answer some of our questions. We wanted to follow up to see if you needed any assistance with the survey or if you had any questions about participation. We can see that you started the survey but that you have not fully completed the survey. Do you have any questions that I can answer today about participation?

As a reminder, you can refuse to answer any question that you do not want to answer. When you finish, we will send you a $30 gift card as a thank you.

# **Mode\_ByPhone**

Before we begin, did you receive and review the information we sent by mail describing this effort in more detail?

TI: IF RESPONDENT SAYS NO, ASK IF THEY WOULD LIKE THE MAILING RESENT TO THEM.

1 = YES (GOTO ByPhone\_MatRec)

2 = YES, RECEIVED MATERIALS BUT **DID NOT** REVIEW (GOTO FULL\_CONSENT)

3 = NO, DID NOT RECEIVE MATERIALS (GO TO RESEND MATERIALS)

# **ByPhone\_MatRec**

The interview by telephone will take approximately 30 minutes to complete. Your participation is voluntary, and all information will be kept strictly private, as federal law requires. Your involvement does not affect any benefits or services you or your child receive. You may choose to skip any question in the interview for any reason. The questions will ask about things that may have happened in your child’s life, such as experiencing homelessness, time living in foster care, or running away, and the services received at that time.

Some questions may make you feel uneasy or feel various emotions, such as sadness. If so, we will give you a list of resources that you can contact where there are people who may be able to help to talk with you about your feelings.

There are no costs associated with taking part in this study. You will receive a $30 gift card for taking part in this study.

We keep your responses private to the extent permitted by the law. We keep your interview answers on a secure computer, your responses have an ID number instead of your name. We do not identify by your name. Your information will be combined with information from other people taking part in the study.

There are two important exceptions to the privacy information:

1) If during the interview we think your life or health is in serious danger, we will contact someone qualified to assist you.

2) At some point in the future, a different research company may take over this study. If that happens, with your consent, we would give your information to the other company.

If you decide to participate, we ask you also for your permission to link the responses you give now with the responses that we collected when you and your child participated years ago in the National Survey of Child and Adolescent Well-Being study. Prior to using or releasing this data for future research, we will de-identify it. “De-identify” means that we will remove or code any personal information that could identify you or your child before files are shared with other researchers to ensure that no one should be able to identify you from the information we share.

Do you have any questions, or can we go ahead and get started?

1 = AGREES TO STUDY PARTICIPATION (GOTO Section A)

2 = DOES NOT AGREE TO STUDY PARTICIPATION (GOTO NO\_TConsent)

# **Remail**

We want to make sure you have a copy of these materials for your records. We can send a copy of the fact sheet and consent form to you either by email or through the mail. Which would you prefer?

1 = SEND VIA E-MAIL (GO TO WEBMAIL\_CON)

2 = SEND BY MAIL (GO TO MAIL\_REQ)

# **Email\_Req**

What is the best e-mail address for you?

TI: EMAIL SHOULD BE FORMATTED AS NAME@HOST.DOMAIN (E.G., YOURNAME@GMAIL.COM)

 PLEASE ENTER E-MAIL ADDRESS AND CONFIRM WITH RESPONDENT BY READING IT BACK TO THEM.

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [open fill, constraint: 80 letters, Mask: $@) (GO TO WEBEMAIL\_CON)