

# Appendix A. Young Adult Study Consent Form

## Consent to Participate in Research Young Adult Services Study (YASS)

We are from RTI International (RTI). We have been hired to interview young people as part of a study being conducted by the Urban Institute. The Urban Institute is a non-political nonprofit social policy research organization in Washington DC. The Urban Institute study looks at what it's like for young adults who are leaving foster care and the services they may receive. This study is funded by the U.S. Department of Health and Human Services, Administration for Children and Families (ACF). We are asking over 600 youth in foster care to help us with this study. You have been asked to be in the study because you are a youth in foster care in New Jersey. We call this study the Young Adult Services Study, or YASS.

### What will happen to me in this study?

If you decide to participate in this study, we would like to interview you today and two more times, once in 12 months and again in 24 months, for a total of 3 interviews. For the interview today, a person from RTI will ask you questions about the services you received during foster care. There are also questions about your experiences leaving foster care such as education and work, places you lived, and the relationships you have with family and friends. The interview today will last about **35 minutes** and future interviews will last about **60-75 minutes**. The interviews can be done at a time that works best for you. Some portions of the interview may be recorded to make sure the person asking the questions is doing a good job.

Some questions ask about your emotions, alcohol and drug use, and behavior that might be against the law. The interviewer will read the questions to you and enter your responses into the computer. The interviewer will know your answers to these questions. You may skip over any questions you do not want to answer.

We will also ask you to allow us to look at different kinds of **administrative data**. Administrative data are information about you collected by government or other agencies. The kinds of data we would look at:

- college records, such as attendance and graduation;
- public assistance records, such as WorkFirst New Jersey or food stamps;
- unemployment insurance wage records, such as dates of employment and wages;
- foster care agency records, such as how many and what types of placements you were in;
- birth, marriage, and death records; —
- criminal justice records, such as arrests or convictions; and
- consumer/credit databases that may have your phone number or address.

We will use any information we get from these sources in two ways.

1. We will use it to help us better understand what has happened to you after you left foster care. For example, it may tell us the number of jobs you've had or the dollar amount of food stamps you received. This information will give a fuller picture of youth's circumstances when they leave foster care.-
2. We will use it to help find you when we want to interview you again. For example, if you change your phone number, we may use credit databases to find your new phone number. If we cannot find you for an interview, we will use some of this data to see how you are doing as you get older.

In the future, you may also be asked to participate in a small group discussion or one-on-one interview as part of the study. \_\_\_\_\_

These discussions will help us better understand how you are experiencing the services offered to you. All opportunities to participate in any future discussion are voluntary and you can choose not to participate at any time.

### Do I have to participate?

*According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0577 (Exp Date: 09/30/2024). The time required to complete the interview is estimated to be 35 minutes.*

You don't have to be in this study. **Being in the study is voluntary.** If you don't want to be in the study just tell the interviewer. You can say yes now but you can stop if you change your mind later. You can still be in the study even if you do not give us permission to get information about you from administrative data. Whether or not you choose to be in this study will not change anything for you in terms of the care you receive from the state or any other services you may be eligible for. In other words, it will not change your placement or the services you get.

### **Who will see my information?**

Members of the research team will be able to see your information. Information that could identify you will be removed from the information you share today and any of the data we collect about you in the future. The information may be combined and made available for other researchers to use; these files will not include any information that could identify you and will only be available under password protected secure access. If ACF decides to extend this project, we may share your information with the researchers working on that extension, but they would keep the information that is identifiable private to the same extent that we do. One exception to not sharing your identity, is that the interviewer may need to tell the appropriate authorities if you report evidence of current abuse or neglect. They may also need to report if you threaten to hurt yourself or someone else.

### **How will my information be protected?**

We will do many things to keep your information private. We will only let the research team see your information. We will store information about you either in a locked drawer or on a secure computer. The computer will be password protected. We will also not use your name in any reports or papers.

We also have a Certificate of Confidentiality from the government to protect your privacy. This Certificate of Confidentiality strictly limits when we can share identifiable information collected through our research. For example, we cannot be forced to give a court information about you. **However, you should know that the Certificate does not stop reporting that federal, state or local laws require, for example reporting of child abuse and threats to harm yourself or others.**

### **Can anything bad happen to me?**

Some of the questions you are asked may make you feel uneasy. **You do not have to answer** any questions that you do not want to answer. Additionally, any administrative data you may agree to provide us access to could be compromised in a breach of data and the answers you may provide in the interview could be revealed. We have taken precautions discussed under "How will my information be protected?" to minimize the risk of any data being compromised.

### **Can anything good happen to me?**

You will not benefit directly from this study. But data we get from the study is important. Being in this study will let you tell officials about your experiences during and after foster care. This information may be used to improve the services that youth receive before and after they leave care. Many youth in foster care appreciate the chance to tell their story and be listened to.

### **Will I get anything for being part of the study?**

For helping me with this study, you will receive a **\$25 gift card** for this survey, **\$50** for the second survey in **12 months**, and **\$50** for the third survey in **24 months**. If you decide to stop being in the study or skip some of the questions today you still get **\$25**. It's all up to you.

### **Who is doing the study? Who can I talk to about it?**

This study is being done by the Urban Institute, the University of Chicago, and the Survey Firm, RTI International. The US Department of Health and Human Services is paying for this study. The people in charge of the study are Dr. Michael Pergamit (mpergamit@urban.org) and Dr. Mark Courtney (markc@uchicago.edu). If you have any questions or concerns about this study, please contact:

*According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0577 (Exp Date: 09/30/2024). The time required to complete the interview is estimated to be 35 minutes.*

Jennifer Keeney  
RTI International  
919-316-3525  
1-800-334-8571 extension 23525  
jkeeney@rti.org

If you agree to be in this study and feel that you were not treated fairly, please contact:  
The Institutional Review Board Administrator  
Everett Madden  
Urban Institute  
202.261.5632  
emadden@urban.org

### **What else do I need to know?**

If you are feeling upset by the issues discussed in this survey and would like to talk with someone about your feelings, we suggest you call your current clinician or reach out to another provider organization. If not, below are some numbers you can call.

**2<sup>nd</sup> Floor Youth Helpline:** Call or text 1-888-222-2228.

**Children's System of Care:** Call or text 1-877-652-7624.

### **Subject's Statements**

#### **(1) Agreement to Participate in Today's Interview**

**Do you voluntarily agree to participate in today's interview?** You can choose not to participate at any time.

C      Yes      C      No

#### **(2) Agreement to Contact for Future Interviews**

We would like to contact you again for another interview in about 12 months and then again 12 months after that. The interviews may be done at a time that works best for you. You can choose not to be in the study at those times.

**Do you agree to be contacted for future interviews?**

C      Yes      C      No

#### **(3) Agreement to Audio Recordings**

We use a laptop quality control (QC) system for this study. The system runs on the computer and will record what you and I say to each other during parts of the survey. Neither you nor I will know when the computer records what we say. The recordings are used to monitor my work. We keep the recordings for those purposes only and we keep them private. We will destroy the files after this review.

**Do we have your okay to run this system during the interview?**

☐      Yes      ☐      No

#### **(4) Agreement to Permit the Use of Administrative Data**

We would like to ask for your permission to allow the YASS research team to review administrative records that might contain information that can be used to see how you are doing. These include the following types of records: public assistance; education; foster care agency; unemployment insurance wages; vital statistics; and criminal justice. These and other records such as department of motor vehicles information may also be used to locate you if we should lose contact.

**Do you allow the YASS Study research team to review the records that were listed above for research, locating, and contact purposes?**

C      Yes      C      No

## Appendix B. Youth Study Assent Form

### Assent to Participate in Research Young Adult Services Study (YASS)

We are from RTI International (RTI). We have been hired to interview young people as part of a study being conducted by the Urban Institute. The Urban Institute is a non-political nonprofit social policy research organization in Washington DC. The Urban Institute study looks at what it's like for young adults who are leaving foster care and the services they may receive. This study is funded by the U.S. Department of Health and Human Services, Administration for Children and Families (ACF). We are asking over 600 youth in foster care to help us with this study. You have been asked to be in the study because you are a youth in foster care in New Jersey. We call this study the Young Adult Services Study, or YASS.

#### What will happen to me in this study?

If you decide to participate in this study, we would like to interview you today and two more times, once in 12 months and again in 24 months, for a total of 3 interviews. For the interview today, a person from RTI will ask you questions about the services you received during foster care. There are also questions about your experiences leaving foster care such as education and work, places you lived, and the relationships you have with family and friends. The interview today will last about **35 minutes** and future interviews will last about **60-75 minutes**. The interviews can be done at a time that works best for you. Some portions of the interview may be recorded to make sure the person asking the questions is doing a good job.

Some questions ask about your emotions, alcohol and drug use, and behavior that might be against the law.

The interviewer will read the questions to you and enter your responses into the computer. The interviewer will know your answers to these questions. You may skip over any question you do not want to answer.

We may contact you in between interviews to confirm or update your contact information. With your permission, we would like to use consumer/credit databases that may have your phone number or address to locate you once you turn 18. We will only use these sources to help us find you when we want to interview you again.

In the future, you may also be asked to participate in a small group discussion or one-on-one interview as part of the study.

These discussions will help us better understand how you are experiencing the services offered to you. All opportunities to participate in any future discussion are voluntary and you can choose not to participate at any time.

#### Do I have to participate?

You don't have to be in this study. **Being in the study is voluntary.** If you don't want to be in the study just tell the interviewer. You can say yes now but you can stop if you change your mind later. Whether or not you choose to be in this study will not change anything for you in terms of the care you receive from the state or any other services you may be eligible for. In other words, it will not change your placement or the services you get.

#### Who will see my information?

Members of the research team will be able to see your information. Information that could identify you will be removed from the information you share today and any of the data we collect about you in the future. The information will be combined and made available for other researchers to use; these files will not include your name and will only be available under password protected secure access. If ACF decides to extend this project, we may share your information with the researchers working on that extension, but they would keep the information that is identifiable private to the same extent that we do. One exception to not sharing your identity,

*According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0577 (Exp Date: 09/30/2024). The time required to complete the interview is estimated to be 35 minutes.*

is that the interviewer may need to tell the appropriate authorities if you report evidence of current abuse or neglect. They may also need to report if you threaten to hurt yourself or someone else.

### **How will my information be protected?**

We will do many things to keep your information private. We will only let the research team see your information. We will store information about you either in a locked drawer or on a secure computer. The computer will be password protected. We will also not use your name in any reports or papers.

We also have a Certificate of Confidentiality from the government to protect your privacy. This Certificate of Confidentiality strictly limits when we can share identifiable information collected through our research. For example, we cannot be forced to give a court information about you. **However, you should know that the Certificate does not stop reporting that federal, state or local laws require, for example reporting of child or elder abuse, some communicable diseases, and threats to harm yourself or others.**

### **Can anything bad happen to me?**

Some of the questions you are asked may make you feel uneasy. **You do not have to answer** any questions that you do not want to answer. Additionally, any data you may agree to provide us access to could be compromised in a breach of data and the answers you may provide in the interview could be revealed. We have taken precautions discussed under “How will my information be protected?” to minimize the risk of any data being compromised.

### **Can anything good happen to me?**

You will not benefit directly from this study. But data we get from the study is important. Being in this study will let you tell officials about your experiences during and after foster care. This information may be used to improve the services that youth receive before and after they leave care. Many youth in foster care appreciate the chance to tell their story and be listened to.

### **Will I get anything for being part of the study?**

For helping me with this study, you will receive a **\$25 gift card** for this survey, **\$50** for the second survey in **12 months**, and **\$50** for the third survey in **24 months**. If you decide to stop being in the study or skip some of the questions today you still get **\$25**. It's all up to you.

### **Who is doing the study? Who can I talk to about it?**

This study is being done by the Urban Institute, the University of Chicago, and the Survey Firm, RTI International. The US Department of Health and Human Services is paying for this study. The people in charge of the study are Dr. Michael Pergamit ([mpergamit@urban.org](mailto:mpergamit@urban.org)) and Dr. Mark Courtney ([markc@uchicago.edu](mailto:markc@uchicago.edu)). If you have any questions or concerns about this study, please contact:

Jennifer Keeney  
RTI International  
919-316-3525  
1-800-334-8571 extension 23525  
[jkeeney@rti.org](mailto:jkeeney@rti.org)

If you agree to be in this study and feel that you were not treated fairly, please contact:

The Institutional Review Board Administrator  
Everett Madden  
Urban Institute  
202.261.5632  
[emadden@urban.org](mailto:emadden@urban.org)

### **What else do I need to know?**

*According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0577 (Exp Date: 09/30/2024). The time required to complete the interview is estimated to be 35 minutes.*

If you are feeling upset by the issues discussed in this survey and would like to talk with someone about your feelings, we suggest you call your current clinician or reach out to another provider organization. If not, below are some numbers you can call.

**2<sup>nd</sup> Floor Youth Helpline:** Call or text 1-888-222-2228.

**Children's System of Care:** Call or text 1-877-652-7624.

## **Subject's Statements**

### **(1) Agreement to Participate in Today's Interview**

**Do you voluntarily agree to participate in today's interview?** You can choose not to participate at any time.

C      Yes      C      No

### **(2) Agreement to Contact for Future Interviews**

We would like to contact you again for another interview in about 12 months and then again 12 months after that. The interviews may be done at a time that works best for you. You can choose not to be in the study at those times.

**Do you agree to be contacted for future interviews?**

C      Yes      C      No

### **(3) Agreement to Audio Recordings**

We use a laptop quality control (QC) system for this study. The system runs on the computer and will record what you and I say to each other during parts of the survey. Neither you nor I will know when the computer records what we say. The recordings are used to monitor my work. We keep the recordings for those purposes only and we keep them private. We will destroy the files after this review.

**Do we have your okay to run this system during the interview?**

☐      Yes      ☐      No

## Appendix C. Notification Letter to Parents of Minors at Baseline

[Date]

From: [DCF Caseworker]

[Title]

[Contact information]

Dear [Parent Name],

A team of researchers from the Urban Institute, a non-profit research organization in Washington, DC, is working with the U.S. Department of Health and Human Services, Administration for Children and Families, to learn about services provided to adolescents and young adults in foster care. The New Jersey Department of Children and Families (DCF) is one of the child welfare agencies participating in this study. The goal of the study is to learn about services that can help youth in foster care do well in areas such as education, employment, housing, and healthy relationships. You are receiving this letter because your adolescent, [adolescent's name], will be asked if they want to participate in this study.

- If your adolescent agrees to participate, they will be asked to complete three interviews over the next two years about their young adult experiences.

Your adolescent's participation in this study is completely voluntary. They can choose to stop participating at any time. Their choice will have no effect on the services you or your adolescent receive. Their choice will have no effect on your child welfare case.

The researchers on this study will keep all of the information completely private. They will not report anything that could reveal your adolescent's identity. However, the researchers may need to tell the appropriate authorities if your adolescent reports evidence of current child abuse or neglect or if your adolescent threatens to hurt themselves or someone else. The researchers also have a Certificate of Confidentiality from the government to protect your privacy. This strictly limits when we can share identifiable information collected through our research.

If you have any questions or concerns about your adolescent's participation in the study, you may contact [info for DCF Research Review Committee]. If you have questions about the study itself, or if you do not want your adolescent to participate in the survey, you may call Michael Pergamit at the Urban Institute, 1.800.###.#### (toll-free number).

Sincerely,

[insert name and title]

## APPENDIX D. BASELINE YOUTH SURVEY LEAD LETTERS

### YOUNG ADULT LEAD LETTER

## INVITATION TO PARTICIPATE IN THE YOUNG ADULT SERVICES STUDY

[Date]  
[Recipient Name]  
[Address]  
[Address #2]  
[City, State, Zip]

Dear [Recipient Name],

We are from RTI International, a nonprofit research company based in North Carolina. The Urban Institute, a nonprofit social policy research company in Washington DC, has hired RTI to conduct surveys for the *Young Adult Services Study* (YASS). We are asking 600 youth and young adults with experiences in foster care to take part in this study. Your input is needed to understand and improve the services youth receive before and after they leave care.

We ask that you participate three different times – one survey now, a second survey in 12 months, and a third survey in 24 months. This will help us understand changes over time. You will receive a **\$25 gift card for the first survey and \$50 each for the second and third surveys** for sharing your input with us.

Your decision to take part in the study – and which questions you decide to answer—is up to you. We will keep your information private to the extent permitted by law. By taking part in the study, you will have a chance to talk about your experiences in areas such as your relationships with family and friends, education and employment, and places you have lived. The interview also asks about things that have helped in your life and things that may have been difficult. We will also ask for your permission to look at different kinds of administrative data. Administrative data are information about you collected by government agencies such as education records, public assistance records, and foster care agency records. You do not have to answer any question you do not want to answer.

The Administration for Children and Families (ACF), an agency within the U.S. Department of Health and Human Services, funds the study. The research team is not connected to the child welfare agency. Reports released for the study will not identify you. Your involvement does not affect any benefits or services you receive.

The enclosed fact sheet and consent form provide more detail about the study. Contact us by text, phone, or e-mail to learn more and to schedule your interview. An interviewer will contact you by telephone to see if you have any questions.

The success of the study depends on those selected to take part. Thank you in advance for your support.

Sincerely yours,  
Jennifer Keeney, Study Director  
RTI International

**Call: 1-800-334-8571 ext. 26306**

**E-mail: [YASS@rti.org](mailto:YASS@rti.org)**

**Text: 1-919-XXX-XXXX**

### MINOR LEAD LETTER

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0577 (Exp Date: 09/30/2024). The time required to complete the interview is estimated to be 35 minutes.



# INVITATION TO PARTICIPATE IN THE YOUNG ADULT SERVICES STUDY

[Date]  
[Recipient Name]  
[Address]  
[Address #2]  
[City, State, Zip]

Dear [Recipient Name],

We are from RTI International, a nonprofit research company based in North Carolina. The Urban Institute, a nonprofit social policy research company in Washington DC, has hired RTI to conduct surveys for the *Young Adult Services Study* (YASS). We are asking 600 youth and young adults with experiences in foster care to take part in this study. Your input is needed to understand and improve the services that youth and young adults receive before and after they leave care. The New Jersey Department of Children and Families (DCF) provided permission for you to take part in this study.

We ask that you participate three different times – one survey now, a second survey in 12 months, and a third survey in 24 months. This will help us understand changes over time. You will receive a **\$25 gift card for the first survey and \$50 each for the second and third surveys** for sharing your input with us.

Your decision to take part in the study – and which questions you decide to answer—is up to you. We will keep your information private to the extent permitted by law. By taking part in the study, you will have a chance to talk about your experiences in areas such as your relationships with family and friends, education and employment, and places you have lived. The survey also asks about things that have helped in your life and things that may have been difficult. You do not have to answer any question you do not want to answer.

The Administration for Children and Families (ACF), an agency within the U.S. Department of Health and Human Services, funds the study. The research team is not connected to the child welfare agency. Reports released for the study will not identify you. Your involvement does not affect any benefits or services you receive.

The enclosed fact sheet and consent form provide more detail about the study. Contact us by text, phone, or e-mail to learn more and to schedule your interview. An interviewer will contact you by telephone to see if you have any questions.

The success of the study depends on those selected to take part. Thank you in advance for your support.

Sincerely yours,  
Jennifer Keeney, Study Director  
RTI International

**Call: 1-800-334-8571 ext. 26306**

**E-mail: [YASS@rti.org](mailto:YASS@rti.org)**

**Text: 1-919-XXX-XXXX**

## APPENDIX E. BASELINE YOUTH SURVEY FACT SHEETS

### YOUNG ADULT FACT SHEET

# YOUNG ADULT SERVICES STUDY: FACT SHEET

#### What is the *Young Adult Services Study*?

The Young Adult Services Study (YASS) is collecting information directly from youth and young adults in foster care in New Jersey about the services young adults receive and their experiences as they leave foster care. Your input is valuable to this effort because your experiences along with others may help improve services and supports for young people in foster care.

#### Why should I participate?

By taking part in this study, you have a chance to have your voice heard, to talk about your needs from your own point of view, and to help other young people in similar situations.

#### How was I chosen?

You have been asked to be in the study because you are a youth or young adult in foster care in New Jersey. We are asking 600 youth and young adults to take part in this study.

#### What will I be asked to do?

We are asking you to participate in three interviews over the course of the study. This will help us understand changes over time. The interviewer will read the questions to you and enter your responses into a computer. We will contact you again in 12 months for a second interview and in 24 months for a third interview. **You will receive a \$25 gift card for the first interview and \$50 each for the second and third interviews.** We may contact you in between interviews to confirm or update your contact information.

We will also ask for your permission to look at different kinds of administrative data. Administrative data are information about you collected by government or other agencies. The kinds of data we would look at include:

- college records, such as attendance and graduation;
- public assistance records, such as WorkFirst New Jersey or food stamps;
- unemployment insurance wage records, such as dates of employment and wages;
- foster care agency records, such as how many and what types of placements you were in;
- birth, marriage, and death records; —
- criminal justice records, such as arrests or convictions; and consumer/credit databases that may have your phone number or address \_\_\_\_\_

We will use this data to locate you and to see how you are doing as you get older.

#### Are the questions personal?

Some questions may seem personal to some people. The interview covers a wide range of topics. The questions will focus on your relationships with family and friends, work and employment, places you have lived, substance use, and criminal justice involvement. The interview will ask about things that have been helpful to you and things that may have been difficult in your life. *You can skip any questions you do not want to answer.*

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0577 (Exp Date: 09/30/2024). The time required to complete the interview is estimated to be 35 minutes.

**How long will it take?**

The first interview will last about 35 minutes. Future interviews will last about 60-75 minutes.

**Who funds and conducts the study?**

The Administration for Children and Families (ACF), an agency within the U.S. Department of Health and Human Services funds the study. ACF hired the Urban Institute to conduct the study and RTI International (RTI) to conduct the interviews. The Urban Institute is a nonprofit social policy research company in Washington DC. RTI is nonprofit research company based in North Carolina. The research team is not connected with any child welfare agency.

**What happens to the information?**

We store your responses to the interview in a safe and secure way. We will store your information until the data have been cleaned and analyzed. We combine your answers with answers from everyone who participates in the interview and report the responses in summary form.

The information collected will be combined and made available for other researchers to use; these files will not include any information that could identify you or quote you personally and will only be available under password protected secure access.

**What about privacy?**

Members of the research team have signed a Privacy Agreement pledging they will not reveal any information to anyone other than authorized project staff. The Urban Institute obtained a federal Certificate of Confidentiality for this study to protect the identity of the research participants. We keep all information private to the extent permitted by law, and we never identify a single person in our reports. We combine your answers with responses from others who decide to take part in the study. We report results only in percentages, averages, and other statistics.

Some questions ask about illegal behavior such as drug use. We will not share this information with your caseworker or law enforcement. One exception to note: The interviewer may need to tell the appropriate authorities, such as DCF, if you report evidence of current abuse or neglect. They may also need to report if you threaten to hurt yourself or someone else, such as by calling a crisis counselor.

Before starting the interview, the interviewer will also ask you if you are in a place where no one can hear your answers.

**Where do I get more information about the study?**

Contact us by phone, e-mail, or text if you have questions.

**Call:** Ellen Causey, the RTI Field Manager toll-free at 1-800-334-8571 extension 26306

**E-mail:** [YASS@rti.org](mailto:YASS@rti.org)

**Text:** 1-919-XXX-XXXX

## MINOR FACT SHEET

*According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0577 (Exp Date: 09/30/2024). The time required to complete the interview is estimated to be 35 minutes.*

# YOUNG ADULT SERVICES STUDY: FACT SHEET

## **What is the Young Adult Services Study?**

The Young Adult Services Study (YASS) is collecting data directly from youth and young adults in foster care in New Jersey about the services young adults receive and their experiences as they leave foster care. Your input is valuable to this effort because your experiences along with others may help improve services and supports for young people in foster care.

## **Why should I participate?**

By taking part in this study, you have a chance to have your voice heard, to talk about your needs from your own point of view, and to help other young people in similar situations.

## **How was I chosen?**

You have been asked to be in the study because you are a youth or young adult in foster care in New Jersey. We are asking 600 youth and young adults to take part in this study.

## **What will I be asked to do?**

We are asking you to participate in three interviews over the course of the study. This will help us understand changes over time. The interviewer will read the questions to you and enter your responses into a computer. We will contact you again in 12 months for a second interview and in 24 months for a third interview. **You will receive a \$25 gift card for the first interview and \$50 each for the second and third interviews.** We may contact you in between interviews to confirm or update your contact information. With your permission, we would also like to use consumer/credit databases that may have your phone number or address to locate you once you turn 18.

## **Are the questions personal?**

Some questions may seem personal to some people. The interview covers a wide range of topics. The questions will focus on your relationships with family and friends, work and employment, places you have lived, substance use, and criminal justice involvement. The interview will ask about things that have been helpful to you and things that may have been difficult in your life. *You can skip any questions you do not want to answer.*

## **How long will it take?**

The first interview will last about 35 minutes. Future interviews will last about 60-75 minutes.

## **Who funds and conducts the study?**

The Administration for Children and Families (ACF), an agency within the U.S. Department of Health and Human Services funds the study. ACF hired the Urban Institute to conduct the study and RTI International (RTI) to conduct the interviews. The Urban Institute is a nonprofit social policy research company in Washington DC. RTI is nonprofit research company based in North Carolina. The research team is not connected with any child welfare agency.

## **What happens to the information?**

We store your responses to the interview in a safe and secure way. We will store your information until the data have been cleaned and analyzed. We combine your answers with answers from everyone who participates in the interview and report the answers in summary form.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0577 (Exp Date: 09/30/2024). The time required to complete the interview is estimated to be 35 minutes.

The information collected will be combined and made available for other researchers to use; these files will not include any information that could identify you or quote you personally and will only be available under password protected secure access.

### **What about privacy?**

Members of the research team have signed a Privacy Agreement pledging they will not reveal any information to anyone other than authorized project staff. The Urban Institute obtained a federal Certificate of Confidentiality for this study to protect the identity of the research participants. We keep all information private to the extent permitted by law, and we never identify a single person in our reports. We combine your answers with responses from others who decide to take part in the study. We report results only in percentages, averages, and other statistics.

Some questions ask about illegal behavior such as drug use. We will not share this information with your caseworker, caregivers, or law enforcement. One exception to note: The interviewer may need to tell the appropriate authorities, such as DCF, if you report evidence of current abuse or neglect of yourself or others. They may also need to tell your caregiver if you threaten to hurt yourself or someone else.

Before starting the interview, the interviewer will also ask you if you are in a place where no one can hear your answers.

### **Where do I get more information about the study?**

Contact us by phone, e-mail, or text if you have questions.

**Call:** Ellen Causey, the RTI Field Manager toll-free at 1-800-334-8571 extension 26306

**E-mail:** [YASS@rti.org](mailto:YASS@rti.org)

**Text:** 1-919-XXX-XXXX

## **APPENDIX F. BASELINE YOUTH SURVEY REFUSAL LETTERS**

*According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0577 (Exp Date: 09/30/2024). The time required to complete the interview is estimated to be 35 minutes.*

## REFUSAL LETTER: UNCOOPERATIVE

# INVITATION TO PARTICIPATE IN THE YOUNG ADULT SERVICES STUDY

[Date]  
[Recipient Name]  
[Address]  
[Address #2]  
[City, State, Zip]

Dear [Recipient Name],

Recently, our interviewer contacted you and asked you to take part in the Young Adult Services Study (YASS). At that time, you were not interested in joining the study. We hope this letter provides more information about our procedures and the value in taking part. We hope you will reconsider.

The *Young Adult Services Study* (YASS) offers you a chance to share your experiences concerning your time in foster care. Your input and experiences can help improve supports for older youth in foster care.

We understand your time is valuable. By taking part in this survey, you will help us understand and improve the services that youth receive before and after they leave care. In return, **you will receive a \$25 gift card for taking part**. Our interviewer can schedule the survey at a time that works for you. We can schedule the survey in the morning, afternoon, evening, or even over the weekend. The survey can be completed over multiple sessions if needed and takes about 35 minutes to complete. You can also refuse to answer any question that you do not wish to answer.

The research team is not connected to the child welfare agency. Reports released for the study will not identify you. Your involvement does not affect any benefits or services you receive.

The enclosed fact sheet provides more detail about the study. I hope after reading it you will join this important study. Contact us by text, phone, or e-mail to learn more and to schedule your survey. An interviewer will contact you again soon.

Thank you in advance for your support.

Sincerely yours,  
Jennifer Keeney, Study Director  
RTI International

**Call:** 1-800-334-8571 ext. 26306 **E-mail:** YASS@rti.org **Text:** 1-919-XXX-XXXX

## REFUSAL LETTER: TOO BUSY

*According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0577 (Exp Date: 09/30/2024). The time required to complete the interview is estimated to be 35 minutes.*

# INVITATION TO PARTICIPATE IN THE YOUNG ADULT SERVICES STUDY

[Date]  
[Recipient Name]  
[Address]  
[Address #2]  
[City, State, Zip]

Dear [Recipient Name],

Recently, our interviewer contacted you and asked you to take part in the Young Adult Services Study (YASS). At that time, you expressed some concerns about the time required to do the survey. This letter provides you with some additional information about the *Young Adult Services Study* (YASS) and how we can make taking part as easy as possible. We hope you will reconsider.

We know you are busy, and your time is important to you. Your survey can be scheduled at a time that works for you. We offer morning, afternoon, evening, and weekend appointments. We want to include you and will make a special effort to work with your schedule. The survey can be completed over multiple sessions if needed and takes about 35 minutes to complete. **You will receive a \$25 gift card for taking part.**

You are among a select group of youth and young adults invited to take part in this study. Your input can improve supports for older youth in foster care. We keep your answers to the survey private. We never identify you by name; we combine your responses with the answers of others and report in summary form.

The enclosed fact sheet provides more detail about the study. I hope after reading it you will join this important study. Contact us by text, phone, or e-mail to learn more and to schedule your survey. An interviewer will contact you again soon.

Thank you in advance for your support.

Sincerely yours,  
Jennifer Keeney, Study Director  
RTI International

**Call:** 1-800-334-8571 ext. 26306

**E-mail:** YASS@rti.org

**Text:** 1-919-XXX-XXXX

**REFUSAL LETTER: UNABLE TO CONTACT**

**INVITATION TO PARTICIPATE IN THE YOUNG ADULT  
SERVICES STUDY**

[Date]  
[Recipient Name]  
[Address]  
[Address #2]  
[City, State, Zip]

Dear [Recipient Name],

Recently, our interviewer tried to contact you about your participation in the Young Adult Services Study (YASS). This study is being conducted by a team of researchers from the Urban Institute and RTI International. To this point, we have been unable to speak with you. We continue to try to reach you because your participation is important.

As a part of this study, we are conducting surveys with youth and young adults to learn more about their experiences in foster care. A limited number of young people have been selected to take part. We need responses from everyone selected to get an accurate picture of the services received and how youth and young adults fare after leaving care.

We know that some people are cautious about speaking to a stranger about their experiences, and that is understandable. The research team is not connected to the child welfare agency. Reports released for the study will not identify you. Your involvement does not affect any benefits or services you receive.

This is an opportunity to have your voice heard and to talk about your needs and experiences from your own point of view. No one else can replace you in this study. We need your input to improve services and supports for young people in foster care to help the next generation of youth. We cannot do that without voices like yours.

**You will receive a \$25 gift card for sharing your input with us.** You can skip any question you do not want to answer. We keep your answers to the survey private. We combine your responses with the answers of others and report in summary form.

The enclosed fact sheet provides more detail about the study. Contact us by text, phone, or e-mail to learn more and to schedule your survey. An interviewer will contact you again soon.

Thank you in advance and we look forward to speaking with you.  
Jennifer Keeney, Study Director  
RTI International

**Call: 1-800-334-8571 ext. 26306** **E-mail: YASS@rti.org** **Text: 1-919-XXX-XXXX**



## APPENDIX G. PANEL MAINTENANCE TRACKING SCRIPTS

### YASS PANEL MAINTENANCE E-MAIL TEMPLATE

From: [YASS@rti.org](mailto:YASS@rti.org)

Subject Line: Request to update contact information

Hello [First Name] [Last Name],

In the last year, you participated in a survey for the Young Adult Services Study (YASS). An interviewer from RTI International interviewed you as a part of this effort. Thank you for taking the time to respond to our survey; your input is vital to this effort.

To prepare for our next round of surveys, it is important we know how best to reach you. For this study to be successful, we need to survey you again to see how things may have changed. You can update your contact information with us in one of two ways:

**(1) By Phone:** Call our secure telephone voicemail system at **(800) 334-8571 extension 25927 (this is a toll-free call)**.

**(2) By Web:** Visit this secure link **<Web Survey Link>** and update your contact information with us online.

**We would appreciate receiving any updates you have in the next two weeks.** We will contact you again when your next survey time gets closer.

We look forward to hearing from you!

Sincerely yours,

Jennifer Keeney, Study Director  
RTI International  
[YASS@rti.org](mailto:YASS@rti.org)

### YASS PANEL MAINTENANCE TEXT MESSAGE TEMPLATE

In the last year, you participated in a survey for the Young Adult Services Study (YASS). To prepare for our next round of surveys, it is important we know how best to reach you.

Use this link **<Insert Web Survey Link>** to update your contact information today. Please complete within the next three days if possible.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is XXXX-XXXX (Exp Date: XX/XX/XXXX). The time required to complete the interview is estimated to be 35 minutes.

## YASS TRACKING BETWEEN WAVES WEBSITE

### INTRO1.

Thank you for your support and interest in this research. If you need assistance at any point, please call **(800) 334-8571** extension **25927**.

### CONTACT1.

Please complete the following fields so we know how best to reach you. This information will only be used to help us contact you and will not be shared with anyone else.

**First Name:**

**Last Name:**

**Address:**

**City:**

**State:**

**Zip:**

**Best Telephone Number:**

**Type of Phone:** [DROP DOWN MENU THAT SHOWS HOME, WORK, CELL PHONE, OTHER]

**Alternate Telephone Number:**

**Type of Alternate Phone:** [DROP DOWN MENU THAT SHOWS HOME, WORK, CELL PHONE, OTHER]

**E-mail Address:**

**Alternate E-mail Address:**

**When is it best to reach you?**

**Day of the Week:** [DROP DOWN MENU WITH DAYS OF THE WEEK]

**Time of Day:** [DROP DOWN LIST SHOWING MORNING, NOON, AFTERNOON, EVENING, WEEKEND HOURS]

### CONTACT\_NAME1.

Please provide information for **2 people** who will always know how to reach you. This can be a relative or friend.

#### Person 1:

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is XXXX-XXXX (Exp Date: XX/XX/XXXX). The time required to complete the interview is estimated to be 35 minutes.

**First Name:**  
**Last Name:**  
**Address:**  
**City:**  
**State:**  
**Telephone:**  
**How is this person related to you?**

**Person 2:**

**First Name:**  
**Last Name:**  
**Address:**  
**City:**  
**State:**  
**Zip:**  
**Telephone:**  
**How is this person related to you?**

☐

I do not wish to provide this information.

**FINISH.**

Thank you for updating your contact information. We will contact you when your next survey time gets closer.

**YASS TRACKING BETWEEN WAVES CALL SCRIPTS**

1. Hello, my name is \_\_\_\_\_ and I am trying to reach [RESPONDENT] about an important study he/she is participating in.

May I please speak to [RESPONDENT]?

1 = YES [IF RESPONDENT, GO TO 2]

- 2 = NO [SKIP TO 1A]
- 3 = LANGUAGE BARRIER
- 4 = REFUSED [SKIP TO EXIT SCRIPT 2]

1a. [FROM Q1]

- 1 = SUBJECT IS NOT AVAILABLE [SKIP TO EXIT SCRIPT1]
- 2 = WRONG NUMBER [SKIP TO EXIT SCRIPT2]
- 3 = SUBJECT DOES NOT LIVE HERE ANYMORE [SKIP TO EXIT SCRIPT3]
- 4 = LANGUAGE BARRIER
- 5 = REFUSED

2. I am calling as part of the Young Adult Services Study (YASS), an important study that you are participating in. You may remember completing a survey with us in the past. The interviewer asked questions about a wide range of topics like school and employment, places you have lived, and your relationships with family and friends. I would like to thank you for your past participation and take a moment to update our records with your current address and telephone number. This will only take a few minutes of your time.

3. Let me verify the address and phone information we have in our files. (VERIFY/CORRECT ADDRESS INFORMATION BELOW).

STREET ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

PHONE TYPE:

Is this correct?

1 = YES

2 = NO [GO TO 3a]

DK/REF: Providing your contact information is important. This ensures we can reach you in the future to let you know about upcoming

surveys. Your telephone and address information are securely stored and only used to locate you. It will not be shared with anyone outside of the research team.

- 3a. Can you please provide me with your correct contact information so that we may update our records? We are looking for the best address and phone number to reach you.

STREET ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

PHONE TYPE:

4. Do you expect to be living at this same address or at a different address in [INSERT CASE RELEASE MONTH and YEAR]?

1 = SAME ADDRESS [GO TO EXIT SCRIPT5]

2 = DIFFERENT ADDRESS

5. What is the best address and phone number for contacting you to participate in another survey?

STREET ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

NOTE: ENTER RESPONDENT'S CURRENT HOME PHONE NUMBER OR THE NUMBER WHERE HE/SHE CAN BE REACHED MOST OFTEN.

[GOTO EXIT SCRIPT 4]

**EXIT SCRIPT1** [SUBJECT IS NOT AVAILABLE]:

[SET APPOINTMENT]

[GO TO EXIT SCRIPT2].

**EXIT SCRIPT2 [WRONG NUMBER]:**

Thank you for your time. Have a good day/evening.

**EXIT SCRIPT3 [SUBJECT DOES NOT LIVE HERE ANYMORE]:**

I am trying to locate [RESPONDENT FIRST AND LAST NAME] who is participating in a study with us. If this is a good number for us to reach [INSERT RESPONDENT FIRST NAME], I would appreciate [INSERT RESPONDENT FIRST NAME] calling me back at [INSERT 800 NUMBER]. If this is not a good number for us to reach [INSERT RESPONDENT FIRST NAME], can you give us a current contact address and phone so that we may contact [INSERT RESPONDENT FIRST NAME]?

1 = YES

2 = NO [SKIP TO EXIT SCRIPT2]

STREET ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

**EXIT SCRIPT4: [UPDATED CONTACT INFORMATION]**

Thank you for helping me verify or update your contact information. We will call you when we begin surveying again. Have a nice day/evening.

\*\*\*\*\*

[FIs: LEAVE ANSWERING MACHINE ONLY AFTER 3<sup>rd</sup> ATTEMPT]

**Answering Machine Message for RESPONDENT:**

My name is \_\_\_\_\_, and I am trying to reach [RESPONDENT FIRST AND LAST NAME] who is participating in a study with us. If this is a good number for us to reach [RESPONDENT FIRST AND LAST NAME], I would appreciate a call back at [INSERT 800 PHONE NUMBER]. If this is not a good number for us to reach [RESPONDENT FIRST NAME], we request that you call us back at your convenience so that we can remove your number from our system. Thank you.

## APPENDIX H. PANEL MAINTENANCE LETTER

[Participant Name]  
[Address]  
[Address2]  
[City, State Zip]

[Date]

Hello [First Name] [Last Name],

In the last year, you participated in a survey for the Young Adult Services Study (YASS). Thank you for taking the time to respond to our survey; your input is vital to this effort.

To prepare for our next round of surveys, it is important we know how best to reach you. For this study to be successful, we need to survey you again to see how things may have changed. You can update your contact information with us in one of three ways:

- (1) **By Mail:** Complete and return the enclosed **Contact Update Form**, free of charge.
- (2) **By Phone:** Call our secure telephone voicemail system at **(800) 334-8571 extension 25927 (this is a toll-free call)**.
- (3) **By Web:** Visit this secure link **<Web Survey Link>** and update your contact information with us online.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is XXXX-XXXX (Exp Date: XX/XX/XXXX). The time required to complete the interview is estimated to be 35 minutes.

When you get in touch, **please let us know of any updates, including the best address and phone number where we can reach you.** If the address and telephone number printed on the contact card are correct, please let us know by checking the “Information Correct” box or contacting us by phone. We would also like the name, address, and phone number of **2 people** who will always know how to reach you. This can be a relative or friend.

**We would appreciate receiving any updates you have in the next two weeks.** We will send you another letter when your next survey time gets closer. We look forward to hearing from you!

Sincerely yours,



Jennifer Keeney, Study Director  
RTI International  
[YASS@rti.org](mailto:YASS@rti.org)

**APPENDIX I. PANEL MAINTENANCE POSTCARD**  
**(BI-FOLD SELF-SEALING BUSINESS REPLY POSTCARD)**



## Contact Update Form

This information will be kept completely confidential and used for research purposes only.

YOUNG ADULT  
SERVICES STUDY

### PART 1. Current Contact Information On Record

<<L\_Fname>> <<L\_Lname>>  
<<temp\_address>>  
<<temp\_address2>>  
<<temp\_city>>, <<temp\_state>>  
<<temp\_zip>>  
<<temp\_phone>>

☐ Check Box If Information Above Is Correct

Update Contact Information As Needed:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

(circle one): Home Work Cell phone

Alternate phone:

(\_\_\_\_) \_\_\_\_\_

(circle one): Home Work Cell phone

E-mail: \_\_\_\_\_

### PART 2. Other Contact Information

Please provide information for 2 people  
who will always know how to reach you:

#### PERSON 1 \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

How is this person related to you?

\_\_\_\_\_

#### PERSON 2 \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

How is this person related to you?

\_\_\_\_\_

Thank you for your help!

«CASE ID»



RTI International  
PO BOX 12194  
Research Triangle Park, NC 27709



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**

FIRST-CALL MAIL PERMIT NO. 593 DURHAM, NC

POSTAGE WILL BE PAID BY ADDRESSEE



RTI International  
ATTN: Carson Hunt (XXXXXX.XXX.X)  
PO BOX 12194  
Research Triangle Park, NC 27709-9935

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection unless it displays a valid OMB control number. The valid OMB control number for this information collection is XXXX-XXXX (Exp Date: XX/XX/XXXX). The time required to complete the interview is estimated to be 35 minutes.