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Family Options Study

APPENDIX D: Consent to Participate—Adult Respondent

PURPOSE OF THE FAMILY OPTIONS STUDY: The Family Options Study was designed to help the U.S. Department of Housing and Urban Development (HUD) understand how different kinds of housing and services helped families who were experiencing homelessness. You enrolled in the Family Options Study between September 2010 and January 2012. You may remember meeting with an interviewer from Abt Associates while you were staying in an emergency shelter during that time. The interviewer told you about the Family Options Study and asked you to sign a consent form if you were interested in joining the study. This agreement explained the risks and benefits of voluntarily participating in the study. The agreement also explained that you would be asked to participate in interviews several times. We also may have collected data from up to two children in your family.

The information gathered in this study helps researchers, HUD, policymakers, and homeless service providers better understand the challenges and barriers that families face when they experience homelessness and how best to help them in the future. Since you are one of 2,300 families that participated in the Family Options Study, we would like to ask you to participate in the next phase of data collection.

INVITATION TO CONTINUE PARTICIPATION: As a participant in the Family Options Study, we invite you to continue your voluntary participation in the study. Agreeing to continue your participation in the Family Options Study involves two things:

- 1. Completing an interview that will take about one hour today, and
- 2. Permitting HUD and researchers to continue to collect additional data about you and your family.

Interview. The interview will ask about your current housing, your well-being and the well-being of your family members, and about employment. Most of the questions in this interview may be familiar to you, because nearly all of them were included in the interviews you completed before. This interview is expected to take about one hour to complete.

There is one new component to the study. We would like to contact your children who are now adults (those between the ages of 18 and 30) about an opportunity to enroll in the study as well. We are asking you for their contact information so that we can contact them to ask if they would like to enroll in the study and to participate in a web survey. Sharing your children's contact information is voluntary. You can still participate in the study, even if you choose not to share your child's contact information.

Periodic contacts. The Family Options Study provides important information about what housing and services help families who experienced homelessness. In order to reach you in the future to continue learning about your experiences, it is important that we keep up to date contact information for you in our database. After this phase of research concludes in 2025, researchers may contact you to make sure that we update your name, address, phone number, email address.

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We also want to collect contact information for someone that will always know how to reach you. We would only contact this person if we could not reach you directly.

Additional data. When you agreed to participate in the Family Options Study originally, you gave permission to Family Options Study researchers to collect information from other programs about you and your family. If you agree to continue participating in the study, it means that you agree to let researchers continue to get information about you through 2025. The types of information that may be collected include, but are not limited to:

- The dates and types of services received, including housing or services programs
- Information about earnings from jobs from unemployment insurance wage records or other earnings data
- Information about your health and use of health care
- Information about new addresses from any of these sources
- School record information for you (e.g., college enrollment and graduation) and your minor children (e.g., school records from kindergarten through high school, including information about how they scored on achievement tests, their school absences, if they repeated a grade, if they had any disciplinary actions, how they are doing in school, existence of individualized education plans, and as they age out of high school)

PARTICIPATION IS ALWAYS VOLUNTARY: Your continued participation in this study is voluntary. As a participant, you have the right to get answers to any questions you have about the study. You are free to withdraw from the study at any time. If you choose to stop participating in this study, you can do so at any time without any penalty or loss of benefits you may receive now or in the future.

If you choose not to sign this consent form, we will not complete the interview with you at this time and we will not ask you to participate in any future data collection. However, you will remain part of the study sample and we will continue to use the data previously collected under this study from the time that you enrolled until today.

PROCEDURES: Once you sign this consent form or give your verbal consent, an interviewer from Abt Associates will complete the interview with you. This interview should take about an hour to complete.

POSSIBLE DISCOMFORT OR RISKS: The risks to you of continuing to participate in this study are minimal. However, there *are some* potential risks. Risks could include the possibility that:

- You might be uncomfortable or even upset answering some of the questions on the interviews. If you feel that way, you can choose not to answer any question on the survey. You can also stop the interview at any time.
- There is some risk that your information could be obtained by people other than the researchers doing this study. The study has strict procedures in place to protect the information you provide and to prevent this from happening. However, if that were to happen, we would contact you to let you know that this occurred.

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BENEFITS: There are no direct benefits to you from participating in the study. However, findings from this study will be provided to HUD and published so that homeless providers and policymakers can learn more about what works best to help families who experience homelessness.

INCENTIVES: Once you complete the interview, we will send you a \$50 gift card in appreciation of your time.

CONFIDENTIALITY: Special efforts have been taken to protect the privacy of the information you have provided us through this study. These efforts will help to ensure that any confidential information you share is not accidentally disclosed.

Only the following people will see your confidential information:

• The interviewer conducting this survey,

study participant is between 25 and 35 years old.

- A team of HUD-approved researchers authorized to work on the Family Options Study and other related studies¹, and
- Individuals involved in providing the other information we collect about you.

Your answers will not affect any housing or other assistance you may receive now or in the future. Your name will never be used in any report. Your answers will be combined with the answers from other people who participate in this study. So, your answers will always be reported as part of a group. No names or individual identifying information will ever be used in any public documents or data files prepared for the project.

Any information that the researchers collect about you will be kept confidential. This means that information about you will not be knowingly shared with others in a way that identifies you or can be associated with you, except for the instances specifically stated below or if laws make us share some of the research information that identifies you or your child. If someone is at risk of harm, we may have to report it to the appropriate authorities. Please refer to the PRA Burden Statement and Privacy Act Statement included in the notification letter we sent you to learn more about how we will protect your information.

This study has a special certificate from the U.S. government. This certificate adds extra protection for the research information that identifies you. This certificate does not mean the government approves or disapproves of this study. It says that the research team does not have to identify you or provide any information about you, even if a court asks them to.

¹ HUD will make this data available to other people to maximize the benefits of this research. HUD will make two versions of the data available. Neither version of the data will include any personal information about your identity. Only HUD-approved researchers will be able to use the first version of the data. HUD will require anyone who they provide access to these data to commit to protecting the data, and to presenting results in summary form only. The other version of the data will be available to the public. There will be no restrictions on who can use the public version of the data. Because there are no limits on who could use the public data, HUD will take additional steps to make sure your identity is protected. They will do this by including more summarized information. For example, rather than showing that a study participant is 30 years old it would show that the

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QUESTIONS: If you have questions regarding this study, please contact the Abt Associates Survey Director Ms. Brenda Rodriguez at 617-XXX-XXXX (not a toll-free number). You may also call the study toll-free line at 1-XXX-XXXX-XXXX.

CONSENT TO PARTICIPATE: By signing this participation agreement or providing verbal consent, I confirm that I have read –or have had the form read to me—and the information in this form was explained to me. I had the opportunity to ask questions. I understand that my participation is voluntary, and I can ask to be withdrawn from the study at any time. I understand that I will be given a signed copy of this consent form to keep. I voluntarily agree to continue my participation in this study of programs for homeless families.

Participant Study ID#		_		
Participant's Name – PLEASE	PRINT			
Participant's Signature			Date	
COMPLETE IF INTERVIEW CO	MPLETED BY	PHONE:		
Verbal Consent Obtained:	YES	NO		
Name of Interviewer				
Signature of Interviewer			Date	_

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