

Appendix J: Family Options Study
Consent to Participate—Adult Children

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. Your parent/guardian(s) enrolled in the Family Options Study between September 2010 and January 2012. You may remember when your parent/guardian met with an interviewer in the past. You may also remember meeting with an interviewer when you were younger to talk about your own experiences growing up. We also collected information about you from your parents. Now that you are an adult (18 years old or over), we would like to invite you to join the study. Your participation in the study will allow the researchers to understand how different housing and services help children as they age into adulthood.

This study is being conducted by an experienced team of researchers at Abt Associates and Vanderbilt University. It is funded by the U.S. Department of Housing and Urban Development (HUD). The information gathered in this study will help researchers, HUD, policy makers, 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.

INVITATION TO PARTICIPATE: Now that you are an adult, we want to invite you to enroll in the Family Options Study. Agreeing to participate in the Family Options Study involves two things:

1. Completing an online survey that will take about 15 minutes to complete once you receive the invitation in the next two weeks, and
2. Allowing HUD and researchers to continue to collect additional data about you.

Online Survey. This short survey will ask about your current housing, employment history, education, your family members, and your life experiences.

Periodic Contacts. The Family Options Study provides policymakers with important information about what housing and services can help families who experienced homelessness. In order to reach you in the future to learn more about your experiences, it is important that we have your contact information correct in our database. For example, researchers from Vanderbilt University may contact you to participate in a virtual interview. 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. 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 couldn't reach you directly.

Additional Data. If you agree to allow this information to be collected, it means that you agree to let researchers get information about you from other programs. 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 the time you were enrolled in elementary, secondary, and postsecondary schools (e.g., attendance dates, grade retention, program completion, existence of individualized education plan)

PARTICIPATION IS ALWAYS VOLUNTARY: Your 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 not participate in this study or to stop participating in this study, you can do so without any penalty or loss of any benefits you may receive now or in the future.

If you agree to participate in this study and the online survey now you do not have to participate in future data collection. You can decline to answer specific questions or to stop the completing the online survey entirely. If you choose to sign this consent form, we will not send you the online survey and we will not ask you to participate in any other 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.

PROCEDURES: Once you sign this consent form or give your verbal consent, you will receive an email from Abt Associates with a link to complete the online survey. This survey should take about 15 minutes to complete.

POSSIBLE DISCOMFORT OR RISKS: The risks to you of participating 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 online survey questions. If you feel that way, you can choose not to answer any question on the survey. You can also stop the survey 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.
- There is some risk that people other than the researchers completing this study could find out that you are a participant in the study. The study has strict procedures in place to prevent this from happening. However, if that were to happen, we would contact you to let you know that this occurred.

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 service providers who assist families who experience homelessness and policymakers can learn more about what works best to help families.

INCENTIVES: For completing this enrollment call, we will email you a \$15 gift card to thank you. Once you complete the online survey, we will email you a \$25 gift card to thank you.

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

Only the following people will see your confidential information:

- A team of HUD-approved researchers authorized to work on the Family Options Study and other related studies,¹ 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 and will be covered by the Privacy Act Statement. 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. If someone is at risk of harm, we may have to report it to the appropriate authorities. The research team will maintain the confidentiality of the information from the start of the study until it has been completed and findings delivered to HUD.

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.

QUESTIONS: If you have questions regarding this study, please contact the Abt Associates Survey Director Ms. Brenda Rodriguez at 617-520-2351 (not a toll-free number). You may also call the study toll-free line at 1-XXX-XXX-XXXX.

CONSENT TO PARTICIPATE: By signing this consent form or providing verbal consent, I confirm that I have read –or 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 and requests to be in related studies 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 families who experience homelessness. To withdraw from the study, please

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 identifying information about you. 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 study participant is between 25 and 35 years old.

contact the Abt Associates Project Director, Ms. Lauren Dunton at 301-634-1779 (this is not a toll-free number).

Participant Study ID# _____

Participant's Name - PLEASE PRINT

Participant's Signature

Date

DOES NOT CONSENT TO PARTICIPATE: If you choose not to consent to enroll in this study as an adult, we will not ask you to complete the online survey or enroll you.

Participant Study ID# _____

Participant's Name - PLEASE PRINT

Participant's Signature

Date

COMPLETE IF INTERVIEW COMPLETED BY PHONE:

Verbal Consent Obtained: YES NO

Name of Interviewer

Signature of Interviewer

Date