APPENDIX G: Consent and Assent Forms

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Caseworker Informed Consent

National Survey of Child and Adolescent Well-Being (NSCAW)

NSCAW

The Administration for Children and Families (ACF), an agency within the U.S. Department of Health and Human Services, provides funding for activities that support the well-being of children and families. ACF hired RTI International (RTI), a research company in North Carolina, to conduct a national survey of children and families in the child welfare system. RTI works with researchers from the University of North Carolina at Chapel Hill and Washington University in St. Louis to carry out the study

SELECTION OF PARTICIPANTS

RTI selected 4,500 children to take part in this study. All of the selected children had contact with the child welfare system during a 12-month period. As a part of the study, we conduct interviews with the child, the child's caregiver, and with the caseworker. You have been identified as the primary caseworker of one or more participating children. We will follow up with sampled children and families in 18 months to conduct a second interview.

PURPOSE OF NSCAW CASEWORKER INTERVIEWS

The case worker interview collects information about the child's history with the child welfare system and services recommended or provided by the agency. Your answers combined with the answers of others in the study will help us describe the needs of children and their use of available child welfare services. Research reports will summarize the collected information and help policy makers improve the child welfare system. We will not share your answers with the child or the child's caregiver. They will not know how you responded to the questions.

TYPES OF QUESTIONS FOR CASEWORKERS

The caseworker interview takes about 45 minutes. The interviewer will ask you questions about the events surrounding the investigation/assessment, about characteristics of the family, and any factors that contributed to your report.

YOUR RIGHTS

You can decide to take part in this study or not. You can refuse to answer any and all questions. Your decision to take part will not affect you, your job, or any services the child may receive. You have the right to stop the interview at any time.

RISKS

Taking part in this study presents no physical risks to you. Some questions might make you feel uneasy or feel various emotions, such as sadness. We have significant protections in place to collect and store your information securely. However, there is a small risk that if someone does not follow the rules we set, someone outside the study team might see your information. We minimize this risk by transferring and storing your information and interview data using a study ID and not your name.

BENEFITS

Taking part in this study presents no direct benefits to you, the caregiver, or to the child. Your input will help us learn about the needs of children and the services available to them.

PRIVACY

We keep your responses private to the extent permitted by law. We keep your answers on a secure computer labeled with an ID number. Your name and that of the child will not be reported with any information you provide. All staff involved in this research have signed a Privacy Pledge.

Disposition: Original to RTI; Copy to Respondent, Version 1A, October 2020 G-1

This research is covered by a federal protection called a Certificate of Confidentiality. This means the researchers cannot share the information they gather that may identify you. The Certificate prevents researchers from revealing this information even if it is subpoenaed by a court.

However, the Certificate does allow researchers to share information in some situations. For example, researchers must follow reporting laws about child and adult abuse. Also, as a part of agreeing to be in this study, you are giving permission for researchers to share information in the rare circumstance that it is needed to prevent serious risk to yourself or others. In addition, the agency that funds this research (the Administration for Children and Families) is permitted to access information to confirm that the research is being conducted properly.

In the future, information from this study may be securely shared with qualified individuals to help learn more about the experiences of children and families with the child welfare system. The information that is shared will only include a study ID number and not your name.

We never identify a single person or family in our reports. Your information will be combined with information from other people taking part in the study. When we write up the study to share it with other researchers, we will write about the combined information. You will not be identified in any published or presented materials.

QUESTIONS

If you have questions, please call Jennifer Keeney at RTI, 1-800-334-8571 extension 23525 (toll-free number). If you have questions about your rights as a study participant, please call RTI's Office of Human Research Protection at 1-866-214-2043 (a toll-free number).

You will receive a copy of this consent form to keep.

Research Participant Statement and Signature

rpiamed to me. My signature below ii	idicates I give consent for my
Fill in CW Respondent 8-digit	
ID#	Printed Name of Youth
Signature of Interviewer	Date
	Fill in CW Respondent 8-digit

Audio Recordings Statement

We use a laptop quality control (QC) system for this study. The system runs on the computer. This system will make audio recordings of what you and I say to each other during the interview. Neither you nor I will know when the computer records what we say. Project staff at RTI will listen to the recordings only to review my work.

The recordings are securely stored on my computer and transmitted back to RTI within 12 hours after this interview. They are stored on secure computers and only members of the project team can review them. The recordings will be destroyed at the end of the study after data have been cleaned and analyzed.

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	CLA	UIIC	DUA.

Yes, I consent to having parts of this interview recorded by the computer for quality reviews.
No, I do not want any part of this interview recorded.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-0202, Exp: 09/30/2023. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Dr. Melissa Dolan; 230 W. Monroe Street, Suite 2100 Chicago, IL 60606.

The Federal Government has issued a Certificate of Confidentiality (authorized by the Public Health Service Act Section 301(d), 42 U.S.C Section 241 (d), 1988) to the researchers who are conducting this study which authorizes us to protect the privacy of individuals who participate.

Caregiver Informed Consent

National Survey of Child and Adolescent Well-Being (NSCAW)

NSCAW

The Administration for Children and Families (ACF) provides funding for activities that support the well-being of children and families. ACF hired RTI International (RTI), a research company in North Carolina, to conduct a national survey of children and families in the child welfare system. RTI works with researchers at the University of North Carolina at Chapel Hill and Washington University in St. Louis to carry out the study.

SELECTION OF CHILDREN AND OTHER PARTICIPANTS

RTI selected 4,500 children to take part in this study. All of the children had contact with the child welfare system during a 12-month period. The study includes observations or interviews with selected children. The study also includes interviews with the child's caregiver and case worker. We plan to interview children and their caregivers two times. We will schedule the second interview 18 months after the first interview. We must have permission from a parent or legal guardian to include the child in the study. This form explains the caregiver interview. A separate form explains the child's part in the study. This form explains the caregiver's participation in the study and that interview.

PURPOSE OF THIS NSCAW CAREGIVER INTERVIEW

We want to interview you about your child and your experiences with the child welfare system. Your answers combined with answers of other caregivers in the study will help us describe the needs of children and their use of available child welfare services. What we learn from this information will help policy makers make improvements to the child welfare system.

TYPES OF QUESTIONS FOR CAREGIVERS AND OTHER INFORMATION GATHERED

The caregiver interview takes about 100 minutes. The length of your interview depends on the age of your child and other factors. The interview includes questions about your child's learning, health, behavior, and relationships with friends. We will ask about services your family may receive and your level of satisfaction with those services. We also want to learn about your attitudes about raising children, your life experiences, and your involvement with school and community activities. The interviewer will ask about things that may happen in your family like violence in the home, drug abuse, and other risky behaviors such as drinking and involvement with the police. We will also take notes on what we see in your home such as toys you have. In addition, we will observe your interactions with your child and ask you to tell us about your relationship with your child.

YOUR RIGHTS

You can decide to take part in this study or not. You can refuse to answer any and all questions. Taking part in this study does not affect any benefits you or your child may receive.

RISKS

Taking part in this study presents no physical risks to you and your child. Some questions might make you feel uneasy or feel various emotions, such as sadness. We have significant protections in place to collect and store our information securely. However, there is a small risk that if someone does not follow the rules we set, someone outside of the study team might see your information. We minimize this risk by transferring and storing your information and interview data using a study ID and not your name.

If we learn a child's life or health may be in danger during the interview, we will tell the appropriate authorities. The Privacy section provides more information below.

Disposition: Original to RTI; Copy to Respondent, Version 1CL, October 2020

BENEFITS

Taking part presents no direct benefits to you or your child for answering our questions. What we learn from you may help to improve child welfare services and programs. By taking part, you will help us understand the needs of children and the services available to them.

FUTURE CONTACTS

We may contact you in eighteen months for another round of interviews. This will help us understand changes over time. You can decide whether to talk with us at that time.

PRIVACY

We keep your answers private to the extent allowed by law. We keep your answers on a secure computer labeled with an ID number. We do not identify you or your child by name. All staff involved in this research have signed a Privacy Pledge.

This research is covered by a federal protection called a Certificate of Confidentiality. This means the researchers cannot share the information they gather that may identify you. The Certificate prevents researchers from revealing this information even if it is subpoenaed by a court.

However, the Certificate does allow researchers to share information in some situations. For example, researchers must follow reporting laws about child or adult abuse. Also, as a part of agreeing to be in this study, you are giving permission for researchers to share information in the rare circumstances that it is needed to prevent serious risk to yourself or others. In addition, the agency that funds this research (the Administration for Children and Families) is permitted to access information to confirm that the research is being conducted properly.

In the future, information from this study may be securely shared with qualified individuals to help learn more about the experiences of children and families with the child welfare system. The information that is shared will only include a study ID number and not your name.

We never identify a single person of family in our reports. Your information will be combined with information from other people taking part in the study. When we write up the study to share it with other researchers, we will write about the combined information. You will not be identified in any published or presented materials.

Three important exceptions to note.

- (1) We will tell the appropriate authorities if the interviewer or project staff think your child's life or health may be in danger.
- (2) Also, if we think your life or health may be in serious danger, we will contact someone qualified to assist you.
- (3) At some point in the future, a different group of researchers may take over this study. If that happens, with your consent, we will give contacting information for you and your child to the other group.

QUESTIONS

If you have questions, please call Jennifer Keeney at the RTI, 1-800-334-8571 extension 23525 (toll-free number). If you have questions about your rights as a study participant, please call RTI 's Office of Human Research Protections at 1-866-214-2043 (a toll-free number).

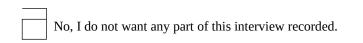
You will receive a copy of this consent form to keep.

Disposition: Original to RTI; Copy to Respondent, Version 1CL, October 2020

You will receive [INCENTIVE AMOUNT] in cash as a thank you for your input. If you skip some of the questions or decide to stop participating, you will still receive the [INCENTIVE AMOUNT]. If you take part in future interviews, you will receive a similar amount for those interviews.

Research Participant S	tatement and Signature
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The above information has been e interview. ——	xplained to me. My signature below	v indicates I give consent for my
Printed Name of Parent/Caregiver	Fill in CCG Respondent 8-digit ID #	t Printed Name of Youth
Signature of Parent/Caregiver	Signature of Interviewer	Date
Release of Contact Information I give consent to have contact information this study.	Statement ormation for me given to another res	search company if they start doing
Yes	No Check one box.	
 system will make audio recording The computer will record programmer you nor I will know when recordings only to review We would also like to recording to talk in their use this recording to bette the interview to capture for 	s that we will use for two purposes: parts of what you and I say to each of the computer records what we say. my work. In the last part of the interview. In the two words about their thoughts and	other during the interview. Neither Project staff at RTI will listen to the this part, we will ask parents and I feelings about the child. We will be will record this part of roject staff will listen to the
interview. They are stored on secu	l on my computer and transmitted bure computers and only members of at the end of the study after data have	
Do we have your permission to ru	n this system during the interview?	
Check one box.		
Yes, I agree to have p	parts of this interview recorded by the c	computer.



An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-0202, Exp: 09/30/2023. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Dr. Melissa Dolan; 230 W. Monroe Street, Suite 2100 Chicago, IL 60606.

The Federal Government has issued a Certificate of Confidentiality (authorized by the Public Health Service Act Section 301(d), 42 U.S.C Section 241 (d), 1988) to the researchers who are conducting this study which authorizes us to protect the privacy of individuals who participate.

Caregiver Permission for Child Participation

National Survey of Child and Adolescent Well-Being (NSCAW)

NSCAW

The Administration for Children and Families (ACF) provides funding for activities that support the well-being of children and families. ACF hired RTI International (RTI), a research company in North Carolina, to conduct a national survey of children and families in the child welfare system. RTI works with researchers at the University of North Carolina at Chapel Hill and Washington University in St. Louis to carry out the study.

SELECTION OF CHILDREN AND OTHER PARTICIPANTS

RTI selected 4,500 children to take part in the study. All of the children had contact with the child welfare system over a 12-month period. The study includes observations or interviews with selected children. The study also includes interviews with the child's caregiver and case worker. We will follow up with sampled children and their caregivers 18 months after the first interview. We must have permission from a parent or legal guardian to include the child in the study.

PURPOSE OF THIS NSCAW INTERVIEW

We want to interview your child about their experiences with the child welfare system, you, and your family. The child's answers combined with the answers of others in the study will help us describe the needs of children and their use of available child welfare services.

TYPES OF QUESTIONS FOR CHILD

The interview with your child is expected to take, on average, 105 minutes. It may take your child more or less time. The length depends on the child's age and other factors. We will assess younger children on their language skills and how well they understand and perform certain tasks. We will also weigh and measure younger children. The interviewer will talk with older children about their development, family experiences, school, friends, and their exposure to violence.

YOUR CHILD'S RIGHTS

You and your child can decide to take part in this study or not. Your child can refuse to answer any and all questions. If your child chooses not to join, this would not affect any benefits or services your family may be receiving. Your child has the right to stop the interview at any time.

RISKS

Taking part in this study presents no physical risks to your child. Some questions might make your child feel uneasy or feel various emotions, such as sadness. We have significant protections in place to collect and store our information securely. However, there is a small risk that if someone does not follow the rules we set, someone outside the study team might see you or your child's information. We minimize this risk by transferring and storing you and your child's information and interview data using a study ID and not your name.

If we learn a child's life or health may be in danger during the interview, we will share this information with the appropriate authorities. The Privacy section provides more detail below.

BENEFITS

What we learn from your child may help to improve child welfare services and programs. By taking part, your child will help us learn more about the needs of children and the services available to them.

FUTURE CONTACTS

Disposition: Original to RTI; Copy to Respondent, Version 1DL, October 2020

We may contact you and your child in eighteen months for another round of interviews. This will help us understand changes over time. You and your child can decide at that time if you want to join.

PRIVACY

We keep your responses and your child's responses private to the extent allowed by the law. We keep you and your child's interviews answers on a secure computer labeled with an ID number. We also keep your name and your child's name private. All staff involved in this research have signed a Privacy Pledge.

This research is covered by a federal protection called a Certificate of Confidentiality. This means the researchers cannot share the information they gather that may identify you or your child. The Certificate prevents researchers from revealing this information even if it is subpoenaed by a court.

However, the Certificate does allow researchers to share information in some situations. For example, researchers must follow reporting laws about child or adult abuse. Also, as a part of agreeing to be in this study, you are giving permission for researchers to share information in the rare circumstance that it is needed to prevent serious risk to yourself or others. In addition, the agency that funds this research (the Administration for Children and Families) is permitted to access information to confirm that the research is being conducted properly.

In the future, information from this study may be securely shared with qualified individuals to help learn more about the experiences of children and families with the child welfare system. The information that is shared will only include a study ID number and not your name or your child's name.

We never identify a single person or family in our reports. Your information, along with your child's information will be combined with information from other people taking part in the study. When we write up the study to share it with other researchers, we will write about the combined information. You will not be identified in any published or presented materials.

Three important exceptions to note.

- (1) We will inform the appropriate authorities if the interviewer or project staff think your child's life or health may be in danger. (2) Also, if we think your life or health may be in serious danger, we will contact individuals qualified to assist you.
- (3) At some point in the future, a different group of researchers may take over this study. If that happens, with your consent, we would give contacting information for you and your child to the other group.

QUESTIONS

If you have questions, please call Jennifer Keeney at the RTI, 1-800-334-8571 extension 23525 (toll-free number). If you have any questions about your rights as a study participant, you may call RTI's Office of Human Research Protections at 1-866-214-2043 (a toll-free number).

You will receive a copy of this consent form to keep.

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We will give your child a gift card for participating. Children ages 11 or older will receive a \$20 gift card and a small gift of equal value; children 10 and under will receive a \$10 gift card. If your child skips some of the questions or decides to stop participating, he or she will still receive the gift card. If your child participates in future interviews, a similar amount will be offered for participating in those interviews.

Research Participant Statement and Signature

The above information has been explained to me. My signature indicates I give my consent for my child to be approached for an interview.

Disposition: Original to RTI; Copy to Respondent, Version 1DL, October 2020

Printed Name of Parent/Caregiver	Fill in CCG Respondent 8-digit ID #	Printed Name of Youth
Cignature of Depart/Conscious	Signature of Internious	Data
Signature of Parent/Caregiver	Signature of Interviewer	Date
Release of Contact Information Stat I give consent to have contact informa Yes	tion for me given to another research com No Check one box.	pany if they start doing this study.
	system for this study. The system runs on I say to each other during the interview.	
	my computer and transmitted back to RTI and only members of the project team can data have been cleaned and analyzed.	
Do we have your permission to run thi	s system during the interview?	
Check one box.		
Yes, I agree to have p	arts of the child's interview recorded by the	ne computer.
No, I do not want any	part of the child's interview recorded.	
information unless it displays a contexpiration date for this collection regarding this burden estimate or suggestions for reducing this burden Chicago, IL 60606 The Federal Government has issued Service Act Section 301(d), 42 U.S.	onsor, and a person is not required to urrently valid OMB control number. Tare OMB #: 0970-0202, Exp: 09/30/2 any other aspect of this collection of den to Dr. Melissa Dolan; 230 W. Mosed a Certificate of Confidentiality (au S.C Section 241 (d), 1988) to the resectorotect the privacy of individuals who	The OMB number and 1023. Send comments information, including nroe Street, Suite 2100 thorized by the Public Health archers who are conducting

Legal Guardian Permission for Child Participation

National Survey of Child and Adolescent Well-Being (NSCAW)

NSCAW

The Administration for Children and Families (ACF) provides funding for activities that support the well-being of children and families. ACF hired RTI International (RTI), a research company in North Carolina, to conduct a national survey of children and families in the child welfare system. RTI works with researchers at the University of North Carolina at Chapel Hill and Washington University in St. Louis to carry out the study.

SELECTION OF CHILDREN AND OTHER PARTICIPANTS

RTI interviewers will contact families of children selected from child welfare agencies throughout the United States to invite them to take part. The study includes interviews with sampled children, their caregivers and their caseworkers. A child under your guardianship was one of 4,500 children selected to take part in this study. We must have permission from a parent or legal guardian to include the child in the study. Once we obtain your permission, the child can make the decision to take part in the study.

PURPOSE OF THIS NSCAW INTERVIEW

We want to interview the child, their current caregiver, and their caseworker. Their responses combined with the answers of others in the study will help us describe the needs of children and families and their use of available child welfare services. Research reports will summarize the information collected and assist policy makers in improving the child welfare system.

TYPES OF QUESTIONS FOR CHILD

The interview with the child is expected to take, on average, 105 minutes. It may take the child more or less time. The length depends on the child's age and other factors. We will observe younger to assess their language skills and how well they perform certain tasks. We will also weigh and measure younger children. We will interview older child to find out about the kinds of things they can do, their experiences at home and at school, their feelings about family and friends, and their exposure to violence.

THE CHILD'S RIGHTS

The child's participation in this study is completely voluntary. He or she can refuse to answer any and all questions. Taking part in the study will not affect any benefits the child may receive. The child has the right to stop the interview at any time.

RISKS

Taking part in this study presents no physical risks to the child. Some questions might make the child feel uneasy or feel various emotions, such as sadness. We have significant protections in place to collect and store our information securely. However, there is a small risk that if someone does not follow the rules we set, someone outside the study team might see the child's information. We minimize this risk by transferring and storing the child's information and interview data using a study ID and not the child's name.

Some answers to questions will require that we share that information with the appropriate authorities. The Privacy section below provides more detail.

BENEFITS

Taking part in this study presents no direct benefits to the child. By taking part, the child will help us learn more about the needs of children and the services available to them.

Disposition: Original to RTI; Copy to Respondent, Version 1F, October 2020 G-11

FUTURE CONTACTS

We will contact the child in eighteen months for another round of interviews. This will help us understand changes over time.

PRIVACY

We will keep the child's responses private to the extent permitted by law. We keep the child's interview answers on a secure computer labeled with an ID number. We do not identify the child by name. All staff involved in this research have signed a Privacy Pledge.

This research is covered by a federal protection called a Certificate of Confidentiality. This means the researchers cannot share the information they gather that may identify the child. The Certificate prevents researchers from revealing this information even if it is subpoenaed by a court.

However, the Certificate does allow researchers to share information in some situations. For example, researchers must follow reporting laws about child or adult abuse. Also, as a part of agreeing to be in this study, you are giving permission for researchers to share information in the rare circumstance that it is needed to prevent serious risk to yourself or others. In addition, the agency that funds this research (the Administration for Children and Families) is permitted to access information to confirm that the research is being conducted properly.

In the future, information from this study may be securely shared with qualified individuals to help learn more about the experiences of children and families with the child welfare system. The information that is shared will only include a study ID number and not the child's name.

We never identify a single person or family in our reports. The child's information will be combined with information from other people taking part in the study. When we write up the study to share it with other researchers, we will write about the combined information. The child will not be identified in any published or presented materials.

Two important exceptions to note.

(1) We will inform the appropriate authorities if the interviewer or project staff think the child's life or health may be in danger. (2) At some point in the future, a different group of researchers may take over this study. If that happens, with your consent, we would give contacting information for the child to the other group.

QUESTIONS

If you have questions, please call Jennifer Keeney at the RTI, 1-800-334-8571 extension 23525 (toll-free number). If you have questions about the child's rights as a study participant, please may call RTI's Office of Human Research Protections at 1-866-214-2043 (a toll-free number).

You will receive a copy of this consent form to keep.

The current caregiver will receive \$50 in cash in appreciation of their input. We will also give each child a gift card for taking part in the study. Children ages 11 and older will receive a \$20 gift card and a small gift of equal value; children 10 and under receive a \$10 gift card. If the skips some of the questions, he or she will still receive the gift card.

Disposition: Original to RTI; Copy to Respondent, Version 1F, October 2020 G-12

	t and Signature ewer explained the above information approach the child named below for	
Printed Name of Legal Guardian	Fill in Child Respondent 8-digit ID #	Printed Name of Child
Signature of Legal Guardian	Signature of Interviewer	Date
Release of Contact Information I give consent to have contact info doing this study. Yes	Statement ormation for the child given to another No Check one box.	r research company if they start
record parts of what the child and know when the computer records review my work. The recordings are securely stored interview. They are stored on secure	QC) system for this study. The system I say to each other during the interview what we say. Project staff at RTI will don my computer and transmitted bacture computers and only members of that the end of the study after data have	ew. Neither the child nor I will listen to the recordings only to ek to RTI within 12 hours after this ne project team can review them.
Do we have your permission to ru	ın this system during the child's interv	riew?
Check one box.		
Yes, I consent to h	aving parts of the child's interview red	corded by the computer for quality reviews
No, I do not want a	any part of the child's interview record	led.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-0202, Exp: 09/30/2023. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Dr. Melissa Dolan; 230 W. Monroe Street, Suite 2100 Chicago, IL 60606..

The Federal Government has issued a Certificate of Confidentiality (authorized by the Public Health Service Act Section 301(d), 42 U.S.C Section 241 (d), 1988) to the researchers who are conducting this study which authorizes us to protect the privacy of individuals who participate.

1Caregiver of Emancipated Youth Informed Consent

National Survey of Child and Adolescent Well-Being (NSCAW)

NSCAW

The Administration for Children and Families (ACF) provides funding for activities that support the well-being of children and families. ACF has hired RTI International (RTI), a research company in North Carolina, to conduct a national survey of children and families in the child welfare system. RTI works with researchers at the University of North Carolina at Chapel Hill and Washington University in St. Louis to carry out the study.

SELECTION OF CHILDREN AND OTHER PARTICIPANTS

RTI selected 4,500 children to take part in this study. Selected children had contact with the child welfare system during a 12-month period. The study also includes interviews with the child's caregiver and case worker. We selected a child currently or very recently in your care to take part in the study. That child gave us their permission to approach you for an interview.

PURPOSE OF THIS NSCAW INTERVIEW

We want to interview you about the child, your experiences with the child welfare system and your family. Your answers combined with the answers of other caregivers in the study will help us describe the needs of children and their use of available child welfare services. What we learn from this information will help policy makers make improvements to the child welfare system.

TYPES OF QUESTIONS FOR PARENT

Your interview may last up to 100 minutes. The interview includes questions about the child's learning, health, behavior, and relationships with friends. For older children, we ask about their involvement in potentially risky behaviors. We also ask about services your family may receive and your satisfaction with those services. We want to learn about your attitudes about raising children, your life experiences, and your involvement with school and community activities. The interviewer will also ask you about the community in which you live, and about things that may happen in your life like violence in the home, involvement with police and risky behaviors such as sexual activity and drug use.

YOUR RIGHTS

You can decide to take part in this study or not. You can refuse to answer any and all questions. Taking part in the study does not affect any benefits you or the youth may receive. You have the right to stop the interview at any time.

RISKS

Taking part in the study presents no physical risks to you. Some questions might make you feel uneasy or feel emotions like sadness. We have significant protections in place to collect and store our information securely. However, there is a small risk that if someone does not follow the rules we set, someone outside the study team might see your information. We minimize this risk by transferring and storing your information and interview data using a study ID and not your name.

If we learn a child's life or health may be in danger during your interview, we will share this information with the appropriate authorities. The Privacy section provides more detail below.

BENEFITS

What we learn from you can help to improve child welfare services and programs. By taking part, you will help us understand the needs of children and services available to them.

FUTURE CONTACTS

Disposition: Original to RTI; Copy to Respondent, Version 1P, October 2020

To help us understand changes over time, we will contact your child in eighteen months for another round of interviews.

PRIVACY

We keep your responses private to the extent allowed by the law. We keep your interview answers on a secure computer labeled with an ID number. We never identify you by name. All staff involved in this research have signed a Privacy Pledge.

This research is covered by a federal protection called a Certificate of Confidentiality. This means the researchers cannot share the information they gather that may identify you. The Certificate prevents researchers from revealing this information even if it is subpoenaed by a court.

However, the Certificate does allow researchers to share information in some situations. For example, researchers must follow reporting laws about child or adult abuse. Also, as a part of agreeing to be in this study, you are giving permission for researchers to share information in the rare circumstance that it is needed to prevent serious risk to yourself or others. In addition, the agency that funds this research (the Administration for Children and Families) is permitted to access information to confirm that the research is being conducted properly.

In the future, information from this study may be securely shared with qualified individuals to help learn more about the experiences of children and families with the child welfare system. The information that is shared will only include a study ID number and not your name.

We never identify a single person or family in our reports. Your information will be combined with information from other people taking part in the study. When we write up the study to share it with other researchers, we will write about the combined information. You will not be identified in any published or presented materials.

Three important exceptions to note.

- (1) We will inform the appropriate authorities if the interviewer or project staff think your child's life or health may be in danger.
- (2) Also, if we think your life or health may be in serious danger, we will contact individuals qualified to assist you.
- (3) At some point in the future this research may be done by another research group. If that happens, with your consent, we would give contacting information for you and the youth to the other group.

QUESTIONS

If you have questions, please call Jennifer Keeney at the RTI, 1-800-334-8571 extension 23525 (toll-free number). If you have any questions about your rights as a study participant, please call RTI's Office of Human Research Protections at 1-866-214-2043 (a toll-free number).

You will receive a copy of this consent form to keep.

You will receive \$50 in cash in appreciation of your input. If you skip some of the questions or decide to stop participating, you will still receive the \$50. If you participate in future rounds, we will provide a similar amount in appreciation of your participation in those interviews.

Research Participant Statement and Signature

The above information has been explained to me. My signature below indicates I give consent for my interview.

Printed Name of Caregiver	Fill in CCG Respondent 8-digit ID #	Printed Name of Youth
Signature of Caregiver	Signature of Interviewer	Date
D. I. of Contact Information	G:	
_	<u>a Statement</u> ormation for me given to another resea	arch company if they start doing
this study. Yes	No Check one box.	-
Audio Recordings Statement		-
will make audio recordings of wh	QC) system for this study. The system lat you and I say to each other during the cords what we say. Project staff at RTI	he interview. Neither you nor I
interview. They are stored on secu	d on my computer and transmitted backure computers and only members of the at the end of the study after data have	e project team can review them.
Do we have your permission to ru	un this system during the interview?	
Check one box.		
Yes, I agree to hav	re parts of this interview recorded by th	ne computer.
No, I do not want a	any part of this interview recorded.	
	sponsor, and a person is not required a currently valid OMB control number.	•
expiration date for this collection	on are OMB #: 0970-0202, Exp: 09/30	0/2020. Send comments
	or any other aspect of this collection of	
suggestions for reducing this bi Chicago, IL 60606.	urden to Dr. Melissa Dolan; 230 W. M	lonroe Street, Suite 2100
	ssued a Certificate of Confidentiality (a	authorized by the Public Health
` '	U.S.C Section 241 (d), 1988) to the res	
I this study which authorizes us t	to protect the privacy of individuals wh	no narticinate

Disposition: Original to RTI; Copy to Respondent, Version 1P, October 2020

1Emancipated Youth Consent Form / Permission for Caregiver Interview

National Survey of Child and Adolescent Well-Being (NSCAW)

NSCAW

The Administration for Children and Families (ACF) provides funding for activities that support the well-being of children and families. ACF hired RTI International (RTI), a research company in North Carolina, to conduct a national survey of children and families in the child welfare system. RTI works with researchers at the University of North Carolina at Chapel Hill and Washington University in St. Louis to carry out the study.

SELECTION OF YOUTH AND OTHER PARTICIPANTS

RTI interviewers will contact families of youth, like you, selected from child welfare agencies throughout the United States. We selected over 4,500 youth to participate in this study. The study also includes interviews with caregivers and case workers.

PURPOSE OF THIS NSCAW INTERVIEW

Your interview may take about 100 minutes to complete. We want to interview you about the kinds of things you can do, how you behave at home and at school, and your feelings about family and friends. We want to learn about people who may help you. We also want to ask about things your parents don't know about or don't like for you to do. This includes skipping school, smoking, drinking, vandalism, using drugs, sexual activities, and other risky or illegal behaviors. Your answers, combined with the answers of other youth in the study, will help us describe the needs of children and their use of available child welfare services. What we learn from this information will help policy makers make improvements to the child welfare system. If you live with or have lived with a parent, grandparent, or other adult who took care of you in the last three months, we will request your permission to speak with that person.

PURPOSE OF THE NSCAW CAREGIVER INTERVIEW

The interview with the person who took care of you may last up to 100 minutes. We will ask them questions about services your family receives, family relationships and support, life experiences, and involvement with school and community activities. We will also ask questions about your learning, behavior, health, and friendships.

YOUR RIGHTS

You can decide to take part in the study or not. You can refuse to answer any and all questions. Taking part does not affect any benefits you may receive. You have the right to take a break or stop the interview at any time.

RISKS

Taking part in this study presents no physical risks to you. Some questions might make you feel uneasy or feel various emotions, such as sadness. We have significant protections in place to collect and store our information securely. However, there is a small risk that if someone does not follow the rules we set, someone outside the study team might see your information. We minimize this risk by transferring and storing your information and interview data using a study ID and not your name.

BENEFITS

Taking part presents no direct benefits to you for answering our questions. What we learn from you may help to improve child welfare services and programs.

FUTURE CONTACTS

We will contact you in eighteen months for a second interview. This will help us understand changes over time. You can decide to join at that time.

Disposition: Original to RTI; Copy to Respondent, Version 1X, October 2020 G-18

PRIVACY

We keep your responses private to the extent allowed by the law. We keep your interview answers on a secure computer labeled with an ID number. We do not identify you by name. All staff involved in this research signed a Privacy Pledge.

This research is covered by a federal protection called a Certificate of Confidentiality. This means the researchers cannot share the information they gather that may identify you. The Certificate prevents researchers from revealing this information even if it is subpoenaed by a court.

However, the Certificate does allow researchers to share information in some situations. For example, researchers must follow reporting laws about child or adult abuse. Also, as a part of agreeing to be in this study, you are giving permission for researchers to share information in the rare circumstance that it is needed to prevent serious risk to yourself or others. In addition, the agency that funds this research (the Administration for Children and Families) is permitted to access information to confirm that the research is being conducted properly.

In the future, information from this study may be securely shared with qualified individuals to help learn more about the experiences of children and families with the child welfare system. The information that is shared will only include a study ID number and not your name.

We never identify a single person or family in our reports. Your information will be combined with information from other people taking part in the study. When we write up the study to share it with other researchers, we will write about the combined information. You will not be identified in any published or presented materials.

Three important exceptions note.

- (1) We will inform the appropriate authorities if the interviewer or project staff think your life or health may be in danger.
- (2) Also, if you have a child whose life or health may be in serious danger, we will contact someone qualified to assist them.
- (3) At some point in the future, a different group of researchers may take over this study. If that happens, with your consent, we would give contacting information for you to the other group.

QUESTIONS

If you have any questions, please call Jennifer Keeney at RTI, 1-800-334-8571 extension 23525 (toll-free number). If you have any questions about your rights as a study participant, please call RTI's Office of Human Research Protections, 1-866-214-2043 (toll-free number).

You will receive a copy of this consent form to keep.

You will receive \$50 in cash in appreciation of you completing the interview. If you skip some of the questions or decide to stop participating, you will still receive the \$50. If you participate in future interviews, we will provide a similar amount in appreciation of your participation in those interviews.

Release Participant Statement and Signature

My signature indicates the interviewer explained the above information to me and I give consent for my interview.

Disposition: Original to RTI; Copy to Respondent, Version 1X, October 2020 G-19

Printed Name of Youth	Fill in Youth Respondent 8-digit ID #	
Signature of Youth	Signature of Interviewer	
Release of Contact Information St I give consent to have my contact in study. Yes		h company if they start doing this
Permission to Contact Caregiver I live with or have lived with a careg to approach my current / most recen Yes	_	e my permission for the interviewer
Audio Recordings Statement	s) system for this study. The system you and I say to each other during	
The recordings are securely stored o interview. They are stored on secure The recordings will be destroyed at	e computers and only members of t	he project team can review them.
Do we have your permission to run	this system during the interview?	
	parts of this interview recorded by	the computer.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-0202, Exp: 09/30/2023. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Dr. Melissa Dolan; 230 W. Monroe Street, Suite 2100 Chicago, IL 60606.

The Federal Government has issued a Certificate of Confidentiality (authorized by the Public Health Service Act Section 301(d), 42 U.S.C Section 241 (d), 1988) to the researchers who are conducting this study which authorizes us to protect the privacy of individuals who participate.

Disposition: Original to RTI; Copy to Respondent, Version 1X, October 2020 G-21

Assent Agreement for Youth Aged 7 to 10

National Survey of Child and Adolescent Well-Being (NSCAW)

Hello, my name is	has given p	permission for you	to talk with me.
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Introduction

We want to tell you about a research study. A research study is a way to learn more about something. We would like to learn about children and families. You can take part or not. Either way is fine. If you join, you can ask questions at any time. Just tell me if you have any questions.

Purpose

The government wants to learn about the needs of children like yourself. They want to improve programs and services for children. We are talking to over 4,500 kids across the United States about this study. We are also talking to one of your parents or the person who takes care of you the most. The government hired a research company in North Carolina to conduct this study. I work for this research company.

Types of Questions

If you join the study, we will ask you questions about the kinds of things you can do and how you behave at home and at school. We will also ask about your feelings towards family and friends. Some other questions are about school and people who may help you. We also ask questions about things that may have happened in your home that scared or hurt you like violence in the home.

Time Involved

Our talk today will last about one hour.

Possible Risks

We ask questions that might make you feel uneasy or sad. You may find some of these questions bring back sad or frightening memories. If you want to stop, then all you have to do is tell me. If you do not want to answer a question, just tell me. If you want to take a break at any time, just let me know.

Possible Benefits

What we learn from this study might help children like you across the U.S.

Payment

When we finish, I will give you a \$10 gift card for taking part. If you skip some of the questions or decide to stop participating, you will receive the gift card.

Privacy

We do many things to make sure your answers stay private. I am going to enter your answers into a laptop computer. We have a paper from the government that promises that we do not have to give your information to anyone. We will not tell anyone your answers unless we are worried about you or someone else's safety. For example, if you tell us you might hurt yourself or someone else we may tell someone. If you tell us someone hurts you, we may tell authorities to keep people safe.

Future Contacts

We will contact you in eighteen months. This is to see if you want to talk to us again. You can decide at that time if you want to talk to us again.

I will give you a copy of this form to keep.

May I t	alk to you and ask you	questions?	
	YOUTH AGREES		
	YOUTH DOES NO	ΓAGREE	
	YOUTH DID NOT	APPEAR TO UNDERSTAND EXP	LANATION
By sign take par	_	s we have discussed the research stud	y. Your signature shows you agree to
Signa	ture of Youth	Signature of Interviewer	Date
what you bosses y purpose listen to	ou and I say to each other will listen to the recordi es only and we keep the	system on the computer. The system rer. You and I will not know when the ongs to make sure I'm doing a good job private. We will destroy the files aftwhen who I am, but will not know who you	computer records what we say. My b. We keep the recordings for those ter this review. Project staff who
	Check one box.		
	Yes, I agree to have	parts of our talk today recorded by	the computer.
	No, I do not want ar	y parts of our talk today recorded.	
infort	mation unless it displ	or sponsor, and a person is not requays a currently valid OMB control ollection are OMB #: 0970-0202,	l number. The OMB number and

regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Dr. Melissa Dolan;230 W. Monroe Street Suite 2100 Chicago, IL 60606.

The Federal Government has issued a Certificate of Confidentiality (authorized by the Public Health Service Act Section 301(d), 42 U.S.C Section 241 (d), 1988) to the researchers who are conducting this study which authorizes us to protect the privacy of individuals who participate.

1Assent Agreement for Youth Aged 11 to 17

National Survey of Child and Adolescent Well-Being (NSCAW)

Hello, my name is	•	has given permission for you to talk with	me
today.			

Introduction

We would like to invite you to join a research study. A research study is a way to find out new information about something. You can take part or not. Either way is fine. Please ask any questions before you decide.

Purpose

The government wants to learn about the needs of children like yourself and to help improve programs and services for children. We are talking to over 4,500 kids across the United States about this study. We are also talking to one of your parents or the person who take cares of you the most. The government hired a research company in North Carolina to do this study of children and families. I work for this research company.

Types of Questions

If you agree to join, we will ask questions about the kinds of things you can do, how you behave at home and at school, how you feel about your family and friends, and about people who may help you. We also want to ask you about things you may do that your parents don't know about or don't like for you to do. This includes things like skipping school, smoking, drinking, vandalism, using drugs, sexual activities, and other risky or illegal behaviors. We also ask questions about things that may have happened in your life like violence in the home. You may find that some of these questions bring back sad or frightening memories.

Time Involved

Our talk today will last around one to one and a half hours.

Possible Risks or Discomforts

We ask questions that might make you feel uneasy or sad. You do not have to answer questions you do not want to answer. If you want to stop, then all you have to do is tell me. If you want to take a break at any time, just tell me.

Possible Benefits

What we learn from this study might help children like you across the U.S.

Payment

When we finish, I will give you a \$20 gift card and a small gift of equal value for taking part. If you skip some of the questions or decide to stop participating, you will still receive the gift card.

Privacy

We do many things to make sure your answers stay private. I am going to enter your answers into a laptop computer. We have a paper from the government that promises that we do not have to give your information to anyone. We will not tell anyone your answers unless we are worried about you or someone else's safety. For example, if you tell us you might hurt yourself or someone else we may tell someone. If you tell us someone hurts you, we may tell authorities to keep people safe.

Future Contacts

Disposition: Original to RTI; Copy to Respondent, Version 1I, October 2020 G-24

We will contact you in eighteen months. This is to see if you want to talk with us again. You can decide at that time if you talk to us again. You will receive a copy of this form to keep.	
May I talk to you and ask you the questions?	
YOUTH AGREES	
YOUTH DOES NOT AGREE	
YOUTH DID NOT APPEAR TO UNDERSTAND EXPLANATION	
By signing this form, this shows we have discussed the research study. Your signature shows you agree take part.	to
Signature of Youth Signature of Interviewer Date	
Audio Recording We use a quality control (QC) system on the computer. The system runs on the computer and may record what you and I say to each other. You and I will not know when the computer records what we say. My bosses will listen to the recordings to monitor my work. We keep the recordings for those purposes only and we keep them private. We destroy the files after this review. Project staff who listen to the recording will know who I am, but will not know who you are. Do we have your okay to run this system during the interview?	, g
Check one box.	
Yes, I agree to have parts of this interview recorded by the computer.	
No, I do not want any parts of this interview recorded.	
An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-0202, Exp: 09/30/2023. Send comments regarding this burden estimate or any other aspect of this collection of information, including	

suggestions for reducing this burden to Dr. Melissa Dolan;230 W. Monroe Street, Suite 2100 *Chicago*, *IL* 60606.

The Federal Government has issued a Certificate of Confidentiality (authorized by the Public Health Service Act Section 301(d), 42 U.S.C Section 241 (d), 1988) to the researchers who are conducting this study which authorizes us to protect the privacy of individuals who participate.

Young Adult Informed Consent

National Survey of Child and Adolescent Well-Being (NSCAW)

NSCAW

The Administration for Children and Families (ACF) provides funding for activities that support the well-being of children and families. ACF hired RTI International (RTI), a research company in North Carolina, to conduct a national survey of children and families in the child welfare system. RTI works with researchers at the University of North Carolina at Chapel Hill and Washington University in St. Louis to carry out the study.

SELECTION OF YOUNG ADULTS

RTI interviewers will contact young adults, like you, selected from child welfare agencies throughout the United States. We selected over 4,500 children to take part in this study. We want to follow up with youth eighteen months after the initial interview to see how things may have changed.

PURPOSE OF THIS NSCAW INTERVIEW

Your interview may last between 60 to 100 minutes. We want to interview you about your life experiences. The questions will focus on your health, employment, relationships, social support systems, behaviors, and use of services. The interviewer will also ask about the community in which you live, and about things that may happen in your life like violence in the home, involvement with the police, and risky behaviors such as sexual activity and drug use. Your answers, combined with the answers of other youth in the study, will help us describe the needs of children and their use of available child welfare services. What we learn from this information will help policy makers make improvements to the child welfare system.

YOUR RIGHTS

You can decide to take part in the study or not. You can refuse to answer any and all questions. Taking part does not affect any benefits you may receive. You have the right to take a break or stop the interview at any time.

RISKS

Taking part in this study presents no physical risks to you. Some questions might make you feel uneasy or feel emotions like sadness. We have significant protections in place to collect and store our information securely. However, there is a small risk that if someone does not follow the rules we set, someone outside the study team might see your information. We minimize this risk by transferring and storing your information and interview data using a study ID and not your name.

BENEFITS

Taking part offers no direct benefits to you for answering our questions. What we learn from you may help to improve child welfare services and programs.

FUTURE CONTACTS

We or other researchers may contact you in the future to ask you to take part in another interview. You can decide to join at that time.

PRIVACY

We keep your responses private to the extent allowed by the law. We keep your interview answers on a secure computer labeled with an ID number. We do not identify you by name. All staff involved in this research have signed a Privacy Pledge.

Disposition: Original to RTI; Copy to Respondent, Version 2YA, October 2020 G-26

This research is covered by a federal protection called a Certificate of Confidentiality. This means the researchers cannot share the information they gather that may identify you. The Certificate prevents researchers from revealing this information even if it is subpoenaed by a court.

However, the Certificate does allow researchers to share information in some situations. For example, researchers must follow reporting laws about child and adult abuse. Also, as a part of agreeing to be in this study, you are giving permission for researchers to share information in the rare circumstance that it is needed to prevent serious risk to yourself or others. In addition, the agency that funds this research (the Administration for Children and Families) is permitted to access information to confirm that the research is being conducted properly.

In the future, information from this study may be securely shared with qualified individuals to help learn more about the experiences of children and families with the child welfare system. The information that is shared will only include a study ID number and not your name.

We never identify a single person or family in our reports. Your information will be combined with information from other people taking part in the study. When we write up the study to share it with other researchers, we will write about the combined information. You will not be identified in any published or presented materials.

Two important exceptions to note.

- (1) We will inform the appropriate authorities if the interviewer or project staff think your life or health may be in danger.
- (2) At some point in the future, a different group of researchers may take over this study. If that happens, with your consent, we would give contacting information for you to the other group.

QUESTIONS

If you have questions, please call Jennifer Keeney at RTI, 1-800-334-8571 Extension 23525 (toll-free number). If you have questions about your rights as a study participant, please call RTI's Office of Human Research Protections at 1-866-214-2043 (a toll-free number).

You will receive a copy of this consent form to keep.

You will receive \$50 in cash for taking part in the survey. If you skip some of the questions or decide to stop participating, you will still receive the \$50.

Research Participant Statement and Signature

The above	information h	as been e	xplained to	me. My	signature	below i	indicates l	give [consent	for my
interview.										

Printed Name of Young Adult	Fill in YA Respondent 8-digit ID#	
Signature of Young Adult	Signature of Interviewer	Date

Release of Contact Information Statement

I give consent to has study. Yes	ave my contact information g	given to another research of Check one box.	company if they start doing this
will make audio re	ality control (QC) system for cordings of what you and I sa e computer records what we	ay to each other during the	on the computer. This system interview. Neither you nor I will listen to the recordings only
interview. They are		and only members of the	to RTI within 12 hours after this project team can review them. een cleaned and analyzed.
Do we have your p Check one box.	ermission to run this system	during the interview?	
Yes,	I agree to have parts of this into	erview recorded by the comp	uter for quality reviews.
No,	I do not want any part of this int	terview recorded.	

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-0202, Exp: 09/30/2023. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Dr. Melissa Dolan; 230 W. Monroe Street, Suite 2100 Chicago, IL 60606. The Federal Government has issued a Certificate of Confidentiality (authorized by the Public Health Service Act Section 301(d), 42 U.S.C Section 241 (d), 1988) to the researchers who are conducting this study which authorizes us to protect the privacy of individuals who participate.