OMB Control No: XXXX-XXXX Expiration Date: xx/xx/xxxx

# Informed Consent Handout for Participation in [PUBLIC-FACING STUDY NAME] Interview

You may remember that a little over a year ago, you agreed to be part of an important study called the [PUBLIC-FACING STUDY NAME]. It is a study of how peer mentors work alongside parents to try to help them reduce stress, achieve substance use recovery goals, and meet the requirements of their child welfare case. A company called Abt Associates runs the study. The Administration for Children and Families in the U.S. Department of Health and Human Services is paying for it.

As part of that study, you are invited to participate in an interview to share your experiences. This handout goes over questions you might have about the interview and answers to those questions. It is important that you read the entire handout. You can also ask any other questions you might have after reading the handout. Then, we will ask you if you agree to do the interview. You can keep a copy of this document.

### Why is the interview being done?

We want to talk with you to help us learn about what it's like for parents like you to be part of [Program Name].

#### What is involved in the interview?

You are being asked to participate in the interview because you have experience with services at [Program Name]. I will ask questions about your experience with the child welfare system, how you started with [Program Name] and what it is like to work with your parent mentor. I will also ask you to fill out a form asking you about your household, gender, age, race/ethnicity, and personal history with foster care. We will use the information on that form to make sure we talk with a variety of people in this program. You can choose not to fill out that form at all, or choose to leave blank any specific questions on that form that you do not want to answer.

The interview will last about 60 minutes. If you are willing to let us audio-record the interview, the interview will be transcribed. Only the research team will hear the recording or see the transcript. If you do not want to be recorded, we can still do the interview without recording. You will receive a \$50 gift card to thank you for your participation today.

#### What are the possible benefits and risks if I agree to participate?

By being in the study, you will help the researchers learn more about how peer mentor programs may help families reduce stress, meet recovery goals, and achieve positive child welfare outcomes. The information learned from the study is intended to improve future services for parents like you.

There is little risk for you to participate in the study. The researchers will keep your information private, as much as the law allows. This means that your child welfare caseworker, your family members, peer mentor, or other service providers will never hear the recording of this interview or see any notes we might take. There is a small risk of a loss of privacy. However, the researchers have many safety measures to prevent this from happening. The recording of this interview will be stored on a secure network that is protected by a very high level of encryption and a password, and your name will not be linked to the recording.

Your name will never be used in any public document or data file created as part of the study. When the researchers write a report, your answers will be combined with answers from all the other parents being interviewed for the study.

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To help us protect your privacy, we have a special certificate called a Certificate of Confidentiality. It add special protection to your information. It says that we do not have to tell anyone who you are or that you are in the study. Even under a court order from a judge, we can say "no" to the request. The only time that we may have to tell someone is if we find out that you or someone else could be hurt or in danger.

#### What about my right to decline participation?

Please know that this is voluntary. You can choose not to answer any question you don't want to answer, or to leave the discussion entirely without any penalty from the research team or your program. If you complete only part of the interview, we may use whatever information was collected from you before that point to better understand the program. Your decision to not participate will not affect your standing at [*Program Name*] or your child welfare case.

## Whom do I call if I have questions?

For questions about the study, contact the researchers at R3Families@abtassoc.com. You can also contact the Abt Associates Study Director at (617) 520-2502 (toll call) or by email at <a href="mailto:R3Families@abtassoc.com">R3Families@abtassoc.com</a>. For questions about your rights as a study participant, contact the Abt Associates Institutional Review Board at 877-520-6835 (toll-free call) or by email at <a href="mailto:IRB@abtassoc.com">IRB@abtassoc.com</a>.