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1. Introduction to Study

You have been selected as a field interviewer (FI) for Wave 2 of the Los Angeles Family and Neighborhood Survey (L.A. FANS-2). The project staff welcomes you to the research team for this important study and hopes that you will find your responsibilities challenging, interesting, and enjoyable. We look forward to working with you and appreciate the commitment and skill you bring to the project.

1.1 Introduction

The Los Angeles Family and Neighborhood Survey (L.A. FANS-2) is a longitudinal (multi-year) study of a broad cross-section of families. Developed to help understand the social ecology and influence of neighborhoods and families on child development, the L.A. FANS-2 study is designed to address three central research questions:

1) **What are the effects of neighborhoods, families, and peers on child development?**
   Neighborhoods and peers may have a substantial effect on children’s and teens’ behavior and health, their attitudes toward education and work, their chances of becoming a teenage parent, and their educational and employment opportunities. Yet evidence about the relative influence of families, neighborhoods, and peers is limited. L.A.FANS-2 traces the neighborhood and family roots of children’s successes and failures in several areas: cognitive development, school performance, behavioral and emotional development, health, youth violence and crime, drug and alcohol abuse, and adolescent pregnancy.

2) **What effects do neighborhoods and local area conditions have on individual responses to welfare?**
   The effects of welfare reform are likely to vary greatly among neighborhoods in Los Angeles County because of availability of employment, transportation, day care, and private social service providers. The response and adaptation of neighborhoods and communities to policy changes may also help determine whether welfare reform is successful. This project is designed to measure over time local-level differences in the response to and effects of welfare reform in Los Angeles County.

3) **What are the determinants and consequences of residential mobility to neighborhoods?**
   Moving from one town or neighborhood to another can be an important means of upward (or downward) social mobility. Residential mobility can also change the character of neighborhoods for those who live there. While general patterns of residential mobility are well known, there is little information about factors behind choices families make about moving or staying, and where to move. Local-level mobility patterns of new immigrant families are another important issue on which there is little information. L.A.FANS provides micro-level data to study residential mobility, neighborhood selections, processes leading to residential segregation, and migration patterns of recent immigrant families.
This information will be used by the federal government to plan policies in education and health reform, by the state government to look at education and health insurance, and by Los Angeles County to evaluate policy that affects communities. In addition, the data will be used by researchers, other states, and other communities to determine how to improve neighborhoods and social services for families and children.

L.A. FANS-2 is being conducted by RTI International (RTI) as a sub-contractor to RAND, a non-profit research organization located in Santa Monica, California and UCLA. Funding for L.A. FANS-2 is provided by the National Institute for Child Health and Human Development (NICHD), the National Institute on Aging (NIA), and the National Institute of Environmental Health Sciences (NIEHS). Dr. Anne Pebley (UCLA) and Dr. Narayan Sastry (RAND) are co-directors for the study.

Baseline data collection activities were conducted from April 2000 through January 2002. The baseline data were collected by RAND’s Survey Research Group and RTI.

1.2 Study Background

To date, L.A. FANS consists of two waves of data collection: Wave 1 in 2000-2002 and Wave 2 in 2006-2008. During Wave 1 approximately 7,600 households were screened across 65 Los Angeles Census tracts and interviews were subsequently conducted with about 3,500 adults and 3,200 children in 3,090 households. Within each household, an adult was randomly selected to be interviewed (RSA). If the household had at least one child age < 18 years of age, one child was also randomly selected to participate (RSC) as was the child’s primary caregiver (PCG). In some households the PCG and the RSA was the same individual, so only one adult was interviewed. If the PCG had other children in the household, one of them also could have been randomly selected to participate (SIB). Whether or not a SIB was chosen depended on whether the RSC and the other child in the household had the same mother. If the PCG had some children in the household, but was not the mother of the RSC, those other children would not have been eligible to be selected as the SIB. In rare instances, another adult in the household was interviewed if neither the RSA nor the PCG were knowledgeable about the overall management of the household. Therefore, each selected household had between one and five respondents.

Wave 1 data collection activities included screening households to determine the RSA, RSC, PCG, and SIB; conducting computer-assisted personal interviews (CAPI) with adults and children 9-17 years of age using a laptop computer; and administering the Woodcock-Johnson Tests of Achievement to children 3-17 years of age and PCGs. An incentive was offered to participating households: $50 for households with children and $25 for households without children. Children ages 9-17 were offered a $10 incentive, and younger children received crayons and a coloring book.

In 2003 RTI conducted an Interim Tracking Survey (ITS) to determine the location of L.A. FANS Wave 1 adults. For this effort, RTI mailed a letter, two-page questionnaire, and postage-paid return envelope to a total of 2,403 Wave 1 RSAs and primary caregivers. RTI attempted to contact non-responders by telephone to complete the questionnaire. The questionnaire collected information on the
participant’s current address, phone number(s), moves since the Wave 1 survey and planned moves, name changes, change in marital status, contact information for the Wave 1 RSC and SIB, and contact information for another person who would know how to reach the participant.

In August 2005 and April 2006, RTI submitted information about L.A.FANS Wave 1 adults to two locator databases to determine participants’ most recent address. RTI will use this information to complete tracking efforts in advance of data collection consisting of mailings to participants to obtain updated or confirm address information, and tracking by RTI in-house tracing specialists. Field staff will be provided the best known contact information for Wave 1 participants as they begin the Wave 2 data collection activities.

1.3 L.A. FANS-2 Pretest

In October to December of 2005 the L.A. FANS-2 pretest was conducted to test and refine the procedures and instruments that will be used for the Wave 2 study. Before Wave 1, a pretest was conducted in three Census tracts in Los Angeles County; adults and children in 104 households participated. The L.A. FANS-2 pretest involved recontacting and interviewing participants from the Wave 1 pretest, and conducting screening and interview activities in the three pretest tracts. Eight field interviewers participated in the pretest, completing interviews with approximately 180 adult and child participants. In addition, health measures were obtained from approximately 160 participants. The data collected in the pretest has been used to evaluate the questionnaires, assessments, and the new health measure component added for Wave 2. In addition, information collected during debriefings with field staff has been used to identify problems and solutions regarding operational aspects of the study design.

1.4 L.A. FANS-2 Main Study

Field data collection entails an in-person interview with the RSA, RSC and SIB who participated in Wave 1 and still lives in Los Angeles County. In addition to interviewing the RSA, RSC, and SIB, an interview may also be conducted with the child’s primary caregiver for children currently under the age of 18. Wave 1 adult participants who have moved outside of Los Angeles County will be interviewed by telephone by telephone interviewers in RTI’s Raleigh, NC Call Center.

In addition to interviewing adults and children who participated in the Wave 1 survey, field interviewers will also screen and interview a sample of new entrants. These new entrants will come from several groups:

- newly sampled addresses;
- people added to the study when all Wave 1 participants have moved away from the Wave 1 address (referred to Wave 1 complete turnover dwellings); and
• individuals now living with Wave 1 participants who were not part of the household during the Wave 1 interview (i.e., have moved in or been born), if the Wave 1 participant is still living in the LAFANS sampling area.

A new component for L.A. FANS-2 is the collection of health measures from adults and children. The health measures include (1) anthropometry to assess growth and obesity; (2) blood pressure measurements to assess hypertension; (3) spirometry measurement of pulmonary function; (4) collection of saliva samples to assess cortisol levels; and (5) collection of dried blood spot samples to assess levels of hemoglobin A1C, C-reactive protein, Epstein-Barr virus antibodies, total cholesterol, and HDL cholesterol.

Field staff will receive training and practice and become proficient in completing anthropometry, blood pressure, and spirometry. Interviewers will train parents to gather saliva samples, and health technicians will conduct a visit to the household to collect blood spots. Health measures for adult participants include anthropometry (height, weight, hip and waist circumference), blood pressure using an auto-inflate device, and spirometry. Health measures for children depend on age. Children age 2 that can stand unassisted will have height and weight measured; children 3 and older will have height and weight measured and their parents will be asked to collect saliva samples; and children 5 and older will also have blood pressure and a spirometry measurement taken. As a final step to the health measures, respondents 3 and older will be invited to participate in the blood spot components and the interviewer will schedule an appointment for a health technician to return to complete a finger stick.

1.5 Organization of the Project Team

1.5.1 RTI International

RTI, working with RAND and UCLA, is responsible for data collection, data processing, and reporting activities for the L.A. FANS-2 data collection. As a not-for-profit research institute, RTI conducts research for national, state, and local government agencies, for public service organizations and trade associations, and for private associations and companies. RTI was incorporated as a separate entity in 1958 by the University of North Carolina at Chapel Hill, Duke University, and North Carolina State University. RTI occupies a 180-acre campus in North Carolina’s Research Triangle Park, an area located near the center of a geographic triangle formed by Raleigh, Durham, and Chapel Hill.

RTI employs a full-time staff of over 2,500 individuals. These professional and support staff work in a wide range of areas, including survey research, epidemiology, statistics, psychology, health care research, computer science, drug abuse, health policy and economics, education, and chemistry and life sciences. RTI maintains extensive computer facilities and units that provide data preparation, data entry, document control, and telephone survey services. The institute also operates field offices for specific projects and employs field staff from all over the United States. These capabilities combine to make RTI a
recognized leader in survey and health research. A copy of RTI’s mission statement is shown in Exhibit 1-1.

1.5.2 RAND Corporation and UCLA

The RAND Corporation is a nonprofit organization providing objective analysis and effective solutions that address the challenges facing the public and private sectors around the world. For more than 50 years, the RAND Corporation has been conducting research and providing analysis to address challenges that face the United States and the world. RAND employs more than 1,600 individuals with varied work experience and academic training.

The University of California, Los Angeles (UCLA) School of Public Health is one of the top schools of public health in the country. The School has 200 faculty members (80 full-time), 700 graduate students, and 200 staff. The School’s location in Los Angeles, the most diverse county in the country, provides a unique setting with unparalleled opportunities for research, teaching, and service.

1.5.3 Configuration of the Field Staff

You are one of approximately 50 Field Interviewers (FIs) conducting interviews for L.A. FANS-2. You will be supervised by a Field Supervisor (FS) who reports to a Field Manager (FM) Maria DiGregorio, who reports to Frank Mierzwa, the Deputy Project Director and Data Collection Task Leader. Mr. Mierzwa and Katherine Mason, the Data Processing Task Leader, report to Ellen Marks who is the Project Director. All FIs are employees of Headway Corporate Staffing Services, a sub-contractor to RTI. A chart illustrating the management structure is included as Exhibit 1-2. There are two ways to interpret this chart: as presented, the flow from top to bottom illustrates the established chain of command for overall direction of the project. When viewed from bottom to top, you will see the flow of actual information through you from the respondents, which is the all-important data we seek. You, as an interviewer, are the direct and vital link in the flow of information. Please know that your efforts are critical to the success of the study and very much appreciated!
RTI Mission Statement

To improve the human condition through objective, innovative, multidisciplinary research, development and technical services, setting the standard for scientific and professional excellence.

Vision

To become the world’s premier independent research institute, recognized as the best in all that we do.

Values

Integrity – We perform with the highest principles of individual and group integrity and honesty. We communicate openly, sensitively, and realistically with each other and with our clients.

Excellence – We conduct our research, administrative, and support activities with excellence as a fundamental goal, providing our customers with exceptional value and delivering on our promises.

Innovation – We encourage the independent thinking and entrepreneurship of our staff. We employ the team approach to foster a vision for the future and we utilize multidisciplinary collaboration to produce innovative approaches to meet the requirements of our clients.

Respect for the Individual – We treat one another fairly, with dignity and equity, and maintain a work environment that motivates each of us to develop to our full potential.

Fiscal Responsibility – We operate with the fiscal responsibility that ensures cost competitiveness and continuing financial strength.

Respect for RTI – We recognize that the strength of RTI is a collective commitment to our values, goals, and practices.
1.6 Data Collection Schedule for Wave 2

Exhibit 1-3 shows the schedule for the data collection work for L.A. FANS-2. You will begin work immediately after successfully completing the field interviewer training.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wave 2 Field Work Training</td>
<td>August 2006</td>
</tr>
<tr>
<td>Wave 2 Field Data Collection</td>
<td>August 2006—July 2008</td>
</tr>
</tbody>
</table>

1.7 Project Abbreviations

In this manual and other project materials, many abbreviations are used to simplify text. A list of these abbreviations is provided in Exhibit 1-4. Definitions of some of the terms on the list are provided in Section 1.8.
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAI</td>
<td>Computer-Assisted Interviewing</td>
</tr>
<tr>
<td>CAPI</td>
<td>Computer-Assisted Personal Interviewing</td>
</tr>
<tr>
<td>Case ID</td>
<td>Case Identification Number</td>
</tr>
<tr>
<td>CMS</td>
<td>Case Management System</td>
</tr>
<tr>
<td>DHHS</td>
<td>U.S. Department of Health and Human Services</td>
</tr>
<tr>
<td>DU</td>
<td>Dwelling Unit</td>
</tr>
<tr>
<td>EHC</td>
<td>Event History Calendar</td>
</tr>
<tr>
<td>EM</td>
<td>Emancipated Minor</td>
</tr>
<tr>
<td>FI</td>
<td>Field Interviewer</td>
</tr>
<tr>
<td>FS</td>
<td>Field Supervisor</td>
</tr>
<tr>
<td>HH</td>
<td>Household</td>
</tr>
<tr>
<td>HHH</td>
<td>Head of Household</td>
</tr>
<tr>
<td>INS</td>
<td>Immigration and Naturalization Services</td>
</tr>
<tr>
<td>L.A. FANS</td>
<td>Los Angeles Family and Neighborhood Survey</td>
</tr>
<tr>
<td>NE</td>
<td>New Entrant</td>
</tr>
<tr>
<td>NICHD</td>
<td>National Institute for Child Health and Human</td>
</tr>
<tr>
<td>Development</td>
<td></td>
</tr>
<tr>
<td>NIH</td>
<td>National Institute of Health</td>
</tr>
<tr>
<td>PCG</td>
<td>Primary Caregiver</td>
</tr>
<tr>
<td>ePT&amp;E</td>
<td>Electronic Production, Time, and Expense Report</td>
</tr>
<tr>
<td>Q&amp;A</td>
<td>Question and Answer Brochure</td>
</tr>
<tr>
<td>Quex</td>
<td>Questionnaire</td>
</tr>
<tr>
<td>R</td>
<td>Respondent</td>
</tr>
<tr>
<td>RR</td>
<td>Rostering Respondent</td>
</tr>
<tr>
<td>RAND</td>
<td>RAND Corporation</td>
</tr>
<tr>
<td>ROC</td>
<td>Record of Calls</td>
</tr>
<tr>
<td>RS</td>
<td>Regional Supervisor</td>
</tr>
<tr>
<td>RSA</td>
<td>Randomly Selected Adult</td>
</tr>
<tr>
<td>RSC</td>
<td>Randomly Selected Child</td>
</tr>
<tr>
<td>RTI</td>
<td>RTI International</td>
</tr>
<tr>
<td>SAQ</td>
<td>Self-Administered Questionnaire</td>
</tr>
<tr>
<td>SIB</td>
<td>Sibling</td>
</tr>
<tr>
<td>SR</td>
<td>Screening Respondent</td>
</tr>
<tr>
<td>UCLA</td>
<td>University of California Los Angeles</td>
</tr>
</tbody>
</table>
1.8 Terminology

Some terms used throughout this manual have exact meanings or refer to specific project forms or materials. These are listed below.

**Blaise** – the computer software program used in administering interviews. The FI reads the question displayed on the computer screen to the respondent then enters the response directly into the computer.

**Case Identification Number (Case ID)** – an eight-digit code that uniquely identifies a dwelling unit selected for the study.

**Case Management** – a broad term used to describe the process of organizing, keeping track of, and completing your work in a timely fashion.

**Case Management System (CMS)** – a computer software program developed by RTI programmers for managing questionnaire data on the laptop computer.

**Computer-Assisted Interviewing (CAI)** – a generic term used to indicate that a computer is used during the interview.

**Computer-Assisted Personal Interviewing (CAPI)** – type of computer-assisted interview where the FI reads questions displayed on a computer screen to the respondent, then enters the response directly into the computer.

**Consent / Informed Consent** – agreement to participate in a research study given by an adult or by a parent or guardian for his/her child. Giving consent indicates that he/she understands the meaning of, and has agreed to participate in, the study. The consent process used in any research project must be approved by a Human Subjects Committee or Institutional Review Board. When interviewing a minor, you must have parental consent unless the youth is an emancipated minor (EM) (see definition).

**Dwelling Unit (DU)** – a general term referring to a place where a person or persons could reside. In L.A. FANS, used interchangeably with “household.”

**Eligible** – a term indicating that the household has been selected to participate in the study, although the specific individual(s) selected has not yet been determined.

**Emancipated Minor (EM)** – a person under the age of 18 living on his/her own—that is, not as a dependent of parents or a guardian—who has been selected to complete an interview.

**Event History Calendar (EHC)** – a Windows-based computer software program developed by programmers at the University of Michigan. Used in L.A. FANS for collecting chronological data on overlapping and related topics covering a specific time frame.

**Half the Time** – spending the night in a household on average either four nights a week or 15 nights during a month.
Head of Household (HHH) – the person or one of the persons in whose name the home is owned or rented.

Household – a term referring to a place where a person or persons could reside. In L.A. FANS, used interchangeably with “dwelling unit.”

Household Other – an adult household member selected to complete an interview who is neither an RSA nor a PCG (see definitions).

Lead Letter – an introductory letter you send to each dwelling unit explaining that a Field Interviewer will contact the residents. A very brief overview of the study is included in the letter.

New Entrant – new families who moved into existing selected DUs, families who have moved into DUs newly constructed since the end of Wave 1 data collection and individuals who have moved in with families previously selected in Wave 1 and still living in the LAFANS sample area.

Nonrespondent – a person who is eligible and selected for the study but who chooses not to participate.

Primary Caregiver (PCG) – the adult who has primary responsibility for the care of the Randomly Selected Child (RSC) (see definition) and who lives in the household at least half time. Generally, the mother of the RSC.

Electronic Production, Time and Expense (ePT&E) – used by interviewers to maintain an accurate record of daily production, time and expenses while working on this study. Payment for hours worked and reimbursement of expenses are based on the documentation submitted.

Randomly Selected Adult (RSA) – an adult residing in the household at least half the time who is selected for the study.

Randomly Selected Child (RSC) – a child age 17 or younger residing in the household at least half the time that is selected for the study.

Record of Calls (ROC) – where FIs record details—including date and time, the result code, and any important comments—about each and every visit to a HH. These details are first recorded on a paper ROC included with the Screening form or Household Summary Form, then transferred into the Case Management System on the computer.

Respondent – a person who is eligible and selected for the study and who agrees to participate.

1.9 Use of Manual

This manual provides a detailed description of the tasks you will be required to complete for the L.A. FANS-2 study. In addition, you will also receive a second manual, the Field Interviewer Computer Manual, which will provide you with information necessary for using the computer on L.A. FANS-2. Adherence to prescribed procedures and duties is of paramount importance to the success of the study.
The manual should be carefully studied before you attend training, as you prepare for fieldwork, and referenced throughout data collection.

At times, you may have questions or encounter field situations for which you do not find an answer in this manual. When in doubt about any field situation, you should first attempt to contact your supervisor. Telephone numbers for your supervisor and other project staff at RTI, including computer support personnel and their telephone numbers are listed in Exhibit 1-5. You may contact them for assistance as instructed by your supervisor.
### Exhibit 1-5 — Project Staff Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone No.</th>
<th>Fax</th>
<th>E-Mail</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FIELD MANAGER</strong></td>
<td></td>
<td></td>
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<tr>
<td>DiGregorio, Maria</td>
<td></td>
<td></td>
<td></td>
<td>California</td>
</tr>
<tr>
<td><strong>FIELD SUPERVISORS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chaparro, Maria</td>
<td></td>
<td></td>
<td></td>
<td>Texas</td>
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<tr>
<td>Marre, Madeleine</td>
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<td>California</td>
</tr>
<tr>
<td>Morgan, Annette</td>
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</tr>
<tr>
<td>Sumner, Darlene</td>
<td></td>
<td></td>
<td></td>
<td>California</td>
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<tr>
<td><strong>OTHER PROJECT STAFF</strong></td>
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<tr>
<td>Mierzwa, Frank</td>
<td></td>
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<td>RTI-RTP</td>
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<tr>
<td><em>Data Collection Task Leader and Deputy Project Director</em></td>
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<td>Coombs, Derek</td>
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<td><em>Health Measures</em></td>
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<td>Mason, Kathy</td>
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<td><em>Programming and Computing Task Leader</em></td>
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<td>Marks, Ellen</td>
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<tr>
<td><strong>COMPUTER STAFF</strong></td>
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</tr>
<tr>
<td>Technical Support Staff</td>
<td></td>
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<td>RTI-RTP</td>
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<tr>
<td><strong>HEADWAY</strong></td>
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<tr>
<td>Headway Representative</td>
<td></td>
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<td></td>
<td>RTI-RTP</td>
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<tr>
<td><strong>FIELD SERVICES UNIT</strong></td>
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<tr>
<td>McComas, Saralee</td>
<td></td>
<td></td>
<td></td>
<td>RTI-RTP</td>
</tr>
</tbody>
</table>
2. Your Job as a Field Interviewer

2.1. Introduction

Many factors make an L.A. FANS-2 field interviewer successful. The best field interviewers are quick, efficient, and cost-effective while maintaining high data quality and response rates. The key is to combine your knowledge of the L.A. FANS-2 protocols and procedures with your natural talents, creativity, and social skills. Some general guidelines to follow are:

• know the study;
• be convinced of the importance of the survey;
• follow all procedures and instructions carefully;
• listen and reply to respondents’ needs and concerns; and
• maintain open communication with your supervisor.

Other skills crucial to success are timeliness, organization, attention to detail, neatness, professionalism, and persuasiveness.

This chapter provides a general overview of your assignment for L.A. FANS-2 in preparation for more detailed material in subsequent chapters. Topics covered here include the general responsibilities you will have, materials you will use, confidentiality, professional ethics and respondents’ rights, adherence to procedures, and performance expectations.

2.2. Field Interviewer Responsibilities

Exhibit 2-1 provides a Field Interviewer general job description. A L.A. FANS-2 project specific job description is provided in Exhibit 2-2. Your job responsibilities are described in detail in later chapters of this manual. A summary of these responsibilities follows.

• Read this manual carefully and complete the home study exercises before training.
• Successfully complete the FI training session.
• Maintain the confidentiality of all survey data and materials at all times.
• Collect household roster information for Wave 1 participants.
• Screen new entrant DUs and collect household roster information at eligible DUs.
• Conduct interviews and assessments with selected respondent(s); as needed, schedule interviews at DUs with selected respondent(s).
• Maintain daily records of your data collection activities.
• Transmit information to RTI International (RTI) at the end of each work day.
Exhibit 2-1 —Field Interviewer General Job Description

POSITION DESCRIPTION:
The Field Interviewer (FI) conducts field work for survey research projects conducted by RTI. FIs prepare for and conduct data collection operations according to project protocols. FIs ensure that field data collection activities are carried out efficiently and cost effectively, that collected data are of the highest quality, and that all activities are conducted in a professional manner following established procedures.

QUALIFICATIONS:
• Available for entire training and data collection period.
• Able to successfully complete training.
• Have reliable personal automobile available for business use.
• Must be willing to work evenings and weekends on a weekly and regular basis.
• Able to keep project information confidential.

MAJOR REQUIREMENTS:
• Successful experience with field interviewing activities.
• Demonstrate the ability to work with supervisor and complete assignments on schedule.
• Use maps to locate sample units.
• Obtain cooperation of survey respondents by effectively answering questions and addressing concerns.
• Conduct personal interviews following prescribed protocols.
• Accurately complete all project documents including electronic survey instruments, and all reporting forms.
• Adhere strictly to project deadlines for completing interviews, reporting progress, and returning materials and equipment.
• Maintain accurate, up-to-date records of progress in the field.
• Submit timely and accurate reports.
• Maintain a professional, cooperative relationship with supervisor and other project staff, objectively sharing thoughts while displaying an understanding of project management's concerns.
• Be receptive—not defensive—when given feedback from project personnel about performance, striving to learn and improve.
• Keep supervisor informed of problem areas that might affect progress.

PHYSICAL DEMANDS:
• Travel frequently to respondent locations.
• Be outside and exposed to all types of weather.
• Be exposed to fumes and odors as might be expected in any outdoor environment.
• Stand, walk, and climb stairs.
• Communicate through speech and listening.
• May be required to lift and transport equipment and materials such as laptop computers and notebooks weighing 20 pounds or more.
FIELD INTERVIEWERS (FI) FOR L.A. FANS-2 WILL BE RESPONSIBLE FOR:

- Professionalism and effectiveness in introducing yourself and the L.A. FANS-2 study in completing locating and contacting activities.

- Proper administration of screening, rostering, and interviewing at selected households and with selected household members including adults, and children 9 years and older.

- Conducting intensive field locating activities for individual panel members or entire panel households who have moved within Los Angeles County. Gathering information about panel members or households who have moved outside of Los Angeles County.

- Conducting a CAPI interview with various household members.

- Administering the Woodcock-Johnson assessment of reading and comprehension to adults and children.

- Providing accurate instructions to respondents who will collect and ship saliva samples from children on prescribed days after the completion of the interview.

- Conducting health measures of adults and children including height, weight, hip and waist measurements, blood pressure, and lung capacity.

- Completing a follow-up call with participants who have a blood pressure alert value.

- Maintain complete and accurate paperwork within assigned case folders, including detailed records of data collection activities by updating event codes on paper forms and electronically in the case management system.

- FedEx case materials on a regular basis as required by study protocol.

TRAINING REQUIREMENTS FOR FIs:

- Attend and successfully complete an FI project training session scheduled to last 13 days. Additionally, participate in on-the-job training with a mentor or FS, as needed.

- Bilingual Spanish-speaking interviewers will be required to attend an additional day of training.

- Read project manuals and successfully complete the Project Home Study and the Human Subjects Home Study prior to training.

- Participate in the training consisting of contacting and locating procedures, CAPI interviewing, administering the Woodcock-Johnson assessment, and conducting the health measurements.

- Participate in roles as an interviewer and a respondent during exercises, which will include the health measures.
Exhibit 2-2 — L.A. FANS-2 Field Interviewer Job Description (continued)

- Successfully complete certification showing the ability to accurately administer the Event History Calendar, the Woodcock-Johnson, and the health measures.

REQUIREMENTS FOR SCREENING/INTERVIEWING ACTIVITY:
- Available for approximately 20 hours per week to conduct locating, contacting, screening, interviewing, assessments, and health measures during the data collection period, approximately August 2006 – July 2008. Individual size and length of assignments will vary based on geographic location and availability of work.
- Available and willing to work day, evening and weekend hours as required by the specific assignment.
- Must be comfortable interacting with children.
- Perform field work according to expectations defined in the general FI Job Description (Major Requirements).
- Available for observations by a member of the L.A. FANS-2 management staff.
- Prompt, reliable, and accurate reporting to FS.
- Must have regular access to an analog phone line for data transmissions. At the end of each day worked, must transmit completed interviews and the current status code of each case in progress.
- Must have reliable transportation.
- Assume responsibility for and carefully track all money used for cash incentive payments.
- Maintain respondent confidentiality and safeguard all study documents at all times. Set aside space in the home in a locked cabinet that is inaccessible to other household members, where potentially confidential study materials can be stored when not in use.
- Follow all study procedures as written in manuals or as instructed during training.
- Meet or exceed project cost and efficiency targets, and quality standards.
- Available for possible overnight travel to remote areas of Los Angeles County if requested by Field Supervisor.
- Assume full and legal responsibility for use and care of computers, Woodcock-Johnson booklets, and all health equipment. Must take reasonable and appropriate steps to safeguard them against damage, loss, or theft, and return all equipment at the conclusion of the L.A. FANS-2 assignment or at the request of the supervisor.
- Complete and submit weekly ePTE reports and other administrative forms in a timely manner and according to prescribed procedures.
- Meet or exceed project efficiency targets and quality standards.
2.3. Professional Ethics and Respondent Rights

Ethics can be broadly defined as a set of moral values or principles of conduct governing an individual or group. Organizations must show their clients, employees, and the public a prevailing sense of integrity, honesty, and responsibility in all aspects of work.

All survey research RTI conducts is based on the highest ethical standards. Field interviewers are expected to maintain the same professional ethics all RTI researchers do. These standards are taken very seriously. RTI’s professional reputation depends upon all employees making the commitment to ethical standards a high priority.

As part of adherence to professional ethics, all RTI personnel must protect the rights of survey respondents. These rights include:

- **Right of Informed Consent** – This refers to the legal requirement that respondents be given complete and accurate information so they can make an informed decision about their participation in the survey. To ensure that all RTI studies meet the legal and ethical requirements of informed consent, all projects involving human participants must be approved by our Office of Research Protection, which serves as RTI’s Institutional Review Board (IRB) under federal regulations. This committee looks very closely at written scripts and forms to be sure that the respondents are being properly informed.

- **Right to Refuse** – This refers to an individual’s right to decline to participate in the study or to refuse to answer individual questions once an interview has begun.

- **Right of Privacy** – This right is guaranteed by the Federal Privacy Act of 1974, which prohibits the release of data gathered by or for a federal agency without the written consent of the respondent. Fines and penalties apply to individuals or organizations that violate this law. You can explain this to a respondent when trying to gain his or her trust.

- **Right to Accurate Representation** – This requires honesty in dealing with respondents and answering their questions about the survey. For example, you cannot tell the respondent that an interview will take only a few minutes if you know it will last about an hour.

All staff involved in collecting, processing, and analyzing survey data must be continually aware of the important responsibility to safeguard the rights of the survey participants. As a field interviewer on L.A. FANS-2, you will be trained on the protection of human participants before you begin data collection. Since field interviewers are in direct contact with these respondents, you must demonstrate high ethical standards in all project contacts.
2.4. Importance of Confidentiality

Much of the data collected during the L.A. FANS-2 interviews are sensitive, and you must always be aware of that fact. You must be sure to ask all questions and record all responses in a completely objective and non-judgmental manner. You also must treat as confidential any and all information you learn about respondents, whether directly from a response you receive or simply through casual observations before, during or after your visit. You must not discuss the details of a specific case with anyone outside the project research team, including your spouse/partner, friends, or other family members.

Respondents should be reassured that any potentially identifying data, such as their names and addresses, are never made available to anyone outside the project staff. Additionally, their individual responses are presented only in the aggregate (that is, combined with responses from other participants). The confidentiality of all responses to the questions is protected under federal law (the federal Privacy Act of 1974 and Section 501 of the Public Health Service Act). All answers are only used for research and analysis and cannot be used for any other purpose. The L.A. FANS-2 project has obtained a Confidentiality Certificate (shown in Exhibit 2-3) from the U.S. Department of Health and Human Services. This certificate means that L.A.FANS will protect participant identities and the information they provide. You will be provided a copy of the certificate that you can show participants when conducting fieldwork.

All field interviewers must sign an L.A. FANS-2 Confidentiality Agreement (shown in Exhibit 2-4) at training. By signing, you will be entering into a contractual agreement that you will, as discussed above, keep confidential all data you collect.

2.5. Adherence to Procedures

At training, you will also be asked to sign a Headway Data Collection Agreement (shown in Exhibits 2-5). By signing, you are entering into a contractual agreement that you will keep confidential all data you collect. It also certifies that you will carry out all project procedures precisely as they are presented in this manual and at training. It is very important that you understand and agree to this policy and understand that failure to comply could result in the termination of your employment with Headway Corporate Staffing Services as an FI on L.A. FANS-2. If you have any questions regarding this policy, discuss them with your supervisor before making arrangements to attend training.
CONFIDENTIALITY CERTIFICATE
MH-NICHD–99-08

issued to
RAND

conducting research known as

“Los Angeles Study of Families and Communities”

In accordance with regulations at 42 CFR Part 2a, this Certificate is issued in response to the request of the Principal Investigator, Anne R. Pebley, Ph.D., to protect the privacy of research subjects by withholding their identities from all persons not connected with this research. Dr. Pebley is primarily responsible for the conduct of this research which is funded by National Institute of Child Health and Human Development.

Under the authority vested in the Secretary of Health and Human Services by section 301(d) of the Public Health Service Act 42 U.S.C. 241(d), all persons who:

1. are enrolled in, employed by, or associated with the RAND organization and its contractors or cooperating agencies, and

2. have in the course of their employment or association access to information which would identify individuals who are the subjects of the research on mental health pertaining to the project known as “Los Angeles Survey of Families and Communities”,

are hereby authorized to protect the privacy of the individuals who are the subjects of that research by withholding their names and other identifying characteristics from all persons not connected with the conduct of that research.

This is a population-based longitudinal survey focused on the effects of neighborhood and family environment on children’s well-being. The main objective of the project is to produce a public use data set for the research community. Approximately 3,800 households will be included in the sample, with interviews of approximately 5,000 adults and 5,000 children. Children ages 3 to 17 will complete cognitive assessments. Children ages 9 to 17 will also complete a brief self-administered questionnaire.

A Certificate of Confidentiality is needed because researchers will obtain sensitive information on use of illegal substances, illegal use of firearms and other illegal activities, teenage pregnancy, behavior problems and other sensitive matters. The certificate will help researchers avoid involuntary disclosures which could expose subjects, and their families, to adverse economic, legal, psychological and social consequences.
Page 2—Confidentiality Certificate

All subjects will be assigned a coded number and identifying information and records will be kept in locked files.

This research begins July 15, 1999 and will end November 30, 2004.

As provided in section 301(d) of the Public Health Service Act 42 U.S.C. 241(d):

"Persons so authorized to protect the privacy of such individuals may not be compelled in any Federal, State, or local civil, criminal, administrative, legislative, or other proceedings to identify such individuals."

This Certificate does not govern the voluntary disclosure of identifying characteristics of research subjects but only protects subjects from compelled disclosure of identifying characteristics. Researchers are therefore not prevented from the voluntary disclosure of such matters as child abuse or a subject's threatened violence to self or others; however, the consent form should indicate clearly a researcher's intention to make any such voluntary disclosure.

This Certificate does not represent an endorsement of the research project by the Department of Health and Human Services. This Certificate is now in effect and will expire on November 30, 2004. The protection afforded by this Confidentiality Certificate is permanent with respect to subjects who participate in the research during the time the Certificate is in effect.

July 14, 1999

William T. Fitzsimmons
Executive Officer
National Institute of Mental Health
DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

National Institutes of Health
Dwight D. Eisenhower Institute
Bethesda, Maryland 20892

December 7, 2004

Larry E. Fetey, Ph.D.
H. Potter Professor of Population Studies
University of California at Los Angeles
School of Public Health & Department of Sociology
Zimbal 33-257, M/C 17721
PO Box 692172
Los Angeles, CA 90025

Dear Larry:

Ref: MIL-85KB-50-08

This letter announces the Confidentiality Certificate pertaining to the identity of any and all subjects in your project entitled, "Los Angeles Study of Purposes and Community," to expire on the expiration date of July 31, 2003. This will allow the investigator to complete the research.

We ask that you attach this amendment to your copy of the original certificate.

If you determine that the research project will not be completed by the new expiration date, July 31, 2003, you must submit a request for an extension of the expiration date to the regional office. Any such request must include the justification for the extension, documentation of the research conducted, and the expected date for completion of the research project.

Correspondence should be sent to:

Cherlene Cast, M.D.
Special Assistant for Clinical Research
National Institute of Child Health and Human Development
4100 Executive Boulevard, Room 4401S, MSC 7510
Bethesda, MD 20892-7510
Telephone: (301) 496-3876
Fax: (301) 496-4030

Sincerely,

[Signature]

Cherlene Cast, M.D.
Los Angeles Family and Neighborhood Study (L.A. FANS)
HEADWAY SERVICES STAFF CONFIDENTIALITY AGREEMENT

Assurance of Confidentiality

Research Triangle Institute (RTI) assures each respondent that the confidentiality of responses to this information request will be maintained by RTI and that no information obtained in the course of this activity will be disclosed in a manner in which the particular individual supplying the information or described in it is identifiable, unless such individual has consented to such disclosure, to anyone other than authorized project staff of the Los Angeles Family and Neighborhood Study.

Agreement

I have carefully read and I understand the assurance of confidentiality that pertains to the confidential nature of all records to be handled in regard to this survey. As an employee of HEADWAY STAFFING SERVICES, INC., I understand that I am prohibited by law from disclosing any confidential information obtained under the terms of this contract to anyone other than authorized project staff of the Los Angeles Family and Neighborhood Study.

I further understand and agree to comply with the following:

1. I agree to provide field data collection services for the benefit of Research Triangle Institute (RTI) in connection with the Los Angeles Family and Neighborhood Study. I hereby accept all duties and responsibilities of performing specified data collection tasks, and I will personally perform such tasks in accordance with the training, guidelines, and specifications provided to me.

2. I agree to treat as confidential all information obtained in any project-related manner. This includes information obtained from or about any persons eligible for interview, and anyone else I may come into contact with in connection with this survey. I agree not to discuss any aspect of any case with anyone other than authorized project staff. I further agree that this covenant of confidentiality shall survive the termination of this agreement.

3. I agree to treat as confidential and proprietary to RTI any and all survey instruments, materials, and documentation provided or accessed during the course of my service on this project. I agree not to copy or duplicate any project materials without written permission from RTI. I agree to safeguard all project materials and to exercise extreme care to protect them from access by unauthorized persons.

4. I agree to conduct myself at all times in a manner that will obtain the respect and confidence of all sample members, and other persons with whom I may come into contact with in connection with this survey.

5. I agree not to willfully endanger or abuse equipment assigned to me and to return such equipment when requested to do so by RTI.

6. I agree to report any breach of confidentiality to my RTI supervisor immediately.

Name (Print)

Signature

Date

Disposition: Original to Project File (Frans Mierzwa); Copy to Employee

Revised: April 2005
HEADWAY
CORPORATE STAFFING SERVICES

DATA COLLECTION AGREEMENT

Project Name: Los Angeles Family and Neighborhood Survey (L.A. FANS-2)

Project No.: 09360.200.003

I, _______________________, an employee of Headway Corporate Staffing Services, agree to provide field data collection services for the benefit of RTI in connection with the RTI Project shown above. Further, I

a) am aware that the research being conducted by RTI is being performed under contractual arrangement with RAND Corporation;

b) hereby accept all duties and responsibilities of performing specified data collection tasks and will do so personally in accordance with the training and guidelines provided to me. At no time will I engage the services of another person for the purpose of performing any data collection tasks for me without the prior written approval of RTI;

c) agree to treat as confidential all information secured during interviews or obtained in any project-related way during the period I am providing services to RTI;

d) agree to treat as confidential and proprietary to RTI any and all survey instruments, materials, and documentation provided or accessed during the course of my service on this project;

e) am aware that the survey instruments completed form the basis from which all the analysis will be drawn, and therefore, agree that all work for which I submit invoices will be of high quality and performed in compliance with all project specifications;

f) understand that I am fully and legally responsible for taking reasonable and appropriate steps to ensure that any computer equipment issued to me for use on this project is safeguarded against damage, loss or theft. I also understand that I have a legal obligation to immediately return all equipment at the conclusion of this project or at the request of my supervisor;

g) fully agree to conduct myself at all times in a manner that will obtain the respect and confidence of all individuals from whom data will be collected and I will not betray this confidence by divulging information obtained to anyone other than authorized representatives of RTI;

h) understand that evidence of falsification or fabrication of interview results will be reported to RTI's Scientific Integrity Committee, and that falsification of results is grounds for termination of employment. If these charges are substantiated, in certain circumstances RTI will have to forward this information to government agencies, and as a result it is possible that I could be suspended from participating as an interviewer in government funded research for some period of time; and

i) understand that my obligations under this agreement will survive the termination of any assignment with RTI and/or my employment by Headway Corporate Staffing Services.

Employee’s Signature

Date

Disposition: Original to RTI, Yellow to Headway Corporate Staffing, Pink retained by employee.
2.6. Performance Expectations

The data collection effort is vitally important to the success of any research study. Data collection procedures are standardized to maximize the quality of the data. We are depending on you to follow the procedures described in this manual.

It is equally important to conduct data collection activities efficiently to ensure that the study is completed within budget and schedule requirements. The time and mileage spent in traveling to and from respondents’ homes and other interview sites are major costs in any field survey. Keep travel to a minimum by carefully planning your route and the order in which you conduct your work. Interviewers are expected to:

- Work a minimum of 20 hours per week; and
- For each day worked, work a minimum of 4 hours of “productive” time, which excludes travel time.

Another time saver (and one that elicits optimal cooperation from selected respondents) is conducting activities efficiently while at the interview site. If you are thoroughly familiar with the study forms and procedures, you can complete your activities quickly without sacrificing accuracy. Be prepared, have the necessary forms and materials, and be organized. You must also be very comfortable explaining the purpose of the study and how the information gathered will be used. The criteria used to rate an FI’s performance are presented in Exhibit 2-6.

Use your field supervisor as a resource to discuss unusual situations, review standardized procedures, or to answer questions about any aspect of the study. This will ensure that the study is being conducted in the same way by all interviewers. Notify your supervisor about any unusual events such as dog bite, injuries, or accidents.
Exhibit 2-6 — Field Interviewer Performance Criteria

Knowledge of Data Collection Techniques – Masters information and skills concerning work duties an individual should know for satisfactory job performance. Performs professional work in a versatile and creative manner.

Adherence to Deadlines – Consistently meets deadlines set for production and for submission of administrative forms.

Response Rates – Maintains satisfactory response rates as defined by project expectations with consideration given to unusual circumstances beyond the control of the field interviewer.

Communication – Keeps supervisor adequately informed of progress and problems. Communicates effectively orally and in writing.

Productivity – Completes expected quantities of work. Plans and organizes workload effectively.

Quality of Work – Submits completed work that is accurate, with a minimum number of errors.

Dependability – Ability to do required job skills well with minimum supervision. Consistently works the expected number of hours and keeps appointments for conference calls and interviews. Has the ability to adapt to unanticipated changes in procedures or assignments.

Conversion Skills – Demonstrates satisfactory skills in converting hesitant and uncooperative respondents.

Judgment – Makes sound decisions in terms of weighing facts, past practice, and theory where applicable, especially in the absence of detailed instructions or in unanticipated situations.

Cost-Efficiency – Completes assignments efficiently to keep field costs, wages, and expenses to a minimum. Note: This criterion will be evaluated considering unusual field circumstances beyond the field interviewer’s control.
3. L.A. FANS-2 Sample

3.1. Introduction

With any scientific survey, many components contribute to the success of the research. This is very true for the L.A. FANS-2. As a professional field interviewer, you are directly responsible for one of the most important aspects of the study: ensuring that the interview is administered to the proper people according to project-specific and generally accepted survey procedures. This chapter focuses on the composition of Wave 2 respondents which include panel respondents from Wave 1 and “new entrants” who will be selected using specific criteria.

3.2. Composition of Wave 2 Respondents

During data collection for L.A. FANS-2 you will encounter two types of cases. The first are panel cases in which the respondent(s) participated in Wave 1. These respondents were randomly selected from 65 Census tracts in Los Angeles County. The second are new entrant cases.

The new entrant sample is important. Allowing new entrants to be rostered and screened will help obtain a representative cross-sectional sample of each tract at Wave 2, which is essential to understanding the process of neighborhood change. All Wave 2 new entrants have the same probability of being selected to participate as those selected for Wave 1. Since the probability of selection is consistent between the waves, neighborhood effects can be estimated with the same precision using Wave 2 data as with Wave 1 data.

3.2.1. Wave 1 Panel Respondents

During Wave 1 approximately 7,600 households were screened in 65 Los Angeles Census tracts. Interviews were subsequently conducted with about 3,500 adults and 3,200 children in 3,090 households. Within each household, an adult was randomly selected to be interviewed (RSA). If the household had one or more children < 18 years of age, one child was randomly selected (RSC) to participate as was the child’s primary caregiver (PCG). In some households the PCG was selected as the RSA so only one adult was interviewed. If the RSC had any siblings under age 18 with the same mother living in the household, one of them was selected to participate (SIB). If the PCG had some children in the household, but was not the mother of the RSC, those other children were not eligible to be selected as the SIB. In rare instances, another adult in the household was interviewed if neither the RSA nor the PCG were knowledgeable about the overall management of the household. Therefore, each participating household had between one and six respondents.

For L.A. FANS-2, field interviewers will attempt to locate and conduct interviews with all randomly selected adult (RSA), randomly selected child (RSC) and sibling (SIB) respondents from Wave
regardless of where they live or whether they live with each other. Those living in Los Angeles County will be contacted and interviewed in person by field interviewers. Telephone interviews will be conducted with Wave 1 respondents who live outside Los Angeles County (including those living in other countries) by telephone interviewers in RTI’s call center. See Chapter 11 for details on the panel tracking process.

3.2.2. New Entrants

In addition to interviewing panel members who participated in Wave 1 data collection, you will screen new entrant households and interview selected new entrant individuals. The new entrant sample is made up of three groups:

1. new entrants who have moved into existing DUs that were selected during Wave 1,

2. new entrants who have moved into newly constructed residential DUs, and

3. new entrants living with Wave 1 panel respondents who were not part of the household at the time of the Wave 1 interview (i.e., have moved in or been born), if the Wave 1 panel respondent is still living in the LAFANS sampling area.

1. New Entrants in Wave 1 DUs (Complete Turnover)

You will visit each DU where a panel family lived at the time of the Wave 1 interview. The household may be eligible for the Wave 2 new entrant sample if none of the current residents lived in the same Census tract as the address at the time of the Wave 1 interview. These are referred to as “complete turnover dwellings.”

In addition, a sample of all vacant, refusal, and ineligible households from Wave 1 will be contacted and screened at Wave 2. Including new entrants from vacant, refusal, and ineligible households will ensure that we obtain an unbiased sample of all new entrants at Wave 2. These dwellings will be eligible for Wave 2 as new entrants if none of the current residents lived within the same tract as the address at the time of the Wave 1 interviews.

2. New Entrants in Newly Constructed DUs

Another group of new entrants is residents who live in residential DUs that were constructed since the end of Wave 1 data collection. Like most areas in the country, Los Angeles has grown since the completion of Wave 1. RAND will select and provide RTI lists of newly-constructed DUs.
3. New Entrants in Panel DUs (within 65 Sampled Census Tracts)

The final new entrant group is people who move into (or are born into) the address within one of the 65 sampled tracts inhabited by one or more Wave 1 panel respondents.

3.2.3. Determining Eligibility of New Entrants

For new entrant groups (1) and (2), the field interviewer will visit and attempt to screen the address to determine if any member of the household lived at the address or within the neighborhood (sampled tract) at the time of the Wave 1 interviews.

- If yes (at least one household member lived at the address or within the tract), the household is not eligible for the Wave 2 survey.
- If no (no members lived at the address or within the tract), information is collected on the number of adults and children who usually live or stay at the address.
  - Households with children are selected and are eligible to be rostered to determine who will be selected to interview.
  - Households with no children may be selected according to a set of sampling decisions. The screening form you use to screen the case will include a yes/no indicator to guide whether the household should be selected – if without children.

For eligible households, the field interviewer will complete the roster module of the interview to collect specific information on the household composition to determine which residents will be selected to complete the interview.

For New Entrant group (3), in completing the roster module the field interviewer will collect information to determine if “new entrant” residents were living within the neighborhood (i.e., Census tract) where the address is located at the time of the Wave 1 interview. Residents new to the neighborhood since Wave 1 or born since the Wave 1 interview will be eligible to be selected as new entrant respondents for Wave 2.
3.3. Summary of Wave 2 Respondents

Wave 2 respondent possibilities are as follows:

<table>
<thead>
<tr>
<th>Situation:</th>
<th>Potential participants:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address contains one or more Wave 1 panel participants but no new entrants</td>
<td>Each Wave 1 participant (up to three including the Wave 1 randomly selected adult (RSA), Wave 1 randomly selected child (RSC), sibling from Wave 1 (SIB) will be contacted to complete a Wave 2 interview. These participants may still be residing within the same address or within different addresses. Additionally, for RSC and SIB who are under age 18, a PCG will be selected to interview. In rare instances, another adult in the household may be selected to answer items about the overall household finances if neither the RSA nor the PCG are most knowledgeable.</td>
</tr>
<tr>
<td>Address contains one or more Wave 1 panel participants and new entrants</td>
<td>Same as above, each Wave 1 participant (up to three including the Wave 1 RSA, RSC, and SIB) will be contacted to complete a Wave 2 interview. In rare instances, another adult in the household may be selected to answer items about the overall household finances if neither the RSA nor the PCG are most knowledgeable. Additionally, for RSC and SIB who are under age 18, a PCG will be selected to interview. In addition, potentially four “new entrant” participants can be selected based on the composition of new entrants, including a new entrant randomly selected adult, new entrant randomly selected child, new entrant sibling, and new entrant primary caregiver of new entrant RSC if not already selected as PCG for Wave 1 RSC or as the Wave 1 RSA or as the new entrant RSA.</td>
</tr>
<tr>
<td>Wave 1 panel address is a “complete turnover” dwelling</td>
<td>If the Wave 1 address is eligible based on screening, potentially four “new entrant” participants can be selected at the turnover address based on composition of new entrants, including a new entrant randomly selected adult, new entrant randomly selected child, new entrant sibling, and new entrant primary caregiver of new entrant RSC if not already selected as the new entrant RSA. Each of up to three Wave 1 participants from the address will be tracked and located at a new address to complete a Wave 2 interview.</td>
</tr>
<tr>
<td>New entrant sample address</td>
<td>Potentially four “new entrant” participants can be selected based on composition of new entrants, including a new entrant randomly selected adult, new entrant randomly selected child, new entrant sibling, and new entrant primary caregiver of new entrant RSC if not already selected as the new entrant RSA.</td>
</tr>
</tbody>
</table>
4. Getting Started

4.1. Introduction

Being well prepared before making initial contact with household residents is important. You must know the purpose of the survey and be familiar with procedures for locating panel members, screening new entrants, rostering, interviewing, and completing health measures. You must be organized, meaning that you must be sure you have all materials and supplies needed for contacting, screening, rostering, and conducting L.A. FANS-2 interviews and completing health measures. This chapter and Chapter 5 contain detailed explanations of how to contact a household and obtain cooperation. Chapter 6 provides details on the screening process, which determines if a new entrant household is eligible for the study. Chapter 7 provides details on completing the case initiation database (CID), rostering, and the interview selection process. It is important to resolve any questions you have about survey procedures before contacting the household.

4.2. Study Materials and Supplies

You will receive a variety of materials and equipment to carry out your data collection tasks. Please understand that these materials and supplies are valuable and you are responsible for them at all times. As a representative of RTI, you are the only person authorized to use the materials and equipment assigned to you. You will be required to sign for materials when you receive them at training, and each piece of equipment will contain an ID label that is linked to you. You will sign an Equipment Agreement and Receipt Form which states that you agree to return all equipment and unused materials to RTI at the conclusion of your assignment. This agreement binds you to care for the laptop computer and other project equipment in the manner described in this manual, the computer manual, and during training, and describes the procedures that will be followed in the event of loss of the equipment. Exhibit 4-1 shows the Equipment Agreement and Receipt. The sections below describe the types of materials and supplies you will be using to carry out your assignments.

Appendix A contains a list of materials, supplies, and equipment you will use while working on the L.A. FANS-2. Adequate quantities of materials and supplies will be sent to you. You must use the correct and official L.A. FANS-2 materials for each interview. Be sure to monitor your level of supplies for upcoming work. If you require additional supplies, contact your supervisor.
Exhibit 4-1 Equipment Agreement and Receipt

Los Angeles Family and Neighborhood Study (L.A. FANS-2)  
Project 9360

EQUIPMENT AGREEMENT AND RECEIPT FORM

DIRECTIONS: Read the Equipment Agreement and Receipt Form carefully. Verify that each piece of equipment issued to you is properly identified on this form. Sign and date the form!

AGREEMENT:
I acknowledge receipt of the following equipment and agree to return it to the appropriate party (as designated below) upon completion of my field work. I also agree that while it is my possession, I will not in any way alter the software that was installed on the laptop computer by RTI, unless specifically instructed to do so by RTI Technical Support staff. I agree not to install any software to this equipment that is not supplied by RTI. Furthermore, I agree to report any loss or theft of this equipment to RTI immediately, and in the event of theft, I will cooperate with any police investigation.

RECEIPT:
Laptop Kit (Check all that applies) Received by FI: ____/____/_____  FI/RTI Initials: _____/____
☐ Laptop and Case  Serial # ________________  RTI ID# ________________
☐ AC Adaptor  ☐ CD Rom
☐ External Mouse  ☐ Phone Cords (# ____)
☐ Phone Cord Adaptor

Other Materials/Equipment (Check all that applies) Received by FI: ____/____/_____  FI/RTI Initials: _____/____
☐ BpTRU Model BPM-100 (BP device)  ☐ Set of five BP cuffs  ☐ EasyOne Spirometer
☐ Tanita Digital Scale  ☐ Measuring Tape  ☐ Equipment Bag

NAME (Please Print): ____________________________________ DATE: __/__/____

Office Use Only:
RTI Initials: ______________
Date: ____/____/____

INTERVIEWER SIGNATURE: ______________________________________

RTI NAME (Please Print): __________________________

RTI STAFF SIGNATURE: _____________________________

Disposition: Original and yellow to RTI project files; retain pink copy for your records.  July 2006
4.3 Case Folders

The sample for L.A. FANS-2 is comprised of panel participants from Wave 1 and additional new entrant cases randomly selected from within 65 Census tracts in Los Angeles County. Your supervisor will generally assign cases based on geography, workload, and the need for a bilingual interviewer. You will be assigned cases after you have successfully completed the training program. Your supervisor will also make additional assignments as you complete your assigned work.

To help organize your work, your assignments will be grouped by Census tract. You will receive information about your cases electronically, on your laptop computer, and in paper documents (i.e., the case folders) sent to you from your supervisor and/or RTI.

In the case folder for a new entrant case you will receive a pre-printed screening form for the selected address. In the top right corner of the form, you will see the Census tract number, the block number, the case identification number (Case ID#), and the household address. Each new entrant case assigned to you will also appear on the Case Assignment grid of the Case Management System (CMS) on your computer, along with an eight-digit Case ID number that is the same as the Case ID# on the screening form. Each case folder for a new entrant case will also include a map page of the Census tract for the sampled address. Information on using the map page in the screening process is included in Chapter 6.

For each panel case, you will receive a case folder containing a Summary Panel Tracking Form, Locator Report, Panel Tracking Questions, Panel Tracking Sheets, information on Wave 1 Others to Locate Respondents of Interest, and a Wave 1 Respondents grid. The Locator Report will include last known and historical information about the panel participants’ address and telephone number, and address and telephone information about individuals who respondents named as contacts. For each panel case you receive, you will review and use information on the Locator Report to complete the Wave 1 Respondents grid. The use of these forms in tracking and contacting panel participants is discussed in Chapter 11.

When you receive case folders from RTI, it is important that you check to be sure all necessary forms are included, and that the information on pre-printed forms matches information you see in the Case Management System. You can check by comparing the address and ID# on the pre-printed forms to the addresses and IDs listed on your computer in the CMS, to make sure they match exactly.
The forms that will be enclosed in the case folder for each new entrant case are:

- L.A. FANS-2 Screener and Contact Log for the selected address (used for doorstep screening to determine if the new entrant address is eligible for the survey)
- Map page of Census Tract for selected address (used during the screening process)
- an Case Folder Inventory Sheet (used to document which forms are being returned with the kit once the case is completed)

The forms that will be enclosed in the case folder for each panel case are:

- Summary Panel Tracking Form
- Locator Report (pre-printed information about the panel respondents)
- Wave 1 Respondents (a grid you will complete)
- Panel Tracking Questions
- Panel Tracking Sheets (two-sided)
- an Case Folder Inventory Sheet (used to document which forms are being returned with the kit once the case is completed)

If you find any discrepancies between information in your case folders and the information in the CMS, contact your FS immediately. Your FS will recommend a course of action.

In addition to case folders, you will receive several copies of the following forms as a bulk shipment.

**Handouts to Participants**

- Lead Letters
- Survey Brochures
- Consent and Assent Forms (see *Exhibit 8-3* for a listing of the forms for this study)
- Blood Pressure Results Form (for alert values)
- Incentive Receipt Forms for interviews and health measures
- Instruction Sheet for Saliva Collection
- Door Hangers
Other Survey Related Forms

- Blank Screener and Contact Logs (for use with screening complete turnover addresses)
- FI Transmittal Sheets

You will create and need to maintain a folder containing five copies of each of these forms to carry with you as you work your field assignment. You should carry this folder of forms with you each day you work in the field, and pull and use forms as needed for screening and interview cases. Each day that you return home from work you should restock the folder to replace any forms used during the day.

You will also receive a set of Show Cards and a Job Aid Booklet that you will need to carry with you as you work in the field.

4.4 Lead Letters

RTI will automatically generate an introductory lead letter for each sampled address. These letters will be provided to you with your other assignment materials, along with a sufficient number of envelopes with RTI's return address.

When you receive the lead letters, check the address on each letter carefully to make sure it is “mailable” (i.e., it contains a number, street, name, city, state, and zip code). Do not send letters without complete addresses, since they cannot be delivered and will be returned to RTI. In your bulk supplies, you will receive generic lead letters (without a specific address) to give to residents who may not have received the original lead letter (see Exhibit 5-1).

About one week before working in an area for the first time, place each letter in an envelope so the address shows through the window. Seal the envelopes, affix a stamp, and then drop them in the mail. Mailing the letters close to the time you will be in the area increases the chance that when you visit them, residents will remember receiving the letter.

If the lead letter is returned to RTI as undeliverable, your supervisor will notify you if a participant’s address is different than the one printed on the lead letter. You will then send a generic letter to the new address.
4.5 Locator Maps

To help identify the addresses you are to visit, you will be given two types of maps. The first is a laminated booklet of maps showing the boundaries of each L.A. FANS sampled tract in Los Angeles County. You will also be provided a Thomas Guide map of Los Angeles County to help you locate addresses. As mentioned in Section 4.3, each New Entrant case folder will contain a map page of the Census tract corresponding to the tract of the sampled address. Use these maps to help find assigned households and determine the best route to take as you travel from address to address.

4.6 Laptop Computer

All FIs will receive an IBM ThinkPad® laptop computer which will be used to record case initiation database and roster information, conduct interviews, and transmit data to RTI. These laptops also will be equipped with e-mail for communication among you, your FS, and RTI project staff. Details on the computer hardware and software are included in Field Interviewer Computer Manual. Instructions for use of the Case Management System (CMS) and the screening and interview instruments are also included in Field Interviewer Computer Manual.

The computer comes with a protective carrying case and power cord. Although your computer could operate briefly on battery power, you should always use your power cord during interviews and while you are updating the CMS. This will ensure that no data are lost should the battery run low or “die.” Rely on battery power to operate the laptop only when it is impossible or inconvenient to connect to a power outlet. Because such situations are possible, you should charge the laptop overnight after each day you work. Since you need to power the computer at home when you update screening/interviewing events and transmit to RTI, you should leave the computer connected to the power outlet even after you have completed these tasks each evening. Details on the use of your laptop are provided in Field Interviewer Computer Manual and detailed instruction on the use of the laptop will be provided at training.
4.7 Materials to Collect Health Measures

In addition to forms and materials to complete screening and interviews, you will also receive several pieces of equipment to conduct the health measures with children and adults.

4.7.1 Auto-Inflate Blood Pressure Machine

For each respondent 5 years of age and older, you will attempt to obtain three measurements of systolic and diastolic blood pressure using an automatic blood pressure machine. The device is the BpTRU Model BPM-100. Each blood pressure unit comes with cuffs in five sizes: child, small adult, medium adult, large adult, and extra large adult.

4.7.2 Equipment for measuring height

L.A.FANS-2 will use a folding 2 meter measuring stick and carpenters square to measure height for adults and children. This equipment is portable and intended for use in the home.

4.7.3 Digital Scale

For measuring weight during the interview, you will receive a Tanita HD 314 digital scale. The scale is powered by a long-lasting lithium battery, has a digital display, and a 330-lb. capacity. You will also receive a 5 kilogram weight for calibrating the scale. If you experience problems with calibrating the scale or with using the scale while you are in the field, contact your FS.

4.7.4 Cloth Measuring Tape

You will receive a cloth measuring tape with metric units to collect hip and waist circumference measurements from all adults (age 18 and older) participating in L.A.FANS-2.

4.7.5 Spirometer

L.A.FANS-2 will use hand-held, portable electronic spirometers made by EasyOne. Spirometry is the timed measurement of a person’s lung volume, assessed as the person blows out after taking a deep breath. It measures how effectively and how quickly the lungs can be emptied. The measurements include a number of indices, such as forced vital capacity (the volume of air that can be forcibly expelled from the lungs) and peak expiratory flow (the maximal expiratory flow rate). For L.A.FANS-2, you will collect three acceptable/reproducible spirometry measurements from adults and children at least 5 years old.
4.7.6 Saliva Kits

You will receive a supply of saliva kits and instructions you will provide to adults for collecting specimens from children. There are two types of kits, and the age of the child from whom the specimen is being collected will determine which kit should be used.

4.7.7 Equipment Bag

You will need to carry the laptop, case folders, data collection forms, equipment for completing the health measures, Woodcock-Johnson Easel, the Showcard booklet, and the Field Interviewer and Computer Manuals each time you go into the field. To safely and easily transport the materials, you will be provided with a wheeled bag.

4.8 Other Supplies

You will receive a variety of other materials in your bulk supplies. These materials will include:

RTI ID Badge. Each interviewer working on this study will be issued a photo identification badge after successfully completing training. The badge identifies you as a Field Interviewer for RTI. You must always wear your badge when working in the field on the L.A. FANS-2 Study. Your badge will greatly aid potential respondents to verify your identity and legitimacy as a professional interviewer. Be sure your badge is prominently displayed when you arrive at a respondent’s home.

Authorization Letter. Each interviewer will also have a Letter of Authorization signed by Ellen Marks, Project Director, formally authorizing you to work as an interviewer for this project. Show this letter to persons who are unsure of your legitimacy as an interviewer. It provides a toll-free phone number (1-800-334-8571) for respondents to call to verify the legitimacy of the study and confirm that you are authorized as an interviewer for the project.

Clipboard. Use the clipboard to conduct the screening while standing at the doorstep of the selected address.

Woodcock-Johnson Easel. Use the easel when conducting the Woodcock-Johnson assessments.

Pencils and Pens. You will receive a supply of sharpened pencils for recording information on the paper forms. Please use them! You will also receive a supply of pens for respondent
signatures on the Informed Consent forms and incentive receipts. It is important to have several pencils and pens with you while in the field.

**Power Strip.** This is a surge protector you will use each night to charge the laptop.

**Extension Cord.** An extension cord will be provided with the laptop computer.

**Production, Time and Expense Reports (PT&Es) – paper working copies.** You are required to complete and submit electronically weekly your time, expenses, and documentation of your production in the field. Take paper copies of your production, time and expense report with you as you work in the field to record your time.

**Advance Balance Sheets.** A ledger to use for tracking all incentive advance checks you receive and the amount of incentives you pay out for each completed interview.

**Transmittal Sheets.** A form on which you will document case folders and other materials you send via FedEx.

**Receipt for Escort Services.** Use these forms if you use an escort during part of your fieldwork. You must always obtain advance approval from your FS before employing an escort.

**Federal Express Mailing Envelopes.** For mailing completed and transferred case folders and other materials.

### 4.9 Planning Fieldwork and Planning your Route

One of the most important responsibilities is planning your fieldwork carefully to maximize the effectiveness of your time in the field. Below are general rules to apply when planning your work:

1. Spend a minimum of four hours working on each trip (travel time to and from the field should NOT be included as part of the four hours). Most productive Field Interviewers spend more time in the field on each trip.
2. Lay out your itinerary so that you can visit as many sample addresses as possible during a trip.
3. If you have only a little work left in one area, combine your trip to this area with a trip to a nearby area when possible.

The timing of field trips is very important. Plan trips so that you will be in the field when the chances of finding a respondent at the address are high. The most productive hours for first visits are
between 4:00 p.m. and 9:00 p.m. on weekdays, and from 9:00 a.m. to 9:00 p.m. on weekends. Saturdays are generally the most productive day, and week nights are an excellent time to find respondents at home.

4.10 Assembling Field Materials

Before heading out to the field, make sure you have everything to complete all screening, interviewing, and health measure tasks at each address you plan to visit. This will demonstrate to respondents that you are well-prepared and maximize your efficiency in the field. Successful Field Interviewers are well-prepared and organized. Make sure the equipment bag is packed so everything is easily accessible and neatly organized.

In preparing for each field trip, assemble the case folders for the addresses you plan to work that day. Place the case folders in the order you have determined is the most efficient route for that day. Attach the first case folder on the route to the clipboard.

Assemble the items that can help you gain cooperation from respondents:

- RTI Name Badge (should be worn in a visible location whenever you are in the field)
- RTI Letter of Authorization
- Federal Certificate of Confidentiality
- Lead Letter (generic)
- Study Brochure
- “Sorry I Missed You” Door Hangers
- Copies of press releases
- Money for incentives

Store these items in the equipment bag until you are ready to contact someone at the sample address. Bring enough copies of the lead letter and brochure to give to each address you visit.

When preparing for the field, assume that you are going to complete interviews at each address you plan to visit and carry enough cash with you to cover incentive payments for four respondents. Never start an interview unless you are prepared to give the incentive money after the interview.
5. Obtaining Participation

5.1 Introduction

Obtaining the trust and participation of a respondent to complete screening, interviews, and health measures requires careful preparation. Displaying confidence, knowing the study, and being comfortable with forms and equipment will greatly increase your chances of success. However, that is not all you need to know. This chapter presents techniques handed down from experienced interviewers and survey experts for dealing with reluctant respondents: being prepared and professional, listening to what a respondent is really saying, and correctly addressing a respondent’s concerns—sometimes before they have been raised.

5.2 Tools for Obtaining Participation

The tools in the following sections will aid in securing participation from respondents.

5.2.1 Lead Letters

Before attempting contact, you will mail a lead letter to each assigned household that describes the study and says that an interviewer will be visiting the home (see Exhibit 5-1). Enclose a project brochure with the letter. You will have a supply of generic lead letters and brochures to give residents who do not remember receiving them or did not receive because of address problems. Many residents will be aware of the study and your plans to visit before you arrive.

5.2.2 RTI Photo ID Badge

Each Field Interviewer working on this study will be issued a photo identification badge during training (see Exhibit 5-2 for example). You must always wear your badge in a visible location when working on L.A. FANS-2. Your badge will greatly aid respondents to verify your identity and legitimacy as a professional interviewer working on L.A. FANS-2. Your badge will also convey to the respondent that you are trustworthy, will not cause harm in their home, and are not a true stranger. Be sure your badge is prominently displayed.

5.2.3 Press Releases

Each interviewer will have a copy of the press releases for the study in plastic sleeves, to show to respondents as needed to gain cooperation.
Dear Los Angeles County Resident:

I am writing to invite you and your family to join an important study—called the Los Angeles Family and Neighborhood Survey or L.A.FANS. This study is being conducted with families in your neighborhood. L.A.FANS is a study about children in Los Angeles and the neighborhoods where they live. It is funded by the National Institutes of Health, an agency of the federal government. We are the directors of L.A.FANS, and work as researchers at RAND in Santa Monica and at UCLA in Westwood.

Many people believe that the neighborhoods in which children grow up affect their learning and social development, behavior, health, attitudes about school and work, and educational and job opportunities. Unfortunately, evidence about the influence of neighborhoods is limited. Our goal in L.A.FANS is to learn which aspects of neighborhood life are most important for child development. The study will provide information about ways that policies and community organizations can improve neighborhoods and children’s lives.

We need your help for this study. We want to obtain the opinions, ideas, and experiences of people in all parts of Los Angeles County. We chose neighborhoods in Los Angeles County at random (like in a lottery), and your neighborhood was one of those chosen. You may have participated in the first round of this study several years ago. If so, we are hoping you will do so again. If you were not involved in this study in the past, we are asking you to participate now. We need your help to make sure that the survey represents the types of people and families in Los Angeles County. Taking part in the study will give you a chance to tell us about your experiences and to make your voice heard. The enclosed brochure explains more about the study.

Researchers from UCLA and RAND have hired RTI, a not-for-profit research organization, to conduct the interviews. The interviews will be conducted by an experienced, professional research team. An interviewer from RTI will contact you soon to give you more information about the study. If you participated in the first round of the survey several years ago, you will be asked to participate again. If you were not interviewed previously, it will take about 5 minutes to see if you are eligible to take part.

If you are eligible, we will ask you to take part in a longer interview. The exact amount of time depends on whether you have children. To thank you for taking part in this longer interview, adults will receive $20 to $30, and children will get $5 to $20. The exact amount will depend on the length of the interview. We will also invite you to take part in some health measures, which includes recording your height and weight, blood pressure, and other health assessments. You will receive an additional payment for the full health measures assessment.

Of course, the choice to participate in the interview, the health measures assessment, or both is entirely yours. If you choose to take part in the study, all of the information you provide is completely confidential and your privacy is fully protected. We take confidentiality and privacy very seriously.

If you have any questions about the study or your involvement in it, you may call the toll-free L.A.FANS study hotline (1-800-723-8942) to speak to one of the RTI study coordinators. If you have questions related to your rights as a study respondent, you may call Dr. Wendy Visscher, Ph.D., the head of the RTI Human Subjects Committee, at 1-800-334-8571.

Thank you in advance for your help and support of our efforts.
5.2.4 Authorization Letter

Each interviewer will have a personal authorization letter signed by Ellen Marks, Project Director, formally authorizing you to work on L.A. FANS-2 for RTI (Exhibit 5-3). Show this letter to respondents or other persons who are unsure of your legitimacy as an interviewer.

5.2.5 National Institutes of Health Certificate of Confidentiality

Each interviewer will have a copy of the National Institutes of Health Certificate of Confidentiality for the study, providing assurances of confidentiality to participants (see Exhibit 2-2).

5.2.6 L.A. FANS-2 Brochure

The L.A. FANS-2 Brochure (Exhibit 5-4) provides a ready reference about the study, including answers to commonly asked questions. Give copies to people who ask for additional information or leave them when a respondent is not available. If you will re-visit a household to complete interviews, leave a copy of the brochure for respondents to read in the interim.
Exhibit 5-3 L.A. FANS-2 Authorization Letter

To Whom It May Concern:

This letter serves to authorize FIELD(1) FIELD(2) to work as a field interviewer on a major research project sponsored by the RAND Corporation and The University of California at Los Angeles (UCLA). The project is called the Los Angeles Family and Neighborhood Survey-2 (LA FANS-2).

The Field Interviewers working on this study have been hired and trained specifically for this project by RTI International (RTI), a not-for-profit survey organization located in Research Triangle Park, North Carolina. RTI is working under contract to the RAND Corporation and UCLA and will perform all data collection activities associated with the study. These activities will include interviewing new households as well as locating and interviewing respondents from the first phase of the study. It may require asking questions that help find them if they have moved.

If you would like further verification that NAME is a legitimate interviewer working for RTI on this study, please contact me at RTI (1-800-334-8571, extension 4691), from 8:30 AM to 5:00 PM, ET.

Thank you for your cooperation.

Sincerely,

Ellen Marks, Project Director
RTI International
What is this study about?

The study is about your neighborhood—how you feel about living here, why you decided to live here, your likes and dislikes, how long it takes you to go to work and school, and the services you and your family need and want. The purpose of the study is to collect information about what makes a neighborhood a good place to live and raise children.

Why is the study important?

Local county and city agencies will use what we learn from the study to decide how to improve neighborhoods and social services for families and children in Los Angeles.

Why should I participate?

It is your chance to make your voice heard and to help plan a better future for your neighborhood. You can help see that the money spent in your neighborhood is for the programs and services you need the most.

I don't have young children; why should I get involved?

Even if your children are grown or you don't have children, your experiences and opinions about your neighborhood are very important and cannot be replaced by other people.

Why did you choose my neighborhood?

Your neighborhood was selected randomly (like with a lottery) to participate in the survey. We are studying 65 different neighborhoods within LA County, from Palmdale to Long Beach and West LA to Claremont, to ensure that we include different and diverse families and neighborhoods.

Why did you choose my household?

Your household was also selected randomly (like with a lottery) to take part in the survey. Your household is one of over 3,000 being asked to take part. No other household can substitute for yours. You may have participated in the first round of this study several years ago or you may be new to the study. Either way, we hope you will participate. Your opinions are very important!

If we are eligible, what will you ask us to do and how long will it take?

Our professional interviewer will make an appointment with those household members chosen to be interviewed. We work around your schedule and can conduct the interview in your home or any other location. Each household member will be asked to respond to different questions. Some interviews will take only 10 minutes; others might take from 1-2 hours. We will interview or conduct assessments with both adults and children. With your permission, we will also complete some health measures, which include checking blood pressure, measuring lung function, height and weight, and collecting a saliva sample from children. We may ask you to allow a trained laboratory technician to visit to collect a few drops of blood to be tested for risk of heart problems and blood sugar.

What if I am willing to do the interview, but not the health measures?

We would still like to interview you, even if you don’t want to do the health measures. However, the health measures are very simple. If you have children, you or another adult in the household will collect the saliva samples. If you are selected for and provide a few drops of blood, a laboratory will conduct tests and you will receive a confidential report—at no charge to you—of your cholesterol and blood sugar levels.

What happens to the information I give you?

After we have removed all personal information (such as names, addresses, and telephone numbers), your answers will be combined with those of other people interviewed and summarized in reports. Your responses are completely confidential and are protected. We do not share any of your personal information with anyone outside of the survey.

Will I receive anything for participating?

Yes. As a token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment. In addition, any child or adult who completes the health measures component will receive an additional cash payment.
Exhibit 5-4 L.A. FANS-2 Brochure (continued)
5.3 Initial Approach

Your appearance and manner are extremely important in determining whether you will succeed in gaining cooperation from residents. When you arrive at the sample address, a professional approach will establish an initial impression that can encourage cooperation or alienate the respondent. The goal of your initial approach is to alleviate any apprehension or reluctance the person may have about participating. A relaxed, confident, and professional approach will help you accomplish this goal. The basic elements of a professional approach include:

- showing proper identification and supporting documentation;
- demonstrating a thorough knowledge of the purpose of the project and use of all materials;
- delivering a courteous and straightforward presentation; and
- conveying respect for the respondent.

While exhibiting these behaviors, you should also tailor your approach in a way that will help the respondent feel more comfortable and not intimidated. Your dress should be professional but not “formal,” and you should act in a way that invites the respondent’s participation. The initial impression that you project will, in large part, determine whether you “get in the door.”

5.3.1 Establish Rapport

Rapport is one of the most important tools of any interviewer. It is achieved by being sensitive to the respondent and his or her situation. Rapport building begins as you introduce yourself and the study and will continue through screening (for new entrants) to all other parts of the visit such as rostering, interviewing, conducting Woodcock-Johnson assessments, and collecting health measures. A respondent could lose interest at any stage of the visit. It is important to establish rapport early and maintain it throughout your contact at the household. The rapport you develop during the initial contact at the door and as you get set up in the respondent’s home will determine the tone of your visit. Be aware of how you are being received. When you are alert and responsive to the resident’s reactions, you will be more successful in avoiding refusals and will be better equipped to counter respondent objections with appropriate responses.

Be businesslike, courteous, and confident. Do not become aggressive, which is abrasive and usually counterproductive. “Bullying” residents into participating is unacceptable and unethical. On the other hand, a Field Interviewer who is too passive will be unsuccessful. Passivity conveys lack of confidence or commitment to an action. This attitude will not motivate the resident who is neutral or disinterested in cooperating. In these cases, you must “sell” the study to the resident by explaining its
importance and addressing concerns in a forthright manner. To do this effectively, you must be thoroughly convinced of the importance of the study. If you are not convinced of the validity and importance of the project, the respondent never will be. You must be able to convey that conviction through your attitude and approach.

5.3.2 Explaining the Study and Answering Questions

Your introduction provides a general idea of what the respondent can expect from the study. Many people will be satisfied with a simple explanation. Others will have questions or concerns you will need to address. Use your knowledge of this particular study and your knowledge of survey research in general to answer the respondent questions and address concerns.

If you do not know the answer to someone’s questions, admit it, but offer to find out either then or later, depending on how important the question is to the respondent’s decision to participate. If the respondent’s participation appears to rest on getting an answer immediately, offer to call your supervisor or RTI project staff (using the project’s toll-free number) to resolve the issue.

The brochure may be useful in addressing the concerns of reluctant respondents. Be very familiar with the contents of the brochure and lead letter and with the background of the study. Make sure you are comfortable answering questions about the study. Exhibit 5-5 lists some common questions and concerns respondents have regarding study participation. It is important to listen to the respondent's comments and tailor your response to his/her need for information. Read over these carefully so that you become skilled at using the information to obtain participation. Your objective is to become completely comfortable in explaining the project to respondents in your own words.
### Exhibit 5-5. Answering Questions

<table>
<thead>
<tr>
<th>Questions</th>
<th>Possible Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Why me? Why this house?”</td>
<td>FOR PANEL RESPONDENTS: You were originally chosen as part of a random sample of adults who lived in selected neighborhoods in Los Angeles County and you were interviewed between 2000 and 2001. By “random sample” we mean that a computer chose your household randomly from a list of all households in the neighborhood. Selecting households at random means that the results of the study represent the experience of the Los Angeles population. More than 3,000 households participated in the study. Now we want to talk to people we interviewed before to find out how they are now and whether there have been changes in their lives. FOR RESPONDENTS NEW TO L.A. FANS: You were chosen at random from all people who moved into your neighborhood since 2000. To understand life in this neighborhood, we are collecting information about people who have lived here for several years and others who have moved in more recently.</td>
</tr>
<tr>
<td>“Why this neighborhood?”</td>
<td>Your neighborhood is one of 65 communities in Los Angeles County randomly selected to participate in this study. We selected a diverse set of neighborhoods that includes many kinds of residents and many kinds of families. Our study reaches from Palmdale to Long Beach and from West LA to Claremont.</td>
</tr>
<tr>
<td>“Will my answers be kept private?”</td>
<td>Absolutely. We will combine your answers with the answers of everyone else participating in the study. Our interest is only in the set of all responses, and no answers will be connected with any individual when a summary of the data is reported. Your name and address will not appear in any reports, and we will not give information that identifies you personally to anyone for any reason.</td>
</tr>
<tr>
<td>“Who is RTI International?”</td>
<td>RTI International is a not-for-profit research organization headquartered in North Carolina. RTI performs various types of laboratory and social research for government and industries, and its role in the survey is that of field data collection (interviewing).</td>
</tr>
<tr>
<td>“Who is UCLA?”</td>
<td>The University of California Los Angeles (UCLA) is an internationally acclaimed university, known for its leadership in teaching, research, and public service.</td>
</tr>
<tr>
<td>“Who is RAND?”</td>
<td>RAND is a private, non-profit research institution located in Santa Monica. For over 60 years RAND has been conducting research to address challenges that face the United States and the world.</td>
</tr>
<tr>
<td>“Who are you doing this survey for?”</td>
<td>This project is sponsored by the National Institutes of Health, a government agency that supports research to improve the health of people in the United States.</td>
</tr>
<tr>
<td>Questions</td>
<td>Possible Response</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>“How long will the screening take?”</td>
<td>The screening questions only take a few minutes. If your household is eligible, we will develop a list of everyone in the household and determine who will be selected for an interview. Then I will, if necessary, explain the time needed to complete the different interviews.</td>
</tr>
<tr>
<td>“How long will the interview take?”</td>
<td>The average time for each interview varies, depending on the type of interview and the individual. Most people find it generally takes them between 1-2 hours to complete all the sections they were selected for. I think you'll be surprised at how fast the time goes. If now is not a good time, I will be happy to schedule the interview at whatever time is more convenient for you.</td>
</tr>
<tr>
<td>“What’s the study about?”</td>
<td>The study asks your opinions about your neighborhood—what you like and don’t like, why you moved here, and what types of community programs and services are needed for children and teens. It covers many different topics that will help researchers understand what makes a neighborhood a good place to live and raise children.</td>
</tr>
<tr>
<td>“Why me? I don’t have children.”</td>
<td>Even if you don’t have children, you are still important to this study. The survey has questions that ask you how you feel about your neighborhood and your experiences living and working in Los Angeles County. This is a chance for you to make a valuable contribution that may help county and city agencies spend their funds in ways that give people and neighborhoods what they want and need.</td>
</tr>
<tr>
<td>“Will I be paid?”</td>
<td>Yes. The exact amount depends on the size of your family. To thank you for taking part in the interview we will give $20 to adults and children 9 and older, and $5 to children under age 9. We will also invite you to take part in the health measures part of the study, which we will talk about later. If you agree to participate in that, we will provide additional payments of $25 for adults and $35 for children.</td>
</tr>
</tbody>
</table>
5.3.3 Overcoming Objections

Most individuals are friendly and willing to cooperate, but a few will have concerns, objections or fears. Some respondents may fear they are being judged. Often, what may appear to be a refusal to cooperate is, in reality, only an expression of concern or a need for more information about the study, the procedures, or the background of the research. The following points will help reduce or eliminate refusals when making contacts:

- Be positive and optimistic. Assume most residents will cooperate (in fact, most will). An air of apology or defeat can sometimes trigger a refusal. Do not invite refusals.
- A friendly, confident and positive manner, assertive but not aggressive, will usually have positive effects.
- Listen carefully to the resident’s comments and try to determine the basis for his or her objections. Then, target your responses to those objections or concerns.
- Acknowledge the truth or accuracy in the respondents’ statements then build on the statement with additional information that addresses the concern.

Giving the resident a little more detail about the study, procedures to be followed, guarantees of confidentiality, or the amount of time involved may answer an “un-asked” question. Sometimes the best technique is to simply ask, “Is there something I can explain to about participation in this study that is bothering you?” Often, a person is apprehensive about participating in a survey. He or she may in the past have been fooled into participating in a “survey” that turned out to be a sales promotion in disguise. Using the words “study,” “research,” and “interview” is sometimes helpful. Assure the respondent that you are not selling anything. For many people, a stranger at the door often means someone who is soliciting their money. Be prepared for this reaction.

When you encounter a respondent who may be reluctant to participate and who seems to be making an interview appointment at a later date with no intention of keeping the appointment (the unstated or “passive” refusal), suggest that he/she try a few of the questions now to see how it goes. Successful Field Interviewers have learned that once a respondent starts the interview, he or she usually finds the questions (or the interview process) interesting and is willing to complete the survey.

If you are unable to overcome a respondent’s objections and the person simply will not consent to the screening or interview, then accept the refusal as courteously and graciously as possible and thank the person for his/her time. Do not pressure, argue, or otherwise alienate the person. Whatever the circumstances, always remember to be professional, courteous, and friendly. Your goal is to leave the door open for another contact by you or by someone else to secure cooperation. Different reasons need to
be countered with a different emphasis in the response. It is important to listen to the respondent’s comments and tailor your response to the respondent’s concerns or need for information.

Be sure to record any pertinent facts or impressions about the refusal in the comments section of your Record of Calls. Discuss the situation with your FS, and he/she can determine the next steps to take. Your FS may transfer the case to another field interviewer or send out a refusal conversion letter. As needed, check with your FS so you can time your return to the residence to roughly coincide with the receipt of the refusal conversion letter.

5.3.4 Refusal Reasons

Several refusal conversion letters are available in English and Spanish, tailored to primary refusal situations encountered in the field. Copies of these refusal letters are provided in Appendix C of this manual. So that you can better understand how to categorize a refusal reason in your discussions with your FS, the most common refusal reasons are explained here:

1. Too busy, have no time, did too many surveys already

   The number one reason for refusals is lack of time. Modern life can be very demanding—many people are overextended and see no relief. They may be civic-minded and have already participated in a number of other surveys. On the day you called on them, they were particularly overwhelmed and felt they could not spare the time for one more thing—they may even have said they had no time, ever.

2. Surveys (or the government) are too invasive

   These people feel (to varying degrees) that surveys, the government in general, or the subject of the survey are an invasion of their privacy. They may use phrases such as “surveys are a waste of time and money,” “I never do surveys,” or “surveys are too personal.” They may also state that they do not like putting such personal information onto a computer or that they have philosophical, religious, or political reasons for not participating in surveys. Parents may be concerned about exposing their children to some subject matter in the survey or may doubt that their children are capable of answering the survey questions.

3. Clarify confidentiality, legitimacy, or selection

   Be sure to listen carefully to what residents are telling you—they may simply be seeking clarification or may need more information. Questions about the legitimacy of the study or how confidentiality is guaranteed may be the root of their refusal. They may not have
been listening very well when you explained the study and still need help understanding the nature of the study.

4. **Uncooperative**

Although rare, some people are simply uncooperative—they either will not give a specific reason for their refusal or feel that since there is nothing in it for them, there is no reason to cooperate.

5. **A parent, another household member, or another force is influencing participation**

Sometimes people refuse to participate because of an outside force that is controlling their behavior, not because of the actual survey. The outside force may be another person, such as a spouse or a parent, who has a strong interest in what the respondent does. The outside force may be institutional or social, such as immigrants concerned that you actually work for the Immigration and Naturalization Service (INS) or welfare recipients concerned that their household status is being investigated.

**Exhibit 5.6** lists ways to counter some of these common refusals, so study it carefully. Be aware that in some cases, a respondent will say they are refusing for one reason but based on other comments the respondent made, you feel there is an underlying or unspoken reason for the refusal. In these instances, be very specific in your account of the situation when you discuss it with your FS so that he/she can determine the best approach to this particular household.

**Do not** rely on memory to recount the events surrounding the refusal to your FS. Record the reason for the refusal in your Record of Contacts at the time of the refusal. After the FS has discussed a refusal with you, he/she will determine the next step.

Though refusals may be discouraging, learning to handle them professionally—and not personally—will be the most successful approach in the long run. Do not allow refusals to change your positive attitude and approach when interviewing. Even the best interviewers experience occasional refusals; it is not necessarily a reflection of your ability as an interviewer. The important thing is to learn from refusals and then begin again with the next household.
### Exhibit 5-6 Countering Refusals

<table>
<thead>
<tr>
<th>Reason for Refusal</th>
<th>Response</th>
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</thead>
<tbody>
<tr>
<td>“Too busy” / “No time”</td>
<td>Explain that the screening takes only a few minutes. At a minimum, attempt to conduct the screening to see if the household is eligible—the person at the door with “no time” may find that the household is not even eligible for an interview. If the household is eligible for the study, attempt to roster the household to determine which household members will be selected and asked to participate in interviews. Stress that you will work around their schedules and can schedule an appointment to conduct the interviews at a more convenient time.</td>
</tr>
<tr>
<td>“Don’t like surveys”</td>
<td>The objective is to assure respondents the survey is not invasive and their privacy will be maintained—stress that our interest is only in the total of all responses, not in individual answers. No individual respondent will be connected to any of the responses in any way. Also stress the importance of survey research in public policy—policies the respondent probably cares about. Stress that this is their opportunity to contribute to the formation of public policy.</td>
</tr>
<tr>
<td>“Can’t be sure it’s confidential” / “Need to verify this is a legitimate study”</td>
<td>Be sure to listen carefully to what respondents are telling you. Rather than automatically assuming their questions about confidentiality are an expression of distrust, inquire enough to see if what they really need is more information. Show the Q&amp;A Brochure. It answers some key concerns regarding the study.</td>
</tr>
<tr>
<td>“Nothing in it for me”</td>
<td>Stress the importance of survey research in and the opportunity to contribute to the formation of public policy. Remind them there is something in it for them (payment for participation).</td>
</tr>
<tr>
<td>Uncooperative</td>
<td></td>
</tr>
<tr>
<td>“I’m not feeling very well” / “My house is too messy for you to come in”</td>
<td>These are not really refusals. You have caught the person at a bad time, but the situation is temporary, and at another time the respondent will likely agree to be interviewed. Ask when would be a better time to come back and set an appointment if you can.</td>
</tr>
<tr>
<td>“I think my social worker sent you”</td>
<td>These people are concerned about what another person or force might think about their participation. Assure them you are a legitimate field interviewer and that their responses are totally confidential—the INS or the welfare workers or the court system will never know of their participation in the survey.</td>
</tr>
<tr>
<td></td>
<td>Explain the importance of participation by every selected household since each represents thousands of other households and cannot be replaced.</td>
</tr>
</tbody>
</table>

5.3.5 **Tips for Obtaining Participation**

Successful Field Interviewers develop their own style. Interact with respondents in a manner that is comfortable for you, bearing in mind the following tips from successful FIs.

A positive attitude is crucial when interacting with respondents. You need to feel confident about yourself and your knowledge of the project, thus creating a positive atmosphere. If you approach the door with an air of uncertainty, the respondent may question the validity of the study, view the study negatively and minimize its importance, or be more likely to say “no” when asked to participate. If you are not committed to and knowledgeable about the study, the respondent is not likely to be interested.

Persistence is key to gaining cooperation. Many times no one may be home and you will have to vary the times of day you try to make contact. Even if you make contact, if you are unable to persuade the respondent to participate during one of your visits, say “I’ll come back when you are not as busy” or “I’ll come back in a couple of days.” These statements leave the door open for re-contact, since they imply respect for the person's reason to not participate at this time.

It is very important that you stress the confidentiality of the information collected for the study. Assure the person that answers are only reported in aggregate form and individual names are never associated with answers.

Stress the importance of each selected respondent. Every respondent is critical to the overall success of the survey. Each respondent is unique; no one selected for the survey can be “replaced” by someone else.

Many people today are very busy and do not have a lot of free time. Many do not wish to spend what free time they do have answering long surveys. Instead of saying, “The questions will take about an hour to finish”, try something like “The length varies and depends on the individual. Let’s start and see how it goes.” You can also offer to conduct the interview in parts. Experienced FIs report that people who tell you they don’t have an extra hour can nevertheless stand at the door and discuss the study with you for 45 minutes! Getting the discussion focused on answering the first few questions can often lead to a full interview.

Finally, you must document all contacts and attempted contacts at your assigned addresses in the Record of Contacts. Record the details of what happened during each contact. Once home, input this information into the Case Management System (details about this system are provided in Chapter 5 of the Field Interviewer Computer Manual). This record may provide useful information for further contacts, such as refusal conversion attempts. Review documentation before the next contact and plan and organize your approach accordingly.
5.3.6 Reluctant Respondents

The most valuable tools for dealing with reluctant respondents are yourself and your knowledge of the study. If you approach people with confidence and a belief in the importance of the study, people will be open to hearing about the purpose of your visit and willing to participate.

Even the most experienced FIs, however, encounter respondents who are reluctant to participate. Most people who are reluctant simply need more information about the study or need reassurance that their responses will be treated confidentially. Gentle probing about their hesitation usually elicits questions or may reveal the reason for their reluctance. Many times, providing a respondent with general information about the questions and reminding them of their right to refuse to answer particular questions is enough to convince them to get started with the interview.

Be aware that there are times when answering questions will not be enough to convince a person to participate. Sometimes, you catch people on a bad day or at a bad time. When this is obviously the case, do not try to convert the person during that visit. Instead, politely say that you will return at another time. Telling the respondent you will return, rather than asking if you may, will decrease the chance of an outright refusal. If a respondent becomes hostile and clearly states you should not return, discuss the situation with your supervisor.

Other times, a respondent’s reluctance may be based on a difference between their personal characteristics and yours. These may include differences in personality, race, ethnicity, age, or gender. If a respondent is very evasive about their reason for refusing, you may consider whether it is due to a difference in personal or cultural characteristics. If so, discuss the situation with your supervisor. Depending on the encounter, your supervisor may decide to transfer the case to another FI.

The most important thing to remember in dealing with reluctant respondents is that ALL interviewers encounter them, and you should not let such experiences deflate your confidence. As mentioned above, even the most experienced FIs have to deal with reluctance and, sometimes, refusals. Your supervisor and fellow FIs will serve as a good resource for discussing any problems you have in the field and often will be able to offer guidance based on their own experiences.

5.3.7 Local Social Climate

Occasionally, refusals will occur no matter how effective and adaptive you are. These refusals may be due to factors outside your control and may or may not be situations that you or your supervisor can counter. For example, if the neighborhood is experiencing a series of household break-ins or personal assaults, residents may be exceptionally reluctant to allow entrance to their homes, even if you have an appointment. This type of information will be readily revealed once you begin work in the neighborhood. If a respondent reports such circumstances, it is a good idea for you or your supervisor to contact local
police to inform them of your presence in the area. Also, you may choose to wait and return to the neighborhood at a calmer time.

5.3.8 “Sorry I Missed You” Door Hangers

You will have a supply of door hangers to leave at addresses where you are unable to speak with anyone directly. Date and sign the hanger and place it on the door knob where the residents are likely to find it. Exhibit 5-7 shows the text printed on this card.

5.4 Contacting a Neighbor

Occasionally you may encounter an address that appears to be occupied but no one ever seems to be home. Always make several attempts to contact a resident in these cases. Be sure to vary the day of the week and time of the day (the resident could work shift hours or have a non-standard schedule). If you are still unable to make contact, consult your supervisor. She may advise you to talk with a neighbor to determine if the address is occupied. If you are instructed to contact a neighbor, remember that you may explain who you are and show your credentials, but you should not disclose that the sample address has been selected for the study. This would violate confidentiality.

5.5 Controlled Access Buildings

Occasionally, you will encounter gated apartment complexes or communities that are not easily accessed. Interviewers in large cities encounter these most frequently, but even small towns are becoming more security conscious.

There are various types of security and various reasons why entry might be difficult. For example, a building or subdivision might have a doorman or guard stationed at the front entrance. The purpose of these guards is to prevent people who are not authorized from entering the area. When you encounter these situations, the most important thing for you to do is gather enough information about the situation to be able to discuss it with your supervisor and decide on the next course of action. One approach is for your supervisor to send a letter to the management of the building or community, explaining your visit and asking for cooperation. Another might be for you to contact the relevant housing board or association in person. If you are unable to gain access to a gated address, you should write down the name of the community or apartment building along with any other information about the name, phone number, address, etc., of the management. Your supervisor will give you specific instructions about which course of action should be taken.
SORRY I MISSED YOU!

I am a professional interviewer from RTI International (RTI), a not-for-profit research center. I am currently conducting a neighborhood study with residents in your area. Recently, we mailed you a letter and asked your household to participate.

I would like to set up a time to see if your household is eligible for the study and to answer any questions you may have. It will take less than 5 minutes to find out if your household is eligible.

I will stop by again in the hope that we can talk.

• I am not selling anything. I am not a solicitor.
• I have a photo ID.

If your household is eligible and takes part in the interview, we will give your household a cash payment when you finish the interview. It is our way to thank you for taking part in this study.

• If you would like to schedule an appointment or get more information about the survey, please contact a study coordinator at our toll free number:

  1 - (800) 723-8942

  or you can visit us at our web site:

  www.rand.org/lafans

  Thank You!

____________________________________________
Interviewer Name and RTI ID                       Date

RTI, P.O. Box 12194, 3040 Cornwallis Road, RTP, NC 27709
Usually the gatekeeper has strict instructions not to allow solicitors on the property. However, you are not a solicitor. You are not selling anything. You need to provide the gatekeeper with enough information that he or she understands the nature of your visit. Emphasize that those who have received letters should be expecting you. If you must speak to a manager or owner before you have had a chance to speak to your FS, you should be just as comfortable and confident as you are with any individual respondent.

If you have an appointment scheduled with someone at an address with controlled access, upon your arrival:

- Display your ID badge prominently.
- Give the guard/manager the name and address of the person with whom you have the appointment. In most cases, there is no need to explain the nature of your appointment, simply letting the guard/manager know you have an appointment should be sufficient.
- If necessary, wait for the guard to verify your appointment.

When you are conducting screening and arrive at an address with controlled access that has a manager or other gatekeeper on the property:

- Display your ID badge prominently.
- Show the gatekeeper the study brochure.
- Assure the guard, doorkeeper, or gatekeeper that you are not selling anything or soliciting.
- You may show the lead letter and explain that you have specific addresses to visit.
- Explain that the people residing at these specific addresses have all been notified that you would be coming and they should be expecting your visit.

Remember, the manager is anxious to do a good job and not irritate the residents within the controlled access area. The most important thing a manager wants to know is that you are not going to be bothering the tenants. The most critical points for you to get across are:

- the seriousness and importance of the study
- RTI’s strict rules about privacy and confidentiality
- the voluntary nature of the interview and your duty to give the respondent an opportunity to make an informed decision about whether or not to participate
- your obligation to present the opportunity to the residents in person, as you said you would in your letter.
Each situation is unique. It is impossible to cover all possible scenarios here, but you should remain alert to different methods and approaches that you think might work and discuss them with your supervisor.

5.6 Working Safely in the Field

Achieving targeted response rates for completed interviews is of utmost importance to the project. However, ensuring your safety while you are working is even more important, and no one is in a better position to do that than you. We want you to be successful and safe as you conduct your work as a Field Interviewer on the Los Angeles Family and Neighborhood Study.

5.6.1 Safety Concerns on a Respondent’s Property

At times, you may face safety concerns while on a respondent’s property. The most frequent concern reported is about dogs. Many people own dogs, often for their personal safety, and that means you must be very cautious when approaching a residence, especially one where it is obvious one or more dogs are around. Always be cautious when approaching a strange dog. Even one who appears to be friendly can suddenly become agitated. If a dog or other menacing animal blocks the path between you and the respondent’s door, be careful. If the dog is obviously aggressive, do not put yourself in a dangerous situation. Try to get the attention of someone living in the household and ask him or her to restrain the dog while the two of you talk.

It is possible that respondents themselves will cause you to be concerned about your safety. Although the vast majority of respondents are cooperative, some are not so nice. You should expect to receive some level of verbal abuse from some individuals which, unfortunately, comes with the territory of a Field Interviewer. Do not place yourself at risk for physical assault. If anyone (the respondent or any other person in the household) becomes physically confrontational or violent or threatens you in any way with a real or stated weapon, get away from that residence immediately. Talk with your supervisor about what happened, and together you will form a plan about how, or if, that particular address should be approached again.

5.6.2 Use of Escorts

Addresses will be located throughout Los Angeles County. You will need to be very aware of the social climate in which you work since it can have a direct impact on your success. In areas where you perceive an unacceptable level of risk, we encourage you to use escorts. The following is our policy on escorts:
- It will be each FI’s responsibility to find and retain an escort. An escort can be a friend or family member. In the event that you cannot locate an appropriate escort on your own, contact your FS for assistance.

- RTI does not provide bonded or insured escorts.

- You must get verbal approval from your supervisor before using an escort.

- Escorts are paid on an hourly basis by the Field Interviewer (see Chapter 14 for details).

We do not want to alienate respondents but we also do not want interviewers in dangerous situations. Escorts should travel with you and act as a second presence in the area but, in most cases, should not accompany you to the door. With the study’s heavy emphasis on confidentiality, we want our approach to the actual household to be as non-threatening as possible. Given the emphasis on a private setting for conducting the interviews, escorts must remain in the car while you work. Of course, you may not discuss any of the specifics of the case with the escort.

5.6.3 Working Safely

When working in what you feel is a high-risk area, discuss the situation with your FS. Below are some general safety tips on working safely and smartly.

Area

- Be aware of the area—assess the situation and observe people. Stay alert and tuned in to your surroundings. Do not daydream. Know where you are going and walk with confidence.

- Observe the nearest telephone, business, police station, fire station or public building, and know their hours of operation.

- Put possessions in the trunk of your car before entering the area. Do not leave things visible in your car, particularly your computer.

- Carry computer equipment as inconspicuously as possible.

- Talk to children. They can be helpful passing along information about who you are.

- If anyone asks who you are, briefly tell them who you are and what you are doing. They may pass the word along.

- Park your car in a convenient area. Move it as necessary as you work.

- Avoid taking short cuts through dark or wooded areas. Avoid walking where there are tall hedges or shrubs.
Dress

- Do not wear jewelry.
- Do not carry a purse. Put your keys, a couple of dollars, and change for a pay phone in a pocket.
- Keep your FI photo ID badge visible.
- Keep dress professional and not too casual.
- We strongly recommend wearing flat shoes during field work.

Multi-unit Buildings

- Carry a flashlight—apartment building hallways can be dark even during the daytime. Light bulbs may be burned out or broken.
- Make noise, such as a low whistle or rattle your keys as you walk in the hallway or up a stairway. You do not want to startle or surprise anyone who might be hanging around.
- Go right to the selected apartment address and do your business—do not look interested in what people are doing in the hallway. Do not stare. You should acknowledge them with a nod, smile or brief eye contact, but go directly to the apartment—that is your task.
- Ignore other things going on in the apartment building. Be aware, but do not concentrate on what is going on. Your main function is to find the selected apartment. If you look too interested people will think, “What do you want? What are you looking at?”
- When walking up stairs—look UP.
6. SCREENING AND ELIGIBILITY OF NEW ENTRANTS

6.1 Introduction

One of your tasks as a field interviewer for L.A. FANS-2 is to screen new entrant households. During screening, you will obtain information about the household residents that determines whether the household is eligible to participate in the study. This chapter describes that process. Every new entrant household must be screened, but not every one will be eligible for the study. Since you identify eligible households through the screening process, it is a very important component of your assignment.

6.2 Screening New Entrant Households

The L.A. FANS-2 screening form is a seven-page booklet that serves a number of purposes. On the front page of the form information will be pre-printed in the “Type of Household” box indicating the type of new entrant household. Information will also be pre-printed in the “Household Information” box, including the Census tract, Census block, Case ID, street address, and notes with additional information to locate the address.

Screening instructions, an introduction statement, and screening questions are on the second and third pages of the screening form. The fourth page of the form includes instructions to determine if the screened household is eligible for the study, and page five contains some observation items for you to complete and a box to record verification information. The remaining pages contain Record of Screening Contacts sheets for you to report all visits to that particular household to complete the screening, a page to enter notes, and a place to enter the final screening result. As you approach the household, be sure to have the correct screening form for that address.

The Spanish-language version of the screening questions appears on the form just below the English-language version. Remember, only RTI-certified bilingual interviewers may conduct screenings and interviews in Spanish. If you are not an RTI-certified bilingual interviewer and encounter a Spanish-speaking only household, hand the resident a copy of the purple “Sorry I Don’t Speak Spanish” flyer, assign the appropriate result code (see Section 6.4.2), and inform your FS so that he/she can transfer the case to a bilingual interviewer. Translators cannot be used to conduct screenings in households where neither English nor Spanish is spoken. In these instances, assign the pending code for “Language Barrier–Other” (see Section 6.4.2), then discuss finalizing the case with your FS. Also indicate on the screening form that no screening was conducted (see Section 6.4.2).
6.2.1 Conducting the Screening

To conduct the screening, you will need to access information on pages 2 and 3 of the L.A. FANS-2 screening form. Exhibit 6-1 and Exhibit 6-2, respectively, show these pages. Your instructions for screening begin at the top of the second page (“PART 1. INTRODUCTION: YOU SHOULD ALWAYS”). Your first task is to identify an eligible screening respondent, and the bulleted instructions in this section of the form guide you through that process. As mentioned in earlier chapters, you should first state your name and show your identification badge, then explain that you are conducting a neighborhood study for RTI, a not-for-profit research organization.

Ask to speak to an adult member of the household (18 years of age or older). If no adult is home, find out the best day and time of day to return. Once you are speaking to an adult, confirm that the adult lives in the household. You do not have to determine how much the adult lives in the household (i.e., full- or part-time), only that he/she lives there. Then mention to the resident that a letter about the survey was mailed to the household and be prepared to easily and quickly hand over another copy of the lead letter. Next, briefly explain the purpose of your visit by reading the scripted consent statement on Page 2 of the screening form. If the resident is hesitant to answer the screening questions, offer a copy of the Q&A brochure. If the respondent is still uncertain about participation, try to allay his/her concerns by following techniques described in Chapter 5. Be sure to point out to the respondent that the screening questions will take just a few minutes.

After the respondent has agreed to participate in the screening, move on to Part 2 of the screening form (on page 3) and ask the screening questions:

S1. Several years ago, that is in [MONTH, YEAR OF W1 INTERVIEW], did you or any member of your household live in this same house?

S2. Here is a map of this neighborhood you live in. Several years ago, that is in [MONTH, YEAR OF W1 INTERVIEW], did you or any member of your household live in this neighborhood (either in this house or somewhere else) or did everyone live outside this neighborhood?

S3. Including yourself, how many adults age 18 and older usually live or stay in this household?

S4. And how many children age 17 and younger usually live or stay in this household?
INITIAL VISIT TO THE ADDRESS: YOU SHOULD ALWAYS

• COMPLETE DWELLING CHARACTERISTIC ITEMS A1 AND A2 ON PAGE 5.

PART 1. INTRODUCTION: YOU SHOULD ALWAYS

• SHOW YOUR RTI ID CARD. BE PREPARED TO GIVE THE RESIDENT A COPY OF THE LEAD LETTER AND BROCHURE IN CASE THEY DIDN’T RECEIVE THE INITIAL PACKET OR THEY WANT MORE INFORMATION.

• READ THE CONSENT STATEMENT WHICH DESCRIBES THE PURPOSE OF YOUR VISIT:

My name is ______________ and I work for RTI international, a nonprofit research organization.

I am in your neighborhood conducting an interview study on families and neighborhoods for the RAND Corporation and UCLA. I need to speak to someone who lives here who is at least 18 years old. Would that be you?

The study is called the Los Angeles Family and Neighborhood Survey. We sent you a letter describing the study about a week ago. Do you remember getting it?

I would like to ask you a few questions about people who live here now and those who lived here several years ago to determine if your household is eligible to participate in the study. It will only take a few minutes.

Your participation is entirely voluntary and you can stop at any time. Are you willing to answer a few questions?

Me llamo ________________________ y trabajo para RTI International, una organización sin fines de lucro.

Estoy en su vecindad realizando un estudio sobre familias y vecindades para RAND Corporation y la Universidad de California en Los Ángeles (UCLA, por sus siglas en inglés). Necesito hablar con alguien que viva aquí que tenga por lo menos dieciocho años de edad. ¿Sería usted mayor de edad?

El estudio se llama Encuesta Comunitaria de Los Ángeles. Hace una semana le mandamos una carta que describe el estudio. ¿Se acuerda usted de recibirla?

Quisiera hacerle unas pocas preguntas sobre las personas que viven aquí ahora y sobre los que vivían aquí hace unos años para determinar si su hogar tiene los requisitos para participar en el estudio. Ésto solamente tomará unos minutos.

Su participación es completamente voluntaria y usted puede dejar de contestar en cualquier momento. ¿Está dispuesto(a) a contestar algunas preguntas?

• PROVIDE ADDITIONAL INFORMATION IF NEEDED TO ANSWER QUESTIONS AND RESPOND TO CONCERNS, AND THEN ASK THE SCREENER QUESTIONS IN PART 2.
PART 2. ASK SCREENER QUESTIONS: RECORD ANSWERS IN SPACE BELOW

S1. Several years ago, that is in (FILL W1 INTERVIEW DATE), did you or any member of your household live in this same house?

Hace unos años, es decir en (FILL W1 INTERVIEW DATE), ¿usted o algún miembro de su hogar vivió en esta misma casa?

☐ YES ➔ GO TO PART 3A  ☐ NO  ☐ DON’T KNOW  ☐ REFUSED

S2. Here is a map of this neighborhood you live in. Several years ago, that is in (FILL W1 INTERVIEW DATE), did you or any member of your household live in this neighborhood (either in this house or somewhere else) or did everyone live outside this neighborhood?

Aquí hay un mapa del barrio o vecindad en la que usted vive. Hace unos años, es decir en (FILL W1 INTERVIEW DATE), ¿usted o algún miembro de su hogar vivió en esta vivienda (en esta casa o en otro lugar) o todos vivieron fuera de este barrio o vecindad?

☐ IN NEIGHBORHOOD (SHOWN ON MAP) ➔ GO TO PART 3A
☐ OUTSIDE NEIGHBORHOOD  ☐ DON’T KNOW  ☐ REFUSED

S3. Including yourself, how many adults age 18 and older usually live or stay in this household?

Incluyéndolo/a a usted, ¿cuántos adultos de 18 años o mayores normalmente viven o se quedan en este hogar?

NUMBER OF ADULTS (18 AND OLDER): ______  OR  ☐ NONE  ☐ REFUSED

S4. And how many children age 17 and younger usually live or stay in this household?

¿Y cuántos niños de 17 años o menores normalmente viven o se quedan en este hogar?

NUMBER OF CHILDREN (17 AND YOUNGER): ______  OR  ☐ NONE  ☐ REFUSED

GO TO PART 3B
Record answers to these questions in the space provided. Be prepared for respondents to ask “what do you mean by ‘usually’?” “Usually” means at least half-time—that is, a person stays overnight in the household about four nights a week (on average) or around 15 nights per month.

Based on responses to items S1 – S4, follow the instructions in Part 3A or Part 3B (see Exhibit 6-3) to determine if the household is eligible.

- If at least one current household member resided in the same dwelling or in the same neighborhood at Wave 1, go to Part 3A. Circle the HH Type indicated on the cover of the screening form.

- Check the appropriate box based on the HH type.

  - If HH Type is “W1 Vacant Dwelling”, “W1 Ineligible”, or “New Construction” follow the instructions to code the case as 290 – Household Not Eligible. State the text as written to the participant, informing the participant that the household was not selected for the study and requesting the participant can still help you out. Follow instructions to go to Section B – Case Information on Page 5 and complete items B1 – B4. Thank the respondent for his/her time.

    - If “W1 Complete Turnover” is checked in the “Type of Household” box, then this household may be incorrectly classified as a complete turnover dwelling from the panel contact attempt at the W1 address. You should review the panel tracking form information and make necessary corrections before continuing.

- If all members of the household did not reside in the same dwelling or within the neighborhood (according to review of the map) at Wave 1, follow the instructions to go to Part 3B to determine if the household is eligible.

- If the household has children age 17 or younger, place a check mark in the first box in Part 3B. The household is eligible for the study. Follow the instructions to code the case as 291 – Household is Eligible, and then go to Part 4. Follow the instructions to instruction to inform the screening respondent that the household is eligible and complete observations and collect verification information on Page 5. Follow protocol to explain the study, and persuade the household to participate in the next step – completion of the roster – to determine which household members are selected for interviews.

- If the household has no children, place a check mark in the second box in Part 3B. Next, check the eligibility information in the Household Information Box on the front page to see if a “Household without children” is to be selected.
- If YES is indicated, mark the circle next to “HH without children to be selected: Yes”. Follow the instructions to code the case as 292 – Household is Eligible, and then go to Part 4. Follow the instructions to inform the screening respondent that the household is eligible and complete observations and collect verification information on Page 5. Follow protocol to explain the study, and persuade the household to participate in the next step – completion of the roster – to determine which household members are selected for interviews.

- If NO is indicated, mark the circle next to “HH without children to be selected: No”. Follow the instructions to code the case as 290 – Household is Not Eligible. State the text as written to the participant, informing the participant that the household was not selected for the study and requesting the participant can still help you out. Follow instructions to go to Section B – Case Information on Page 5 and complete items B1 – B4. Thank the respondent for his/her time.

### 6.2.2 Completing Interviewer Observation of Dwelling Characteristics and Collecting Verification Information

As instructed at the top of Page 2, during your initial visit to the address you should always complete the dwelling characteristic items A1 and A2 on Page 5 of the form (see Exhibit 6-4). In item A1 you will indicate the type of housing, and in A2 you will estimate how much the place would cost to rent per month.

On the bottom part of page 5 you should attempt to collect verification information for all new entrant households in your assignment. When asking for this information, read the script as written on the form: “May I have your full name and telephone number so that one of my supervisors can contact you to verify the quality of my work?” Then enter the information in items B1 and B2. If the resident refuses, say “Some households I visit are re-contacted to verify that I have been here, doing my job. They will only ask a few questions to make sure I was here and that I was professional.” Emphasize it is used only to verify the quality of your work. Consider leaving a Q&A Brochure that might help the respondent remember your visit. If the individual still refuses, check the appropriate box(es).

When gathering verification information, try to get a home number rather than a work number or a beeper or pager number. Enter any notes in the Record of Screening Contacts (see Section 6.3) that would help the person conducting the verification. For instance, if the resident gives a work phone, enter the extension number or department name. If you had trouble reaching the resident, the verifier probably will too, so provide information on the best days and times to call. For example, write down if the person works a second or third shift, so calling before 11:00 am is not good because of sleeping patterns.

In item B3 on the bottom of page 5, circle whether the screening was conducted in English or Spanish, or circle “No Interview” if the screening was not completed. Next, complete item B4 for all households as follows:
1. For ineligible or refusal households where the screening question on the number of children is not asked, circle a response at item B4 based on observation. If there is evidence of children living or not living in the household mark item B4 to indicate household without or with children. If you cannot tell based on observation, mark B4 as "Unable to determine".

2. For households where the screening respondent provides a response on the number of children, mark item B4 appropriately based on whether the participant indicated children living within the household at item S4.

3. For vacant households, circle option 3 “Don't Know/Unable to Determine” at item B4.

6.2.3 Completing the Screening

After the screening is complete, answer the FI observation questions for the screening respondent in the middle of page 5. Indicate if the screener respondent is male or female, estimate his/her age, and assess (by observation) the individual’s race/ethnicity.

Enter the final screening result code in the Record of Screening Contacts and in the Final Screening Result Information section (page 7 of form). This includes the final screening result of 290 (not eligible), 291 (eligible household with kids), 292 (eligible household without kids), and other final non-screening results. Also enter the date the screening was finalized.
PART 3A. DETERMINE IF HOUSEHOLD IS ELIGIBLE (CHECK ONE BOX ONLY):

FIRST, CIRCLE HH TYPE INDICATED ON COVER:

- W1 VACANT DWELLING
- W1 INELIGIBLE
- NEW CONSTRUCTION

☐ IF ONE OF THE ABOVE IS CIRCLED ⇒ HH IS NOT ELIGIBLE (CODE 290 IN ROC)

Your household was not selected for the study but you can still help me out.
Su hogar no fue seleccionado para este estudio pero usted todavía puede colaborar.

GO TO SECTION B – CASE INFORMATION ON PAGE 5 AND COLLECT INFORMATION

☐ HH TYPE ON COVER INDICATES “W1 COMPLETE TURNOVER” ⇒ THIS MAY BE INCORRECT. REVIEW THE TRACKING FORM AND MAKE ANY NECESSARY CORRECTIONS BEFORE CONTINUING.

PART 3B. DETERMINE IF HOUSEHOLD IS ELIGIBLE (CHECK ONE BOX ONLY):

☐ HOUSEHOLD HAS CHILDREN AGE 17 OR YOUNGER AND NOBODY IN THE HOUSEHOLD RESIDED IN THIS DWELLING OR ELSEWHERE IN THE NEIGHBORHOOD AT W1 ⇒ HH IS ELIGIBLE (CODE 291 IN ROC) ⇒ GO TO PART 4

☐ HOUSEHOLD DOES NOT HAVE CHILDREN AND NOBODY IN THE HOUSEHOLD RESIDED IN THIS DWELLING OR ELSEWHERE IN THE NEIGHBORHOOD AT W1 ⇒ CHECK ELIGIBILITY IN HOUSEHOLD INFORMATION BOX ON COVER.

- HH without children to be selected: Yes ⇒ HH ELIGIBLE (CODE 292) GO TO PART 4
- HH without children to be selected: No ⇒ HH NOT ELIGIBLE (CODE 290)

Your household was not selected for the study but you can still help me out.
Su hogar no fue seleccionado para este estudio pero usted todavía puede colaborar.

GO TO SECTION B – CASE INFORMATION ON PAGE 5 AND COLLECT INFORMATION

PART 4.

ELIGIBLE HOUSEHOLDS: INFORM RESPONDENT HOUSEHOLD IS ELIGIBLE. COMPLETE OBSERVATIONS AND COLLECT VERIFICATION INFORMATION ON PAGE 5. FOLLOW PROTOCOL TO EXPLAIN STUDY AND PERSUADE HH TO PARTICIPATE IN THE NEXT STEP – COMPLETING A ROSTER.
### A. INTERVIEWER OBSERVATIONS: DWELLING CHARACTERISTICS

(CIRCLE ONE RESPONSE FOR A1 AND A2 AFTER FIRST VISIT TO HOUSEHOLD)

<table>
<thead>
<tr>
<th>A1. WHAT TYPE OF HOUSING IS THIS?</th>
<th>A2. WHAT IS YOUR BEST ESTIMATE OF HOW MUCH THIS PLACE WOULD COST TO RENT PER MONTH?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. APARTMENT</td>
<td>1. LESS THAN $500 PER MONTH</td>
</tr>
<tr>
<td>2. SINGLE FAMILY HOME</td>
<td>2. $500 TO $999 PER MONTH</td>
</tr>
<tr>
<td>3. MOBILE HOME OR TRAILER</td>
<td>3. $1000 TO $1999 PER MONTH</td>
</tr>
<tr>
<td>4. UNIT IN A ROOMING HOUSE</td>
<td>4. $2000 TO $2999 PER MONTH</td>
</tr>
<tr>
<td>5. DUPLEX</td>
<td>5. $3000 PER MONTH OR MORE</td>
</tr>
<tr>
<td>6. CONDOMINIUM</td>
<td></td>
</tr>
<tr>
<td>7. OTHER, SPECIFY: ________________</td>
<td></td>
</tr>
</tbody>
</table>

### INTERVIEWER OBSERVATIONS FOR SCREENING RESPONDENT

CHECK BOXES FOR SCREENER RESPONDENT

<table>
<thead>
<tr>
<th>Code Race or Races You Would Say Screener Respondent Is If You Did Not Know Anything About Him/her</th>
</tr>
</thead>
<tbody>
<tr>
<td>CIRCLE ALL THAT APPLY</td>
</tr>
<tr>
<td>1. LATINO</td>
</tr>
<tr>
<td>2. WHITE</td>
</tr>
<tr>
<td>3. AFRICAN-AMERICAN, BLACK</td>
</tr>
<tr>
<td>4. ASIAN</td>
</tr>
<tr>
<td>5. PACIFIC ISLANDER</td>
</tr>
<tr>
<td>6. NATIVE AMERICAN/AMERICAN INDIAN</td>
</tr>
</tbody>
</table>

### B. CASE INFORMATION (COLLECT AFTER CASE IS FINALIZED OR AFTER SCREENING IS COMPLETE)

May I have your full name and telephone number so that one of my supervisors can contact you to verify the quality of my work?

¿Me podría dar su nombre completo y su número de teléfono para que mis supervisores se comuniquen con usted para verificar la calidad de mi trabajo?

<table>
<thead>
<tr>
<th>B1. FIRST NAME</th>
<th></th>
<th>MI</th>
<th>LAST NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ SR WOULD NOT PROVIDE NAME</td>
<td></td>
<td></td>
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</tbody>
</table>

| B2. PHONE: (          )  ____ -___________ | |
| □ SR WOULD NOT PROVIDE | |

<table>
<thead>
<tr>
<th>B3. SCREENER LANGUAGE</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>1. ENGLISH</td>
<td></td>
</tr>
<tr>
<td>2. SPANISH</td>
<td></td>
</tr>
<tr>
<td>3. NO INTERVIEW</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>B4. HOUSEHOLD TYPE</th>
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</tr>
</thead>
<tbody>
<tr>
<td>1. HOUSEHOLD WITHOUT CHILDREN</td>
<td></td>
</tr>
<tr>
<td>2. HOUSEHOLD WITH CHILD</td>
<td></td>
</tr>
<tr>
<td>3. DON’T KNOW/UNABLE TO DETERMINE</td>
<td></td>
</tr>
</tbody>
</table>
If you cannot conduct a screening at the household (e.g., the DU is vacant, no one in the household speaks English or Spanish), at B3 circle “3. No interview” and record the name and telephone number of the contact person that supplied this information (e.g., landlord, real estate agent). Even though your contact was limited, on the front of the screening form complete as much information as possible about that household.

If a household is eligible for the study, focus on continuing the interviewing process. Once you have determined the household is eligible to participate, you need to roster the household on your computer to determine which household members are selected for interviews (see Chapter 7).

6.3 Record of Screening Contacts

The Record of Screening Contacts (ROC) is where you report all contacts made with a household. This includes any attempted or actual contact with a resident, neighbor, or other person. Start ROC entries on page 6, located after Part 4 of the screening form (Exhibit 6.5). You must document all steps taken to work a case in the ROC, including multiple activities you may do on the same day. For example, if you visit the household once and find no one home, then visit the household again two hours later, fully document both contacts separately in the ROC. For each contact, record the date, day of the week, and time of day. Record the method of contact, the appropriate screening result code, and any comments about this contact for future use by you or another staff member. If you need to enter extensive notes about an ROC, continue your comments in the box on page 7 of the form, titled “Screening Notes/Comments” (Exhibit 6.6). When you assign a final screening code, enter that information at the bottom of page 7 of the screening form under “Final Screening Result Information.”

After each day of work, transfer that day’s ROC entries from each Screening Form to the corresponding case in the CMS on your laptop computer.

6.4 Documenting Your Work with Event Codes

Keeping track of work conducted on a case is a vital part of effective interviewing. The main record of work completed is the series of event codes you record both on paper and electronically in the Case Management System (CMS) on the laptop. Event codes are assigned and reported during the process of screening and interviewing households. This log of events creates a record of all steps taken during your work and will be valuable because it provides a history of work on the case, including contacting or tracing steps. Since event codes describe the current status of each case, they are discussed routinely with your supervisor.
## Exhibit 6-5 Record of Screening Contacts

<table>
<thead>
<tr>
<th>Date</th>
<th>Day</th>
<th>Time</th>
<th>Type of Contact</th>
<th>Comments</th>
<th>Code</th>
<th>FI Initials</th>
<th>In CMS</th>
</tr>
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<tbody>
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</tbody>
</table>
Each time you transmit data from your laptop to RTI, the result codes entered in the CMS are also transmitted. These codes are tabulated to produce reports that provide information on the progress of the fieldwork. RTI staff and project management rely heavily on these progress reports. Decisions on how to properly manage the project are made based on these reports. It is very important that you understand when and why to use each code. It is critical to keep the codes on your cases in the CMS up-to-date as you complete your work in the field.
6.4.1 Pending Versus Final Event Codes

You will assign and enter pending and final event codes on the ROC and into the CMS in your computer, and discuss them with your FS throughout the data collection period. Pending codes mean that the case has not been completed, and final codes indicate the case has reached a final status.

Screening codes 101-189 are “PENDING” codes and indicate that a final resolution has not yet been obtained; codes 219-292 are “FINAL” screening codes that show a screening effort is complete. All L.A. FANS-2 pending and final result codes for screening appear on page 8 of the screening form.

6.4.2 Pending Screening Event Codes

You will assign a screening event code for every attempt you make to screen the new entrant address. Until you complete screening or otherwise finalize the case (with the guidance of your supervisor), assign pending screening codes to indicate the status of the case. Explanations of when to use a particular code and what steps to take to resolve the situation so the case can be completed are provided in the event codes list that follows, which presents the following information:

- Code number;
- Brief description or name of the code;
- Explanation of the code’s use; and
- The “Action” line, which will display the typical next step to take after a particular code is assigned.

101 NO ACTION TAKEN

USE WHEN: A case is new and has had no work done on it.

ACTION: None. This code appears automatically in the CMS when the case is assigned. FIs never enter this code.

119 ACCESS DENIED TO BUILDING/COMPLEX

USE WHEN: You are denied access to a building or complex by a Property Manager or other person in authority.

ACTION: DO NOT antagonize the property manager. Leave the door open for additional contact, either by you or your supervisor.

To the extent possible, determine the property manager’s concerns and gather as much information as possible (property manager’s name, telephone number, etc.).

Record the visit in your ROC. Make detailed notes while the incident is still fresh. By recording what happened, you will greatly assist your FS in deciding how to handle the case.
Discuss the situation with your supervisor and together develop a strategy for trying to gain access. Your supervisor may decide to send a letter or call the property manager.

120  **NO ONE HOME**

**USE WHEN:** No one is at the respondent’s residence at the time of phone or in-person contact. Use this code if you get an answering machine in a telephone contact attempt.

**ACTION:** Plan another call or visit at a different time of day or another day of the week.

If you have a telephone number, try to contact the respondent by phone to establish a time to meet.

Ask a neighbor when a good time would be to catch someone at home. Record any information in the ROC and in the CMS.

121  **SCREENING RESPONDENT NOT HOME**

**USE WHEN:** Someone is at the DU but that person is not an eligible screening respondent (such as a minor, a babysitter, or a housekeeper). The Screening Respondent **MUST** be an adult resident of the DU.

**ACTION:** Plan another visit at a different time of day or another day of the week.

Try to determine a good time to catch someone at home by asking for a day and time when you should return.

Record the visit and any pertinent information in your ROC.

122  **SCREENING RESPONDENT UNAVAILABLE**

**USE WHEN:** An eligible screening respondent is home but is not available to conduct the screening.

**ACTION:** Plan another visit at a different time of day or another day of the week.

Try to determine a good time to catch someone at home by asking for a day and time when you should return.

Record the visit and any pertinent information in your ROC.
130  **APPOINTMENT MADE FOR SCREENING**

**USE WHEN:** You have spoken with a screening respondent and have set a time to conduct the screening.

**ACTION:** Note the appointment in your calendar and complete an appointment card.

Record the visit, the appointment, and any other pertinent information in your ROC.

135  **APPOINTMENT BROKEN**

**USE WHEN:** This code cannot be assigned by FIs.

**ACTION:** Record the visit along with any pertinent details in your ROC and code the case according to the situation (no one home, respondent not available, etc.).

The CMS will convert the event code you entered into status code 135.

140  **VACANT**

**USE WHEN:** A neighbor, landlord, or other informant indicates the DU is vacant.

**ACTION:** Obtain verification information from the informant.

Record the visit and any other pertinent information in your ROC.

141  **GQU (Group Quarter Unit)**

**USE WHEN:** The DU is a Group Quarters (GQU) where 5 or more unrelated individuals live at the same address. **Exception:** a caretaker lives within the Group Quarters and uses a room for his/her living quarters (the caretaker’s room qualifies as a DU).

**ACTION:** Obtain verification information from the informant.

Record the visit and any other pertinent information in your ROC.

144  **NOT A DU**

**USE WHEN:** The DU is not a residence but is a business or other non-residential entity.

**ACTION:** Obtain verification information from the informant.

Record the visit and any other pertinent information in your ROC.
160 SCREENING REFUSAL

USE WHEN: The screening respondent you are talking with refuses to allow you to proceed with the screening process.

ACTION: Tactfully try to persuade the respondent to answer the few screening questions (see Chapter 5 for information about overcoming refusals and obtaining participation).

DO NOT antagonize the respondent. Leave the door open for an attempt to convert, either by you or someone else. The decision is up to your supervisor.

As much as possible, determine the reason for the refusal.

Record the visit in your ROC. Indicate the reason for the refusal.

If possible, note in the ROC if another eligible screening respondent is at the household.

Make detailed notes while the incident is still fresh in your mind. By recording what happened, you will greatly assist your supervisor in deciding how to handle the case and will help the next FI, if someone else tries to convert the case.

170 LANGUAGE BARRIER - SPANISH

USE WHEN: The screening respondent speaks Spanish and does not speak English well enough to complete the screening. RTI-Certified bilingual FIs may complete screenings in Spanish.

ACTION: Try to locate another eligible screening respondent in the household who speaks English.

Record the visit and any pertinent information in your ROC.

Inform your supervisor as soon as possible so that case can be transferred to bilingual FI.

*RTI-Certified bilinguals should never use this code.*
171 LANGUAGE BARRIER - OTHER (SPECIFY)

USE WHEN: The screening respondent speaks a language other than English or Spanish and does not speak English well enough to complete screening.

ACTION: Try to locate another eligible screening respondent in the household who speaks English.

When entering the visit and any pertinent information in your ROC and in the CMS, specify the language (including sign language) in the notes section.

Be prepared to discuss this information with your supervisor during your weekly call. There can be NO translators for an interview.

175 PHYSICALLY/MENTALLY INCAPABLE (SPECIFY)

USE WHEN: No one at the unit is physically or mentally able to respond meaningfully to the screening questions. Examples are respondents who may be ill, have severe speech disorders, are deaf (if they do not use sign language; if they use sign language, but no other language, code as 171), have pronounced mental retardation, autism, psychosis, or are intoxicated.

ACTION: Attempt to locate a competent adult resident of the DU.

If the limitations seem temporary, return to the DU on a different day or at a different time.

If the limitations seem permanent and no other possible screening respondent resides in the DU, verify the information with a neighbor (as appropriate), and check with your supervisor.

Record the visit and any pertinent information in your ROC.

180 UNABLE TO LOCATE DU

USE WHEN: You are unable to determine the exact location of the dwelling unit.

ACTION: Ask for directions to the general area. Ask at the police station, the fire house, or other public place. If needed, you may give an exact address as long as you DO NOT state the specific reason you are trying to find the unit. Mentioning you are an interviewer contacting the address for participation in an important survey is fine—stating you want to interview someone for the Los Angeles Family and Neighborhood Study is not.

Contact your supervisor for additional instructions.

Record the visit and any pertinent information in your ROC.
189 **OTHER (SPECIFY)**

**USE WHEN:** The situation you encounter does not fit into any of the above categories. Examples may include situations where you are unable to approach the address because it is protected by a dog or where you encounter hostile residents.

**ACTION:** Record the visit in your ROC and describe the situation in the comments section.

Discuss with your supervisor how to handle the case.

*Special pending codes used for indicating in the CID_CT the status of screening at the Complete Turnover address (when working Panel Cases):*

150 **CID_CT NOT NEEDED**

**ENTER IN CID_CT WHEN:** You determine that screening at the complete turnover address is not required.

190 **SCREENING COMPLETE WITH COMPLETE TURNOVER - HOUSEHOLD NOT ELIGIBLE**

**ENTER IN CID_CT WHEN:** You complete the screening at the complete turnover household but the household was not selected for the study.

191 **SCREENING COMPLETE WITH COMPLETE TURNOVER - ELIGIBLE HOUSEHOLD WITH CHILDREN**

**ENTER IN CID_CT WHEN:** You complete the screening at the complete turnover household and the household with children is eligible for the study.

192 **SCREENING COMPLETE WITH COMPLETE TURNOVER - ELIGIBLE HOUSEHOLD WITHOUT CHILDREN**

**ENTER IN CID_CT WHEN:** You complete the screening at the complete turnover household and the household without children is eligible for the study.
6.2.3 Final Screening Codes

Final screening codes indicate that screening activities at that household are finished. This means that either screening information was obtained OR the household is ineligible for the study (e.g., a GQU) OR you were unable to obtain the screening information. Be sure you have completed all suggested relevant steps described in the pending codes section and have consulted your supervisor on any additional possible steps before requesting permission to finalize a case where you could not obtain screening information. If all attempts fail, your supervisor must agree that the case is complete before assigning a non-response final screening code. The list below describes final codes for screening. Some codes can only be assigned by the field supervisor:

219 ACCESS DENIED TO BUILDING/COMPLEX

USE WHEN: You will be unable to assign this code. Your FS will assign this code if you are unequivocally denied access to a building or complex by a property manager or other person in authority and your supervisor agrees to finalize the case.

220 NO ONE AT DU AFTER REPEATED VISITS

USE WHEN: You will be unable to assign this code. Your FS will assign this code if repeated visits at different times of the day and days of the week have failed to find anyone at home.

222 SCREENING RESPONDENT UNAVAILABLE AFTER REPEATED VISITS

USE WHEN: You will be unable to assign this code. Your FS will assign this code if repeated visits at different times of the day and days of the week have failed to find an eligible SR at home.

240 VACANT

USE WHEN: You have verified with a neighbor, landlord, or real estate agent that the DU is vacant.

241 GQU LISTED AS A DU

USE WHEN: Use when a GQU is a dwelling unit with 5 or more unrelated individuals living at the same address. Possible examples are units such as boarding or fraternity houses. These types of dwellings are not eligible for L.A. FANS-2. Exception: a caretaker lives within the Group Quarters and uses a room for his/her living quarters (the caretaker’s room qualifies as a DU).
NOT A DU

**USE WHEN:** After verifying with a neighbor, landlord, or real estate agent that the unit is not a residence. Possible examples are units that have been demolished or merged with another unit, a unit used by a church or nonprofit organization as a meeting facility, or a unit used only for business or storage.

SCREENING REFUSAL

**USE WHEN:** You will be unable to assign this code. Your FS will assign this code if all attempts to convert the refusal have been unsuccessful. You will need to indicate a refusal reason on the ROC. Be sure you have made accurate notes about the situation.

LANGUAGE BARRIER - SPANISH

**USE WHEN:** You will be unable to assign this code. Your FS will assign this code if the case cannot be transferred to an RTI-Certified bilingual FI. RTI-Certified bilinguals should never use this code.

LANGUAGE BARRIER - OTHER

**USE WHEN:** You will be unable to assign this code. Your FS will assign this code if the screening respondent speaks a language other than English or Spanish and does not speak English well enough to complete screening.

PHYSICALLY/MENTALLY INCAPABLE (SPECIFY)

**USE WHEN:** You will be unable to assign this code. Your FS will assign this code if no one at the DU is able to respond meaningfully to the screening questions.

UNABLE TO LOCATE DU

**USE WHEN:** You will be unable to assign this code. Your FS will assign this code if, after multiple attempts, you are unable to locate the DU.

OTHER (SPECIFY)

**USE WHEN:** You will be unable to assign this code. Your FS will assign this code for all cases that do not fit any of the above categories. Be sure you have fully described the situation to your supervisor. Be sure to document the circumstances.
The following codes are automatically assigned by the CMS based on your input to the CID.

For New Entrant Cases:

290  **HOUSEHOLD NOT ELIGIBLE**

**ASSIGNED BY COMPUTER IN CMS:** If you indicate in the CID that the household was not selected for the study but did complete the screening (i.e., a HH without children where the front of the screening form indicates “N”). Remember to gather the verification information at B1 and complete the front of the screening form.

291  **ELIGIBLE HOUSEHOLD WITH CHILDREN**

**ASSIGNED BY COMPUTER IN CMS:** If you indicate in the CID that the household is eligible and has children 17 or younger.

292  **ELIGIBLE HOUSEHOLD WITHOUT CHILDREN**

**ASSIGNED BY COMPUTER IN CMS:** If you indicate in the CID that no children live in the household but the household was selected for the study (i.e., a HH without kids where the front of the screening form indicates “Y”).

For Panel Cases (described in Section 7.4 of FI Manual):

293  **PANEL**

**ASSIGNED BY COMPUTER IN CMS:** If you indicate in the CID that one or more panel members are still living at the Wave 1 Panel address.

294  **PANEL – WAVE 1 ADDRESS STATUS UNKNOWN**

**ASSIGNED BY COMPUTER IN CMS:** If you indicate in the CID that the status of Panel members still living at the Wave 1 Panel address is unknown.

295  **PANEL – COMPLETE TURNOVER HOUSEHOLD (ELIGIBLE)**

**ASSIGNED BY COMPUTER IN CMS:** If you indicate in the CID that the Wave 1 address is a complete turnover dwelling (i.e., no members of the Wave 1 roster still live at the address) that is eligible for the study.
Special final codes used for indicating in the CID_CT the status of screening at the Complete Turnover address (when working Panel Cases):

250  CID_CT NOT NEEDED

ENTER IN CID_CT WHEN: Final code to indicate that screening at the complete turnover address is not required.

290  SCREENING COMPLETE WITH COMPLETE TURNOVER - HOUSEHOLD NOT ELIGIBLE

ENTERED IN CID_CT WHEN: Assigned by supervisor in CID_CT case to indicate you completed screening at the complete turnover household but the household was not selected for the study.

291  SCREENING COMPLETE WITH COMPLETE TURNOVER - ELIGIBLE HOUSEHOLD WITH CHILDREN

ENTERED IN CID_CT WHEN: Assigned by supervisor in CID_CT case to indicate you completed screening at the complete turnover household and the household with children is eligible for the study.

292  SCREENING COMPLETE WITH COMPLETE TURNOVER - ELIGIBLE HOUSEHOLD WITHOUT CHILDREN

ENTERED IN CID_CT WHEN: Assigned by supervisor in CID_CT to indicate you completed screening at the complete turnover household and the household without children is eligible for the study.
7. ROSTERING AND SELECTION

7.1 Introduction

This chapter provides guidelines to follow in the CAI survey administration process and discusses steps to complete the Case Initiation Database (CID) and the household roster. Details on L.A. FANS-2 interviews are provided in Chapter 8, while instructions for using the L.A. FANS-2 Case Management System are outlined in Chapter 5 of the FI Computer Manual.

7.2 Standardizing the Process

The most crucial element in a complex field survey such as L.A. FANS-2 is standardization. To the maximum extent possible, every interviewer must administer every component of the questionnaire to every respondent in the same way. This helps eliminate variability and interviewer bias, two factors that can seriously undermine the validity, or “credibility,” of the data collected. Standardization minimizes variability in the way you, as the interviewer, ask questions.

Some basic rules for administering the L.A. FANS-2 roster and interviews have been developed. Many of these rules are standard to all interviewer manuals, but a few are specific to L.A. FANS-2 (for example, probing for the Event History Calendar (EHC) is somewhat different and is discussed in Section 8.6). Completing all rosters and interviews using the rules outlined in this section ensures that the entire field interviewing team asks the questions in an unbiased manner.

7.3 General Conventions

L.A. FANS-2 uses several different conventions as discussed below. It is essential to become familiar with these conventions so that you can use them effectively.

1. Lowercase text

- Lowercase text not in parentheses is mandatory and the FI must read it aloud.
- Lowercase text in parentheses is optional and may be read aloud if necessary.
- In the Blaise® program, text appearing in “bold” should be spoken with emphasis.
2. Uppercase Text

- Text in UPPER CASE (all capital letters) is never to be spoken aloud since it includes instructions for the interviewer. These may appear in the text of a question.

- Suggested probes will appear after the upper case “PROBE” notation.

**Asking Questions**

The following rules apply when you are asking questions:

1. **Ask the questions using the exact words on the screen.**

   This may seem obvious, but is vital to ensuring comparability of the data gathered from the survey. If you change the wording in a question even slightly, the respondent's answer may change.

   Imagine this situation:

   *Actual question: In the past 30 days, that is since September 1st, 2006, how many of your neighbors have you talked with for 10 minutes or more?*

   *FI asks: In the past 30 days, which is since September 1st, 2006, how many of your neighbors have you talked with?*

   A respondent could answer two different numbers for the two different questions if the respondent had said hello to a neighbor or exchanged just a few words with a neighbor. Even subtle changes in phrasing questions can easily result in different answers. Read every question exactly as it appears.

2. **Ask the questions in the exact order they appear.**

   Follow the order of questions as they appear on the screen. The computer automatically generates skip patterns based on the respondent’s answers, so follow the exact sequence as it appears. If you feel you have reached a question in error, use the up arrow key (1) to move backwards through the questions one at a time and check the answers recorded.

3. **Read the entire question.**

   The respondent may interrupt you and answer before hearing the whole question. When this happens, politely explain that you have to read the entire question then read the question again. Do not assume the premature response applies to the question as it is written.

4. **Read the questions slowly.**

   As you become familiar with questions, you may be tempted to read more quickly. However, you must remember that this is the first time the respondent has heard them, so read slowly enough to allow the respondent to understand everything you are asking. A
pace of about two words per second is recommended. Give the respondent plenty of time to recall past events or details.

5. Use introductory or transitional statements as they are written.

Since the questionnaire covers a number of topics, focusing the respondent’s attention on a new topic as it occurs in the sequence is often necessary. Transition statements are provided and must be read exactly as written. These statements often contain instructions for the respondent such as time periods, circumstances to be considered, and definitions.

6. Do not suggest answers to the respondent.

As you go through the questionnaire, you will come across questions you think you can answer based on information you heard earlier. You may want to suggest answers to the respondent. Do not. Your job is to ask the questions and make sure the respondent understands, but not to answer for the respondent.

During the Self-Administered Questionnaire (SAQ) that some respondents will complete, the respondent may try to rely on you to help answer the questions. Do not help the respondent choose a response.

7. Become comfortable with the interviewing process and material.

You should be familiar enough with the questions to be able to ask the question in an efficient, straight-forward manner. You will need to spend a number of hours in most respondents’ homes, so it is vital that you understand both the flow of the interviewing process and the content of the interview material. Appearing unfamiliar with the content or wasting a respondent’s time while you try to figure out what to do next could cause a respondent to stop the interview, resulting in a refusal.

8. Be non-judgmental.

It is essential that you interact with respondents in a non-judgmental manner. It is possible that respondents will tell you about actions that are illegal or that you find to be immoral, sad, or shocking. Regardless of what you hear, you must accept the information without judging. It is important that you accept all that you hear in a matter-of-fact manner so the respondent continues to feel comfortable providing confidential information.
7.3.1 Probing

Probing is a technique used to help ensure that a respondent’s answers are as accurate and complete as possible. Probing serves two purposes: (1) to help the respondent understand the question, and (2) to obtain a clear, codeable response from the respondent without suggesting answers. Be sure to use an appropriate neutral or non-directive probe (Exhibit 7-1 lists examples of acceptable probes). Many screens in the L.A. FANS-2 questionnaire display acceptable probes for common sources of respondent misunderstanding. General rules for probing include:

1. **Repeat the question** if the respondent misunderstood or misinterpreted it.

   After hearing the question the second time, the respondent will probably understand what is being asked. This is usually the best and most straightforward method of probing. Similarly, repeating the answer choices suggests to the respondent that the response needs to come from these choices.

2. **Repeat answer** if the response is too vague to answer the question.

   For example, if you ask the respondent for his/her current marital status and he/she answers, “I’m on the loose,” an effective probe is, “On the loose?”

3. **Pause** to indicate to the respondent that you need more or better information.

   This is a good silent probe after you have determined the respondent’s response pattern.

4. **Use neutral questions or statements** to encourage a respondent to elaborate on an inadequate response.

   Examples of neutral probes are “What do you mean?” “How do you mean?” “Tell me what you have in mind” or “Tell me more about . . .”

5. **Use clarification probes** when the response is unclear, ambiguous, or contradictory.

   Be careful not to appear to challenge the respondent when clarifying a statement, and always use a neutral probe. Examples of clarification probes are “Can you give me an example?” or “Could you be more specific?”
Exhibit 7-1 Examples of Acceptable Probes

**Repeating All or Part of the Question**

- “Let me read the question again.” Repeat the full question with emphasis.
- “Let me read the question again just to be sure we are focusing on the same time period.” Repeat the full question with emphasis.
- Repeat the answer choices with emphasis.
- Wait 10-15 seconds. If no answer is given, repeat the full question.

**Requesting a Clarification**

- “For this question, I need an answer of either ‘yes’ or ‘no’.”
  -or-
  “Is that a ‘yes’ or a ‘no’?”
- “Can you give me a specific number of (hours/days/weeks/etc.)?”
- “Would you say 9 or 10?”

**Reassurances**

- “To the best of your knowledge . . . ”
- “Remember that we will not tell anyone what you say.”
- “Remember, there are no right or wrong answers.”
- “Take your time.”
- “I have to ask all of the questions in order.”
- “We're interested in your own interpretation of the question.”
  “We just want to know what you think.”
- “Whatever [WORD] means to you.”

**Repeating an Earlier Question**

- “Let me read you an earlier question.”
7.3.2 When and How to Probe

The following explains when and how to probe to obtain information that is complete, accurate, and useful to researchers who analyze the data.

**RESPONDENT DOES NOT GIVE A SIMPLE “YES” OR “NO” ANSWER**

- **Gives a clear answer but not “yes” or “no”**

  If the respondent gives an answer to a yes or no question that is *completely* clear (“absolutely” “not at all” “never!”), enter “yes” or “no” even though the respondent did not actually say “yes” or “no.” There is no need to probe in such cases.

- **Says “yes” or “no” and more**

  Respondents often say “yes” or “no” and then give you additional information. For example, if you ask “Does Jane’s birth or adoptive mother live or stay in this household?” the respondent might say “Yes, but she’s got a boyfriend now and she stays over there on the weekends that the kids are at their Daddy’s house.” The additional statement *does not contradict* the “yes” answer. In such cases, ignore the additional information and enter the “yes” or “no” answer without probing.

  On the other hand, if you think the additional information *might contradict* the “yes” or “no” answer; repeat all or part of the question. For the same question as above, if the respondent answered “Yes, but she’s got a boyfriend now and she’s never here,” the additional information seems to contradict the “yes” answer. You would need to clarify for the respondent that for the purposes of this study, “lives or stays” means she lives in the household at least part-time then repeat the question.

**UNCLEAR RESPONSES**

- **Unclear numeric answers.**

  Some questions ask for a number (an age, the duration of something, etc.). If the respondent answers with “a few,” “I was pretty young,” “quite a while,” or something similar say: "Can you give me a specific number of … (hours, days, etc.)?"

  Respondents may answer questions with more than one number (“when I was 18 or 20 years old” or “for two to three days”). Many questions in L.A. FANS-2 allow only a single number as an answer, not a range, so it is necessary to encourage respondents to give us their best opinion as to a specific number.

- **A vague or unclear response.**

  If the respondent seems to have understood the question but gives a vague or unclear response such as “it depends,” “oh, dear,” or “sometimes yes, sometimes no” then pleasantly
ask, “Is that a ‘yes’ or a ‘no’?” If you are not sure the respondent understands or remembers the question, repeat the question, saying “Let me read the question again.” When repeating the question, pause slightly between parts of complex phrases, and emphasize any words that will help the respondent understand (for example, focus your emphasis on the time frame and the terms that describe frequency).

- An unrelated response.

Sometimes respondents go off on a tangent without answering the question. Do not discuss personal issues with the respondent. Be polite. Without offending the respondent, bring the focus back to the job at hand by listening, smiling to acknowledge the respondent’s words then repeat the question, emphasizing important words.

MISUNDERSTANDINGS

- Does not understand the question.

If the respondent tells you he or she does not understand a question or if the answer makes no sense and suggests the respondent did not understand, say “Let me read the question again” (repeat the question, emphasizing key words). Note: The first sentence ("Let me read the question again") is optional and should be used only if you think it helps you maintain rapport with the respondent.

- Misunderstands the time period.

If the respondent says something that makes you think he or she is not focusing on the correct time period for the question, reread the key part of the question or the entire question, emphasizing the time. For example, if it is June 15th and you ask a 35-year-old if he has worked in the last month and he says, “Yes, I worked most of last year,” he is not focusing on the correct time period (the last month).

- Misunderstands a frequency requirement.

At times, respondents give answers that indicate they may not have understood the frequency a question is asking about.

- Misunderstands an intensity requirement.

Sometimes you will need to probe because the respondent does not understand or ignores the intensity or severity that is asked about in the question.

DON'T KNOW, REFUSED

- A respondent says “I don’t know.”

When a respondent says “I don’t know,” it can mean one of three things: (1) the respondent may need more time to think about the answer; (2) he or she may be reluctant to tell you
something personal; or (3) he or she actually does not know the answer or is unsure of the best answer.

If a respondent says “I don’t know . . . hmm . . .” and appears to need more time to think about an answer then wait silently and expectantly for an answer. If you feel it would help, you may say “Take your time.”

If you think the respondent has said “I don’t know” because he/she is reluctant to tell you private information, you should put the respondent at ease by saying “Remember that we will not tell anyone what you say” or “Remember, there are no right or wrong answers.”

Sometimes respondents truly don’t know the answer to a question. For example, if you ask about certain items covered by their health insurance, the respondent may simply not know. The first time that a respondent says “I don’t know” in this way, say “To the best of your knowledge . . .” On future questions about the same topic, however, you may accept the “don't know” response in the interest of not alienating the respondent.
Note: Listen closely to respondents to be sure they are really saying that they don’t know “Oh, I don’t know, probably not” could actually mean “no” to the respondent, while “I don’t know, I could have” may mean yes. Don’t guess what the respondent means. Instead, say “Is that a ‘yes’ or ‘no’?” using a pleasant tone.

- **Refuses to answer a question.**

  After repeating the assurance of confidentiality, allow the respondent to exercise the right to refuse to answer any question. If a respondent still does not feel comfortable answering a specific question, press [F4] to enter “Refused” as the response. Add a remark about the circumstances by pressing [CTRL-M].

- **Does not answer a question.**

  If the respondent does not answer, wait 10-15 seconds to give the respondent time to think. If there is still no response, say “Let me read the question again” (repeat the question emphasizing key words). If no answer is given a second time, code as “refused” and continue. Sometimes respondents fail to answer a question they find very personal rather than flatly refusing to answer. Sometimes, however, they have become unwilling to continue with the interview. If you suspect that this is the case, ask the respondent if he or she would like to take a break. He/she may feel like continuing after a few minutes.

- **Does not give a codeable answer.**

  In the unlikely event that the probing strategies do not work in obtaining a codeable response from the respondent, press [F3] to enter “Don’t Know” as the response. Add a remark about the circumstances by pressing [CTRL-M].
7.3.3 Recording Responses

Most questions in the L.A. FANS-2 survey have pre-coded responses. A few, however, are open-ended so you must type in a response to the question. Some questions have pre-coded responses including an “Other (SPECIFY)” category. If the respondent’s answer does not fit into a pre-coded answer, then choose “Other” and specify the response.

When recording open-ended or “other (specify)” responses, follow the practices below to ensure recorded responses accurately reflect the respondent’s answers.

- Record the response verbatim, typing the key words the respondent says. For example, the respondent is specifying her occupation and says “I think of myself as . . .,” there is no need to record that first phrase. The important thing is to accurately record the occupation given.
- If you run out of room in the “other specify” box, press [CTRL-M] to continue capturing the answer.
- Enter a note for any responses that don’t quite fit in one of the response categories for that question. Remember to record any general remarks about the interview or interview setting. Your notes will help the analysts to understand any points of confusion or difficulty.
- If you mistakenly enter the wrong answer or if the respondent changes his/her mind, go back to the question by pressing the up arrow key (↑) to move back through fields until you come to the field you need to correct. Use the backspace key to erase the old answer, and then type the correct answer.

When respondents are completing the SAQ portion of the survey on their own, answer their questions about recording responses in this same way.

Some questions may require a participant’s numerical response to be rounded to the nearest whole number. Follow the practice below as the rounding rule.

- When the decimal portion of value given is < .5 round down (e.g., 6.2 to 6, 11.4 to 11)
- When the decimal portion of value given is ≥ .5 round up (e.g., 6.5 to 7, 11.7 to 12)

7.3.4 “Don’t know” or “Refused”

“Don’t know” or “Refused” generally do not appear as answer categories in the questionnaire although they are acceptable responses. Since these responses are not displayed on the screen, the
A respondent is more likely to answer the question within the “preferred” ranges. Follow the probing techniques discussed in Section 7.3.2 to encourage accurate reporting. However, “Don’t know” and “Refused” are possible responses for nearly all questions in either the CAPI or SAQ sections. One exception is date fields in the Event History Calendar (EHC): you must enter some type of response in EHC date fields based on whatever information the respondent is willing to give. Another exception is in the “unfolding brackets” questions (such as H2 in the Household questionnaire). The interviewer instruction indicates that you should NOT code DK or REF; there are similar unfolding bracket questions in several other modules.

- If a respondent refuses to answer a question while you are administering the CAPI, probe first then if needed press the [F4] key for “Refused.”
- If a respondent tells you he/she doesn't want to answer a question in the SAQ portion, repeat the confidentiality concepts and the importance of his/her experiences for the study. If the respondent still does not want to answer, tell him/her to press the [F4] key.
- If a respondent does not know the answer to a question you have asked and a “don’t know” code is not available, probe first. Then, if necessary, press the [F3] key.
- If a respondent doesn't know an answer during the SAQ portion, tell the respondent to make a best guess. If needed, tell him/her to press the [F3] key.

### 7.4 Overview of the Case Initiation Database

The starting point for beginning each assigned case in your laptop computer is the Case Initiation Database (CID). Within the Case Management System (CMS) on the laptop, select the ID number associated with the case, which will pull up the CID. The purpose of the CID is to enter information on (1) the eligibility of Wave 2 new entrants (when at screening status of 290-292) and (2) the status of panel cases at the original Wave 1 address. Confirm that the household ID has been selected, by confirming the address.

Select the appropriate household ID on the CMS grid to open the CID program. The CID program will display items for you to answer, depending on whether the case is new entrant or panel.

If it is a Wave 2 new entrant case, you will be asked to enter information in the CID from the paper Screener and Contact Log. This will include responses you have entered on the screening form as follows:

- Response to item S1 (see Exhibit 7-2)
- Response to item S2 (see Exhibit 7-3)
- Response to item S3 (see Exhibit 7-4)
- Response to item S3 (see Exhibit 7-5)
- Appropriate code from Part 3 of the screening form to reflect the household’s eligibility status. (see Exhibit 7-6)

Depending on information you enter in the CID, the computer will assign a final screening status of 290 (household not eligible), 291 (household eligible with children), or 292 (household eligible without children). When the household status is 291 or 292, the CID will spawn one roster case to be completed for the address.
EXHIBIT 7-2 CID Screens for New Entrants

INTERVIEWER, REFER TO PAPER SCREENER PART 2, ITEM $1 AND ENTER YOUR RESPONSE.

ABOUT SIX YEARS AGO, DID ANY MEMBER OF HOUSEHOLD LIVE IN THE SAME HOUSE?

* 1. YES
* 5. NO

NE1
NE1a
NE2
NE2a
NE3
NE4
Exhibit 7-3 CID screens for New Entrants (cont’d)

- **Question**: Based on neighborhood map, did any household member live in the neighborhood about six years ago, or did everyone live outside this neighborhood?

  - **Options**:
    - **1. In Neighborhood**
    - **2. Outside Neighborhood**

- **Exhibit**: Screen with options for new entrants.

---

**NE1**
- **Value**: 5
- **Answer**: NO

**NE2**
- **Value**: 

**NE3**

**NE4**

---

**Legend**:
- L7
- NE2
- SMS
- G18 Arlington Ave Los Angeles
INTERVIEWER, REFER TO PAPER SCREENER PART 2, ITEM 33 AND ENTER YOUR RESPONSE.

HOW MANY ADULTS 18 AND OLDER USUALLY LIVE OR STAY IN THE HOUSEHOLD?

NUMBER OF ADULTS: ______

Enter a numeric value between 0 and 20

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>NE1</td>
<td>5</td>
<td>NO</td>
</tr>
<tr>
<td>NE1a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NE2</td>
<td>2</td>
<td>out_neigh</td>
</tr>
<tr>
<td>NE2a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NE3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NE4</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Enter Data Entry: C:\Fams\Fams\Fams\Input\CID
Exhibit 7-5 CID screens for New Entrants (cont’d)

<table>
<thead>
<tr>
<th>NE1</th>
<th>NE1a</th>
<th>NE2</th>
<th>NE2a</th>
<th>NE3</th>
<th>NE4</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td></td>
<td>2</td>
<td></td>
<td>2</td>
<td>4</td>
</tr>
</tbody>
</table>

Enter a numeric value between 0 and 20

Interviewer, refer to Paper Screener Part 2, Item #4 and enter your response:

How many children age 17 and younger usually live or stay in the household?

Number of children: _______
Exhibit 7-6 CID screens for New Entrants (cont’d)

<table>
<thead>
<tr>
<th>Interviewer: Refer to Paper Screener Part 3 and enter the appropriate code to indicate if the new entrant address is eligible or not eligible for the study.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Codes to indicate household is eligible and status of children:</td>
</tr>
<tr>
<td>1. Eligible household with children &lt; 17 years of age</td>
</tr>
<tr>
<td>2. Eligible household without children</td>
</tr>
<tr>
<td>Codes to indicate why household not eligible:</td>
</tr>
<tr>
<td>5. Not eligible (current resident in house or neighborhood at wave 1)</td>
</tr>
<tr>
<td>6. Not eligible (due to no children in household)</td>
</tr>
</tbody>
</table>

| NES | P1 |

| TID | ID | NES | ENES | 120.0.0.0 | 1218 Arlington Ave Los Angeles |
If you are working a panel case, the first CID screen (see Exhibit 7-7) will ask about residency status at the Wave 1 address. You will be provided a Wave 1 participant list and will be asked to indicate which of these individuals still live at the Wave 1 address at least half time. Code one of the following, based on your knowledge of who lives at the Wave 1 address:

1. All listed Wave 1 participants still live at the Wave 1 address
2. Some listed Wave 1 participants still live at the Wave 1 address
3. None of the listed Wave 1 participants live at the Wave 1 address
4. Status of the Wave 1 address is unknown.

- If you enter response <1> (All still live at Wave 1 address), the computer will exit the CID, spawn roster cases (the maximum you could possibly need to complete), and assign a final code of 293 – Panel to the household ID.

- If you enter response <2> (Some still live at Wave 1 address), you will be asked to indicate on a follow-up screen (see Exhibit 7-8) which Wave 1 participants still live at the Wave 1 address. The computer will exit the CID, spawn four roster cases (to complete as needed), and assign a final code of 293 – Panel to the household ID.

- If you enter response <3> (None live at the Wave 1 address), you will be asked to indicate if the Wave 1 address is a complete turnover dwelling (i.e., no members of the Wave 1 roster still live at the address) (see Exhibit 7-9). A Complete Turnover is when “no members of the Wave 1 roster still live there”. This includes the Wave 1 Panel members and all other members of the Wave 1 household who were included in the roster.

Note: not all complete turnovers will be sampled in as New Entrants. Therefore at all Wave 1 addresses you will attempt to collect information about Panel members but you will only conduct a screener at some of the W1 addresses as determined by the label on the case folder.

At CID screen P2 (see Exhibit 7-9) your first step should be to check the “Screen Complete Turnover?” label on the Panel case folder. The actions you should take follow, based on what appears on the folder label and the situation at the Wave 1 address.

- When folder label is “NO”

If the label is “NO”, you should always enter code 7 “Does Not Apply” and this completes the CID. Although technically this is a complete turnover because no Wave 1 roster members live there, it is not a household which is selected for screening so there is no further
action taken. The outcome is an automatic code 293 (Panel CID Complete) and 4 rosters will be spawned.

- **When folder label is “Yes” and No Wave 1 Roster Members Live at W1 Address**

  If the label is “Yes” and no Wave 1 roster members live there you will enter code 1 for “Yes”. You will proceed with screening the residents at the Complete Turnover household using a supplied blank screening form. Consistent with New Entrants above, you will be prompted to enter the screening information (S1-S4) in the CID hat you collected for this household.

  The outcome is an automatic code 295 (Panel-Complete Turnover Household CID Complete). A CID_CT will be spawned along with 4 rosters. This second CID is created solely for you to enter the outcome of the screening at the complete turnover address. You will enter a code 190, 191, 192 in the CID_CT case to indicate the screening outcome at the address.

  Note: For the CID_CT case you must enter the 100-level code of 190, 191, or 192 that corresponds to the 200-level code on paper (290, 291, or 292).

- **When folder label is “Yes” and Any W1 Roster Members still live at the W1 Address**

  By definition, if any of the Wave 1 roster members live at the W1 address, it is not a Complete Turnover Household so you should enter a code 5 for “No”. The outcome is an automatic code 293 and 4 rosters will be spawned.

- **When label is “Yes” and You Are Unable to Screen the W1 Address**

  In some instances a household member at the W1 address has confirmed that no W1 Panel members live at the address but they are unwilling to respond to screening questions so you do not know whether the W1 address is a Complete Turnover. You will enter a code 8 “Don’t Know”. This will result in an automatic code 293 and 4 rosters will be spawned.

- **Wave 1 Address is Vacant or No Longer Exists**

  If the W1 address is vacant or it has been demolished, you will enter a code 5 for “No” regardless of what the label on the case folder indicates. This will also result in a code 293 and 4 rosters will be spawned.
If you enter response <4> (Status of Wave 1 address unknown), the computer will exit the CID, spawn four roster cases (to complete as needed), and assign a final code of 294 – Wave 1 address status unknown to the household ID. Consistent with <3> above, this will also spawn a second CID for the complete turnover address (called CID_CT) for your use (if needed) to document the screening status for new entrants, should you learn the W1 panel address is a complete turnover and the “Screen Complete Turnover?” label is “YES” on the Panel case folder.
### Exhibit 7-7 CID Screens for Panel

**INTERVIEWER:** INDICATE RESIDENCE STATUS AT THE W1 ADDRESS 2312 W. HYDE PARK BLVD, LOS ANGELES, CA, 90043

**WAVE 1 PARTICIPANT LIST:**

- **RSA:** FEMALE 55 YEARS OLD, CHERIE CATHARINE PETERS
- **RSC:** MALE 12 YEARS OLD, JONATHAN WESLEY ADAMS
- **SIB:** FEMALE 17 YEARS OLD, JENNIFER CELESTE ADAMS

**WHICH WAVE 1 PARTICIPANTS STILL LIVE AT LEAST HALF TIME AT 2312 W. HYDE PARK BLVD, LOS ANGELES, CA, 90043?**

- ☐ 1. ALL LISTED WAVE 1 PARTICIPANTS LIVE HERE
- ☐ 2. SOME LISTED WAVE 1 PARTICIPANTS LIVE HERE
- ☐ 3. NONE OF THE LISTED WAVE 1 PARTICIPANTS LIVE HERE
- ☐ 4. STATUS OF WAVE 1 ADDRESS UNKNOWN

**NES**

<table>
<thead>
<tr>
<th>P1</th>
</tr>
</thead>
</table>

| T00000000 | 277 | P1 | EN5 | 9.0.0.0 | 2312 W. Hyde Park Blvd Los Angeles |
Exhibit 7-8 CID screens for Panel (cont’d)
Exhibit 7-9 CID screens for Panel (cont’d)

INTERVIEWER: IS THE WAVE 1 ADDRESS A COMPLETE TURNOVER DWELLING?
LOOK AT PANEL CASE FOLDER LABEL FOR SCREEN COMPLETE TURNOVER

IF LABEL IS YES AND NO WAVE 1 ROSTER MEMBERS LIVE AT WAVE 1 ADDRESS, ENTER 1 = YES

IF LABEL IS YES AND ANY WAVE 1 ROSTER MEMBERS STILL LIVE AT WAVE 1 ADDRESS, ENTER 5 = NO

IF LABEL IS NO, ENTER 7 = DOES NOT APPLY (AS LABEL INDICATES TO NOT SCREEN COMPLETE TURNOVER ADDRESS)

IF LABEL IS YES AND YOU ARE UNABLE TO SCREEN THE WAVE 1 ADDRESS (e.g., REFUSAL), ENTER 8 = DON'T KNOW

IF W1 ADDRESS IS VACANT OR NO LONGER EXISTS, ENTER 5 = NO

1. YES, COMPLETE TURNOVER
5. NO
7. DOES NOT APPLY
8. DON'T KNOW
7.5 Overview of the Rostering Process

When you complete the CID for a new entrant eligible household, a single household roster will be spawned for you to complete. When you complete the CID for a panel case, the computer will spawn four household roster cases for you to complete as needed.

In working a panel case, complete a household roster at each address containing one or more Wave 1 panel participants (RSA, RSC, SIB). If you determine that the Wave 1 address is a complete turnover dwelling, use the fourth household roster case (with Case ID that ends in D00) to complete a roster with the new entrants now living at the original Wave 1 address.

The purpose of the household roster is to determine who lives in the household and how they are related to each other. It is very important to complete the roster fully and completely because its information is used to select household respondents for interviews. Information collected in the roster includes basic demographic information on all part- and full-time residents (e.g., ethnicity, schooling, parental status, receipt of public assistance, health insurance coverage, employment in last month), relationships among household members, and the identification of parents (or primary caregivers) of all children. In addition, for panel respondents, the roster asks questions about household members who no longer live in the dwelling unit, with a special focus on obtaining information on moves, deaths, or absence of information regarding their whereabouts. Exhibit 7-10 provides a flowchart of the Household Roster module.

The sections that follow discuss the Household Roster module. After you complete the household roster, the computer will select the household members you are to interview and designate which modules will be administered to each selected participant. Because a mistake in entering gender, age, or relationship codes can result in incorrect selections, it is imperative that you enter all roster information carefully and accurately.
Exhibit 7-10 Overview Flowchart of Household Roster Module

Roster Module
(overview)

Section X.
- Choosing roster respondent
- Observations of roster respondent

Section UA.
- Indicate type of household
- Respondent name & verification

Type of HH

New Entrant HH in W1 tract or Complete Turnover at W1 address

Panel HH at non-W1 address

Panel HH at W1 address

CURRENT ROSTER

Section RA.
Collect info on all current residents

Section RB.
Background of current residents

Section RC.
Household info

Section RS.
Selection of respondents for subsequent modules

UPDATE ROSTER

Section UB.
Update roster

Section UC.
Additional info on deceased persons

Section UD.
Additional info on missing persons
7.6 Determining the Rostering Respondent

In the initial section of the Household Roster (Section X in Exhibit 7-2) you will identify the Roster Respondent (RR) to answer the rostering questions and collect some information about him/her. The Roster Respondent must be age 18 or older and reside in the household half-time or more (for new entrant cases, this is generally the same individual who was the Screening Respondent). You should always ask the potential RR “Do you live in this household at least half the time?” Otherwise, you may be partially through the roster, discover the individual is not a resident of the household, and have to start the roster again with an eligible Rostering Respondent.

If the individual says he/she lives in the household part-time or gives an ambiguous answer (e.g., “I stay here once and a while”), ask “Do you live in this household half-time or more?” If he/she does not live in the household half-time or more, ask whether anyone else is home who is 18 or older and lives in the household half-time or more. If you have any doubts about an RR’s age, you should ask “Are you 18 years old or older?” As with screening, if the individual is not at least 18, ask whether anyone else is home who is at least 18 and lives in the household at least half-time.

Next, section UA of the roster determines whether the roster is being completed at a new entrant household, a complete turnover household, or panel household. As depicted in the flowchart in Exhibit 7-10, the type of household (panel, new entrant or complete turnover) determines whether the update roster (UR) should be completed.

7.7 Obtaining Verbal Consent for Completing the Roster

Before collecting roster information you must obtain verbal consent from the Roster Respondent. You will be provided a sheet with the text below, which you must read out loud to the Roster Respondent:

For Households with a Panel Respondent:

My name is ______________________ and I work for RTI International, a nonprofit research organization. We are conducting interviews for a research study called the Los Angeles Family and Neighborhood Survey for the RAND Corporation and UCLA. The goal of the study is to understand how families and neighborhoods affect people’s health and well-being. At least one person living in your household was interviewed for this survey in 2000 or 2001. We would like to reinterview this person and anyone else who participated in 2000 and 2001. We would also like to find out who lives or stays in the household now and to ask you some questions about them. The questions will take about eight minutes and should be easy to answer. Your participation in this study is completely voluntary, but very important. You can choose not to participate, you can choose to answer some but not all questions, and you can stop the interview at any time. The
answers that you give us will be used for research purposes only. We will keep all information confidential and completely separate from any information that might identify anyone in this household personally. Are you willing to participate?

**When we do not know for sure whether the household has a Panel Respondent:**

My name is ______________________ and I work for RTI International, a nonprofit research organization. We are conducting an interview study called the Los Angeles Family and Neighborhood Survey for the RAND Corporation and UCLA. The goal of the study is to understand how families and neighborhoods affect people’s health and well-being. I would like to ask you some questions about people living or staying here in this household. The questions will take about eight minutes and should be easy to answer. Your participation in this study is completely voluntary, but very important. You can choose not to participate, you can choose to answer some but not all questions, and you can stop the interview at any time. The answers that you give us will be used for research purposes only. We will keep all information confidential and completely separate from any information that might identify anyone in this household personally. Are you willing to participate?

Indicate in the computer whether the Roster Respondent agrees to participate. If the respondent agrees, continue completing the roster. If it is a panel household, complete an update roster and a current roster (described below). If it is a new entrant household, complete only the current roster.

### 7.8 Completing the Update Roster

You will complete the update roster sections only with panel households. In completing the update roster sections, ask the Roster Respondent about each member who was listed as living at the original Wave 1 address at the time of the Wave 1 interview.

- **Section UB.** Section UB determines which Wave 1 residents currently live with the RR at this address. For those who live elsewhere, attempt to collect information on their whereabouts and how to contact them. All Wave 1 household members currently living in this household are stored by the computer as part of the Current Roster for the address.

- **Section UC.** In section UC, attempt to collect additional information on all Wave 1 household members the RR reports to be deceased, including when the person died and if the person lived at the Wave 1 address when he/she died (or where the person was living at the time of death).

- **Section UD.** In section UD, try to collect additional information on W1 HH members reported to be missing or locations unknown, including when and why the person moved away from the Wave 1 address, if the RR knows any information on the person’s whereabouts, and if the RR knows anyone who would know how to locate the missing Wave 1 roster person.
7.9 Completing the Current Roster

Complete the current roster sections with all households. To do so at a new entrant household, ask the Roster Respondent to provide information about each person currently living at the address. At a panel household, ask the Roster Respondent to provide information about everyone else currently living at the address (for which information was not obtained in the Update Roster).

- **Section RA.** Section RA identifies the head of the household (HHH) and collects each person’s name, age, relationship to the HHH, marital status, name of partner, and full- or part-time residency status. For children 17 and younger, we ask for information on the child’s mother and father to establish the relationships within the HH, including which children are siblings.

- **Section RB.** In section RB we collect background characteristics of each household member, including years of schooling, race/ethnicity, and if the person has any children (those ≥ 14), a paid job (those ≥ 16+), and health insurance.

- **Section RC.** In section RC we collect some household information, including the language spoken in the home.

7.10 Interview Selection Process

After you have captured information in the Update and Current Roster sections, the roster selection program will select interview respondents based on the composition of residents at the address. Because a mistake in entering gender, age, or relationship codes can result in incorrect selections, it is imperative that you enter all roster information carefully and accurately.

For each selected interview respondent the computer will spawn an interview case on your Case Management System Grid and package the appropriate interview modules to be asked of the participant.

If you have completed the roster at a panel address, an interview case will be spawned for each Wave 1 panel respondent (RSA_P, RSC_P, or SIB_P) who lives at the rostered address. If the Wave 1 RSC or SIB is under age 18, a household member will also be selected as the primary caregiver. This could be the panel RSA or another adult in the household. In addition to panel participants, information on additional residents at the address who were not part of the original Wave 1 roster may lead to new entrant interview participants, which could include the full complement of new entrant participants—RSA_NE, RSC_NE, SIB_NE, PCG_NE—depending on the number of new entrants living at the address who have moved into the neighborhood or been born since the Wave 1 interview.
- New entrant households without children will always have a Randomly Selected Adult (RSA).

- New entrant households with children will always have a Randomly Selected Adult (RSA), a Randomly Selected Child (RSC), and a Primary Caregiver (PCG). The RSA and the PCG may or may not be the same individual.

- New entrant households with children may (but not always) have a Sibling (SIB) selected.

In some circumstances, multiple individuals may be selected for the Household Module, which is to be completed for each nuclear family with a selected participant residing at the address by a family member who knows the most about the given family’s finances. If there’s more than one nuclear family with a selected participant, there will more than one Household Module respondent selected. Information you collect for the roster will determine which member(s) of the household are to complete the Household Module. These may include the selected RSA, PCG, or others living at the address.

Whenever possible, attempt to proceed with interviews immediately after you finish rostering and selection. The best way to achieve high response rates and be efficient is to always try to complete the interviews when you are at the household and have identified who is to be interviewed. If one or more respondents are present and willing to participate, begin the interviews. If you cannot conduct an interview at the time of rostering and selection, use your time at the household to schedule an appointment.

### 7.11 Documenting Attempts to Complete the Roster

You will assign and enter pending and final event codes on the Household Summary on the case folder and in the CMS in your computer for attempts you make to complete the Household Roster. Pending codes mean that the case has not been completed, and final codes indicate the case has reached a final status. Codes to reflect the status of efforts to complete the roster are consistent with those you will use for the interview process, as described in Chapter 8.

Assign an event code for every attempt you make to complete the roster, until you complete the roster or otherwise finalize the roster case with the guidance of your supervisor.
8. PREPARING TO INTERVIEW

8.1 Introduction

This chapter discusses steps to prepare for an interview and offers suggestions for dealing with some situations you may encounter. Details about L.A. FANS-2 interviews are provided in Chapter 9, and instructions for using the L.A. FANS-2 Case Management System are outlined in Chapter 5 of the FI Computer Manual.

8.2 Your Role as a Professional Field Interviewer

With every scientific survey, many components contribute to the overall success of the research. This is especially true for a complex survey such as L.A. FANS-2. As a professional field interviewer for this study, you are responsible for one of the most important aspects of the study: making sure the interview is administered properly according to acceptable survey procedures.

Always keep in mind that you are a professional doing a very important job. As a professional, you are expected to possess a great deal of knowledge about the survey you are conducting—its purpose, the type of sample, the interview process, and similar topics. You must be knowledgeable about what you are doing and why, and you must be prepared to answer any questions a respondent might have.

As a professional FI, you must always maintain the highest of ethical standards, collecting data with complete objectivity and treating with the utmost confidentiality and respect all information gathered or observed while conducting survey activities. You must convey that you are a professional Field Interviewer; that you are completing the interview in a completely confidential manner; and that you are not affected by any personal biases, opinions, or prejudices.

Following survey procedures and maintaining ethical standards are absolutely critical. Any FI who violates these procedures and standards may be terminated immediately. We ask you to maintain high response rates, follow all procedures, and adhere to the highest of ethical standards. We know that sometimes these goals might not be easy to achieve and that you may even lose a case if a respondent refuses to complete the interview “by the rules.” Regardless, you should make every effort to obtain all interviews according to specified procedures and standards.

8.3 Contacting the Selected Interview Respondent(s)

Chapter 5 discussed the process to contact a dwelling unit for screening. Techniques for contacting interview respondents are similar, except that some interview respondents are familiar with the reason for your visit.
If you must revisit the HH to contact the selected interview respondent(s), view all previous visit information in your ROC. If necessary, ask the rostering respondent to locate the selected interview respondent(s) for you. Approach the selected interview respondent(s) using an introduction similar to the one used for screening (or initial approach to a W1 address for panel cases). Keep it simple and straightforward. It may help to mention which member of the household was the rostering respondent, since this person may have discussed the study with the selected person.

8.4 Obtaining Interview Participation

Convincing people who are selected for the interview to participate in the study is an important part of your job as an FI. The selected respondent may not have been the screening or rostering respondent and may be unfamiliar with the study. Individuals who were the SR or RR are aware of the importance of the study, but keep in mind that respondents who willingly completed a 5-minute screening or a 20-minute roster may need additional convincing to complete a more lengthy interview.

Be sure you are thoroughly familiar with background information on the study and comfortable answering questions about it. Specific questions relating to the interview and suggested responses are given in Exhibit 8.1. Be comfortable with these topics as well. Remember that your FS can send special letters (see Appendix C) to help change the minds of reluctant respondents.

Often, someone is apprehensive about participating in a “survey.” For some, their cooperation in similar ventures has resulted in being subjected to sales promotions. Using the words “study,” “research,” or “interview” can be helpful. Assure the respondent that you are not selling anything and this is not a marketing survey. Show the respondent the L.A. FANS-2 materials, including the “How Data Are Used” sheet (see Exhibit 4.6) to help explain the importance of the study.

In many cases, you will find that the computerized nature of the study will be a positive factor in convincing many respondents to participate. If the interview respondent was also the rostering respondent, he/she already observed you conducting the selection process during the rostering process. This alone may create interest in completing the interview. Young people are often interested in and familiar with the technology. The privacy afforded by completing more sensitive questions using the computer has been shown to be particularly important in getting honest answers from young respondents.

Sometimes you may encounter a reluctant respondent who you suspect is making an appointment for the interview at a later date with no intention of keeping the appointment (an “unstated refusal”). If you believe this may be the case, suggest that the respondent just try a few questions now to see how it goes. Once into the interview, most respondents will complete it.
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I don’t have children. How can I help you?”</td>
<td>We are interested in the opinions, activities, and experiences of all types of residents of Los Angeles County, including those who do not have children.</td>
</tr>
<tr>
<td>“Are the questions personal?”</td>
<td>Some questions may seem a little personal to some people. All answers are confidential; no one else—not even those in your own household—will know what you said. You don’t have to answer any question that you don’t want to answer.</td>
</tr>
<tr>
<td>“What type of questions will you ask?”</td>
<td>The questions are designed to help understand what makes a neighborhood a good place to live. They include questions about your family history, what you like and dislike about your neighborhood, and the types of community programs that are needed. If you want, you can decide not to answer a certain question.</td>
</tr>
<tr>
<td>“Will my family see my answers?”</td>
<td>No. You will be interviewed privately. When your interview is completed, it will be transmitted straight to RTI. Remember, we pledge to keep your responses completely confidential.</td>
</tr>
</tbody>
</table>
8.4.1 Dealing with Minors

In addition to adults, the L.A. FANS-2 sample includes children who can range from 2 - 17 years of age. For children 2 years of age you will collect the child’s weight and height only if the child can stand unassisted. This will require written consent from the parent. An assessment of children 3-6 requires written consent from the parent or guardian and informal oral agreement from the child. Interviews and assessments with children 7-17 require both consent from the parent or guardian AND the minor’s agreement to participate (called “assent”). The only exception to this rule is in the case of emancipated minors living on their own, including college students not living at home. In these cases only, you may conduct an interview without an adult’s written permission.

If a young person is selected for an interview, the parent/guardian may be hesitant to give consent for a “stranger” to ask the young person questions. Allow the parent to review the informational materials, including the L.A. FANS-2 lead letter and the L.A. FANS-2 Survey Brochure. Since this is a computer interview there is no copy of a questionnaire available to show them, but you can show the parent the list of the L.A. FANS-2 questionnaire modules on the parental consent information sheet. If necessary, the parent may call the project toll-free line for additional confirmation of your status as a professional Field Interviewer for RTI. Suggestions for converting youth refusals are included in Exhibit 8.2.

8.5 Informed Consent Procedures

After a respondent has initially agreed to the interview, you must follow the informed consent procedures. The respondent’s Right to Informed Consent is a critical part of any legitimate survey. This means each person must receive all information necessary to make a completely informed and knowledgeable decision about participating. Even if someone immediately agrees to be interviewed, you are still required to go through informed consent procedures before you begin the interview.
### Exhibit 8-2 Countering Youth Refusal

<table>
<thead>
<tr>
<th>Reason for Refusal</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Too busy/No time</strong></td>
<td>Be flexible in setting up an interview. With school and extracurricular activities, children may be very busy so you must be flexible and adjust to their schedules. Remember that a parent or other adult should be present in the house (though not the same room).</td>
</tr>
<tr>
<td></td>
<td>Drop by before the young person goes out. On weekends and during the summer, teenagers tend to sleep late and then go out for the day. It helps to visit the house just after they get up but before they are ready to “hit the road.”</td>
</tr>
<tr>
<td><strong>Lack of interest / Nothing in it for me</strong></td>
<td>Make them feel important. One of the most important methods for obtaining youth participation is to give them a sense of their own importance. Many have never been singled out, and this will give them an opportunity to feel special. Let them know they are irreplaceable.</td>
</tr>
<tr>
<td></td>
<td>Send mail. This age group generally likes to receive mail, so make use of the refusal letters if they are needed. We have developed special letters to address many of the concerns young people express. Ask your supervisor about this possibility.</td>
</tr>
<tr>
<td><strong>Concerns about confidentiality</strong></td>
<td>Provide a private setting. Some young people are concerned about privacy. They don’t want their parents to know their answers. Be sensitive and conduct the interview in a private setting, assuring the minor that his/her parents will never see the answers.</td>
</tr>
<tr>
<td><strong>Parent-child power struggles</strong></td>
<td>Sometimes parents worry about their children growing up and try to control that process. Permission to participate in the survey is something parents may feel they can control. You must first convince parents (before dealing with the youth) that it is to their child’s benefit to participate. If the parent is won over, he/she may then agree to let the young person participate. Other times the power struggle is in reverse—the parent wants the child to participate so the young person refuses, knowing it will irritate the adult (this is particularly true for teens). In this situation, it helps to get the child alone and discuss the interview away from the parent. This will help the young person consider participating in a context other than the conflict with the parent(s).</td>
</tr>
</tbody>
</table>
A potential respondent must be informed of:

- the purposes of the study;
- procedures that will be followed;
- the approximate duration of the interview;
- the fact that consent may be withdrawn and participation discontinued at any time (i.e., that participation is voluntary); and
- sources from which additional information about the study can be obtained, such as the Q&A Brochure.

This information must be made available to each respondent. Exhibit 8-3 presents an overview of the required consents and assents for survey respondents. As explained in sections that follow, the complexity and amount of information presented for informed consent varies depending on whether the respondent is an adult or a minor—and if a minor, the age of the child. You must read consent materials if you encounter a participant who appears illiterate.

8.5.1 Adult Informed Consent

Information you present to an adult respondent (age 18 and older) during the informed consent process will be displayed at the start of the interview (see Exhibit 8-4). This Adult Consent script must be read to adult respondents before beginning an interview. It covers all the points necessary for full informed consent. It also explains to the respondent how his/her confidentiality is protected via a Federal Confidentiality Certificate. At the end of the consent script ask if the participant has any questions and ask for his/her oral consent to participate in the interview. Be sure the respondent appears to understand the content before you continue. Note in the computer the respondent’s oral agreement to participate and give the respondent a copy of the Adult Consent Information Sheet (see Exhibit 8-5), which contains contact information to learn more about the project and names and contact information of representatives of the RAND, UCLA, and RTI Institutional Review Boards if the respondent has any questions or concerns about their rights as a participant.
# Exhibit 8-3 Required Consents and Assents for Survey Respondents

<table>
<thead>
<tr>
<th>Respondent</th>
<th>Interview Consent</th>
<th>Interview Assent</th>
<th>Health Measures Consent</th>
<th>Health Measures Assent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child &lt; 2 years</td>
<td>Not interviewed</td>
<td>Not interviewed</td>
<td>No health measures</td>
<td>No health measures</td>
</tr>
<tr>
<td>Child age 2</td>
<td>Not interviewed</td>
<td>Not interviewed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child 3 – 6 years</td>
<td><strong>Form A:</strong> Info sheet for Child Interview</td>
<td><strong>Form B:</strong> Parental Consent for Child Interview</td>
<td><em><em>Form</em> F or G:</em>* Info sheet for Child Health Measures - children 3-17</td>
<td>Informal oral agreement of child</td>
</tr>
<tr>
<td>Child 7 – 8 years</td>
<td><strong>Form A:</strong> Info sheet for Child Interview</td>
<td><strong>Form B:</strong> Parental Consent for Child Interview</td>
<td><em><em>Form</em> F or G:</em>* Info sheet for Child Health Measures - children 3-17</td>
<td><em><em>Form</em> F or G:</em>* Info sheet for Child Health Measures - children 3-17</td>
</tr>
<tr>
<td>Child 9 – 14 years</td>
<td><strong>Form A:</strong> Info sheet for Child Interview</td>
<td><strong>Form B:</strong> Parental Consent for Child Interview</td>
<td><em><em>Form</em> F or G:</em>* Info sheet for Child Health Measures - children 3-17</td>
<td><em><em>Form</em> F or G:</em>* Info sheet for Child Health Measures - children 3-17</td>
</tr>
<tr>
<td>Child 15 – 17 years</td>
<td><strong>Form A:</strong> Info sheet for Child Interview</td>
<td><strong>Form B:</strong> Parental Consent for Child Interview</td>
<td><em><em>Form</em> F or G:</em>* Info sheet for Child Health Measures - children 3-17</td>
<td><em><em>Form</em> F or G:</em>* Info sheet for Child Health Measures - children 3-17</td>
</tr>
<tr>
<td>Emancipated Minor or Adult ≥ 18 years</td>
<td><strong>Form S:</strong> Info sheet for Adult Interview</td>
<td>Oral consent (response noted in laptop)</td>
<td><em><em>Form</em> T or U:</em>* Info sheet for Adult Health Measures</td>
<td>N/A</td>
</tr>
<tr>
<td>Screener (adult ≥18 years)</td>
<td>Oral Consent (text included on screener)</td>
<td>N/A</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>Roster (adult ≥18 years)</td>
<td>Oral Consent (text on screen, response noted in laptop)</td>
<td>N/A</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>Household questionnaire (adult ≥ 18 years)</td>
<td>Oral Consent (text on screen, response noted in laptop)</td>
<td>N/A</td>
<td></td>
<td>N/A</td>
</tr>
</tbody>
</table>
Exhibit 8-4 Adult Oral Consent Script for Interview

Los Angeles Family and Neighborhood Survey Wave 2
Adult Oral Consent Script for Interview

Before we get started, there are a couple of important things I want you to know about this study. This is an on-going study of families and neighborhoods in Los Angeles County and we may contact you in the future about participating again or in a separate part of the study. The goal is to understand how families and neighborhoods affect people’s health and well-being. Researchers and community programs will use information from the study to determine how to improve neighborhoods and services for families and children in Los Angeles.

RAND, a non-profit research institution in Santa Monica, California, is conducting the L.A.FANS-2 study in collaboration with the University of California at Los Angeles (UCLA) and RTI International. RTI is interviewing participants in L.A.FANS-2. The Co-Directors of the study are:

Dr. Anne Pebley
UCLA School of Public Health
Box 951772
Los Angeles, CA 90095
pebley@ucla.edu

Dr. Narayan Sastry
RAND
P.O. Box 2138
Santa Monica, CA 90407
sastry@rand.org

This project is sponsored by the National Institutes of Health, a federal government agency that supports research to improve the health of people in the United States.

FOR RESPONDENTS WHO PARTICIPATED IN L.A.FANS-1: You were originally chosen as part of a random sample of adults who lived in one of 65 neighborhoods in Los Angeles County and you were interviewed some time between 1999 and 2001. By “random sample,” we mean that your household was chosen by chance, like with the lottery, by a computer from a list of all households in the neighborhood. Selecting households at random means that the results of the study represent the experience of the Los Angeles population. More than 3,000 households participated in L.A.FANS-1. In L.A.FANS-2, we want to talk to everyone we interviewed in L.A.FANS-1, in order to find out how their lives are now and whether there have been changes in their lives.

FOR RESPONDENTS WHO ARE NEW TO L.A.FANS: You were chosen at random from adults who moved into your neighborhood since 2000. To understand life in this neighborhood, we are collecting information about people who have lived here for several years as well as those who have moved in more recently.

FOR ALL RESPONDENTS: Your participation in this study is completely voluntary, but very important. You can choose not to participate, you can choose to answer some but not all questions, and you can ask to stop the interview at any time.

We ask you to answer questions you about your life, your family, and your neighborhood. We will also ask about things like your physical and mental health, your background, and diet and physical activity.
The interview will take approximately 55–120 minutes and most people find it very interesting. After the interview is complete, I will ask you to give your permission for us to take some simple health measures. However, right now, I am asking you only to participate in the interview part of the study.

L.A.FANS-2 is strongly committed to respecting your privacy and the confidentiality of your information. We will use this information only for research purposes and we will never release any information about you specifically. The information you give us will be combined with information from other participants in the study and only group results will be reported. We will keep your name and contact information so that we can contact you in the future about participating again or participating in a separate part of the study. This information will be kept completely confidential and will never be disclosed.

We will keep all information confidential. However, if we receive any information or observe that you or another person, including a child, is in danger, I am required to report this to my supervisor who may report it to the appropriate agency.

To further protect your privacy, the L.A.FANS project has obtained a Confidentiality Certificate from the U.S. Department of Health and Human Services. This certificate means that L.A.FANS will protect your identities and the information we collect for your child. However, if you tell me about the abuse of a child or of an old person, I must report it to a supervisor, who may report it to the authorities such as the Department of Child and Family Services. (‘Abuse’ includes physical, sexual, or emotional abuse, and neglect.)

The risks of participation are minimal. It is possible that you may feel slightly uncomfortable at being asked some questions, but you can skip questions you don’t want to answer. To thank you, we will give you ____________ after you complete the interview. We will also give you a packet of information on how to obtain health services and social services in Los Angeles County. This information may be useful to you if you need a doctor or other type of help.

If you want to learn more about L.A.FANS or who to contact about the study, I will give you this information sheet.

Do you have any questions? Do you agree to participate in the interview part of the study?
How can I learn more about the L.A.FANS project?

You can learn more about the Los Angeles Family and Neighborhood Survey on our website www.rand.org/lafans. If you have any questions about the survey, please call 1-800-723-8942 to speak with one of the study coordinators. You can also e-mail us at lafans@rti.org.

I have questions about my involvement with this study. How can I get answers?

If you have any questions or concerns about your rights as a research subject, you can contact the RAND, UCLA, or RTI Human Subjects Protection Committees:

RAND Institutional Review Board for Human Subjects
Human Subjects Protection Committee
1776 Main Street
Santa Monica, CA 90407
Tel: 310-393-0411 x6369

UCLA Institutional Review Board for Human Subjects
Office for Protection of Research Subjects (OPRS)
P.O. Box 951694
Los Angeles, CA 90095-1694
Tel: 310-825-7122
E-mail: gcirb@oprs.ucla.edu

RTI Institutional Review Board for Human Subjects
P.O. Box 12194
Research Triangle Park, NC 27709-2194
Tel: 1-866-214-2043
8.5.2 Parent/Guardian Consent to Approach a Minor

Before interviewing minors, you must first obtain parental permission to interview them. Before approaching the minor, introduce yourself and the study to the young person’s parent or guardian using the Parental Consent Information Sheet for Child Interview (see Exhibit 8-6). You must also complete the Parent Informed Consent Form for Child Interview (see Exhibit 8-7), sign it, have the parent/guardian sign it, and give the original to the parent.

The only exception to obtaining parental permission is in the case of emancipated minors who are on their own. In these cases, proceed with Adult Informed Consent procedures.

8.5.3 Informal Oral Agreement from Children 3-6

Once the parent agrees, you should obtain informal agreement from the child before proceeding with Woodcock-Johnson assessments. Getting the child to participate is typically not a problem.

8.5.4 Assent for Children 7-8

Once the parent agrees, you must ask for the youth’s oral agreement to participate. Read the child interview assent language for children 7 to 8 years of age (see Exhibit 8-8) from the computer screen at the beginning of the Child questionnaire. In the computer, note the respondent’s oral agreement to participate. Getting the child to participate in the Woodcock-Johnson assessments is not typically a problem. However, keep in mind that a child’s failure to object does not mean he/she understands the consent process, and it should not be taken that way. Observe the child’s reaction carefully and use your judgment. Do NOT begin the assessments with a child until you are satisfied that he/she understands what you are asking and is willing to proceed.

Younger children may be shy about proceeding without a parent present, but having a parent simply stand or sit in the room may cause the child to continuously look over his/her shoulder for reassurance that the parent is still there. Therefore, if a young child insists on having a parent present, have the child sit on the parent’s lap so that he/she can be reassured and focus on the assessment.
**Exhibit 8-6 Parental Consent Information Sheet for Child Interview**

Los Angeles Family and Neighborhood Survey Wave 2  
Parental Consent Information Sheet  
Child Interview

For the parent or legal guardian of the child respondent 3 to 17 years of age:

This sheet describes the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2) and asks you to give permission for your child _________________ (CHILD NAME) to participate in the study. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your child’s participation is very important because no one else in the community is exactly like your child and we cannot use anyone else in his or her place. L.A.FANS is an on-going study, and we may contact you in the future to ask you to participate again or to participate in a separate part of the study.

By signing the attached consent form you are agreeing to let your child participate in L.A.FANS-2. Depending on the child’s age, participation will take about 10 to 60 minutes. If you give permission for your child to participate, you or your child can change your mind and stop at any time.

Who is conducting this study?

RAND, a non-profit research institution in Santa Monica, California, is conducting the L.A.FANS-2 study in collaboration with the University of California at Los Angeles (UCLA) and RTI International. RTI is interviewing participants in L.A.FANS-2. The Co-Directors of the study are:

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Who is sponsoring this study?

This project is sponsored by the National Institutes of Health, a federal government agency that supports research to improve the health of people in the United States.

Why is this study being done?

Research suggests that where people live may affect many aspects of their health. Neighborhoods and families are an important part of people’s daily environment. The goal of this study is to find out what parts of neighborhood and family life are important for health.
How did we select your child?

*If your child participated in L.A.FANS-1 between 1999 and 2001, he or she was originally chosen as part of a random sample of households and children who lived in one of 65 neighborhoods in Los Angeles County. By “random sample,” we mean that a computer chose your household by chance, like with the lottery, from a list of all households in the neighborhood. By selecting households at random, findings from the study represent the experience of the Los Angeles population. More than 3,000 families participated in L.A.FANS-1. In L.A.FANS-2, we are re-interviewing everyone from L.A.FANS-1, including your child.*

*If your child is new to L.A.FANS, he or she is being asked to participate after being chosen at random from children who were born or moved into your neighborhood since 2000. The study will include people new to this neighborhood to understand how neighborhoods in Los Angeles change over time.*

What are you asking my child to do?

*If your child is 3 to 8 years old, we will give your child a brief test to assess his or her skills in recognizing letters, words, and numbers. This is a standardized assessment specially designed for children this age. After this part is complete, we may also ask you separately if we can take some health measures for your child. However, right now, we are only asking for your permission to give your child the brief test.*

*If your child is 9 years of age or older, we ask him or her to complete a brief interview on the computer about experiences in school, with family, and with peers. The interview will take about 10 minutes for younger children and about 20 minutes for older children.*

The topics covered in the interview for children 9 years and older are:

- Neighborhood characteristics
- What school is like
- Reading and visiting the library
- Where child spends time with friends
- Smoking
- Gangs
- Relationship with parents
- Educational expectations

Children 12 years and older will also be asked about:

- Time spent doing homework
- Alcohol
- Drugs
- Running away
- Guns and experience of violence
- Sex and contraception
- Working and jobs
If you wish, you can see the questions that your child will be asked, but we will not be able to give you your child’s answers to the questions because they are confidential. As part of the interview, your child will complete a brief test to assess your child’s skills in recognizing letters, words, and numbers. This is a standardized test specially designed for children this age.

After the interview part is complete, we may ask you separately if we can take some health measures for your child. However, right now, we are only asking for your permission to give your child a brief test and (if your child is 9 years or older) to interview your child.

**How are privacy and confidentiality maintained?**

L.A.FANS-2 is strongly committed to respecting your child’s privacy and the confidentiality of information he or she provides. We will use this information only for research purposes and we will never release any information about your child specifically. The responses from your child will be combined with responses from other participants in the study and only group results will be reported. We will keep your and your child’s name and contact information so that we can contact you in the future about participating again or participating in a separate part of the study. This information will be kept completely confidential and will never be disclosed.

To further protect your privacy, the L.A.FANS project has obtained a Confidentiality Certificate from the U.S. Department of Health and Human Services. This certificate means that L.A.FANS will protect your identities and the information your child provides. We can show you a copy of the Certificate of Confidentiality.

However, if you tell me about the abuse of a child or of an old person, I must report it to a supervisor, who may report it to the authorities such as the Department of Child and Family Services. (‘Abuse’ includes physical, sexual, or emotional abuse, and neglect.)

**What are the benefits of participating in L.A.FANS?**

This is a chance for your family to make a valuable contribution to your community. The results of this study will describe the health status of Angelinos and identify areas for improvement. Reports from the study will help local governments and agencies develop better policies for improving neighborhoods and the health of their residents.

We will also give you a packet of information on how to obtain health services and social services in Los Angeles County. This information may be useful to you if you need a doctor or other type of help.

**What are the potential risks involved in participating in L.A.FANS?**

The risks are minimal. It is possible that your child may feel slightly uncomfortable at being asked some questions, but he or she can skip any questions they don’t want to answer.
Will my child be paid for the study?

Yes. Children 3 to 9 years of age will receive $5 as a thank you for participating in the study. Children 9 years of age and older will receive $20 for participating in the interview and the skills test.

How can I learn more about the L.A.FANS project?

You can learn more about the Los Angeles Family and Neighborhood Survey on our website [www.rand.org/lafans](http://www.rand.org/lafans). If you have any questions about the survey, please call 1-800-723-8942 to speak with one of the study coordinators. You can also e-mail us at lafans@rti.org.

I have questions about my involvement with this study. How can I get answers?

If you have any questions or concerns about your rights as a research subject, you can contact the RAND, UCLA, or RTI Human Subjects Protection Committees:

- **RAND Institutional Review Board for Human Subjects**
  - Human Subjects Protection Committee
  - 1776 Main Street
  - Santa Monica, CA 90407
  - Tel: 310-393-0411 x6369

- **UCLA Institutional Review Board for Human Subjects**
  - Office for Protection of Research Subjects (OPRS)
  - P.O. Box 951694
  - Los Angeles, CA 90095-1694
  - Tel: 310-825-7122
  - E-mail: gcirb@oprs.ucla.edu

- **RTI Institutional Review Board for Human Subjects**
  - P.O. Box 12194
  - Research Triangle Park, NC 27709-2194
  - Tel: 1-866-214-2043
Los Angeles Family and Neighborhood Survey Wave 2
Parental Informed Consent
Child Interview

Print name of child: _______________________________________________________________

I have reviewed the information in the L.A.FANS-2 information sheet. All of my questions have been
answered to my satisfaction. I give my permission to allow my child to participate in the interview and
assessments for this study under the conditions described. I also acknowledge that I have received a copy of
this form.

Adult’s signature: ____________________________ Date: _____/_____/_____

Adult’s printed name: ___________________________________

Relationship of adult to child: _______________________________________

Signature of Field Interviewer: _______________________ Date: _____/_____/_____

Field Interviewer’s printed name: _______________________________________

First                     Middle                      Last
Los Angeles Family and Neighborhood Survey Wave 2
Child Interview Assent for Children 7 to 8 Years of Age

Your (mother/father/other guardian) said that, if you agree, you can be a part of this important study. I’m going to give you a short reading and math test that I think you will find interesting. All of your answers are private and will not be given to anyone else, not even to your parents or family. You get to decide if you want to be in the study. You can change your mind and stop at any time. If you want to be in the study, you can skip any questions you don’t want to answer.

Do you have any questions for me? Would you like to participate?
8.5.5 Assent for Children 9-14

Once the parent agrees, you must ask the youth to agree to participate. Read the child interview assent language for children 9 to 14 years of age (see Exhibit 8-9) from the computer screen at the beginning of the Child questionnaire. In the computer, note the respondent’s oral agreement to participate. Refer to Section 8.4.1 and Exhibit 5.6 for information and tips on obtaining participation from older youths, particularly teenagers. If the child seems to have trouble understanding, determine if the problem is temporary. If he/she is drunk or high, end the visit and return at another time.

8.5.6 Assent for Children 15-17

Once the parent agrees, you must ask the youth to agree to participate. Introduce yourself and the study to the child using the Assent Information Sheet, Interview of Respondents 15 to 17 years of age (see Exhibit 8-10). You will hand the information sheet to the child to follow as you read the child interview assent language for children 15 to 17 years of age (see Exhibit 8-11) from the computer screen at the beginning of the Child questionnaire. In the computer, note the respondent’s oral agreement to participate. Refer to Section 8.4.1 and Exhibit 8-2 for information and tips on obtaining participation from older youths, particularly teenagers. If the child seems to have trouble understanding, determine if the problem is temporary. If he/she is drunk or high, end the visit and return at another time.

Although it may seem like a difficult process to obtain consent from both the parent and the minor(s) and to find time to complete all interviews and assessments, members of most households will be willing to work with you to make the time.

8.6 Getting Started

Whenever possible, proceed with the interview immediately after you finish rostering and obtain consent. The best way to achieve high response rates and be efficient is to always try to complete the interview when you are already at the household and have identified the respondent(s) to be interviewed. If any selected respondents are present and willing to participate, begin an interview or assessment. If two or more respondents in the same household are selected to complete an interview or assessment, never complete these simultaneously.

Being comfortable with the logistics of setting up the computer and starting the interview makes it much easier for you to focus on establishing rapport with respondents, gaining their cooperation, and answering any questions they may have. Practicing this beforehand improves your chances of doing this correctly during an actual interview.
Exhibit 8-9 Child Interview Assent for Children 9 to 14 Years of Age

Los Angeles Family and Neighborhood Survey Wave 2
Child Interview Assent for Children 9 to 14 Years of Age

Your (mother/father/other guardian) has agreed to let you be part of this important study. If you agree, I will give you a brief reading and math test, and then I will ask you to answer some questions about your experiences with school, family, and friends. I will show you how to enter your answers directly into the computer. All of your answers will be kept private—your answers will not be given to anyone else, not even to your parents or family. You get to decide if you want to be in the study. You can change your mind and stop at any time. If you decide to participate, you can skip any questions you don’t want to answer.

Do you have any questions for me? Would you like to participate?
Exhibit 8-10 Assent Information Sheet for Children 15 to 17 Years of Age

Los Angeles Family and Neighborhood Survey Wave 2
Assent Information Sheet
Interview of Respondents 15 to 17 Years of Age

For the respondent 15 to 17 years of age:

Your (mother/father/other guardian) has agreed to let you be part of this important study called the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2).

If you agree, I will give you a brief reading and math test, and then I will ask you to answer some questions about your experiences with school, family, and friends. I will show you how to enter your answers directly into the computer. All of your answers will be kept private—your answers will not be given to anyone else, not even to your parents or family.

You get to decide if you want to be in the study. You can change your mind and stop at any time. If you decide to participate, you can skip any questions you don’t want to answer.

Your participation is very important because no one else in the community is exactly like you and we cannot use anyone else in your place. L.A.FANS is an on-going study, and we may contact you in the future to ask you to participate again or to participate in a separate part of the study.

Who is conducting this study?

RAND, a non-profit research institution in Santa Monica, California, is conducting this study in collaboration with the University of California at Los Angeles (UCLA) and RTI International.

Why is this study being done?

This study is being done to find out what parts of neighborhood and family life are important for health of children, adolescents, and adults.

How did we select you?

A computer chose you and your household by chance, like with the lottery, from a list of all households in the neighborhood.

What are the benefits and risks of participating in L.A.FANS?

This is a chance for you to make a valuable contribution to your community. The results of this study will describe the health status of Angelinos and identify areas for improvement. You may feel slightly uncomfortable at being asked some questions, but you can skip any questions you don’t want to answer.

Will I be paid for the study?

Yes. You will receive $20 for participating in the interview and the skills test.
Exhibit 8-11 Assent Information Script for Children 15 to 17 Years of Age

Los Angeles Family and Neighborhood Survey Wave 2
Interview Assent for Respondents 15 to 17 Years of Age

Your (mother/father/other guardian) has agreed to let you be part of this important study called the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2). I am going to give you and information sheet telling you about this study.

If you agree, I will give you a brief reading and math test, and then I will ask you to answer some questions about your experiences with school, family, and friends. The interview will cover many topics, including school, reading, homework, smoking, drugs and alcohol, gangs, relationship with parents, sex and contraception, violence, and jobs.

I will show you how to enter your answers directly into the computer. All of your answers will be kept private—your answers will not be given to anyone else, not even to your parents or family.

You get to decide if you want to be in the study. You can change your mind and stop at any time. If you decide to participate, you can skip any questions you don’t want to answer.

Your participation is very important because no one else in the community is exactly like you and we cannot use anyone else in your place. L.A.FANS is an on-going study, and we may contact you in the future to ask you to participate again or to participate in a separate part of the study.

RAND, a non-profit research institution in Santa Monica, California, is conducting this study in collaboration with the University of California at Los Angeles (UCLA) and RTI International.

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A computer chose you and your household by chance, like with the lottery, from a list of all households in the neighborhood.

This is a chance for you to make a valuable contribution to your community. The results of this study will describe the health status of Angelinos and identify areas for improvement. You may feel slightly uncomfortable at being asked some questions, but you can skip any questions you don’t want to answer.

If you agree to participate in this study, you will receive $20 for participating in the interview and the skills test.

Do you have any questions for me? Would you like to participate?
8.6.1 Choosing a Location

Once you have obtained consent for the interview, ask the respondent for the best place to conduct the interview. Consider the following issues when choosing a location:

- **Privacy.** Make sure you are providing a reasonably private location for the respondent. Find a place where the screen is not visible to anyone else. For a discussion on the importance of privacy, see Section 8.6.2 below.

- **Ethics.** Do not interview a youth if an adult is not present in the home. Never conduct an interview in a separate bedroom.

- **Temperature.** High temperatures can mean the laptop feels hot if placed on a lap, and sweaty hands are more likely to slip on the keyboard. This is not insurmountable but should be a consideration if there is an option for a cooler location. Also, use of a sturdy table is recommended.

- **Battery power.** Conduct the interview by plugging the power cord into an outlet whenever possible. Make sure you have a fully charged battery in case the interview is conducted in a place with no connection to an outlet (such as on a front porch). It is a good idea to recharge the battery by plugging it into a wall outlet the night before going out into the field. Remember the battery will last about two to three hours before needing to be recharged. See Chapter 2 of the FI Computer Manual for more information.

- **Safety.** Choose a location where both you and the respondent feel reasonably safe. For example, avoid conducting the interview outside in a neighborhood where you feel theft or violence is a risk.

Given these constraints, try to be as flexible as possible without compromising the standards and rules for administering the interview. Whatever location you agree upon, make sure there is the necessary privacy and convenience for the respondent to complete the survey honestly.

8.6.2 Privacy

For several reasons, the L.A. FANS-2 interviews should be conducted in private:

- Some questions may be perceived as personal and sensitive. An adult or young person might feel very uncomfortable responding when other family members are present. Maintaining the confidentiality of data is crucial if the respondent is to provide honest answers.

- Privacy helps minimize the number of distractions, allowing the respondent to focus on the task at hand.

- Without privacy, respondents may tell you what they think you want to hear rather than providing the real answer.

Due to cultural and individual differences, the perception of privacy varies. For some, privacy may not be viewed as achievable or even desirable given the number of people living in the residence. Experiences often are openly shared with family members. The presence of an infant or very small child
usually is not a problem; however, you should encourage those with very young children to schedule the interview for a time when someone can assist with the children if possible.

In some instances a household member, such as a parent, may insist on being present during the interview. A parent, guardian or other adult should be present in the house during a youth interview or assessment. However for older children, a parent should not be in the same room and able to view or hear any of the questions or answers. (For younger children, it will probably be necessary to have a parent in the room during the administration of the Woodcock-Johnson Assessment).

If the parent wishes to be present in the room during the administration of the survey, explain that the young person must be able to listen and answer all questions in privacy. Explain to the parent that respondents are generally more honest—thus providing higher quality data—when allowed to answer the questions privately. It is important that the youth be comfortable enough with the situation to answer questions honestly. The presence of a parent could compromise the data we receive. Well-meaning parents may try to clarify or explain a situation the young person has described or coach him/her on answers. Inform the parent that the study is very interested in the answers of the young person and would like him/her to answer without any outside influence.

If the parent still insists on being present, go ahead with the interview but make sure the parent cannot hear or view the questions or answers. If this is not possible and there is no privacy, politely stop the interview and reschedule for another time. Document the situation in your ROC.

In general, if privacy is disrupted briefly by someone walking through the room, stop reading questions until the person is gone and a private setting is re-established. If household members are present or interrupt often, one way to achieve greater privacy is to position the respondent next to you so he/she can read the questions and response categories on the computer screen and then say the number or letter or simply point to the answer on the screen. That way, other household members passing through do not hear the questions or answers. Looking at the screen allows the respondent to answer with a number or letter so other household members do not know the responses. However, this would not be effective when interviewing a poor or non-reader who needs to hear the questions and responses read aloud.

Finally, if you believe the setting is not private enough for the respondent to answer truthfully, offer to return to the household when you can complete the interview in private.

8.6.3 Setting Up the Computer

When you choose a spot to set up the computer for the interview, plan to sit opposite or diagonally to the respondent. Here are some ergonomic considerations to maximize your own comfort and that of the respondent when setting up the equipment. Whenever possible:
• Sit with the computer straight in front of you at a comfortable height. Place your feet flat on the floor and keep your back straight. The monitor should be about 20” in front of your face.

• Keep your arms at a 90-degree angle to the keyboard with your wrists straight.

• Arrange for adequate lighting. Soft, indirect lighting is preferable. Position the screen so that sunlight or bright indoor lighting does not reflect off it.

Just a few adjustments like these will greatly increase your comfort in the short and long-term. Once you are in a suitable, private location, assemble your equipment and materials

8.7 Respondent Difficulties

At some point, you may encounter a respondent who is impaired in some way. The main concern is whether the respondent is physically and emotionally capable of participating in the study. Since the interviews are conducted in CAI where you read the question out loud from the screen, many people with impairments will be able to complete the interview.

However, portions of the PCG and Child questionnaires are self-administered: the respondent reads the question on the screen him/herself and enters his/her answer in the computer. For the SAQ portion of an interview, a physically impaired respondent may not be able to complete the interview. This is a judgment call that you must make. Below are some guidelines for dealing with respondent impairments:

• **Blind respondent.** In the case of a blind respondent, for the self-administered portion of a questionnaire you should sit beside him/her and read the questions out loud. Some respondents may feel comfortable entering the self-administered responses on their own if they can type by touch. If necessary, place the respondent’s fingers on the keyboard, reminding him/her to ask for help when needed. If the respondent is not comfortable entering responses, have the respondent tell you the answers he/she wants you to enter into the computer.

• **Deaf respondent.** To participate, a deaf respondent must be able to read. First, have the respondent read the assent language on the computer screen and agree to continue. Then allow the respondent to read questions from the computer screen and enter his/her own answers. Sit beside the respondent as he/she does this and point out any necessary keys on the laptop. It may be necessary for you to communicate with the respondent on paper if he/she has questions or if you need to probe. For the self-administered portion of the questionnaire, you should move to where you cannot see the respondent’s answers.

• **Physically impaired respondent.** If a respondent is not able to answer the self-administered questions because of a physical limitation such as paralysis, then he/she should tell you the answer he/she wants you to enter into the computer.

For all of these situations—and any case that deviates from the standard protocol—using the CTRL-M key, enter a note in the computer at the beginning of the interview AND fully document the situation on your ROC.
8.8 Interview Event Codes

Assigning interview event codes follows the same logic and process as assigning screening result codes (see Chapter 6). Always record the appropriate pending or final interview code for every screening that results in a code 291 (Eligible HH with children) or 292 (Eligible HH without children) or Panel cases with CID outcome of 293-295. Both pending and final interview result codes are described in the below sections.

8.8.1 Pending Interview Event Codes

Assign an interview event code for every attempt you make to interview at the sample address. Until you complete the interview or otherwise finalize the case (with your supervisor’s guidance), assign pending interview codes to indicate the status of the case. Explanations of when to use a particular code and what steps to take to resolve the situation so that the case can be completed are provided in the event codes list that follows.

The codes listed below have the following information:
- Code number;
- Brief description or “name” of the code;
- Explanation of the code’s use; and
- The “Action” line, which will display the normal next step to take after a particular code is assigned.

301 NO ACTION TAKEN

USE WHEN: An interview case is newly assigned and has had no work done on it.

ACTION: None. This code appears automatically in the CMS when the case is spawned. FIs never enter this code.

319 ACCESS DENIED TO BUILDING/COMPLEX

USE WHEN: You are denied access to a building or complex by a property manager or other person in authority.

ACTION: Explain that you have an appointment with a resident. You may mention the respondent’s name as long as you are vague about the nature of the study.

Don’t antagonize the property manager. If you can, determine the property manager’s concerns and gather as much information as possible (property manager’s name, telephone number, etc.).
If the respondent is willing, have him/her speak to the property manager to assure the property manager your presence on the property is legitimate.

Record the visit in your ROC and in the CMS. Make detailed notes while the incident is still fresh in your mind.

Discuss the situation with your FS and together, develop a strategy for trying to gain access. Your supervisor may decide to send a controlled access letter or call the property manager.

320 NO ONE HOME

USE WHEN: No one is at the DU.

ACTION: Plan another call or visit at a different time of day or another day of the week.

Try contacting the household on the same day of the week or same time of day when the screening was completed.

Ask a neighbor when would be a good time to catch someone at home. Record any information in the ROC and CMS.

321 RESPONDENT NOT AT HOME

USE WHEN: Someone is at the DU but not the selected interview respondent(s).

ACTION: Try to determine a good time to find the respondent(s) at home. Ask a household member, and record any information in your ROC and CMS about possible times to contact the respondent.

Plan another visit at a different time of day or another day of the week.

322 RESPONDENT NOT AVAILABLE

USE WHEN: The selected interview respondent(s) is home but is unable to do the interview at that time.

ACTION: Plan another visit at a different time of day or another day of the week.

Try to determine a good time to catch the respondent(s) at home by asking for a day and time when you could return.

Record the visit and any pertinent information in your ROC and CMS.
**330  APPOINTMENT FOR INTERVIEW**

**USE WHEN:** You have spoken with the respondent and have set a time to conduct the interview.

**ACTION:** Note the appointment in your calendar and complete an appointment card for the respondent.

Record the visit, the appointment, and any other pertinent information in your ROC and CMS.

**335  APPOINTMENT BROKEN**

**USE WHEN:** This code cannot be assigned by FIs.

**ACTION:** Record the visit, along with any pertinent details, in your ROC and CMS and code the case according to the situation (no one home, R not available, etc.).

The CMS will convert the event code you entered (no one home, R not available, etc.) into status code 335.

**336  BREAKOFF – NO APPOINTMENT**

**USE WHEN:** This code cannot be assigned by FIs. It is automatically assigned by the computer when an interview is started and not completed **OR** when one segment is done but additional ones need to be completed.

**ACTION:** Record the visit, along with any pertinent details, in your ROC and CMS and code the case according to the situation (appointment for interview, etc.).

The CMS will convert the event code you entered (appointment for interview, etc.) into status code 336.

**350  CASE NOT NEEDED**

**USE WHEN:** This is a special code you will use primarily to code out unneeded roster cases created from the CID. Use this code only after consulting with your FS.

**359  RESPONDENT DECEASED**

**USE WHEN:** You determine a selected participant is now deceased.
360 TEMPORARY REFUSAL BY RESPONDENT

USE WHEN: The respondent refuses to let you start the interviewing process. This code is for adult respondents and for youth respondents who refuse to complete the interview. If a parent or guardian refuses to give permission for a youth to be interviewed, use code 361, Temporary Refusal - Guardian, whether or not the youth is willing to be interviewed.

ACTION: Tactfully try to persuade the respondent to participate. See Chapter 5 for information about overcoming refusals and obtaining participation.

DON'T antagonize the respondent. Leave the door open for you or someone else to attempt to convert the refusal and complete the case. Your supervisor makes this decision.

To the extent possible, determine the reason for the refusal.

Record the visit in your ROC and CMS. Indicate the reason for the refusal.

Make detailed notes while the incident is still fresh in your mind. By recording what happened, you will greatly assist your supervisor in deciding how to handle the case and will help the next FI, if someone else tries to convert the case.

361 TEMPORARY REFUSAL BY PARENT/GUARDIAN

USE WHEN: The parent/guardian refuses to allow you to interview the selected youth(s).

ACTION: Tactfully try to persuade the parent to let you talk with the youth.

DON'T antagonize the parent. Leave the door open for you or someone else to attempt to convert the refusal and complete the case. Your supervisor makes this decision.

To the extent possible, determine the reason for the refusal.

Record the visit in your ROC and CMS. Indicate the reason for the refusal.

Make detailed notes while the incident is still fresh in your mind to help your supervisor decide how to handle the case and possibly help another FI, if someone else tries to convert the case.
370  **LANGUAGE BARRIER - SPANISH**

**USE WHEN:** The respondent speaks Spanish and does not speak English well enough to complete the interview.

**ACTION:** Talk with your supervisor about transferring the case to an RTI-Certified bilingual FI.

Record the visit in your ROC and CMS.

*RTI-Certified bilingual interviewers should never use this code.*

371  **LANGUAGE BARRIER - OTHER**

**USE WHEN:** The respondent speaks a language other than English or Spanish and does not speak English well enough to complete the interview.

**ACTION:** Talk with your supervisor.

Record the visit in your ROC and CMS.

375  **PHYSICALLY/MENTALLY INCAPABLE (SPECIFY)**

**USE WHEN:** A respondent is unable to meaningfully answer the questions. Examples are respondents with pronounced mental retardation or who are intoxicated. Also, physical problems due to serious illness, deafness, or severe speech disorders may qualify.

**ACTION:** Try to determine if the incompetence is temporary (as in illness or intoxication). If so, return at a more convenient time.

If the incompetence is not temporary, discuss the situation with your supervisor. Always attempt the interview unless it is absolutely clear that the respondent cannot be interviewed.

Record the visit in your ROC and CMS and describe the situation fully.

377  **RESPONDENT INCARCERATED**

**USE WHEN:** The respondent is unavailable to complete the interview because he/she is in jail or prison.

**ACTION:** Try to determine if and when the respondent will be released from jail or prison.

Record the visit in your ROC and CMS and describe the situation fully.

Discuss the situation with your supervisor who will determine how to proceed.
378  **RESPONDENT INSTITUTIONALIZED**

**USE WHEN:** The respondent is unavailable to complete the interview because he/she is institutionalized (e.g., in the hospital).

**ACTION:** Try to determine if and when the respondent will be getting out of the institution and coming home.

Record the visit in your ROC and CMS and describe the situation fully.

Discuss the situation with your supervisor who will determine how to proceed.

380  **RESPONDENT UNLOCATABLE**

**USE WHEN:** The whereabouts of the respondent is unknown.

**ACTION:** Ask other household members or neighbors to call you if the respondent returns to the household or they become aware of where he/she is.

Record the visit in your ROC and CMS and describe the situation fully.

Discuss the situation with your supervisor who will determine how to proceed.

381  **RESPONDENT MOVED OUT OF INTERVIEW AREA**

**USE WHEN:** You learn the respondent is residing outside of Los Angeles County.

**ACTION:** Probe to collect as much information as possible about the respondent’s current location, including address and telephone information.

Record the visit in your ROC and CMS and thoroughly document the respondent’s whereabouts in the case folder.

Discuss the situation with your supervisor who will determine how to proceed.
382  **RESPONDENT MOVED OUT OF COUNTRY**

**USE WHEN:** You learn the respondent is residing outside of the country.

**ACTION:** Probe to collect as much information as possible about the respondent’s current location, including address and telephone information.

Record the visit in your ROC and CMS and thoroughly document the respondent’s whereabouts in the case folder.

Discuss the situation with your supervisor who will determine how to proceed.

383  **RESPONDENT UNLOCATABLE – SENT TO FIELD TRACKING SPECIALIST**

**USE WHEN:** The respondent is unlocatable and the case is transferred to a field tracking specialist.

**ACTION:** Discuss the situation with your supervisor who will advise you to enter this code.

384  **RESPONDENT UNLOCATABLE – SENT TO RTI TRACING UNIT**

**USE WHEN:** The respondent is unlocatable and case information is sent to the RTI tracing unit.

**ACTION:** Discuss the situation with your supervisor who will advise you to enter this code.

385  **INFORMATION SENT BACK TO FIELD FROM RTI TRACING**

**USE WHEN:** Used to indicate that RTI tracing activities are completed for the case.

**ACTION:** Discuss the situation with your supervisor who will advise you to enter this code.

389  **OTHER (SPECIFY)**

**USE WHEN:** The situation you encounter does not fit into any of the categories above.

**ACTION:** Record the visit in your ROC and CMS and describe the situation fully.

Discuss with your supervisor how to handle the case.
8.8.2 Final Interview Event Codes

Final interview event codes indicate the interview case has been completed or that you are unable to complete the interview or assessment. Be sure you have completed all suggested relevant steps described in the pending codes section and have consulted your supervisor on any additional possible steps before requesting permission to finalize a case where you could not obtain an interview. If all attempts fail, your supervisor must agree that the case is complete before assigning a non-interview final code. The list below describes final codes for interviews. Some codes can only be assigned by the field supervisor:

419 ACCESS DENIED TO BUILDING/COMPLEX

FS ASSIGNS: Your FS will assign this code if the correct residence was located, but you were never able to gain access due to a gatekeeper. Most commonly, this would be the result of a respondent living in a controlled-access apartment building or a gated community.

420 NO ONE AT HOME AFTER REPEATED VISITS

FS ASSIGNS: Given the importance of each and every interview, we expect diligence in pursuing selected household members. However, if repeated attempts at different times of the day and days of the week fail, discuss the case with your FS who may decide to assign this code.

422 RESPONDENT NOT AVAILABLE

FS ASSIGN: We hope that with persistence this code will be used rarely. However, there may be situations where the respondent simply cannot make the time. After you have investigated the situation fully, discuss the case with your FS who may decide to assign this code.

450 CASE NOT NEEDED

USE WHEN: This is a special code you will use primarily to code out unneeded roster cases created from the CID. Use this code only after consulting with your FS.

455 DATA ENTERED IN ERROR

USE WHEN: This is a special code that will be used (we hope rarely) to indicate that data was incorrectly entered under an improper ID.

458 OTHER NON-INTERVIEW – INELIGIBLE

FS ASSIGN: This code is only assigned by FSs or RTI project staff in special circumstances, such as when it is determined that the household was not originally eligible for the study.
459 **RESPONDENT IS DECEASED**

**FS ASSIGN:** We certainly hope to use this code rarely. However, your FS should use this code if the respondent has died.

460 **FINAL REFUSAL BY RESPONDENT**

**FS ASSIGN:** If all attempts to convert an adult or youth refusal are unsuccessful, discuss the case with your FS, who may decide to assign this code. Be sure you have accurately documented the reasons for the refusal on the ROC and in the CMS.

461 **FINAL PARENTAL REFUSAL FOR YOUTH**

**FS ASSIGN:** If all attempts to persuade the parent or guardian to allow you to interview the youth are unsuccessful, discuss the case with your FS, who may decide to assign this code. Be sure you have accurately documented the reasons for the refusal in the ROC and in the CMS.

470 **LANGUAGE BARRIER - SPANISH**

**FS ASSIGN:** Your supervisor may decide to assign this code if the case cannot be completed because of a Spanish language barrier and no RTI-Certified bilingual interviewer was available to complete the case.

471 **LANGUAGE BARRIER - OTHER**

**FS ASSIGN:** If the respondent does not speak English or Spanish, discuss the case with your supervisor, who may decide to assign this code. There can be NO translators for the interview. Designate the language (including sign language, if appropriate) on the ROC and in the CMS.

475 **PHYSICALLY/MENTALLY INCAPABLE (SPECIFY)**

**FS ASSIGN:** If the respondent is physically or mentally unable to respond meaningfully to the interview questions, your FS may assign this code. Be sure you have accurately documented the situation on the ROC and in the CMS.

477 **RESPONDENT INCARCERATED**

**FS ASSIGN:** If the respondent is incarcerated and will not be released before the end of the data collection period, discuss the case with your FS, who may assign this code. We cannot conduct interviews in prisons or jails. Be sure you have accurately documented the situation on the ROC and in the CMS.

478 **RESPONDENT INSTITUTIONALIZED**

**FS ASSIGN:** If the respondent is in an institution (e.g., mental hospital) and will not be released in the near future, your FS will approve the use of this code.
480 **RESPONDENT UNLOCATABLE**

**FS ASSIGN:** If the respondent’s whereabouts are unknown and it appears that will continue to be the situation, discuss it with your FS. He/she will approve the use of this code.

481 **RESPONDENT MOVED OUT OF INTERVIEWING AREA**

**FS ASSIGN:** If the respondent has moved out of Los Angeles County, your FS will approve the use of this code.

482 **RESPONDENT MOVED OUT OF COUNTRY**

**FS ASSIGN:** If the respondent has moved out of the United States, your FS will approve the use of this code.

489 **OTHER (SPECIFY)**

**FS ASSIGN:** Use this code only for cases that do not fit any of the other categories. Be sure to fully describe the situation in your ROC and CMS and talk with your FS for approval to assign this code. Carefully consider if another result code applies, since each case with a code 489 must be manually reviewed by RTI staff.

490 **PARTIAL INTERVIEW**

**FS ASSIGN:** FIs cannot assign this code. The computer will automatically assign this code when another final interview code has been entered and only some interviews/assessments for the participant have been completed. If the interview results in a breakoff and you are unable to get the participant to finish, your FS may give you approval to code the case a 460. After you enter the 460, the computer will automatically reflect the status of the interview as code 490 – final partial.

491 **COMPLETE**

**COMPUTER ASSIGNS:** The computer will automatically assign this code when the FI completes the last item within the interview and exits the case.
9. L.A. FANS-2 INTERVIEWS

This chapter provides an overview of the L.A. FANS-2 interview instruments. Details and protocols for administering the interviews are discussed elsewhere in this manual. This chapter summarizes the content of each interview, the modules within the interviews, and who will be asked to complete each interview.

9.1 Overview

The L.A.FANS-2 adult and child interviews are a collection of several separate segments, called modules. Exhibit 9.1 lists the various modules for the adult and child interviews, sections within each module, and which individual(s) receive each module. Remember that respondents may be panel members who were previously interviewed or new entrants who have been selected to participate for the first time. In some households, the Randomly Selected Adult (RSA) and the Primary Caregiver (PCG) may be the same person. Households with children may have both a Randomly Selected Child (RSC) and a Sibling (SIB); the particular modules each child completes and the sections within a module will depend on his/her age. Some panel children will have aged up to adulthood and will receive the adult instrument.

NOTE: You do not need to memorize the information provided in Exhibit 9.1. The computer will select appropriate respondents, modules, and sections for interviews.

The following is a list of helpful reminders in completing the L.A. FANS-2 interviews:

1. Ask the questions using the exact words on the screen.
2. Read the questions at a proper pace. A pace of about two words per second is recommended.
3. Use introductory or transitional statements as they are written.
4. Read the response options as written to respondents, when in lower case text.
5. Use appropriate neutral or non-directive probes when needed.
6. When recording open-ended or “other, specify” responses, write it verbatim in the computer. If you need more room than allowed, press [CTRL-M] to continue capturing the answer in a comment box.
7. Although the instruments have been thoroughly tested, given their length and breadth you may encounter an errors. Should you encounter a problem, please note the specific item number and issue and send an email to your FS describing the situation. Your feedback is very important in ensuring the survey instruments function smoothly.
### Exhibit 9.1 L.A. FANS-2 Interview Modules

<table>
<thead>
<tr>
<th>Modules &amp; Module Sections</th>
<th>Administered To</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ROSTERING MODULE</strong></td>
<td>Eligible Roster Respondent: 18+ and resident of HH at least half time</td>
</tr>
<tr>
<td></td>
<td>RSA (includes EMs)</td>
</tr>
<tr>
<td>With or without children, if HH Eligible:</td>
<td></td>
</tr>
<tr>
<td>ADULT MODULE</td>
<td>Always</td>
</tr>
<tr>
<td>Racial Observation Questions</td>
<td>Yes (by FI)</td>
</tr>
<tr>
<td>Checking Roster Information</td>
<td>If not RR</td>
</tr>
<tr>
<td>Neighborhood Opinion</td>
<td>Yes</td>
</tr>
<tr>
<td>Family Background</td>
<td>Yes</td>
</tr>
<tr>
<td>Educational History</td>
<td>Yes</td>
</tr>
<tr>
<td>Marital Status/ Past Partners/ Children</td>
<td>Yes</td>
</tr>
<tr>
<td>Current Spouse/ Partner</td>
<td>Yes</td>
</tr>
<tr>
<td>Parents &amp; Siblings</td>
<td>Yes</td>
</tr>
<tr>
<td>Event History Calendar</td>
<td>Yes</td>
</tr>
<tr>
<td>Residential History Follow-up</td>
<td>Yes</td>
</tr>
<tr>
<td>Employment History Follow-up</td>
<td>Yes</td>
</tr>
<tr>
<td>Public Assistance Follow-up</td>
<td>Yes</td>
</tr>
<tr>
<td>Health Status</td>
<td>Yes</td>
</tr>
<tr>
<td>Contact Information</td>
<td>Yes</td>
</tr>
<tr>
<td>With or without children, if HH Eligible:</td>
<td></td>
</tr>
<tr>
<td>HOUSEHOLD MODULE</td>
<td>Sometimes</td>
</tr>
<tr>
<td>HH with children:</td>
<td></td>
</tr>
<tr>
<td>PARENT MODULE FOR RSC</td>
<td>No</td>
</tr>
<tr>
<td>PARENT MODULE FOR SIB</td>
<td>No</td>
</tr>
<tr>
<td>Relationship to Child</td>
<td>Yes</td>
</tr>
<tr>
<td>Current Residences</td>
<td>Yes</td>
</tr>
<tr>
<td>Residential History</td>
<td>Yes</td>
</tr>
<tr>
<td>Birth Place/ Immigration</td>
<td>Yes</td>
</tr>
<tr>
<td>Missing Parents</td>
<td>Yes</td>
</tr>
<tr>
<td>School</td>
<td>Yes</td>
</tr>
<tr>
<td>Child Care</td>
<td>Yes</td>
</tr>
<tr>
<td>Behavior</td>
<td>Yes</td>
</tr>
<tr>
<td>Siblings</td>
<td>Yes</td>
</tr>
<tr>
<td>Health</td>
<td>Yes</td>
</tr>
<tr>
<td>PRIMARY CAREGIVER MODULE</td>
<td>No</td>
</tr>
<tr>
<td>CHILD MODULE</td>
<td>No</td>
</tr>
<tr>
<td>W-J ASSESSMENT</td>
<td>No</td>
</tr>
<tr>
<td>Letter-Word Identification</td>
<td>No</td>
</tr>
<tr>
<td>Applied Problems</td>
<td>No</td>
</tr>
<tr>
<td>Passage Comprehension</td>
<td>Always</td>
</tr>
</tbody>
</table>
9.2 Household Roster

The main purpose of the Household Roster is to determine who lives in the household and how they are related to each other. The Household Roster will be administered at both panel and new entrant households. As described earlier, completion of the case initiation database (CID) will spawn the appropriate number of rosters to cover the needs of the household.

The Household Roster is the first module that you complete in a household. The respondent for the household roster must be age 18 or older and must usually live at least half time in the household. The information collected in the Roster module includes basic demographic information on all part- and full-time residents of the dwelling unit (e.g., ethnicity, schooling, parental status, receipt of public assistance, health insurance coverage, employment in last month), relationships among household members, and the identification of parents (or primary caregivers) of all children.

In addition, for panel respondents, the Roster asks about household members no longer living in the dwelling unit. The information collected in this part of the Roster module will include the current status of all members of the Wave 1 household Roster with a special focus on obtaining information on those who have moved, are deceased, or lack information regarding their whereabouts.

9.3 Adult Interview

The Adult Interview will be administered to all RSAs and PCGs, plus any panel RSCs or SIBs who have been declared emancipated minors or who are now 18 years of age or older. The Adult Interview is comprised of four modules: Primary Caregiver, Parent, Adult, and Woodcock-Johnson test battery. Based on the age and the status of the respondent, the CAI survey system will generate an Adult Interview that contains the correct modules. The sequence of interview modules is listed in the table below, which shows that the Primary Caregiver is first, followed by the Parent module, the Adult module and the Woodcock-Johnson:

<table>
<thead>
<tr>
<th>Respondent Type</th>
<th>Primary Caregiver Module</th>
<th>Parent Module</th>
<th>Adult Module</th>
<th>Woodcock Johnson Revised</th>
</tr>
</thead>
<tbody>
<tr>
<td>RSC or SIB (18+ years or &lt;18 and an emancipated minor, and not a PCG)</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>RSA (who is not also a PCG)</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>PCG (who may also be an RSA or adult RSC or SIB)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

The next sections provide an overview of each component.
9.3.1 Primary Caregiver Module

The PCG module is administered to primary caregivers (PCGs) (who may also be an RSA or an adult RSC or SIB). The questions ask about the PCG and the family. Topics include family dynamics, social support, and relationship with spouse/partner.

Part of the Primary Caregiver module will be self-administered by the respondent. You will turn the computer over to the respondent during which the computer will take the respondent through a tutorial then a series of sensitive questions about his/herself and his/her family life.

9.3.2 Parent Module

This module is administered to PCGs (who may also be an RSA or an adult RSC or SIB). Questions ask the PCG (often the mother) about the RSC and SIB. Topics include living arrangements, residential history (for past six years), place of birth and immigrant status, child support, paternity, contact with absent parent(s), school, child care, child behavior checklist, child’s friends, health, and health care utilization.

Although unlikely, it is possible that you could administer this module up to four times in households with children. More questions are asked for the first child (the RSC) than for all other children (this avoids burdening the respondent with the identical question several times).

9.3.3 Adult Module

This module is administered to RSAs and PCGs plus any panel RSCs or SIBs who are emancipated minors or are now at least 18 years old. The information collected in this interview is about the adult respondent and his/her spouse/partner (if the spouse/partner was not interviewed). Topics include family background, educational history, fertility and marriage/cohabitation history, social ties, residential history, employment, welfare, and health status. The module contains a set of detailed questions on neighborhood definition, neighborhood participation and interaction, perceptions of current neighborhood characteristics, perceptions of a random sample of other neighborhoods in Los Angeles County, and characteristics of the last neighborhood of residence. The module also includes a computerized interactive event history calendar (EHC) that records detailed information for the preceding 6-year period on residences, periods of employment and unemployment, program participation, and health insurance. The module also collects detailed recontact information for the participant.
9.3.4 Event History Calendar

The EHC is a Windows-based program that collects information on important episodes in respondents’ lives. Because this information spans six years before the interview, the EHC uses significant events in respondents’ lives as anchors. These anchors, called “landmark events,” help respondents remember other, less meaningful events in their lives and when they occurred. The EHC also helps respondents recall information by having them describe a sequence of events ordered in time. The landmark events and the sequential ordering of information will also help you, the interviewer, assist the respondent in determining when events occurred and allow you to easily spot any inconsistencies, gaps, or overlaps in information they report.

9.3.5 FI Observations

During the adult interview with primary caregivers (PCGs) you will answer some observation questions about the household. These questions gather information about the physical environment and factors that may affect children. Read these questions to yourself and base your answers on what you know or have seen. Do not explore the home in an attempt to better or more completely answer the questions and do not discuss your observations with anyone (including household members).

9.3.6 Industry and Occupation Questions

Throughout the Adult Questionnaire there are places where respondents are asked for details about the occupations of various people—including themselves, their spouse, and their parents while growing up. The respondent’s answers are used to assign two standard 3-digit codes that precisely classify the work in a particular industry and as a particular occupation. To correctly assign the appropriate codes requires very detailed and accurate responses.

When respondents are asked about the kind of work they or someone else engages in, you should probe and obtain as much detail as possible. The following examples illustrate the level of specificity you should strive for:

<table>
<thead>
<tr>
<th>BAD</th>
<th>GOOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurse</td>
<td>RN in a hospital’s neonatal unit</td>
</tr>
<tr>
<td></td>
<td>RN providing home nursing care</td>
</tr>
<tr>
<td></td>
<td>LPN in a doctor’s office</td>
</tr>
<tr>
<td>Teacher</td>
<td>12th grade English Teacher at a private School</td>
</tr>
<tr>
<td></td>
<td>Special-Education teacher in a public elementary school</td>
</tr>
</tbody>
</table>
If a respondent gives you a job title that conveys little or nothing about the occupation, probe to try to determine the trade, profession, or business. A respondent may respond with educational attainment (e.g., “She has a medical degree”), but you should not assume the person works as a doctor. Probe to find out what the respondent does (perhaps rather than working in a medical practice, he/she writes medical articles for a weekly magazine). If a respondent begins listing duties or responsibilities rather than replying with an occupation, tell the respondent you will collect this information in just a minute, then repeat the question and emphasize that you are asking for occupation.

When recording the most important activities or duties, capture enough details to adequately and accurately describe the work done. If the individual is a supervisor, record the department or function that he/she supervises. The following are examples:

| Accounts Receivable Department Manager | Supervises Account Receivables Clerk, makes sure accounts are kept current and paid on time, prepares reports and journal entries |
| Graphic Designer | Creates signs, banners, brochures, newsletters and other promotional materials using computer graphics |
| Secretary | Types, files, answers phones, makes appointments for boss |
| Waiter | Takes food orders, places order with kitchen, serves food to customers, makes sure customers are happy |
| Portrait Photographer | Takes pictures requested, develops film, prints pictures, contacts and invoices customer |
| Tool Design Engineer | Designs parts for existing machines that will modify the parts currently being produced by the machines |

Gathering the same level of detail also applies to questions asking about the type of business or industry an employer is engaged in. The following examples illustrate the level of specificity you should strive for:

**BAD**

Auto Shop

**GOOD**

Auto Repair Shop

Service Station
If a respondent replies with a job title, restate the question so that the respondent understands you are asking for the type of business or industry of the employer. If the respondent reports being self-employed, probe to find out what type of business the respondent is engaged in.

The respondent will also be asked to categorize the type of employer the person works for. For instance, is the employer a private company, business, or individual? If the employer is a government, the respondent will need indicate the level of government (e.g., federal, state, local). If the person is self-employed, the respondent will also be asked to indicate if the business is incorporated or unincorporated. The respondent may also indicate that the person worked without pay in a family business or farm.

For all of the industry and occupation questions, it is important to always probe for further details. Be sure to probe in a way that the respondent is more likely to reply with an adjective—for instance, find out what type of doctor or salesperson, what kind of engineer or programmer, supervisor of what—and record the respondent’s answers as accurately and completely as possible.

9.4 Household Interview

The purpose of the Household interview is to collect information on the finances of the family. Income and access to savings and other financial resources can be very important in determining children’s opportunities and life chances.

A Household Interview will be administered to a member of each nuclear family residing in a dwelling unit that has a selected Wave 2 respondent in it. The respondent will be determined by the selection component of the Roster module. Usually, but not always, it will be the same person who is the respondent for the Parent or Adult module. Very rarely, you may have to administer the Household Interview to more than one person in the same household. For example, if the RSA is not related in any way to the RSC, you will have to administer the Household Interview once for the RSA and his/her family and a second time for the RSC and his/her family.
9.5 Child Interview

The Child Interview collects information about the RSC and the SIB who are children age 9 to 17 years old. This questionnaire will be administered to all RSCs and SIBs, either panel or new entrant, ages 9-17 in a given household. This questionnaire could be administered up to four times in a panel household residing in a W1 tract or a maximum of twice in a new entrant household. Except for a few questions in the beginning, the Child Interview is self-administered. You will turn the computer over to the child and follow the same tutorial and interview procedures that you followed for the Primary Caregiver.

Among the topics in the interview for children 9-11 years are neighborhood characteristics, school and school quality, friends and social life, smoking, knowledge of gang members, family relationships, enjoyment of reading and use of the library, and educational expectations. Children 12-17 are asked additional questions on homework, use of alcohol and drugs, guns and gang membership, relationships and sex, contraceptive use, pregnancy, experience of violence, arrest and incarceration, weight and height, and employment.

9.6 Woodcock-Johnson Assessments

The Woodcock-Johnson Psycho-Educational Battery-Revised, Form B (WJ-R) is a wide-ranging, comprehensive set of tests for measuring cognitive ability, scholastic aptitude, and achievement.

- RSCs and SIBs ages 3-5 will be given two tests: a Letter-Word Identification test and an Applied Problems test.
- RSCs and SIBs ages 6-17 will be given Letter-Word Identification, Applied Problems and a third test, Passage Comprehension.
- Panel RSCs and SIBs now 18 and older will be given Letter-Word Identification, Applied Problems and a third test, Passage Comprehension.
- Primary Caregivers (PCGs) will receive just the Passage Comprehension test.

9.6.1 Guidelines for Administration

An adequate physical setting and a friendly relationship between you and the respondent are important to the testing situation and may affect the respondent’s performance. Before administering the test, arrange the setting, set up the materials, and establish rapport with the respondent. The assessments use an easel with questions facing the respondent and instructions facing the interviewer. Always follow the instructions and procedures given on the WJ easel.

Ideally, the testing area should be free of auditory and visual distraction. You may need to ask to have a television or radio turned off. If possible, you and the respondent should be the only individuals in
the room. If the parent or other siblings are in the room, it is appropriate to ask them to leave for the next 15 minutes, explaining that it will allow the child to focus on the task at hand and not be distracted. You might say, “We want [child’s name] to do the best that he/she can, so we need him/her to concentrate on the questions we ask. Perhaps you could go into the next room, so he/she is not distracted by what you are doing.” If the adult insists, however, they may stay. If the parent will be present during the testing session—either in the room or with the child on his/her lap—briefly explain the testing process to the parent, informing them that you will be testing the limits of the child's abilities and do not expect them to get everything correct. Tell the parent that it is important not to assist the child on any item during the testing session. If the parent or anyone else is present in the room during the administration, note that in the computer.

You and the respondent should sit at a table. If administering to a child, the child should be able to sit comfortably at the selected location (e.g., a young child may be more comfortable sitting on the floor in front of a coffee table than at a kitchen table). If no table is available, sit across from each other on the floor. The best arrangement is one in which you are able to view your side of the Test Book Easel as well as the respondent’s test page on the opposite side of the easel, which is fairly easy to manage if the two of you are sitting at the corner of a table, one on each side. The respondent should not be able to see your side. You need to be able to see over the easel and point to items on the respondent’s page.

You should be able to establish a good testing relationship with most respondents. Do not begin testing unless the respondent seems relatively at ease. During the test, give the impression that administering the test to the respondent is an enjoyable experience. Smiling frequently and calling the respondent by name help to maintain a pleasant environment. You may wish to begin the testing session with a short period of conversation, although some older children and adults may want to begin immediately. Asking questions about favorite activities, sport teams, or TV shows are good ways to put a young child at ease (see Exhibit 9-2 for other suggestions).

When testing young children, the most important thing to help them become comfortable with you is to truly be interested in them. They will warm up to people who take the time to talk and listen to them. When you meet the child, physically get on their level by crouching down or bending over and introduce yourself, using their name: “Hi, (child’s name). My name is (your name).” Most young children will not want to shake hands, and many will stay close to the adult’s side until they feel more comfortable.

During the test session, you can enhance rapport by letting the respondent know that he or she is doing a good job, using such comments as “you’re working very hard.” Encourage the respondent to answer even when items are difficult. Be careful that your pattern of comments does not indicate whether answers are correct. Avoid saying “good” or pausing longer after incorrect responses, as if expecting the respondent to change the first response.
When testing, it is important to move quickly from one item to the next and from one test to the next. Developing proficiency in the test administration is the first goal, followed closely by the second goal of administering the test efficiently. As soon as a respondent has responded to an item, present the next one. Do not chat with the respondent after testing has begun. Using a brisk testing pace enhances subject rapport and helps the participant maintain attention.
Exhibit 9-2 Suggestions for Warming Up Young Children

1. “How old are you?” Many children will hold up the number of fingers equaling their age instead of stating their age. You can respond by saying, “Wow, you’re (their age)! You are so big.”

2. Ask about a toy they were playing with or a TV show they were watching when you came in.

3. Compliment them. For example “That’s a cute shirt” or “I like the braids in your hair.”

4. If you know their birthday was within the last month or is coming up in the next month, ask them what they got/want for presents and whether they had/will have a party.

5. Many kids will have on clothing with Disney/Sesame Street/other TV characters. You can say, “I see (character’s name) on your shirt. Do you like (character name)?” If you don’t know who the character is, it’s all right to say, “Who’s that” because it shows you are interested in the child.

6. If meal time is near, you can ask what they had to eat. Comment about whether you like that or not.
Some children may be uncooperative, usually because of a short attention span. Continue asking the items, trying to elicit the child's interest. If the child refuses to answer the questions or does not listen to the questions, be sure to make note of this on the front of the form. By differentiating an uncooperative response from a true incorrect response, we will know that this administration may not accurately reflect the child’s true abilities.

After you are set up to administer the test, you may say something like the samples below to get started:

- **For a child:** I am going to ask you to answer some questions and to solve some problems. The questions are going to get harder as we go along. They get harder for everyone, so don't worry about it if some of the questions are hard. All I ask is for you to try your hardest. You may see me flipping the pages in this easel back and forth. That is how the questions were written. Now I just want to thank you. You're really helping me by answering these questions, and I really appreciate your help.

- **For an adult:** I am going to ask you to read some sentences and to answer some questions. The questions were written in such a way that they get harder as we go along. They get harder for everyone so please don’t worry about it when they start to get harder for you. Also, I sometimes have to flip back and forth in this easel so don’t worry about that if you see me doing that. I want to thank you in advance for taking the time to do this. It’s really helpful for me and I appreciate it.

These introductory scripts are provided in the back of your booklet for your reference. Become comfortable with them so you sound natural to the respondent.

The test items for each test are arranged in ascending order of difficulty. Starting points for each test are based on the child’s or adult’s current grade level or highest grade completed. The computer has been programmed to display the appropriate first item and will tell you which items to administer to each respondent. During the test, the computer will tell you to go forward and backward in the easel, which does something referred to as establishing the participant’s basal and ceiling levels. (For your information: the basal represents the point at which the participant has a 100% chance of responding correctly, and the ceiling is the point at which the participant has a 0% chance of responding correctly.)

During the administration you may make neutral comments to encourage progress without giving feedback regarding how well they are doing. Respondents who experience adverse consequences for getting things wrong can become upset when they realize they cannot answer a question. Put them at ease. Make general comments like “This test is for people of all ages so some items get tough.” If they ask how they are doing, say “You’re doing fine” (whether they are or not) or something nonjudgmental but encouraging. If the respondent gets frustrated or doesn’t think he/she can answer an item, say “Give it a try, just do the best you can.”
9.6.2 Letter-Word Identification (Test 22)

The Letter-Word Identification test measures reading and pre-reading skills. The first five items involve symbolic learning or the ability to match a rebus (pictographic representation of a word) with a picture of the object. Remaining items measure the respondent's reading identification skills, first with respect to identifying isolated letters and then in identifying words. The term “identification” implies that the respondent may be asked to respond to letter forms or words he or she has never seen before. In this test respondents do not need to know the meaning of any word correctly identified. Items become more difficult as participants progress through the test. At the end of Letter-Word Identification test, say something encouraging like, “You did a great job! Let’s do some more” and then move on to the Applied Problems test.

9.6.3 Applied Problems (Test 25)

The Applied Problems test measures the respondent’s skill in analyzing and solving practical math problems. To solve the problems, the respondent must recognize the procedure to be followed and then perform relatively simple calculations. Many problems include extraneous information, so the respondent must decide both the appropriate math operations to use and which data to include in calculations. If the respondent asks for a paper and pencil or appears to need them, provide a blank sheet of paper.

As items get more difficult, the respondent may need more time to answer. If they say they don’t know or give an incorrect answer, move on to the next item. If the respondent has taken more than 2 minutes or so on an item, suggest moving on (say something like, “Why don’t you try the next one?”). If the respondent asks for a little more time, it’s okay. Prompt after another minute, perhaps adding “Some of these are difficult. I don’t expect you to know all the answers.”

At the end of the Applied Problems test, say something encouraging and begin the Passage Comprehension test.

9.6.4 Passage Comprehension (Test 23)

The Passage Comprehension test measures the respondent’s skill in reading a short passage and identifying the missing key word. The task requires the respondent to state a word that would be appropriate in the context of the passage. Begin with Item 1 for all children not yet in 1st grade. You will work through several practice items to teach the younger child to select a correct picture that depicts the word or words written on the page before proceeding with the test. All other child and adult respondents
will begin with Sample Item A, where they will be trained to state a word appropriate for the passage. In this test it is especially important to move quickly between items and to not let more than 30 seconds go by after the respondent has read each item, especially if it becomes obvious that they are past their ability. Remember to be encouraging, even if the respondent is answering incorrectly.

9.7 Incentive Procedures

Each respondent will be offered an incentive after the interview and assessments are completed. The incentive amounts by respondent type are listed below.

<table>
<thead>
<tr>
<th>Participant Type</th>
<th>Amount of Interview Incentive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Randomly Selected Adult (RSA) who is not also a PCG</td>
<td>$20</td>
</tr>
<tr>
<td>Primary Caregiver (PCG)</td>
<td>$30</td>
</tr>
<tr>
<td>Children (now 18+) who are not also a PCG</td>
<td>$20</td>
</tr>
<tr>
<td>Children (age 9 – 17)</td>
<td>$20</td>
</tr>
<tr>
<td>Children (age 3 – 8)*</td>
<td>$5</td>
</tr>
</tbody>
</table>

* Provided to the PCG on the child’s behalf.

For each interview participant you will need to complete a Cash Incentive Receipt Form (see Exhibit 9-1). Fill in the RTI project number (09360.300.003) and the Case ID number on the form. Enter the incentive amount indicating if the respondent received or refused the incentive. Print the respondent’s name on the form. Ask the respondent to sign and date the form. You will then sign the form in the space provided and enter your FI ID number. Give the respondent the original copy of the Interview Incentive Receipt Form. Place the yellow, pink, and gold copies in the Case Folder. Keep the gold copy for your records.
Exhibit 9-3 Cash Incentive Receipt

RTI PROJECT #_________________________ CASE ID #_________________________

To show our appreciation for the time you spent answering our questions, we are authorized to pay you a cash incentive. Please indicate that you received (or refused) the money by checking the appropriate box and signing below.

- I received
  the cash incentive of ______________dollars ($________).
- I refused

Recipient's Name [PRINT]: __________________________________________
Recipient's Signature: __________________________________________ Date: ___/___/___
Interviewer's Signature: __________________________________________ FI ID #_____________

Disposition: Original to respondent and yellow copy to supervisor; pink copy in folder; gold copy to FI.
10. HEALTH MEASURES

10.1 Introduction

This chapter describes the process of presenting the health measures component to participants and obtaining informed consent, protocols and procedures for completing the health measures, and the process for setting up a follow-up visit by a health technician to obtain dried blood spots. A detailed description of each health measure component is provided in Appendix D of this manual.

10.2 Overview of Health Measures

Health measures will be collected from randomly selected adults (RSA), the randomly selected child (RSC) and RSC’s sibling (SIB) age 2-17, and the RSC and SIB’s primary caregiver (PCG). Table 1 summarizes the specific health measures to be collected based on the respondent’s age. Note: You do not need to memorize information in Table 1. The computer will tell you which health measures are to be conducted with each respondent.

Table 1. Health Measures by Respondent Age

<table>
<thead>
<tr>
<th>Health Measure</th>
<th>&lt; 2 Years</th>
<th>2 Years</th>
<th>3-4 Years</th>
<th>5–17 Years</th>
<th>≥ 18 Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood pressure</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Height*</td>
<td>–</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Weight*</td>
<td>–</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Hip and Waist Circumference*</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>Yes</td>
</tr>
<tr>
<td>Spirometry</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Saliva</td>
<td>–</td>
<td>–</td>
<td>Yes</td>
<td>Yes</td>
<td>–</td>
</tr>
<tr>
<td>Dried blood spots**</td>
<td>–</td>
<td>–</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

*Height, weight, and hip and waist circumference should only be collected on respondents able to stand unassisted.

**Dried blood spots will be collected from a sample of eligible respondents. Dried blood spots will be collected by an EMSI health technician on a follow-up visit to the home.

In this chapter, we describe procedures for obtaining consent and assent for the health measures, provide a summary of each measure, and discuss the process for setting up the appointment for an EMSI
health technician to collect dried blood spots on a follow-up visit. An incentive will be given to everyone completing all health measures in addition to the incentive they receive for the interview:

- $5 for adults not selected for the dried blood spot, paid when you complete the health measures
- $15 for children not selected for the dried blood spot, paid when you complete the health measures
- $25 for adults selected for dried blood spot, which EMSI will pay after performing a fingerstick
- $35 for children selected for dried blood spot, which EMSI will pay after performing a fingerstick.

Step-by-step instructions on the protocol and procedures for each health measure are provided in Appendix D.

### 10.3 Informed Consent Procedures for Health Measures

After the adult interview is complete, you will explain procedures for the health measures, provide an information sheet to the respondent, and ask for written consent for the health assessment. Note there are many different health measure consent and assent forms for L.A. FANS-2, dependent on the age of the respondent and whether the household has been selected for dried blood spots. The computer will tell you which one(s) to use.

Introduce the health measure component to the adult respondent and give the respondent a copy of the appropriate Consent Information Sheet for Adult Health Measures as indicated on your computer. There are two versions of the information sheet – based on whether the household has been selected for dried blood spots (see Exhibit 10-1 and Exhibit 10-2). Make sure the respondent understands material in the Consent Information Sheet. It covers all the points necessary for informed consent including an explanation of the health measures, benefits and risks associated with participation, the results provided to participants, and how confidentiality is protected. After you review the information sheet with the respondent, ask if the participant has any questions. If the participant agrees to participate in the health measures, ask the adult to provide written consent for the health measures for themselves (instructions for children who agree to participate provided below). There are two versions of the written consent – based on whether the household has been selected for dried blood spots (see Exhibit 10-3 and Exhibit 10-4). For this and all other signed consent and assent forms, write the Case ID in the space provided. Give the original of the signed consent form to the participant. Immediately place the copy of the signed forms into the case folder for safe keeping. Instructions for handling of signed consents is discussed in Chapter 12 (see section 12.3).

For child respondents, first talk with the child’s parent or guardian, explain the health assessment procedures, provide a copy of the fact sheet, and ask permission for the child to participate. Consistent with the adult health measures, introduce the child health measures component to the child by using the age-appropriate information sheet for child health measures. Separate information sheets and consent
forms have been prepared according to the child’s age and whether the household is selected for dried blood spots (see Exhibits 10-5 through 10-10). If the parent or guardian agrees, ask him/her to sign the age-appropriate consent form. Write the Case ID in the space provided and place the copy of the signed consent into the case folder for safe keeping. Instructions for handling of signed consents is discussed in Chapter 12 (see section 12.3). Give the original signed consent form to the parent or guardian.

After the parent provides written consent, read the age-appropriate assent script to the child. Note that children under the age of 7 will not be asked for their assent. Parents will, however, sign a consent form for the youngest children to participate and the children will be included in the process with phrases like, “Now we are going to see how tall you are, OK?” They do not legally give assent but at the same time we want their cooperation and to make this a pleasant experience for them.

- Children 7 to 8 years of age will be asked for their verbal assent (see Exhibits 10-11 and 10-12). Complete the appropriate assent form by printing the name of the child and signing the form. The original should be given to the parent or guardian. Place the copy into the respondent’s folder for safekeeping.

- Children 9 to 14 years of age will be asked to sign a written assent (see Exhibits 10-13 and 10-14), the original of which should be given to the parent or guardian. Again, write the Case ID on the form and place the copy into the respondent’s folder for safekeeping.

- Children 15 to 17 years of age should be given a copy of the Assent Information Sheet for Health Measures for Respondents 15 to 17 years of age (see Exhibits 10-15 and 10-16). Make sure the respondent understands material in the Assent Information Sheet. It covers all the points necessary for informed assent including an explanation of the health measures, benefits and risks associated with participation, the results provided to participants, and how confidentiality is protected. After you review the Assent Information Sheet with the respondent, ask if the participant has any questions. If the child agrees, ask the participant to provide written assent for the health measures (see Exhibit 10-17). Write the Case ID on the form, give the original of the child’s written assent to the parent or guardian and place the copy into the case folder.

Once consent or assent is obtained, you will perform three sets of health measures—blood pressure, anthropometry, and spirometry—and, for households with a child selected for saliva collection, instruct the parent or guardian on procedures for collecting the child’s saliva samples. As the final step in the health measure process, schedule an appointment for an EMSI health technician to return at a future date to collect dried blood samples.

NOTE: Although the goal is for each respondent to participate in all health measures, we recognize there will be situations where a participant will agree to participate in some but not all measures. We expect
you to use your study knowledge and persuasive skills to encourage respondents to participate in all health measures the respondent is selected for. In rare situations where a respondent will agree to participate in only some of the measures, use an opt-out form (see Exhibits 10-18-10-21). Children 9-17 who want to opt out may do so as they provide oral or written assent. Check the appropriate boxes to note the excluded measures, write the Case ID number on the form, and have the participant sign and date the form. Provide the participant with the original of the signed form, and place the other copy in the case folder. **Note that participants will receive the health measures incentive only if they complete all of the health measures.**
Field Interviewer Manual

Chapter 10

Health Measures

Exhibit 10-1 Consent Information Sheet for Adult Health Measures including Dried Blood Spots

Los Angeles Family and Neighborhood Survey Wave 2
Consent Information Sheet
Adult Health Measures Including Dried Blood Spots

This sheet describes the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2) health measures and asks you to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your participation is very important to the study because no one else in the community is exactly like you and we cannot use anyone else in your place.

By signing the attached consent form you are agreeing to participate in the L.A.FANS-2 health measures. It will take about 30 to 45 minutes to collect the health measures. If you agree to participate, you can change your mind and stop at any time.

Who is conducting this study?

RAND, a non-profit research institution in Santa Monica, California, is conducting the L.A.FANS-2 study in collaboration with the University of California at Los Angeles (UCLA) and the RTI International. RTI is collecting data for L.A.FANS-2.

Who is sponsoring this study?

This project is funded by the National Institutes of Health, a federal government agency that funds research to improve the health of people in the United States.

Why is this study being done?

Research strongly suggests that where people live may affect many aspects of their health. Neighborhoods and families are an important part of people’s daily environment. The goal of this study is to find out what parts of neighborhood and family life are important for health.

What are health measures?

Health measures are physical checks that provide information about your health. The health measures in L.A.FANS-2 are used to check for asthma and other breathing problems, risks for future health conditions such as cardiovascular disease, blood sugar levels, and overweight. The health measures are fast and easy to do in your home.

Why do you need health measures from me?

By comparing health measures for adults in your neighborhood with those in other neighborhoods, researchers will be able to study how neighborhood characteristics affect health.
Exhibit 10-1 Consent Information Sheet for Adult Health Measures
including Dried Blood Spots (cont’d)

What will you do to collect health measures from me?

- Blood pressure: Measure your blood pressure by putting a blood pressure cuff on your arm and inflating it.
- Height: Measure your height while you are standing.
- Weight: Ask you to stand on a scale.
- Hip and waist circumference: Use a tape measure placed around your waist and hips (or help you to do it yourself).
- Lung function: Ask you to blow air into an electronic device.
- Blood sample: Take a small blood sample by pricking a finger and catching drops of blood on a piece of paper. The blood sample will be analyzed for risk of heart problems (levels of cholesterol) and blood sugar (Hemoglobin A1C).

When will you collect the health measures?

Today we will check your blood pressure and measure lung function, height, weight, hip circumference, and waist circumference. We will also schedule a time for a health technician to visit your home to collect the blood sample. Even if you agree to have the health technician visit to collect the blood sample, you can change your mind at any time before or during the second visit and decide not to participate.

Will you tell me the results of the health measures?

In about 4–6 weeks, you will receive a letter with your results. The letter will report your blood pressure and height and weight measures. The letter will also tell you the results of the blood tests for risk of heart problems (levels of cholesterol) and blood sugar (Hemoglobin A1C) and how to interpret them.

What will you do with the blood sample after the lab tests are done?

With your permission, we will store a small part of the paper containing your drops of blood. The reason is that new lab tests are being developed for heart disease, diabetes, immune function, and other major health conditions, but they are not yet available. When these new tests become available we would like to use them to check your blood sample, although you will not receive these results.

How are privacy and confidentiality maintained?

L.A.FANS is strongly committed to respecting your privacy and the confidentiality of the information you provide us. We will use the health measures only for research purposes and we will never release any information about you specifically. Your health measures will be combined with health measures for other participants in the study and only group results will be reported.

To further protect your privacy, the L.A.FANS project has obtained a Confidentiality Certificate from the U.S. Department of Health and Human Services (DHHS). This certificate means that L.A.FANS will protect your identity and the information you provide. We can show you a copy of the Certificate of Confidentiality.
Exhibit 10-1 Consent Information Sheet for Adult Health Measures including Dried Blood Spots (cont’d)

However, if you tell me about the abuse of a child or of an old person, I must report it to a supervisor, who may report it to the authorities such as the Department of Child and Family Services. (‘Abuse’ includes physical, sexual, or emotional abuse, and neglect.)

What are the benefits of participating in the health measures part of L.A.FANS?

You may benefit from learning more about your health. You will receive a letter with the results and information on what they may mean. You can show the letter to your doctor for follow-up questions. If you don’t have a doctor or health care provider, information on where to get health care is in the packet that we have given this household.

This is an opportunity for you to make a valuable contribution to your community. The results of this study will describe the health status of Angelinos and identify areas for improvement. Reports from the study will help local governments and agencies develop better policies for improving neighborhoods and the health of their residents.

What are the potential risks involved in having health measures collected?

The risks related to the collection of health measures are minimal.

- The blood pressure procedure is similar to having blood pressure taken at the doctor’s office or at a pharmacy. You may experience temporary discomfort when the blood pressure cuff is inflated, but any discomfort will last for only a few seconds.
- The blood sample is collected from a finger prick, similar to the finger-prick that some diabetics do one or more times each day. Only a few drops of blood will be taken. There might be slight discomfort associated with the finger prick. It is possible, but unlikely, that you may have a momentary feeling of faintness. The health technicians are experienced and trained to handle these situations if they occur.
- You may learn that you are at risk for a future health condition, which you may prefer not to know.

Will I be paid for the health measures?

Yes. You will receive $25 after the second visit, in which health measures are collected by the health technician, to thank you for participating in the health measures section of the Los Angeles Family and Neighborhood Survey.

How can I learn more about the L.A.FANS project?

You can learn more about the Los Angeles Family and Neighborhood Survey on our website [www.rand.org/lafans](http://www.rand.org/lafans). If you have any questions about the survey, please call 1-800-723-8942 to speak with one of the study coordinators. You can also e-mail us at LAFANS@rti.org.
I have questions about my involvement with this study. How can I get answers?

If you have any questions or concerns about your rights as a research subject, you can contact the RAND, UCLA, or RTI Human Subjects Protection Committees:

RAND Institutional Review Board for Human Subjects
Human Subjects Protection Committee
1776 Main Street
Santa Monica, CA 90407
Tel: 310-393-0411 x6369

UCLA Institutional Review Board for Human Subjects
Office for Protection of Research Subjects (OPRS)
P.O. Box 951694
Los Angeles, CA 90095-1694
Tel: 310-825-7122
E-mail: gcirb@oprs.ucla.edu

RTI Institutional Review Board for Human Subjects
P.O. Box 12194
Research Triangle Park, NC 27709-2194
Tel: 1-866-214-2043
Exhibit 10-2 Consent Information Sheet for Adult Health Measures (without Dried Blood Spots)

Form U: CIS AHM DBS

Los Angeles Family and Neighborhood Survey Wave 2
Consent Information Sheet
Adult Health Measures (without Dried Blood Spots)

This sheet describes the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2) health measures and asks you to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your participation is very important to the study because no one else in the community is exactly like you and we cannot use anyone else in your place.

By signing the attached consent form you are agreeing to participate in the L.A.FANS-2 health measures. It will take about 30 to 45 minutes to collect the health measures. If you agree to participate, you can change your mind and stop at any time.

Who is conducting this study?

RAND, a non-profit research institution in Santa Monica, California, is conducting the L.A.FANS-2 study in collaboration with the University of California at Los Angeles (UCLA) and the RTI International. RTI is collecting data for L.A.FANS-2.

Who is sponsoring this study?

This project is funded by the National Institutes of Health, a federal government agency that funds research to improve the health of people in the United States.

Why is this study being done?

Research strongly suggests that where people live may affect many aspects of their health. Neighborhoods and families are an important part of people’s daily environment. The goal of this study is to find out what parts of neighborhood and family life are important for health.

What are health measures?

Health measures are physical checks that provide information about your health. The health measures in L.A.FANS-2 are used to check for asthma and other breathing problems, high blood pressure, and overweight. The health measures are fast and easy to do in your home.

Why do you need health measures from me?

By comparing health measures for adults in your neighborhood with those in other neighborhoods, researchers will be able to study how neighborhood characteristics affect health.
What will you do to collect health measures from me?

- Blood pressure: Measure your blood pressure by putting a blood pressure cuff on your arm and inflating it.
- Height: Measure your height while you are standing.
- Weight: Ask you to stand on a scale.
- Hip and waist circumference: Use a tape measure placed around your waist and hips (or help you to do it yourself).
- Lung function: Ask you to blow air into an electronic device.

When will you collect the health measures?

Today we will check your blood pressure and measure lung function, height, weight, hip circumference, and waist circumference.

Will you tell me the results of the health measures?

In about 4–6 weeks, you will receive a letter with your results. The letter will report your blood pressure and height and weight measures.

How are privacy and confidentiality maintained?

L.A.FANS is strongly committed to respecting your privacy and the confidentiality of the information you provide us. We will use the health measures only for research purposes and we will never release any information about you specifically. Your health measures will be combined with health measures for other participants in the study and only group results will be reported.

To further protect your privacy, the L.A.FANS project has obtained a Confidentiality Certificate from the U.S. Department of Health and Human Services (DHHS). This certificate means that L.A.FANS will protect your identity and the information you provide. We can show you a copy of the Certificate of Confidentiality.

However, if you tell me about the abuse of a child or of an old person, I must report it to a supervisor, who may report it to the authorities such as the Department of Child and Family Services. (‘Abuse’ includes physical, sexual, or emotional abuse, and neglect.)

What are the benefits of participating in the health measures part of L.A.FANS?

You may benefit from learning more about your health. You will receive a letter with the results and information on what they may mean. You can show the letter to your doctor for follow-up questions. If you don’t have a doctor or health care provider, information on where to get health care is in the packet that we have given this household.
This is an opportunity for you to make a valuable contribution to your community. The results of this study will describe the health status of Angelinos and identify areas for improvement. Reports from the study will help local governments and agencies develop better policies for improving neighborhoods and the health of their residents.

**What are the potential risks involved in having health measures collected?**

The risks related to the collection of health measures are minimal.

- The blood pressure procedure is similar to having blood pressure taken at the doctor’s office or at a pharmacy. You may experience temporary discomfort when the blood pressure cuff is inflated, but any discomfort will last for only a few seconds.
- You may learn that you are at risk for a future health condition, which you may prefer not to know.

**Will I be paid for the health measures?**

Yes. You will receive $5 to thank you for participating in the health measures section of the Los Angeles Family and Neighborhood Survey.

**How can I learn more about the L.A.FANS project?**

You can learn more about the Los Angeles Family and Neighborhood Survey on our website [www.rand.org/lafans](http://www.rand.org/lafans). If you have any questions about the survey, please call 1-800-723-8942 to speak with one of the study coordinators. You can also e-mail us at LAFANS@rti.org.

**I have questions about my involvement with this study. How can I get answers?**

If you have any questions or concerns about your rights as a research subject, you can contact the RAND, UCLA, or RTI Human Subjects Protection Committees:

- **RAND Institutional Review Board for Human Subjects**
  Human Subjects Protection Committee
  1776 Main Street
  Santa Monica, CA 90407
  Tel: 310-393-0411 x6369

- **UCLA Institutional Review Board for Human Subjects**
  Office for Protection of Research Subjects (OPRS)
  P.O. Box 951694
  Los Angeles, CA 90095-1694
  Tel: 310-825-7122
  E-mail: gcirb@oprs.ucla.edu

- **RTI Institutional Review Board for Human Subjects**
  P.O. Box 12194
  Research Triangle Park, NC 27709-2194
  Tel: 1-866-214-2043
Exhibit 10-3 Adult Consent for Health Measures including Dried Blood Spots

Form V: IC AHM DBS

Los Angeles Family and Neighborhood Survey Wave 2
Informed Consent
Adult Health Measures Including Dried Blood Spots

Print name of adult participant: __________________________________________________
First                     Middle                      Last

I have reviewed the information in the L.A.FANS-2 adult health measures information sheet. All of my questions have been answered to my satisfaction. I agree to participate in the health measures section of this study under the conditions described, which includes the procedures listed below. I also acknowledge that I have received a copy of this form.

- Blood pressure measurement
- Height measurement
- Weight measurement
- Hip and waist circumference measurement
- Lung function assessment
- Provide blood sample

Signature _______________________________ Date: _____/_____/_____

Signature of Field Interviewer: ____________________________ Date: _____/_____/_____

Field Interviewer’s printed name: _______________________________________________
First                                   Middle                           Last
Exhibit 10-4 Adult Consent for Health Measures (without Dried Blood Spots)

Form W: IC AHM

Los Angeles Family and Neighborhood Survey Wave 2
Informed Consent
Adult Health Measures (without Dried Blood Spots)

Print name of adult participant: __________________________________________________

First                     Middle                      Last

I have reviewed the information in the L.A.FANS-2 adult health measures information sheet. All of my questions have been answered to my satisfaction. I agree to participate in the health measures section of this study under the conditions described, which includes the procedures listed below. I also acknowledge that I have received a copy of this form.

- Blood pressure measurement
- Height measurement
- Weight measurement
- Hip and waist circumference measurement
- Lung function assessment

Signature _______________________________________________ Date: ____/____/____

Signature of Field Interviewer: ______________________________ Date: ____/____/____

Field Interviewer’s printed name: __________________________________________________

First                                   Middle                           Last
Exhibit 10-5 Parental Consent Information Sheet – for children < 3

Form D: PCIS CHM2

Los Angeles Family and Neighborhood Survey Wave 2
Parental Consent Information Sheet
Child Health Measures for Children 2 Years of Age

For the parent or legal guardian of the child respondent 2 years of age:

This sheet describes health measures for the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2) and asks you to give permission for your child ________________ (CHILD NAME) to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your child’s participation is very important to the study because no one else in the community is exactly like your child and we cannot use anyone else in his or her place. L.A.FANS is an on-going study, and we may contact you in the future and ask you to participate again.

By signing the attached consent form you are agreeing to let your child participate in the health measures portion of L.A.FANS-2. It will take about 20 minutes to collect the health measures. If you give permission for your child to participate, you or your child can change your mind and stop at any time.

Who is conducting this study?

RAND, a non-profit research institution in Santa Monica, California, is conducting the L.A.FANS-2 study in collaboration with the University of California at Los Angeles (UCLA) and RTI International. RTI is collecting data for L.A.FANS-2. The Co-Directors of the study are:

Dr. Anne Pebley
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Box 951772
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P.O. Box 2138
Santa Monica, CA 90407
sastry@rand.org

Who is sponsoring this study?

This project is sponsored by the National Institutes of Health, a federal government agency that supports research to improve the health of people in the United States.

What are health measures?

Health measures are physical checks that provide information about your child’s health. For children who are 2 years of age, we measure height and weight. These measures are fast and easy to do in your home.
Why do you need to measure and weigh my child?

Height and weight are good general indicators of young children’s health. By comparing measures for children in your neighborhood with those for children in other neighborhoods, researchers will be able to study how neighborhood characteristics affect children’s health.

How will you measure my child’s height and weight?

For height: If your child can stand on his/her own, we will measure his or her height. If your child is cannot stand on his/her own, we will measure him or her.

For weight: If your child can stand on his/her own, we will weigh him or her standing on a scale. If your child cannot stand on his/her own, we will not weigh him or her.

Will you tell me the results?

In about four weeks, we will send you a letter with your child’s results. The letter will describe your child’s height and weight compared to other children of the same age and sex.

How are privacy and confidentiality maintained?

L.A.FANS-2 is strongly committed to respecting your child’s privacy and the confidentiality of his or her health information. We will use this information only for research purposes and we will never release any information about your child specifically. The information from your child will be combined with information from other participants in the study and only group results will be reported. We will keep your and your child’s name and contact information so that we can contact you in a few years about participating again in the study. This information will be kept completely confidential and will never be disclosed.

To further protect your privacy, the L.A.FANS project has obtained a Confidentiality Certificate from the U.S. Department of Health and Human Services. This certificate means that L.A.FANS will protect your identities and the information we collect for your child. We can show you a copy of the Certificate of Confidentiality.

However, if you tell me about the abuse of a child or of an old person, I must report it to a supervisor, who may report it to the authorities such as the Department of Child and Family Services. (‘Abuse’ includes physical, sexual, or emotional abuse, and neglect.)

What are the benefits of participating in the health measures part of L.A.FANS?

You and your child may benefit from learning more about his or her health. You will receive a letter with the results and information on what they may mean. You can show the letter to your doctor for follow-up questions. If you don’t have a doctor or health care provider, information on where to get health care for your child is in the packet that we have given this household.

This is an opportunity for you and your child to make a valuable contribution to your community. The results of this study will describe the health status of Angelinos and identify areas for improvement.
Reports from the study will help local governments and agencies develop better policies for improving neighborhoods and the health of their residents.

**What are the potential risks involved in having health measures collected?**

The risks related to the collection of health measures are minimal. The child will need to stand still for a few minutes while we measure height and weight.

**How can I learn more about the L.A.FANS project?**

You can learn more about the Los Angeles Family and Neighborhood Survey on our website [www.rand.org/lafans](http://www.rand.org/lafans). If you have any questions about the survey, please call 1-800-723-8942 to speak with one of the study coordinators. You can also e-mail us at LAFANS@rti.org.

**I have questions about my involvement with this study. How can I get answers?**

If you have any questions or concerns about your rights as a research subject, you can contact the RAND, UCLA, or RTI Human Subjects Protection Committees:

- **RAND Institutional Review Board for Human Subjects**
  Human Subjects Protection Committee
  1776 Main Street
  Santa Monica, CA 90407
  Tel: 310-393-0411 x6369

- **UCLA Institutional Review Board for Human Subjects**
  Office for Protection of Research Subjects (OPRS)
  P.O. Box 951694
  Los Angeles, CA 90095-1694
  Tel: 310-825-7122
  E-mail: gcirb@oprs.ucla.edu

- **RTI Institutional Review Board for Human Subjects**
  P.O. Box 12194
  Research Triangle Park, NC 27709-2194
  Tel: 1-866-214-2043
For the parent or legal guardian of the child respondent who is 3 to 17 years of age:

This sheet describes the Los Angeles Family and Neighborhood Survey (L.A.FANS-2) health measures study and asks you to give permission for your child _________________ (CHILD NAME) to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your child’s participation is very important to the study because no one else in the community is exactly like your child and we cannot use anyone else in his or her place.

By signing the attached consent form you are agreeing to let your child participate in the health measures portion of L.A.FANS-2. It will take about 30 to 45 minutes to collect the health measures and another 15 minutes to explain how you should collect one additional measure. If you give permission for your child to participate, you or your child can change your mind and stop at any time.

Who is conducting this study?

RAND, a non-profit research institution in Santa Monica, California, is conducting the L.A.FANS-2 study in collaboration with the University of California at Los Angeles (UCLA) and RTI International. RTI is collecting data for L.A.FANS-2.

Who is sponsoring this study?

This project is funded by the National Institutes of Health, a federal government agency that funds research to improve the health of people in the United States.

What are health measures?

Health measures are physical checks that provide information about your child’s health. The health measures in L.A.FANS-2 are used to check for asthma and other breathing problems, risks for future health conditions such as cardiovascular disease, blood sugar levels, and overweight. The health measures are fast and easy to do in your home.

Why do you need health measures from my child?

By comparing health measures for children in your neighborhood with those for children in other neighborhoods, researchers will be able to study how neighborhood characteristics affect children’s health.
Exhibit 10-6 Parental Consent Information Sheet: Child Health Measures Including Dried Blood Spots for Children 3 to 17 Years of Age (cont’d)

What will you do to collect health measures from my child?

- Blood pressure: Measure your child’s blood pressure by putting a blood pressure cuff on your child’s arm and inflating it (children 5 years of age and older).
- Height: Measure your child’s height while he or she is standing.
- Weight: Have your child stand on a scale.
- Lung function: Have your child blow air into an electronic device (children 5 years of age and older).
- Saliva: Ask your child to saturate three special cotton swabs with his or her saliva. The saliva will be tested for cortisol, an indicator of stress.
- Blood sample: Take a small blood sample by pricking a finger and catching drops of blood on a piece of paper. The blood sample will be analyzed for risk of heart problems (levels of cholesterol) and blood sugar (Hemoglobin A1C).

When will you collect the health measures?

Today we will check your child’s blood pressure and measure lung function, height, and weight. We’ll explain how to collect the saliva samples and we’ll give you a kit with supplies for you to collect the saliva samples. We will also schedule a visit for a health technician to visit your home to collect the blood sample. Even if you agree to have the health technician visit to collect the blood sample, you or your child can change your minds at any time before or during the second visit and decide not to participate.

Will you tell me the results of the health measures?

In about 4–6 weeks, you will receive a letter with your child’s results. The letter will report your child’s blood pressure, height, and weight measurements in comparison to other children of the same age and sex. The letter will also tell you the results of the blood tests for risk of heart problems (levels of cholesterol) and blood sugar (Hemoglobin A1C) and how to interpret them.

What will you do with the blood and saliva samples after the lab tests are done?

We will destroy the saliva sample after the testing is complete but, with your permission, we will store a small part of the paper containing your child’s drops of blood. The reason is that new lab tests are being developed for heart disease, diabetes, immune function, and other major health conditions, but they are not yet available. When these new tests become available we would like to use them to check your child’s blood sample using them, although you will not receive these results.

How are privacy and confidentiality maintained?

L.A.FANS-2 is strongly committed to respecting your child’s privacy and the confidentiality of his or her health information. We will use this information only for research purposes and we will never release any information about your child specifically. The information from your child will be combined with information from other participants in the study and only group results will be reported.
To further protect your privacy, the L.A.FANS project has obtained a Confidentiality Certificate from the U.S. Department of Health and Human Services. This certificate means that L.A.FANS will protect your identities and the information we collect for your child. We can show you a copy of the Certificate of Confidentiality.

However, if you tell me about the abuse of a child or of an old person, I must report it to a supervisor, who may report it to the authorities such as the Department of Child and Family Services. (‘Abuse’ includes physical, sexual, or emotional abuse, and neglect.)

What are the benefits of participating in the health measures part of L.A.FANS?

You and your child may benefit from learning more about his or her health. You will receive a letter with the results and information on what they may mean. You can show the letter to your doctor for follow-up questions. If you don’t have a doctor or health care provider, information on where to get health care for your child is in the packet that we have given this household.

This is an opportunity for you and your child to make a valuable contribution to your community. The results of this study will describe the health status of Angelinos and identify areas for improvement. Reports from the study will help local governments and agencies develop better policies for improving neighborhoods and the health of their residents.

What are the potential risks involved in having health measures collected?

The risks related to the collection of health measures are minimal.

- The blood pressure procedure is similar to having blood pressure taken at the doctor’s office or at a pharmacy. Your child may experience temporary discomfort when the blood pressure cuff is inflated, but any discomfort will last for only a few seconds.
- The blood sample is collected from a finger prick, similar to a heel-prick that babies have immediately after birth or the finger-prick that some diabetics do one or more times each day. Only a few drops of blood will be taken. There might be slight discomfort associated with the finger prick. It is possible, but unlikely, that your child may have a momentary feeling of faintness. The health technicians are experienced and trained to handle these situations if they occur.
- You may learn that your child is at risk for a future health condition, which you may prefer not to know.

Will there be any payment for participating?

Yes. Children (or parents on their behalf) will receive $35 if they provide all health measures.

How can I learn more about the L.A.FANS project?

You can learn more about the Los Angeles Family and Neighborhood Survey on our website www.rand.org/lafans. If you have any questions about the survey, please call 1-800-723-8942 to speak with one of the study coordinators. You can also e-mail us at LAFANS@rti.org.
I have questions about my involvement with this study. How can I get answers?

If you have any questions or concerns about your rights as a research subject, you can contact the RAND, UCLA, or RTI Human Subjects Protection Committees:

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Human Subjects Protection Committee
1776 Main Street
Santa Monica, CA 90407
Tel: 310-393-0411 x6369

UCLA Institutional Review Board for Human Subjects
Office for Protection of Research Subjects (OPRS)
P.O. Box 951694
Los Angeles, CA 90095-1694
Tel: 310-825-7122
E-mail: gcirb@oprs.ucla.edu

RTI Institutional Review Board for Human Subjects
P.O. Box 12194
Research Triangle Park, NC 27709-2194
Tel: 1-866-214-2043
For the parent or legal guardian of the child respondent who is 3 to 17 years of age:

This sheet describes the Los Angeles Family and Neighborhood Survey (L.A.FANS-2) health measures study and asks you to give permission for your child _________________ (CHILD NAME) to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your child’s participation is very important to the study because no one else in the community is exactly like your child and we cannot use anyone else in his or her place.

By signing the attached consent form you are agreeing to let your child participate in the health measures portion of L.A.FANS-2. It will take about 30 to 45 minutes to collect the health measures and another 15 minutes to explain how you should collect one additional measure. If you give permission for your child to participate, you or your child can change your mind and stop at any time.

Who is conducting this study?

RAND, a non-profit research institution in Santa Monica, California, is conducting the L.A.FANS-2 study in collaboration with the University of California at Los Angeles (UCLA) and RTI International. RTI is collecting data for L.A.FANS-2. The Co-Directors of the study are:

Dr. Anne Pebley
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Box 951772
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Dr. Narayan Sastry
RAND
P.O. Box 2138
Santa Monica, CA 90407
sastry@rand.org

Who is sponsoring this study?

This project is funded by the National Institutes of Health, a federal government agency that funds research to improve the health of people in the United States.

What are health measures?

Health measures are physical checks that provide information about your child’s health. The health measures in L.A.FANS-2 are used to check for asthma and other breathing problems, high blood pressure, and overweight. The health measures are fast and easy to do in your home.
Why do you need health measures from my child?

By comparing health measures for children in your neighborhood with those for children in other neighborhoods, researchers will be able to study how neighborhood characteristics affect children’s health.

What will you do to collect health measures from my child?

- Blood pressure: Measure your child’s blood pressure by putting a blood pressure cuff on your child’s arm and inflating it (children 5 years of age and older).
- Height: Measure your child’s height while he or she is standing.
- Weight: Have your child stand on a scale.
- Lung function: Have your child blow air into an electronic device (children 5 years of age and older).
- Saliva: Ask your child to saturate three special cotton swabs with his or her saliva. The saliva will be tested for cortisol, an indicator of stress.

When will you collect the health measures?

Today we will check your child’s blood pressure and measure lung function, height, and weight. We’ll explain how to collect the saliva samples and we’ll give you a kit with supplies for you to collect the saliva samples.

Will you tell me the results of the health measures?

In about 4–6 weeks, you will receive a letter with your child’s results. The letter will report your child’s blood pressure, height, and weight measurements in comparison to other children of the same age and sex and how to interpret them.

What will you do with the saliva samples after the lab tests are done?

We will destroy all samples immediately after the testing is completed.

How are privacy and confidentiality maintained?

L.A.FANS-2 is strongly committed to respecting your child’s privacy and the confidentiality of his or her health information. We will use this information only for research purposes and we will never release any information about your child specifically. The information from your child will be combined with information from other participants in the study and only group results will be reported.

To further protect your privacy, the L.A.FANS project has obtained a Confidentiality Certificate from the U.S. Department of Health and Human Services. This certificate means that L.A.FANS will protect your identities and the information we collect for your child. We can show you a copy of the Certificate of Confidentiality.
However, if you tell me about the abuse of a child or of an old person, I must report it to a supervisor, who may report it to the authorities such as the Department of Child and Family Services. (‘Abuse’ includes physical, sexual, or emotional abuse, and neglect.)

What are the benefits of participating in the health measures part of L.A.FANS?

You and your child may benefit from learning more about his or her health. You will receive a letter with the results and information on what they may mean. You can show the letter to your doctor for follow-up questions. If you don’t have a doctor or health care provider, information on where to get health care for your child is in the packet that we have given this household.

This is an opportunity for you and your child to make a valuable contribution to your community. The results of this study will describe the health status of Angelinos and identify areas for improvement. Reports from the study will help local governments and agencies develop better policies for improving neighborhoods and the health of their residents.

What are the potential risks involved in having health measures collected?

The risks related to the collection of health measures are minimal.
- The blood pressure procedure is similar to having blood pressure taken at the doctor’s office or at a pharmacy. Your child may experience temporary discomfort when the blood pressure cuff is inflated, but any discomfort will last for only a few seconds.
- You may learn that your child is at risk for a future health condition, which you may prefer not to know.

Will there be any payment for participating?

Yes. Children (or parents on their behalf) will receive $15 if they provide all health measures.

How can I learn more about the L.A.FANS project?

You can learn more about the Los Angeles Family and Neighborhood Survey on our website www.rand.org/lafans. If you have any questions about the survey, please call 1-800-723-8942 to speak with one of the study coordinators. You can also e-mail us at LAFANS@rti.org.

I have questions about my involvement with this study. How can I get answers?

If you have any questions or concerns about your rights as a research subject, you can contact the RAND, UCLA, or RTI Human Subjects Protection Committees:

RAND Institutional Review Board for Human Subjects
Human Subjects Protection Committee
1776 Main Street
Santa Monica, CA 90407
Tel: 310-393-0411 x6369
Exhibit 10-7 Parental Consent Information Sheet: Child Health Measures (without Dried Blood Spots) for Children 3 to 17 Years of Age (cont’d)

UCLA Institutional Review Board for Human Subjects
Office for Protection of Research Subjects (OPRS)
P.O. Box 951694
Los Angeles, CA 90095-1694
Tel: 310-825-7122
E-mail: gcirb@oprs.ucla.edu

RTI Institutional Review Board for Human Subjects
P.O. Box 12194
Research Triangle Park, NC 27709-2194
Tel: 1-866-214-2043
Exhibit 10-8 Parental Informed Consent: Child Health Measures for Children 2 Years of Age

Form E: PIC CHM2

Los Angeles Family and Neighborhood Survey Wave 2
Parental Informed Consent
Child Health Measures for Children 2 Years of Age

Print name of child participant: ____________________________________________________________

First                         Middle                     Last

I have reviewed the information in the attached L.A.FANS-2 description. All of my questions have been answered to my satisfaction. I give my permission to let my child participate in the health measures section of this study under the conditions described, which includes the procedures listed below. I also acknowledge that I have received a copy of this form.

- Height measurement
- Weight measurement

Adult’s signature: ___________________________________________ Date: _____/_____/

Printed name of adult: __________________________________________________________

First                              Middle                           Last

Relationship of adult to child: ______________________________________________________

Signature of Field Interviewer: ______________________________ Date: _____/_____/

Field Interviewer’s printed name: ______________________________

First                              Middle                           Last
Exhibit 10-9 Parental Consent for Health Measures
Including Dried Blood Spots for Children 3 to 17 Years of Age

Form H: PIC CHM DBS

Los Angeles Family and Neighborhood Survey Wave 2
Parental Informed Consent
Child Health Measures Including Dried Blood Spots for Children 3 to 17 Years of Age

Print name of child participant: ____________________________________________________________
First                                             Middle                                             Last

I have reviewed the information in the L.A.FANS-2 child health measures information sheet. All of my
questions have been answered to my satisfaction. I give my permission to let my child participate in the
health measures section of this study under the conditions described, which includes the procedures listed
below. I also acknowledge that I have received a copy of this form.

• Blood pressure measurement (children 5 years of age and older)
• Height measurement
• Weight measurement
• Lung function assessment (children 5 years of age and older)
• Provide saliva sample
• Provide blood sample

Adult’s signature: ____________________________ Date: _____/_____/_____

Printed name of adult: ________________________________________________________________
First                                             Middle                                             Last

Relationship of adult to child: __________________________________________________________

Signature of Field Interviewer: ____________________________ Date: _____/_____/_____

Field Interviewer’s printed name: __________________________________________________________
First                                             Middle                                             Last
Exhibit 10-10 Parental Consent for Health Measures  
(without Dried Blood Spots) for Children 3 to 17 Years of Age

Los Angeles Family and Neighborhood Survey Wave 2  
Parental Informed Consent  
Child Health Measures (without Dried Blood Spots) for Children 3 to 17 Years of Age

Print name of child participant: ________________________________  First  Middle  Last

I have reviewed the information in the L.A.FANS-2 child health measures information sheet. All of my questions have been answered to my satisfaction. I give my permission to let my child participate in the health measures section of this study under the conditions described, which includes the procedures listed below. I also acknowledge that I have received a copy of this form.

- Blood pressure measurement (children 5 years of age and older)
- Height measurement
- Weight measurement
- Lung function assessment (children 5 years of age and older)
- Provide saliva sample

Adult’s signature: __________________________________________ Date: _____/_____/_____

Printed name of adult: __________________________________________  First  Middle  Last

Relationship of adult to child: __________________________________________

Signature of Field Interviewer: ________________________________ Date: _____/_____/_____

Field Interviewer’s printed name: __________________________________________  First  Middle  Last
Exhibit 10-11 Health Measures Including Dried Blood Spots
Assent for Children 7 to 8 Years of Age

Form L: CA 7-8 DBS

Los Angeles Family and Neighborhood Survey Wave 2
Health Measures Including Dried Blood Spots Assent for Children 7 to 8 Years of Age

Your (mother/father/other guardian) said that if you agree, you can be part of this important study to understand the health of children in your neighborhood.

I would like to do a few health checks on you today:

1. I’d like to weigh you and measure how tall you are.
2. I’d like to check and see how well your heart works.
3. I’d like to ask you to blow into a machine to see how well you breathe.
4. I’d like you, with the help of your (mother/father/other guardian), to collect some of your saliva (or spit) three times tomorrow.
5. And, in a day or two, I’d like to have someone prick your finger to get a few drops of blood.

You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don’t. If you say yes, you can change your mind and stop at any time.

Do you have any questions for me? Would you like to participate?

PLEASE CHECK ONE:

☐ Child agrees to participate in the health measures.

☐ Child does not agree to participate in health measures.

Print name of child: ____________________________________________

First                              Middle                           Last

Signature of Field Interviewer: __________________________________ Date: _____/_____/_____

Field Interviewer’s printed name: __________________________________

First                              Middle                           Last
Your (mother/father/other guardian) said that if you agree, you can be part of this important study to understand the health of children in your neighborhood.

I would like to do a few health checks on you today:

1. I’d like to weigh you and measure how tall you are.
2. I’d like to check and see how well your heart works.
3. I’d like to ask you to blow into a machine to see how well you breathe.
4. I’d like you, with the help of your (mother/father/other guardian), to collect some of your saliva (or spit) three times tomorrow.

You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don’t. If you say yes, you can change your mind and stop at any time.

Do you have any questions for me? Would you like to participate?

PLEASE CHECK ONE:

- [ ] Child agrees to participate in the health measures.
- [ ] Child does not agree to participate in health measures.

Print name of child: ____________________________________________________________

First                              Middle                           Last

Signature of Field Interviewer: ___________________________________________ Date: ____/____/____

Field Interviewer’s printed name: ________________________________________________

First                              Middle                           Last
Exhibit 10-13 Health Measures Including Dried Blood Spots
Assent for Children 9 to 14 Years of Age

Form N: CA 9-14 DBS

Los Angeles Family and Neighborhood Survey Wave 2
Health Measures Including Dried Blood Spots Assent for Children 9 to 14 Years of Age

Your (mother/father/other guardian) has agreed to let you be part of this important study to understand the lives of children and teens in your community.

I would like to do a few checks on you:

1. I’d like to weigh you and measure how tall you are.
2. I’d like to check and see how well your heart works.
3. I’d like to ask you to blow into a machine to see how well you breathe.
4. I’d like you, with the help of your (mother/father/other guardian), to collect some of your saliva (or spit) three times tomorrow.
5. And, in a day or two, I’d like to have someone prick your finger to get a few drops of blood.

You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don’t. If you say yes, you can change your mind and stop at any time.

Do you have any questions for me? Would you like to participate?

Print name of child: ____________________________________________

First                        Middle                        Last

I agree to participate in the health measures section of the Los Angeles Family and Neighborhood Survey as described to me and my mother/father/guardian. I understand that I can change my mind and stop at any time.

Signature of child: ____________________________________________ Date: _____/_____/_____

Signature of Field Interviewer: ______________________________ Date: _____/_____/_____

Field Interviewer’s printed name: ______________________________

First                        Middle                        Last
Your (mother/father/other guardian) has agreed to let you be part of this important study to understand the lives of children and teens in your community.

I would like to do a few checks on you:

1. I’d like to weigh you and measure how tall you are.
2. I’d like to check and see how well your heart works.
3. I’d like to ask you to blow into a machine to see how well you breathe.
4. I’d like you, with the help of your (mother/father/other guardian), to collect some of your saliva (or spit) three times tomorrow.

You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don’t. If you say yes, you can change your mind and stop at any time.

Do you have any questions for me? Would you like to participate?

Print name of child: ________________________________
First                           Middle                              Last

I agree to participate in the health measures section of the Los Angeles Family and Neighborhood Survey as described to me and my mother/father/guardian. I understand that I can change my mind and stop at any time.

Signature of child: ________________________________ Date: _____/_____/_____

Signature of Field Interviewer: ________________________________ Date: _____/_____/_____

Field Interviewer’s printed name: ________________________________
First                           Middle                              Last
Exhibit 10-15 Assent Information Sheet: Health Measures Including Dried Blood Spots for Respondents 15 to 17 Years of Age

Form P: ASI HM 15-17 DBS

Los Angeles Family and Neighborhood Survey Wave 2
Assent Information Sheet
Health Measures Including Dried Blood Spots for Respondents 15 to 17 Years of Age

For the respondent 15 to 17 years of age:

Your (mother/father/other guardian) has agreed to let you be part of the health measures section of this important study called the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2).

If you agree, I would like to do a few health checks on you:

1. I’d like to weigh you and measure how tall you are.
2. I’d like to check your blood pressure.
3. I’d like to ask you to blow into a machine to see how well you breathe.
4. I’d like you, with the help of your (mother/father/other guardian), to collect some of your saliva (or spit) three times tomorrow.
5. And, in the next day or two, I’d like to have a health worker prick your finger to get a few drops of blood to check for risks for future health conditions.

These health measures are fast and easy to do in your home.

You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don’t. If you say yes, you can change your mind and stop at any time.

Your participation is very important because no one else in the community is exactly like you and we cannot use anyone else in your place.

Who is conducting this study?

RAND, a non-profit research institution in Santa Monica, California, is conducting this study in collaboration with the University of California at Los Angeles (UCLA) and RTI International.

Why do you need health measures from me?

By comparing health measures for young people in your neighborhood with those in other neighborhoods, researchers will be able to study how neighborhoods affect health.

Will you tell me the results of the health measures?

Yes. In about 4–6 weeks, your parent or guardian will receive a letter with your results and information about how to interpret them.
What are the benefits of participating in the health measures part of L.A.FANS?

You and your family will learn more about your health. You can show the results letter to your doctor for follow-up questions. If you don’t have a doctor, information on where to get health care is in the packet that we have given this household.

This is also an opportunity for you to make a valuable contribution to your community. The results of this study will describe the health status of Angelinos and identify areas for improvement.

What are the risks of participating in the health measures part of L.A.FANS?

The risks are minimal. The blood pressure procedure is similar to that at the doctor’s office or at a pharmacy. You will feel your arm being squeezed as the cuff is inflated, but any discomfort will last for only a few seconds. The blood sample is collected from a finger prick, similar to the finger prick that some diabetics do one or more times each day to measure their blood sugar. Only a few drops of blood will be needed. There might be slight discomfort from the finger prick. It is possible, but unlikely, that you may have a momentary feeling of faintness. The health workers are experienced and are trained to handle these situations if they occur.

Will I be paid for the study?

Yes. You will receive $35 if you provide all the health measures.
Form Q: ASI HM 15-17

Los Angeles Family and Neighborhood Survey Wave 2
Assent Information Sheet
Health Measures (without Dried Blood Spots) for Respondents 15 to 17 Years of Age

For the respondent 15 to 17 years of age:

Your (mother/father/other guardian) has agreed to let you be part of the health measures section of this important study called the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2).

If you agree, I would like to do a few health checks on you:

1. I’d like to weigh you and measure how tall you are.
2. I’d like to check your blood pressure.
3. I’d like to ask you to blow into a machine to see how well you breathe.
4. I’d like you, with the help of your (mother/father/other guardian), to collect some of your saliva (or spit) three times tomorrow.

These health measures are fast and easy to do in your home.

You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don’t. If you say yes, you can change your mind and stop at any time.

Your participation is very important because no one else in the community is exactly like you and we cannot use anyone else in your place.

Who is conducting this study?

RAND, a non-profit research institution in Santa Monica, California, is conducting this study in collaboration with the University of California at Los Angeles (UCLA) and RTI International.

Why do you need health measures from me?

By comparing health measures for young people in your neighborhood with those in other neighborhoods, researchers will be able to study how neighborhoods affect health.

Will you tell me the results of the health measures?

Yes. In about 4–6 weeks, your parent or guardian will receive a letter with your results and information about how to interpret them.
What are the benefits of participating in the health measures part of L.A.FANS?

You and your family will learn more about your health. You can show the results letter to your doctor for follow-up questions. If you don’t have a doctor, information on where to get health care is in the packet that we have given this household.

This is also an opportunity for you to make a valuable contribution to your community. The results of this study will describe the health status of Angelinos and identify areas for improvement.

What are the risks of participating in the health measures part of L.A.FANS?

The risks are minimal. The blood pressure procedure is similar to that at the doctor’s office or at a pharmacy. You will feel your arm being squeezed as the cuff is inflated, but any discomfort will last for only a few seconds.

Will I be paid for the study?

Yes. You will receive $15 if you provide all the health measures.
Exhibit 10-17 Health Measures Assent for Respondents 15 to 17 Years of Age

Form R: HMA 15-17

Los Angeles Family and Neighborhood Survey Wave 2
Health Measures Assent for Respondents 15 to 17 Years of Age

Print name of respondent: ____________________________________________________

First                              Middle                           Last

I agree to participate in the health measures section of the Los Angeles Family and Neighborhood Survey as described to me and my mother/father/guardian. I understand that I can change my mind and stop at any time.

Signature of respondent: _______________________________ Date: ____/____/____

Signature of Field Interviewer: ______________________________ Date: ____/____/____

Field Interviewer’s printed name: ______________________________________

First                              Middle                           Last
Exhibit 10-18 Informed Consent with Opt-Out: Adult Health Measures Including Dried Blood Spots

Form X: IC OU AHM DBS

Los Angeles Family and Neighborhood Survey Wave 2
Informed Consent with Opt-Out
Adult Health Measures Including Dried Blood Spots

Print name of adult participant: ___________________________________________________________

First                     Middle                      Last

I have reviewed the information in the L.A.FANS-2 adult health measures information sheet. All of my questions have been answered to my satisfaction. I agree to participate in the health measures section of this study under the conditions described except for the procedures checked below. I also acknowledge that I have received a copy of this form.

☐ Blood pressure measurement
☐ Height measurement
☐ Weight measurement
☐ Hip and waist circumference measurement
☐ Lung function assessment
☐ Provide blood sample
☐ Storing blood sample for future testing

Signature ___________________________________________ Date: _____/_____/_____

Signature of Field Interviewer: __________________________________________ Date: _____/_____/_____

Field Interviewer’s printed name: ______________________________________________________

First                                   Middle                           Last
Exhibit 10-19 Informed Consent with Opt-Out: Adult Health Measures (without Dried Blood Spots)

Form Y: IC OU AHM DBS

Los Angeles Family and Neighborhood Survey Wave 2
Informed Consent with Opt-Out
Adult Health Measures (without Dried Blood Spots)

Print name of adult participant: __________________________________________________
First                     Middle                      Last

I have reviewed the information in the L.A.FANS-2 adult health measures information sheet. All of my questions have been answered to my satisfaction. I agree to participate in the health measures section of this study under the conditions described except for the procedures checked below. I also acknowledge that I have received a copy of this form.

☐ Blood pressure measurement
☐ Height measurement
☐ Weight measurement
☐ Hip and waist circumference measurement
☐ Lung function assessment

Signature _______________________________________________ Date: _____/_____/_____

Signature of Field Interviewer: ______________________________ Date: _____/_____/_____
Field Interviewer’s printed name: __________________________________________________
First                                   Middle                           Last
Exhibit 10-20 Parental Informed Consent with Opt-Out: Child Health Measures Including Dried Blood Spots for Children 3 to 17 Years of Age

Los Angeles Family and Neighborhood Survey Wave 2
Parental Informed Consent with Opt-Out
Child Health Measures Including Dried Blood Spots for Children 3 to 17 Years of Age

Print name of child participant: ______________________________________________________________
First                         Middle                     Last

I have reviewed the information in the L.A.FANS-2 child health measures information sheet. All of my questions have been answered to my satisfaction. I give my permission to let my child participate in the health measures section of this study under the conditions described except for the procedures checked below. I also acknowledge that I have received a copy of this form.

☐ Blood pressure measurement (children 5 years of age and older)
☐ Height measurement
☐ Weight measurement
☐ Lung function assessment (children 5 years of age and older)
☐ Provide saliva sample
☐ Provide blood sample
☐ Storing blood sample for future testing

Adult’s signature: __________________________________________ Date: ____/____/____

Printed name of adult: ________________________________________________________________
First                                   Middle                          Last

Relationship of adult to child: __________________________________________________________

Signature of Field Interviewer: __________________________ Date: ____/____/____

Field Interviewer’s printed name: ______________________________________________________
First                                   Middle                          Last
Exhibit 10-21 Parental Informed Consent with Opt-Out: Child Health Measures (without Dried Blood Spots) for Children 3 to 17 Years of Age

Los Angeles Family and Neighborhood Survey Wave 2
Parental Informed Consent with Opt-Out
Child Health Measures (without Dried Blood Spots) for Children 3 to 17 Years of Age

Print name of child participant: ________________________________________________

First                      Middle                      Last

I have reviewed the information in the L.A.FANS-2 child health measures information sheet. All of my questions have been answered to my satisfaction. I give my permission to let my child participate in the health measures section of this study under the conditions described except for the procedures checked below. I also acknowledge that I have received a copy of this form.

☐ Blood pressure measurement (children 5 years of age and older)
☐ Height measurement
☐ Weight measurement
☐ Lung function assessment (children 5 years of age and older)
☐ Provide saliva sample

Adult’s signature: __________________________________ Date: ____/____/____

Printed name of adult: ______________________________________________________

First                      Middle                      Last

Relationship of adult to child: ______________________________________________

Signature of Field Interviewer: __________________________________ Date: ____/____/____

Field Interviewer’s printed name: ____________________________________________

First                      Middle                      Last
10.4 Blood Pressure Measurements

Using an automatic, digital blood pressure device, you will obtain three measures of systolic and diastolic blood pressure from each respondent who is at least 5 years old. The blood pressure device comes with cuffs in five sizes: child, small adult, medium adult, large adult, and extra large adult. The blood pressure collection process is summarized below; a step-by-step description of the protocol, equipment, and process is in Appendix D of this manual.

The blood pressure measurement will be the first step in the health measure process for each respondent. Use the right arm to take the blood pressure unless exclusionary circumstances prevent the use of the arm (see Appendix D for a list of exclusions). It is important that you properly prepare the respondent to collect the readings, including asking the respondent to not eat, drink, or smoke for 30 minutes before taking the measurements; empty his/her bladder if needed; and wear (or change into) clothing that allows easy access to the arm.

The ideal environment to collect the blood pressure is a quiet room. The room should be a comfortable temperature and have good lighting, a nearby power outlet, and a clean table or surface area where the blood pressure machine can be placed. Seat the participant upright with both feet on the floor, legs uncrossed, next to the table so that the midpoint of the upper arm can be supported and about level with the heart. Have the respondent sit quietly and relax for five minutes prior to the measurement. Make sure that children are in a chair where their feet reach the floor comfortably. If they do not, ask for a box or something else that the child could put his/her feet on so they are flat and still.

Select the cuff size you think is most likely to fit and check that the end of the cuff fits inside the index lines when placed on the respondent’s arm. If any part of the end of the cuff falls outside of the index lines choose the next size cuff. If necessary use the tape measure to measure the participant’s arm circumference and use the measurement to choose the proper cuff size.

The cuff should be positioned with the lower edge approximately 2 finger breadths above the crease in the elbow with the center of the cuff bladder (usually indicated by an arrow) pointing to the midpoint of the inside of the elbow. The cuff should be tight enough that it doesn't slip down the arm but loose enough to fit one or two fingers underneath.

Once properly set up, the blood pressure device will automatically measure the blood pressure and pulse and display the readings. You will be allowed to attempt a maximum of 5 cuff inflations per participant per visit, including any aborted attempts. Wait at least 30 seconds between blood pressure cuff inflations. After each successful measure, enter the blood pressure and pulse reading (as displayed on the BP device) in the health measures module on the laptop.
10.4.1 Blood Pressure Alert Readings

Respondents will be provided their blood pressure results through a letter mailed to them in about 4-6 weeks after the completion of all health measures. If a participant asks you about his/her blood pressure reading, you may report the numbers obtained and explain that you are not qualified to interpret the readings. If the respondent has specific questions about blood pressure results or wants to follow up, advise the respondent to contact his/her doctor or health care provider. If the respondent does not have a usual source of health care, offer copies of resource materials (discussed below).

If the blood pressure results are extremely high the computer will alert you and you need to alert the respondent. We expect these will be rare occurrences; when you encounter them, follow special procedures outlined below.

If the blood pressure reading is considered “extremely high” as indicated by a notice in your laptop, you must stop the collection of all health measures and notify the respondent (or the respondent’s parent/guardian). Complete and provide the “Report of Very High Blood Pressure” (see Exhibit 10-22), which states the respondent has extremely high blood pressure and should see a doctor or health care provider that same day or the next. The form has a place to indicate the respondent has been provided information on how to get medical care if he/she does not have a doctor or health care provider. Read the form out loud to the respondent and make sure the respondent understands. Complete the form, sign it, and ask the respondent to sign it. Provide the respondent with the original, and place the copy in the case folder.

If the respondent does not have a usual source of health care, refer the participant to the packet of information you provided at the start of the health measures, including “Obtaining Health Care in Los Angeles County” (Exhibit 10-23), “Free or Low-Cost Health Coverage for Children” (Exhibit 10-24), a social services sheet (Exhibit 10-25), and “We’ve Got You Covered,” which is a guide to free and low-cost health care services in Los Angeles County.

If the respondent decides to call emergency services by dialing 911, encourage a quiet, calm environment and wait with the respondent until the paramedics arrive. Do not continue with any health measurements or collect other data while waiting with the respondent. You cannot drive respondents anywhere, including the emergency room.

You must report the alert reading to your field supervisor as soon as possible after you leave the house. As a follow-up check, call the respondent the next day to ask about and document any action taken to see a doctor or medical care provider. In the case of alert values, you will revisit the household to complete collecting the health measures only after receiving approval from your field supervisor.
Exhibit 10-22 Report of Very High Blood Pressure

Case ID ______________

Los Angeles Family and Neighborhood Survey Wave 2
Report of Very High Blood Pressure

Respondent’s name: _____________________________________ Date: __/__/___
Address: ______________________________________________ Time: ___:___ am/pm
____________________________________________

Your blood pressure: _______/_______ (systolic/diastolic)

Type of measurement: □ Average of second and third measurements
□ Single measurement

According to guidelines from the National Institutes of Health, you have very high blood pressure. You can review these guidelines at [http://www.nhlbi.nih.gov/hbp/hbp/intro.htm](http://www.nhlbi.nih.gov/hbp/hbp/intro.htm)

You need to see your doctor today or tomorrow to have your blood pressure checked again and to get medical advice. You should call your doctor’s office right now and tell him/her that you have very high blood pressure and need an urgent appointment. Please take this sheet with you to show your doctor.

If you do not have a regular doctor, I am giving you information on how to find medical help quickly. Please take this sheet with you to show the doctor that you see. Here are the best options for getting urgent medical help:

- Call the following referral services, which provide free information on where to get medical care. Make sure to tell them that you need immediate medical attention for very high blood pressure:
  - Los Angeles County Department of Health Services at (800) 427-8700
  - Info Line (Information & Referral) at (800) 339-6993 (open 24-hours a day)

- Go to the emergency room of your local hospital (the referral services above can tell you where it is).

- Go to a private urgent care clinic. These clinics usually charge money, but may be covered by health insurance. You can find the closest one in your phone book.

- Call 911, preferably using a landline (not a cell phone), tell the dispatcher that you have very high blood pressure, and ask him/her to send the paramedics. This service is expensive and you are likely to be charged for it.

Please take action to see a doctor today or tomorrow about these blood pressure readings.

I acknowledge that I have been told that I have very high blood pressure readings and that I need to see a doctor or go to the emergency room right away. I have also been provided with information on how to find medical help if I do not have a regular doctor. I also acknowledge receiving a copy of this form.

Respondent’s signature: _____________________________________ Date: __/__/___
Field interviewer’s signature: _________________________________ Date: __/__/___
Los Angeles Family and Neighborhood Survey (L.A.FANS)
Obtaining Health Care in Los Angeles County

Here is some information to help you obtain health care and health insurance in Los Angeles County, if you need it. This information will help you find:

- Emergency services or urgent health care.
- A low-cost or no-cost health care provider for non-urgent health care.
- Health insurance, health check-ups, and immunizations.
- Other health and human service programs

**Life Threatening Emergency**

If you or someone else is experiencing a medical emergency

CALL 911

For urgent health care, you should visit the emergency room of your nearest hospital.

If you need urgent care at low cost or no cost, you can go to one of the hospitals operated by the County of Los Angeles. These public hospitals provide services to everyone. The Los Angeles County hospitals are:

1. Los Angeles County + USC Medical Center, 1200 N. State Street, Los Angeles, CA 90033, tel: (323) 226-2622.
2. Harbor/UCLA Medical Center, 1000 W. Carson Street, Torrance, CA 90502, tel: (310) 222-2345.
3. Martin Luther King/Drew Medical Center, 12021 S. Wilmington Avenue, Los Angeles, CA 90059, tel: (310) 668-4321.
4. Olive View/UCLA Medical Center, 14445 Olive View Drive, Sylmar, CA 91342, tel: (818) 364-1555.

For information about

**Health and Human Service Programs in Los Angeles County**

CALL 211

211 is an easy to remember three-digit dialing code that enables a caller to access over 28,000 health and human service programs throughout Los Angeles County 24 hours per day, 7 days per week. Formerly known as Info Line, this is a non-profit agency whose trained specialists are on duty 24 hours a day to provide you with information and referrals to community agencies that can help with health services as well as family problems, emergency shelter, child care, substance abuse, money management, emergency food, legal referrals, youth programs, transportation, and education.
Additional Numbers for Obtaining Non-Emergency Medical Care

If you need a doctor or health care provider for non-emergency health care, Los Angeles County operates clinics and health centers and also has partner health care providers. Services are available at low cost or no cost, depending on your income and eligibility. For information, call the Los Angeles County Department of Health Services at (800) 427-8700. They can also provide you with information about if and how much you are expected to pay for services.

Information about low cost or no cost health care services is also available from the following sources:

**LA County Health and Nutrition Hotline** – (877) 597-4777
Provides information and referral services for people who need help obtaining health care.

**First 5 LA** – (888) 347-7855
Provides referrals to parents with young children in Los Angeles County seeking health care, health insurance, and other assistance.

Obtaining Health Insurance and Preventive Health Care

If you do not have health insurance and meet eligibility requirements, the following agencies can help you get insurance at low cost or no cost. To get help with eligibility and deciding which program to apply for, call L.A. County Health and Nutrition Hotline at (800) 597-4777 or call each program below.

**Healthy Families and Medi-Cal Programs Information Line** (888) 747-1222
Healthy Families is low cost insurance for children and teens. It provides health, dental, and vision coverage to children who do not have insurance and do not qualify for free Medi-Cal.

**The Children's Health Initiative of Greater LA** (888) 4LAKIDS (452-5437)
Call to find out if your child qualifies for free or low cost health insurance.

**Medi-Cal** – (800) 541-5555  [http://files.medi-cal.ca.gov/pubsdoco/contactframe.asp](http://files.medi-cal.ca.gov/pubsdoco/contactframe.asp)
Provides comprehensive medical benefits to low-income families with children, pregnant women, and adults who are over 65, blind, or disabled. Depending on your family income, you may be eligible for a no-cost or a share-of-cost Medi-Cal program. CalWORKs families receive no-cost Medi-Cal.

**Access for Infants and Mothers** – (800) 433-2611
AIM provides low cost health insurance coverage to uninsured, low-income pregnant women and their infants.

**California Children Services Program** – (800) 288-4584
Program to help children with a physical problem or serious illness get special medical care and equipment.

**Kaiser Permanente Cares for Kids** – (800) 255-5053
Program to provide health insurance to uninsured children less than 19 years of age who are enrolled in participating public schools.

**Child Health and Disability Prevention Program** – (800) 993-2437
Provides regular well-child checkups at no cost for low-income children and youth in Los Angeles County. Services are provided at more than 1,000 sites, including County health centers and hospitals.
## Exhibit 10-24 Free or Low-Cost Health Coverage for Children Sheet

### Free or Low-cost Health Coverage for Children

All agencies listed below serve clients in English and Spanish. Many offer other languages as well. Please contact them for more information.

<table>
<thead>
<tr>
<th>If you live in:</th>
<th>Call this local agency for assistance</th>
<th>Phone Number</th>
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<tr>
<td>Compton</td>
<td>Crystal Stairs</td>
<td>323-203-9265</td>
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<tr>
<td>New Park of Compton</td>
<td>Crystal Stairs</td>
<td>323-203-9265</td>
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<td>Florence</td>
<td>Crystal Stairs</td>
<td>323-203-9265</td>
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<tr>
<td>Jefferson Park</td>
<td>Crystal Stairs</td>
<td>323-203-9265</td>
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<tr>
<td>Paramount</td>
<td>Community Health Councils</td>
<td>323-203-5500</td>
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<tr>
<td>Maternal &amp; Child Health Access</td>
<td>Maternal &amp; Child Health Access</td>
<td>213-749-4261</td>
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<tr>
<td>California Hospital Medical Center</td>
<td>California Hospital Medical Center</td>
<td>213-742-5537</td>
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<tr>
<td>Asian Pacific Health Venture</td>
<td>Asian Pacific Health Venture</td>
<td>323-644-3800, Ext. 276</td>
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<tr>
<td>Tarzana Treatment Center</td>
<td>Tarzana Treatment Center</td>
<td>213-556-3030</td>
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<td>West Aliso</td>
<td>West Aliso</td>
<td>213-742-1609</td>
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<td>213-742-1609</td>
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<td>Monterey</td>
<td>310-662-7569</td>
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<td>Long Beach</td>
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</table>
IMPORTANT NOTICE FOR IMMIGRANTS

New USCIS guidelines permit immigrants and their children to use certain non-cash benefits and special purpose cash benefits without affecting their Immigration Status including:

- Medi-Cal *
- Food Stamps
- Healthy Families
- Emergency Medical Assistance
- WIC (Women, Infants and Children)
- Job Training Programs
- County Health Programs
- Testing & Treatment of Communicable Diseases
- One time emergency payments under CalWORKs
- Prenatal Care
- Foster Care and Adoption Assistance
- Non-Cash benefits funded under CalWORKs
- Emergency Disaster Relief
- Transportation Vouchers
- Child Care Services
- Immunizations
- Nutrition Programs
- Housing Assistance
- Energy Assistance
- Educational Assistance

*Unless you use these services to pay for long term care (i.e., long-term nursing home care).

Some of the above programs may provide cash benefits. The purpose of such benefits is not for income maintenance but rather to avoid the need for on-going cash assistance for income maintenance; therefore, they are not subject to public charge considerations.

Use of these benefits will not be considered a Public Charge by USCIS:

- USCIS will not deny your legal admission to the U.S.
- USCIS will not deny your application for legal permanent residency.
- USCIS will not ask you to repay public benefits you received.

For More Information Call:
Coalition for Humane Immigrant Rights of Los Angeles (CHIRLA) 1(888) 624-4752 (English and Spanish)
Neighborhood Legal Service HEALTH CONSUMER CENTER 1(800) 636-3203 (English, Spanish, American, Cambodian, Mancarin, Korean, and Vietnamese)
Chinatown Service Center 1(213) 896-1733 (Cantonese and Mandarin)
South Asian Network 1(650) 605-6466 (South Asian Languages)
WRAP Agency 1(619) 387-1550 (Cambodian, Japanese, Laotian, Thai, and Vietnamese)
Korean Resource Center 1(323) 337-3718 (Korean)

Los Angeles County Department of Public Social Services
Public Charge Language Line - English 1(800) 815-5005
10.5 Obtaining Height

You will measure the standing height of all adults and children two years of age and older who are able to safely stand unassisted. The height measurement process is summarized below; a step-by-step description of the protocol, equipment, and process is included in Appendix D of this manual.

You will receive a folding rule, a carpenter’s square, and “post-it” notes to measure height for adults and children. You will be trained to properly measure young children, older children, and adults. The height will be measured and recorded to the nearest millimeter. Participants will be asked to remove shoes, hats, hair ornaments, and heavy outer garments.

10.6 Obtaining Weight

You will weigh all respondents age 2 years and older who are able to safely stand unassisted. A step-by-step description of the protocol, equipment, and process is in Appendix D of this manual.

You will receive a Tanita HD 314 digital scale capable of weighing respondents up to 330 pounds. You will be trained on the proper setup and use of the scale to obtain weight measurements and on the process for calibrating the scale. Participants will be asked to remove heavy outer garments and shoes and to empty pockets during the weight measurement. Weight will be measured and recorded to the nearest 0.1 kilogram.

10.7 Obtaining Hip and Waist Circumference

Hip and waist circumference will also be obtained from all adults (age 18 and older). You will use a fiberglass measuring tape with metric units to obtain circumferences. Refer to Appendix D for details about the process.

To obtain accurate circumference readings, ask participants to remove any heavy outer garments. The respondent should stand relaxed and breathe normally, with weight evenly distributed. Be respectful of the respondent and try to touch him/her as little as possible. If the respondent appears uncomfortable with the procedure, you can offer to let the respondent position the tape him/herself.

For the waist circumference locate the bony prominence of the right iliac crest. The iliac crests are the bony prominences that jut out and can be felt on both sides below the waist and above the hips. This is the area where people tend to rest their fingers when placing their hands on their hips. Run the measuring tape in a complete circle from just above the right bony prominence around the body and just above the left bony prominence, completing the circle back at the right side. The measurement should be taken at the end of a normal exhalation and recorded to the nearest 0.1 centimeter.
For the hip circumference place the measuring tape horizontally around the body, across the maximum circumference of the buttocks, tape parallel to the floor. Record the measurement to the nearest 0.1 centimeter.

### 10.8 Spirometry Measures

Spirometry is the timed measurement of a person’s lung volume, assessed as the person blows out after taking a deep breath. It measures how effectively and how quickly the lungs can be emptied. For L.A. FANS-2, you will collect three acceptable spirometry measurements from all respondents age 5 and older, using a portable hand-held spirometer.

The accuracy of the spirometry measurement depends on the respondent using the proper technique and exerting maximum effort. You will use a spirometer made by EasyOne to collect the measurement. As the initial step, explain and demonstrate the entire procedure to the respondent: proper placement of the mouthpiece and nose clip, maximum inhalation, and the process of blasting air into the mouthpiece. The spirometer will provide hints about how to improve performance after each attempt, assessing whether each measurement is acceptable and will offering specific guidance, such as “blow harder” or “blow longer.” A step-by-step description of the protocol, equipment, and process of performing spirometry is included in Appendix D of this manual.

### 10.9 Saliva Collection

For L.A. FANS-2, we will ask the parent/guardian to collect saliva specimens from children 3 years of age and older. Saliva will be sent to a lab to be analyzed for cortisol, a stress hormone. The saliva collection should ideally occur the day after the child completes L.A. FANS-2. The parent will collect saliva three times on the same day: when the child first wakes, thirty minutes after waking, and at bedtime.

You will give the parent and child a detailed explanation of the procedure for collecting saliva and will leave written instructions about the collection process. You will also provide a kit for collecting saliva samples, containing all supplies that are needed. As you discuss the instructions with a respondent, label each kit with the child’s name and place barcodes on the saliva collection tubes. Enter the barcode number into the computer when you are prompted to do so. The saliva kit for the parent includes Sorbettes or “sponge-pops.” These have a small triangular-shaped sponge at the end of a stick and look similar to a lollipop.

A few days after you provide the kit you will place a call to the household to check on the status of the saliva collection. In placing call use the following script:

*Hi, this is [insert your name]. I want to thank you again for participating in the L.A. FANS study. I’m calling to see if you’ve had a chance to collect your child(ren)’s saliva samples and if Federal Express has picked them up.*
[If yes] Great. Thanks again for all your help and support.

[If no, see if there’s anything you can do to help the household collect the saliva. Consider the following:]  

Do you have plans for when you will be able to collect the saliva?

Do you need another saliva kit?

Can I help with scheduling a FedEx pick-up?

After you have spoken with someone at the household or left a message, note the call and result in the Record of Calls on your case folder.

A step-by-step description of the protocol, supplies, preparation, and process of saliva collection is in Appendix D of this manual.

10.10 Making Appointments for Dried Blood Spots

If your computer tells you the household has been selected for dried blood spots (DBS), you will make an appointment for the health technician to collect the DBS after you have completed the health measures for at least one adult respondent. Using the “Blood Spot Frequently Asked Questions” sheet (see Exhibit 10-26), explain to respondents (or to parents of child respondents) the purpose of the DBS collection and provide an overview of the procedure. Also mention the incentive associated with completing all health measures – an additional $25 for adults and $35 for children, and that the incentive will be provided at the completion of the DBS collection. In particular:

1. Explain that DBS will be collected by a trained, licensed health technician (employed by EMSI) during a visit to the participant’s home or other location of the participant’s choice.

2. Blood will be tested for risk factors associated with heart disease and elevated blood sugar levels.

3. Results of blood tests will be mailed to respondents about 4 to 6 weeks after collection.

4. The DBS exam will consist of a finger stick (similar to what diabetics do). The entire procedure takes between 10 and 30 minutes.

5. The DBS exam can be conducted at any time of day and does not involve any fasting.
6. Participants will receive the health measure incentive ($25 for adults and $35 for children) in the form of a money order (which is equivalent to cash) at the end of the DBS collection.

After explaining the DBS exam, ask the participant for convenient times to have the health technician return, preferably within 24 to 48 hours after completing the interview. If possible, try to have all DBS appointments for the household at the same time so the EMSI health technician makes only one visit.

Next, accurately complete the EMSI Request for Dried Blood Spot Form before contacting EMSI (see Exhibit 10-27). This includes entry of the Household ID number, the name, date of birth, and unique 8-digit Health Measure ID number for each participant, the location of the residence including nearest cross-street, telephone contact information for the household, and best times to contact the participants. Once the form is completed, use your cell phone or the participant’s telephone to place a toll-free call to EMSI. EMSI has a dedicated toll-free number set up for this study which is easy to remember – 1-866-LA FANS-8 or (1-866-523-2678) and included on the EMSI request form. Tell the EMSI operator you are calling from L.A. FANS. The EMSI operator will collect information from you and make an appointment with the participant(s) for a follow-up DBS visit.

NOTE: EMSI operators are available by telephone 5 a.m. – 5 p.m., Pacific time, Monday through Friday. If you call during other hours, leave a detailed message on the answering machine. Specify the household’s preferences for the appointment time and read names and addresses slowly. Leave your name in case EMSI needs to get in touch with you.

The DBS procedure is a very important component of L.A. FANS-2. You may need to use your persuasive skills to help respondents decide to participate, but remember that they are free to decline any portion of the study. Respondents who do not provide DBS will not receive the additional incentive for health measures.

Also know that we are counting on you to help control costs on this project by scheduling EMSI visits carefully. In many instances, you will be visiting a given household more than one time to complete interviews; in these cases, if you have completed one interview with an adult, feel free to introduce the health measures and offer to have the health technician visit the household at the same time that you are scheduling a return visit. The rapport you have established with household members can be very helpful for making the EMSI visit successful.
Why do you need my blood?

The goal of this study is to understand how families and neighborhoods affect people’s health and well-being in Los Angeles County. We can learn a lot about families and neighborhoods from interviews with the people who live here. But to understand people’s health, it is often best to conduct some measurements and tests—as happens when you visit the doctor for a check-up. Blood tests are one of several health measures we collect, along with body measurements, blood pressure, and lung function. The blood tests will provide us with information about people’s health that we are unable to get from other measures.

What tests will you conduct on my blood?

The blood tests measure early indicators of the most common chronic diseases. We will test the following:

- Hemoglobin A1C, which is a measure of blood sugar levels. High blood sugar is related to diabetes, a disease affecting how your body processes food.
- Total cholesterol and high-density cholesterol, which are types of fat that are in your blood. Undesirable levels of total or HDL cholesterol may put you at risk for diseases to your heart or blood vessels.

Will the blood test hurt?

The finger prick procedure is quicker, simpler, and less painful than getting your blood drawn from a vein in your arm. Only a few drops of blood are needed. We use a tiny spring-loaded lancet that creates a small prick when pressed against the finger. The health technician will place a few drops of blood on filter paper specifically designed for blood tests. This procedure usually takes less than a minute. After the filter paper dries, the health technician mails it to the lab for testing. The finger heals quickly and generally you don’t even need a band-aid.

Are there any risks involved?

The finger prick procedure is very safe and the risk involved is minimal. Finger pricks are used routinely to test the blood of newborn babies. Many diabetics also use them one or more times each day to test their blood sugar at home. Occasionally someone may have a fleeting sensation of lightheadedness and, even more rarely, of fainting. If you have experienced symptoms like these with blood draws in the past, be sure to tell your health technician.

How and when will I get the results?

In about 4 to 6 weeks you will receive a personalized letter with your test results and an explanation of what the results may mean. The letter will tell you whether the results fall within a range considered to be normal.

What happens to the blood after it is tested?

With your permission, we will store a small part of the paper containing the drops of blood. The reason is that new lab tests are being developed for heart disease, diabetes, immune function, and other major health conditions, but they are not yet available. When these new tests become available we would like to use them to check the blood sample, although you will not receive these results.
Can this test take the place of my annual check-up?

No. The health measures that are collected in L.A.FANS are not a substitute for regular preventive health care. We hope you find the results useful and you should share them with your doctor or health care provider.

Who can I call if I have more questions?

You can call us at (800) 723-8942. We will be happy to answer any questions or concerns you may have about this procedure.
Complete all of the information on this form before you contact EMSI.

Confirm the 8-digit Health Measures CaseID has been entered correctly for EACH household member eligible for DBS.

<table>
<thead>
<tr>
<th>5 digit Household ID number</th>
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<tbody>
<tr>
<td>Date of phone call to EMSI:</td>
</tr>
<tr>
<td>Time of phone call to EMSI:</td>
</tr>
<tr>
<td>Name of EMSI Telephone Operator (if any):</td>
</tr>
<tr>
<td>Did you request a Spanish speaking technician? (circle one) yes no</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Participant 1</th>
<th>Last Name</th>
<th>First Name</th>
<th>Date of Birth</th>
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<tbody>
<tr>
<td>Participant 2</td>
<td>Last Name</td>
<td>First Name</td>
<td>Date of Birth</td>
</tr>
<tr>
<td>Participant 3</td>
<td>Last Name</td>
<td>First Name</td>
<td>Date of Birth</td>
</tr>
<tr>
<td>Participant 4</td>
<td>Last Name</td>
<td>First Name</td>
<td>Date of Birth</td>
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</table>

<table>
<thead>
<tr>
<th>Residence</th>
<th>City</th>
<th>Street Address</th>
<th>Apartment #</th>
<th>cross street</th>
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<tr>
<th>best time to call</th>
<th>best contact</th>
<th>home phone</th>
<th>business phone (for whom?)</th>
<th>cell phone (for whom?)</th>
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Notes and Comments: Record date and information below from follow-up call with respondent(s). Add any additional notes.
11. Tracking Panel Members

11.1 Introduction

One key to maintaining the long-term quality of the L.A. FANS-2 data collection effort is the implementation of an effective strategy to locate panel participants. Maintaining this quality will ensure that we achieve our target response rate while minimizing sample attrition from Wave 1 to Wave 2. This section describes resources and procedures for tracking and locating the panel RSA, RSC, SIB, and PCG-only cases in L.A. FANS-2. You will also find in this chapter general tracking tips that have proved successful on other RTI projects.

11.2 Tracking Sample Members

As we enter Wave 2, tracking respondents continues to be an extremely important part of an L.A. FANS-2 field interviewer’s role. Our goal is to track, locate, and interview three types of panel respondents—RSAs, RSCs, and SIBs—from Wave 1. We also need to locate the PCG-only from Wave 1 (if there was any). We may or may not interview her/him, but even if we don’t conduct an interview the PCG-only can be the key to locating the other Wave 1 respondents. If we cannot find the Wave 1 respondents, it will affect the study’s response rate, the researchers’ ability to determine change over time, and the reputation of L.A. FANS as a successful, high quality survey. Your charge is to make every reasonable effort to locate panel respondents.

We have identified several tracking resources and strategies to optimize field tracking efforts. Tracking is a dynamic and iterative process, and each case will need to be handled individually. Certain tracking resources may work for some cases, but not for others, and your approach will need to be customized based on the history of the case and the types of leads that generated in the field.

11.3 Panel Tracking Tools

Your field tracking activities will begin as soon as you receive your panel case assignments. The basic tools for tracking and contacting panel sample members include:

- **Summary Panel Tracking Form**
- **Locator Report** (preprinted information about the RSA, RSC, SIB and PCG-only)
- **Wave 1 Respondents** (a grid you will complete)
- **Panel Tracking Questions**
- **Panel Tracking Sheet** (two-sided)
- Wave 1 Others to Locate Respondents of Interest (includes preprinted information)
- Questions to Help Locate the RSA, RSC, SIB, or PCG-only (a laminated page)

Each of these forms is discussed below.

11.3.1 Summary Panel Tracking Form

One Summary Panel Tracking Form (see Exhibit 11-1) will be in the case folder you will receive for each panel case assigned to you. It is a one-page document on which you will record the final verified address and telephone information and final tracking disposition for all panel respondents you are tracking for the case.

- After you locate a respondent and have interviewed him or her, record the information in the box for that person.
- If you locate a respondent and cannot interview him or her because the respondent does not live within L.A. County, record the information in the box for that person.
- If you locate a respondent but cannot interview him or her for some reason, record the information in the box for that person. Record the reasons in the “notes” section.
- If you were unable to locate a respondent, do not enter anything in the box for that person.
- Note that the Summary Panel Tracking Form asks for information about the PCG-only. If your panel case had a PCG-only at Wave 1, you should try to find that person even though the computer program may not choose that person for an interview. When you have located the PCG-only, record information on the Summary Panel Tracking Form.

In all instances where you do not locate or interview a respondent, do your very best to verify that the respondent is, in fact, where you think he or she is.

11.3.2 Locator Report

The case folder will include a Locator Report, which contains information we have gathered to help you locate the respondents of interest. A sample is included as Exhibit 11-2. RTI has conducted extensive searches and locating activities to provide you with the most up-to-date information possible.

The Locator Report includes separate pages for the RSA, RSC, SIB, and PCG-only who were interviewed at Wave 1. Each page will provide as much of the following relevant information we have been able to get for that respondent:
- name
- Wave 1 respondent type
- household ID number
- nickname
maiden name
sex
race/ethnicity
date of birth
current age
birthplace
marital status at Wave 1
name of spouse/partner at Wave 1
marital status at time of Interim Tracking Survey
name of spouse/partner at time of Interim Tracking Survey
number of children at Wave 1
names of children at Wave 1
schooling status at Wave 1
language
best known address and phone number
best address to reach sample member
employer name and address at Wave 1
spouse/partner employer name and address at Wave 1
name, address, and telephone number of contact people
new address (if planning to move)

You must review the locator pages carefully. We expect you to “know” the household as much as you possibly can before you get on the phone or go to the field to look for them. Your ability to easily describe the people you are looking for will make it easier for informants to help you and for you to find the respondents.

11.3.3 Wave 1 Respondents

After you have reviewed the Locator Report, turn to the page in the case folder called “Wave 1 Respondents.” It has a grid on it (see Exhibit 11-3). Each case folder will have one of these forms. Enter the household ID number in the space indicated in the upper right-hand corner (the household ID number is on the label on the case folder and in the Locator Report). Use the information from the Locator Report to determine who you are looking for: the RSA, the RSC, the SIB, or the PCG-only. Cross off the column in the grid if your case does not include that respondent type.

Use information from the Locator Report to complete the grid. Write in the name, sex, race/ethnicity, etc. This exercise will serve two purposes: (1) you will have a ready reference for the people you are looking for and (2) you will have developed greater familiarity with the case.
11.3.4 Panel Tracking Questions

The Panel Tracking Questions (see Exhibit 11-4) are to be asked at the doorstep or on the phone as you are trying to find panel members to interview.

Use a new, blank Panel Tracking Questions form whenever you make a contact to locate a panel respondent. Pull out a blank form and have it ready. On the top of the form enter the Household ID Number for the case, and indicate the address where you are making the inquiry. Cross off the column(s) if the case you are working does not involve a particular type of respondent. Note: As you work a case, chances are you will find one of the panel respondents but may still need to hunt for others. After you have found a panel member, be sure to cross off the column for that person when you pull out a blank Panel Tracking Questions form as you continue to talk with informants to find the remaining panel members.

On the Panel Tracking Questions form, text is provided for you to introduce the study and the purpose of your call or visit. Questions 1, 2, and 3 are scripted items to ask the informant if a panel participant lives or stays at the address (Question 1).

- If you find one of the panel members of interest lives there, great! Explain the study and ask to be invited in (or schedule an appointment) so you can begin the CID.
- If the informant tells you the panel member you are looking for is deceased or incarcerated, follow the instructions in Question 1, which will lead you to record information about the date and location of the person’s death or the location and duration of the person’s incarceration on the Panel Tracking Sheet (discussed in the next section).
- If no panel sample members live at the address, ask Questions 2 and 3 and follow the instructions. These questions ask the informant if he/she knows the current whereabouts of panel members or knows of people who would be able to direct you to them.

11.3.5 Panel Tracking Sheet: Front Side

The information a given informant can provide will vary, based on who you are speaking with, his/her knowledge of the panel participants, and willingness to provide information. Whatever information you collect should be entered on the Panel Tracking Sheet (Exhibit 11-5). Use one of these forms with each informant you talk with.

Write the household ID number (a 5-digit number) in the space provided in the upper right hand corner. You will find the household ID number on the label on the front of the folder and in the Respondent Locater report. Put a check mark in each box to show who the information on the Panel Tracking Sheet applies to—the RSA, RSC, SIB, or PCG-only. It is possible the information will apply to more than one person, such as the RSC and the SIB. In this case, put check marks in each of the appropriate boxes.

If the informant can give you any information about the panel member, enter it on the Panel Tracking Sheet. You’ll be especially interested in getting and entering the panel member’s phone number.
number(s) and address(es). Get as much information as you can from the informant. Repeat the numbers and street names out loud and ask the informant if you got the information correctly.

If the informant does not know where to find the panel members of interest, the Panel Tracking Questions tell you to ask him/her if anyone else would know where they are or how to reach them. If the answer is “yes,” record information in the space marked “Additional Leads to Follow Up” on the Panel Tracking Sheet. Again, make sure you get as much information as possible and confirm it whenever possible.

Write notes at the bottom of the page. Remember there may be other FIs coming after you who will use your case notes to try and find the panel members. Please help them as much as possible to do their job.

**11.3.6 Panel Tracking Sheet: Reverse Side**

After you have collected all relevant information, thank the informant. Ask the informant’s name, address, and telephone number. If the informant asks why you want his/her information, tell them you need it because your supervisor will be contacting some people you talk with to see how well you’re doing your job. Explain that you may also need to get back in touch with the informant if you have trouble following up on any of the leads.

Complete the items on the reverse side of the Panel Tracking Sheet. Indicate the method of contact (phone or in-person) and the informant’s name and contact information.

Note that the reverse side of the Panel Tracking Sheet asks you to record information about the informant. Do not ask the informant these questions; instead, use your best estimate and judgment.

Be sure to enter information at the bottom of the Panel Tracking Sheet, including the day and date, your signature, and your FI number.

**11.3.7 Questions to Help Locate the RSA, RSC, SIB, or PCG-only**

How will you know what to ask an informant? Draw upon your skills as an interviewer. Appear professional, knowledgeable, and respectful. Be prepared. Know as much as you can about who you are looking for so your questions will make sense to the respondent.

We have prepared questions for you to ask informants about the individuals you are trying to locate (*Exhibit 11-6*). You will receive the questions for informants on a laminated sheet. Use them and record relevant answers on the Panel Tracking Sheet.
11.3.8 Other People

The goal in tracking panel respondents is to finding L.A. FANS Wave 1 respondents who have moved away from their Wave 1 dwelling and reinterview them for L.A. FANS Wave 2. Keep in mind that:

- The informant you are talking to may not have the most up-to-date information on where the Wave 1 respondents now live (even though he/she may think he/she does)
- We may only have one chance to talk to this informant, so we should make the most of it, without pressuring or annoying the informant

Thus, even if the informant has given you what they believe is the current contact information for a particular respondent, you still want to find out where other people are who may be able to help us if you still can’t find the respondent with the information the informant gives you. And we need to ask the informant for this information now because we may not get a chance to talk to him/her again.

So, you have one last section of questions to ask (see Exhibit 11-7). You will ask the informant if he or she knows other people who lived with the Wave 1 respondents at the time of Wave 1 (the form in the case folder will have the names of people who lived with the Wave 1 respondents printed on it). However, because of confidentiality considerations, you should not tell the informant that these are people who lived in the Wave 1 respondents’ household at the Wave 1 interviewer. Instead, ask the question as follows:

Finally, I want to ask you if you know a few other people who may be able to help us contact [RSA//RSC/SIB/PCG-only]. Please tell me if you have ever met or know any of the following people…..

At the end of this question (where you see “….”), read all of the names shown in the first column of the preprinted table. For example, suppose the table lists three people: Mildred Wong, Jackie Maddon, and Cecilia Hernandez and you are trying to locate the RSA and RSC who are named James Smith and John Smith. In this case, you would ask the question like this:

Finally, I want to ask you if you know a few other people who may be able to help us contact James Smith and John Smith. Please tell me if you have ever met or know any of the following people: Mildred Wong, Jackie Maddon, and Cecilia Hernandez.

Make sure you read all the names in the list in this first question. Don’t go row by row asking the question for each separate person. If the informant says he knows Jackie Maddon and Cecilia Hernandez but not Mildred Wong, put a check under “yes” in the second column for the row for Jackie and the row
for Cecilia. And check “no” for the row for Mildred. If the respondent says he/she is not sure, write in “not sure.”

Note that the form also contains preprinted information on the current age of the person on the list. Do NOT read the ages out loud to the informant. Instead if the informant says something like “Do you mean that little girl who used to live here?” you can check the age and say “yes” if the current age suggests that the person was a child when she lived there approximately 6 to 7 years ago.

The second question is only about people who the informant said he/she knows – people for whom is be a check under “yes” in the second column. Unlike the first question, the second question should be read separately for each person the informant knows. So in the example above, you would first ask:

How can I get in touch with Jackie Maddon?

You then record in the final column for Jackie Maddon as much information as the informant can give you. Then you ask:

How can I get in touch with Cecilia Hernandez?

You then record in the final column for Cecilia Hernandez as much information as the informant can give you about how to contact her.

Occasionally, informants may ask why you need this information, since they have already told you where the respondent(s) that you are looking for live. You should say something like:

We sometimes have trouble contacting respondents even when we know where they are. We don’t want to bother you again if we can’t get in touch with [RSA/RSC/SIB/PCG-only], so I would like to get as much information as I can now. Like all information we collect in this survey, this information will be kept completely confidential and will be used only to try to contact [RSA/RSC/SIB/PCG-only].

As in all L.A.FANS questions, informants have the choice to refuse to provide information. However, you should try to reassure them if they appear to have some information but are reluctant to provide it.

If the informant gives you potentially useful information that does not fit in the table, record it in the margins or the back of the sheet. If in doubt about whether the information is useful, go ahead and write it on the form.
11.4 Next Steps

At a Wave 1 address, the following could happen:

- You determine that the RSA, RSC, or SIB lives at the residence at least half the time. What do you do? Arrange to start the CID.
- You determine that none of the sample members of interest (the RSA, RSC, SIB, or PCG-only) live at the residence. This may be a complete turnover residence. What do you do? First, ask the informant for information about how to locate each of the respondents, record all possible contact information on the Panel Tracking Sheet (be sure to complete the reverse side), and ask and record information about other people from the Wave 1 household. Then review the “Screen Complete Turnover?” on the label of the Panel folder. If “YES” proceed with completing the screener. This is a critical step because completing the screener is essential in determining whether the household is a complete turnover residence.

In other instances, you will be calling or visiting an address that you were given as a lead, meaning you hope to find the RSA, RSC, or SIB—but it is not a Wave 1 address. If you find the RSA, RSC, or SIB, arrange to start the CID. If you don’t find any respondents, ask the informant for information about how to locate one or more of them, record all possible information on the Panel Tracking Sheet, and record information about other people from the Wave 1 household.

11.5 Guidelines for Panel Tracking

In-person tracking of all panel participants should proceed as follows:

1. For each panel respondent, if the last known address has a telephone number, call the number to attempt to reach the participant and schedule an appointment to visit. If there is no telephone number, visit the last known address in person. As described in Section 11.6, you must also visit the Wave 1 address in person as a step in working the panel case.

2. When visiting a household, have three forms ready: the Panel Tracking Questions, the Panel Tracking Sheet, and the Wave 1 Others form. If visiting the Wave 1 address, have a blank Screener ready to use in case the Wave 1 address turns out to be a complete turnover dwelling. Begin the process by getting answers to the Panel Tracking Questions.

3. Depending on who lives at the residence, you may proceed to the CID (if the Wave 1 RSA, RSC, or SIB lives there at least half time), a blank Screener (if you are at the Wave 1 address and no panel respondents live there), or end the visit by completing the tracking forms and
follow your leads to locate the panel participants (if you are not at the Wave 1 address).

4. Be sure to complete the reverse side of the Panel Tracking Sheet for each informant you get information from.

5. Use information on the Panel Tracking Sheets to guide the next step you take find each panel respondent (RSA, RSC, SIB) not yet located. A hierarchy of field tracking steps is included in Section 11.6 to guide the field tracking process.

6. You should follow L.A. FANS-2 procedures for tracking panel respondents (RSA/RSC/SIB), the PCG-only, other W1 residents, and informants. The basic procedures are as follows:
   • If any people being tracked live in the neighborhood where you are or where you will be visiting other households, make an in-person visit.
   • If any people being tracked live in other areas that are part of your assigned territory, make an in-person visit.
   • Travel should be minimized, so call ahead when possible to verify the person’s address and the best time to visit.
   • Informants can be contacted by telephone and do not need to be visited. However, visits may help to elicit cooperation from informants and assure them of the legitimacy of the study.
   • If you have leads for people outside your assigned territory, discuss the case with your supervisor to determine the next appropriate step. You might make the contact or the case might be transferred to another FI.

7. There are a number of strategies for tracking as described in Section 11.6. If you do not find the person you are looking for, talk to other occupants of the dwelling, neighbors, and other possible informants (postman, local store owner), as appropriate, to get information about people you are trying to find.

   When talking with possible informants, use information about panel participants from the grid you completed to describe the people being tracked. However, be careful about the way you use information. You should give informants only the information that you think will be useful to them in remembering a panel respondent

8. Be sure to complete all tracking forms and write detailed, accurate notes. You must record all contacts with informants, respondents, and non-sampled household members.

9. The tracking process ends when you have located all respondents and recorded the final location information for each panel respondent on the Summary Panel Tracking Form or when you turn the case over to your supervisor for further action.
11.6 Panel Tracking Protocol

11.6.1 Pre-Field Steps

You will receive a case folder for each panel case, containing the forms listed under Section 11.3 above. For each case first review the Locator Report for the RSA, RSC, SIB, and PCG-only and complete the grid for Wave 1 Respondents.

11.6.2 Hierarchy of Field Tracking Steps

The L.A. FANS-2 project has developed a hierarchy of tracking steps to follow in attempting to locate panel members. This hierarchy is a systematic approach to maximize the success and minimize the costs of field tracking efforts. The steps that you, the interviewer, will follow are described in detail below.

Step 1: You will visit the Wave 1 address to determine if any panel respondents (i.e., the Wave 1 RSA, RSC, or SIB) still live there. Use the Panel Tracking Questions form to collect and record information on the whereabouts of Wave 1 residents, including the PCG-only. What is the outcome of the visit?

- You determine that at least one panel participant lives at least half time at the address.

  Next step → Complete the Case Initiation Database on the laptop and the Roster module at Wave 1 address, collecting information on the whereabouts of all people living at the Wave 1 address at the time of Wave 1 interview and any new entrants now living at the address. Selection rules at the end of the roster will spawn cases for individuals to be interviewed. Proceed to schedule, conduct, and complete each interview at the address.

- You determine that none of the Panel Participants still live at the address. (Address may or may not contain people who lived there at Wave 1, but they were not respondents at Wave 1.)

  Next step → After asking if people at the Wave 1 address have any information on the whereabouts of the panel participants and recording any information provided on the Panel Tracking Questions form and the Panel Tracking Sheet, pull the next blank Screener from your supply and complete it to determine if any Wave 1 residents still live there and if the household is eligible and is sampled as a New Entrant household.

  If the household is not eligible, thank the individual for his/her time.
If the household is eligible but is not selected, thank the individual for his/her time and explain that the household has not been selected for the study right now, but may be selected for the study in the future.

If the household is eligible and is selected, complete the Case Initiation Database and complete a Roster module with an adult at the address. Based on information entered in the Roster, one or more household members may be selected to be interviewed as New Entrants. Schedule, conduct and complete interviews with all selected New Entrant participants.

- Either (1) you are unable to speak with anyone at the Wave 1 address or (2) new members at the Wave 1 address have no knowledge of the whereabouts of panel participants.

If the Wave 1 address is in an apartment complex, mobile home park, or housing community try to speak with the property manager to determine the whereabouts of the panel participants.

If the dwelling is vacant but has a realty sign, contact the realty office to try and determine the current whereabouts of the panel participants.

Complete the Panel Tracking Sheets (as able) to collect information on the whereabouts of the panel participants.

To maximize the benefit of the in-person trip to the Wave 1 address, also complete steps 2 and 3 below as needed to generate leads to contact the panel participants.

**Step 2:** Attempt to contact neighbors at the Wave 1 address (people living in the front, back, right, left, above, or below) to try and obtain information on the whereabouts of any members of the Wave 1 panel family. Enter all leads on Panel Tracking Sheets.

When talking to current residents, contact people, neighbors, landlords, property managers, and others, you will need to maintain confidentiality while simultaneously gaining the confidence of people who may have useful information. You can indicate the person or family has participated in a research study and you need to reach them for the next round of the study. As part of this conversation, you may say that the panel participants you are tracking will be paid for participating in this round of the survey and that they agreed to be recontacted for the study. In addition to the scripted Panel Tracking Questions, use questions on the laminated sheet to help generate additional leads:

- **Was there a spouse who did not live with the family? What is the spouse’s name?** If the spouse is not already a contact, you could attempt to locate the spouse.
- Does the panel member or spouse work? Where? What kind of work does he/she do?

- Did the family own or rent the home? If respondent owned, other L.A. FANS-2 staff may check court records for property transactions, deeds, etc. in his/her name or spouse's name. If respondent rented, try to obtain the name of the landlord or property owner and contact him/her to see if landlord/owner has the address where mail was forwarded.

- Does the panel family attend a local church, synagogue, mosque, temple, or other religious institution? If so, call or visit the place of worship to see if they can provide any information about where the family now lives. If the family still attends that church and the church office does not want to give out information, ask if they can get a message (with your name and telephone number) to the respondent.

- Was the panel family active in any local neighborhood groups, clubs, or institutions? If so, call or visit the groups to see if they know where the respondent lives now.

**Step 3:** Act on all solid leads gained through the visit to the Wave 1 address and speaking with neighbors or other named contacts.

If successful in locating any panel members, proceed with completing the Case Initiation Database. Complete a Roster module with an adult at the address where one or more of the panel members resides. Schedule, conduct and complete interviews with all selected participants.

If unsuccessful at this point in locating any or all panel participants, discuss the case with your FS. You and the FS may come up with some ideas to pursue or the case may be transferred to another FI or a specialized tracker.

**Step 4:** If the Locator Report has employer information for the RSA or a spouse/partner, you and your FS will decide whether to pursue the lead.

If so and the telephone number for the employer is provided, call the number and ask to speak with the respondent. If the respondent has left this employer, try to get the name of the panel participant’s new employer.

If the telephone number for the employer of a spouse/partner is provided, call the number and ask to speak with the spouse/partner. If the spouse/partner has left the employer, attempt to obtain information on the new employer of spouse/partner.
If the employer name and address information is provided without a telephone number, use the local white pages, the Internet, or directory assistance to try to get a telephone number, and then try to reach the employer.

Step 5: Visit the local post office to try to locate any new or forwarding address information. Act on any new address information obtained as follows:

- Try to locate a telephone number through Internet sources or directory assistance and call the panel participant.
- If a new address is provided and in the areas you are assigned to work, visit the address.
- If a new address is provided and not in or near the areas you are working, your supervisor may ask you to complete and electronically submit information to her listing the case ID, panel member(s), and current address which appears to be outside of Los Angeles County. The field supervisor may submit materials to another FI or RTI’s call center, where the case will enter the telephone interview process.

Step 6: When in the area of the Wave 1 address or more recent address, try to contact the local mail carrier to see whether the carrier has any new address or contact information available.

Step 7: While in the area of the Wave 1 address or more recent address, visit churches, stores, community centers, and other key establishments in the area, asking if people know the adult and how to get in touch with him/her. Examples are:

- **Neighborhood convenience stores/gas stations.** You may find someone who knows the respondent or who can say when the respondent stops in.

- **Local check cashing facilities.** Stand-alone check cashing facilities and stores that cash checks as a customer service may be able to provide information, as may local businesses that sell money orders or wire money.

- **Local community centers.** Community centers in some areas are the local “hangout.” Ask people who work or participate in activities there if they know the study member. You may learn that a respondent plays a sport or has certain interests or hobbies that could result in other leads.

Step 8: Based on the ages of children in the Wave 1 household, you may contact local schools to see if they know the children or family. Due to privacy and security concerns, schools will be very reluctant to provide information about students. You may leave a note or letter, asking that it be sent home with the student or given to an adult.

Step 9: With supervisor guidance you may also be asked to contact the local tax assessor’s office and voter registration offices. You will follow up on all leads obtained.
Step 10: For some panel cases, an email address will be provided in the tracking booklet for one or more panel members. You may be asked to send an email to reach the panel member. If a response is received, you will try to obtain contact information.

In addition to the steps described above, we have compiled a list of locating tips for L.A. FANS-2 field staff from recent RTI studies (see Exhibit 11-8). These tips may help you work tracing cases more effectively.

11.6.3 Documenting Tracking Efforts

For each assigned panel case, you will maintain a case folder, which will include all necessary forms. As you work to track and locate the panel members associated with the case, record relevant tracking information on Panel Tracking Sheets. For each lead you record, indicate the date, day, and time of the contact, and detailed notes to describe the contact with the informant.

Through weekly calls and emails, maintain close communication with your FS on tracking progress. Your FS will work with you to determine promising steps to take in locating participants.

Document final contact information for the RSA, RSC, SIB, and PCG-only on the Summary Panel Tracking Form. The case folder containing the tracking forms and paperwork (e.g., consents, receipts) will be returned to RTI after you have completed fieldwork with all members of the panel case; all information will be reviewed for accuracy and completeness.

11.7 Collecting Location Information from Adult Respondents

To collect contact information for future rounds of L.A. FANS, a detailed set of items are asked at the end of the Adult module. The quality and completeness of the locator information you collect in this section of the interview is essential to the success of future data collection. Therefore, you must make every effort to obtain all requested pieces of information from the respondent. Allow the respondent to check records or look-up addresses and telephone numbers for relatives or friends who are listed as contacts. Encourage the respondent to name multiple contact sources, rather than one or none.
INSTRUCTIONS:
- COMPLETE THIS FORM AS YOU LOCATE AND/OR INTERVIEW EACH PERSON OF INTEREST.
- NOTE THAT ONLY PEOPLE INTERVIEWED WILL HAVE A CASE ID#; ALL OTHERS WILL HAVE A HOUSEHOLD ID#.

<table>
<thead>
<tr>
<th>FINAL RSA CONTACT INFORMATION</th>
<th>FINAL RSC CONTACT INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case/Household ID #:</td>
<td>__</td>
</tr>
<tr>
<td>Name: _____________________________</td>
<td>Name: _____________________________</td>
</tr>
<tr>
<td>Date: _____________________________</td>
<td>Date: _____________________________</td>
</tr>
<tr>
<td>Notes: _____________________________</td>
<td>Notes: _____________________________</td>
</tr>
<tr>
<td>Street: ____________________ Apt: _____</td>
<td>Street: ____________________ Apt: _____</td>
</tr>
<tr>
<td>City: ______________________________</td>
<td>City: ______________________________</td>
</tr>
<tr>
<td>State: ________________ Zip: _____</td>
<td>State: ________________ Zip: _____</td>
</tr>
<tr>
<td>Country: ____________________________</td>
<td>Country: ____________________________</td>
</tr>
<tr>
<td>Home tel.: __________________________</td>
<td>Home tel.: __________________________</td>
</tr>
<tr>
<td>Work tel.: _________________ Ext.: ____</td>
<td>Work tel.: _________________ Ext.: ____</td>
</tr>
<tr>
<td>Cell phone: _________________________</td>
<td>Cell phone: _________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FINAL SIB CONTACT INFORMATION</th>
<th>FINAL PCG-ONLY CONTACT INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case/Household ID #:</td>
<td>__</td>
</tr>
<tr>
<td>Name: _____________________________</td>
<td>Name: _____________________________</td>
</tr>
<tr>
<td>Date: _____________________________</td>
<td>Date: _____________________________</td>
</tr>
<tr>
<td>Notes: _____________________________</td>
<td>Notes: _____________________________</td>
</tr>
<tr>
<td>Street: ____________________ Apt: _____</td>
<td>Street: ____________________ Apt: _____</td>
</tr>
<tr>
<td>City: ______________________________</td>
<td>City: ______________________________</td>
</tr>
<tr>
<td>State: ________________ Zip: _____</td>
<td>State: ________________ Zip: _____</td>
</tr>
<tr>
<td>Country: ____________________________</td>
<td>Country: ____________________________</td>
</tr>
<tr>
<td>Home tel.: __________________________</td>
<td>Home tel.: __________________________</td>
</tr>
<tr>
<td>Work tel.: _________________ Ext.: ____</td>
<td>Work tel.: _________________ Ext.: ____</td>
</tr>
<tr>
<td>Cell phone: _________________________</td>
<td>Cell phone: _________________________</td>
</tr>
</tbody>
</table>
**Exhibit 11-2 Sample Locator Report**

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respondent’s Name</td>
<td>FRANK MIERZWA</td>
</tr>
<tr>
<td>Wave 1 Respondent Type</td>
<td>SIB</td>
</tr>
<tr>
<td>Household ID</td>
<td>11999</td>
</tr>
<tr>
<td>R's Sex</td>
<td>Male</td>
</tr>
<tr>
<td>R's Race/Ethnicity</td>
<td>Latino</td>
</tr>
<tr>
<td>R’s DOB</td>
<td>April 12, 1985</td>
</tr>
<tr>
<td>R’s Current Age</td>
<td>21</td>
</tr>
<tr>
<td>R's Birthplace</td>
<td>ARLETA, CALIFORNIA, USA</td>
</tr>
<tr>
<td>W1 schooling status</td>
<td>GRADE 8</td>
</tr>
<tr>
<td>Language</td>
<td>Spanish</td>
</tr>
</tbody>
</table>

### BEST KNOWN ADDRESS

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>FRANK MIERZWA</td>
</tr>
<tr>
<td>Street addr</td>
<td>123 PELLINORE AVE</td>
</tr>
<tr>
<td>City, state, zip</td>
<td>LOS ANGELES, CA 91331</td>
</tr>
<tr>
<td>Phone #1</td>
<td>(818)123-4567</td>
</tr>
<tr>
<td>Phone #2</td>
<td></td>
</tr>
<tr>
<td>Phone #3</td>
<td></td>
</tr>
<tr>
<td>Phone #4</td>
<td></td>
</tr>
</tbody>
</table>

### BEST ADDRESS GIVEN TO REACH SAMPLE MEMBER (if different from preload)

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td></td>
</tr>
<tr>
<td>Relationship to R</td>
<td></td>
</tr>
<tr>
<td>Street addr</td>
<td></td>
</tr>
<tr>
<td>City, state, zip</td>
<td></td>
</tr>
<tr>
<td>Phone #1</td>
<td></td>
</tr>
<tr>
<td>Phone #2</td>
<td></td>
</tr>
<tr>
<td>Phone #3</td>
<td></td>
</tr>
</tbody>
</table>

### CONTACT PERSON 1

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship to R</td>
<td>OTHER RELATIVE</td>
</tr>
<tr>
<td>Name</td>
<td>CATHY MIERZWA</td>
</tr>
<tr>
<td>Street addr</td>
<td>11222 MARKET ST.</td>
</tr>
<tr>
<td>City, state, zip</td>
<td>LOS ANGELES, CA 91604</td>
</tr>
<tr>
<td>Phone #</td>
<td>(818)987-6454</td>
</tr>
</tbody>
</table>
### Exhibit 11-3 WAVE 1 RESPONDENTS

**INSTRUCTIONS:**
1. Review the locator report and enter information about the individuals you are trying to locate.
2. Cross off any column when the case does not have this type of respondent.
3. Complete the grid below using information from the locator report.

<table>
<thead>
<tr>
<th></th>
<th>RSA</th>
<th>RSC</th>
<th>SH</th>
<th>PCG-only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sex</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Race/Ethnicity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Birthplace</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>W1 marital status</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>F1’s marital status</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>W1 Spouse / partner name</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children w/ W1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Names of children w/ W1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>W1 employer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>W1 occupation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Panel Tracking Questions

Exhibit 11-4 Panel Tracking Questions

Panel Tracking Questions

ADDRESS FOR INQUIRY: ___________________________ or □ Wave 1 Address

Hello, my name is __________. I work for RTI International and I am conducting a survey for RAND and UCLA. I am trying to locate a few people we interviewed about 6 years ago. When we interviewed them, they said we could contact them again in the future.

1. Does [RSA/RSC/SIB/PCG-ONLY] currently live or stay at this address? [Probe: Does [NAME] stay here at least half of the time?]

INTERVIEWER: CROSS OFF THE ENTIRE COLUMN BELOW IF YOU ARE NOT LOOKING FOR ONE OF THE LISTED INDIVIDUALS. ASK ABOUT EACH OF THE RSA, RSC, SIB, AND PCG-ONLY YOU ARE LOOKING FOR. MARK RESPONSES FOR ALL W1 RESPONDENTS.

<table>
<thead>
<tr>
<th>Mark Response</th>
<th>RSA</th>
<th>RSC</th>
<th>SIB</th>
<th>PCG-Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, lives here at least half of the time (ENTER ADDRESS IN GRAY BOX above AND BEGIN CID/ROSTER)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lives here occasionally or part time only (GO TO Q.2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No, does not live here at all (GO TO Q.2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Never heard of [RSA/RSC/PCG-ONLY] (GO TO Q.3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deceased (GO TO PANEL TRACKING SHEET)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Incarcerated (GO TO PANEL TRACKING SHEET)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Refused (GO TO Q.3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Don't know (GO TO Q.2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Do you know where [RSA/RSC/SIB/PCG-ONLY] is living or anyone who might know?

INTERVIEWER: ASK ABOUT EACH OF THE RSA, RSC, SIB, AND PCG-ONLY YOU ARE LOOKING FOR. CIRCLE RESPONSES.

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes, for RSA</td>
<td>➔</td>
<td>enter information on Panel Tracking Sheet</td>
</tr>
<tr>
<td>2</td>
<td>Yes, for RSC</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
<tr>
<td>3</td>
<td>Yes, for SIB</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
<tr>
<td>4</td>
<td>Yes, for PCG-only</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
<tr>
<td>5</td>
<td>No, have no information about any</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
<tr>
<td>6</td>
<td>Refused</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
<tr>
<td>7</td>
<td>Don't know</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
</tbody>
</table>

3. Do you know anyone who might know [RSA/RSC/SIB/PCG-ONLY] or know where [RSA/RSC/SIB/PCG-ONLY] is living?

INTERVIEWER: ASK ABOUT EACH OF THE RSA, RSC, SIB, AND PCG-ONLY YOU ARE LOOKING FOR. CIRCLE RESPONSES.

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes, for RSA</td>
<td>➔</td>
<td>enter information on Panel Tracking Sheet</td>
</tr>
<tr>
<td>2</td>
<td>Yes, for RSC</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
<tr>
<td>3</td>
<td>Yes, for SIB</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
<tr>
<td>4</td>
<td>Yes, for PCG-only</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
<tr>
<td>5</td>
<td>No, have no information about any</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
<tr>
<td>6</td>
<td>Refused</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
<tr>
<td>7</td>
<td>Don't know</td>
<td>➔</td>
<td>enter information on reverse side of Panel Tracking Sheet</td>
</tr>
</tbody>
</table>

**Next Steps**
- If PCG-only lives at the address (but NOT RSA, RSC, or SIB)
  - Ask informant and PCG-only for information about respondents of interest and enter on Panel Tracking Sheet
  - Complete reverse side of Panel Tracking Sheet
  - Complete grey box on cover
- If RSA, RSC, SIB, or PCG-only from W1 does not live at the W1 address at least half time (complete turnover)
  - Review “Screen Complete Turnover?” label on folder. If “YES” go to SCREENER
  - Also complete reverse side of Panel Tracking Sheet

---

L.A. FANS-2
Field Interviewer Manual
Chapter 11
Tracking Panel Members
Exhibit 11-5 Panel Tracking Sheet

PANEL TRACKING SHEET

RECORD INFORMATION BELOW OBTAINED FROM INFORMANT. INDICATE WHO THE INFORMATION APPLIES TO (CHECK ALL THAT APPLY):

RSA □ RSC □ SIB □ PCG-only □ OTHER W1 HH MEMBER □

<table>
<thead>
<tr>
<th>phone numbers</th>
<th>□ □ □ □ (circle: home, cell, office, other specify □ □ □ □)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□ □ □ □ ( circle: home, cell, office, other specify □ □ □ □)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

Additional Leads to Follow Up

<table>
<thead>
<tr>
<th>name</th>
<th>phone</th>
<th>address</th>
<th>relationship to person of interest</th>
<th>comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Deceased: when? (month/date/year, how many years ago, age at time of death) ___________
where? (city and state) _______________________________________________

Incarcerated: how long there? ________________________________________________
when due to be released? ________________________________________________

Notes:
Exhibit 11-5 Panel Tracking Sheet (cont’d)

Informant Information

FOR EACH INFORMANT YOU SPEAK WITH WHO PROVIDES LEADS TO FIND THE WAVE 1 RESPONDENTS OF INTEREST, IN THE SPACE BELOW RECORD THE PERSON’S NAME, PHONE NUMBER, ADDRESS, AND CHARACTERISTICS.

Method of contact with informant: _______ phone _______ in person

1. Informant information:

_____________________________________ ______-
first, middle, last name phone number

2. Informant’s relationship to panel member(s) of interest: ____________________________

Address where information in this form was collected:

street: _________________________ apt: _____
city, state, zip: ______________________________

RECORD THE FOLLOWING INFORMATION BASED ON OBSERVING THE INFORMANT AND SURROUNDINGS. **DO NOT** ASK THE INFORMANT TO PROVIDE THESE ANSWERS.

3. Informant sex: ☐ male ☐ female
4. Estimated age: ☐ <18 ☐ 18-24 ☐ 25-34 ☐ 35-54 ☐ 55-69 ☐ 70+
5. Language used: ☐ English ☐ Spanish ☐ Other, specify: _______
6. Type of housing: ☐ apartment ☐ single family home
   ☐ mobile home, trailer ☐ unit in boarding house
   ☐ duplex ☐ condominium
    ☐ n/a

7. Your estimate of monthly rental cost:
   ☐ Less than $500
   ☐ $500 to $999
   ☐ $1000 to $1999
   ☐ $2000 to $2999
   ☐ $3000 or more
   ☐ n/a

<table>
<thead>
<tr>
<th>Contact Information</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Day:</td>
</tr>
<tr>
<td></td>
<td>Time Completed:</td>
</tr>
<tr>
<td></td>
<td>FI Signature:</td>
</tr>
<tr>
<td></td>
<td>FI ID#:</td>
</tr>
</tbody>
</table>
Exhibit 11-6

**QUESTIONS TO HELP LOCATE THE RSA, RSC, SIB, OR PCG-ONLY**

Record all responses—including contact information for people of interest and other possible informants—on the Panel Tracking Sheet.

1. Do you know where [RSA, RSC, SIB, PCG-only] currently lives or stays?

2. Do you know anyone else who might know where [RSA, RSC, SIB, PCG-only] are? For example, a friend, neighbor, co-worker, or relative?

3. Do you know when [RSA, RSC, SIB, PCG-only] last lived at this address?

4. Do you know where any of the other people who lived with [RSA, RSC, SIB, PCG-only] in 2000 or 2001 now live? What are their names? How can I reach them?

5. Why did [RSA, RSC, SIB, PCG-only] move away from this address?

6. Did [RSA, RSC, SIB, PCG-only]’s name change? Does he/she use another name? [If yes] what is it?

7. Do you know if [RSA, RSC, SIB, PCG-only] is married or is living with a partner, boyfriend or girlfriend? [If yes] What is that person’s name?

8. Do you know the names of anyone [RSA, RSC, SIB, PCG-only] lives with? [If yes] What are the names? Anyone else?

9. Does [RSA, RSC, SIB, PCG-only] go to school or college? [If yes] What is the name of the school or college? Where is it located?

10. Does [RSA, RSC, SIB, PCG-only] have a paying job? [If yes] Where does [RSA, RSC, SIB, PCG-only] work? What is the name of [RSA, RSC, SIB, PCG-only]’s employer? What type of work does he/she do?

11. Does [RSA, RSC, SIB, PCG-only] belong to a church, synagogue, mosque, or other place of worship? Is [RSA, RSC, SIB, PCG-only] active in any community or volunteer associations or civic groups, clubs, or organized sports activities? [If yes] Where? What is the name?
Finally, I want to ask you if you know a few other people who may be able to help us contact [RSA//RSC/SIB/PCG-ONLY]. Please tell me if you have ever met or know any of the following people… [READ ALL NAMES IN 1ST COLUMN]

<table>
<thead>
<tr>
<th>[DO NOT READ AGES]</th>
<th>INFORMANT KNOWS HIM/HER?</th>
<th>[IF YES IS CHECKED] How can I get in touch with [NAME OF PERSON]?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>A. [PREPRINTED NAME AND AGE]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. [PREPRINTED NAME AND AGE]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. [PREPRINTED NAME AND AGE]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. [PREPRINTED NAME AND AGE]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E. [PREPRINTED NAME AND AGE]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F. [PREPRINTED NAME AND AGE]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Here are tracking tips from RTI, based on successful approaches in recent studies. Remember, tracking is an art, not a science. There is no one formula that you can use every time to guarantee results, so your approach must be flexible but systematic. If you find successful strategies that are not on this list or the Field Tracking Checklist, please tell your supervisor. These additions will be shared with your fellow field interviewers.

- Work cases as soon as you receive them. This practice will allow you to determine early which cases may require tracking, thus helping you prioritize your work.

- Familiarize yourself with the local area and the neighborhood surrounding the respondent’s last known address. Look for nearby churches, grocery or convenience stores, video rental stores, community centers, parks, playgrounds, or other facilities the family may have used. Where might the respondent have gone in the neighborhood? Who might know him/her?

- Remember that even very generic leads can be useful in tracking the respondent or other contact sources—for example, which city or state the family may have moved to, type of employment (e.g., electrician, bank teller), and activities the family may participate in (soccer, basketball, bowling).

- Whenever possible, leave your name and telephone number with contact sources so the respondent can contact you.

- Never leave empty-handed. For every tracking attempt you make, try to leave with a new piece of information that gets you one step closer to locating the respondent. Be persistent.

- Tell contact sources that the respondent will be paid for his/her participation in the study (but do not mention details of the study). Contact sources may be more likely to pass along information if they know the respondent will be compensated. Similarly, the respondent may be more likely to contact you if he/she knows about the incentive.

- Getting in secured apartment buildings can be as easy as walking in with an in-going resident. If asked, FIs often say they wish to leave a note under the respondent’s door. (Be sure to have a note prepared, in case you are questioned.) Sometimes you get lucky enough to find a friend who will buzz you in on subsequent visits. In very high security areas, it is best to make your pitch to the apartment manager rather than getting tossed out. Sometimes the front door may be locked but the back door is standing wide open. Carefully search for the back or side doors.
12. Documentation and Reporting Procedures

12.1 Introduction

RTI uses your documentation and reporting of field activities to closely monitor ongoing L.A. FANS-2 data collection. Documentation and reporting occurs in a number of ways, including the following.

- **Record of Contacts (ROC)** – The actions you take while working cases are documented in the Record of Contacts section of the Household Summary on the case folder.

- **Screening Form** – Screening data, eligibility data, selection information, ROC information, and verification information are all contained on the Screening Form, which must be mailed to RTI after a case is finalized (see Section 13.4).

- **Computer Management System (CMS) on the IBM ThinkPad laptop** – The actions you take while working cases are documented in the Case Management System (CMS) on your laptop computer (see Chapter 5 of the Field Interviewer Computer Manual).

- **Laptop data transmission** – Interview result codes; interview data; and Electronic Production, Time, and Expense (ePT&E) report information are transmitted from your computer to RTI (see Chapter 7 of the Field Interviewer Computer Manual).

- **Conference calls** – You have a weekly conference call with your field supervisor (FS).

- **ePT&E reports** – You submit ePT&E reports weekly (see Chapter 14).

Your efforts to accurately and promptly document your field activities on L.A. FANS-2 are a very important aspect of your job as an FI.

12.2 Transmissions from the Field

Each day you work, you are required to update the event codes for the cases you worked, documenting all efforts to locate, contact, screen, and interview the respondent, and to transmit data from contact attempts and completed interviews from the laptop to RTI. Project staff closely monitor all daily transmissions and production reports; therefore, your daily adherence to this requirement is important. Your supervisor has the ability to view electronically the history for your cases and will closely track progress on your cases by reviewing codes and comments you enter in the CMS. For more details about the logistics of transmitting, see Chapter 7 of the Field Interviewer Computer Manual.
12.3 Weekly Mailings

Each Monday, send all completed case folders to your supervisor by Federal Express, using the labels we give you at training. These materials include:

- all signed incentive receipts for completed interviews
- completed case folders with completed data collection forms
- case folders for cases that are being transferred to another FI
- receipts for escorts, if any
- a Transmittal Sheet
- new entrant addresses that are found to be ineligible during screening (e.g., group quarters, vacant, language barrier, other)
- cases coded as a final refusal by your supervisor
- completed new entrant screenings that result in the household not being eligible for the interview

Complete the Case Folder Inventory Sheet (Exhibit 12-1) for each Case Folder before sending it to your supervisor. Keep a copy for yourself. Write the Household ID in the space provided at the top. For each item listed in the table, indicate if it is enclosed in the Case Folder you are sending. Then examine the consent form(s) and incentive receipt(s) for that address. Indicate in the ID # box that the ID # on the consents and incentive receipts match the ID number of the Case Folder. Enter the Total Number of Forms being returned with the folder in the space provided at the bottom of the Inventory Sheet.

After the CMS has been updated and you have prepared the completed Case Folders and other materials to send, complete a Transmittal Sheet (Exhibit 12-2) to document which Case Folders and materials you are submitting. In the top portion of the Transmittal Sheet, record your name and FI ID #. In the New Entrant and Panel Cases tables, record the Household IDs for all Case Folders you enclose in the mailing. In the section “other materials enclosed in this shipment,” record items such as expense reports. Enclose the original of the Transmittal Sheet in the envelope along with the other materials and send the materials by Federal Express to your supervisor. Keep the copy of the Transmittal Sheet for your records, which your supervisor may review with you during weekly conference calls.
Exhibit 12-1 Case Folder Inventory Sheet

Case Folder Inventory Sheet
Los Angeles Family and Neighborhood Survey (L.A. FANS-2)

Field Interviewer Name: ___________________________ FID#: __________________

Enter Household ID# for this case folder: _____ _____ _____ _____ Date case folder sent to FS: ___ / ___ / ___

Before mailing the Folder to your FS, conduct a quality control check of the Case Folder contents. Complete the table below. In the **In Folder** column, indicate with an “X” that the ID number on each form matches the Household ID number on the Case Folder. In the **In Folder** column, use the codes listed below to indicate the status of each form on the Case Folder Inventory Sheet. A status should be indicated for every form whether or not it is included in the folder. In the **Signed** column, indicate with an “X” each form that has been signed. Include a Case Folder Inventory Sheet with every Case Folder that is returned to a Field Supervisor or to RTI.

To indicate the status of forms in the “In Folder” column, please use the following codes:

- **X** = the item was included
- **REF** = respondent refusal
- **NR** = the item was not required
- **OTHER** = there is another reason that the item is not present, and this reason is described in the Comments below, such as the form was completed but is now missing.

<table>
<thead>
<tr>
<th>Form Name</th>
<th>In Folder</th>
<th>ID#</th>
<th>Signed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summary Panel Tracking Form</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Panel Tracking Questions (indicate # included): _____</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Panel Tracking Sheets (indicate # included): _______</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wave 1 Respondents Grid</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Locator Reports for: __RSA __RSC __SIB __PCG-only</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wave 1 others to locate respondents of interest sheet</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Screener and Contact Log</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Map Page (if new entrant case folder)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interview Incentive Receipt(s) (indicate # included):_____</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parental Consent: Child Interview (Form B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parental Consent: Child Health Measures – Children Age 2 (Form C)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parental Consent: Child Health Measures 3-17 years (Form H or I)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parental Consent: Child Health Measures 3-17 yrs w/opt-out (Forms J or K)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Health Measures Assent: Children 7-8 Years (Forms L or M)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Health Measures Assent: Children 9-14 Years (Forms N or O)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Health Measures Assent: Children 15-17 Years (Form R)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adult Consent for Health Measures (Forms V or W)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adult Consent for Health Measures w/opt-out (Forms X or Y)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EMSI Request for Dried Blood Spot Form</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Saliva Fedex Mailer (sender copy)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Number of Forms

Comments:


Disposition: Original and yellow in case folder; retain pink copy for your records. March 2007
### Exhibit 12-2 Transmittal Form

#### Case Folders – Transmittal Sheet
(Case folders sent from FI to FS, FI to FI, or FS to RTI)

<table>
<thead>
<tr>
<th>Field Interviewer Manual</th>
<th>Documentation and Reporting Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>FI Name (PRINT): _________</td>
<td>Date of Shipment: _________________</td>
</tr>
<tr>
<td>Supervisor: ______________</td>
<td>FedEx Tracking #: _________________</td>
</tr>
</tbody>
</table>

Field Interviewer Signature: _________________________________________

**FI/FS Instructions:** Record 5-digit household ID for case folder on form and place a check “✓” in the “Folder” column to indicate the folder is enclosed. If an item is missing or not required from the folder, explain why on comment line. Include the original of the transmittal form in the envelope with the folders and keep the yellow copy for your records.

**FIs:** Before shipping, you must send an e-mail to your FS listing the package contents (including household ID numbers of the enclosed folders), the FedEx tracking number, the date of shipment, the expected date of receipt, and the delivery address.

Note: FIs should only ship folders to their FS when a case is completed -- or to another FI when transferring a case. FIs should never ship folders directly to RTI.

<table>
<thead>
<tr>
<th>NEW ENTRANT CASES</th>
<th>PANEL CASES</th>
</tr>
</thead>
<tbody>
<tr>
<td>5-Digit Household ID#</td>
<td>Folder</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Other materials enclosed in this shipment (e.g. completed Headway Expense Report): ________________________________________________________________</td>
<td></td>
</tr>
</tbody>
</table>

Comments: ____________________________________________________________

Disposition: Original copy to Field Supervisor; retain yellow copy for your records. [09360.300.003: Transmittal]
12.4 Weekly Conference Call with Field Supervisor (FS)

You must report the status of each case in your assignment during a weekly telephone conference call with your field supervisor (FS). During or immediately after training, your FS will schedule a time with you for this weekly conference. It is important that you arrange to be available at the established report time, keeping in mind that your FS must talk with each FI in her/his region during the week. During the call, information you report must be up-to-date and accurate. The next few sections cover the types of issues you should be prepared to discuss.

12.4.1 Status of Assigned Cases

As already discussed, you will update case event codes in the ROCs in your case folder and through the electronic CMS on your laptop each day of work. Your FS will review reports generated from the CMS and details of selected pending cases prior to your weekly call. In case there are questions on the status of your cases, have your case folders in front of you when your supervisor calls. The status of your cases will be reviewed in ID order or in an order the FS chooses. Your FS will be able to review event history information on cases in your assignment from electronic records and will probably discuss this information for selected cases during the call.

12.4.2 Noninterview/Refusal Cases

Be prepared to discuss all potential non-interviews with your FS. As mentioned in Chapter 5, the three largest contributors to non-response are refusals, unlocatables, and unavailables after repeated attempts. We discussed in Chapter 11 strategies to use in tracing the cohort and strategies were discussed in Chapters 5 and 8 on gaining cooperation and minimizing refusals. During the call be prepared to discuss the details surrounding these types of cases:

- refusals;
- unavailables / no one homes / canceled appointments—after attempts have been made without success;
- unlocatables;
- institutionalized/incarcerated respondents;
- physically/mentally incapable of completing the interview/assessment;
- cases that are “out-of-area;” and
- cases coded as pending “other.”
12.4.3 Problems Encountered During the Week

During your call, give your FS details about problems you have encountered and any special circumstances you expect. Your FS will discuss strategies for dealing with potential problems or cases. These problems could include refusals, language barriers, locating problems, transferred cases, and so on.

12.4.4 Production in Relation to Project Goals

You must have a clear picture of the scope of your assignment, project deadlines, and production goals in order to properly plan your workload. Your FS will help you establish production goals that satisfy your needs and meet necessary project deadlines. It is beneficial to both you as an interviewer and to RTI if you are realistic and straightforward about your goals and expectations when discussing your planned workload with your supervisor.

12.4.5 Plan for Next Week’s Workload

Share with your FS your plan for the upcoming week’s workload. He/she will help you refine your plan to meet individual and project goals. When planning the next week’s workload, you and your supervisor should discuss the location of your cases, anticipated need for an escort, anticipated travel problems, unusual expenses you might incur, or anticipated scheduling problems.

12.4.6 Problems with Quality of Work

You can also discuss with your supervisor any questions or doubts you have concerning your understanding of project materials, use of the computer, the content or administration procedures for the LA FANS-2 questionnaires, use of materials or equipment for completing the health measures, or any project procedures. In turn, your supervisor will bring to your attention any problems identified while reviewing or verifying your work.

12.4.7 Adherence to Study Procedures

In addition to discussions about work quality, your supervisor will review any changes in study procedures as well as your compliance with established data collection and administrative procedures. These discussions may focus on timely submission of ePT&E reports, completeness of case documents and other materials, retrieval of missing materials, and timely submission of completed case folders.
12.5 Reporting Summary

This section summarizes the reporting requirements for L.A. FANS-2. If any point is unclear, discuss it with your supervisor.

1. **Daily computer transmissions (on days you work).**
   - Transmit completed interview data the *night* the interview is completed.
   - Transmit updated result codes.
   - Check email for new messages

2. **Daily documenting.**
   - Complete ePT&E report entries for the day on working copies.
   - Update event codes on the ROC.
   - Enter event codes into the CMS.

3. **Weekly computer transmissions.**
   - Submit ePT&E reports by midnight on Sundays.

4. **Weekly telephone conference with your supervisor to report and discuss:**
   - status of assigned cases;
   - non-interview/refusal cases;
   - problems encountered during the week;
   - production in relation to project goals;
   - feedback on work completed;
   - plan for next week’s workload;
   - equipment problems;
   - requests for supplies or incentive advances if necessary; and
   - ePT&E report data (your supervisor will ask you to report the number of hours worked, miles driven, and expenses incurred each week; have a working copy of your most recently completed ePT&E report available during the call).
5. **Weekly work requirements.**
   - Work case assignment according to established weekly production goals.
   - Complete locating, contacting, screening, and interview activities on days, evenings, and weekends (focusing heavily on Saturdays and Sunday afternoons).

6. **Mail shipments.**
   - Each week, submit your completed Headway Expense report, if required, (and include reimbursement forms such as interview payment receipts, telephone logs, escort forms, and other receipts) to your supervisor.
   - Each week, ship finalized case folders to your field supervisor.
13. QUALITY CONTROL

13.1 Introduction

Quality control is important at all stages of the data collection process. One aspect overwhelmingly affects the quality of the data: you, the data collector. Your ability, preparedness, and willingness to properly perform duties are the most important components of the overall quality control process. This chapter discusses the quality control procedures in place to help you do your best job.

13.2 Practice, Monitoring, and Evaluation at Training

During the L.A. FANS-2 Field Interviewer training session, you will receive all necessary information to properly perform your job as an interviewer on the study. This includes detailed training on conducting the screening, rostering, interviews, assessments, and health measures, as well as training on all administrative procedures. An essential part of training involves your hands-on practice using materials and equipment, conducting the screening, completing the roster, conducting interviews, administering assessments, and preparing forms and documentation. During training, you will have the opportunity to practice every step involved in being an effective interviewer for L.A. FANS-2.

You will be trained in the proper use of the health measures equipment and the procedures for conducting the health measures. Volunteer respondents, including children, will provide a realistic chance to practice techniques at training.

To make sure you are learning what you need during the training program, RTI staff will monitor your performance throughout the session. They will watch while you conduct practice cases, observe as you fill out your time sheet, and so forth. During this time, take advantage of the opportunity to ask any questions you might have. The purpose of monitoring is two-fold: 1) project staff can evaluate your preparedness; and 2) you have the chance to make sure you are doing everything properly. You will be evaluated on the following specific items:

- explaining the study and its purpose
- familiarity with informational materials
- completing the screening process
- rostering the household
- explaining and obtaining informed consent and assent
- setting up the computer equipment
• administering L.A. FANS-2 computerized interviews
• administering Woodcock-Johnson assessments
• reading questions, maintaining eye contact, pacing, probing, and other general presentation skills
• following instructions on the computer screen
• resolving inconsistent information
• using function keys (such as entering comments and keying “don’t know”)
• performing health measures
• providing instructions for saliva collection
• proper completion of the end of the interview tasks
• contacting EMSI to schedule an appointment for a Health Technician to visit the household
• recording administrative data
• transmitting information to RTI

This evaluation helps project staff determine how well they have done their job of training and assess how well you have done your job of listening and practicing. Evening study halls are available for those who want additional help during training and will be required some evenings for demonstrating proficiency. Trainers and supervisors can require that certain trainees attend these study halls. Any interviewer who cannot demonstrate the abilities listed above will be required to participate in additional practice sessions with his/her supervisor.

13.3 Proficiency

In addition to overall mastery of all study procedures, all interviewers for L.A. FANS-2 must demonstrate proficiency on the following aspects of the study before they can begin fieldwork:

• Woodcock-Johnson Assessments
• Event History Calendar (EHC) administration
• Health Measures

RTI project staff will evaluate staff proficiency during training. Trainees who demonstrate proficiency in these procedures will receive their assignments and may begin performing fieldwork.
13.4 Evaluation of Training

At the end of the training session, you will be asked to complete an evaluation form to assess the training program and materials, the trainers, and the training facilities. Your feedback on the effectiveness of the interviewer training program is an important part of letting us know whether the training program was thorough and effective. Your evaluation will be used to improve preparations for additional training sessions which may be held during the course of fieldwork.

13.5 Field Edits

Editing case materials is an important aspect of maintaining data quality throughout the field period. The edits the interviewer and supervisor perform in the field are crucial in identifying missing or incorrectly completed materials.

13.5.1 Case Folder Edits

Before submitting case documentation, review the Case Folder carefully and ensure all required forms are included. RTI will provide tools such as a checklist and a transmittal form to assist you in submitting the case materials. A case is complete when all interviews and assessments for each selected person associated with a household ID have been completed.

13.5.2 Screening Edits

Before leaving the household for the final time, check to be sure you have all respondent-supplied information on the Screening Form. If there are any omissions or incomplete items, ask the respondent for the missing information. Before mailing this form, be sure all the FI-supplied information in the back of the Screening Form has been completed. Also be certain the final result code recorded in the ROC portion of the Screening Form has been entered into the CMS on your computer. Once received at RTI, all screening data will be reviewed. Feedback on any problems noted during the process is given to your FS to share with you.

13.5.3 Supervisor Edits

Each week, send all completed case folders via Federal Express to your supervisor. In the first two weeks of fieldwork, submit cases as they are completed so your supervisor can review them and give you immediate feedback. Your supervisor will let you know when you can start submitting completed case folders on a weekly basis.
13.6 Rostering and Interviewing Edits

Most information you collect for L.A. FANS-2 is entered directly into your laptop computer, so the traditional editing of completed hard-copy is eliminated. Instead, the computer edits as you conduct the interview, such as checking skip patterns for missing data. Timing is checked to identify very short and very long interviews. All CAI interview files transmitted to RTI are reviewed and evaluated to ensure you are administering the study correctly. Again, your supervisor will share feedback with you.

13.7 Woodcock-Johnson Assessments Edits

The computer administration of the Woodcock-Johnson assessments will eliminate all paper documents for these assessments. Once transmitted, RTI will perform in-house electronic edits to determine if the assessments have been administered properly.

13.8 Field Observations

After completing training, all L.A. FANS-2 interviewers will be observed in the field. Your supervisor may also want to observe your work at other times during the data collection period (if so, your supervisor will notify you). When accompanied by an observer, introduce the observer when you arrive at the household and explain that he/she wants to determine how well the data collection process works.

13.9 Verification

To provide continuing feedback to you and to our client on the quality and accuracy of cases, your work is subject to an intense verification process. RTI is contractually bound to verify the quality and accuracy of field work conducted on L.A. FANS-2. We must be certain that all procedures are being implemented properly. Inaccurate or substandard work is very costly to the project, so we must determine if and why it is occurring and take corrective actions. **Falsified work is unacceptable under any circumstances, and the discovery of any falsified work will result in immediate termination from the project and from any future work with RTI.** All finalized cases are subject to verification, even if they did not result in selection for an interview.
13.9.1 Screening Verifications

Verification contacts are made with a random sample of all finalized screenings reported as:

- vacant
- not a dwelling unit
- group quarters unit
- household not eligible for study
- language barrier other than Spanish
- resident(s) physically/mentally incapable

As discussed previously, enter the contact person’s first name and telephone number for verification purposes. When asking for this information, emphasize it is for verification purposes only; we want to verify the quality of our work, not their information.

13.9.2 Interview / Assessment Verifications

A random sample of each interviewer’s finalized cases will be verified with the respondent. For under-age respondents, interview and assessments verifications will be conducted with a parent/guardian.

13.9.3 The Verification Process

An RTI staff member will perform screening and interview verifications by telephone, mail, or in-person. During the verification, it is inevitable that some discrepancies will arise between a respondent’s and the interviewer’s account of the same situation. Resolution procedures are then implemented to attempt to settle the issue. Information on any unresolved discrepancies will be given to your supervisor to determine the next steps to take.

The verification process is a tool for the L.A. FANS-2 project staff to monitor not only your performance as an interviewer but also their performance as project trainers and managers. The information gathered helps the L.A. FANS-2 staff ensure that the data being collected are of the highest possible quality. You will receive prompt feedback on your performance and will be notified immediately should any problems arise.
13.9.4 Weekly Conference with Supervisor

A weekly conference with your supervisor is another part of the on-going attention to the quality of data collection. You and your supervisor will agree on a day and time for your weekly report. Your supervisor will keep you informed on any changes in study protocols, feedback from in-house edits, and feedback from the supervisor’s field edits.

You will report the status of all pending cases and will have the opportunity to ask questions and to discuss any field issues that came up during the week. Your weekly report to your supervisor also allows RTI to monitor the project and make decisions about data collection.

13.10 Overall Data Quality Procedures

Collecting and processing quality data is an on-going goal for all RTI projects. In this chapter we have mentioned some of the procedures that are already in place to achieve this goal for L.A. FANS-2. Throughout the field period other procedures may be implemented as needed. Your supervisor will keep you informed as this occurs.
14. ADMINISTRATIVE PROCEDURES

The information in this chapter is proprietary to RTI and has been suppressed.
15. OVERVIEW OF THE ePT&E System

The information in this chapter is proprietary to RTI and has been suppressed.
APPENDIX A

List of Forms, Materials and Supplies
L.A. FANS SUPPLIES NEEDED FOR FIELD WORK

• Your RTI photo ID badge
• Extra copies of the lead letter
• Letter of Authorization in its plastic sleeve
• Copy of the Federal Confidentiality Certificate
• Q&A Brochures (English and Spanish)
• Blank Screening Forms (and clipboard, if desired)
• Extra Adult consent forms
• Parental Consent forms
• Showcard Booklet
• Woodcock-Johnson Easel
• Tablet for scrap paper (for W-J Assessments)
• Stickers for children
• Cash for incentive payments
• Incentive Receipt forms
• Pens, pencils
• IBM computer and accessories including power cords and carrying case

ADDITIONAL MATERIALS FOR FIELD REFERENCE/USE

• Your Field Interviewer Manual
• Your FI Computer Manual
• Job Aid Booklet
• Set of L.A. FANS Maps (laminated)
• “Sorry I Missed You” door hanger
• “Sorry I Missed You, We Had an Appointment” door hanger
HEALTH MEASURE MATERIALS

Roller bag, neatly stocked with:

- Automatic digital blood pressure device
- Blood pressure cuffs in five sizes: child, small adult, medium adult, large adult, and extra large adult
- Fiberglass measuring tape
- Folding ruler, carpenter square and post-its
- Digital scales
- EasyOne Diagnostic Spirometer
  - 2 AA batteries.
  - A supply of single-use, disposable Spirettes.
  - Disposable nose clips.
  - Alcohol swabs to wipe equipment.
- Saliva Collection Kits
  - A zip-loc bag with a label on which the FI will write the child’s name. Each bag will contain three capped collection tubes. The collection tubes will contain sponge-pops.
  - A waterproof pen for the respondent to record the date and time of collection on special labels on the tubes.
  - Packing supplies that include a mailer and a prepaid, preaddressed FedEx label.
  - Instructions for collecting the saliva samples.
- Dried Blood Sample Fact Sheets

AT-HOME MATERIALS

- Case folders
- Black modem connector cord for laptop computer
- Pre-printed Federal Express airbills
- Pens, pencils, paper
- Administrative Forms, including:
  - Working copies of PT&Es
  - Receipts for Escort Services
  - Transmittal Forms
- Federal Express envelopes for weekly mailings to FS
APPENDIX B

Result Codes
## PENDING SCREENING CODES

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>101</td>
<td><strong>NO ACTION TAKEN</strong> A case is new and has had no work done on it.</td>
</tr>
<tr>
<td>110</td>
<td><strong>CT - NO ACTION TAKEN</strong> A complete turnover case is new and has had no work done on it.</td>
</tr>
<tr>
<td>119</td>
<td><strong>ACCESS DENIED</strong> Denied access to a building or complex</td>
</tr>
<tr>
<td>120</td>
<td><strong>NO ONE HOME</strong> No one is at the address.</td>
</tr>
<tr>
<td>121</td>
<td><strong>SR NOT HOME</strong> Someone is at the DU but that person is not an eligible screening respondent</td>
</tr>
<tr>
<td>122</td>
<td><strong>SR UNAVAILABLE</strong> An eligible screening respondent is home but is not available</td>
</tr>
<tr>
<td>130</td>
<td><strong>APPOINTMENT MADE FOR SCREENING</strong> You have spoken with a screening respondent and have set a time to conduct the screening</td>
</tr>
<tr>
<td>135</td>
<td><strong>APPOINTMENT BROKEN</strong> This code cannot be assigned by FIs.</td>
</tr>
<tr>
<td>140</td>
<td><strong>VACANT</strong> A neighbor, landlord, or other informant indicates the DU is vacant.</td>
</tr>
<tr>
<td>141</td>
<td><strong>GQU LISTED AS A DU</strong> The DU is really a Group Quarters (GQU) where 5 or more unrelated individuals live at the same address.</td>
</tr>
<tr>
<td>142</td>
<td><strong>NOT A DU</strong> The DU is not a residence.</td>
</tr>
<tr>
<td>150</td>
<td><strong>CID_CT NOT NEEDED</strong> Special code used to indicate within spawned CID_CT case (for Panel Complete Turnovers) that screening at the complete turnover address is not required.</td>
</tr>
<tr>
<td>160</td>
<td><strong>SCREENING REFUSAL</strong> The screening respondent you are talking with refuses to allow you to proceed with the screening process.</td>
</tr>
<tr>
<td>170</td>
<td><strong>LANGUAGE BARRIER-Spanish</strong> The screening respondent speaks Spanish and does not speak English well enough to complete the screening.</td>
</tr>
<tr>
<td>171</td>
<td><strong>LANGUAGE BARRIER-OTHER (SPECIFY)</strong> The screening respondent speaks a language other than English or Spanish and does not speak English well enough to complete screening.</td>
</tr>
<tr>
<td>175</td>
<td><strong>PHYSICALLY/MENTALLY INCAPABLE</strong> No one at the unit is able to respond meaningfully to the screening questions.</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>180</td>
<td>UNABLE TO LOCATE DU You are unable to determine the exact location of the DU.</td>
</tr>
<tr>
<td>189</td>
<td>OTHER (SPECIFY) The situation you encounter does not fit into any of the above categories.</td>
</tr>
<tr>
<td>190</td>
<td>SCREENING COMPLETE WITH COMPLETE TURNOVER HOUSEHOLD NOT ELIGIBLE Code you will enter for spawned CID_CT to indicate you completed the screening at the complete turnover household but the household was not selected for the study.</td>
</tr>
<tr>
<td>191</td>
<td>SCREENING COMPLETE WITH COMPLETE TURNOVER ELIGIBLE HOUSEHOLD WITH CHILDREN Code you will enter for spawned CID_CT to indicate you completed the screening at the complete turnover household and the household with children is eligible for the study.</td>
</tr>
<tr>
<td>192</td>
<td>SCREENING COMPLETE WITH COMPLETE TURNOVER ELIGIBLE HOUSEHOLD WITHOUT CHILDREN Code you will enter for spawned CID_CT to indicate you completed the screening at the complete turnover household and the household without children is eligible for the study.</td>
</tr>
</tbody>
</table>
### FINAL SCREENING CODES

#### Screening Not Obtained

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>219</td>
<td>ACCESS DENIED TO BUILDING/COMPLEX</td>
<td>You are unequivocally denied access to a building or complex by a property manager or other person in authority</td>
</tr>
<tr>
<td>220</td>
<td>NO ONE AT DU AFTER REPEATED VISITS</td>
<td>If repeated visits at different times of the day and days of the week have failed to find anyone at home</td>
</tr>
<tr>
<td>222</td>
<td>SR UNAVAILABLE AFTER REPEATED VISITS</td>
<td>If repeated visits at different times of the day and days of week have failed to find an eligible SR at home</td>
</tr>
<tr>
<td>240</td>
<td>VACANT</td>
<td>Assign this code only after verifying with a neighbor, landlord, or real estate agent that the DU is vacant.</td>
</tr>
<tr>
<td>241</td>
<td>GQU LISTED AS A DU</td>
<td>A GQU is a dwelling unit with 5 or more unrelated individuals living at the same address.</td>
</tr>
<tr>
<td>244</td>
<td>NOT A DU</td>
<td>Assign this code after verifying with a neighbor, landlord, or real estate agent that the unit is not a residence.</td>
</tr>
<tr>
<td>250</td>
<td>CID_CT NOT NEEDED</td>
<td>Special final code used to indicate within spawned CID_CT case (for Panel Complete Turnovers) that screening at the complete turnover address is not required.</td>
</tr>
<tr>
<td>260</td>
<td>SCREENING REFUSAL</td>
<td>If all attempts to convert the refusal have been unsuccessful</td>
</tr>
<tr>
<td>270</td>
<td>LANGUAGE BARRIER-SPANISH</td>
<td>This code should rarely be used. Case should be transferred to an RTI-Certified bilingual FI</td>
</tr>
<tr>
<td>271</td>
<td>LANGUAGE BARRIER-OTHER</td>
<td>If the screening respondent speaks a language other than English or Spanish and does not speak English well enough to complete screening</td>
</tr>
<tr>
<td>275</td>
<td>PHYSICALLY/MENTALLY INCAPABLE</td>
<td>We expect this code to seldom be used. Assign if no one at the DU is able to respond meaningfully to the screening questions</td>
</tr>
<tr>
<td>280</td>
<td>UNABLE TO LOCATE DU</td>
<td>If, after multiple attempts, you are unable to locate the DU</td>
</tr>
<tr>
<td>289</td>
<td>OTHER (SPECIFY)</td>
<td>Use this code for all cases that do not fit any of the above categories.</td>
</tr>
</tbody>
</table>
## FINAL SCREENING CODES (continued)

### For New Entrant Cases:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>290</td>
<td>HOUSEHOLD NOT ELIGIBLE</td>
<td>Automatically assigned if you indicate in the CID that you completed the screening but the household was not selected for the study</td>
</tr>
<tr>
<td>291</td>
<td>ELIGIBLE HOUSEHOLD WITH CHILDREN</td>
<td>Automatically assigned if you indicate in the CID that you completed screening and children live in the household</td>
</tr>
<tr>
<td>292</td>
<td>ELIGIBLE HOUSEHOLD WITHOUT CHILDREN</td>
<td>Automatically assigned if you indicate in the CID that you completed screening and children do not live in the household, but the household “without” children is eligible for the study</td>
</tr>
</tbody>
</table>

### For Panel Cases:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>293</td>
<td>PANEL</td>
<td>If you indicate in the CID that one or more panel members are still living at the Wave 1 Panel address.</td>
</tr>
<tr>
<td>294</td>
<td>PANEL – WAVE 1 ADDRESS STATUS UNKNOWN</td>
<td>If you indicate in the CID that the status of Panel members still living at the Wave 1 Panel address is unknown.</td>
</tr>
<tr>
<td>295</td>
<td>PANEL – COMPLETE TURNOVER HOUSEHOLD</td>
<td>If you indicate in the CID that the Wave 1 address is a complete turnover dwelling (i.e., no members of the Wave 1 roster still live at the address).</td>
</tr>
</tbody>
</table>

### For Complete Turnover Cases:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>290</td>
<td>HOUSEHOLD NOT ELIGIBLE</td>
<td>Assigned by supervisor in the spawned CID_CT when you complete the screening at the complete turnover address but the household was not selected for the study</td>
</tr>
<tr>
<td>291</td>
<td>ELIGIBLE HOUSEHOLD WITH CHILDREN</td>
<td>Assigned by supervisor in the spawned CID_CT when you completed screening at the complete turnover address and the household with children is eligible for the study.</td>
</tr>
<tr>
<td>292</td>
<td>ELIGIBLE HOUSEHOLD WITHOUT CHILDREN</td>
<td>Assigned by supervisor in the spawned CID_CT when you complete screening at the complete turnover address and the household without children is eligible for the study</td>
</tr>
</tbody>
</table>
### PENDING INTERVIEW CODES

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>301</td>
<td><strong>NO ACTION TAKEN</strong> An interview case is newly assigned and has no work done on it.</td>
</tr>
<tr>
<td>319</td>
<td><strong>ACCESS DENIED TO BUILDING/COMPLEX</strong> You are denied access to a building or complex by a property manager or other person in authority.</td>
</tr>
<tr>
<td>320</td>
<td><strong>NO ONE HOME</strong> No one is at the DU.</td>
</tr>
<tr>
<td>321</td>
<td><strong>RESPONDENT NOT AT HOME</strong> Someone is at the DU but not the selected interview respondent(s).</td>
</tr>
<tr>
<td>322</td>
<td><strong>RESPONDENT NOT AVAILABLE</strong> The selected interview respondent(s) is home but is unable to do the interview at that time.</td>
</tr>
<tr>
<td>330</td>
<td><strong>APPOINTMENT FOR INTERVIEW</strong> You have spoken with the respondent and have set a time to conduct the interview.</td>
</tr>
<tr>
<td>335</td>
<td><strong>APPOINTMENT BROKEN</strong> This code cannot be assigned by FIs.</td>
</tr>
<tr>
<td>336</td>
<td><strong>BREAKOFF– NO APPOINTMENT</strong> This code cannot be assigned by FIs.</td>
</tr>
<tr>
<td>350</td>
<td><strong>CASE NOT NEEDED</strong> This is a special code you will use primarily to code out unneeded roster cases created from the CID.</td>
</tr>
<tr>
<td>359</td>
<td><strong>RESPONDENT IS DECEASED</strong> You determine that a selected participant is now deceased.</td>
</tr>
<tr>
<td>360</td>
<td><strong>REFUSAL BY RESPONDENT</strong> The respondent refuses to let you start the interviewing process.</td>
</tr>
<tr>
<td>361</td>
<td><strong>TEMPORARY REFUSAL BY PARENT/GUARDIAN</strong> The parent/guardian refuses to allow you to interview the selected youth(s).</td>
</tr>
<tr>
<td>370</td>
<td><strong>LANGUAGE BARRIER-SPANISH</strong> The respondent speaks Spanish and does not speak English well enough to complete the interview.</td>
</tr>
<tr>
<td>371</td>
<td><strong>LANGUAGE BARRIER-OTHER</strong> The respondent speaks a language other than English or Spanish and does not speak English well enough to complete the interview.</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>------</td>
<td>-------------</td>
</tr>
<tr>
<td>375</td>
<td>PHYSICALLY/ MENTALLY INCAPABLE</td>
</tr>
<tr>
<td>377</td>
<td>RESPONDENT INCARCERATED</td>
</tr>
<tr>
<td>378</td>
<td>RESPONDENT INSTITUTIONALIZED</td>
</tr>
<tr>
<td>380</td>
<td>RESPONDENT UNLOCATABLE</td>
</tr>
<tr>
<td>381</td>
<td>RESPONDENT MOVED OUT OF INTERVIEWING AREA</td>
</tr>
<tr>
<td>382</td>
<td>RESPONDENT MOVED OUT OF COUNTRY</td>
</tr>
<tr>
<td>383</td>
<td>RESPONDENT UNLOCATABLE SENT TO FIELD TRACKING SPECIALIST</td>
</tr>
<tr>
<td>384</td>
<td>RESPONDENT UNLOCATABLE SENT TO RTI TRACING UNIT</td>
</tr>
<tr>
<td>385</td>
<td>INFORMATION SENT BACK TO FIELD FROM RTI TRACING</td>
</tr>
<tr>
<td>389</td>
<td>OTHER (SPECIFY)</td>
</tr>
</tbody>
</table>

A respondent is unable to meaningfully answer the questions.

The respondent is unavailable to complete the interview because he/she is in jail or prison.

The respondent is unavailable to complete the interview because he/she is institutionalized (e.g., in the hospital).

The whereabouts of the respondent is unknown.

Used to indicate the respondent has moved out of the interviewing area.

Used to indicate the respondent has moved out of the country.

Used to indicate the case has been transferred to a tracking specialist.

Used to indicate case information has been sent to the RTI tracing unit to attempt to locate.

Used to indicate that RTI tracing unit activities are completed for the case.

The situation you encounter does not fit into any of the categories above.
# FINAL INTERVIEW CODES

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>419</td>
<td>ACCESS DENIED TO BUILDING/COMPLEX You are unequivocally denied access to a building or complex by a property manager or other person in authority</td>
</tr>
<tr>
<td>420</td>
<td>NO ONE AT HOME AFTER REPEATED VISITS Use if your repeated attempts at different times of the day and days of the week fail</td>
</tr>
<tr>
<td>422</td>
<td>RESPONDENT NOT AVAILABLE We hope that with persistence this code will be used rarely.</td>
</tr>
<tr>
<td>450</td>
<td>CASE NOT NEEDED This is a special code you will use primarily to code out unneeded roster cases created from the CID.</td>
</tr>
<tr>
<td>455</td>
<td>DATE ENTERED IN ERROR This is a special code you will be used (we hope rarely) to indicate that data was incorrectly entered under an improper ID.</td>
</tr>
<tr>
<td>458</td>
<td>OTHER NON-INTERVIEW – INELIGIBLE This code cannot be assigned by FIs.</td>
</tr>
<tr>
<td>459</td>
<td>RESPONDENT DECEASED Use this code if the respondent is deceased</td>
</tr>
<tr>
<td>460</td>
<td>FINAL REFUSAL BY RESPONDENT Used if all attempts to convert an adult or youth refusal are unsuccessful</td>
</tr>
<tr>
<td>461</td>
<td>FINAL PARENTAL REFUSAL FOR YOUTH Used if all attempts to persuade the parent or guardian to allow you to interview the youth are unsuccessful</td>
</tr>
<tr>
<td>470</td>
<td>LANGUAGE BARRIER-Spanish Use this code if the case cannot be completed because of a Spanish language barrier and no RTI-Certified bilingual interviewer is available to complete the case.</td>
</tr>
<tr>
<td>471</td>
<td>LANGUAGE BARRIER-OTHER Use this code for any interviews that cannot be completed due to a language barrier other than Spanish.</td>
</tr>
<tr>
<td>475</td>
<td>PHYSICALLY/MENTALLY INCAPABLE (SPECIFY) Used if the respondent is physically or mentally unable to respond meaningfully to the interview questions</td>
</tr>
<tr>
<td>477</td>
<td>RESPONDENT INCARCERATED Used if the respondent is in jail or prison and will not be released in the near future</td>
</tr>
</tbody>
</table>
## FINAL INTERVIEW CODES (continued)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>478</td>
<td>RESPONDENT INSTITUTIONALIZED</td>
</tr>
<tr>
<td>480</td>
<td>RESPONDENT UNLOCATABLE</td>
</tr>
<tr>
<td>481</td>
<td>RESPONDENT MOVED OUT OF INTERVIEWING AREA</td>
</tr>
<tr>
<td>482</td>
<td>RESPONDENT MOVED OUT OF COUNTRY</td>
</tr>
<tr>
<td>489</td>
<td>OTHER (SPECIFY)</td>
</tr>
<tr>
<td>490</td>
<td>PARTIAL INTERVIEW</td>
</tr>
<tr>
<td>491</td>
<td>COMPLETE</td>
</tr>
</tbody>
</table>
APPENDIX C

REFUSAL LETTERS
Screening – Unable to Contact

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently, one of our representatives attempted to contact someone at your household about participating in the Los Angeles Family and Neighborhood Survey. So far we have been unable to speak with anyone in your household, but your participation in this study is important or we would not continue to try to reach you.

Some people are cautious about speaking to a stranger at the door, and that is understandable. We are not soliciting or selling anything—we have just a few questions to ask that will take just a few minutes. After that, if your household is eligible, someone in your household will be asked to answer some additional questions.

Be assured that we combine your answers with the answers of other participants and report them only as overall numbers. Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we use a statistical procedure to randomly select a certain number of households for participation, and as a selected respondent, you represent thousands of other people in the county. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, including any government agency. And the option to refuse to answer any question is always available.

L.A. FANS is a major source of data about Los Angeles neighborhoods and families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

I hope that after you consider these factors and read the enclosed brochure, you will make the time to participate in this study - it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be wearing a photo identification badge and can answer any questions you may have about the study.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
Screening – Too invasive

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently, one of our field interviewers came to your home and asked you to participate in the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you expressed some concern about participating in a study sponsored by the federal government. We understand that you are concerned about being asked questions about this subject and want you to know that if you agree to participate, the option to refuse to answer any question is always available.

The initial questions will take only a few minutes. Be assured that we combine your answers with the answers of other participants and report them only as overall numbers. Although we are talking with people all over L.A. County, we cannot interview everyone. Instead, we use a statistical procedure to randomly select a certain number of households for participation, and as a selected respondent, you represent thousands of other people in the county. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, including any government agency. And the option to refuse to answer any question is always available.

L.A. FANS is a major source of data about Los Angeles neighborhoods and families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

I hope that after you consider these factors and read the enclosed brochure, you will reconsider your decision and agree to participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
Screening – No Time

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently, one of our interviewers contacted someone in your household about participating in the Los Angeles Family and Neighborhood Survey (L.A. FANS). We are sorry we called on you at an inconvenient time, and appreciate that in modern life, time is a precious commodity. However, we want you to know we very much need you to represent others like you who lead active, busy lives. The initial questions will take just a few minutes. Then, if your household is eligible for the study, someone in your household will be asked to answer some additional questions.

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating, you will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

Although we are talking with people all over L.A. County, we cannot talk to everyone. Instead we used a statistical procedure to randomly select a certain number of households for participation, and as a selected respondent, you represent thousands of other people in the county. The information you provide will be combined with the answers of other participants and reported only as statistics. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, and the option to refuse to answer any question is always available.

I hope that after you consider these factors and read the enclosed brochure, you will make the time to participate in this study - it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
Screening – No Time

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently, one of our interviewers contacted someone in your household about participating in the Los Angeles Family and Neighborhood Survey (L.A. FANS). We are sorry we called on you at an inconvenient time, and appreciate that in modern life, time is a precious commodity. However, we want you to know we very much need you to represent others like you who lead active, busy lives. The initial questions will take just a few minutes. Then, if your household is eligible for the study, someone in your household will be asked to answer some additional questions.

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating, you will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

Although we are talking with people all over L.A. County, we cannot talk to everyone. Instead we used a statistical procedure to randomly select a certain number of households for participation, and as a selected respondent, you represent thousands of other people in the county. The information you provide will be combined with the answers of other participants and reported only as statistics. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, and the option to refuse to answer any question is always available.

I hope that after you consider these factors and read the enclosed brochure, you will make the time to participate in this study - it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
NE Interview – Gatekeeper Issue

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently one of our interviewers came to your home and asked a person in your household to take part in the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you were unwilling to permit this, and I am writing in hopes of changing your mind.

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, your household will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we used a statistical procedure to randomly select a certain number of households for participation, and as a selected respondent, you represent thousands of other people in the county. The information provided by members of your household will be combined with the answers of other participants and reported only as statistics. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, and the option to refuse to answer any question is always available.

I hope that after you consider these factors and read the enclosed brochure, you will reconsider your household's decision and agree to participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your household's participation at a convenient time.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
NE Interview – No Time

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently, one of our field interviewers came to your home and asked you to participate in the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you expressed some hesitation about spending time to do the interview. We appreciate that your time is a precious commodity but want you to know we very much need you to represent others like you who lead active, busy lives.

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we used a statistical procedure to randomly select a certain number of households for participation, and as a selected respondent, you represent thousands of other people in the county. The information you provide will be combined with the answers of other participants and reported only as statistics. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, and the option to refuse to answer any question is always available.

I hope that after you consider these factors and read the enclosed brochure, you will make the time to participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
NE Interview – Parent Refusal for Child

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently one of our interviewers came to your home and asked permission for your child to take part in the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you expressed some reluctance about allowing this.

While we are interested in what adults think of their neighborhood, we are also interested in the experiences and opinions of young people growing up in Los Angeles. Answers are never associated with any individual. They are added to the responses of all other people and presented only as statistics, and the survey is set up so that your child records most of [HIS/HER] own answers on a computer. We need responses from everyone selected to get a full picture of Los Angeles County—your child's answers represent those of thousands of other youths. We have selected a limited number of people for this study, and the participation of each and every person is important.

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By allowing your child to participate in the survey, you will make a direct contribution to these efforts.

I hope that after you consider these factors and read the enclosed brochure, you will agree to let your child participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your child's participation at a time most convenient for [HIM/HER].

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
NE Interview – Too Invasive

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently, one of our field interviewers came to your home and asked you to participate in the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you expressed some concern about participating in a study sponsored by the federal government. We understand that you are concerned about being asked questions about this subject and want you to know that if you agree to participate, the option to refuse to answer any question is always available.

Be assured that we combine your answers with the answers of other participants and report them only as overall numbers. Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we use a statistical procedure to randomly select a certain number of households for participation, and as a selected respondent, you represent thousands of other people in the county. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, including any government agency. And the option to refuse to answer any question is always available.

L.A. FANS is a major source of data about Los Angeles neighborhoods and families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

I hope that after you consider these factors and read the enclosed brochure, you will reconsider your decision and agree to participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
NE Interview – Unable to Contact

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently one of our interviewers came to your home and asked you to participate in the Los Angeles Family and Neighborhood Survey (L.A. FANS). You were not available to complete the interview at that time, and have been away or unavailable each time the interviewer has returned since then. **Your participation in this study is very important, or we would not continue to try to reach you.**

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts. **You could make a difference in how tax dollars are spent in the future.**

Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we used a statistical procedure to randomly select a certain number of households for participation, and as a selected respondent, you represent thousands of other people in the county. The information you provide will be combined with the answers of other participants and reported only as statistics. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, and the option to refuse to answer any question is always available.

I hope that after you consider these factors and read the enclosed brochure, you will make the time to participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have **any** questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
NE Interview - Uncooperative

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently one of our interviewers came to your home and asked you to take part in the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you were not interested in participating.

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we use a statistical procedure to randomly select a certain number of households for participation, and as a selected respondent, you represent thousands of other people in the county. The information you provide will be combined with the answers of other participants and reported only as statistics. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, and the option to refuse to answer any question is always available.

I hope that after you consider these factors and read the enclosed brochure, you will make the time to participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
Dear [NAME OF RESIDENT]:

Recently, one of our interviewers came to your home and asked you to participate in Wave 2 of the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you expressed some concern about the legitimacy of the study and whether or not your answers will be kept private.

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts.

The information you provide will be combined with the answers of other participants and reported only as statistics. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, and the option to refuse to answer any question is always available. Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we used a statistical procedure to randomly select a certain number of households for participation. As a selected respondent from the first wave of L.A. FANS approximately 6 years ago, you represent thousands of other people in the county. We cannot replace you!

I hope that after you consider these factors and read the enclosed brochure, you will make the time to participate in this study again—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
Panel Interview – Gatekeeper issue

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently one of our interviewers came to your home and asked a person in your household to take part in Wave 2 of the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you were unwilling to permit this, and I am writing in hopes of changing your mind.

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we used a statistical procedure to randomly select a certain number of households for participation, and as a selected respondent from the first wave of L.A. FANS approximately 6 years ago, your household member represents thousands of other people in the county. The information provided by your household will be combined with the answers of other participants and reported only as statistics. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, and the option to refuse to answer any question is always available.

I hope that after you consider these factors and read the enclosed brochure, you will reconsider your household's decision and agree to participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your household's participation at a convenient time.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
Panel Interview – No time

[DATE]

[NAME OF RESIDENT]
ADDRESS
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently, one of our field interviewers came to your home and asked you to participate in Wave 2 of the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you expressed some hesitation about spending time to do the interview. We appreciate that your time is a precious commodity but want you to know we very much need you to represent others like you who lead active, busy lives.

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we used a statistical procedure to randomly select a certain number of households for participation. As selected respondent from the first wave of L.A. FANS approximately 6 years ago, you represent thousands of other people in the county. We cannot replace you! The information you provide will be combined with the answers of other participants and reported only as statistics. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, and the option to refuse to answer any question is always available.

I hope that after you consider these factors and read the enclosed brochure, you will make the time to participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
Panel Interview – Parent Refusal for Child

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently one of our interviewers came to your home and asked permission for your child to take part in Wave 2 of the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you expressed some reluctance about allowing this.

While we are interested in what adults think of their neighborhood, we are also interested in the experiences and opinions of young people growing up in Los Angeles. Answers are never associated with any individual. They are added to the responses of all other people and presented only as statistics, and the survey is set up so that your child records most of [HIS/HER] own answers on a computer. We need responses from everyone selected to get a full picture of Los Angeles County—your child's answers represent those of thousands of other youths. We have selected a limited number of people for this study, and as a selected respondent from the first wave of L.A. FANS approximately 6 years ago, your child represents thousands of other people. We cannot replace anyone, the participation of each and every person is important.

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By allowing your child to participate in the survey, you will make a direct contribution to these efforts.

I hope that after you consider these factors and read the enclosed brochure, you will agree to let your child participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your child's participation at a time most convenient for [HIM/HER].

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
Panel Interview – Too Invasive

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently, one of our field interviewers came to your home and asked you to participate in Wave 2 of the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you expressed some concern about participating in a study sponsored by the federal government. We understand that you are concerned about being asked questions about this subject and want you to know that if you agree to participate, the option to refuse to answer any question is always available.

Be assured that we combine your answers with the answers of other participants and report them only as overall numbers. Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we use a statistical procedure to randomly select a certain number of households for participation, and as a selected respondent from the first wave of L.A. FANS approximately 6 years ago, you represent thousands of other people in the county. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, including any government agency. And the option to refuse to answer any question is always available.

L.A. FANS is a major source of data about Los Angeles neighborhoods and families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

I hope that after you consider these factors and read the enclosed brochure, you will reconsider your decision and agree to participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
Panel Interview – Unable to Contact

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently one of our interviewers came to your home and asked you to participate in Wave 2 of the Los Angeles Family and Neighborhood Survey (L.A. FANS). You were not available to complete the interview at that time, and have been away or unavailable each time the interviewer has returned since then. **Your participation in this study is very important, or we would not continue to try to reach you.**

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts. **You could make a difference in how tax dollars are spent in the future.**

Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we used a statistical procedure to randomly select a certain number of households for participation. As a selected respondent in the first wave of L.A. FANS approximately 6 years ago, you represent thousands of other people in the county. The information you provide will be combined with the answers of other participants and reported only as statistics. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, and the option to refuse to answer any question is always available.

I hope that after you consider these factors and read the enclosed brochure, you will make the time to participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
Panel Interview – Uncooperative

[DATE]

[NAME OF RESIDENT]
[ADDRESS]
[CITY, STATE, ZIP]

Dear [NAME OF RESIDENT]:

Recently one of our interviewers came to your home and asked you to take part in Wave 2 of the Los Angeles Family and Neighborhood Survey (L.A. FANS). At the time, you were not interested in participating.

Sponsored by the National Institute for Child Health and Human Development, a division of the U.S. Department of Health and Human Services, L.A. FANS is a major source of data about Los Angeles neighborhoods and the families that live in them. It provides researchers, policymakers, and community organizations with the necessary information for determining what neighborhood and community factors influence the well-being of children and adults. By participating in the survey, you will make a direct contribution to these efforts. You could make a difference in how tax dollars are spent in the future.

Although we are talking with people all over L.A. County, we cannot interview everyone. Instead we use a statistical procedure to randomly select a certain number of households for participation. As a selected respondent in the first wave of L.A. FANS approximately 6 years ago, you represent thousands of other people in the county. You cannot be replaced! The information you provide will be combined with the answers of other participants and reported only as statistics. A Federal Confidentiality Certificate prevents the release of your name or other identifying characteristics to anyone not connected with the research, and the option to refuse to answer any question is always available.

I hope that after you consider these factors and read the enclosed brochure, you will make the time to participate in this study—it really is important. As a small token of our appreciation, each adult and each child who takes part in the interview will receive a cash payment.

One of our interviewers will call on you again soon and will be happy to schedule your participation at a time most convenient for you.

Sincerely,

[FS NAME], Field Supervisor

P.S. Please, if you have any questions, telephone me toll-free at [TOLL FREE NUMBER] or call RTI at 800-723-8942.

Enclosure
Los Angeles Family and Neighborhood Survey Wave 2

Protocols and Procedures for Health Measures
Conducted by Field Interviewers
Fall 2006

APPENDIX D
Blood Pressure

Protocol: For each respondent 5 years of age and older, you will obtain three complete measurements of systolic and diastolic blood pressure. The right arm is the primary arm of choice for measuring blood pressure. However, if the right arm cannot be used due to exclusion criteria (see Section B below), then perform the blood pressure procedure using the left arm. You will use an automatic digital blood pressure machine. For each respondent, the number of cuff inflations is limited to 5 per visit. This means you have 5 opportunities to obtain 3 complete readings. You may not attempt more than 5 blood pressure measures on a single individual.

Procedure: This procedure is adapted from guidelines established by the American Heart Association and described in their booklet Determination of Human Blood Pressure by Sphygomanometry. This procedure also draws on that used by the National Health and Nutrition Examination Study (NHANES).

A. Equipment

1. The automatic digital blood pressure device is the BpTRU Model BPM-100. This model requires a power outlet. There is no battery back-up.
2. Each blood pressure unit comes with cuffs in five sizes: child, small adult, medium adult, large adult, and extra large adult.
3. Blood pressure cuffs should not be stored in the car in hot weather.
4. Please become familiar with the manufacturer’s guide provided.

B. Exclusions

The following are the exclusion criteria that describe circumstances when blood pressure measurements should not be performed on an arm:

1. Do not place BP cuffs over open sores, wounds, gauze dressings, or rashes.
2. Do not use arms with casts or shunts.
3. Do not use arms that are swollen, withered, or paralyzed.
4. Do not use the arm on the same side of a mastectomy unless the respondent tells you that her physician has indicated that it is okay to do so.
C. Preparing the Respondent

1. Before starting ask the respondent to:
   - Please abstain from eating, drinking, and smoking for 30 minutes prior to the blood pressure measurement if possible.
   - Empty his or her bladder if necessary.
   - Wear short sleeves or clothing that allows easy access to the upper arm. Cuffs should be placed directly on the skin and not over clothing. The respondent can push or roll up his or her sleeve if this does not constrict the arm. Otherwise, ask the respondent to change into a different shirt or top.

2. The ideal environment is a quiet room at a comfortable temperature with good lighting and a clean table or surface area close to a power outlet.

3. The respondent should sit quietly relaxed for five minutes before the measurement.

4. The respondent should sit comfortably upright with both feet on the floor, legs uncrossed. If possible, find a stool or box to support the legs of small children.

5. With adults and larger children: Seat the respondent so the midpoint of the upper arm (where the cuff is placed) is about level with the heart when the arm is resting on a hard surface such as a table or desk.
   
   With smaller children: Keep the body in alignment by positioning the arms naturally, hands on the lap. Do not try to place the small child’s arm on a table. This can cause the body to twist and the arm to be positioned higher than it should be.

6. The respondent should sit very still when the cuff is operating. Even slight motion or the tensing of muscles can cause an error message. This is particularly true with young children and it may require more effort to help the child to relax.

Note: Take a very important moment to explain the entire procedure thoroughly to the respondent. This will help minimize possible resistance, fears, or discomfort when the cuff is inflated. With younger children, demonstrate on an adult first, when possible, to reassure the child that the procedure is not painful, but will involve a sensation of pressure. It is essential that you carefully observe the child and parent to determine if either is under so much stress that the measuring must stop. Tell them that you will inflate the cuff 3 to 5 times.

D. Setting up the Equipment

1. Set up the automatic blood pressure machine on a clean, flat, dry surface.

2. Plug the machine into an electrical outlet. The transformer (plug) is large and heavy and may need support in order to stay in the outlet. Alternatively, use the extension cord/surge protector you carry in your bag.

3. Turn the blood pressure machine ON to begin or press CLEAR between respondents. The ON button is on the back of the machine.
4. Set the cycle button on the blood pressure machine to SP. This stands for single pressure.

5. Plan to record the results of each blood pressure reading immediately in your laptop. Each blood pressure reading will be entered twice into the computer. If you cannot position the laptop near the blood pressure machine, record the outcome of each inflation on paper so you can enter it immediately after the pressures are done.

E. Proper Cuff Size and Placement

Proper cuff size is essential. The use of an incorrect cuff size may result in measurement inaccuracy.

1. Select the cuff you think is most likely to fit the respondent. It is easier to determine the proper cuff size before connecting the cuff to the machine.

2. Each cuff has a white index line at one end and 2 parallel white lines on the inside of the cuff that define the range for the proper size. When the cuff is wrapped around the arm the entire index line should fall on or between the two range lines. If you prefer you can measure the respondent’s arm before selecting a cuff and use this as a guide.

3. If the selected cuff is too large or too small, choose the next size cuff and repeat the procedure.

4. When the proper size cuff is identified, connect it to the blood pressure machine. Record the cuff size in the computer.

5. With the respondent’s arm relaxed and palm up, place the lower edge of the cuff 2-3 centimeters (about 2 finger breadths) above the crease on the inside of the elbow so that the “artery” arrow on the cuff points to the midline of the crease. Check to be sure that clothing pushed up the arm is not tight or interfering with cuff placement.

6. The cuff should be placed snugly enough to keep it from sliding down the arm, but should not be constrictive. You should be able to slip one or two fingers between the cuff and the respondents arm.
7. Do the best you can to find the proper fit. Arms come in all shapes and sizes and for practical reasons we only provide you with 5 different cuff sizes to choose from. In some cases it will be difficult to get a perfect fit. It is important to document these situations in the laptop so researchers know how the reading was obtained and obstacles you may have faced.

F. Obtaining a blood pressure reading

1. Follow the step-by-step instructions in the health measures module on your computer screen.

2. With the cycle set at SP (single pressure), each time you press the start button the blood pressure machine will automatically inflate and measure the respondent’s blood pressure and pulse. Note: if necessary, you can stop inflation or deflation rapidly by pushing the STOP button.

3. A maximum of 5 cuff inflations are allowed per person per visit, including any aborted attempts.

4. Wait at least 30 seconds after the end of each blood pressure reading, when the cuff has fully deflated, before starting the next inflation.

5. Record the outcome of each cuff inflation in your laptop. Each blood pressure reading should have two numbers, a top number, the systolic pressure, and a bottom number, the diastolic pressure. Double enter the blood pressure reading as instructed on the computer screen.

6. Document any deviation from protocol or any problems encountered during the procedure in your laptop.

G. Reporting Results to Respondents

1. Many respondents will ask what their blood pressure is. You may show the respondent the readings but you must also explain that you are not qualified to interpret them. One recommended response is:

   • “I’m not trained to interpret blood pressure readings but in 4 to 6 weeks you will get a letter from the project that will explain what your average blood pressure is and what that reading means for you. The letter will also include information about several other health measures you have had taken.”

   If the respondent expresses concern you may also encourage him to write down the readings and show them to his health care provider. You may get a range of reactions ranging from “my pressure is never that high!” to “that’s good for me!” If the respondent expresses concern before you have finished taking all blood pressure readings, explain that we try to get three accurate readings to determine an average. Ask the respondent to hold questions or comments until you are finished.
H. Seriously High Average Blood Pressure

After *all* blood pressure readings are completed and entered, the computer will average the blood pressure readings you obtained.

_The computer will alert you if the AVERAGE blood pressure is extremely high._

This will be rare. If the adult respondent’s average blood pressure has a systolic pressure greater than or equal to 180 mm Hg OR a diastolic blood pressure greater than or equal to 110 mm Hg it is considered extremely high. Extremely high blood pressure for children is defined by an average systolic OR diastolic blood pressure over 5 mm Hg above the 99th percentile for their age and sex. **Remember, high blood pressure alerts are based on the average blood pressure, not individual blood pressure readings.** Any one reading might exceed the limits listed above but unless it is the _average_ blood pressure and the computer instructs you to stop, continue collecting data as instructed.

1. If the computer alerts you that the respondent’s average blood pressure is extremely high, you must stop the interview and the collection of all health measures and notify the respondent (or the respondent’s parent/guardian).

2. Calmly explain to the respondent (or the respondent’s parent or guardian) that the computer has determined that the average blood pressure is extremely high. Explain that the respondent should visit a health care provider that day or the next to have the blood pressure checked again.

   Show the respondent the referral information sheet in the packet of health care information you provided.

3. Fill out the “**Report of Very High Blood Pressure,**” which states that the respondent has extremely high blood pressure and needs to visit a doctor or health care provider that same day or the next day. The form also has a place to indicate that the respondent has been provided with information on how to get medical care if he or she does not have a doctor or health care provider.

   You must read the form out loud to the respondent to make sure that the respondent has received this information. After you and the respondent together have read and reviewed the form, both you and the respondent sign it. The form is a duplicate form; you keep one copy and give the other copy to the respondent. Place your copy into the case folder immediately.

   If the respondent decides to call emergency services by dialing 911, encourage a quiet, calm environment and wait with the respondent until the paramedics arrive. **Do not** continue to take blood pressure readings or collect other data while waiting with the respondent. **FIs must not drive respondents anywhere,** including the emergency room.

4. You will then thank the respondent for his or her participation in the study and leave the house. As soon as possible, call your field supervisor to notify her that you just encountered an alert value.
5. The next day follow-up with a phone call to the respondent to ask whether he or she has taken any action. Document attempts to reach the respondent and the outcome of those attempts in the case folder.

6. The decision to revisit the home to continue with interviews and health measures will be determined by your field supervisor on a case by case basis.

H. Common (and Avoidable) Problems

Problems with the reliability and validity of blood pressure measurements are usually due to poor equipment maintenance and improper technique. The BPTru machine is designed to give error messages that might indicate a particular problem you can fix. Please refer to the operator’s manual if the machine gives an error code. If you suspect there is a problem with your machine, notify your field supervisor so it can be replaced.

1. Equipment maintenance and quality control: keep the machine clean and protected in your roller bag when not in use.

2. Common problems solved with proper technique:
   - Wrong size cuff.
   - Cuff not positioned correctly (too low, too high, too loose, too tight).
   - Tubing is pinched or not connected tightly.
   - Movement during the measurement can cause a disruption in the deflation of the cuff. Even slight movement or flexing the muscles in the arm can cause the air to move in reverse, back into the cuff, and an error message is very likely to occur.
Height (Stature)

**Protocol:** Field interviewers (FIs) will measure the standing height of all adults and all children two years of age and older who are able to safely stand unassisted. FIs will enter measurements directly into the laptop.


**A. General Precautions**

1. When the FI measures a child it is important to be firm yet gentle. A child who is out of control cannot be measured. The FI’s own sense of calm and self-confidence will be felt by the parent and the child.

2. FIs should explain the measuring procedures to the parent (or person providing assistance) and, to the extent possible, the child, to help minimize their possible resistance, fears, or discomfort. It is essential that the FI carefully observes the child and parent to determine if one or both is under so much stress that the measuring must stop.

**B. Equipment**

1. A carpenter’s square (triangle)

2. A carpenter’s wooden folding ruler to measure standing height. The folding ruler is metric, marked in increments of millimeters. The reverse side of the ruler, measured in feet, should be blackened out with a permanent marker.

3. Post-it notes

4. Pencil

5. A stool, if necessary, to get eye-level

**C. Exclusions**

The following are the exclusion criteria that describe circumstances when the respondent’s height should not be measured:

1. Do not measure the height of any respondent who is not capable of standing alone unassisted.

2. Do not measure a child if the parent or child refuses, if the child is too sick or distressed, or if the child has a physical deformity that will interfere with getting an
accurate measurement. However, to avoid making disabled children feel excluded, FIs may want to measure such a child and make note of the disability or deformity in the comments section on the laptop.

D. Preparing the Child Respondent

1. Explain the entire procedure to the parent and child so they know what to expect.
2. The child should remove shoes, hats, hair ornaments, and heavy outer garments. If the child is young ask the parent to assist.
3. An accurate height measurement is not possible for individuals wearing certain hairstyles (such as braided or long hair that is worn on top of the head) or head dress such as turbans. If possible, hair should be fixed in such a way that it will not interfere with the height measurement.

E. Positioning, Measuring, and Recording Standing Height for Young Children

These instructions apply to young children at least two years old who are willing and able to stand unassisted during the procedure.

1. Find a section of blank, flat wall against which the child can stand. The child should stand on the floor, not on rugs or carpeting. Be sure to have adequate lighting or have a flashlight handy.
2. The child should stand with his/her back against the wall. The parent can assist from the child’s right side.
3. The FI should work from the child’s left side. With the parent’s help if necessary, position the child with his/her back against the wall. Some combination of the head, shoulders, buttocks and heels will touch the wall depending on the child’s age and shape. Generally the younger the child the more contact points will touch the wall.
4. Place a “post-it” on the wall by the top of the child’s head approximately where the height measurement is expected to be marked.
5. Next, determine if the child’s knees and feet should be together or apart. There are three possible knee and feet positions:
   - knees together and feet together;
   - knees together and feet apart; and
   - knees apart and feet together.

The preferred position is for the child to stand with knees together and feet together. If the child is unable to do so, he/she can try to separate the feet slightly to gain stability. A child unable to stand with knees touching should be asked to stand with feet together.

6. Ask the parent to place his or her right hand just above the child’s ankles on the shin, and left hand on the child’s knees and push the knees back gently toward the wall to make sure the child’s legs are straight. Check to make sure the child’s legs are
straight and the heels and calves are against the wall. Be sure the ankles or knees are not squeezed together by the parent.

7. Tell the child to look straight ahead. Make sure the child’s line of sight (the Frankfort Plane) is level with the ground. The Frankfort Plane is a position where the horizontal line from the ear canal to the lower border of the orbit of the eye is parallel to the floor and perpendicular to the wall. You must be able to see the ear in order to align the Frankfort plane and it may be necessary to move the hair behind the ear. If necessary, to align the head the FI should place his or her open left hand on the child’s chin and gradually close the hand to gently position the head. Do not cover the child’s mouth or ears. Make sure the child’s shoulders are level and the hands are at the child’s side.

8. Ask the child to stand tall with feet flat on the floor, look straight ahead and take a deep breath while the carpenter’s square is lowered to rest gently but firmly on top of the child’s head. Taking a deep breath helps to straighten the spine and maximize length. Be sure the child maintains the Frankfort plane. Many have a tendency to raise their chins and look up when told to “stand tall.” The square should be placed so that the two sides that form the right angle are flat: (a) along the wall and (b) resting on top of the head. Make sure to push down gently through the child’s hair to reach the top of the head.

9. Check the child’s position; adjust if necessary.

10. Mark the height on the “post-it” with a pencil and ask the child to step away. Open the folding ruler and support it against the wall without bending or bowing it. Note the measurement to the nearest millimeter (mm). Say it out loud.

11. Immediately enter the measurement into the laptop. As a quality control measure you will be prompted to enter the measurement a second time.

12. Record any deviation from protocol or any problems encountered in the comments section on the laptop.

F. Preparing the Older Child and Adult Respondent

1. Explain to older children and adult respondents exactly what you will be asking them to do for the height measurement.

2. Ask the respondent to remove their shoes in order to obtain the most accurate measurement. Make sure headgear, hairpieces, and hairstyles do not interfere with the measurement.

3. Respect the respondent’s modesty. While assisting him or her to get in the correct position, avoid touching the respondent in any way that could be uncomfortable or awkward for them. If possible, respondents should adjust their own posture and FIs should avoid touching them.
G.  **Positioning, Measuring, and Recording Height for Older Children and Adults**

1. Ask the respondent to stand against the wall until either the shoulders, back or buttocks touch the wall. Do **not** ask the respondent to lean his/her head back to touch the wall. If the respondent automatically leans the head back ask him/her to stand straight, in alignment.

2. Ask the respondent to place his or her knees and feet in correct position. There are three possible knee and feet positions:
   - knees together and feet together;
   - knees together and feet apart; and
   - knees apart and feet together.
   The preferred position is for the respondent to stand with knees and feet together. If the respondent is unable to do so, he or she can try to separate the feet slightly to gain stability. A respondent who is unable to stand with knees touching should be asked to stand with feet together.

3. Place a “post-it” on the wall approximately where the height is expected to be marked.

4. Ask the respondent to look straight ahead and remain still in the Frankfort position, in which the horizontal line from the ear canal to the lower border of the orbit of the eye is parallel to the floor and perpendicular to the wall. The FI may have to instruct the respondent to tip his or her head up or down slightly for correct positioning.

5. Note that when the head of an older child or adult is in the proper position according to the Frankfort Plane, there will be a space between the back of the head and the wall, since the head circumference of older children and adults is less than their chest circumference. Also note that for almost all older children and adults, the back of the heels will **not** be against the wall.

6. Ask the respondent to take a deep breath and stand as tall as possible.

7. Lower the carpenter’s square until it rests firmly on top of the respondent’s head. Place the square so that the two sides that form the right angle are flat: (a) along the wall and (b) resting on top of the head. Check the respondent’s position and adjust if necessary.

8. Mark the height on the “post-it” with the pencil and ask the respondent to step away.

9. Open the folding ruler and support it against the wall without bending it.

10. Note the measurement to the nearest millimeter. Say it out loud.

11. Immediately double enter the measurement into the laptop as instructed.

12. Some respondents will be unable to be measured according to the guidelines outlined in this protocol. For example, people with curvature of the spine will not be able to stand straight. In these situations, the FI should attempt to safely position the respondent as close as possible to protocol guidelines and determine the respondent’s
height. Provide as much detail as possible in the comments section about factors limiting your ability to measure the respondent according to the protocol.

13. Height is measured in millimeters. In the results letter sent to the respondent in 4 - 6 weeks, the measurement will be converted to feet and inches.

H. Adjusted Heights

If protocols cannot be followed precisely, an adjustment to the recorded height may be necessary either at the head or the feet, or both. For example, if the respondent has hair in a bun on top of his/her head or will not remove his/her shoes, the FI should measure the height of the hair or shoes with the carpenter ruler and record this measurement, in millimeters, in the “adjustments to height” section of the computer screen. The FI should also record in the comments section the specific reason for the height adjustment (e.g., hairstyle or shoes).
Weight

Protocol: The field interviewer (FI) will collect weight measurements from all respondents 2 years of age and older who are capable of standing unassisted.

Procedure: The procedure for measuring weight is adapted from the *Anthropometric Standardization Reference Manual*, edited by T. Lohman, A. Roche, and R. Martorell, Human Kinetic Books, 1988. The procedure also draws on that used by the National Health and Nutrition Examination Study (NHANES).

A. General Precautions

1. As noted in the height protocol, when the FI measures a child it is important to be firm yet gentle. A child who is out of control cannot be accurately weighed. The FI’s own sense of calm and self-confidence will be felt by the parent and the child.

2. Safety first. Be prepared to assist a respondent onto and off of the scale. If possible place the scale near a wall so the respondent can reach out to steady him/herself if necessary.

B. Equipment

1. L.A.FANS-2 uses the Tanita HD 314 digital scale that is capable of weighing respondents up to 330 pounds or 150 kilograms (kg).

2. A button on the bottom of the scale offers a choice of kilogram or pounds. In L.A.FANS-2 this button should *always* be set to kilograms.

3. The scale requires 4 AA batteries. Always keep at least one set of spare batteries in your bag.

4. Store the scale in your travel bag sideways so there is no pressure on the on-off switch. Be careful: Do not inadvertently turn the machine on and off repeatedly, which would deplete the batteries.

5. Scales should be calibrated regularly as part of quality control measures (see Section H below).
C. Exclusions

The following are the exclusion criteria that describe circumstances when the respondent’s weight should not be measured:

1. Do not weigh any adult or child respondent who is not capable of standing alone unassisted.
2. Do not attempt to weigh any adult or child who reports weighing more than 330 pounds.

D. Setting up the Scale

1. Scales should be placed on a floor with a hard, flat surface.
2. Do not place scales on rugs or carpets if at all possible. If the home has wall-to-wall carpeting, the kitchen or bathroom is least likely to be carpeted. Ask the respondent for help to find a suitable place.
3. Check that the scale is set to zero and to record in kilograms.

E. Preparing the Respondent

1. Ask the respondent to remove any heavy outer garments (coats, jackets, sweaters worn over other clothing) and shoes.
2. Ask the respondent to remove any change, wallet, or keys from pockets and any heavy jewelry.

F. Weighing Children and Adults

1. If you suspect the respondent’s weight might exceed the capacity of the scale tell the respondent that the scale goes up to 330 pounds. Ask if that will work for them. If they do not think the scale will work for them, do not attempt to weigh them. You can explain to the respondent that the scale would not be accurate in that range. Note this in the comments section on the laptop.
2. The respondent should stand centered on the scale with weight evenly distributed between both feet, looking straight ahead, and standing still. Ask the respondent to look straight ahead because most tend to look down at the readout. Looking down changes the respondent’s center of gravity and may affect the results.
3. Measure to the nearest 0.1 kilogram.
4. Say the weight out loud unless discretion is more appropriate.
5. Immediately after a successful measurement, double-enter the measurement into the laptop.
6. If the weight of the respondent exceeds the capacity of the scale, note this in the comments section.

7. During the procedure, always act in a professional manner and never make any comments regarding the respondent’s weight.

8. Note any deviation from protocol or any problems encountered in the comments section on the laptop.

9. LAFANS 2 uses the metric system (kilograms for weight). Explain to respondents that in the results letter their weight will be converted to pounds. The results letter will also take into consideration the respondent’s height and explain what their weight means in that context.

10. Do not re-measure respondents in pounds even if they ask. The tab on the scale bottom should always be set to kilograms.

G. Quality Control Measures for Scales

1. Set the scale to zero before each use.

2. The FI should test the scale at least once every week using the following procedure:
   a. Place the 5-kilogram weight on the scale and verify that the scale shows the weight to be 5 kilograms.
   b. Stand on the scale with the 5-kg weight and record the measurement.
   c. Stand on the scale without the 5-kg weight and record the measurement.
   d. Calculate the difference between the recorded weight measurements in (c) and (b). This difference should be exactly 5 kg.

3. Any inaccurate or broken equipment must be replaced before any more respondents are weighed.
**Hip and Waist Circumference**

**Protocol:** Field interviewers collect hip and waist circumference measurements from all adults (age 18 and older) participating in L.A.FANS-2.

**Procedure:** You will ask to measure the hip and waist circumferences of the respondent, but you will also offer to assist respondents who prefer to measure their own hip and waist circumferences. This procedure is an adaptation of waist circumference measurement procedure used in the National Health and Nutrition Examination Study (NHANES).

A. **Equipment**

   Fiberglass measuring tape with metric units printed in red. The opposite side, marked in inches, should be blackened out with a permanent marker.

B. **Exclusions**

   The following are the exclusion criteria that describe circumstances when waist and hip circumference should not be measured:

   1. Do not measure the waist or hip circumference of any respondent who is not capable of standing alone unassisted.
   2. Do not measure someone whose circumference exceeds the length of the tape measure (180 cm).

C. **Preparing the Respondent**

   1. First explain what you are going to do.
   2. Ask the respondent to remove any heavy outer garments. Ideally the measurement is taken with the tape held over the thinnest clothing possible or bare skin. **Do not** ask respondents to disrobe under any circumstances.
   3. The respondent should stand relaxed and breathe normally with weight equally distributed on each leg. Respondents should not hold their breath or attempt to “suck in” their stomachs.
   4. For pregnant women, the same protocol outlined here for measuring waist and hip circumference should be followed.
   5. Be respectful of the respondent and try to touch the respondent as little as possible.
   6. If the respondent appears uncomfortable with the procedure, offer to let the respondent position the tape measure him or herself and coach them through the process.
D.  Measuring and Recording the Waist Circumference

1. Locate the bony prominence of the right iliac crest or assist the respondent in locating it. The iliac crests are the bony prominences that jut out or can be felt on both sides below the waist and above the hips. This is the ledge where people tend to rest their fingers when they place their hands on their “hips” and respondents can often show you where they are.

2. Check that the tape is lined up with the right and left landmarks, is not twisted, and is parallel with the floor.

3. The tape should be snug but not tight enough to compress the soft tissue. The measurement marks on the tape should face outward and the tape should not be twisted. The zero end of the tape should be held below the measurement value.

4. The measurement should be taken at the end of a normal exhalation.

5. With the tape in correct anatomical position, note the measurement to the nearest tenth of a centimeter. Say it out loud.

6. Immediately double-enter the measurement in the laptop.

7. Note any deviation from protocol or any problems encountered in the comments section in the laptop.

8. The computer will ask who did the reading, you or the respondent. If the respondent reads you the number or if the respondent positions the tape in such a way that does not follow the protocol, then this is considered a respondent reading and you should enter it as such in the laptop.
E. Measuring and Recording the Hip Circumference

1. Wrap the measuring tape around the hips at the widest part of the respondent’s buttocks. If you and the respondent are doing this together, work from the respondent’s side and place one end of the measuring tape on the respondent’s hip, level with the maximum circumference of the buttocks. Hand the respondent the other end of the tape and ask her to wrap it around the widest part of her buttocks and back to you. The tape should remain parallel with the floor.

2. The tape should be snug, but not enough to compress the soft tissue. The measurement marks on the tape should face outward and the tape should not be twisted. The zero end of the tape should be held below the measurement value.

3. With the tape held in position parallel to the floor, note the measurement to the nearest tenth of a centimeter. Say it out loud.

4. Immediately double enter the measurement in the laptop.

5. Note any deviation from protocol or any problems encountered in the comments section on the laptop.

Note: As mentioned, the metric system is also used to measure hip and waist circumferences. Unlike the other measures these are not reported back to the respondent in the results letter so we do not provide a conversion of these measurements in inches.
Spirometry

Introduction: Spirometry is the timed measurement of a person’s lung volume, assessed as the person forcefully and rapidly blows out after taking a deep breath. It measures how much air is in the lungs and how effectively and quickly the lungs can be emptied. The measurements include a number of indices, such as forced vital capacity (the volume of air that can be forcibly expelled from the lungs) and peak expiratory flow (the maximal expiratory flow rate). The accuracy of the spirometry measurement depends on the respondent using the proper technique and exerting maximum effort. The procedure requires understanding, coordination, and cooperation between the FI and the respondent.

Protocol: In L.A.FANS-2, you will collect three acceptable/reproducible spirometry measurements from adults and children 5 years of age and older using a portable hand-held spirometer. For each respondent, the number of attempts is limited to 8 per visit. This means you have 8 opportunities to obtain 3 complete readings. You may not attempt more than 8 spirometry measures on a single individual.

Procedure: The following procedure describes how to perform spirometry on all subjects. This information is adapted from several sources, including the American Thoracic Society “Standardization of Spirometry, 1994 Update,” American Journal of Respiratory and Critical Care Medicine 1995 (52): 1107-1136.

A. General Precautions
   1. Wash your hands before and after handing mouthpieces and interior surfaces of the spirometer.
   2. If you have any open cuts or sores on your hands, you must wear gloves.
   3. Always wash your hands between measuring different respondents.
   4. Clean equipment by wiping with alcohol swabs after each use.

B. Equipment

L.A.FANS-2 uses hand-held, portable electronic spirometers made by EasyOne. The specific model is the EasyOne Diagnostic Spirometer. The components of the system include the following:

   1. The hand-held electronic spirometer
   2. 2 AA batteries
   3. Single-use, disposable Spirettes (the mouthpieces)
   4. Disposable nose clips
   5. Alcohol swabs to wipe equipment
   6. Disposable non-latex gloves
The device will assess whether each measurement attempt is acceptable and will provide specific guidance, such as “blow harder” or “blow longer.” The read-out window on the spirometer will provide suggestions to improve performance after each attempt.

C. Exclusions

Respondents excluded from spirometry include those who:

1. Have had any surgery on their chest or abdomen in the past three weeks.
2. Have been hospitalized for a heart problem (such as heart attack, angina or chest pain, congestive heart failure) in the past six weeks.
3. Have abdominal or chest pain (for any reason).
4. Have oral or facial pain made worse by a mouthpiece.
5. Have acute respiratory illness causing the respondent to cough, sneeze or suffer from bronchospasm.
6. Are women in their 3rd trimester of pregnancy.*
7. Experience dizziness during the procedure; in this instance, stop testing.

*A word about women who are pregnant:

In general, pregnancy is not considered a medical exclusion criterion for spirometry testing. In fact, women with asthma or other respiratory conditions are often tested using spirometry throughout pregnancy in order to monitor their health. That said, for L.A. FANS-2 we will exclude women in their 3rd trimester. If any pregnant woman is anxious about the possibility that the test could be harmful to her pregnancy or fetus the field interviewer should excuse her from the test and still consider her eligible for the full health measures incentive.
D. Information to Collect from Respondents

Questions in the laptop instruct you to ask respondents if they:
1. Have smoked cigarettes in the past one hour?
2. Have eaten a heavy meal in the past one hour?
3. Have used any medications to help them breathe (such as bronchodilators) in the past one hour?
4. Had a cough, cold, or other acute illness in the past week?
5. Had any respiratory infection (such as the flu, pneumonia, bronchitis, or a severe cold) in the past three weeks?
6. Currently being treated for tuberculosis?

E. Configuring the Easy One Spirometer

To Perform a Test

To perform the spirometry measurement, do the following:

1. Turn the device on by pressing and holding the ON/OFF button until you hear a beep.
2. The Main menu appears (you will see “MAIN” along the left side of the screen). Select “Perform Test” by pressing the ENTER button.
3. In the next screen you will start a new test. The “NEW” option is already highlighted, so select this option by pressing ENTER.

NOTE: If at any point you need to go back to a previous screen or field, press and hold the Test button. You can scroll between different option within a screen by pressing the◄ and ► buttons.

4. In the next screen you will enter patient data:
   a. ID—you will have to enter a combination of numbers and letters. For example, if you need to enter a “2” followed by an “H”, you will have to press 2 on the keypad 4 times (in order to scroll past A, B, and C) and then press 4 2 times. If you make a mistake, use the◄ key to scroll back. Once you are finished entering the ID, press ENTER.
   b. Name—enter the respondent’s initials. The first letter in the series will appear first, then the second, then the third. Stop on the appropriate letter.
   c. Birth—enter the respondent’s date of birth. You must enter a 4 digit year
   d. Height—always enter “150” centimeters as the default value for height. No conversion of the participant’s height in millimeters should be used here.
e. Weight—accept the default value, which is 0
f. Ethnicity—accept the default value, which is Caucasian
g. Gender—accept the default value, which is male
h. Smoker—accept the default value, which is no
i. Asthma—accept the default value, which is no
j. Tech ID—enter your FI ID # - this is a 5 digit number.

To Conduct the Test: You are now ready to involve the respondent.

5. After you have entered all of the patient data, the Test menu appears (you will see “TEST” along the left side of the screen). Select the first test titled “FVC (Expiratory)” by pressing ENTER.

6. Insert the spirette into the device: open the plastic wrap at the end with the smaller opening and insert it through the hole at the top of the device. Line up the arrows on the front of the device and then push it down until it stops. Then remove the plastic wrap from around the top of the mouthpiece (this means you won’t touch the mouthpiece with your hands).

7. The next screen will instruct you to block the spirette. Place your palm over the bottom of the spirette and press ENTER.

8. Keep the spirette blocked until you see “Blast Out” on the screen. Quickly hand the device to the respondent and instruct them on completing the maneuver.

9. Once you hear the end-of-test beep, the maneuver is complete and you will see the results on the screen. Press ENTER to advance to the “Session Quality” screen. If the test was acceptable, you will be instructed to move on to the next effort. If the test was unacceptable, you will be instructed on how to coach the respondent and they will have to retry the effort.

10. Once 3 acceptable efforts have been recorded, the spirometer will display the “SESSION QUALITY” screen and say “Session Complete! Great Job.” You have now successfully completed the measurement. You can turn the device off by pressing and holding the ON/OFF button.

11. You can let the respondent try a maximum of eight attempts to get three satisfactory tests.

12. The respondent has performed an acceptable test when the reading in the spirometer’s window says “good effort, do next.”

13. The respondent has performed three acceptable tests when the reading in the spirometer’s window says “session complete.”
14. Results are stored on the spirometer, which will be able to hold results for about 200 respondents. Your FS will tell you periodically to FedEx your spirometer to RTI so that data can be downloaded; RTI will FedEx you a new spirometer to use.

15. If three “acceptable” tests are not obtained, explain why in the comments field in the laptop.

16. Note any deviation from the protocol or any problems encountered in the comments section in the laptop.

F. Preparing the Respondent

1. Explain that you will use your mouthpiece to demonstrate the entire procedure. Be careful to not blow into the respondent’s face. Use the script in the box below to emphasize each of the following concepts:
   - Proper placement of the mouthpiece.
   - Proper placement of noseclip on the nose.
   - Blasting air into the mouthpiece.
   - Maximal inhalation. (deepest breath)

   Remember: When you demonstrate the maneuver yourself, using a mouthpiece held in your hand, demonstrate with maximum effort so they will use maximum effort!

2. Prepare the respondent to do an exhalation, using the following instructions as a script. Tell them that these are the steps you are going to want them to do:

   a. Stand up straight, feet flat on the floor, do not lean forward.
   b. Put the nose clip on your nose.
   c. Once I hand you the spirometer, take in as MUCH air as you POSSIBLY can until your lungs are COMPLETELY full.
   d. Quickly make a tight seal on the mouthpiece with your lips, teeth resting in the grooves. Do NOT bite down and try to keep your tongue out of the way.
   e. Then, BLAST the air out as HARD and as FAST as you POSSIBLY can and keep blowing until I tell you to stop, even though it may seem like you are out of air. Do not bend forward at your waist as you blow out. It’s okay if you bend your knees and crouch down a bit.
G. Coaching the Respondent

Your ability to successfully coach the respondent at the start of the test will lead to the best results. Don’t worry about looking silly!

1. Open a mouthpiece for the respondent and, without connecting it to the spirometer, let the respondent practice putting it in his or her mouth and getting a good seal.

2. Ask the respondent to stand up and loosen any tight clothing.

3. Just in case the participant gets dizzy, place a non-rolling chair behind the participant. Or the respondent can stand with a firm surface such as a wall behind him or her.

4. Insert the respondent’s mouthpiece into the spirometer and begin the first effort. See “Configuring the Easy One Spirometer” for additional details on the operation of the device.

5. Use the feedback from the spirometer to judge whether the respondent is blowing out correctly. You may need to give additional instructions to the respondent. You need to use your judgment about what to say after watching how the respondent performs the test and after reading what the spirometer says. If the respondent stops early say, “Even if your lungs feel empty, small amounts of air are still coming out, so keep pushing and blowing.” Another example might be “it’s okay to bend your knees but make sure you don’t lean forward.”

6. Continue having the respondent perform a spirometry test until three acceptable efforts have been obtained. If, after 8 tries, the person has not completed three acceptable sessions, stop.

7. Once the respondent fully understands how to do the test correctly, very similar measurements should be obtained when the test is repeated. This means that the respondent should be able to blow out most of the air from his or her lungs in the first second of the effort.

8. Here is a list of the different prompts that will follow each test on the display of the EasyOne device. Be prepared to know how to follow up each prompt with proper coaching:

<table>
<thead>
<tr>
<th>Prompt</th>
<th>Coaching response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Don't hesitate</td>
<td>The respondent should exhale in one breath and should not stop in-between.</td>
</tr>
<tr>
<td>Blast out faster</td>
<td>The respondent must exhale more explosively and as firmly and quickly as possible.</td>
</tr>
<tr>
<td>Blow out longer</td>
<td>The respondent has discontinued exhalation too early. The patient must exhale even more and press as much air as possible out of his/her lungs.</td>
</tr>
<tr>
<td>Wait until buzz before blowing out</td>
<td>The respondent has started to blow out before the device is ready for the test.</td>
</tr>
<tr>
<td>Good effort, do next</td>
<td>Good test. Just one to two more good tests and the test is complete.</td>
</tr>
<tr>
<td>Blast out harder</td>
<td>The test differs greatly from the previous tests. The patient can blow still more firmly and achieve a higher peak flow.</td>
</tr>
<tr>
<td>Deeper breath</td>
<td>The test differs greatly from previous tests. The patient can inhale even more deeply and exhale even more air.</td>
</tr>
</tbody>
</table>
Session complete  The test is complete. An adequate number of good tests have been conducted.

9. Here are additional instructions you may need to include in your coaching:
   
a. If the respondent starts to exhale too quickly: “Fill your lungs fully, then stop a moment, bring the mouthpiece up to your mouth and breathe out as fast as you can.”
   
b. “Keep the mouthpiece away from your mouth while you are breathing in.”
   
c. “Put the mouthpiece between your teeth and seal your mouth around the tube, not allowing any air to leak out the sides.”
   
d. If the respondent makes a lot of noises in his or her throat: “Blow out as if you are saying the word ‘haaa’.”
   
e. If the respondent gives up too quickly: “Try to keep going until I tell you to stop, even though it may feel like you are out of air.”
   
f. For children with short attention spans try engaging the child in a game. For example, if they are having a hard time blowing hard enough at the start of the test, put a piece of paper on a table and challenge them to blow it off with one blast of air. If they are having trouble blowing long enough, tell them to imagine they are blowing candles out at their next birthday, and they have to keep blowing to get them all out in one breath. Although you may need to loudly encourage them to complete the effort, be careful about yelling at the children, as this may scare them.

H. Common Errors

1. Not taking a deep enough breath. The machine will give you a message, “Deeper breath” indicating that the test differs greatly from previous tests. The respondent can inhale even more deeply and exhale even more air.

2. Leaking air around mouthpiece.

3. Slow start to blow out. The machine will give you a message, “Blast out faster…” The respondent must exhale more explosively and as firmly and quickly as possible.

4. Poor effort in blowing out.

5. Stop exhaling too soon. The machine will give you a message, “Blow out longer.”

6. Poor posture, especially leaning forward.

7. Respondent puts tongue in the mouthpiece (tell him/her not to).

8. Respondent has extra physical efforts such as coughing, vocalizing, or puffing cheeks.

9. The respondent is flexing his/her neck.
10. The respondent pauses just before blowing out or blows with force several times instead of one blast. The machine will give you a message, “Don’t hesitate…” The respondent must exhale all air at once and not in short bursts.

11. The respondent makes noises in his throat while blowing.

12. Too much enthusiasm during the blow on the part of the coach (you) may have a negative effect. Be aware of the effect you are having on the child or adult.

I. **Reporting Results to Respondents**

We do not send spirometry results to respondents. One reason is because there is not a simple or easy way to summarize or interpret the spirometry results. Explain to the respondents that their results have to be put through a computer program to figure out what they mean. You can also say that you are not qualified to interpret results.

J. **Shipping Spirometers**

Each field supervisor will inform the FI when a spirometer needs to be shipped to RTI so data can be downloaded into a computer program. The process will be as follows:

1. The FS will contact the FI and request the return of the spirometer on a preset date.
2. The FS will notify RTI that a spirometer is scheduled for exchange.
3. RTI will FedEx the FI a new spirometer.
4. The FI will FedEx the “old” spirometer to RTI.
5. The FI will use the “new” spirometer until the FS informs him or her that it is time to exchange it again.
Saliva Collection

L.A.FANS-2 is collecting saliva samples from children ages 3 through 17. The saliva samples will be used to assess how children respond to daily stress by measuring the hormone cortisol over the course of a day. Cortisol levels vary throughout the day. Cortisol is also secreted in response to certain stimuli, so it is essential to standardize the time and method of collection to ensure that all respondents follow the same protocol. Ideally, parents/guardians should collect saliva the day after the child completes the L.A.FANS-2 interview. Saliva is to be collected three times on the same day.

Protocol: You will instruct parents on how to collect and ship three saliva samples from children 3 years of age and older using Sorbettes to collect the saliva and leave written instructions and a telephone number to call with questions. The Sorbette consists of an absorbent material on the end of a plastic shaft, a “sponge pop.” The person holds onto the shaft which eliminates choking hazard while the specimen is collected. Following collection, the sponge pops are inserted into a tube.

Procedure: This procedure is adapted from guidelines established by Salimetrics LLC and described in their handouts *Saliva Sample Collection Advise* and *Sorbette Saliva Collection Instructions*.

A. Equipment

After the parent (or guardian) agrees to participate in saliva collection, you will provide the parent a kit for collecting saliva samples. The kit contains all supplies the parent needs for collecting and shipping the samples. Write the child’s name on the kit because the parent may collect saliva samples from more than one child.

Each kit contains the following items:

- A small zip lock bag on which you will write the child’s name. The bag contains three capped collection tubes, and each collection tube contains two sponge-pops.
- A set of 4 peel-off bar-coded labels for the tubes and for the child consent form.
- A waterproof pen for the respondent to record the date and time of collection on the label of each tube.
- A larger zip lock bag into which the respondent will place the small zip lock bag in preparation for shipping.
- A cardboard shipping box into which the respondent will place the larger bag in preparation for shipping.
- Saliva collection instruction sheet for the respondent.
- FedEx shipping envelope for the respondent.
- FedEx pre-paid shipping label filled out and adhered to the envelope.
The four peel off labels will have the same unique ID number, bar code, and spaces for the parent to record the date and time of each collection. The first three labels also represent the collection times:

- “1 — Upon waking”
  Date______
  Time______
  Time of waking_____

- “2 — Waking + 30 minutes.”
  Date______
  Time______

- “3 — Bedtime”
  Date______
  Time______

B. Preparation of Saliva Collection Kit by FI

Prepare each kit in front of the parent. Remember that a household can have multiple kits, one for each child.

1. Give the parent the saliva instruction sheet.
2. Review the instruction sheet. Point to instructions on the sheet as you explain the saliva collection process. Talk through the process aloud with the parent.
3. Write the name of the child agreeing to give a saliva sample on the small zip lock bag with the waterproof pen.
4. Remove the set of 4 barcode labels from the kit.
5. Select one tube and the barcode label that says “1—Upon waking” and show it to the parent. Affix the barcode label to the tube lengthwise along the tube. Tell them to use this tube for the first sample.
6. Show the parent the place to write in the date and time.
7. Show the parent where to write in the time of waking.
8. Show the barcode labeled “2—Waking + 30 minutes.” Show it to the parent. Peel it off and affix it to the second tube lengthwise. Show the parent where to write in the date and time and tell the parent to use it for the second sample.
9. Follow the same procedures for the third label and tube “3—Bedtime.”
10. Put the 4th label on the signed consent form for the child.
11. Put the labeled tubes into the zip lock bag with the child’s name on it.
12. Prepare each FedEx mailer. Take off the top copy, the “sender copy,” and place it in your case folder.

13. Write the tracking number from each FedEx label on the front of the correct child consent form and type that number into the laptop computer.

When you have completed your in-home saliva kit preparation with the parent, each child in the household giving a saliva sample should have:

- Their own zip lock bag with their name written with the waterproof marker.
- Three tubes inside each zip lock bag, each of which has its own label.
- All FedEx shipping materials prepared in advance for FedEx shipment.

C. Teaching the Saliva Collection Procedure

Refer to the step-by-step instructions below that you will review with the parent or supervising adult and older children. When you explain the saliva collection procedure take your time and go over it carefully.

- Demonstrate with your samples what the tubes look like and how the caps are removed and put back on.

- Show the parent and, if appropriate, the child, what the sponge-pops look and feel like. Show them that the sponge-pops are soft and explain that they plump up quickly with saliva, but that does not mean that they should be removed from the mouth. They should keep the sponge-pops in their mouths for 60 seconds.

- Reinforce the importance of collecting the second sample on time. Ask them to use a timer, watch, or clock to keep track of the 30-minute countdown between the first two collections. Make sure they understand that the timer is for keeping track of the time between the first two collections – it is NOT meant to indicate how long the swab stays in the child’s mouth.

- Show the parent the waterproof marker and emphasize the importance of recording on each label the date and time when each collection begins.

- Reinforce the importance of refrigerating the samples.

- Reinforce the importance of collecting all 3 samples on the same day. If the parent misses a collection time or forgets to refrigerate a sample ask him or her to call the project’s toll-free number to discuss the situation before any samples are thrown away. If necessary, arrangements can be made for another collection kit to be delivered.

- Stress the importance of adult supervision for all collections.
• Tell the parent that he or she (or an adult) must hold the sponge-pop stems at all times when they are in a younger child’s mouth.

• Stress the importance of mailing the samples the day after they are collected. Show the parent the tracking number and tell him or her we trace the package on its trip to the lab. Mention that the lab notifies us when the sample arrives.

• Leave all supplies and instruction sheets with an adult in the household.

D. Saliva Collection Exclusions

1. Dental work should not be performed within 24 hours prior to sample collection.
2. Subjects should not brush their teeth within 2 hours prior to sample collection.
3. No major meal within 60 minutes prior to sample collection.
4. Avoid alcohol for 24 hours prior to sample collection.
5. Avoid dairy products during the 30 minutes prior to sample collection.
6. No acidic or high sugar foods during the 30 minutes prior to sample collection.
7. Blood contamination, even in microscopic amounts, is of particular concern in saliva samples because the levels of most analytes are higher in the general circulation than in saliva. If gums are bleeding or mouth has an open sore (such as a tooth pulled that day), wait a day or two for the wound to heal to take the sample.

E. Timing of Sample Collection

Timing of the sample collection is very important. Cortisol has a diurnal cycle, so that recording the time of sample collection is very important. Tell the parent to record the sample collection date and time on the tube label each time they collect saliva. Tell the parent to record the time of waking on the first saliva tube label. Samples should be collected at the following times:

1. When the child first wakes up. This sample should be collected as soon as your child wakes up, preferably before he or she gets out of bed, and definitely before breakfast or brushing teeth.

2. Collect the second sample 30 minutes after you start to collect the first sample and before the child has breakfast or brushes their teeth.

3. Collect the third and last sample at bedtime before brushing teeth to go to bed.

It is important that all three saliva samples be collected on the same day. A kitchen timer or alarm clock is useful for correctly timing the second sample collection. Tell the parent to set the timer for 30 minutes as soon as he/she starts collecting the first sample.
If the respondent is unable to collect all three saliva samples the day after completing the L.A.FANS-2 interview, the collection should be postponed until the first day when all three samples can be collected on the same day. As samples are collected they must be refrigerated until they can be shipped via Federal Express to the lab.

The rationale for the timing is to collect a baseline (first) saliva sample before the child begins the activity of the day. That is why we want to collect the first sample as soon as the child wakes up, preferably while he or she is still in bed. The second collection begins thirty minutes after the first measure began. This should reflect changes in cortisol that occur with the morning activity.

If the parent has to collect saliva from more than one child it is okay if the parent collects the three collections from one child on one day and then collects the three collections for the second child on the next day.

F. **Saliva Sample Collection**

The objective is to collect enough saliva and keep foam to a minimum. Saliva is the fluid secreted by salivary glands. It is what we are referring to when we say our mouth is “watering.” Saliva is not sinus drainage or secretions brought up from the lungs, so it is not what is generally meant by the word “spit.”

Specimens should be collected on Sunday, Monday, Tuesday, or Wednesday in order to ship them the following day. This schedule will have the samples arrive at the lab when personnel are available to process them.

Below are the collection procedures parents or guardians will follow for each sample. Tell the parent to:

1. Check the name on the label of the zip lock bag to make sure they have the correct container for the child giving the saliva sample.
2. Select the tube for the correct collection period, e.g., the tube labeled “1 – Upon waking” for the first sample collection.
3. Remove the two sponge-pops from the tube. Hold the two sponge-pops together and put them under the tongue **for at least 60 seconds**. Do not put the sponge pops between the cheek and tongue. The sponge pops can be moved around in the mouth to take advantage of saliva pooling under the tongue. This may help increase collection volume. Just because the sponge pop “puffs up” doesn’t mean you are finished – **collect saliva for a FULL MINUTE**. The sponge pop must be completely saturated for accurate results.
4. When done, put the sponge pops into the tube with the sponge side down (facing the bottom of the tube).
5. Make sure the tube cap is snug so the saliva does not evaporate.
6. Write the time the sample was collected on the tube label with the waterproof pen provided.

7. Place each tube into the zip lock bag with that child’s name on the front as they are collected to avoid confusing samples. Leave the paper towel in the zip lock bag.

8. Place the zip lock bag in the refrigerator immediately after collection.

G. Sample Storage

Respondents must put the samples into the refrigerator as soon as possible after collection. When samples remain at room temperature for periods of time longer than two hours, bacteria could grow, which can compromise assay validity. Keeping samples refrigerated after collection is important.

H. Shipping Saliva Samples

The morning after all saliva samples have been collected from everyone donating a sample in the household or the day the parent or guardian plans to ship the samples, he/she should prepare the samples for shipping using the materials in the kit.

To ensure that samples are received in good condition, FedEx must pick them up only on Monday, Tuesday, Wednesday, or Thursday. Tell the parent not to schedule a pickup for Friday or Saturday.

Ask the adult if she is familiar with FedEx and comfortable working with the FedEx system. If you think assistance with shipping would be advisable, ask him/her to call you when the samples are ready so you can help with their arrangements for the pickup.

Now prepare each FedEx mailer in front of the adult. Remember that each child’s samples must be shipped in its own FedEx envelope, so a household could have multiple envelopes to be shipped.

- Write the parent’s name in the “FROM” section on the pre-printed FedEx address label.
- Tear off the top copy, the “sender copy,” and place in your case folder
- Put the remaining copies of the address label in the clear adhesive holder. DO NOT seal the adhesive holder.
- Pull the adhesive strips off and place the clear label holder with the addressed label in it on the front of the FedEx envelope.

Once you have completed these procedures with the parent you should:
1. Print the FedEx tracking number on the front of the child consent form.
2. Enter the FedEx tracking number into the laptop computer.

Next, instruct the parent on the shipping procedures:
1. Do not prepare the samples for shipping until they are ready to ship because they must remain refrigerated.

2. Place cardboard shipping box(es) and shipping envelope(s) close to the refrigerator, ready to use.

3. Take all of the small zip lock bags from the refrigerator.

4. Make sure each zip lock is closed and the bag is sealed.

5. Place each small zip lock bag containing the cold samples into a larger zip lock bag and seal the bag closed.

6. Place each larger zip lock bag into its own cardboard box and close the box.

7. Seal each box closed with the 2 green label tapes.

8. Place each cardboard box into its own pre-addressed shipping envelope.

9. Seal the shipping envelope.

10. There should be only one child’s samples in each shipping envelope.

11. Call FedEx to pick up the samples.

12. Arrange for the FedEx pickup as soon as possible and preferably when someone is home.

I. Saliva Contamination Issues:

It is important to collect saliva that is not contaminated with substances that will affect the results. For example, hormones normally in diary products can react with antibodies and cause false results. Blood, acidic foods, or foods high in sugar can interfere with analysis. Thus, instruct the parent as follows:

1. Children should not have eaten a major meal within 60 minutes prior to sample collection.

2. Children should not have alcohol for 24 hours prior to sample collection because alcohol is respirated into saliva and interferes with antibody binding in immunoassays.

3. For measurement of cortisol, it is particularly important for children to avoid dairy products during the 30 minutes prior to sample collection.

4. Children should not have acidic or high sugar foods, such as fruit and fruit juices, Coke, cookies and candy during the 30 minutes before sample collection.

5. Blood contamination is of particular concern in saliva samples because the levels of cortisol are higher in blood than in saliva. Blood can leak into saliva due to several reasons, including poor oral health, abrasive brushing, or injury.

6. Occasionally, saliva samples are visibly contaminated with blood, but even an invisible amount of blood contamination in a saliva sample has the potential to falsely elevate salivary cortisol levels. Because of this, we recommend that children...
do not brush their teeth or floss within 2 hours prior to sample collection. Dental work should not be performed within 24 hours prior to sample collection.

J. Strategies for Improving Compliance

You will give parents written instructions and a toll free number to call for assistance so we can quickly address any questions or problems they might run into during the collection and shipping process. You will also place a follow-up call to check on the status of the saliva collection (see K below).

You can facilitate a quick turnaround by encouraging the parent and child to complete the saliva collection on the day after the interview.

Show flexibility by allowing different children to have their collection done on different days.

Respondents may have already received cash payment for participating in all the health measures. Thank them again for agreeing to this.

Your willingness to assist with the shipping arrangements will be very helpful in getting the package delivered.

Tell the parents that shipments are tracked and we are notified when they arrive at the lab.

K. Placing follow-up telephone call to household

A few days after you leave the saliva kit(s) you will place a call to the household to check on the status of the saliva collection. In placing call use the following script:

Hi, this is [insert your name]. I want to thank you again for participating in the L.A. FANS study. I’m calling to see if you’ve had a chance to collect your child(ren)’s saliva samples and if Federal Express has picked them up.

[If yes] Great. Thanks again for all your help and support.

[If no, see if there’s anything you can do to help the household collect the saliva. Consider the following:]

Do you have plans for when you will be able to collect the saliva?

Do you need another saliva kit?

Can I help with scheduling a FedEx pick-up?
After you have spoken with someone at the household or left a message, note the call and result in the Record of Calls on your case folder.

Some helpful Hints:
1. Please make only one follow-up phone call (unless the respondent asks for additional help). Feel free to leave a message if the adult you worked with is not available.
2. If the respondent needs another kit, let your supervisor know and RTI will mail one to the household.
3. If the respondent needs help calling FedEx, please do whatever you can to help.
4. Saliva is to be collected so it can be shipped Monday-Thursday. Time the calls so respondents who have not yet collected saliva could do so in the next day or two after your call.
5. Have the saliva instructions handy when you make the call so you can review them with the respondent if necessary.

L. Common and Avoidable Problems

- **Dry mouth**: To generate saliva, have the child think about their favorite food or dessert or chew on the sponge-pop to stimulate sufficient salivation.

- **Contaminated specimen**: To avoid contamination, immediately refrigerate saliva samples after collection and store in the refrigerator until they are shipped.

- **Safety concerns**: This is as safe as giving a child a lollipop.
  - However, all children should be supervised when collecting the saliva samples.
  - An adult should be present in the same room at all times when a child has a swab in his or her mouth.
  - For younger children using sponge-pops, an adult must hold the sponge stems while they are in the child’s mouth. Younger children should not be allowed to hold the sponge-pops.
  - Children and teens should be instructed to stay seated while the swabs are in their mouths.
  - Parents should wash their hands after collecting the specimens for each time point.

- **Mixing up the samples between children**: The zip lock bag has each child’s name on it. The name should be checked before the sponge-pop is given to the child. Each sample should be placed in the zip lock bag as soon as it is collected.

- **No time or date, or wrong tube used**: Emphasize to the parent the importance of accurately recording the date and time that each saliva sample is collected on the tube and the importance of checking the label to ensure that the correct tube is selected.
Scheduling the Appointment for Dried Blood Spots

**Protocol:** L.A.FANS-2 will collect dried blood spots (DBS) from a random sample of households. Within a sampled household, all respondents 3 years of age and older are eligible for DBS except a respondent who is a PCG-only (they are not eligible for this portion of the study).

**Exclusions:** A respondent may not have dried blood spots collected if either of the following conditions is present:

1. The respondent has hemophilia or any other type of blood disorder that may affect the blood’s ability to clot.
2. The respondent has had chemotherapy treatments within the past 4 weeks.

**Procedure:** If the household is randomly selected for the DBS portion of the study, after completing the other health measures the computer will prompt you with a brief script and list steps you need to take to arrange for a health technician to visit the household. We have hired EMSI to visit respondents and perform fingersticks.

A. Asking Respondents to Provide Dried Blood Spots

The respondent will have already heard about the DBS collection in the health measures consent form. You should be prepared to explain the purpose of the DBS collection and provide an overview of the procedure. You may need to discuss the following:

1. Explain that a trained health technician will collect the DBS in the participant’s home or other location of the respondent’s choice. The technician will come either at a later date or perhaps while you are still in the home.
2. If you know you are returning to the home to conduct other interviews or health measures, try to schedule the health technician to come at that time. The rapport you have built with a respondent will be beneficial.
3. Blood will be tested for risk factors associated with heart disease and elevated blood sugar levels.
4. Results of blood tests will be mailed to respondents about 4 to 6 weeks after collection.
5. The DBS exam consists of a finger stick, and the entire procedure takes about 15 to 30 minutes.
6. The DBS exam can be conducted on any day, at any time. No fasting is required.
7. We are asking for the respondent’s permission to store a small part of the filter paper with the dried blood spot. New lab tests are being developed for heart disease, diabetes, immune function, and other major health conditions, but they are not yet available. When these new tests become available we would like to use them to check the blood sample, but respondents will not receive results.
8. Respondents eligible for DBS will receive the incentive for health measures only if they complete (or attempt to complete) all of the health measures. In other words, if they agree to be weighed and measured but would decline the DBS, they would not be eligible for the health measures incentive.

Give the respondent the “Frequently Asked Questions” (FAQ) sheet, which provides answers to common questions about DBS.

Some participants will be reluctant to participate in the exam. Here are some things you can do to alleviate their concerns:

- Reinforce that the finger stick procedure is a very clean and very safe procedure.
- Some find it reassuring to know that diabetics commonly use the finger stick procedure in the home to monitor blood sugar.
- Finger sticks are routinely done even on infants by health professionals. Children as young as 3 are not a problem.
- Collecting blood for the DBS involves just a quick prick of the finger.
- Giving a few drops of blood will not cause anemia or make it worse, even in young children.
- Some respondents may be reluctant to have yet another stranger in their home. Let them know that they can have the sample collected at another location if that will make them feel more secure.
- If you know you are returning to the home to conduct other interviews or health measures and you have established good rapport with the respondent, you can offer to schedule the health technician to come at that time.
- If the household cannot all be present at one time for the dried blood spot collection you can arrange for multiple visits, although do not offer this unless absolutely necessary.
- You can point out the benefit to the respondent: a free cholesterol and A1c (blood sugar) test.
- Again, give the respondent the “Frequently Asked Questions” (FAQ) sheet, which provides answers to common questions about DBS.
- As the respondent brings up a concern such as safety, health concerns, logistics, or the like, attempt to acknowledge and address each issue.

The FAQ sheet, your experience, and your ability to address concerns will be effective strategies for overcoming objections.
B. **Scheduling an Appointment**

After explaining the DBS exam, continue to follow the steps outlined in the computer. You will be instructed to call EMSI to schedule a time (1) for the health technician to make a visit or (2) to have the health technician call the respondent to schedule a visit.

- EMSI has operators to answer the phone 5 a.m.-5 p.m., Pacific time, Monday through Friday. If at all possible, call during those hours to schedule the appointment.
- Tell the EMSI operator you are calling from L.A. FANS.
- If you must call at other times, be prepared to leave a message with your name, the respondent’s name and case ID #, the respondent’s preferred time for the appointment, and the best number to reach the respondent. Please speak clearly and slowly. Repeat numbers if necessary. EMSI will call the respondent to schedule an appointment.
- Tell EMSI if the technician should be a Spanish speaker.
- If you leave a message with EMSI, try to follow up with the respondent in a day or so to make sure the appointment has been scheduled.
- If you call EMSI after you have left the respondent’s home and make an appointment for that household, call the respondent to let him/her know.
- Try to schedule all appointments for a given household so the EMSI health technician can do them in a **single visit**. This will save costs and increase compliance.

When you call EMSI, have the following information ready, all of which will be on your computer screen:

- Respondent’s case ID number
- Respondent’s full name
- Address where the DBS will be collected (EMSI can go to locations other than the respondent’s home)
- Nearest cross-street
- Best telephone number to reach the respondent
- Second best telephone number to reach the respondent

C. **Helping the Health Technician**

- If you know you are returning to the home to conduct other interviews or health measures, try to schedule the health technician to come at that time. The rapport you have built with a respondent will be beneficial.
- If an address is difficult to locate, in addition to the nearest cross-street, provide the nearest main road, landmarks and directions to help the health technician locate the dwelling.