Polaris is conducting a research study called the National Survivor Study. Polaris is a national anti-trafficking organization that works to end the forced labor and sexual exploitation of people for profit in the United States. The purpose of this study is to understand survivors’ experiences and perspectives on different organizations, policies and resources that affect their ability to make a living and thrive after exiting their exploitation situation. We are asking you to consider being a part of this study because you are a survivor of such exploitation. We expect about 700 people across the United States to participate in this study.

This phase of the study is an online or phone survey. If you agree to be in this phase of the study, you will be asked to spend about 25 to 45 minutes answering questions either by yourself (online) or on the phone with someone from the research team reading the questions to you. If you choose to participate over the phone, the interviewer will collect your answers in the online survey but your conversation will NOT be audio recorded.

The questions in this survey focus on the needs and experiences of people who experienced forced labor or commercial sexual exploitation and their perspectives and experiences with some of the different systems that might serve them. There are no right or wrong answers. It is up to you, however, whether you want to participate. You may choose to not answer a particular question and you can choose to stop your participation at any time. There will be no penalty or negative effects for you.

We recognize that any discussion about your exploitation might be hard and could bring up feelings of anxiety. Your safety and wellness are our top priority. We will provide a handout with some resources, in case you wish to seek support after you complete the questionnaire. For long term support needs, the Trafficking Hotline is available 24/7 and can help you connect to services (Call: 888-737-7888; Text: BEFREE 233733).

We will use the information collected for research purposes only and every effort will be made to keep your personal information confidential. This research is covered by a Certificate of Confidentiality from the National Institutes of Health. This means that unless you expressly request it, researchers will not disclose or use information that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other action, suit, or proceeding, even if there is a court subpoena. In addition, the research team has signed a confidentiality agreement as part of our commitment to keeping all personally identifiable information in strictest confidence. Despite these safeguards, there is a risk that your information could be shared with others unintentionally. If this happens, we will notify you as soon as possible.

An exception to the promise of confidentiality is specific information about a child or elder neglected or in danger, intent to harm others, or intent to harm yourself. We will not ask you questions about these issues directly. However, we are obligated to report this information to the proper authorities if you share such information during a phone interview. If we need to report, we will tell you directly and clearly before we do so.

We will not ask for your name in the questionnaire and will never link your name or other information about you to what you say. All data collected will be stored separately from your name or other identifying information, and will be encrypted and stored in a secure place. Once we have compensated you for this survey, unless you agree to allow Polaris to hold your contact information for future opportunities, we will also destroy any records of your identifying or contact information at the
conclusion of the study.

No names will ever be used in any external or internal reporting, so what you say will not be linked to you directly.

In the future, Polaris may use information collected during this study to compare changes across time with future National Survivor Studies without your additional consent. However, the data collected during this study will not be distributed for research studies by other researchers.

There are no guaranteed benefits to you as a result of your participation in this study, but we hope that the information collected may benefit others like you as it will allow your voice and insights to improve the research experience for others.

There will be no costs to you. You will be offered $40 for your time, even if you choose not to answer certain questions or choose to end your participation early. We will offer you multiple ways to receive the reimbursement so that you are able to access these funds. You should receive the payment within one to two weeks after you complete the survey; depending on the reimbursement method you select, some may take longer to process. If you have any questions about the payments, please reach out to LIDS@polarisproject.org.

If you have any questions or want more information about the study or your participation in it, you may contact Sara Woldehanna, director of the research team, at (888) 693-1562. If you want to voice a complaint or concern about this research and prefer to raise this with someone from the survivor community on the community advisory group, please call (888) 693-1576 or fill out the form online at https://pproj.link/nss-gr.

If you have any other questions or complaints, you may contact a person not on the research team at the Biomedical Research Alliance of New York Institutional Review Board at (516) 318-6877 or at www.branyirb.com/concerns-about-research.

If you request it, we can send you a copy of this consent form using your choice of communication, email or US Postal Mail, or you can review it on the National Survivor Study webpage.

By consenting to this study you do not waive any of your legal rights. Giving consent here means that you have heard or read information about this study and agree to participate at this time. Being in this study is voluntary and you have the right to end participation at any time in the future.

Do you have any questions about the information I have shared with you?

Are you interested in participating in this study at this time?

Electronic consent as part of the survey or verbally for phone participants:

1. Do you agree to complete a questionnaire survey for the National Survivor Study based on the information we have just discussed?
   _____ Yes/No (No will exit the survey)

2. If you are willing to participate, how would you like to receive your reimbursement for participating?
   • A prepaid Polaris debit card sent to you where funds can be loaded by Polaris after each stage you participate in (preferred by Polaris and fastest once you have the card but requires a physical address)
● An online payment method - PayPal
● A prepaid online gift card that does not require a physical address
● Another method - someone from Polaris will contact you to make sure you get payment in another way

4. Do you agree to have your contact information kept on file with Polaris for the purposes of being alerted to future study or program opportunities or other benefits? You do not have to agree to have your information kept on file in order to participate in this study.

______ Yes/No