

University of North Texas Institutional Review Board

Informed Consent Form (for child participation)

Your child is being asked to be part of a research project being done by the University of North Texas Department of Psychology. Before agreeing to your child's participation in this research study, it is important that you read and understand the following explanation of the purpose, benefits and risks of the study and how it will be conducted.

Title of Study: Adolescent Emotions and Health-related Behaviors

Investigator: Dr. Heidemarie Blumenthal, University of North Texas (UNT) Department of Psychology.

Purpose of the Study: This study is about feelings that many teenagers experience, and things they may do when they feel that way. This research is being conducted in hopes of better understanding how different feelings (e.g., sadness, anxiety) and responses to those feelings (e.g., ignoring them) may be related to things some people do (e.g., drinking alcohol, sleep).

Study Procedures: This study includes four main parts today, and a telephone call three months later. First, your child will be asked to fill out several forms, mainly asking about typical feelings (e.g., "I worry I might look foolish"), ways of responding to stress (e.g., "I try not to feel anything," "I talk to someone about it"), physical development (e.g., "Do you think your development is earlier [about the same] or later than most other girls your age?"), and health-related behaviors (e.g., substance use, sleep habits). After answering these questions for about 20 minutes, she will move on to the second part – the computer task. Your child will be randomly assigned to either a computer game (i.e. throwing a ball back and forth with two other players) or a picture viewing task (images like snakes, sad faces); afterwards she will continue filling out the forms she started before. During these first two activities (filling out forms and the computer task), her heart rate, palm sweating, and muscle tension will be recorded using electrodes that will be attached to her skin using adhesive tape. In addition, breathing rate will be monitored using an expandable sensor that wraps around the chest (like a belt). Your child also be asked to provide six salivary (spit) samples during this time: one in just a few minutes, the second about 20 minutes later (right before the task), the third right after the task, and the fourth, fifth, and sixth over the next 40 minutes. Together, these two part should take about 1 ½ hours. Third, your child will complete an interview with the researcher. During the interview, the researcher will ask about specific health-related behaviors (e.g., substance use) over the past six months, and feelings she may experience (e.g., do get nervous when you are around other people; do you feel sad a lot). This portion of the study will take about one hour. This portion of the study will be audio taped and checked for reliability (i.e., did the interviewer hear what was said correctly); these recordings will be coded anonymously (with her participant number) and destroyed after reliability checks are completed. Fourth, your child will complete a second computer task that will include viewing pictures of things that make a lot of teens happy, like baby animals and people having fun. Finally, three months after the laboratory visit she will be asked to complete a brief telephone interview with a researcher. This phone call will include a smaller set of the

Office of Research Integrity & Compliance

University of North Texas

Last Updated: July 11, 2011

questions completed in the lab, and will take about 30 minutes. Importantly, telephone interviews will be scheduled at a time that is good for you/your child. Together, your child's participation in this study includes a 2½ - 3 hour laboratory visit (today) and a 30 minute telephone call in three months.

Foreseeable Risks: If your child tells us that she is planning to hurt herself or someone else, or that someone has been hurting her, we will have to talk about the case with a psychologist and local authorities so we can be sure everyone is safe.

The only expected risk from participating in this study is that your child may experience temporary discomfort associated with answering some of the questions (e.g., "I frequently feel anxious/sad") as well as any stress or anxiety associated with the task; importantly, these feelings should go away shortly after completing each portion of the study. Finally, it is important to note that all questions and activities are entirely voluntary, and thus if she wants to skip a question or stop an activity she is free to do so at any time.

Benefits to the Subjects or Others: Your child will learn about what researchers do, receive information regarding local mental health providers, and, once she has finished all parts of the study, the researcher will tell her about other studies that have looked at the way feelings and behaviors may be related among teens. More broadly, data collected in this program of research is aimed at helping psychologists understand how and why teenagers sometimes feel upset, and things they might do when they feel that way in hopes of helping future teens feel better.

Compensation for Participants: Your child will receive \$40 upon completion of the laboratory portion of this study, and \$5 (in the mail) for completion of the three month follow-up call.

Voluntary Participation and Right to Withdraw: At all times, your child's participation is completely voluntary. That means that she can stop at any time just by saying no. This also includes the right to skip over any portion of the study (e.g., questionnaires, placement of electrodes) if she does not feel comfortable engaging in that particular task but would still like to continue with the rest of the study. Importantly, there is no penalty for deciding not to participate in any portion of the study.

Procedures for Maintaining Confidentiality of Research Records: All of your child's answers are private to the extent allowed by law and University policy. No one else, including you, will know what her answers are. All information will be stored in a locked filing cabinet/computer and data (her answers) will be coded with subject numbers. Only the researcher will know her name, but will not tell it or identify her answers to anyone. The only exception to this is if she tells us that she plans to hurt herself or someone else; then we have to do whatever is necessary to keep everyone safe. A master sheet listing connecting information will be in a separate, password protected encrypted file, accessible only to the researchers involved in this study, and this information will be destroyed upon completion of all follow-up assessments. The confidentiality of your child's individual information will be maintained in any publications or presentations regarding this study.

Questions about the Study: If you have any questions about the study, please feel free to contact the Primary Investigator Dr. Heidemarie Blumenthal, email: Heidemarie.Blumenthal@unt.edu, office telephone: 565-4716, office location: 357 Terrill Hall, University of North Texas Department of Psychology.

Review for the Protection of Participants: This research study has been reviewed and approved by the UNT Institutional Review Board (IRB). The UNT IRB can be contacted at 940-565-4643 with any questions regarding the rights of research subjects.

Research Participants' Rights:

Your signature below indicates that you have read or have had read to you all of the above and that you agree to all of the following:

- The researcher has explained the study to you and answered all of your questions. You have been told the possible benefits and the potential risks and/or discomforts of the study.
- You understand that you do not have to allow your child to take part in this study, and your refusal to consent to her participation or your decision to withdraw her from the study will involve no penalty or loss of rights or benefits. The study personnel may choose to stop your child's participation at any time.
- You understand why the study is being conducted and how it will be performed.
- You understand your rights as the parent/guardian of a research participant and you voluntarily agree to her participation in this study.
- You have been told you will receive a copy of this form.

Printed Name of Participant

Signature of Participant

Date

For the Investigator or Designee: I certify that I have reviewed the contents of this form with the participant signing above. I have explained the possible benefits and the potential risks and/or discomforts of the study. It is my opinion that the participant understood the explanation.

Investigator or Designee

Date