



PARENTAL CONSENT FORM

Title: Mental Health Stigma Reduction Initiative Youth Survey

Protocol No.: MHSR-SS-2019

Sponsor: Project supported by Kaiser Permanente Northern California Community Benefit Programs

Investigator: Annie Bailey, MS, MPA, LMFT
Administrator
City of Fremont Human Services Department
Youth & Family Services Division
39155 Liberty Street, #E500
P.O. Box 5006
Fremont, CA 94537-5006

Daytime Phone Number: 510-574-2100 Ext 2111

24-hour Phone Number: N/A

Your child is being invited to take part in a research study to complete an on-line survey on student perceptions of mental health concerns. Research studies include only people who choose to be in them. Please take your time to read through this document. You are being asked as the parent/legal guardian to permit your child to take part in the study.

What should I know about this study?

- This form sums up the explanation of the study
- Taking part in this study is voluntary. Whether your child takes part is up to you
- You can choose for your child not to take part. There will be no penalty or loss of benefits to which you/your child are otherwise entitled
- You can agree to allow your child to take part and later change your mind. There will be no penalty or loss of benefits to which you/your child are otherwise entitled
- If you don't understand, ask questions by contacting the Investigator
- Ask all the questions you want before you decide

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Version Date: February 8, 2019

*APPROVED
February 8, 2019
Aspire IRB*

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Why is this study being done?

The purpose of this study is to understand student attitudes about mental health concerns as well as students' perception of their own parents' perspectives about mental health. Given the World Health Organization definition of Mental Health, the term "Mental health concerns" for the purpose of this study, refers to the state when students:

- 1) Struggle to cope with the normal stresses of life;
- 2) Have emotional concerns, such as sad feelings that don't go away, extreme anxiety, or easily upset;
- 3) May manage stress by unhealthy eating, substance use or self-harm behaviors.
- 4) Have difficulties with daily life, school functioning and/or relationships with others

Your child's responses to this study will enable us to better support students and families in getting help for mental health concerns.

About 300 students will take part in this study.

How long will it take for your child to participate in this study?

We expect that your child taking part in this study will last 20 minutes.

What happens to your child if I agree to allow my child to take part in this study?

You will be asked for an email to contact your child. Your child will be emailed a link to the survey and it will take your child no more than 20 minutes to complete. The entire survey process will take place online using the link your child is emailed. The survey is confidential and does not ask for your child's name or any specific personal information. The survey will only be seen by Principal Investigator Annie Bailey, Administrator, City of Fremont Human Services Department, and expert consultant Dr. Lawrence Yang and study team for analysis.

What are my child's responsibilities if I choose to let my child take part in this study?

If your child takes part in this study, your child will be responsible to:

- Complete the survey to the best of your child's ability though accessing the survey using the link that will be emailed to your child. Incomplete surveys will be accepted; however, we ask that your child try to answer all of the questions asked in the survey to the best of your child's ability.

Could being in this study affect your child?

- It is possible that some of the questions can lead to your child feeling anxious or sad.
- It is possible that your child may be tired, upset or not want to finish the survey.
- It is possible that your child may wish to learn more about mental health after finishing the survey.
- Your child can decide at any time to end the survey and submit it, even if not all of the questions are answered.
- If you or your child are interested, we can schedule a confidential meeting to talk more about your or your child's thoughts and feelings from participating in this study.
- If you or your child would like to speak with someone about the survey or about any concerns you have, or if your child has any discomfort or would like to talk to someone, then you or your child can contact the Crisis text line 24 hours by texting 741-741 or call 1-800-273-8255 (TALK) to speak with a counselor. You or your child can also call and ask to speak with a counselor at City of Fremont, Youth and Family Services [\(510\) 574-2100](tel:5105742100).

Will it cost me or my child money to take part in this study?

It will not cost you or your child any money to participate in this study.

Will being in this study benefit my child?

There are no benefits to you or your child from taking part in this study. We cannot promise any benefits to others from your child taking part in this study. However, possible benefits to others include the improvement of mental health services that serve students in middle school and high school. It is also possible that your child may wish to learn more about mental health after finishing the survey.

What other choices does my child have besides taking part in this study?

This study is not designed to diagnose, treat or prevent any type of mental health problem. You and your child's alternative are to not take part in the study.

What happens to the information collected for this study?

Information collected during this study will not include any personal information that can identify you or your child by name. We will do everything we can to keep your child's data secure, however, complete confidentiality cannot be promised. Your child's survey responses will be assigned a code number as we will not have any information to link surveys to individuals.



City of Fremont, Youth & Family Services

Mental Health Stigma Reduction Project – Youth Survey – Participant Consent Form

The study file that stores your child’s survey responses will be kept in a locked file cabinet at City of Fremont, Youth and Family Services, and only the Investigator and study staff will have access to the file. All records will be kept confidential to the extent permitted by law. All records will be destroyed ten years after completion of the study. Records will be available to Annie Bailey, Dr. Yang and study staff only.

If the results of this study are published, it will only contain aggregate data and nothing that personally identifies any of the study participants.

Who can answer my questions about this study?

If you have questions, concerns, or complaints, please call the principal investigator and study team at the phone number listed above on the first page. This study is being overseen by Aspire Independent Review Board (“IRB”). An IRB is a group of people who perform independent review of research studies. You may talk to them at 1-877-366-5414 (toll-free), email@aspire-irb.com if:

- You have questions, concerns, or complaints that are not being answered by the study team
- You are not getting answers from the study team
- You cannot reach the study team
- You want to talk to someone else about the study
- You have questions about your rights as a study participant

What if my child is affected because of taking part in this study?

If you believe that your child has been affected as a result of participating in this study, please contact Annie Bailey at 510-574-2100 Ext 2111 so that you can review the matter and identify the resources that may be available to assist you or your child.

Can my child’s information be removed from this research without my approval?

The person in charge of this study can remove your child’s information from this study without your approval. Possible reasons for removal of your child’s information include:

- The study is canceled by the sponsor or Annie Bailey

We will tell you about any new information that may impact you or your child, or your choice for your child to stay in this study.



What happens if I agree for my child to be in this study, but I change my mind later?

Your child doesn't have to be in this study if you don't want them to. If your child does choose to take part, it is okay for your child to change his or her mind at any point while taking the survey, and okay for your child to stop the survey at any time, even if you choose for them to participate.

Will my child be paid for taking part in this study?

- For taking part in this study, your child is eligible to receive up to \$5, paid through an E-Gift card.
- Upon completion of the survey, your child will be provided a link to receive a one-time E-Gift card via an online system.
- This \$5 E-Gift card will be provided to your child immediately upon completion of the survey.
- If your child does not complete the survey, your child will not be provided the \$5 E-Gift card.



Statement of Consent:

If you provide consent for your child to participate in this study, we will ask you to provide an email and/or cell telephone contact to send the survey link to your child.

To return these signed forms to the City of Fremont Youth & Family Services, either:

- a. Scan and email the signed forms to MHsurvey@fremont.gov at City of Fremont; or
- b. Drop off the signed forms at the student’s school Main Office.

Your child will also be required to provide their written assent via a separate child assent form.

By signing this document, you are not giving up any of your legal rights.

Signature of adult capable of consent, child’s parent, or individual authorized to consent for the child	Date
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Printed name of adult	Date
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Email Contact for the Child

Please check this box if you wish to receive a copy of the final study results by email. The final study results will only report survey data in the aggregate (that is, no single person’s information or survey responses will be identifiable).



Project supported by Kaiser Permanente Northern California Community Benefit Programs



SURVEY PARTICIPANT ASSENT FORM

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- 1) Struggle to cope with the normal stresses of life;
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About 300 students will take part in this study.

How long will I be participating in this study?

We expect that your taking part in this study will last 20 minutes.

What happens to me if I agree to take part in this study?

You will be emailed a link to the survey to a cell phone number or email provided to the study team by your parent and it will take no more than 20 minutes to complete. The survey will take place online using the link you are texted or emailed. The survey confidential and does not ask for your name or any specific personal information. The survey will only be seen by Principal Investigator Annie Bailey, Administrator, City of Fremont Human Services Department, and expert consultant Dr. Lawrence Yang and the study team for analysis.

What are my responsibilities if I take part in this study?

If you take part in this study, you will be responsible to:

- Complete the survey to the best of your ability though accessing the survey using the link that will be emailed to you. Incomplete surveys will be accepted; however, we ask that you try to answer all of the questions asked in the survey to the best of your ability.

Could being in this study affect me?

- It is possible that some of the questions can lead you to feeling anxious or sad.
- It is possible that you may be tired, upset or may not want to finish the survey.
- It is possible that you may wish to learn more about mental health after finishing the survey.
- You can decide at any time to end the survey and submit it whether all the questions are answered or not.
- If you are interested, we can schedule a confidential meeting to talk more about your thoughts and feelings from participating in this study.
- If you would like to speak with someone about the survey or about any concerns you have, or if you have any discomfort or you would like to talk to someone, then you can contact the Crisis text line 24 hours by texting 741-741 or call 1-800-273-8255 (TALK) to speak with a counselor. You can also call and ask to speak with a counselor at the City of Fremont Youth and Family Services [\(510\) 574-2100](tel:5105742100).

Will it cost me money to take part in this study?

It will not cost you any money to participate in this study ~~and take this survey.~~

Will being in this study benefit me?

There are no benefits to you from your taking part in this study. We cannot promise any benefits to others from your taking part in this study. However, possible benefits to others include the improvement of mental health services that serve students in middle school and high school. It is also possible that you may wish to learn more about mental health after finishing the survey.

What other choices do I have besides taking part in this study?

This study is not designed to diagnose, treat or prevent any type of mental health problems. Your alternative is to not take part in the study.

What happens to the information collected for this study?

Information collected during this study will not include any information that can identify you by name. We will do everything we can to keep your data secure; however, complete confidentiality cannot be promised. Your survey responses will be assigned a code number as we will not have any information to link surveys to individuals. The study file that stores your survey responses will be kept in a locked file cabinet at City of Fremont Youth and Family Services and only the Investigator and study staff will have access to the file.

All records will be kept confidential to the extent permitted by law. All records will be destroyed ten years after completion of the study. Records will be available to Annie Bailey, Dr. Yang and study staff only. If the results of this study are published, it will only contain aggregate data and nothing that personally identifies any of the study participants.

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If you have questions, concerns, or complaints, or think this study has impacted you in any way, talk to the study team at the phone number listed above on the first page.

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- You are not getting answers from the study team.
- You cannot reach the study team.
- You want to talk to someone else about the study.
- You have questions about your rights as a study participant.

What if I am affected because of taking part in this study?

If you believe that you have been affected as a result of participating in this study, please contact Annie Bailey at 510-574-2100 Ext 2111 so that you can review the matter and identify the resources that may be available to assist you.

Can my information be removed from this study without my approval?

The person in charge of this study can remove your information from this study without your approval. Possible reasons for removal of your information include:

- The study is canceled by the sponsor or Annie Bailey

We will tell you about any new information that may impact you, or your choice to stay in this study.

What happens if I agree to be in this study, but I change my mind later?

You don't have to be in this study if you don't want to, even if your parent/legal guardian want you to participate. If you do take part, it is okay for you to change your mind at any point while taking the survey, and okay to stop the survey at any time.

Will I be paid for taking part in this study?

- For taking part in this study, you are eligible to receive up to \$5, paid through an E-Gift card.
- Upon completion of the survey, you will be provided a link to receive a one-time E-Gift card via an online system.
- This \$5 E-Gift card will be provided to you immediately upon completion of the survey.
- If you do not complete the survey, you will not be provided the \$5 E-Gift card.

Statement of Assent:

Your signature below means that you have read the information about the study and have had a chance to ask questions to help you understand what you will do in this study. By signing this assent form, you are not giving up any of your legal rights.

Your parent or legal guardian will be given another document called an informed consent that they are also required to sign if you choose to participate.

To return these signed forms to the City of Fremont Youth & Family Services, either:

- a. Scan and email the signed forms to MHsurvey@fremont.gov at City of Fremont; or
- b. Drop off the signed forms at the student's school Main Office.

Your signature documents your assent to take part in this study.

Printed name of Participant

Date

Signature of Participant

Date

Email of Participant (so that the study team can email you the survey link)

- Please check this box if you wish to receive a copy of the final study results by email. The final study results will only report survey data in the aggregate (that is, no single person's information or survey responses will be identifiable)



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