

# **REDCAP Script for Obtaining Informed Consent**

## **The Ohio State University Consent to Participate in Research**

Hello, my name is Dr. Kathy Wright. I am an African American Assistant Professor at The Ohio State University in the College of Nursing, and I am undertaking research-titled, "Self-Care and Blood Pressure in Caregivers of Black and African-Americans with Dementia (Amos Medical Faculty Development Program Research Project)."

**This is a consent form for research participation.** It contains important information about this study and what to expect if you decide to participate.

**Your participation is voluntary.**

Please consider the information carefully. Feel free to ask questions before making your decision whether or not to participate.

**Purpose:** Taking care of a family member or friend with living with Alzheimer's disease or other dementias can be challenging. In 2019, informal caregivers provided 18.6 billion hours of unpaid care to people living with Alzheimer's disease and related dementias with African American women providing 60% of this type of care. The purpose of this study is to determine the feasibility of a group delivered intervention for stress and blood pressure in African American women caregivers.

## Procedures/Tasks:

There will be three study visits for data collection. Each study visit will take about 2 hours to complete during a telecommunication meeting by Zoom. To accommodate your schedule, we will have the option for the study visits to be broken up into smaller 1-hour visits.

At enrollment, we will ask you to provide us with your phone number so we can add it to our participant communication platform, Mosio . For the duration of your participation in the study, we will use Mosio to communicate with you via text messaging. Please note that you will not incur any additional charges for this service, over and above what you normally are charged by your mobile network provider for sending and receiving any text messages or transmitting/receiving any data. Only your name and phone number will be added to the Mosio platform; no other information will be entered. None of your information will be kept past the time required to complete the study.

The restricted website associated with Mosio will contain your first name, last name and phone number. The system will also store any messages that you respond with. This information might be seen by:

- Our study team: in order to send you text message reminders and/or to communicate with you.

42     • Mosio, its service representatives and companies that work with Mosio.

43     • Mosio: in order to provide the service Mosio and its service representatives will not

44       share your contact details with other third parties unless required by law or allowed by

45       this form. They will not contact you except for sending the study related messages.

46     • When you are no longer in the study, Mosio will stop sending you text messages. At

47       any point, if you reply to a message with STOP or QUIT, you will no longer receive

48       messages from the system. Study staff are also able to help you "opt out" of the

49       messaging service through the system.

50

51     There are no costs to you related to participation. You will not incur any additional charges

52       related to text messages to and from Mosio, over and above what you have normally.

53

54     You will complete questions about stress, eating habits, quality of life, and caregiving. You

55       will be asked to report your blood pressure using the automatic monitor that will be provided

56       to you.

57

58     You will complete a 7-day stress questionnaire sent to your cell phone through Mosio. We

59       will ask you to collect a small hair sample equal to about the same amount of hair you get

60       after combing or brushing. The hair sample is collected by cutting the sample from the back

61       of your head, close to the scalp, using scissors. The hair sample allows us to measure a stress

62       hormone. The site for the hair sample is covered by hair from the crown of your head and,

63       thus, is not visible following the sample collection. Hair samples are only collected twice, in

64       the beginning of the study and at 6 months after enrollment. The questions and 7-day stress

65       questions will be done three times: (1) at the first visit, (2) after you complete the group

66       delivered intervention sessions, and (3) at 6 months.

67

68     You may be advised, for informational purposes only, to contact a health provider if your

69       blood pressure is above a certain threshold at any time during the study.

70

71     At the end of the first study visit (baseline), you will be assigned to a study group by chance

72       using a process similar to the flip of a coin. This process is called randomization. Neither

73       you nor study staff will select the group to which you will be assigned. However, this

74       information can be obtained if you have a medical emergency. You will be randomly assigned

75       to the mindfulness plus healthy eating education group, mindfulness only, or healthy eating

76       only education group. All group sessions are held on Zoom, not in person. The group sessions

77       will be held weekly for 8 weeks and last approximately one hour each.

78

79     Once we have enrolled the first 30 people, you will begin the group online classes held by a

80       trained facilitator.

81

82     In the group sessions on Zoom, if you do not want to disclose your identity please let the

83       study team know. The study team will show you how to attend the sessions without showing

84       your face on the video or using your actual name for your privacy. You will also have the

85 option of creating an avatar. If you do not choose to use one of these privacy measures, other  
86 group participants and study staff will be able to see your image and your name during the  
87 group sessions. You will need a telephone, SmartPhone, or a computer with internet access to  
88 get into the classes. Devices that have a larger screen such as a laptop or IPad, are preferred  
89 for your comfort to access Zoom, but it is not required.  
90

91 The class will be held in the morning or evening, once a week for 8 weeks. There may be a  
92 weekend option based upon the participants' and research staffs' availability. Depending upon  
93 your group assignment, mindfulness plus healthy eating, mindfulness only, or healthy eating  
94 only you will learn the following:

- 95 – Taking blood pressure;
- 96 – Mindful awareness;
- 97 – Restful sleep;
- 98 – Physical activity;
- 99 – Healthy eating;
- 100 – Diary to keep track of self-care practices;

101  
102 When you have completed the 8-week group sessions, we will schedule the *second study visit*  
103 (approximately 1-3 weeks after you complete the Zoom group classes.) We will repeat all of  
104 the same questions, 7-day stress questionnaire sent to your cell phone, and blood pressure  
105 measurements. We will not take a hair sample at that time.

106  
107 After you have completed the 8 weekly group sessions, we will call you to do a brief check-in  
108 (approximately 5-10 minutes) twice a month for 3 months. This is to answer questions and  
109 reinforce what you learned in your group sessions.

110  
111 At the *final study visit*, we will repeat the same questionnaires, 7-day stress questionnaire, and  
112 blood pressure measurements. You will collect a hair sample at this time.

113  
114 **Duration:**

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116 The study is projected to last 6-12 months at most. This is because there may be a wait time  
117 from when you consent to be in the study and when you start the group classes on Zoom.  
118 Your active participation in the study will be approximately 20 hours over 6 months.  
119 However, we might like to contact you for up to one year after you start the study, in case we  
120 have questions.

121  
122 You may leave the study at any time. If you decide to stop participating in the study, there  
123 will be no penalty to you, and you will not lose any benefits to which you are otherwise  
124 entitled. Your decision will not affect your future relationship with The Ohio State University  
125 or The Ohio State University Wexner Medical Center.

127 **Risks and Benefits:**

128 There may be no direct benefit to you. However, your participation may provide data which  
129 will provide insight into ways African American women can reduce their blood pressure and  
130 improve their overall health.

131

132 *What risks, side effects or discomforts can I expect from being in the study?*

133

134 You will be asked about topics such as your stress, emotions, socioeconomic status, and your  
135 feelings which might create awkwardness or discomfort for you. Some of the questions may  
136 be upsetting, or you may feel uncomfortable answering them. If you do not wish to answer a  
137 question, you may skip it and go to the next question. Wearing the inflated blood pressure  
138 cuff may cause some temporary numbness and tingling in your hands.

139

140 As we are using the Internet, there is a chance that someone could access your online  
141 responses without permission. In some cases, this information could be used to identify you.  
142 While data may be coded, it will exist for an extended period of time, which could be affected  
143 if there is a data breach. Your data will be stored on a password protected database.  
144 While we ask other group participants to keep the discussion in the group confidential, we  
145 cannot guarantee this. Please keep this in mind when choosing what to share in the group  
146 setting.

147

148 **Confidentiality:**

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150 Efforts will be made to keep your study-related information confidential. However, there may  
151 be circumstances where this information must be released. For example, personal information  
152 regarding your participation in this study may be disclosed if required by state law. Study  
153 staff are required to report instances of violence, abuse and neglect against that they observe  
154 (including child and elder abuse, homicidal or suicidal threats). Also, your records may be  
155 reviewed by the following groups (as applicable to the research):

- 156 • Office for Human Research Protections or other federal, state, or international  
157 regulatory agencies;
- 158 • The Ohio State University Institutional Review Board or Office of Responsible  
159 Research Practices;
- 160 • The sponsor, if any, or agency (including the Food and Drug Administration for FDA-  
161 regulated research) supporting the study.

162

163 **Will my de-identified information be used or shared for future research?**

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165 Yes, it may be used or shared with other researchers without your additional informed  
166 consent.

167

168 **Would you like to be contacted for future research opportunities?**

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170         Yes, I want to be contacted about future research studies.

171         No, I do not want to be contacted about future research studies.

173  
174        **Incentives:**

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176        Each data collection visit will take approximately 2 hours to complete, and it can be done over  
177        two separate days if desired. You will not receive incentives for attending groups sessions or  
178        for participating in the check-in calls from study staff. You will receive a home blood  
179        pressure monitor at the beginning or the end of the study. The incentives schedule is as  
180        follows:

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182        After completion of the 1<sup>st</sup> study visit for baseline data, you will receive a \$25 retail e-  
183        gift card.

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185        After completion of the 2<sup>nd</sup> study visit at 3 months, you will receive a \$25 retail e-gift  
186        card.

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188        After completion of the 3<sup>rd</sup> visit at 6 months, you will receive a \$25 retail e-gift card.

189  
190        By law, monetary incentives are considered taxable income.

191  
192        **Participant Rights:**

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194        You may refuse to participate in this study without penalty or loss of benefits to which you  
195        are otherwise entitled. If you are a student or employee at Ohio State, your decision will not  
196        affect your grades or employment status.

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198        If you choose to participate in the study, you may discontinue participation at any time  
199        without penalty or loss of benefits. By agreeing to participate in the study, you do not give up  
200        any personal legal rights you may have as a participant in this study.

201  
202        An Institutional Review Board responsible for human subjects research at The Ohio State  
203        University reviewed this research project and found it to be acceptable, according to  
204        applicable state and federal regulations and University policies designed to protect the rights  
205        and welfare of research participants.

206  
207        **Contacts and Questions:**

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209        For questions, concerns, or complaints about the study, or you feel you have been harmed as a  
210        result of study participation, you may contact the principal investigator Kathy D. Wright at  
211        614-292-0309 or email [wright.2104@osu.edu](mailto:wright.2104@osu.edu)

213 For questions about your rights as a participant in this study or to discuss other study-related  
214 concerns or complaints with someone who is not part of the research team, you may contact  
215 the Office of Responsible Research Practices at 1-800-678-6251.

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217

**218 Do you have any questions about this research?**

219

**220 Do you agree to participate?**

221  Yes       No

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