

## Permission to Take Part in a Human Research Study



### University at Buffalo Institutional Review Board (UBIRB)

Office of Research Compliance | Clinical and Translational Research Center Room 5018  
875 Ellicott St. | Buffalo, NY 14203  
UB Federalwide Assurance ID#: FWA00008824

#### *Adult Consent Form to Participate in a Research Study*

**Title of research study: POWER-NET: Promoting Optimal Wellness and Empowering Relationships through Narrative Exposure Therapy (PHASE 1)**

**Version Date: Version 4: February 7, 2018**

**Investigators: Dr. Jennifer P. Read**

#### **Why am I being invited to take part in a research study?**

You are being invited to take part in a research study because you are 18-24 and receive services from Compass House.

#### **What should I know about a research study?**

- Someone will explain this research study to you.
- Whether or not you take part is up to you.
- You can choose not to take part.
- You can agree to take part and later change your mind.
- Your decision will not be held against you.
- You can ask all the questions you want before you decide.

#### **Who can I talk to?**

This study is being conducted by Dr. Jennifer Read. If you have questions, concerns, or complaints, or think the research has hurt you, talk to Dr. Jennifer Read at [jpread@buffalo.edu](mailto:jpread@buffalo.edu) or 716-645-0193. You may also contact the research participant advocate at 716-888-4845 or [researchadvocate@buffalo.edu](mailto:researchadvocate@buffalo.edu).

This research has been reviewed and approved by an Institutional Review Board ("IRB"). You may talk to them at (716) 888-4888 or email [ub-irb@buffalo.edu](mailto:ub-irb@buffalo.edu)

If:

- You have questions about your rights as a participant in this research
- Your questions, concerns, or complaints are not being answered by the research team.
- You cannot reach the research team.
- You want to talk to someone besides the research team.
- You want to get information or provide input about this research.

#### **Why is this research being done?**

The purpose of this phase of the study is to examine the emotional and other experiences of adolescents and young adults (ages 16-24) who have faced challenging life events, as well as to determine eligibility for Phase 2 of this research study. Findings from this study will further our understanding of adolescent mental health and will inform future interventions for adolescents who

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have experienced trauma. If it seems like Phase 2 of this study might be a good fit for you, you will be contacted by the research staff with information about how to participate.

### ***How long will the research last?***

We expect that this phase of the research study will take *a maximum of 1½ hours*.

### ***How many people will be studied?***

We expect about 120 adolescents in this phase of the research study.

### ***What happens if I say yes, I want to be in this research?***

If you agree to be a part of this phase of the research study, you will be asked to answer some questionnaires on a computer. Specifically, you will be asked to provide information about life experiences that you have had, your drug and alcohol use, and mental health symptoms you may have experienced, including feelings like depression, or distress about things that have happened to you. You will also be asked about your interest to participate in Phase 2 of this study. If there are any questions that make you uncomfortable or that you do not wish to answer, you may skip them or stop participating at any time.

### ***What are my responsibilities if I take part in this research?***

If you take part in this research, you will be responsible for answering one questionnaire.

### ***What happens if I do not want to be in this research?***

Your participation in this research study is voluntary. You may choose not to enroll in this study. Regardless of whether you chose to be in this study, the services you receive from Compass House will not change. **There are no new risks or benefits of not participating in the study since you are already receiving services at Compass House.**

### ***What happens if I say yes, but I change my mind later?***

You can withdraw your participation in this research study **at any time** and there will be no consequences to you from doing so. If you decide to withdraw from the study, no further data will be collected, but any information that you have provided will be kept and will be analyzed by the researcher. You may ask to have all the data that you have provided to be withdrawn from the study. In this case, none of your data will be analyzed. You can withdraw from the study by contacting the investigators by email, phone, or in person.

### ***Is there any way being in this study could be bad for me?***

Sometimes people feel uncomfortable responding to questions about upsetting events that have happened. For most people, this distress is not long lasting, and will finish by the time you leave the session. However, if you do experience distress, and this distress does not go away, you should discuss these feelings with the research staff or your counselor at Compass House. You can also contact Dr. Jennifer Read ([jpread@buffalo.edu](mailto:jpread@buffalo.edu) or (716)-645-0193), the principle investigator of this study.

In this study, we have taken every effort to reduce the risk of a breach of confidentiality. The information you provide will be linked with an ID number. Your questionnaire answers will be collected on a secure electronic application called REDCap. This information will then be stored on a protected electronic server. Any information you provide on paper forms (consent/assent forms) will be transported in a locked box and kept in a locked file cabinet, in the PI's locked office. Only research

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staff will have access to the electronic system and locked file cabinets. These paper forms will be shredded once the information has been entered into the electronic system. You will never be identified by name and all study staff have been trained in order to keep your information confidential.

If any additional risks are uncovered over the course of the study that may affect your willingness to continue participating, we will provide those risks to you in writing.

### ***Will being in this study help me in any way?***

We cannot promise any benefits to you or others from your taking part in this research. However, possible benefits include improvements in your mental health and a better understanding of yourself. This study can have benefits for other people too. That's because the things that we learn from you will help us better understand the experiences of other adolescents who experience trauma and a therapy that may better improve their health.

### ***What happens to the information collected for the research?***

Though results from this study may be published, you will not be personally identified in any reports or publications that may result from this study. Efforts will be made to limit the use and disclosure of your personal information, including research study and medical or education records, to people who have a need to review this information, for example a board that monitors your safety. We cannot promise complete secrecy. Organizations that may inspect and copy your information include the IRB at the University at Buffalo, which ensures your safety and the National Institutes of Health, which are the funders of this study. If during your participation in the research you disclose the intent to harm yourself, someone else or put your children at risk, the research team are required to report such a risk. This is to ensure your safety, or the safety of others.

### ***Can I be removed from the research without my OK?***

The principal investigator of the study can remove you from the research study without your approval if your safety or someone else's safety is compromised by participating in therapy or when answering questionnaires. We will tell you about any new information that may affect your health, welfare, or choice to stay in the research.

### ***What else do I need to know?***

If you agree to take part in this research study, we will pay you \$15 dollars for filling out the questionnaire.

This research is being funded by National Institutes of Health.

#### **Signature Block for Capable Adult**

Your signature documents your permission to take part in this research. By signing this form you are not waiving any of your legal rights, including the right to seek compensation for injury related to negligence or misconduct of those involved in the research.

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Signature of subject

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Date

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Printed name of subject

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Signature of person obtaining consent

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Date

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Printed name of person obtaining consent