# MICHIGAN STATE UNIVERSITY AND UNIVERSITY OF MICHIGAN CONSENT TO BE PART OF A RESEARCH STUDY

### 1. KEY INFORMATION ABOUT THE RESEARCHERS AND THIS STUDY

Study title: The Effects of Recent Stressors on Families

**Principal Investigators:** Alex Burt, Ph.D.

Professor of Psychology Michigan State University

Luke Hyde, Ph.D.

Associate Professor of Psychology

University of Michigan

**Study Sponsor:** University of Michigan, the National Institute of Health, and the Brain and Behavior Foundation

You are invited to take part in a research study that is being conducted by Michigan State University and the University of Michigan. Taking part in this research project is voluntary and you can stop participating at any time. Please take time to read this entire form and ask questions before deciding whether to take part in this research project.

If you would like to keep this form for your records, you can find it on the MSU Twin Research website, using the same link you used to access the survey. From this page you are able to download or print the form. Additionally, you can find resource packets for your county, or the county nearest to you, on the MSU Twin Research Website.

# 2. PURPOSE OF THIS STUDY

This research is being conducted by researchers at Michigan State University and the University of Michigan to examine the ways in which the COVID-19 pandemic, restrictions, and economic changes may impact Michigan families over time and how earlier family functioning may play a role in these impacts and future outcomes for youth and families. We may contact you to invite you to participate in follow up surveys about the novel coronavirus in the future, depending on the evolving circumstances of the pandemic.

# 3. WHO CAN PARTICIPATE IN THE STUDY

## 3.1 Who can take part in this study?

Twin pairs and their primary caregivers who participated in the study: *The Twin Study of Behavioral and Emotional Development in Children (TBED-C)* at Michigan State University *and* may have participated in the Michigan Twin Neurogenetics Survey (MTwiNS) at the University of Michigan *and* who currently reside in Michigan.

# 3.2 How many people are expected to take part in this study?

We expect to include up to 1,030 twin pains (2,060 adolescents/young adults) and up to 1,030 primary caregivers.

## 4. INFORMATION ABOUT STUDY PARTICIPATION

# 4.1 What will happen to me in this study?

**Questionnaires:** We are asking you to fill out questionnaires about the things you have recently been experiencing and how you have been feeling. Please call us with questions at (248) 716-5887.

4.2 How much of my time will be needed to take part in this study?

Filling out questionnaires is estimated to take about 30 minutes.

# 5. INFORMATION ABOUT STUDY RISKS AND BENEFITS

# 5.1 What risks will I face by taking part in the study? What will the researchers do to protect me against these risks?

The primary risk for this study is that the questionnaires/interviews may be time consuming and some participants may feel uncomfortable or upset reporting on the stress that they may be experiencing. You can skip any questions that you do not wish to answer. There is also a risk that your confidentiality may be breached. We will take responsible steps in order to protect your confidentiality.

**5.2** How could I benefit if I take part in this study? How could others benefit? You will not personally derive any direct benefit from participating in this study. However, your participation in this study will contribute to society's overall understanding of COVID-19 stressors and impacts on families and child development.

### 6. ENDING THE STUDY

# 6.1 If I want to stop participating in the study, what should I do?

You are free to stop participating and end the study at any time. If you decide to end the study before it is finished, please tell one of the persons listed in Section 9. "Contact Information". If you choose to tell the researchers why you are ending the study, your reasons may be kept as part of the study record. The researchers will keep the information collected about you for the research unless you ask us to delete it from our records. If the researchers have already used your information in a research analysis it will not be possible to remove your information.

### 7. FINANCIAL INFORMATION

# 7.1 Will I be paid or given anything for taking part in this study?

As a thank you for your participation you will receive a \$25 Amazon digital gift card code. If the electronic Amazon gift card is not a suitable option for you, please contact Brandi Randall (contact information provided below) to request payment by check.

## 8. PROTECTING AND SHARING RESEARCH INFORMATION

### 8.1 How will the researchers protect my information?

In order to protect your confidentiality, all information collected about you will be handled in the following ways: names and initials will not be kept on any data records

(e.g., questionnaire responses, etc.). Names linked to the ID numbers will be stored in a secure, triple-password protected file and in a secure, password protected database. Your identity or individual information will not be revealed in any reports about this study. We will summarize information from all participants. Your confidentiality will be protected to the maximum extent allowable by law.

# 8.1.1 Special Protections

This research holds a Certificate of Confidentiality (CoC) from the National Institutes of Health.

This means that we cannot be forced to disclose any research information that may identify you, even by a court subpoena, in any federal, state, or local civil, criminal, administrative, legislative, or other proceedings. In general, we will use the Certificate to resist any demands for information that would identify you, except as described below.

We will disclose your information for any purpose to which you have consented, as described in this informed consent document. This includes sharing your de-identified data with other researchers.

We will disclose your information if the National Institutes of Health, the agency funding this research, requests information to audit or evaluate our procedures.

We may also disclose your information to the appropriate authorities if we suspect or learn about cases of child or elder abuse or neglect, or that you may harm yourself or others.

Please note that a CoC does not prevent you from voluntarily releasing information about yourself or your involvement in this research. If an insurer, employer, or other person obtains your written consent to receive research information, then we will not use the Certificate to withhold that information.

More detailed information about Certificates may be found at the NIH CoC webpage: <a href="https://humansubjects.nih.gov/coc/index">https://humansubjects.nih.gov/coc/index</a>

### 8.2 Who will have access to my research records?

There are reasons why information about you may be used or seen by the researchers or others during or after this study. Examples include:

- University, government officials, study sponsors or funders, auditors, and/or the Institutional Review Board (IRB) may need the information to make sure that the study is done in a safe and proper manner.
- Federal or State law may require the study team to give information to government agencies. For example, for public health reasons.

# 8.3 What will happen to the information collected in this study?

We will keep the information we collect about you during the study for future research and for study recordkeeping. In the study, we collect information from you that can

directly identify you, including your initials to eliminate any discrepancies saving the data and for your name and contact information to process the study payment. However, after we receive your data, your name, initials, and other information that can directly identify you will be stored securely and separately from the research information (your responses to all questionnaires) we collected from you. The data collected by this study will be linked to data you previously provided as part of your participation in the *Child Twin Study of Behavior Environments and Genes* study and any past or future studies you may participate in via the MSU twin registry (e.g., the MTwiNS project at the University of Michigan). Connecting this data will help us understand how this pandemic has and will affect the trajectory of your children's and family's development overtime.

# 8.4 Will my information be used for future research or shared with others?

Data collected as part of this study may be used for future research. This research may be similar to this study or completely different. Additionally, data collected as part of this study may be shared for research purposes with researchers outside of the University of Michigan and Michigan State University. However, these outside researchers will never have access to your name, address, or any other identifying information. Data files used by outside researchers will identify you by ID number only.

Last, we may contact you to invite you to participate in follow up surveys about the novel coronavirus in the future, depending on the evolving circumstances of the pandemic.

## 9. CONTACT INFORMATION

# Who can I contact about this study?

Please contact the researchers listed below to:

- Obtain more information about the study
- Ask a question about the study procedures
- Leave the study before it is finished
- Express a concern about the study

# **Principal Investigators:**

Alex Burt, PhD

Email: burts@msu.edu Phone: (517) 432-5602 Michigan State University

# **Project Coordinators:**

Maria Hanelin

**Email:** hanelinm@msu.edu Michigan State University

### **Recruitment Coordinator:**

Brandi Randall

Email: msutrcovid19study@gmail.com

Phone: (248) 716-5887 Michigan State University Luke Hyde, PhD

Email: lukehyde@umich.edu Phone: (734) 763-4132 University of Michigan

Lara Stojanov

Email: larastoj@umich.edu Phone: (734) 623-9290 University of Michigan If you have questions about your rights as a research participant, or wish to obtain information, ask questions or discuss any concerns about this study with someone other than the researcher(s), please contact the following:

University of Michigan

Health Sciences and Behavioral Sciences Institutional Review Board (IRB-HSBS)

2800 Plymouth Road

Building 520, Room 1169 Ann Arbor, MI 48109-2800

Telephone: 734-936-0933 or toll free (866) 936-0933

Fax: 734-936-1852 E-mail: irbhsbs@umich.edu

You can also contact the University of Michigan Compliance Hotline at 1-866-990-0111.

To protect your confidentiality, please take the survey in a place where others cannot see your survey responses.

You indicate your voluntary consent to participate in this research study by completing the online questionnaire.