

# UNIVERSITY OF MICHIGAN CONSENT TO PARTICIPATE IN A RESEARCH STUDY

#### NAME OF STUDY AND RESEARCHERS

Title of Project: MyVoice - Real-Time Text Messaging Polling to Give Adolescents a Voice

#### Principal Investigator: Tammy Chang, MD, MPH, MS

#### **OVERVIEW AND PURPOSE**

This project will help us learn more about the thoughts and opinions of adolescents. We will use this information to make programs and policies that are relevant to you. We are hoping that up to 4,000 adolescents will participate.

### **DESCRIPTION OF YOUR INVOLVEMENT**

If you agree to participate, you'll be texted a link to an online survey with questions about yourself (for example, your age and grade). Then, you'll get **one text message poll a week from us.** A poll is a text message survey with 3-5 questions! You'll text back your thoughts about health topics and current events. We would love for you to participate as long as you are willing (or until you turn 25 when you are not eligible for the study anymore).

We may also send summaries (anonymous and completely de-identified) of the thoughts and opinions collected via MyVoice to the whole group to let participants know that their voice is being heard and to share interesting findings with the group.

We may occasionally have a gift to send to you in the mail. To receive it, you may need to give us an address, but we will delete this information immediately once we mail the gift and this information will not be connected with your responses.

Your text messages will not be read every day and should not be used for urgent issues. Each poll should take less than 5 minutes to complete. You can stop receiving the text messages by texting the word "STOP." You can also skip any question at any time by texting "SKIP".

#### **BENEFITS**

Answering our survey may not benefit you directly. We hope what we learn will help create better programs and policies for adolescents.

#### **RISKS AND DISCOMFORTS**

It's unlikely but possible that some of the questions may make you feel uncomfortable. If a question makes you uncomfortable, you can skip it by typing "skip". You will then see the next question.

Although every effort will be made to protect your identity, there is a very small risk of loss of privacy or confidentiality.

CONSENT ages 14-24 version 10.25.17



We store information that could identify you separately from your text message responses. We keep all MyVoice information in a secure and locked place or a secure and password- protected computer that only the MyVoice staff have access to.

## CONFIDENTIALITY

All MyVoice data (including your name and your phone number) are kept strictly confidential. We'll never give out individual information about any participant to anyone for any reason, period. Only specific MyVoice staff have access to names and cell phone numbers.

We'll use a secure online platform to store all the data we get back from you. The platform is password protected and has many security measures.

To help us protect your privacy, we have a Certificate of Confidentiality from the National Institutes of Health. Getting this Certificate shows just how serious we are about keeping your information safe! The researchers can use this Certificate to legally refuse to disclose information that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other proceedings, for example, if there is a court subpoena. The researchers will use the Certificate to resist any demands for information that would identify you.

The Certificate cannot be used to resist a demand for information from personnel of the United States federal or state government agency sponsoring the project and that will be used for auditing or program evaluation of agency funded projects or for information that must be disclosed in order to meet the requirements of the federal Food and Drug Administration (FDA). You should understand that a Certificate of Confidentiality does not prevent you or a member of your family from voluntarily releasing information about yourself or your involvement in this research. If an insurer, medical care provider, or other person obtains your written consent to receive research information, then the researchers will not use the Certificate to withhold that information.

The Certificate of Confidentiality will not be used to prevent disclosure to state or local authorities of information communicated to the team outside text message responses (ie, in person or phone interactions).

In order to prevent other people from reading the text messages you send us, you may want to either lock your phone or delete your text message responses.

We plan to publish the results of this project. We won't include any information that would identify you (like your name). We plan to use information from this project for future research.

There are some reasons why people other than the researchers may need access to your information. This would include people who work for organizations that make sure our research is done safely and properly including the University of Michigan. If you receive any payments for taking part in this project, the University of Michigan accounting department may need your name, address, payment amount, and other information for tax reporting.



# **VOLUNTARY NATURE OF THE STUDY**

It's completely up to you whether you want to be in the project. Even if you say yes, you can change your mind and stop at any time. You can skip any text message question that you don't want to answer, for any reason, and you don't have to tell us why. If you decide you don't want to participate anymore, text back the word "stop" and you won't get any more text messages from MyVoice.

We do not need your parent/guardian's permission in order for you to join the project but we still think it would be a good idea for you to tell them you are participating!

# **INCENTIVES TO BE IN THE STUDY**

We'll send you a dollar for each text message poll you complete even if you skip some questions. You'll get 3 extra dollars if you answer every poll in the three-month period. You'll have the opportunity to get \$15 every three months. We will text you a gift card code.

You will receive a \$5 bonus for completing the sign-up process.

You may also receive nominal discounts, coupons or gifts for participating.

#### **CONTACT INFORMATION**

If you have an urgent question or concern, call, text or email us at the number below. Remember not to respond to our text message questions with urgent questions and concerns!

Principal Investigator: Tammy Chang	Study Coordinator: Lauren Nichols
Telephone: 734-647-3305	Telephone: 734-647-3305
Email: tachang@med.umich.edu	Email: <u>lnicho@med.umich.edu</u>
MyVoice Contact Information:	
Call or text us: 734-249-9276	
Email us: hear.my.voice@umich.edu	

#### You may also express a concern about a study by contacting the Institutional Review Board:

University of Michigan Medical School Institutional Review Board (IRBMED) 2800 Plymouth Road Building 520, Room 3214 Ann Arbor, MI 48109-2800 734-763-4768 E-mail: <u>irbmed@umich.edu</u>

If you are concerned about a possible violation of your privacy or concerned about a study, you may contact the University of Michigan Health System Compliance Help Line at 1-866-990-0111.