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VERBAL ASSENT FORM FOR MINORS

Protocol Title: Measurement-based care to engage racial and ethnic minority youth in mental health treatment for depressive disorders: A pilot study Principal Investigator: Dr. Prerna G. Arora, Ph.D., Teachers College 212-678-3086, pa2542@tc.columbia.edu

I am asking you to be in this study because you are a teen that identifies as a racial or ethnic minority (for example, a teen that identifies as Black or African American, American Indian or Alaska Native, Asian American, Native Hawaiian or Other Pacific Islander, Hispanic or Latinx) and you have been in therapy for depression. We hope to have 10 teens like you in this research.

If you are in this research, this is what will happen:

You will participate in one confidential phone interview with a member of the research team. You will hear or read scenarios of therapists, teens, and their parents in treatment. The scenarios involve therapists working with the teen and parent to fill out and use surveys about the teen's depression and other issues they want to work on in therapy. The interviewer will then ask you questions about each of these scenarios. The interviewer will read the scenarios aloud to you, but also provide you with a written copy of the scenario. You can choose whether you want to receive a copy of the scenarios and questions by google voice text, email, or mail.

The interview will take about one hour and will be done over the phone or through zoom.

We, the research team, do not think you will personally be helped by being in this study. But we could learn something that will help other teens and their families. Our goal is to find treatment practices that therapists can use to help racial and ethnic minority teens stay in treatment and get the individualized help they deserve.

You might feel discomfort if any of the scenarios remind you of a challenging moment you have experienced or are currently experiencing. However, you may choose not to answer any questions you do not wish to answer and you can leave the interview at any time.

Both you and your parent/guardian must agree to you being in the study. Even if your parent or guardian says yes, you may still say no, and that is okay. You do not have to be in this study if you do not want to. Nothing bad will happen to you if you say no now or change your mind later after starting the study. You just need to tell me if you want to stop being in the study. I will ask you later if you want to stop or if you want to keep going. It's okay to say yes or no.

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If you are in the study, you will be paid with a \$20 amazon gift card. It will not cost you or your parent/guardian anything to be in this study.

I will keep the information I collect for the study safe and secure. I will not share information that has your name on it with people who are not part of the research team, unless we have to.

If you have questions, you can contact me by email at kmp2182@tc.columbia.edu or by phone/text at 732-836-8020.

If you want to talk to someone else besides the researcher you may contact the Teachers College Institutional Review Board (IRB) at 212-678-4105 or by email at IRB@tc.edu.

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Assent Statement

Before I proceed with the study, I want to be sure that you (the participant) understand what is being asked of you and to make sure you want to continue with the study.

Please acknowledge verbally with a "yes," or "no," response to this question. Would you like to participate in this study?

_____ "Yes, I agree to be in this study."

"No, I do not agree to be in this study."

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Researcher's Verification of Explanation

The assent is being conducted verbally and has been explained to the child in age-appropriate language. The child had an opportunity to ask questions and indicated assent. The child has been informed that the child can quit this study whenever the child wants to and it is perfectly OK to do so.

Printed name of Person Obtaining Assent: _____

Signature of Person Obtaining Assent:

Name of Child: _____ Age: _____

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