

## **INFORMED ASSENT FORM – CHILDREN**

### **Information Sheet**

**Study Title: “A study to assess the effectiveness of psycho-social intervention for selected internalizing behaviour problems among children of alcoholic parent’s at selected school Bangalore”**

**Investigator:** Dayananda BO

Dayananda BO is a lecturer in Kempegowda college of nursing, who wants to develop and evaluate the effectiveness of psycho-social intervention for selected internalizing behaviour problems among children of alcoholic parent’s at selected school Bangalore. The study will provide skills in managing internalizing behavioural problems like anxiety and depression. Children are our valuable assets, early diagnosis and treatment can help to transition successfully into the world of work and independent living.

The study and its procedures have been approved by the appropriate people and review boards. The study procedures involve no foreseeable risks or harm to you. The procedures include (1) Pretest on Socio demographic data sheet, questionnaires on internalizing behavioural problems and it will take 40 to 50 minutes (2) I will be administering psycho-social intervention biweekly for four weeks through group approach. After one month, 3<sup>rd</sup> month and 6<sup>th</sup> month post-test will be conducted with same questioners. You are free to ask any questions about the study or about being a subject.

Your participation in the study is voluntary; you are under no obligation to participate. You have the right to withdraw at any time. The study-data will be coded, and as such, it will not be linked to your name. Your identity will neither be disclosed neither when the study is being conducted nor when the study is reported / published. All study-data will be collected by Dayananda and stored in a secure place, and will not be shared with any person without your permission.

**Signature of the investigator**

Mr. Dayananda. BO  
Ph.D Research Scholar  
National consortium for Ph.D in nursing,  
Mobile no: 9535332183

**Signature of the participant**

## **Certificate of Assent**

I state that I am willing to participate in the study “**A study to assess the effectiveness of psycho-social intervention for selected internalizing behaviour problems among children of alcoholic parent’s at selected school Bangalore**” being conducted by Dayananda BO for her Ph.D. thesis.

I have been explained that:

1. I will undergo an assessment at the beginning of the study.
2. I will then be administered the intervention biweekly over a period of four weeks through group approach.
3. I will undergo a post assessment after one month, 3<sup>rd</sup> month and 6<sup>th</sup> month.

I have been further explained that:

1. Whatever information I provide will be used only for study purpose & kept in strict confidence.
2. I can approach Dayananda for professional assistance at any point during the study; I also have the right to seek clarification about the study procedures at any point of time.
3. I can withdraw my participation at any time during the study if I so desire.

I have fully understood the purpose and nature of the study and the role I am required to play as a participant. I hereby voluntarily consent to participate in the study.

## **Signature of the investigator**

Mr. Dayananda. BO  
Ph.D Research Scholar  
National consortium for Ph.D in nursing,  
Asst.Professor and HOD  
Dept. of Psychiatric Nursing  
Kempegowda college of Nursing  
K R Road, Bangalore-560004  
Mobile no: 9535332183

## **Signature of the participant**

## **Informed consent form – Parents**

**Study Title: “A study to assess the effectiveness of psycho-social intervention for selected internalizing behaviour problems among children of alcoholic parent’s at selected school Bangalore”**

### **Introduction**

The purpose of this form is to provide you information that may affect your decision as to whether or not to let your child participate in this research study. Read the information below and ask any questions you might have before deciding whether or not to give your permission for your child to take part. If you decide to let your child be involved in this study, this form will be used to record your permission.

### **Purpose of the Study**

If you agree, your child will be asked to participate in a research study about psycho-social intervention for behavioural problems. The purpose of this study is to reduce emotional and behavioural problems among children through counselling in school without interpreting academic activities.

### **What is my child going to be asked to do?**

They will be asked to fill questionnaires pertaining to internalizing behavioural problems and eight sessions of psycho-social intervention will be administered through group approach. This is a research study and, therefore, not intended to provide a medical or therapeutic diagnosis or treatment. The intervention provided in the course of this study is not necessarily equivalent to the standard method of prevention, diagnosis, or treatment of a health condition.

### **What are the risks involved in this study?**

There are no foreseeable risks to participating in this study.

### **What are the possible benefits of this study?**

The possible benefits of participation include improving coping skills, problem solving skills and reducing behavioural problems.

### **Does my child have to participate?**

No, your child’s participation in this study is voluntary. Your child may decline to participate or to withdraw from participation at any time. Withdrawal or refusing to participate will not

affect their relationship with school in anyway. You can agree to allow your child to be in the study now and change your mind later without any penalty.

This research study will take place during regular classroom activities; however, if you do not want your child to participate, an alternate activity will be available.

**What if my child does not want to participate?**

In addition to your permission, your child must agree to participate in the study. If your child does not want to participate they will not be included in the study and there will be no penalty. If your child initially agrees to be in the study they can change their mind later without any penalty.

**Will there be any compensation?**

Neither you nor your child will receive any type of payment participating in this study.

**How will your child's privacy and confidentiality be protected if s/he participates in this research study?**

Your child's privacy and the confidentiality of his/her data will be maintained. The data will contain no identifying information that could associate it with your child, or with your child's participation in any study.

**Whom to contact with questions about the study?**

Prior, during or after your participation you can contact the researcher for any questions or if you feel that you have been harmed. This study has been reviewed and approved by Review Board.

Mr. Dayananda. BO  
Ph.D Research Scholar  
National consortium for Ph.D in nursing,  
Kempegowda college of Nursing  
K R Road, Bangalore-560004  
Mobile no: 9535332183

**Signature**

You are making a decision about allowing your child to participate in this study. Your signature below indicates that you have read the information provided above and have decided to allow them to participate in the study. If you later decide that you wish to withdraw your permission for your child to participate in the study you may discontinue his or her participation at any time.

**Name of Child:**

**Signature of Parent(s) or Legal Guardian**

**Signature of Investigator**