

Consent to Participate in Research

Invitation to be Part of a Research Study

You are invited to be part of a research study. This consent form will help you choose whether or not to participate in the study. Feel free to ask if anything is not clear in this consent form.

1. I know that the objectives of this research are:

- Teaching emotion control skills
- Training in coping skills with depression and anxiety
- Increasing information about the psychological effects and consequences of emotional disorders

2. I know that my participation in this research is completely voluntary and I do not have to participate in this research.

I was assured that if I refused to participate in this study,

3. I know that even after agreeing to participate in the research, I can whenever I want, after informing the facilitator, or without informing the facilitator

I will leave the research and my withdrawal from the research will not deprive me of receiving the usual medical services.

4. The way I collaborate in this research is as follows:

Participate in regular meetings and complete forms and questionnaires

5. The potential benefits of my participation in this study are as follows:

- Increasing the knowledge and skills that will help me continue to live more peacefully and overcome my mental problems.

6. About the harms and possible side effects of participating in this study I was told that: So far no harm has been done to these trainings not reported.

7. I know that those involved in this research have kept all information about me confidential and are only allowed

Only publish the general and group results of this research without mentioning my name and details.

8. I know that the Research Ethics Committee can access my information to monitor my rights.

9. I know that I will not incur any of the costs of conducting research interventions as follows.

- Participate in meetings
- Presenting the results of interviews and personal results
- Counseling during the design and diagnostic interviews

10. Mr..... **Mohammad Hassan Yusufi**..... was introduced to me for a pass and I was told that whenever there is a general problem or question

The relationship with participating in the mentioned research happened to me to share with them and ask for guidance.

I was provided with his address and landline and mobile phone numbers as follows:

Bamyan Afghanistan. mhyosefiphdafgh@yahoo.com

11. I know that if during and after the research any problems, both physical and mental, due to participation in this research for me before

The treatment of complications, and its costs and related compensation will be the responsibility of the executor.

12. I know if I have any problems or objections to those involved or the research process, I can contact the Research Ethics Committee of the University of Science

13. This form of information and informed consent is set in two versions and after signing one copy is available to me and the other version in

Will be at the discretion of the executor.

14. Approved Code of Ethics:

Approval Number: Approval ID: **BAMAFGHEDU2019070**

Board Name: Bamyan IRB

Board Affiliation: Bamyan University

Afghanistan, Bamyan State, Bamyan University

ClinicalTrials.gov ID: [NCT04498949](https://clinicaltrials.gov/ct2/show/study/NCT04498949)

Data Monitoring: Yes

15. For further questions or follow-ups about this plan, the following addresses and telephone numbers have been provided to me.

Mohammad Hassan Yusufi: Department of Education Administration, Faculty of

Education, Bamyan University, Bamyan Afghanistan. mhyosefiphdafgh@yahoo.com

I read and understood the above

This form was also read to me in the presence of Mr. / Mrs.... as a witness.

After reading the form and at the time of signing, none of the elements of the plan had a physical presence.

At the time of signing this form, I had enough time to decide and I did not have any time limit for signing
Based on that, I express my informed consent to participate in this research.

Participant's signature

I oblige myself to fulfill the obligations related to the executor in the above provisions and
undertake to provide salaries and

The safety of the participant in this study.

Stamp and signature of the researcher