

**Growing up with Media**  
**Child Assent for Participation in Research**  
**Wave 6**

Before we begin, we ask that you read the following assent form. Please read it carefully.

Background/ Purpose

You are one of about 1,600 young people and their parents who we have asked to take the “Growing Up With Media Year 6” survey.

The purpose of the study is to better understand why some young people have healthy relationships while others have unhealthy relationships, and how media may or may not influence this. To understand this issue, some of the questions we ask are sensitive. Topics include exposure to violence including sexual violence, physical and verbal abuse, and related content seen on TV, the Internet, video games, and movies. We also will ask about things like substance use such as drinking and smoking and experiences with sexual pictures. We need to ask these questions so we can better understand why some young people have unhealthy relationships. Your answers will help researchers design programs that will help young people make healthy choices and live healthier lives.

Procedures

Your parent or guardian has finished the Adult Survey. Now, it is your turn to complete the Youth Survey. It will take you about 30 minutes.

It is important that you fill out the survey by yourself. You need to be in a place that is private and where you feel safe. No one should be able to see your answers. No one should tell you what your answers should be.

Incentives

We will mail you a gift card for \$35 when you finish the survey.

Risks and discomforts

Taking this survey will not help or hurt you. Some young people said that some of the questions in the last survey made them upset. You should know that the survey asks you about things you may have seen or done that might be hard to talk about.

### Benefits

Your answers help us learn things that teens and young adults are doing so that we can help them live more healthy lives. Your participation is very important.

### Rights of refusal and withdrawal

Your parent or guardian has told us that it is all right for you to be in this study. We also want to make sure that it is okay with you. You can choose to be in the study. You can choose not to be in the study at any time. Your parent or guardian also can choose to stop being in the study at any time. If you or your parent wants to stop taking part in the study, please email us at Michele@ISolutions4Kids.org. If you or your parent stops being in the study, we will not contact you again. It will not hurt you or your parent if either of you chooses not to be in the study.

You do not have to answer any question you do not want to for any reason. Your answers are important to us.

### Confidentiality

All of the answers you give will be kept private. We will not share your answers with your parents or anyone else outside of the research team. Your answers will be kept in a safe place. We will never associate your responses to any personal information you provide. Your answers will only be reported together with others and will not be traced back to you.

To help us protect your privacy, we have obtained a Certificate of Confidentiality from the Centers for Disease Control and Prevention. This Certificate means that we can keep your information private even if we get a court order telling us to share your information. We will use this Certificate to fight demands for your information unless you tell us you want us to share the information. But in the unlikely event that you tell us that you are being abused, then under applicable law we may be required to report this information to the appropriate authorities.

### Questions and contact numbers

If you have questions about the study, or any concerns about the study questions, please contact:

- Dr. Michele Ybarra at 1-877-302-6858 or Michele@ISolutions4Kids.org.

If you have questions about your rights as a participant in this study, or if you feel that you have been harmed in any way by taking part in this study, please contact:

- By mail:

Study Subject Adviser  
Chesapeake Research Review, Inc.  
7063 Columbia Gateway Drive, Suite 110  
Columbia, MD 21046

- or call collect: 410-884-2900
- or by email: [adviser@irbinfo.com](mailto:adviser@irbinfo.com)

Please reference the following number when contacting the Study Subject Adviser: Pro00004131.

If you feel very sad or upset after taking this survey, please talk to someone. You can:

- Call the National Mental Health Information Center for help finding a mental health professional in your area. Call toll-free at: 1-800-789-2647 or visit them online at <http://www.mentalhealth.org/>. The phone call and information is free.
- Call the RAINN (Rape Abuse and Incest National Network) Hotline anytime at: 1-800-656-HOPE, or get help on their online hotline at <http://www.rainn.org/>.

If you are in serious distress right now or at any time, such as thinking about hurting yourself, we urge you to contact the National Suicide Prevention Hotline at: 1 800-273-TALK (8255).

#### Your assent

Please print out this page with the contact information before moving on to the next page.

Please read everything. By selecting “Yes” below, you agree to take the survey. If you choose not to take the survey, we have just a few more questions for you.

Do you want to take this survey?

- 1 Yes, I want to take the survey.
- 2 No, I do not want to take the survey.

#### BASE: CHILD DOES NOT AGREE TO PARTICIPATE

Q1515 We thank you for your time and respect your decision not to participate in the Growing Up With Media survey. To help us design future surveys, please tell us why you did not agree to take the survey.