

Partners



COOK ISLANDS  
Ministry of Education  
Maraurau o te Pae Api'i



Funders



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## PARTICIPANT INFORMATION SHEET

(Parent and/or Caregiver – Child Under the Age of 16)

31 March 2014

**Project Title:** Pacific Science for Health Literacy Partnership Project  
**Name of Researcher:** Jacquie Bay, Director of LENScience

Dear Parents and Caregivers,

My name is Jacquie Bay and I am the Director of LENScience, a specialist science education unit at the Liggins Institute, University of Auckland. For the past two-years my team has been working with the Ministries of Education and Health in the Cook Islands and Tonga, along with teachers from key schools in each nation. We have been planning and developing an education programme to support learning for Pacific young people in science, health and related subjects. The programme is now underway and <<school name>> is a confirmed programme partner.

I am writing to ask you to consider allowing your child to participate in the evaluation of the programme. This will allow us to understand how the programme works from a young person's point of view.

You are also invited to participate in the evaluation which will help the project team understand the views of parents and families in regard to the programme.

The feedback that we get from teachers, parents and students that participate in the evaluation will help shape future programmes and education resources that may be used throughout Tonga, the Cook Islands, and eventually the wider Pacific region.

Your decision about whether you and your child take part in the evaluation will not affect your child's participation in the programme at school. You and your family will also be invited to all family events that occur as part of the programme.

### **What is involved for your child if you agree that they can take part?**

#### **Taking part in surveys:**

- If you agree to your child participating in this research, and he/she also agrees to take part, he/she will be asked to take part in a survey about science, school, diet and lifestyle before her/his class starts using the learning programme.
- Members of the research team will come to the school to take the students through this survey. Students who are not taking part will be provided with an alternative learning activity by their class teacher.
- Between 6-12 weeks after the students have taken part in the learning programme, the research team will return to school to repeat the survey with the students.
- Your child will also be asked to take part in follow-up surveys 1- and 2-years after the programme. These surveys can be completed either by a member of the research team meeting with you and your child, or your child can complete them independently and return the survey to school or in the post/email, *whichever you prefer*.

#### **Taking part in focus group meetings:**

- If you agree, your child **may** also be asked to take part in a focus groups meeting about 12-weeks after the programme to discuss their experience in the programme with other students and a researcher.
- The focus groups will take place at school. They involve 6-8 students, and take between 30 and 60 minutes.
- All participants in the focus group will be asked to agree to keep matters discussed in the group confidential. However we cannot guarantee that all students will abide by this.
- Participants in focus groups will be offered the opportunity to leave the group at any stage, or choose not to respond to a particular question.
- The conversations are digitally recorded and afterwards they are typed-up by a member of the research team or a professional transcriber. Everyone that works on this process is required to sign a form agreeing that they will not talk about the content of the focus group meetings with people outside the research team.

### **What is involved for you and your child if you also agree to take part?**

#### **Taking part in parent surveys:**

- If you agree to participate in this research, we would ask you to complete a survey, (taking no longer than 15-20 minutes), before your child's class start the learning programme. The survey is about school, diet and lifestyle. A member of the research team can meet with you to complete the survey, or talk you through it over the phone. Alternatively you can fill it in either on-line or via post; whichever would be most convenient for you.
- We would ask you to take part in a further similar survey for parents around the following dates:  
[date 1] | [date 2] | [date 3]

### **Taking part in family-group meetings:**

- If you and your child agree, you and your child **may** be asked to take part in family-group meetings 3-months, 1-year, and 2-years after the programme has finished in school. These will help us understand the long-term effect of the programme for you and your child.
- The family-group meetings take place at your home at a time that suits you and the research team. They take between 30 and 60 minutes.
- As with the student focus groups, you and your child would be offered the opportunity to leave the family-meeting at any stage, or choose not to respond to a particular question.
- The conversations will be digitally recorded and afterwards the conversations will be written down by a member of the research team or a professional transcriber. Everyone that works on this process is required to sign a form agreeing that they will not talk about the content of the focus group meetings with people outside the research team.

### **How will you ensure that my name and my child's name be kept private?**

- All questionnaires will be named so that responses can be matched, but when the results are reported, we will not be able to match responses to participating people or schools. No real names or other identifying features will be used in reports about the project.
- If any unexpected findings of a sensitive nature to you and/or your family should arise during the course of the study, which are related or unrelated to the study, they will be treated in a strictly confidential and appropriate manner by the researcher.

### **Potential future studies**

- Dependent on the findings of this study, we may wish to contact participants in the future to request voluntary participation in follow-up studies to find out whether the impact of the programme lasts into adulthood.
- These are likely to occur 2-3 times between 2018 and 2031 and involve an on-line survey and possibly an interview.
- You can opt-in or opt-out of this by indicating your choice on the attached consent form.
- Giving permission for us to contact you in the future does not mean that you have to agree to take part in any follow-up studies.

### **Data Storage**

- All data will be stored electronically on a secure network drive within the University of Auckland and locally at the Ministry of Education for a period of at least 6 years from the time of the research.
- Beyond this period, if you have given us permission to contact you in the future to speak to you about follow-up studies, your data will be stored for a longer period (up to 2031).
- After 6 years, or at 2031, as appropriate, the data will be destroyed.

### **Voluntary Participation**

- Participation in the programme is voluntary for you and your child.
- You and/or your child may withdraw from the evaluation processes (surveys, focus groups and family-meetings) at any stage up until December 1<sup>st</sup>, 2016.
- You and/or your child may withdraw permission for your data to be used at any point in the study up to 2031. If we have already reported on the data, we cannot change the reporting, but we would remove your data for any future analysis and reporting.

- Your child's principal and teachers have given their assurance that whether you and your child participate or not, this will not affect relationships for you or your child with the school, and will not affect assessment grades for your child.

If you would like a member of the research team to come and talk to you about this study before you decide whether to participate or not, please call the team on xxxxx and we will arrange for a member of the team to meet with you.

If you have any queries or wish to know more about this research you may contact me directly:

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For queries regarding ethical concerns please contact:

The Chair, University of Auckland Human Participants Ethics Committee, The University of Auckland,  
Office of the Vice Chancellor, Private Bag 92019, Auckland, Tel. +64 9 3737599 ext 83711 or the  
Office of the Prime Minister of << country name >> on << xxx >>

Yours sincerely



Jacquie Bay  
Director, LENSscience

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## CONSENT FORM

(Parent and/or Caregiver – Child Under the Age of 16)

THIS FORM WILL BE HELD FOR A MINIMUM OF 6 YEARS

**Project Title:** Pacific Science for Health Literacy Partnership Project  
**Principal Investigator:** Jacquie Bay, Director LENSscience, Liggins Institute, University of Auckland

I have read the Participant Information Sheet (Parent and/or Caregiver – Child Under the Age of 16) and been given the opportunity to ask any questions and have them answered.

I understand that:

- My child and I are being invited to participate in research relating to evaluation of the *Pacific Science for Health Literacy Project*.
- My child and/or I can withdraw from the research at any time up until December 1<sup>st</sup> 2016 without giving a reason.
- If I consent to my child participating, this will involve them in answering four surveys of 30-40 minutes in length. These will be held at the beginning and end of the school programme, and at 1- and 2-years after the school programme.
- If I agree to participate this will involve me answering four 15-20 minute surveys, held near the start and completion of the education programme, and also 1- and 2-years after completion of the programme.
- If I consent to myself and my child participating, we **may** be asked to participate in a focus group at the end of the module of work, and again 1- and 2-years later.
- If I agree to my child and I being part of a focus group, and he/she is in agreement, this will be recorded and a person who has signed a confidentiality agreement will transcribe the recording.
- Assurance has been obtained from the school Principal and teachers that my decision regarding participation by my child or myself will not affect my relationship with the school or grades for my child.

- I can decide whether or not to allow the research team to possibly contact me and/or my child in the future for follow-up studies. Giving my permission to be contacted does not mean I have to take part. My child and I have the right to withdraw this permission at any stage up to December 1<sup>st</sup> 2031.
- Data will be stored electronically on a secure network drive within the University of Auckland for a period of at least 6 years before being destroyed.
- If I have given my permission for the team to contact me in the future regarding follow-up studies, my data will be stored until December 1<sup>st</sup> 2031, before being destroyed.
- The final research report and any papers written will include no reference to individual participants or schools.

**Please complete each section:**

	Yes (Agree)	No (Do not agree)
<b>My Participation as a Parent</b>		
I agree to participate in research surveys as a parent/caregiver.		
I agree to potentially being selected to be part of a focus group with my child.		
If selected, I agree to the focus group being recorded.		
I agree to allowing the research team to contact me in the future (between 2016 and 2031) to inform me about follow-up studies that I may wish to take part in.		
<b>My Child's Participation</b>		
I agree to my child participating in research surveys.		
I agree to my child potentially being selected to be part of a focus group with other students.		
I agree to my child potentially being selected to be part of a focus group with me.		
If selected, I agree to the focus group meetings being recorded.		
I agree to allowing the research team to contact my child in the future (between 2018 and 2031) to inform my child about follow-up studies that they may wish to take part in.		

I hereby give my informed consent for participation by my child and myself in the Pacific Science for Health Literacy Partnership Project as stated above.

Parent / Caregiver Name			Relationship to child		
Child's Full Name					
Child's Date of Birth			Child's School		
Home address					
Postal Address, if different from above					
Contact phone number (day time)			Contact phone number (evening)	Cell phone	
Email Address (Parent)					
Parent / Caregiver Signature			Date:		

Please indicate how you would like you and your child to receive information and complete surveys during the study period (2014-2017).			
	You	Your Child	Please list contact details for your child:
Paper copies sent in the post with a stamped addressed envelope for return provided			Postal Address (if different to yours):
Via email with a link to a secure on-line form			Email:
Via text message with a link to a secure on-line message and on-line form			Cell Phone:

Would you like to receive updates about the study findings?	By post	By email	No thanks

The study will take place over a period of 3-years with potential follow up for a further 15-years. It would help us if you could give the names and details of two people that we could contact if by any chance we lose touch with you during the study.		
	Contact 1:	Contact 2:
Name		
Home contact number		
Mobile contact number		
Email		
Relationship to your family		