ADULT CONSENT FORM – Mother
OKLAHOMA STATE UNIVERSITY

PROJECT TITLE: Dads and Development of Infants in Oklahoma

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PURPOSE:
This study wants to understand the early life experiences for infants that help infants bounce back from hardships. We are interested in learning how families cope with common and uncommon stressors, how they support each other, and how family interactions affect the health of the entire family and the development of infants. We know very little about how fathers influence infant development and mothers' health. Therefore, we are studying different types of families to see how family members influence each other's health.

PROCEDURES
As a participant in this study, you will complete 4 parts.
Part 1: You will complete an enrollment session online that will ask you questions about your demographics, social support, relationship satisfaction, your family history, pregnancy history, and your health (approximately 1 hour).

Part 2: You will complete 6 monthly online questionnaires that ask you about your demographics, social support, relationship satisfaction, infants' health, and your health. You will complete the questionnaires once a month for six months after the birth of the child (30 minutes each). All online questionnaires will be a link to a survey that is sent to either your cell phone or email address (your choice).

Part 3: When the infant is 4-months old you will complete a home visit. The home visit will consist of two research assistants coming to your home and having you, your infant, and the infant's father (if available) complete a series of interactive tasks. These tasks will be video recorded. In addition, you, your infant, and the infant's father will also provide samples of saliva before (1 sample) and after engaging in the interactive tasks (2 samples) to understand how hormones in your saliva are related to parenting behaviors (90 minutes).

Part 4: When the infant is 12- and 18-months old, you will complete two additional home visits. These visits will be nearly identical to the first where you will complete a series of interactive tasks with your infant. These tasks will be video recorded, and you will provide samples of saliva before (1 sample) and after (1 sample) engaging in the interactive tasks. We will use the saliva to understand how hormones and immune system markers in your saliva or related to parenting behaviors (90 minutes). Additionally, you will complete the same online questionnaires you did when your infant was 4 months old.

_____ Your initials here indicate your permission to obtain saliva samples from your infant during the home visit portion (Parts 3 & 4) of the study.

_____ Your initials here indicate your permission to video record your interactions with your infant during the home visit (Parts 3 & 4 of the study).

RISKS OF PARTICIPATION:
There are no known risks associated with this project that are greater than those ordinarily encountered in daily life. Many of the questions asked in the surveys are similar to those during a routine medical exam. Some of the questions may be sensitive. You have the right to choose not to answer questions you find too sensitive.

BENEFITS OF PARTICIPATION:
By participating in this study, you will help us understand how biology and parenting behavior are related to infant health and development. If you are interested, we will send you a copy of the results of the study when it is finished.

CONFIDENTIALITY:
The records of this study will be kept private. Any written results will discuss group findings and will not include information that will identify you. Research records will be stored on a password protected computer in a locked office and only researchers and individuals responsible for research oversight will have access to the records. In addition, your identity will only ever be linked to your responses temporarily on a single password-protected file stored on the Primary Investigator's office computer. The reason for this is so that we can contact you over the 18 months you are participating in the study. Once all data has been collected and coded, it will be only linked to your arbitrary ID number, and the record linking your name to your ID will be destroyed. Video recordings will be destroyed as soon as they are coded (approximately 3 months after your participation) to further protect your identity.

To help us protect your privacy, we have obtained a Certificate of Confidentiality from the National Institutes of Health (NIH). The researchers can use this Certificate to legally refuse to disclose information that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other proceedings, for example, if there is a court subpoena. The researchers will use the Certificate to resist any demands for information that would identify you.

The Certificate of Confidentiality will not be used to prevent disclosure to state or local authorities of abuse or neglect. Under Oklahoma law, we must report information about known or reasonably suspected incidents of abuse or neglect of a child including physical, sexual, emotional, and financial abuse or neglect. If any investigator has or is given such information, he or she may be required to report such information to the appropriate authorities.

COMPENSATION:
You will receive a total of $230 *per family unit* for your participation through research debit card. You will receive $20 during Part 1. You will receive $5 for each monthly assessment in Part 2 for a total of $30. You will receive $30 during Part 3. For Part 4, you will receive $50 for completing each (of two) home visit, and $25 for each monthly questionnaire assessment, for a total of $150 per family. In the event of separation from your partner, payment will go to the infant's primary caregiver.

CONTACTS:
You may contact any of the researchers at the following addresses and phone numbers, should you desire to discuss your participation in the study and/or request information about the results of the study: Jennifer Byrd-Craven, Ph.D., 116 N Murray Hall, Dept. of Psychology, Oklahoma State University, Stillwater, OK 74078, (405) 744-4277. If you have questions about your rights as a research volunteer, you may contact the IRB Office and/or IRB Chair Dr. Hugh Crethar at 223 Scott Hall, Stillwater, OK 74078, 405-744-3377 or irb@okstate.edu

PARTICIPANT RIGHTS:
I understand that my participation is voluntary, that there is no penalty for refusal to participate, and that I am free to withdraw my consent and participation in this project at any time, without penalty. Should I choose to withdraw participation prior to the completion of the study, I understand that I will receive compensation up to the point of my withdrawal from the study.

CONSENT DOCUMENTATION:
I have been fully informed about the procedures listed here. I am aware of what I will be asked to do and of the benefits of my participation. I also understand the following statements:

I affirm that I am 18 years of age or older.

I have read and fully understand this consent form. I sign it freely and voluntarily. A copy of this form will be given to me. I hereby give permission for my participation in this study.

_____ _____
Signature of Participant Date

I certify that I have personally explained this document before requesting that the participant sign it.

_____ _____
Signature of Researcher Date