Attachment 7B. Focus Group Informed Consent

NOTE: This form is emailed to participants when they opt in to the Focus Groups to sign and return. They will also maintain a copy in their email

Informed Consent Authorization to Participate in a Research Project

Participant First and Last Name: (Please print): _____

INSTRUCTIONS: Please read through this document to understand your rights as a research participant. If you agree to the terms set forth in this document, sign and date the bottom in the space indicated. Next, email this document back to the focus group task lead, <INSERT NAME>, at <INSERT EMAIL>@rti.org. After this consent form is received, <INSERT NAME> will email you the date, time, and link for participation in the focus group.

1. Study purpose --- The purpose of this research study is to learn about the experiences of individuals who have recently gone through a natural disaster. The information you share will be used to help understand how households prepare for such events and what kind of things are needed most in the immediate aftermath of a disaster. An important focus of the study will be on why people may or may not create emergency supply kits and whether kits help with self-sufficiency after a disaster.

2. Study procedures --- You are being asked to participate in a research study that uses online focus groups to obtain information about the experiences of household that recently went through a natural disaster. People living in the geographic area impacted by <DISASTER NAME> have been invited to participate via social media, bulletin boards, and Craigslist.

   Your participation is voluntary, and you can decide not to participate at any time. You will be asked to voluntarily provide your demographic information such as your age, sex, and race/ethnic status. This information will be summarized for all participants to ensure we obtain a diverse group of study participants. All identifying information will be destroyed at the end of the study.

   The focus group will last approximately 2 hours and will be led by a moderator who works for RTI International, a non-profit research organization collaborating with the CDC on this project. The focus group will be audio-recorded; if you do not agree to being recorded, you should not agree to participate. The moderator will ask open-ended questions related to your experience during <DISASTER NAME> and what kind of preparations your household made before <DISASTER NAME>. The focus group discussion will be recorded and transcribed following the session, but you will not be identified individually in the transcripts. No names will be used. References in transcripts will only be made to “Participant 1”, “Participant 2”, etc.

   Through your email address, you will be given a $40 digital gift card in appreciation for your time and willingness to share your experience at the end of the focus group.

3. Study Risks --- There are no anticipated risks and/or discomforts of your involvement in this research study outside of those that occur in everyday life. However, some participants may find sharing their recent experience with a natural disaster to be sensitive. If an emotional response occurs, the moderator will manage this by sharing a crisis hotline number at the end of the discussion. You may withdraw from the study at any time. Your name will not be on the transcripts of the focus group or your demographic form. Any identifying information will be destroyed at the

end of the study.

4. This research is covered by a Certificate of Confidentiality from the Centers for Disease Control and Prevention. The researchers with this Certificate may not disclose or use information, documents, or biospecimens that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other action, suit, or proceeding, or be used as evidence, for example, if there is a court subpoena, unless you have consented for this use. Information, documents, or biospecimens protected by this Certificate cannot be disclosed to anyone else who is not connected with the research except, if there is a federal, state, or local law that requires disclosure (such as to report child abuse or communicable diseases but not for federal, state, or local civil, criminal, administrative, legislative, or other proceedings, see below); if you have consented to the disclosure, including for your medical treatment; or if it is used for other scientific research, as allowed by federal regulations protecting research subjects.

5. Contact Information --- If you have any questions about this project, you can call 1-770-488-3422 If you have questions about your rights as a research participant, please contact CDC's Human Research Protection Office at 404.639.7570 or huma@cdc.gov.

Participant's Signature:_____ Date: _____

INSTRUCTIONS: Once you have signed this form, please email it back to <INSERT NAME> at <INSERT EMAIL>@rti.org.