



Consent Form to Participate in a Research Study

Title of Research Study: Assessing how different types of nutrition education lessons impact students' learning about healthy eating

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Introduction

We are inviting you and your child to participate in a **voluntary and optional** research study. Please read the information about the study presented in this form, which includes details on the study's procedures, risks and benefits that you should know before you decide if you would like your child to take part. You should take as much time as you need to make your decision. Before you make your decision, you should ask the study team at arcand.lab.kids@ontariotechu.ca to explain anything that you do not understand or would like to clarify before signing this consent form.

This study has been reviewed by the University of Ontario Institute of Technology (Ontario Tech University) Research Ethics Board [#17109] on [12/15/2022].

Purpose and Procedure

Purpose

We are teachers and researchers at Ontario Tech University, who are working with your child's school board and classroom teacher to test different strategies to teach children about food and nutrition.

We are asking for your consent for you and your child to participate in our research study. If you provide consent, your child will also be asked for his/her/their assent to participate in their classroom, prior to starting the study. Assent means expressing approval or saying yes to participating.

Procedure

In this study, we will test two ways of teaching children about nutrition. Your child's class will be randomized (like the flip of a coin) to receive one of two sets of nutrition education lesson plans. Both sets of nutrition education lesson plans focus on Canada's Food Guide and are aligned with Ontario curriculum. They are designed to be fun and interactive, and they have been created by teachers and Registered Dietitians. The nutrition education provided to your child's classroom will be given by an Ontario Tech University certified teacher (not their usual

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classroom teacher). The lesson plans will last 35-40 minutes per day over five consecutive days.

In order to understand which nutrition education lesson plans are best for students' learning, we will assess how students' nutrition knowledge, behaviours and attitudes change by participating in the nutrition education activities. We will collect the following information from you and your child at various timepoints:

- **Parent demographic questionnaire (electronic, 8 minutes at one timepoint):** To help interpret the study results, we would like to learn more about you, your child and your family. This online questionnaire will be completed before the nutrition education lessons begin.
- **Parent nutrition behaviours questionnaire (electronic, 8 minutes at four time points):** We would like you to answer questions about your child's nutrition behaviours at home in an online questionnaire. We would like parents to answer these questions 4 times: before the nutrition education lessons begin, immediately after the nutrition education lessons are completed and 4 weeks and 3 months after the nutrition education lessons have been completed.
- **Child/Parent food screener (electronic, 10 minutes at four timepoints):** We would like you to work with your child and answer questions about what your child eats in an online questionnaire at 4 timepoints: before the nutrition education lessons begin, immediately after the nutrition education lessons are completed and 4 weeks and 3 months after the nutrition education lessons have been completed.
- **Child nutrition attitudes and knowledge questionnaire (paper-based in the classroom, 10 minutes):** We will ask your child to answer questions about their knowledge of and attitudes towards healthy eating, using a short questionnaire that will be completed in the classroom with the research team. We would like your child to answer these questions 4 times: before the nutrition education lessons begin on Monday, immediately after the nutrition education lessons are completed on Friday and 4 weeks and 3 months after the nutrition education lessons have been completed.
- **Child education acceptability questionnaire (paper-based in the classroom, 5 minutes):** On the last day of the nutrition education activities, we will your child to answer some questions about the acceptability of their learning experience (e.g., enjoyment of the activities, level of difficulty) with the nutrition education lessons they completed in the classroom using a short questionnaire. We would like your child to answer these questions in the classroom with the research team on Friday after the nutrition education lessons are complete.

Potential Benefits

Potential benefits for participation in this study include: learning through engaging nutrition education activities that align with Canada's Food Guide and Ontario Health and Physical Education curriculum requirements for "Healthy Eating". Importantly, only data collected from participants who have given consent/assent to participate in the research study will be used in the analysis and reporting of findings. Findings from this project may be published in journals and presented at conferences and will inform further research on how to help children learn

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about nutrition in the classroom.

Potential Risks or Discomforts

Potential risks or discomforts include: children may feel pressure to share or embarrassment from sharing work and may feel coerced into participating in the research because the rest of the class appears to be. Risks will be dealt with in the following ways: researchers/teachers will explain to children that they have the right to pass when it comes time to sharing their work. They will also explain that student participation in the research portion of the activities is entirely voluntary and that they may choose not to participate at any point, without penalty.

Use and Storage of Data

Data for this study will be in print and electronic format, collected through the University of Toronto's REDCap online software. The database will then be housed securely in an anonymized format. This means that it will not contain any information that can identify you or your child, via cloud storage on Google Drive in the Ontario Tech server. Print files will be stored in a locked box during transit and will be securely housed in Dr. JoAnne Arcand's office on Ontario Tech campus in a locked filing cabinet. The office is kept locked when not in use so all print data will be secured by double locks. The study data, including all print and electronic files, will be kept in deidentified format for five years, and properly destroyed after this time by shredding the print files and erasing the electronic files. Study data will be accessible only to the members of the research team, who will sign a confidentiality agreement prior to participating in the study. We will collect the names of consenting parents and their children for the purposes of consent and assent. This identifiable information will be stored separately on an encrypted and password protected USB key.

Confidentiality

The information you and your child provide will not be stored with personal identifiers, nor will your child be identified in any publications or presentations. Data collected from this study will be aggregated for publication. Your privacy and your child's privacy shall be respected. No information about your identity will be shared or published without your permission, unless required by law. Confidentiality will be provided to the fullest extent possible by law, professional practice, and ethical codes of conduct. Please note that confidentiality cannot be guaranteed while data is in transit over the Internet. Due to the nature of this study taking place in a group setting, your child's classroom teacher and other students in the classroom may be aware of your child's participation in the study.

Participation

You and your child's participation in this study is voluntary and optional. You and your child may participate in only those aspects of the study in which you feel comfortable. Your child can also choose not to answer specific questions. You and your child may also decide not to be in this study, or to be in the study now, and then change their mind later. Your child may leave the study at any time without any penalty. You and your child will be given information that is relevant to your decision to continue or withdraw from participation. Children should not feel obligated or compelled to participate in this research for any reason.

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Right to Withdraw

Your child may withdraw from the research study at any time and you do not need to offer a reason for making this request. If your child withdraws from the study, any data that they have contributed will be deleted. If, during any of the above-described activities, your child decides not to participate, they can end involvement in the activity by indicating that they wish to withdraw from the study. Your child may communicate refusal verbally or non-verbally. If you or your child would like to withdraw from the study *after* data collection is completed, please inform us by sending an e-mail to arcand.lab.kids@ontariotechu.ca within 4 weeks of study completion.

Compensation, Reimbursement and Incentives

You and your child will not incur any expenses as a result of participating in this study. All children in a participating classroom (regardless of participation in the study) will receive an Ontario Tech University branded water bottle. You will receive a \$25 Indigo gift card at the end of the study.

Debriefing and Dissemination of Results

If you are interested in reading the results of this study, please check out our website arcandnutritionlab.com or contact the research team by e-mail at arcand.lab.kids@ontariotechu.ca to request information about the findings.

Participant Rights and Concerns

Please read this consent form carefully and feel free to ask the researcher any questions that you might have about the study. If you have any questions about your rights as a participant in this study, complaints, or adverse events, please contact the Research Ethics Office at (905) 721-8668 ext. 3693 or at researchethics@ontariotechu.ca. If you have questions concerning the research study or your child experiences any discomfort related to the study, please contact Principal Investigator, Dr. JoAnne Arcand at 647.296.8426 or joanne.arcand@ontariotechu.ca. By signing this form you do not give up any of your legal rights against the investigators, sponsor or involved institutions for compensation, nor does this form relieve the investigators, sponsor or involved institutions of their legal and professional responsibilities.

Thank you for considering allowing your child to participate in this research study. **If you have more than one child enrolled in the participating classroom, please complete this form for each child.** Please note that your child(ren)'s signature is also required and will be collected in class prior to beginning the study. Both parent and student consent/assent are required to participate in this study.

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Consent Form to Participate in a Research Study

Please complete this form online by scanning this QR code:
OR return this completed form to your child's classroom teacher

**QR Code
Placeholder**

Your agreement on the consent forms indicates the following:

- I have read the consent form and understand the study being described.
- I have had an opportunity to ask questions and those questions have been answered. I am free to ask questions about the study in the future.
- I freely consent to have my child participate in the research study, understanding that I or my child may discontinue participation at any time without penalty. A copy of this consent form has been made available to me.

By agreeing below, I consent to have my child participate in this research study.

Student First and Last Name: _____

Classroom Teacher Last Name: _____

Parent/Guardian First and Last Name: _____

Date: _____

I give my permission for myself and my child to participate in the research study

(check one box):

- ☐ Yes
☐ No

If you agree to participate in the study, please provide your contact information for data collection.

E-mail: _____

Phone Number: _____

Would you prefer we contact you by (check all that apply):

- ☐ E-mail
☐ Phone Call
☐ Text

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