APPLICATION FOR ETHICAL REVIEW OF HUMAN RESEARCH: UNIVERSITY OF VICTORIA

Submit **one original** and three **(3) copies** to the Office of the Vice President Research
Handwritten applications will be returned immediately. ***Use of the accompanying Ethics Application Guidelines is strongly encouraged in completing this form.***

A. APPLICANT INFORMATION

Name of the Principal Investigator Noreen Lerch Your Department: Nursing

Are you: ☐ Faculty ☐ Staff **x**☐ Grad Student ☐ Undergrad Student

If you are a student, name of your supervisor: Dr. Joan Anderson

E-mail of your supervisor: **janderson@uvic.ca**_____ supervisor's phone: **477-5555**_____

Your E-mail Address: **nmlerch@uvic.ca**_____
Your Phone number(s): Work **544-2529**_____ Residence **598-0598**_____

Your Mailing address:
1515 Regent's Place
Victoria, BC Canada

B. PROJECT INFORMATION

Exact Title of the Project: **HOW WILL THIS REFLECT ON THE FAMILY? LOKEEN KEE KEHAN GAY? INDO-CANADIAN PARENTS AND ADOLESCENTS: INTERGENERATIONAL DIFFERENCES AND HEALTH FACTORS.**

Keywords**: 1.Intergenerational 3. Conflict 4. Indo-Canadian**_____

Have you applied for funding for this project? **x**☐ No ☐ Yes (if "yes" complete the following):
Source(s) of funding: Exact title of grant(s) (If known)

Names and affiliations of other investigators on this project: Their E-Mail
Note: if investigators change, provide this information to the Chair of the Human Research Ethics Committee. Investigators are NOT employees (research assistants etc.)
Supervisory committee:

1. **Dr. J. Anderson** **janderson@uvic.ca**
2. **M.J. Lynam** **jlynam@uvic.ca**
3. **Donelda Parker** **donelda@uvic.ca**
4.
5.

Proposed Start Date (N.B.: 4-6 weeks required for review) **June 15, 200**1

FOR OFFICE OF VICE PRESIDENT RESEARCH USE ONLY: VPR File Number:_____

Date received:_____ Sent to Rev1: _____Returned Rev1: _____To Chair: _____Notice: _____
Rev2: _____ Rev2: _____

Committee Chair Approval Signature _____ Date: _____

Date annual review required: _____

Special Review Information: _____

Reference Information for funding source:

C. SIGNATURES

Your signature indicates that you agree to abide by all policies, procedures, regulations and laws governing the ethical conduct of research involving humans.

PRINCIPAL INVESTIGATOR: _____ DATE: _____

The signature of the supervisor below indicates that the supervisory committee has approved the student's proposal and that the supervisor has assisted the student in the preparation of this application.

STUDENT'S SUPERVISOR: _____ DATE: _____

The signature of the administer indicates that adequate research infrastructure is available to conduct this research

CHAIR/DIRECTOR OR DEAN: _____ DATE: _____

Please be sure to use the Guidelines in preparing your application. The application is designed so that you will be able to easily use cut and paste in preparing your informed consent materials.

If you downloaded this file, you can complete it on your computer. You will only have to print off your final version and manually Complete the "tick-boxes".

D. LEVEL OF RISK AND SCHOLARLY REVIEW

The Tri-Council definition of "minimal risk" is the following:

The research can be regarded as within the range of minimal risk if potential participants can reasonably be expected to regard the probability and magnitude of possible harms implied by participation in the research to be no greater than those encountered by the participant in those aspects of his or her everyday life that relate to the research.

Based on this definition, do you believe your research qualifies as "minimal risk research"
☐ NO **x**☐ Yes Please explain your answer below:
The research will consist of interviews and focus groups in which questions will be focused on exploring the existence of intergenerational conflict and potential related health problems between adolescent Indo-Canadian girls and their parents. The participants will be provided with a complete explanation of the interview process and will have the option to decline the interview either prior to the interview or during the interview.
The information that I am seeking through the interviews is similar to the kinds of issues often discussed at Indo-Canadian youth seminars. I anticipate that participants will feel comfortable with the content. I do not anticipate any harms to the participants in relation to the interviews. However, when discussing issues such as conflict and health, there is the chance that the researcher will become aware of situations which are in process of occurring and for which interventions may be necessary. While it is not the intent to provide therapeutic intervention, health care or counselling, in the event of a concern or need, the participant, will be made aware of any available appropriate resources or services, and referral will be made if the participant requests it.

Participants will be made aware in the consent form that they may not necessarily benefit directly from participating in the study.

The focus groups will be conducted at the invitation of an Indo-Canadian youth group which is holding a one-day seminar on intergenerational relations between parents and adolescents.

Please note, the designation of minimal or non-minimal levels of risk only affects the **way** the application is reviewed, **not the substance** of the review.

What type of scholarly review has this research undergone?

☐ None ☐ External Peer Review (e.g. granting agency) **x**☐ Supervisory Committee
☐ Special Review (explain below)

E. RESEARCH PROJECT INFORMATION

The following information is required by both the Committee (to review the ethics of your research) and, where noted (*), by participants (as part of the process of informed consent). Researchers are encouraged to adapt the information provided to the Committee for the consent from and process. The use of lay language is required. **Only use the space provided**.

1. *WHAT IS (ARE) THE PURPOSE(S) AND OBJECTIVE(S)S OF YOUR RESEARCH?

This project is a Thesis undertaken in partial fulfillment of the requirements for the Master of Science Degree in Nursing.
The purposes of this study :

1. **To seek from Indo-Canadian adolescent girls and young women and parents of Indo- Canadian adolescent girls and young women their perception of conflicts o rdisagreements as experienced within the context of living within their culture in Canada and as described by themselves.**
2. **To identify health problems which participants perceived to be related to the issues.**
3. **To identify processes that Indo-Canadian families use to seek solutions to problems or disagreements.**
4. **To identify implications for nursing, health practice and research.**

2. *WHY IS THIS RESEARCH IMPORTANT? WHAT CONTRIBUTIONS WILL IT MAKE?

Immigrant families face many adjustments as they resettle in Canada. Families who maintain their traditional cultural ways may experience conflict when their children become adolescents. The immigrant child or the Canadian-born children of immigrants often find themselves trying to meet two sets of expectations: those of their families who see them in the specific traditional role and those of the Canadian culture where they spend a significant part of the day at school and while associating with their friends. A recently completed study (McLaren, 1991) identified Indo-Canadian families as having significantly more intergenerational conflict than Chinese-Canadian or Euro-Canadian families. There have been reports in several immigrant communities of conflicts resulting in health problems such as depression, family violence, alcoholism and drug use. One significantly large immigrant community experiencing some of these problems is the Indo-Canadian community.

The qualitative study being proposed will build on earlier research in the area of intergenerational conflict (McLaren,1991; Rosenthal & Hrynevich, 1984), will examine how these Indo-Canadian youth and their families experience and manage or resolve conflict while living in a variety of levels of traditional family life, and will extend our knowledge and understanding of health issues faced by Indo-Canadian adolescents and their families. The study will identify specific problems and health issues, and provide insights into the relationships between some Indo-Canadian adolescents and their families.
Qualitative data from a project such as this assists to identify the context in which conflicts and differences are experienced and managed, whether conflicts and differences exacerbate health problems and implications for nursing and health care. This is important in view of the lack of previous research in this area and of the increasing population of Indo-Canadian families in British Columbia and Canada.

3. *HOW WILL YOU RECRUIT PARTICIPANTS?

- ☐ by letter (enclose a copy)
- ☐ by telephone (enclose the script)
- **x**☐ by advertisement (enclose a copy)
- ☐ through another organization or a third party (e.g. school records) Enclose evidence of permission to use these organizations or third parties in recruitment
- ☐ Other (please describe below)

*In the space below, provide the description you will use in the consent process to inform participants of why and how they were selected for inclusion in the study.

4. DESCRIBE THE PARTICIPANTS:

X☐ Competent adults ☐ Incompetent adults **X**☐ Competent Children/Youth
☐ Incompetent children/Youth
☐ A protected or vulnerable population (e.g. inmates, patients).

Provide details of the types of participants who will be included in the study (e.g. numbers, gender, age, position etc.)

5. IF PARTICIPANTS WILL/MAY NOT BE ABLE TO PROVIDE CONSENT FOR THEMSELVES, HOW WILL YOU GAIN CONSENT? (PLEASE NOTE, IN ADDITION TO RECEIVING THE CONSENT OF THEIR PARENTS/GUARDIANS, COMPETENT CHILDREN MUST PROVIDE THEIR OWN CONSENT. SEE THE GUIDELINES FOR FURTHER DETAILS).

Informants under the age of consent will require parental of guardian consent to participate in the study. Informants must be fluent in English in order to participate in the study.

When immigrants are being studied, consent procedures may have to be modified to fit the values of the specific group involved. Written consent forms may be considered problematic as it implies a lack of trust in the participant's work and is considered an insult to be asked to sign a consent form after having given verbal approval. The researcher will utilize written consent forms where possible; in the event of reluctance of participants to sign for the above reasons, verbal consent will be obtained and the participant will be informed verbally of the content of the consent form, of the purpose of the study, the guarantee of confidentiality, and the right to withdraw or refuse to answer questions at any time.

6. *WHAT PROCEDURES AND METHODS WILL YOU USE AND WHAT EXPECTATIONS DO YOU HAVE FOR PARTICIPANTS?

Interviews will be conducted at either participants' homes or a location acceptable to the participants. A set of questions will be used to guide the discussion (see Appendix A) but the discussion will not be limited to the questions. The interviews will be conducted after the researcher has established social comfort with the informant. Initial questions will be directed to establishing comfort. Lipson and Melies (1989) suggest that it may be helpful to use a communication style similar to that of the immigrant being interviewed. Therefore, the researcher will be aware of variations in responses to the questions and will allow the questions to act as a stimulus to discussion of conflict.

Each interview will be approximately one to one and a half hours. Throughout the interview, the interviewer will clarify statements and observations made by the informants. A second and third interview will be scheduled to review and clarify information where necessary and to validate conclusions the interviewer has made. All participants will be asked to complete a demographic questionnaire (see Appendix B).

Interviews will be audio taped and later transcribed from the tapes. Data will be examined for basic patterns, themes,and meaning of the individual's experiences and ways of dealing with the experience. Validity of the data will be addressed through clarification of information throughout the interviews and where practical, questions will be rephrased to test the accuracy of the data. Where clarification is required, the informant will be contacted for additional information.

*6a. How much time will be required to participate?
As above in # 6

*6b. Where will participation happen?
As above in # 6

3 *6c What exactly will the participants be expected to do?
4 **x** ☐ be interviewed individually
5 **x** ☐ complete a questionnaire
6 **x** ☐ participate in a group interview
7 ☐ be observed

☐ provide human tissue (blood, hair, DNA, gametes etc.)
☐ provide access to records or other personal materials
☐ Other (specify)_____

Provide details to your answer in 6c. below (e.g. name of questionnaire, source of documents)
Questionaire: Demographic data only.

6d What special training or qualifications are required for data gatherers?
Data gathering: interviews and focus groups – data will be collected by the principle researcher, Noreen Lerch. Specific qualifications – knowledge and skill in the interview process, counselling skills.

7. *WHAT ARE THE POTENTIAL OR KNOWN INCONVENIENCES ASSOCIATED WITH PARTICIPATION?
None known. There may be inconvenience related to the time required to conduct the interviews or focus groups.

8. *ARE THERE ANY OF THE FOLLOWING POTENTIAL RISKS TO PARTICIPANTS:
☐ physical ☐ social **x**☐ psychological **x**☐ emotional ☐ economic ☐ Other (specify)

*Provide details to your answer in 8 below and describe how will explain the risks to participants

9. *IF THERE ARE ANY ANTICIPATED RISKS, HOW WILL THEY BE MINIMIZED AND DEALT WITH IF THEY OCCUR? (E.G. PROVIDE REFERRALS TO COUNSELING SERVICES)? INCLUDE A DESCRIPTION OF HOW YOU WILL DESCRIBE THIS MINIMIZATION TO PARTICIPANTS

There is the chance that the researcher will become aware of situations which are in process of occurring and for which interventions may be necessary. While it is not the intent to provide therapeutic intervention, health care or counselling, in the event of a concern or need, the participant, will be made aware of any available appropriate resources or services, and referral will be made if the participant requests it.

10. *ARE THERE ANY POTENTIAL OR KNOWN BENEFITS ASSOCIATED WITH PARTICIPATION?
☐ directly to the participant **x**☐ to society **x** ☐ to state of knowledge

*10a. How will you describe these benefits to the participant?
It is anticipated that the results of this study will provide nurses with a better understanding of the factors which are important to know about when planning culturally sensitive interventions for Indo-Canadian families experiencing helath problems related to disagreements.

*10b If there are any inducements (gifts, compensation etc.) to participate, what are they and why are they necessary?
None

11. *HOW WILL YOU DESCRIBE IN THE CONSENT THE VOLUNTARY NATURE OF PARTICIPATION IN THE STUDY AND THE RIGHT TO WITHDRAW AT ANYTIME WITHOUT CONSEQUENCES?

In a letter of explanation, I will include the following statement: *<u>You are under no obligation to participate in this study. If you agree to participate and then change your mind, you are free to withdraw from the study at any time without prejudice or negative consequences.</u>*

11a. *What happens to a person's data if he/she withdraws part way through the study?
x☐ it will not be used in the analysis unless removal of the data is logistically impossible
x☐ it will be used in the analysis if the participant agrees to this

11b.* How will you explain this to the participants?

If you agree to participate and then change your mind, the researcher will not use the information gathered unless it is impossible to retrieve it from the data base. All information gathered will be anonymous, therefore, if the data has already been entered for analysis, it will not be possible to retrieve it. If the data has not been entered into the data base for retrieval, the interview tape will be destroyed.
If the participant agrees to the use of the data from interviews or focus groups, it will be used.

12. *ARE YOU IN ANY WAY IN A POSITION OF AUTHORITY OR POWER OVER PARTICIPANTS? ☐ YES **X** ☐ NO (IF "YES", EXPLAIN YOUR RELATIONSHIP AND HOW COERCION WILL BE PREVENTED). EXAMPLES INCLUDE TEACHERS/STUDENTS, THERAPISTS/CLIENTS ETC.

*Provide a description of how this will discussed in the consent process:

13. *HOW WILL YOU PROVIDE FOR ONGOING CONSENT BY PARTICIPANTS DURING THE DATA GATHERING PERIOD? (NOTE, THIS IS PRIMARILY AN ISSUE IN RESEARCH THAT OCCURS OVER AN EXTENDED PERIOD OF TIME)

If there is a period of longer than three months during which the researcher wishes to continue gathering data (as in follow-up type interviews), participants will be asked to review their consent forms and date and initial itas a confirmation of their continuing consent.

14. *DO YOU ANTICIPATE THAT THIS RESEARCH WILL BE USED FOR A COMMERCIAL PURPOSE? ☐ YES **X** ☐ **NO** (IF "YES", EXPLAIN HOW YOU WILL DESCRIBE THIS TO THE PARTICIPANTS IN THE CONSENT PROCESS)

Note: Questions 15 and 16 deal with anonymity and confidentiality. While these two concepts are related, they are NOT the same. Please refer to the Guidelines and the brief definitions below to assist you in answering these questions.

15. *ANONYMITY REFERS TO THE PROTECTION OF THE IDENTITY OF PARTICIPANTS. ANONYMITY CAN BE PROVIDED ALONG A CONTINUUM, FROM "COMPLETE" TO "NO" PROTECTION (SEE THE GUIDELINES FOR A DISCUSSION OF THIS). WILL THE ANONYMITY OF PARTICIPANTS BE PROTECTED? **X** ☐ YES (COMPLETELY) ☐ YES (PARTIALLY) ☐ NO

15a. *If yes, how will anonymity be protected and how will this be explained in the consent process?

All interviews will be confidential. The interview tapes will be listened to only by the researcher and transcriber. All tapes and transcripts will be identified only by code numbers; the name of the participant or the names of other family members will not appear in any research report, published or unpublished.
The content of the discussions with the researcher will be kept in strict confidence by the researcher, transcriber and the faculty advisors.

15b. *If no, justify why loss of anonymity is required and explain how this will be explained in the consent process.

16. *CONFIDENTIALITY REFERS TO THE PROTECTION, ACCESS, CONTROL AND SECURITY OF THE DATA AND PERSONAL INFORMATION (SEE THE GUIDELINES FOR MORE INFORMATION). WILL YOU PROVIDE CONFIDENTIALITY TO THE PARTICIPANTS AND THEIR DATA?
X ☐ YES ☐ NO

16a. * If Yes, how will confidentiality be protected and how will this be explained in the consent process?
See 15a

16b. * If No, justify the lack of confidentiality and explain how this will be explained in the consent process.

17. *WHAT OTHER USES WILL BE MADE OF THE DATA?

None

18. *WHEN AND HOW WILL THE DATA BE DESTROYED?

Tapes will be erased when the data analysis is completed. Focus group information gathered is anonymous and will comprise part of the data presented. Field notes will be destroyed following completion of data analysis.

19. *HOW DO YOU ANTICIPATE DISSEMINATING YOUR RESULTS?

☐ Directly to participants **x**☐ Thesis/Dissertation/class presentation **x**☐ published article
x☐ presentations at scholarly meetings ☐ internet ☐ Other (specify below)

· *How will you describe the dissemination of results to participants during the consent process?

A verbal explanation of the thesis, and a review of the potential opportunities to present scholarly information at meetings, conferences and presentations.

20. *HOW WILL PARTICIPANTS BE ABLE TO CONTACT YOU (AND/OR YOUR SUPERVISOR) IF THEY HAVE QUESTIONS OR CONCERNS ABOUT THE STUDY?

PARTICIPANTS WILL BE GIVEN THE TELEPHONE NUMBER OF THE PRIMARY RESEARCHER AND OF THE FACULTY SUPERVISORY COMMITTEE.

Special Questions related to additional review criteria:

21.* OTHER THAN THE INVESTIGATORS, WHAT ARE THE NAMES OF INDIVIDUALS (EMPLOYEES OR VOLUNTEERS) WHO WILL BE INVOLVED IN DATA GATHERING OR MANAGEMENT? *IF NOT KNOWN AT THE TIME OF SUBMISSION, PROVIDE THIS INFORMATION TO WHEN IT BECOMES AVAILABLE*. **NONE**

1.
2.
3.
4.
5.
6.

If these individuals require special training, skills, and/or qualifications, what are they and how will they be adequately prepared?

x ☐ NO (IF "YES", COMPLETE A DECEPTION FORM)

23.WILL THIS STUDY BE CONDUCTED IN A COUNTRY OTHER THAN CANADA? **x** ☐ NO ☐ YES (IF YES, PROVIDE DETAILS BELOW OF HOW THIS RESEARCH CONFORMS TO THE LAWS, CUSTOMS AND REGULATIONS OF THE FOREIGN COUNTRY)

24. IF THERE IS ANYTHING ELSE YOU BELIEVE THE COMMITTEE SHOULD KNOW ABOUT THIS STUDY, PROVIDE THAT INFORMATION BELOW:

25. IF APPLICABLE, ATTACH THE FOLLOWING DOCUMENTS TO THIS APPLICATION (CHECK THOSE THAT ARE APPENDED):

x☐ Consent forms **x**☐ Recruitment materials ☐ Interview schedules **x**☐ Questionnaires ☐ Deception Form
☐ Permission to gain access to confidential documents or materials
☐ Human Tissues Form

Applicants are encouraged to use the consent form template provided in Appendix 1 and, if appropriate, the Deception form in Appendix 2

APPENDIX 1

Prototype for a Complete Human Research Ethics Consent Form with reference to the Ethics Application Sections (Use "cut and paste" from your application to help prepare your consent)

Your are being invited to participate in a study entitled : **HOW WILL THIS REFLECT ON THE FAMILY? LOKEEN KEE KEHAN GAY? INDO-CANADIAN PARENTS AND ADOLESCENTS: INTERGENERATIONAL DIFFERENCES AND HEALTH FACTORS** that is being conducted by Noreen Lerch, a graduate student in the department of Nursing) at the University of Victoria. You may contact her if you have further questions by calling 598-0598

As a graduate student, this research is part of the requirements for a degree in Nursing and it is being conducted under the supervision of Dr. Joan Anderson. You may contact the supervisor at 477-5555
The purpose of this research project is:
The purposes of this study:

1. To seek from Indo-Canadian adolescent girls and young women and parents of Indo-Canadian adolescent girls and young women their perception of conflicts or disagreements as experienced within the context of living within their culture in Canada and as described by themselves.
2. To identify health problems which participants perceived to be related to the issues.
3. To identify processes that Indo-Canadian families use to seek solutions to problems or disagreements.
4. To identify implications for nursing, health practice and research.

Research of this type is important because:
Immigrant families face many adjustments as they resettle in Canada. Families who maintain their traditional cultural ways may experience conflict when their children become adolescents. The immigrant child or the Canadian-born children of immigrants often find themselves trying to meet two sets of expectations: those of their families who see them in the specific traditional role and those of the Canadian culture where they spend a significant part of the day at school and while associating with their friends. A recently completed study (McLaren, 1991) identified Indo-Canadian families as having significantly more intergenerational conflict than Chinese-Canadian or Euro-Canadian families. There have been reports in several immigrant communities of conflicts resulting in health problems such as depression, family violence, alcoholism and drug use. One significantly large immigrant community experiencing some of these problems is the Indo-Canadian community.

The qualitative study being proposed will build on earlier research in the area of intergenerational conflict (McLaren,1991; Rosenthal & Hrynevich, 1984), will examine how these Indo-Canadian youth and their families experience and manage or resolve conflict while living in a variety of levels of traditional family life, and will extend our knowledge and understanding of health issues faced by Indo-Canadian adolescents and their families. The study will identify specific problems and health issues, and provide insights into the relationships between some Indo-Canadian adolescents and their families.
Qualitative data from a project such as this assists to identify the context in which conflicts and differences are experienced and managed, whether conflicts and differences exacerbate health problems and implications for nursing and health care. This is important in view of the lack of previous research in this area and of the increasing population of Indo-Canadian families in British Columbia and Canada.

You are being asked to participate in this study because you are an Indo-Canadian parent of an adolescent girl or young woman or because you are an Indo-Canadian adolescent girl or young woman.

If you agree to voluntarily participate in this research, your participation will include:
Each interview will be approximately one to one and a half hours. Throughout the interview, the interviewer will clarify statements and observations made by the informants. A second and third interview will be scheduled to review and clarify information where necessary and to validate conclusions the interviewer has made. All participants will be asked to complete a demographic questionnaire.

It is anticipated that participation in this study may cause some inconvenience to you including the requirement of your time for the interview.

1) There are no known or anticipated risks to you by participating in this research.
There is the chance that the researcher will become aware of situations that are in process of occurring and for which interventions may be necessary. While it is not the intent to provide therapeutic intervention, health care or counseling, in the event of a concern or need, the participant, will be made aware of any available appropriate resources or services, and referral will be made if the participant requests it.

The potential benefits of your participation in this research include
It is anticipated that the results of this study will provide nurses with a better understanding of the factors which are important to know about when planning culturally sensitive interventions for Indo-Canadian families experiencing health problems related to disagreements.

Your participation in this research must be completely voluntary. If you do decide to participate, you may withdraw at any time without any consequences or any explanation. If you do withdraw from the study your data will be handled as follows:

To make sure that you continue to consent to participate in this research, confirmation of consent will be obtained from the participant for any time period over three months.

In terms of protecting your anonymity and your confidentiality the data will be protected in the following ways:
All interviews will be confidential. The interview tapes will be listened to only by the researcher and transcriber. All tapes and transcripts will be identified only by code numbers; the name of the participant or the names of other family members will not appear in any research report, published or unpublished.
The content of the discussions with the researcher will be kept in strict confidence by the researcher, transcriber and the faculty advisors.

There are no other planned uses of this data.

It is anticipated that the results of this study will be shared with others in the following ways: Preparation of a master's thesis, published papers, presentation at meetings and seminars.

In addition to being able to contact the researcher [and, if applicable, the supervisor] at the above phone numbers, you may verify the ethical approval of this study, or raise any concerns you might have, by contacting the Associate Vice President Research at the University of Victoria (250-721-7968).

Your signature below indicates that you understand the above conditions of participation in this study and that you have had the opportunity to have your questions answered by the researchers.

PARTICIPANT SIGNATURE _____ DATE _____

A COPY OF THIS CONSENT WILL BE LEFT WITH YOU, AND A COPY WILL BE TAKEN BY THE RESEARCHER