

COMIRB Protocol

A. Outcome Measure(s):

1. Demographic questions:
 - 1.Are you (circle one): student, staff, faculty, resident
 - 2.Which school are you associated with?
 - 3.Male/Female/Other Gender
 - 4.Age

2. Quantitative questions (answers to all quantitative questions will consist of a 6 point Likert scale where 1= completely disagree and 6 = completely agree):

Mental Health knowledge:

- 1.If a fellow student/staff/faculty/resident/family member/friend experienced a mental health problem, I would know what resources are available and how they could access them.
- 2.Mental health issues are common among health professional students.

Mental Health attitudes:

- 1.Medication can be an effective treatment for people with mental health problems.
- 2.Psychotherapy can be an effective treatment for people with mental health problems.
- 3.Providers with mental illness may not be able to provide adequate medical care.
- 4.I should not talk about my own mental health problems with others in the medical profession.

Intended Behaviors:

- 1.I would feel comfortable receiving medical care from provider who has sought treatment for a mental health issue.
- 2.I would be worried about seeking care for a mental health issue in case it might affect my ability to practice or obtain my license. (N/A as an option)

3. One qualitative question:
Do you have any feedback about the panel?

B. Description of Population to be Enrolled: Subjects will include Anschutz Medical Campus health professional students, residents, faculty, and staff.

C. Study Design and Research Methods

Table of Study Design and Timeline:

Time Point	Pre-Test	Post-Test	6-Month Follow Up
Quantitative Questions	✓	✓	✓
Qualitative Question		✓	

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Methodology/Procedure:

1. The PI or the faculty mentor will review and explain the study's postcard consent form for the attendees.
2. All students will provide an identifier code on their initial survey form (based off of the last two letters of their last name, the day of their birth, and the last two letters of their first name).
3. The rating scales and qualitative question described under the Outcome Measures section will be administered via front and back paper surveys directly before and after the panel.
4. A separate form will give students the option of participating in the 6 month follow up survey so that their email address is not included on the same form as their initial survey responses. On the follow up survey form, students will only include their email address if they wish to participate.
5. Those students who provided their email addresses will be emailed an anonymous Qualtrics survey link 6 months later. The Qualtrics survey will ask respondents to re-enter their identifier code so that their follow up survey responses are associated with their initial survey responses.
6. Participation will be voluntary
7. The surveys and 6 month follow up survey form will be collected in separate lock boxes with a slot located at the front of the classroom. The survey sheets and the follow up survey data exported from Qualtrics will not contain identifiers; thus the research database will be de-identified.
8. All email addresses collected for the 6-month follow up survey will be destroyed within 8 weeks following when the anonymous survey link is sent out (within 8 months following the panel).

F. Data Analysis Plan:

The initial survey sheets will be hand-entered by a researcher for sake of ease of administration. The 6-month follow up survey data will be exported into either Excel or SPSS for data analysis.

We will use the following approach for calculating dependent variables of interest for each domain:

Demographic Questions: Answers to demographic questions will be used to exclude non-students or non-med students in analyses pertaining only to students or medical students.

Quantitative Questions: Each respondent's scales will be scored and several dependent sample t-tests will be performed in order to assess the difference between the categorical independent variable (pre vs post test) and the continuous dependent variables (scores of 1-6 on quantitative survey subscales). We will perform dependent sample t-tests comparing pre to post test on the following dependent variables:

- 1) Average of all scores on quantitative question subscales
- 2) Average score of "knowledge" on quantitative question subscales
- 3) Average score of "attitudes" on quantitative question subscales
- 4) Average score of "intended behavior" on quantitative question subscales
- 5) Individual quantitative questions will be analyzed separately if Chronbach's alpha is <0.7 in each category (knowledge, attitude, or intended behavior).

Seeking students to serve as panelists for the 3rd

ANTI-STIGMA MENTAL HEALTH PANEL

Are you interested in speaking about your experiences related to mental health and stigma in professional school?

If so, we'd love to have you speak at the 3rd anti-stigma mental health panel! Panelists are welcome to share any aspects of their personal story that they choose, which may include experiences related to encountering stigma, seeking treatment, managing stressors, balancing mental health during work or school, etc. Students will each have approximately ten minutes to speak followed by questions from the audience.

We hope to foster an inclusive environment and ensure people from different backgrounds are represented so we encourage all who are interested to participate. Panelists should plan to arrive around 5pm and food will be provided.

Monday, April 16th @ 5:30-7pm
Ed2N 1308

If interested, please complete the interest form by Monday April 6th
Please contact amc.samh@gmail.com for questions or more information.

Sponsored by: Student Mental Health & Students Advocating for Mental Health

Hello panelists!

We want to thank you again for volunteering to share your personal stories.

- Please arrive at 5:15 tomorrow so you have time to eat first before the panel begins.
- Be prepared to talk for 10-15 minutes about your story.
- Feel free to include any part of your story you feel comfortable sharing. This may have to do with being in school and dealing with mental illness, examples of stigma you have experienced, or something completely different!

The panel will begin with a pre-panel survey. The co-presidents will then give a brief introduction, and then each panelist will speak for 15 minutes followed by 5 minutes of Q and A. After all panelists tell their story, we will open the floor up to Q and A to all panelists. Finally, we will end the panel with a few slides containing facts and resources, and then participants will fill out a brief post-panel survey.

Please let us know if you have any further questions. We are looking forward to meeting you tomorrow!

Best,
SAMH Co Presidents

Anti-Stigma Mental Health Student Panel

Monday, April 16, 2018

I, _____, acknowledge that I am voluntarily speaking on the Anti-Stigma Student Mental Health Panel on October 3, 2017. I am aware I am free to withdraw my participation at any point and to share only as much as I would like to disclose. I understand there may be risks related to self-disclosure including stigma and other possibly unforeseen consequences. I agree that I am responsible for any ramifications related to speaking, and I will not hold the University of Colorado, Student Mental Health, Students Advocating for Mental Health, or any other organizers of this event responsible for any outcomes that may result from my participation.

Name (printed): _____

Signature: _____

Date: _____

Study Title: Effect of Anti-Stigma Panel on Students' Mental Health Knowledge, Attitudes, and Intended Behaviors

Principal Investigator: Claire E. Koljack

COMIRB No: 18-0594

Version Date: 3/15/2018

You are being asked to be in this research study because you are attending the Anti-Stigma Mental Health Panel.

If you join the study, you will be asked to complete a survey with 4 demographic questions and 8 scale questions before and after the panel. You will also have an option to take the survey again 6 months later via an anonymous survey link that will be sent to you if you provide your email address on a separate form. You will also be asked to give your qualitative feedback on the post-survey directly following the panel.

This study is designed to learn more about your knowledge, attitudes, and intended behaviors regarding mental health.

Possible discomforts or risks include distress due to thinking about mental health issues. There may be risks the researchers have not thought of.

Every effort will be made to protect your privacy and confidentiality. The survey sheets with your responses will not be associated with any identifiable information. If you opt to take the 6-month follow up survey, it will only be viewed by the research team. Your email address will not be connected to your survey responses or be contained in any research database. The PI (Claire Koljack, MS1) will not be involved in teaching or evaluating medical students.

You have a choice about being in this study. You do not have to be in this study if you do not want to be.

If you have questions, you can call the study's faculty mentor, Rachel Davis, MD at (303) 724-8244 or email at Rachel.Davis@ucdenver.edu. You can call or email to ask questions at any time.

You may have questions about your rights as someone in this study. If you have questions, you can call the COMIRB (the responsible Institutional Review Board). Their number is (303) 724-1055.

By completing this survey, you are agreeing to participate in this research study.

PRE-PANEL SURVEY

Protocol #: 18-0594

Principle Investigator: Claire Koljack

Version Date: 04.02.18

Please create an identifier code below by listing 1. The **last** two letters of your **last name**, 2. The **date** of your birth, 3. The **last** two letters of your **first name**. (Ex. John Doe born 01/02/1990 – oe02hn).

ID Code: ___ _ ___ _ ___ _

1) Are you (circle one): Student Staff Faculty Resident

2) Which school are you associated with? _____

3) What is your gender (circle one):

- a) Man
- b) Woman
- c) Other

4) How old are you? _____

Below are statements about mental health. Please choose the number that best describes what you generally think about each statement, and circle that number.

	Completely Disagree	Somewhat Disagree	Slightly Disagree	Slightly Agree	Somewhat Agree	Completely Agree
If a fellow student/staff/faculty/resident/family member/friend experienced a mental health problem, I would know what resources are available and how they could access them.	1	2	3	4	5	6
Mental health issues are common among health professional students.	1	2	3	4	5	6
Medication can be an effective treatment for people with mental health problems.	1	2	3	4	5	6
Psychotherapy can be an effective treatment for people with mental health problems.	1	2	3	4	5	6
Providers with mental illness may not be able to provide adequate medical care.	1	2	3	4	5	6
I should not talk about my own mental health problems with others in the medical profession.	1	2	3	4	5	6
I would feel comfortable receiving medical care from a provider who has sought treatment for a mental health issue.	1	2	3	4	5	6
I would be worried about seeking care for a mental health issue in case it might affect my ability to practice or obtain my license. (if not studying to be a practitioner, write "N/A" in margin)	1	2	3	4	5	6

POST-PANEL SURVEY

Protocol #: 18-0594

Principle Investigator: Claire Koljack

Version Date: 04.02.18

Please create an identifier code below by listing 1. The **last** two letters of your **last name**, 2. The **date** of your birth, 3. The **last** two letters of your **first name**. (Ex. John Doe born 01/02/1990 – oe02hn).

ID Code: __ __ __ __ __ __

Below are statements about mental health. Please choose the number that best describes what you generally think about each statement, and circle that number.

	Completely Disagree	Somewhat Disagree	Slightly Disagree	Slightly Agree	Somewhat Agree	Completely Agree
If a fellow student/staff/faculty/resident/family member/friend experienced a mental health problem, I would know what resources are available and how they could access them.	1	2	3	4	5	6
Mental health issues are common among health professional students.	1	2	3	4	5	6
Medication can be an effective treatment for people with mental health problems.	1	2	3	4	5	6
Psychotherapy can be an effective treatment for people with mental health problems.	1	2	3	4	5	6
Providers with mental illness may not be able to provide adequate medical care.	1	2	3	4	5	6
I should not talk about my own mental health problems with others in the medical profession.	1	2	3	4	5	6
I would feel comfortable receiving medical care from a provider who has sought treatment for a mental health issue.	1	2	3	4	5	6
I would be worried about seeking care for a mental health issue in case it might affect my ability to practice or obtain my license. (if not studying to be a practitioner, write "N/A" in margin)	1	2	3	4	5	6

Do you have any feedback about the panel? (list below):

Email Template
Protocol #: 18-0594
Principle Investigator: Claire Koljack
Version Date: 04.02.18

Subject Line: Anti-Stigma Mental Health Panel – FollowUp Survey

Hello,

You are receiving this email because you indicated that you would be interested in completing a short follow-up survey 6 months following the Anti-Stigma Mental Health Panel that took place last April.

Please click the anonymous survey link below to complete a short Qualtrics survey that will take no longer than 5 minutes.

(Link inserted here)

Your responses play a significant role in demonstrating the effect that the anti-stigma panels have on our student body. Thank you for your participation!

Sincerely,

Anti-Stigma Panel Research Team