

Polaris National Survivor Study
INFORMED CONSENT FORM FOR FORMATIVE PHASE

Protocol Title: First National Survivor Study (NSS): 2021-22

Protocol #: **A21-064-903**

Sponsor: Polaris

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INFORMED CONSENT FORM

This consent form explains the research study. Before you decide to be a part of this study, you need to know why the research is being done, what it will involve and the risks and benefits. Ask the study staff to explain anything in this form or if you want more information about a section. Please take time to read this form carefully. Feel free to discuss it with your relatives, friends and/or people you trust. If you agree to take part in this research study, you must provide verbal consent at the end of this conversation.

PURPOSE OF THE STUDY

You have been invited to participate in Polaris's National Survivor Study (NSS). Polaris is a national anti-trafficking organization that works on all forms of human trafficking in the United States and is committed to ensuring our work is informed by the lived experiences of survivors of trafficking. The purpose of this study is to understand survivors' experiences and perspectives on different organizations, policies and resources that affect their ability to make a living and thrive after exiting their trafficking situation. The research will be implemented in three phases that will include different types of activities including group discussions, one-on-one interviews and surveys. The current phase of the research will help us design a more respectful and effective study by learning from those with lived experience.

NUMBER OF PARTICIPANTS AND LENGTH OF STUDY PARTICIPATION

About 100 people across the United States are expected to participate in this phase of the study. Your participation is expected to last one session long (one and half to two hours).

STUDY PROCEDURES

In most cases, you will be asked to join a group (6-8 people) online. If you do not feel comfortable joining a group, you may ask to have an online one-on-one interview instead. The information gathered from this discussion or interview will be used to guide the rest of the study, including how we reach out to others to join the study, how we ask specific questions and help narrow down the topic being studied. For example, you may be asked about how to reach people who may be hard to reach, about the right language to use, or to answer questions about the kinds of things a person needs in life.

During the group discussion/interviews, someone from the study team will lead you through activities and will ask you general questions related to the needs and perspectives of trafficking survivors. We will not ask you direct questions about your life or experiences with trafficking. Both the group

discussion and interview should last no more than two (2) hours (with breaks).

The group discussion/interview will be recorded and a note-taker will be present in case recording is not possible and to help lead the group discussion. The recording and/or notes will only be used by the team to help capture your words exactly the way you said them or fill in any missing areas that we may not be able to record. You will also have the option of turning your camera off, and/or using your initials or a nick-name. There will also be an advocate present who is a trafficking survivor.

Please note that there are no right or wrong answers. Polaris wants to hear many viewpoints and would like for everyone to tell us their thoughts. It is up to you, however, whether or not you want to participate. You can choose not to participate or to stop your participation at any time without any penalty. You may choose to not participate in a particular activity or not answer a particular question. There will be no negative effects for you if you want to stop.

Immediately after the group discussion ends, you will have the option to talk about the study experience with survivors who work with Polaris. This additional conversation is not required and it is not part of the study. We will not record or collect any information from you during this additional conversation.

RISKS AND DISCOMFORTS

We recognize that any conversation about human trafficking might be hard. Your safety and wellness are our top priority. You can choose not to answer any questions or choose to end your participation at any time. Additionally, we will provide a handout with some resources available for each of you, in case you wish to seek support after the group discussion ends. For long term support needs, the Trafficking Hotline is available 24/7 and can help you connect to services.

While we will work hard to keep your information confidential (see section on confidentiality below), there is a risk that your information could be shared with others unintentionally. If this happens, we will notify you as soon as possible.

NEW INFORMATION

You will be notified in a timely way if important new findings become known that may affect your willingness to continue in the study.

BENEFITS

There is no direct benefit to you from participating in the study. However, interviews and group discussions, like the one we are asking you to participate in, are an important source of information. Your participation may benefit others like you as it will allow your voice and insights to be heard and utilized in the National Survivor Study to improve the research experience for others.

REIMBURSEMENT

You will be offered \$75.00 for your time , even if you choose not to answer certain questions or choose to end your participation early. We will offer you multiple ways to receive the reimbursement so that you are able to access these funds. You should receive the payment within one to two weeks after the group discussion or interview is complete depending on the reimbursement method you select as some may take longer to process. If you have any questions about the payments, please reach out to LIDS@polarisproject.org.

CONFIDENTIALITY

Should you choose to participate in the group discussion, you will also be asked to respect the privacy

of other group members by not sharing any content discussed during the study to others and/or sharing others' names or a part of their story that you may know as a result of participating in the group discussion itself.

As approved through the BRANY Institutional Review Board, the things you create or say during the research study must be kept private and can only be used for research purposes. The research team has signed a confidentiality agreement as part of our commitment to keeping all personally identifiable information in strictest confidence. To the extent allowed by law, every effort will be made to keep your personal information confidential. While Polaris and the research team are aware of the need to keep your information confidential, total confidentiality cannot be guaranteed.

This research is covered by a Certificate of Confidentiality from the National Institutes of Health. Unless you expressly request it, researchers with this Certificate will not disclose or use information that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other action, suit, or proceeding, even if there is a court subpoena.

An exception to the promise of confidentiality is specific information about a child or elder neglected or in danger, intent to harm others, or intent to harm yourself. We will not ask you questions about these issues directly. However, we are obligated to report this information to the proper authorities if you share such information or we see it on your screen. If we need to report, we will tell you directly and clearly before we do so.

We will not be recording your names during the discussions/interviews and will never link your name or other information about you to what you say. All recordings and hard or digital copies of data collection notes will be stored separately from your name or identifying information, encrypted, and stored in a separate, secure place until we can make sure that a transcription is complete, at which time they will be destroyed. In addition, unless you agree to allow Polaris to hold your contact information for future opportunities, we will also destroy any records of it at the conclusion of the study.

The results of this research project may be presented at meetings or in publications; however, you will not be identified in these presentations and/or publications. No names will ever be used in any external or internal reporting, so what you say will not be linked to you directly. Instead, we will share information about the large group of study participants. For example, your response might be labeled "participant 34."

Polaris may use your information collected during this study, which will be deidentified and cannot be linked back to you, to compare changes across time with future National Survivor Studies Polaris may conduct. However, the data collected during this study will not be distributed for research studies by other researchers.

VOLUNTARY PARTICIPATION AND WITHDRAWAL

If you request it, we can send you a copy of this consent form using your choice of communication, email or US Postal Mail. The consent form is also available for you to review on the National Survivor Study [webpage](#). By consenting to this study you do not waive any of your legal rights. Giving consent here means that you have heard or read information about this study and agree to participate at this time. Being in this study is voluntary and you have the right to end participation at any time in the future.

Your participation in this study may be stopped without your consent at any time by Polaris. This

might happen, for example, if the study is stopped, or for other administrative reasons.

CONTACTS FOR QUESTIONS, COMPLAINTS, CONCERNS

If you have any questions or want more information about the study or your participation in it, you may contact Sara Woldehanna, director of the research team, at (888) 693-1562. If you want to voice a complaint or concern about this research and prefer to raise this with someone from the survivor community or the community advisory group, please call (888) 693-1576 or fill out the form here: <https://pproj.link/nss-gr>.

If you are unable to reach the research staff, you may contact a person independent of the research team at the Biomedical Research Alliance of New York Institutional Review Board at 516-318-6877. Questions, concerns or complaints about research can also be registered with the Biomedical Research Alliance of New York Institutional Review Board at www.branyirb.com/concerns-about-research.

STATEMENT OF CONSENT - VERBAL AGREEMENT

By agreeing to participate in study, I confirm the following:

- I have heard and understood all of the content of the consent form.
- All of my questions have been answered to my satisfaction.
- I can leave the study at any time without giving a reason and without penalty.
- I agree to the collection, use, sharing and analysis of study information collected as part of this study by the sponsor and other authorized persons described in this form.
- I will be given a copy of this consent form, if requested, either virtually or by US Postal Mail
- I do not give up any legal rights that I would otherwise have if I were not in this study.

Verbal consent administered by phone or through Zoom:

1. *Do you agree to participate in a one-on-one interview or group discussion for the National Survivor Study based on the information we have just discussed?*
_____ *Initial/check here if participant voluntarily agrees to participate in this study.*
2. *Do you agree to be digitally recorded during your participation in the study?*
_____ *Initial/check here if participant agrees to be digitally recorded during the study*
3. *If you are willing to participate, how would you like to receive your reimbursement for participating?*
 - *A prepaid Polaris debit card sent to you where funds can be loaded by Polaris after each stage you participate in (preferred by Polaris and fastest once you have the card but requires a physical address)*
 - *An online payment method - PayPal*
 - *A prepaid online gift card that does not require a physical address*
 - *Another method - someone from Polaris will contact you to make sure you get payment in another way*
4. *Do you agree to have your contact information kept on file with Polaris for the purposes of being alerted to future study or program opportunities or other benefits? You do not have to agree to have your information kept on file in order to participate in this study.*
_____ *Initial/check here if participant agrees to have their contact information kept on file with Polaris for the purposes of being alerted to future studies, program opportunities, or benefits.*