

October 2022 Research Participant Informed Consent to Treatment

Focus: Relationships throughout life can cause some degree of stress or trauma. This is a research study to treat healthcare workers (any fields including MDs, RNs, DDS, dental assistants and hygienists, physical therapists, medical assistants, orderlies, etc.) using group integrative Bowen and EMDR (iBE) Therapy. It will assist the participant to clear the distress of past and present memories of interactional conflicts with the option to learn to replace old patterns with new strategies and skills for healthier conflict resolution. Healthcare workers have been chosen for this study because they have often faced increased conflict related to COVID safety standards.

Some have been so distressed that they have been tempted to leave the field, or they have actually left the field. All such persons are welcome to participate, as well as those who haven't felt the need to quit at all.

What do you experience? All participants receive iBE-IGTP-OTS (described below) therapy, and the research group receives additional skills training. After the study is concluded, the control group will be offered the skills training on Saturday, November 19 from 9 am to 12:30 pm.

Name of Principal Investigator:

Dana Elken Terrell, LCSW, EAC

This document is to certify that I, _____, hereby freely agree
Please Print Name

to participate as a volunteer in a research study under the supervision of Dana Elken Terrell.

- **History:** EMDR is a research validated treatment for trauma. The World Health Organization lists it as one of two recommended treatments for PTSD, based on the research. This EMDR-IGTP (EMDR Integrative Group Treatment Protocol) and the expansion of it, called the Ongoing Traumatic Stress (OTS) protocol has many published research studies demonstrating its value. Dana Terrell has practiced her method of integrating Bowen family systems theory for emotional maturity with EMDR-IGTP therapy since 2015. In the past year she has adapted iBE to include the OTS protocol because it addresses the truth that we face conflict throughout our life, and thus we need a little more opportunity to process experiences on this theme than her previous approach offered.
- The purpose of this research project has been fully explained to me and I understand that I will be asked to complete the following:

- **1)** an Intro Survey to be sure this group experience is appropriate for me at this time. *If I have no red flags making group treatment inadvisable at this time, I will also complete Set 1 of the Assessments. All assessment forms are found at ibetherapy.com/about-3*
 - **2)** I will answer all surveys/questionnaires frankly to the best of my ability.
 - **3)** I will participate in three days of either the Research Group Condition or the Control Group Condition, according to random assignment, per the schedule printed on the Registration Form which I have already submitted.
 - **4)** I will complete Set 2 of the follow-up forms within 24 hours of the completion of my iBE group on October 15, 2022.
 - **5)** I will complete Set 3 of the follow-up forms within 48 hours of November 15, 2022.
- I understand I may have uncomfortable feelings related to experiences in my past, present, or my concerns for the future connected to the topic of conflict in relationships. Previous participants have shared that they were sometimes surprised and even scared of the intensity of the feelings that came up in EMDR therapy. However, by staying with the process they could observe that the distress tended to decrease with the EMDR processing methods. Thus, they began to trust that they could handle intense distress for 1-2 minutes at a time.
 - I have been given the opportunity to ask questions, and all such questions and inquiries have been answered to my satisfaction by Dana Elken Terrell. NOTE: Dana will be on vacation overseas from August 30 to September 21. Please reach out before or after those dates.
 - I understand that I am free to decline to answer any specific items or questions in interviews or questionnaires. However, complete responses will increase the value of the research. Please contact Dana Terrell if you cannot answer a question.
 - I understand that all data on assessment forms will remain confidential with regard to my identity by using the last 5 digits of my driver's license number instead of my name. **PLEASE, be sure to post accurately the 5 digits in the space designated in each form.** When I click on the SUBMIT button at the end of each form, I understand my results will be stored in my record digitally.
 - I understand that, in the unlikely event of any physical or mental injury resulting from this investigation, the principal investigator and Comprehensive Therapy Approach, Inc. and First Lutheran Church are not responsible for any financial compensation or medical treatment for such physical or mental injury. I understand that if my distress is above a 5 out of 10 at the close of a research day, my EPT member or Dana Terrell will spend individual time with me to help me reduce the distress level.
 - I certify that to the best of my knowledge, I have no physical or mental illness beyond anxiety or depression, or other weakness that would increase risk during participation in this investigation.
 - I understand that participation in this research project is voluntary.

- I understand that I will not receive any compensation for my participation in this study, but that I will be receiving therapy that is generally offered at \$50 per hour of group. And I will have the satisfaction of contributing to the welfare of all healthcare workers who struggle with conflict in any kind of relationship.
- I understand that the approximate length of time required for participation in this research project differs due to the research condition.
- The Control group will receive 7 total hours of iBE (integrative Bowen and EMDR) therapy on Saturday, October 1, 8, and 15, 2022. They can receive the skills performance enhancement on November 19, 2022, once the study is complete.
- The Research group will receive 7 total hours of iBE (integrative Bowen and EMDR) therapy on Saturday, October 1, 8, and 15, 2022, plus 3.5 hours of skills performance enhancement, for 10.5 hours.
- **ADDITIONALLY**, there is the time necessary to complete online forms: my Registration, Intro Survey, and Assessments for Set 1, Set 2 and Set 3. **I understand that I need to arrange my circumstances to be free from distractions to give the most accurate responses.** I understand that completing each set of questionnaires might take up to 30-45 minutes for most people. For 3 occasions of paperwork, the total time could be over two hours. Thus, the total time expected for the research control group participants may be approximately 9 hours. And the total time for Research group participants may be over 12.5 hours.
 - The questionnaires I will complete three times include the following items:
 - Healthcare Conflict Measure
 - HADS (Hospital Anxiety and Depression Survey)
 - Differentiation of Self Inventory
 - PCL-5
 - SPRINT
- I UNDERSTAND THAT I AM FREE TO DISCONTINUE MY PARTICIPATION AT ANY TIME.
- I give my consent to use my personal data, without reference to my name, for the research report of this research study as intended for publication.
- I understand that if I have any questions concerning the purpose or the procedures associated with this research project, at any time along the way I may contact:

Dana Elken Terrell, (619) 283-5665 or danaterrell.lcsw@gmail.com. During her overseas travel time from Aug. 30 to September 21, all phone calls will be saved as messages and responses given after September 22.

COVID PROTOCOL

Given that San Diego County still has high case counts of COVID, likely under-reported due to the prevalence of self-testing, we consider the actual case count to be 5 to 10 times higher than reported statistics. These multiplication factors have been commonly used by local infectious disease specialists reporting in the news.

Dana Terrell feels a sincere responsibility to keep all participants and volunteers safe during an indoor event. Therefore, **she is defining the following steps and policies to maintain safety at the highest level for all.** Her additional desire is to maintain health for all, so all are able to complete the full 3-day opportunity for healing from conflict stress and/or trauma. And, she wants to maintain her own health so she can serve on October 1, 8, and 15 you as you hope and expect.

1. All participants must be vaccinated for COVID. **Attach your proof of vaccination when you email this Consent Form.**
2. **Please self-test** on October 1, 8 and 15 before your research events. If you have a positive COVID test, please stay home. Unfortunately, that will disqualify you for the study. But we will be deeply appreciative of your consideration of the group. Please call Dana Terrell to inform her at 619 322-3666.
3. It is advisable to wear a mask, especially as you enter courtyard leading to the entrance to the First Lutheran Church on October 1. There is a well-organized monthly event distributing clothing to homeless persons that day. The courtyard may be somewhat crowded.
4. I have been assured that indoors the church has a good ventilation system. On October 1, to provide more privacy, we will meet in the church sanctuary at 3 large tables Each group will have an Emotional Protection Team member serving them. All EPT members are either associate therapists or licensed therapists trained as EPT members. They have volunteered to maximize the benefit of the experience for you and all the other participants.
5. There may not be enough space to be generously socially distanced. Thus, you may want to wear a mask, and/or set your chair further apart and bring a clip board for some of the activities that would usually require a table. I understand Dana Terrell, LCSW will wear a mask while meeting people. But when she leads the therapy groups, she will remove her mask, be at least 6 feet from the nearest people, so as to be safe, plus clearly audible to the group of 30 participants.

I have read all of the above and agree to all of the above terms of participation. *I will email this form and my proof of COVID vaccination to danaterrell.lcsw@gmail.com.*

PRINTED NAME

Last 5 digits of driver's license

Signature

Date