

SOCY11 - Professor Rogers
Final Research Proposal

Assessing Refugee Mental Health in the Upper Valley

Literature Review

The research topic is the mental health of refugees, immigrants, and asylum seekers and how sexual and gender-based violence is a contributor to those mental health consequences. Additionally, this research focuses on the effects of legal services on the mental health of this population. In particular, the literature focuses more on women because they're more susceptible to being victims of sexual and gender-based violence. Refugees, immigrants, and asylum seekers have a significant impact on the economy, global politics, and social contexts of the rapidly growing world. This topic is especially important in the current political climate as new information on the cycles of abuse against refugees and immigrants emerge. Thus, the study of this population is necessary in order to effectively support and advocate for displaced people in the Upper Valley as well as the world at large. This research can help inform policy interventions, government actions, advocacy efforts, future research, and humanitarian responses to the migration crisis.

Refugees, immigrants, and asylum seekers face high levels of mental illness and distress. There is especially a high prevalence of trauma and posttraumatic stress disorder among this population due to the exposure of violence and traumatic experiences from their countries of origin (Youngmann et al., 2021). Women also experienced and witnessed different types of interpersonal violence in their country of origin, including physical, sexual, and emotional violence (Kaltman et al., 2011). Additionally, the displacement and need for acculturation that comes with migration often has an impact on the mental health of ethnic minorities. Immigrants are forced to rebuild their social expectations, suggesting that concepts such as anomie (which is when immigrants and refugees go from a stable culture of origin to a new cultural environment), powerlessness, and alienation are interrelated and impactful when it comes to the mental health of immigrants (Vega and Rumbaut 1991).

A heightened risk of sexual and gender-based violence is at least one contributor to these mental health challenges. Studies have shown that sexual and gender-based violence happen at every social and economic level and is dependent on the country of origin (Menjivar and Salvido 2002). It is not necessarily always described as violence but that women often believe that their sexuality was their one and only solution to their freedom and immigration (Kaltman et al. 2011). Additionally, many women witnessed physical assault or rape during their journey to the United States. But many described their helplessness in preventing the violence due to the fear of being victimized themselves (Kaltman et al. 2011). Domestic violence with immigrant women are exacerbated by their position as immigrants because of limited language skills, lack of access to dignified jobs, uncertain legal statuses, experiences in their home countries, and a lack of alternatives to living with their abusers (Menjivar and Salcido 2002).

Having a contentious legal status can be a significant source of stress and anxiety for immigrants, which can contribute towards poor mental health. Immigrants who lack legal documentation or have irregular documentation may be subject to xenophobia, discrimination, and deportation, causing ongoing insecurity and uncertainty about their future. Living in an uncertain and restrictive state is extremely difficult and taxing on an immigrant's mental health, especially when they live in constant fear of being separated from loved ones and the potential

loss of employment or housing (De Trinidad Young and Pebley 2017). Additionally, undocumented immigrants may feel reluctant to seek medical or mental health services due to fears of being reported to authorities. Many immigrant women are reluctant to seek legal help or report gender-based violence because of their fear of being reported to the authorities (Menjívar and Salcido 2002). This irregular legal status compounds their vulnerability and isolation and exacerbates their mental health (Menjívar and Salcido 2002). In certain cases, an abusive husband or significant other can use his wife's legal status as a form of blackmail, and the wife will avoid filing criminal charges against her husband because her legal status would then be jeopardized (Menjívar and Salcido 2002).

This particular community also suffers from additional stressors from the process of seeking asylum and citizenship. The current literature demonstrates that there is an existing relationship between heightened stress and negative health outcomes. Language barriers, cultural and social stigmas, and the high financial costs of seeking mental health help adds to the existing stress that immigrants face (Sangalang et al. 2019). Immigrants with limited English proficiency face language barriers, lack of linguistically appropriate services, and lack of interpretation services (Takeuchi and Kim 2000; Portes et al. 1992). Many immigrants who experience internalized stigma often result in a devalued sense of self, leading to feelings of shame and failure as they feel a personal responsibility to manage life stressors without any external help (Salami et al. 2019). Economic distress and living in poverty forced families to live in unsafe neighborhoods, which adds to the accumulating stress and fear that immigrants face (McNeely et al. 2020).

There is a gap in the current literature on both the impact of legal services on mental health and immigrant and refugee mental health as well as information in the Upper Valley. The research question this study seeks to answer is how legal services affect the mental health of refugees and immigrants in the Upper Valley. The hypothesis is that legal services positively benefit the mental health of refugees and immigrants, specifically in the Upper Valley. The proposed research specifically focuses on the work of the Welcoming All Nationalities Network (WANN), an organization that provides comprehensive legal services for refugee and immigrant survivors of sexual and gender-based violence in the Upper Valley. In this study, we seek to fill this gap in knowledge by quantitatively measuring the effectiveness of the legal services provided by WANN to their clients and how this impacts their mental health.

Measures and Research Methods

Research method

To conduct our research, we advise WISE WANN to use a quantitative, survey-based approach. Online survey methods can be sent out/administered at a very low cost which is beneficial for the organization given its limited staff and financial resources. The cross-sectional survey also allows WISE WANN to compare two unique populations with one survey - those who have been fully represented by WISE WANN and those who have not - which allows WISE WANN to determine how full representation affects the mental health of their target population. This method allows WISE WANN to also address the language barriers that many of their participants face by being able to easily translate the short survey into a variety of languages with Google Translate. This would increase the number of individuals who are able to complete the survey. The online survey method also would increase the response rates because of the survey's confidential nature and simplicity to fill out. The quantitative data obtained from the survey is

helpful to WISE WANN as it will benefit their ability to advocate for the funding of their services when they meet with grantmakers that fund the organization.

However, there are a few disadvantages to using this method. One key disadvantage is that cross-sectional methods limit WISE WANN's ability to assess causality. This could be improved by using longitudinal rather than cross-sectional methods, surveying respondents before and after receiving support from WISE WANN. Another limitation of our proposed method is that it is much harder to discuss sensitive and specific issues related to mental health via an online survey. If WANN wanted more details on these sorts of issues, qualitative interview methods would be better than survey methods. Finally, given that WISE WANN has only represented 30 participants fully in their legal proceedings to obtain residency, the generalizability of our quantitative method is limited due to the small sample size.

The study would be internally consistent as it will only collect data from a sample of 40 individuals of the target population, which will make our data very reliable. However, researchers need to ensure that the survey questions collect proper data and are worded in a comprehensive and understandable manner to reduce response bias. Additionally, carefully constructed survey questions help prove the validity of the study by giving WISE WANN specific data on disparities in stressors between those who have received full representation from WISE WANN and those who have not.

Conceptual Model

Our conceptual model builds upon previous literature that has shown a link between documented immigrants exhibiting reduced stress exposure and better mental health outcomes than their non-documented peers. This model also extends the substantial research proving the detrimental effects of chronic stressors on mental well-being. We hypothesize that participants of WISE WANN's legal services who have successfully received full legal representation for any of the services relating to their immigration or refugee status will face reduced chronic stressors as they relate to employment, basic necessities, and community and this will also result in better mental health outcomes than respondents who have not received full legal representation.

In this model, our independent variable is receiving legal representation for services offered by WISE WANN regarding visas, naturalization, and residency status. Our two dependent variables are chronic stress exposure and mental health outcomes. We recommended operationalizing the independent variable with a checklist of all the legal services provided by WISE WANN, in which the respondent would indicate which (if any) of the services they have received full legal representation for and had successfully approved (*Question 1, Appendix Document 1*). In order to operationalize stress exposure relating to employment, basic necessities, and community we decided to also use a checklist for each of the three types of stressors faced in the past 12 months. To measure stressors relating to employment, we used a checklist of 5 chronic stressors such as difficulty securing employment, struggles with income and financial stability, and work-imposed stress (*Questions 2-4, Appendix Document 1*). To measure stressors relating to basic necessities, we used a checklist of 5 chronic stressors such as difficulty finding housing, trouble obtaining reliable transportation, and issues accessing healthcare services. To measure stressors relating to community and belonging, we used a checklist of 5 chronic stressors such as immigration or ethnic based discrimination, feelings of exclusion to their local community, and feelings of anxiousness due to immigration status. Finally, to operationalize mental health outcomes we decided to take four questions from the DASS-18, which is a modified version of the official DASS-21 (Depression, Anxiety and Stress

Scale). The DASS-18 has been shown to be statistically valid at measuring cross-cultural and cross-lingual mental health outcomes for different ethnic backgrounds, and we chose to only use the top two most statistically accurate questions regarding measurements of depression and anxiety. These four questions will be in the form of an ordinal ranking from 0 to 3 assessing how often the respondent has experienced depressive and anxiety symptoms in the past two weeks, such as lacking positive feelings and experiencing nervous energy (*Questions 5-8, Appendix Document 1*).

Sampling and Recruitment

The target population in this proposed study is all individuals who have utilized WISE WANN's services - either full representation, consultations, referrals, etc. When conducting this study, the population will be split up into those who have been fully represented by WISE WANN and those who have not. Since WISE WANN has only fully represented 30 individuals, we recommend that 20 individuals be randomly sampled from each group. To create these two sampling frames, WISE WANN will access its list of participants (that includes the names, phone numbers, and emails of all past and current participants) and sort them into the two groups - those who have received full representation and those who have not. Once WISE WANN has created these two lists, they will randomly sample 20 individuals in each group. This size was selected to make sure the implementation of the study is feasible for WISE WANN. We recommend that WISE sample the participants in order to prevent coercion and manage risk, and to ensure that identifying information of participants is kept confidential. After selecting participants, WISE volunteers will call the selected participants and follow the steps detailed below.

Study Procedures

After identifying and sampling participants, WISE WANN would be able to start implementing this study. This would be a multi-step process that utilizes WISE's large volunteer base. The process starts with WISE volunteers contacting selected participants to inform them about the study and confirming their willingness to take the survey. If a participant confirms, the WISE volunteer would ask about language accommodations and if a phone survey is needed. Additionally, the WISE volunteer would state that participants have two weeks to fill out the survey once it is sent to them. After the phone call, the WISE volunteer would then send the participant a copy of the study's consent form (*Appendix Document 2 – Full Committee Consent Form*) as well as a link to the Qualtrics survey (*Appendix Document 1*). The WISE volunteer would send these documents to the participant in the participant's desired language. In the case that a participant requests a telephone-based survey, the WISE volunteer would then set up a time with the participant to administer the survey for them over the phone. The WISE volunteer would have access to telephonic interpretation and be able to read the consent form and survey aloud to the participant desiring a telephone survey. It is important to note that the survey would first ask participants to confirm that they have read and agreed to the terms in the consent form, ensuring that WISE WANN does not collect signatures of any survey participants to keep the study confidential. We expect that contacting participants and sending study materials will take 1- 2 weeks. Once all survey and consent materials are sent to the participants (and telephone surveys are scheduled), data would auto populate in the Qualtrics platform over the next two weeks. We anticipate some challenges with compiling the data from surveys translated into different languages all into the same spreadsheet, but believe that, given the small sample size,

WISE WANN will be capable of compiling this data. Once all of the data is collected, WISE WANN will be able to run proper data analysis.

Interpreting the Data

In order to interpret the data, survey responses would have to be re-coded into quantitative measures to assess differences using estimation of means of reported stress exposure and mental health outcomes between respondents who have successfully received legal representation and those who have not.

First, legal services would be re-coded to a nominal variable with a 0 for any respondents who indicate they have not received any form of legal representation and a 1 for those who have received some form of legal representation (*Question 1, Appendix Document 1*). Next, stress exposure would be re-coded to a sum of all stressors experienced by the respondent from all three categories, with a minimum of 0 or a maximum of 15 (*Question 2-4, Appendix Document 1*). Then, mental health would be re-coded to a sum of all the ordinal responses for depressive and anxiety symptoms, with a minimum of 0 and a maximum of 12 (*Question 5-8, Appendix Document 1*). With this, we would have a binary 0 or 1 differentiating respondent who have not successfully received legal representation versus those who have respectively, a quantitative measure from 0 to 15 for chronic stress exposure, and a quantitative measure of 0 to 12 for negative mental health outcomes. To confirm our hypothesis that legal services offered by WANN contribute to decreased stress exposure and better mental health outcomes, we expect to find three key associations:

1. *Respondents who have received legal representation will report lower total chronic stress exposure than those who have not received representation.*
2. *Respondents who have received legal representation will report lower total depressive and anxiety symptoms than those who have not received representation.*
3. *Respondents who report lower total chronic stress exposure will report lower total depressive and anxiety symptoms.*

While this design can be beneficial for assessing associations between our variables, it limits causal conclusions. This is because survey research relies on self-reported data, which can be subject to bias and inaccurate reporting. Also, survey research is observational in nature and cannot establish causality, as it does not involve experimental manipulation of the independent variable. There may be other confounding variables that are influencing the relationship between legal services, stress exposure, and mental health outcomes, which the study may not have controlled for. Lastly, the sample size of the study may not be large enough to detect small or subtle effects. Therefore, while survey research can provide valuable insights into the relationship between our chosen variables, it cannot definitively establish causal relationships.

Ethical Considerations

When it comes to ethical considerations, it is most important that we carefully respect each of the three ethical principles presented in the Belmont Report; Respect for persons, Beneficence, and Justice. This is especially crucial for our research given we are working with such a vulnerable population. Respect for persons implies respecting their autonomy and safeguarding them if they lose it. By requiring informed consent, it complements federal norms. Even without consent, humans must be protected. Informed consent is linked to damage. Beneficence protects federal human subject research damage and informed consent laws. Essentially this means ethically securing people's well-being. Justice decides who benefits and

pays for research. Denying a reward or overburdening someone is an injustice. Since we will be asking refugees about their mental health, identities, and perhaps challenging experience, we must ensure to manage risks and benefits in order to avoid distress and risk that could arise from study participation. In order to do so, we will require our respondents to read a full committee consent form, which we have created using the template found from the CPHS website.

This consent form will include a study summary with key information about the study's purpose, risks, benefits, and alternatives, an introduction explaining why the recipient is being asked to participate, key background information describing the study's purpose, benefits, what the study involves, a list of options if one does not want to participate, what research activities will be done in the study, and risks. The permission form will be streamlined for readability and translation. Given the language difficulties in our study population, the phrasing will attempt to control for reading level and language fluency. As we will be distributing our survey by email, we will include the whole consent form in the email and a pre-survey question on the survey itself asking respondents to confirm that they've read it. This stage protects the participant and ensures respect, beneficence, and justice.

Feasibility:

There are some limitations that could arise during our study, but we have tried our best to craft our research design and methods in a way that fits the needs of WISE/WANN and helps us get the most out of our study in a feasible way. The risk of an inadequate sample size could harm the results we get from our study. There have been about 30 participants who have been fully represented by WISE WANN so far, but they may not all be easily contacted, as some are previous clients. So, an inadequate sample size could be a limitation, but there are ways to address that such as including non-fully representatives in our research and comparing the two groups. However, our proposed design is feasible in many ways. It would allow WISE WANN's relatively small team to distribute a large number of surveys to their clients. Their team does not have the resources to do many in-depth interviews, so a survey based method is the better approach and a survey is also translatable which accounts for language barriers. Since some refugees may prefer phone calls opposed to an email survey, we will offer the option for both.

Our research is significant in numerous ways. First, WISE WANN is curious to know about the specific relationship between their legal services and the mental health outcomes. As noted by Kate Barta from WISE WANN, "Legal services are essential for anyone seeking asylum. But even with legal services, it's a long and vulnerable journey to seek asylum in the US. I have clients who have been waiting more than 7 years for an interview on their application, during which time they have only a work permit. They have eligibility for no other benefits during that time. And some are single parents with a significant trauma history." Also, not much literature has been created about how legal services affect the mental health of immigrants and refugees with past traumatic backgrounds so although our research is a small study, it would help fill this gap and expand on this area of inquiry. Academically, it will contribute to our own curiosity and the broader sociological knowledge base that focuses on the experiences of immigrants and refugees in America. Essentially, this research would help WISE WANN tailor their services to ensure that they are fitting the needs of their population. Because the refugees and their mental health are the top priority here, we hope that they will ultimately benefit as a result of our research.

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Appendix

Document 1 - Sample Survey Document:

Page 1:



WANN Legal Services Survey

As part of an internal research study being conducted to assess how legal services better the living situations of WANN's clients, we would appreciate your honest feedback on the following questions:

Have you read the consent form, and do you consent to participating in this study? Yes: [] No: []

1. Which of the following services has WANN successfully helped you in obtaining or getting approved for through legal representation?

Please check all that apply to you:

<input type="checkbox"/>	Naturalization
<input type="checkbox"/>	T-Visa
<input type="checkbox"/>	U-Visa
<input type="checkbox"/>	Asylum
<input type="checkbox"/>	Humanitarian Petition
<input type="checkbox"/>	VAWA Petition
<input type="checkbox"/>	Other (please specify):
<input type="checkbox"/>	None of the above

2. Over the past 12 months, which of the following employment-related issues have you faced?

Please check all that apply to you:

<input type="checkbox"/>	Difficulty finding work or keeping a job that matches your qualifications
<input type="checkbox"/>	Discrimination or unfair treatment in the workplace due to your race, ethnicity, or immigration status
<input type="checkbox"/>	Struggle to make ends meet or pay for basic expenses due to your job or income level
<input type="checkbox"/>	Felt constantly overwhelmed or stressed by your work responsibilities or work environment
<input type="checkbox"/>	Worries about job security or fear of losing current job in the near future
<input type="checkbox"/>	None of the above



3. Over the past 12 months, which of the following resource-related issues have you faced?

Please check all that apply to you:

<input type="checkbox"/>	Difficulty finding affordable housing or living in unsafe or overcrowded conditions
<input type="checkbox"/>	Struggle providing healthy and nutritious food for yourself and/or your family
<input type="checkbox"/>	Trouble obtaining reliable transportation to get to work or access essential services
<input type="checkbox"/>	Difficulty accessing healthcare services or obtaining necessary medications
<input type="checkbox"/>	Problems obtaining legal documents or navigating legal systems, such as obtaining a driver's license or accessing public benefits
<input type="checkbox"/>	None of the above

4. Over the past 12 months, which of the following community-related issues have you faced?

Please check all that apply to you:

<input type="checkbox"/>	Discrimination, prejudice, or harassment due to your race, ethnicity, or immigration status in your community
<input type="checkbox"/>	Feelings of isolation or disconnection from your cultural identity or community
<input type="checkbox"/>	Conflict or tension with family members or loved ones due to immigration related hardships
<input type="checkbox"/>	Feelings of exclusion in community events or activities due to your immigration status or cultural identity
<input type="checkbox"/>	Feelings of anxiousness or being unsafe due to the political climate or hostility towards immigrants in your community or in the country at large
<input type="checkbox"/>	None of the above

For questions 5-8, please read each statement and circle a number 0, 1, 2 or 3 which indicates how much the statement applied to you over the past two weeks. There are no right or wrong answers. Do not spend too much time on any statement.

The rating scale is as follows:

0: Did not apply to me at all

1: Applied to me to some degree, or some of the time

2: Applied to me to a considerable degree or a good part of the time

3: Applied to me very much or all of the time



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|------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| 5. I couldn't seem to experience any positive feeling at all. | 0 | 1 | 2 | 3 |
| 6. I found it difficult to work up the initiative to do things. | 0 | 1 | 2 | 3 |
| 7. I experienced breathing difficulty (e.g. excessively rapid breathing, breathlessness in the absence of physical exertion) | 0 | 1 | 2 | 3 |
| 8. I felt I was using a lot of nervous energy. | 0 | 1 | 2 | 3 |

Document 2 – Full Committee Consent Form:

Page 1:

CONSENT FORM: TO TAKE PART IN RESEARCH

Dartmouth College

Effect of Legal Services on the Mental Health of Refugees/Immigrants in the Upper Valley

Principal Investigators: Investigators: Evan McMahon, Neha Agarwal, Omario, Corral, Zoe Moon, Megan Lynch

You are being asked to take part in a research study. Taking part in research is voluntary.

Study Summary:

The purpose of our study is to examine the role that legal services have in the mental health of those Refugees/Immigrants in the Upper Valley who are receiving them, specifically through the WISE/WANN organization. As researchers, we are benefiting from gaining knowledge that will either confirm or refute our hypothesis. The community organization involved, WISE/WANN, will benefit from developing an understanding of their impact on your health and how they can adapt their program in order to meet your needs. And you, as a recipient of the WISE/WANN program, will benefit from the heightened awareness of how your mental health is or is not being affected after receiving legal services. Because we will be conducting a survey that will assess vulnerable topics such as mental health, identities, and maybe challenging experiences, we will ensure to manage these risks by providing you with ample information about our study and the option to opt out at any time. Your participation will not be expected until you chose to sign this consent form after reading all the information. You are being asked to take part in a research study. Taking part in research is voluntary.

Introduction:

You are being asked to take part in this study because you are a Refugee or Immigrant in the Upper Valley who has received legal services through WISE/WANN.

Your decision whether to take part will not influence your future medical care, academic standing, job status, etc. Please ask questions if there is anything about this study you do not understand.

What is the purpose of this study?

The purpose of the study is to discover more about the relationship between receiving legal services and mental health in order to enhance the programs providing legal assistance, those Refugees/Immigrants receiving the legal assistance through such programs, and our own academic knowledge/curiosity.

Will you benefit from taking part in this study?

We hope to gather information that is helpful for programs offering legal services and may Help them tailor their ways in order to help the people enrolled in such programs in the future.

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What does this study involve?

Our study involves you filling out a cross-sectional online survey asking you to answer questions regarding stress levels, self-reported mental health levels, and other demographics. Completing this short survey is all we will ask of you, and we will take the responses and share them with WISE WANN and run a statistical test to assess the impact of legal services.

Your participation in this study will last no longer than the amount it takes you to fill out the survey, which will be an estimated 10 minutes but may take shorter or longer. ■

What are the options if you do not want to take part in this study?

If at any time you wish not to partake in this study or complete the survey, you may opt out at any point and we will fully understand.

If you have completed the survey and then wish for your responses not to be included in our data, simply let us know and we will not include your survey responded with our gathered data.

What are the risks involved with taking part in this study?

We cannot be sure how you may react to certain questions that arise. Because we are sensitive to the ethical principles and your vulnerability in partaking in this study, we have constructed a survey that will hopefully limit any triggers or risks with your involvement, but we can not be sure.

Other important items you should know:

- **Leaving the study:** You may choose to stop taking part in this study at any time for any reason. If you decide to stop taking part, it will have no effect on you or your involvement in WISE WANN.
- **Number of people in this study:** We expect 40 people to enroll in this study here including 20 individuals closely working with WISE WANN or still in the process of acquiring visas/residency/permits/citizenship and 20 individuals who have completed their work with WISE WANN.

How will your privacy be protected?

We are careful to protect the identities of the people in this study. We also keep the information collected for this study secure and confidential.

The data and responses we will attain will only be shared with WISE WANN and our own access, but other than that we will ensure that your responses are protected. We will also respect your anonymity and not include your own name in the research and any background information

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related to you will remain anonymous as well. The data we will compile will be maintained indefinitely, but after compiling our results we will no longer need access to the responses you have submitted so they will only be necessary for a short period of time.

Who may use or see your health information?

By signing this form, you allow the research team to use your health information and give it to others involved in the research. The research team includes the five of us Dartmouth students in our research group plus others working on this study elsewhere. You also permit any health care provider holding health information needed for this study to give copies of your information to the research team.

The information collected for this study may be used by researchers or officials of the following institutions.

- Our research team in our SOCY011 class at Dartmouth College
- WISE/WANN

No publication or public presentation about the research described above will reveal your identity without another authorization from you.

Identifiable data collected for this study will be used for research purposes which are determined to be reasonable and in line with expectations by a review committee.

Once data collected for this research study is no longer identifiable, the data may be used or disclosed for other purposes.

Your permission to use your health information for this study will not end until the study is completed. During this study, you and others who take part in the study may not have access to the study data. You may ask for study data once the study is over. You have a right to receive a copy of the information in your medical record at any time.

What if you decide not to give permission to use and share your personal health information?

If you do not allow use of your health information for this study, you may not take part in this study.

If you choose to stop taking part in this study, you may cancel permission for the use of your health information. You should let the researcher know if you want to cancel your permission. The study team will assist you in putting your wishes in writing. Information collected for the study before your permission is canceled will continue to be used in the research.

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Whom should you call about this study?

If you have questions, concerns, complaints, or suggestions about human research at Dartmouth, you may call the Office of the Committee for the Protection of Human Subjects at Dartmouth College (603) 646-6482 during normal business hours.

Will you be paid to take part in this study?

No, you will not be paid to take part in this study.

Your responsibilities as a person taking part in this study

- (1) Be aware it is important for your safety that the research team knows about your medical history and current condition.
- (2) Notify the research team in advance if you plan to undergo any other medical treatment during this study or are taking or plan to start taking any medications.
- (3) Notify the research team immediately if you suffer any injury or unexpected reaction to the study medication or procedures.
- (4) Seek treatment with the help of the research team if you suffer any injury or unexpected reaction to the study medication or procedures.
- (5) Make reasonable efforts to follow the instructions of the research team.

CONSENT

We will not ask you to sign this consent form at the time, but we will include a pre-survey question requiring you to ensure you have accessed and read this consent form before beginning the survey.