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## Permission for Research Participation of a Minor

**Research Study Title: Getting Rooted in Gardening**

**Researcher(s):** Derrick Stowell, University of Tennessee, Knoxville  
Whitney Hale, University of Tennessee, Knoxville

### Key Information for You to Consider

The information in this box is a short summary to help you decide if you want to be in this research study. More detailed information is listed later in this form. Please ask questions if there is anything you do not understand. Please take your time. You should not feel rushed or pressured to make a decision.

- **Voluntary Participation.** Your child should only participate if you completely understand the study and want to volunteer. Your child does not have to be in this study.
- **Purpose.** The purpose of the research study is to evaluate how Getting Rooted in Gardening improves knowledge of gardening, the local food system in Knox County, increases understanding of nutrition among youth, exposes young people to careers in agriculture, and provides supplemental support for math and science standards.
- **Research Procedures and Activities.** If you decide to have your child be part of the study, we will ask your child to complete a pre-test and post-test measuring their gardening and knowledge. Your child will also take part in a total of nine gardening education sessions.
- **Duration.** If you agree to be in the study, your child's participation will last for nine one-hour garden education sessions during the Fall or Spring school semester.
- **Benefits.** Possible benefits include improved knowledge and understanding of gardening, nutrition, and other program content. Even if your child doesn't benefit from being in the study, their participation may help us to learn more about the Getting Rooted in Gardening program.
- **Risks.** Some risks of being in the study include risks inherent to gardening and food preparation including but not limited to: using pruners, insect stings, insect bites, scrapes, exposure to wild animals (like squirrels and rabbits).

### Why is my child being asked to be in this research study?

We are asking your child to be in this research study because we are developing a program called Getting Rooted in Gardening. This program involves multiple components, one of which is a school/after-school program. Your child's school/after-school program will be participating in Getting Rooted in Gardening and your child is eligible to take part in this program based on their current grade.

### **What is this research study about?**

The purpose of the research study is to evaluate how Getting Rooted in Gardening improves knowledge of gardening, the local food system in Knox County, increases understanding of nutrition among youth, exposes young people to careers in agriculture, and provides supplemental support for math and science standards. At the end of the school year in which you participate, researchers will ask that the CLASS Report data for participating classes be provided. This data, along with that of two additional classes who did not have any gardening programs conducted, will be analyzed. The CLASS Report data will not include any identifiable student information. Results of the project will be published to provide greater insight into the efficacy of utilizing gardening programs to supplement understanding of math and science as well as to improve the well-being of young people and in providing exposure to careers in agriculture.

### **Who is conducting this research study?**

This study is being conducted by researchers at the University of Tennessee. The research team and/or the University of Tennessee, Knoxville is receiving funding from the National Institute of Food and Agriculture, U.S. Department of Agriculture, under Award Number 2023-70026-40845. This funding is supporting the program development and evaluation of Getting Rooted in Gardening.

### **How long will my child be in the research study?**

Researchers will visit your child's school/after-school program nine (9) times during the Fall or Spring Semester to conduct gardening programs. Each class visit will last approximately one hour.

### **What will happen if I say "Yes, I want my child to be in this research study"?**

If you give permission for your child to be in this study, we will ask your child to take part in the Getting Rooted in Garden Program.

- *Each student will complete a pre-test on their knowledge of gardening, nutrition and food systems.*
- *Each student will be asked questions about what they learned midway through the program.*
- *Students will take part in nine one hour Getting Rooted in Gardening lessons that will be held at your child's school or after-school program.*
- *After the ninth session, your child will complete a post-test on the knowledge gained from being part of Getting Rooted in Gardening.*
- Students will not be required to eat any food, especially those students who have food allergies. Students will be encouraged to try new foods during the program, but no one will be required to do so. Please inform program staff if your child has any pertinent allergies.

### **What happens if I say “No, I do not want my child to be in this research study”?**

- Your child's being in this study is up to you. You can say no now or leave the study later. Your child will be able to take part in the Getting Rooted in Gardening program even if you do not consent for them to participate in the research. If you do not give permission for them to take part in the research, your child’s name will not be included in research documents and no data related to evaluations will be collected or used in the research.
- Either way, your decision won’t affect your child's relationship with the researchers or the University of Tennessee, or their school or after-school program.

### **What happens if I say “Yes” but change my mind later?**

Even if you decide to allow your child to be in the study now, you can change your mind and stop at any time.

- If you decide to stop before the study is completed, please contact Whitney Hale to ask to be removed from the study. At that time all data related to your child’s participation will be withdrawn from the study files and not used for analysis.

### **Are there any possible risks to my child?**

Risks of participation include those inherent to gardening and food preparation including but not limited to: using pruners, insect stings, insect bites, scrapes, exposure to wild animals (like squirrels and rabbits), etc.

A first aid kit will be on hand during all programs.

There is a risk of allergic reaction when tasting foods or from coming into contact with an allergen. If your child has any food allergies, they will not be required to taste foods that contain the allergens as part of this study. Your child should not eat anything that they are allergic to. If your child has any food allergies, please indicate the food allergy in the statement of consent section below.

No personally identifiable data will be shared, and all class data will be codified. The code’s key will be kept in a discreet, locked location and will only be known to researchers.

### **Are there any benefits to being in this research study?**

There is a possibility that your child may benefit from being in the study, but there is no guarantee that will happen. Possible benefits include improved knowledge and understanding of gardening, nutrition, and other program content. Even if your child doesn't benefit from being in the study, their participation may help us to learn more about The Getting Rooted in Gardening program. We hope the knowledge gained from this study will benefit others in the future.

### **Who can see or use the information collected for this research study?**

We will protect the confidentiality of your child's information by removing their name from any data stored electronically. A key code will be provided to each student. This key code will be stored on a paper form and locked in the researcher's office/file cabinet. The only time the key code will be used is during the pre and post-tests. Your child will not put their name on the tests to help de-identify the data.

Once the post-test has been recorded, the key code that include your child's name and code will be destroyed.

If information from this study is published or presented at scientific meetings, your child's name and other personal information will not be used.

We will make every effort to prevent anyone who is not on the research team from knowing that your child gave us information or what information came from your child. Although it is unlikely, there are times when others may need to see the information we collect about your child. These include:

- People at the University of Tennessee, Knoxville, who oversee research to make sure it is conducted properly.
- Government agencies (such as the Office for Human Research Protections in the U.S. Department of Health and Human Services), and others responsible for watching over the safety, effectiveness, and conduct of the research.
- If a law or court requires us to share the information, we would have to follow that law or final court ruling.
- National Institute of Food and Agriculture, U.S. Department of Agriculture who is the study sponsor for this research.

### **What will happen to my child's information after this study is over?**

We will not keep your child's information to use for future research use. Your child's name and other information that can directly identify them will be deleted from their research data collected as part of the study.

### **Who can answer my questions about this research study?**

If you have questions or concerns about this study, or have experienced a research related problem or injury, contact the researchers, Derrick Stowell at 865-567-7288, [dstowell@utk.edu](mailto:dstowell@utk.edu), Whitney Hale, 865-974-4265, [whitneyhale@tennessee.edu](mailto:whitneyhale@tennessee.edu).

For questions or concerns about your rights or to speak with someone other than the research team about the study, please contact:

Institutional Review Board  
The University of Tennessee, Knoxville  
Phone: 865-974-7697  
Email: [utkirb@utk.edu](mailto:utkirb@utk.edu)

## STATEMENT OF CONSENT

I have read this form and the research study has been explained to me. I have been given the chance to ask questions and my questions have been answered. If I have more questions, I have been told who to contact. By signing this document, I am giving permission for my child to be in this study. I will receive a copy of this document after I sign it.

Child's Name (printed) \_\_\_\_\_

Parent's Name (printed) \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Food allergy information (check one box below):**

- My child does not have any food allergies.
- My child has the following food allergy and should not eat food that contains this allergen.

List food allergies here:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent's Signature \_\_\_\_\_

**Permission for use of images**

Photos will be taken of participants in this program. No photos of your child will include identifiable features such as a minor's face or profile. Photos will not be used for research analysis, but will be used for marketing the program and presentations about the program after the study is complete.

Your child may participate in the study even if you do not wish for photos to be taken of yourself and/or your students.

I agree that photographs of my child may be taken as part of the program.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Researcher Signature** (to be completed at time of informed consent)

I have explained the study to the participant and answered all of his/her questions. I believe that he/she understands the information described in this consent form and freely consents to be in the study.

\_\_\_\_\_  
Name of Research Team Member      Signature of Research Team Member      Date