

## INFORMED CONSENT: Counselors-in-Training in Counseling

Dear Student:

I am Madeleine Stevens, a graduate student within the Counseling, School Psychology, and Educational Leadership Department at Youngstown State University. Along with my faculty principal investigator (PI), Dr. Amy Williams, Assistant Professor in the Counseling, School Psychology, and Educational Leadership Department, and Sarah Dowd, a fellow graduate student in the counseling program, I am conducting a study to investigate Master's-level counseling students' attitudes toward counseling and their beliefs about whether personal counseling is beneficial to them. **If you consent to participate in this study, you will be asked to:**

- Participate in the informed consent process and agree to participate in the study
- Complete an assessment instrument that collects demographic information and measures your attitudes and beliefs toward counseling; **all information collected will be completely anonymous and will not be able to be tied back to participants in any way.**
- This assessment will be administered online via a Qualtrics survey link sent to your YSU e-mail and will take about **10-20 minutes** to complete

You are at a minimal risk of harm as a result of participating in this this research study. Potential risk and adverse events of participating in this study include the possible loss of confidentiality, although this risk is minimal. Additionally, participants may experience distress when completing the survey, as you are being asked to recall potentially negative experiences from your past. Should you experience distress, please utilize PsychologyToday.com to seek help from a mental health professional near you. Demographic information will only be reported in aggregate form and will include only information about your gender, age range, race, ethnicity, marital status, number of children, program track within respective counseling program, education level outside current program, income range in last fiscal year, and nature of your counseling program (public vs. private and whether personal counseling is required or not). This means that only the overall number of participants that are in each demographic category will be reported and your specific combination of demographic data will not be presented. I will also keep all data connected to your responses in a secure non-cloud-based storage drive on the YSU server. Only Dr. Williams will have access to the raw data file retained within Qualtrics, which will be password protected and maintained on the secure Qualtrics server. Dr. Williams will conduct all data analyses to protect your individual response data.

There are benefits to you if you participate in this study. Participants in this study will have the opportunity to contribute to the future of the counseling profession by adding to the body of literature that describes attitudes, beliefs and practices of counselors. It also provides an opportunity for participants to reflect and potentially change their attitudes toward the profession of which they are part. Each person who takes the survey will be provided with information on how to find a counselor in his/her area that accepts his/her insurance, should he/she choose to pursue personal counseling.

Your privacy is important, and Dr. Williams, Sarah and I will handle all information collected about you in a confidential manner. I will report the results of the project in a way that will not identify you. I do plan to present the results of the study to a variety of audiences, which may include professional journal publications, and conferences connected with the counseling profession. These possible reports of the results of the study will depend on whether potential publications and/or presentations are accepted for publication or presentation.

You do not have to participate in this study. If you choose not to participate, you can say no without losing any benefits that you are entitled to. If you do choose to participate in this study and change your mind, you can stop participating at any time by exiting the survey. If you wish to withdraw after you have completed the survey, contact us to inform us of your desire to withdraw from participation.

If you have questions about this research project please contact Dr. Amy Williams (aewilliams02@ysu.edu) or Madeleine Stevens (mmstevens@student.yosu.edu) If you have questions about your rights as a participant in a research project, you may contact the Office of Research at YSU (330-941-2377) or at YSUIRB@ysu.edu

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I understand the study described above and have been given a copy of this consent document. I am 18 years of age or older and I agree to participate.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date