

School of Population Health  
Curtin University  
GPO Box U 1987, Perth  
Western Australia, 6845



## ***Mental Health during the Transition from Primary to Secondary School***

### **Parent / Carer Information Letter**

Dear Parent/Carer,

The move from primary to secondary school can be a stressful period for students. This move also happens during early adolescence, a time of increased risk for the development of mental health problems. This transition may be particularly stressful for children with dyslexia, due to the increased educational and literacy related demands placed on children. Our team of researchers at Curtin University are working to better understand the risk and protective factors associated with child mental health during the transition to secondary school.

### **We are interested in the experiences of children with and without reading difficulties.**

The research is funded by the National Health and Medical Research Council and is being conducted in partnership with the Dyslexia-SPELD Foundation (DSF). We would like to invite your child to take part in our study.

### **What does participation in the research project involve?**

Children in Year 6 and their parent/carer will be asked to complete a survey about their social and emotional wellbeing. This will include information on their mental health, self-esteem and resilience, ability to regulate their emotions and cope with stress, as well as relationships with friends, family, teachers, and school. Children will also complete a short reading assessment. The reading test and questionnaires will be completed individually. You and your child will have the option to have the survey read aloud to you.

**Your child's assessments should take approximately 45 to 60 minutes (including short breaks, if needed). Your survey should take approximately 45 minutes.** We ask that you stay within the proximity of the study area so that you can support your child if needed. **You can choose where you and your child complete these tasks.** The assessment session can take place in your own home, in a private clinic room at Curtin University, or a private clinic room at the Dyslexia-SPELD Foundation.

As we are interested in the transition from primary to secondary school your child will be re-invited to participate in the study each year for up to 3 years. We understand that finding time for this can be difficult. As a thank you, children will receive a \$15 gift voucher after each yearly assessment they complete.

You will also be asked to complete a short questionnaire about your and your child's social and emotional health, as well as your child's academic performance. This questionnaire should take about 40 minutes to complete.

### **What are the benefits of this research for me and my child?**

There may be no direct benefits to you or your child taking part in this research. However, the research will identify potential risk and protective factors that could become the targets of mental health promotion interventions. Your participation may therefore benefit future children. You have the option to receive a non-diagnostic summary of your child's performance on a standardised reading assessment (*The Test of Word Reading Efficiency-2*), if you choose. This summary can be shared with your child's School so they can support their literacy skills, if required.

**Are there any risks?**

You and your child will be providing information on your emotional well-being and mental health. Although unlikely, for some children reflecting on their emotional experiences may be upsetting. However, we have conducted similar research previously with no adverse experiences or negative feedback and children are also free to stop participation at any point. Parents will be requested to stay within the proximity of the study area to support their child if needed. All research assistants are trained in strategies to help manage emotional distress, if it occurs. All participants will have the option to take breaks if required, withdraw participation, and/or reschedule the assessment session.

If your child's results indicate that they are experiencing significant social or emotional problems, you will be contacted by a registered psychologist. Additionally, if your results indicate that you are experiencing significant emotional difficulties then you will also be contacted by a registered psychologist to discuss pathways for additional support, if desired.

**Do my child and I have to take part?**

Your and your child's participation is entirely voluntary. This means you do not have to take part in this project. If you and your child would like to take part, we have included a consent form for you to sign. We have also included an information sheet and consent form for your child. Please talk to your child about the activities and let them know that they do not need to take part if they do not want to. Your decision about whether to take part in this project will not change your family's relationship with Curtin University in any way.

**What if either of us was to change our mind?**

If you give permission, but then change your mind, you and your child may withdraw at any time without consequence. So we can compare results for children who withdraw and those who do not, we would like to use the data that has already been collected before you or your child withdraws. This information will be completely de-identified and anonymous. Withdrawing from the study will not change your family's relationship with Curtin University in any way.

**What will happen to the information collected, and is privacy and confidentiality assured?**

When information is collected about you and your child, names and any personal information will be removed and a code will be given instead. Your and your child's information is stored this way so that we can combine information collected over time and match parent and child reported information. Only the researchers will know the codes that relate to the individual's data. Digital data will be stored in a secure research drive on the Curtin University server. Any hard-copy data (e.g. consent forms) will be stored in a locked filing cabinet that can only be accessed by the researchers. All data will be stored until children are 25 years old, after which it will be destroyed according to the Curtin University Functional Records Disposal Authority protocol.

The results of this project may be published and presented at a conference, but no identifying information about you or your child will be presented. The anonymous information may also be shared with other researchers or placed in a publicly accessible database, if this is a requirement for publication.

**How do I know that the people involved in this research have all the appropriate documentation to be working with children?**

Under the Working with Children (Criminal Record Checking) Act 2004, researchers and clinicians who work with children must pass a Working with Children Check. DSF staff are also required to obtain a National Police History Check (NPHC).

**Is this research approved?**

Curtin University Human Research Ethics Committee (HREC) has approved this study (HREC number HRE2020-0168). Should you wish to discuss the study with someone not directly involved, in particular, any matters concerning the conduct of the study or your rights as a participant, or you wish to make a confidential complaint, you may contact the Ethics Officer on (08) 9266 9223 or the Manager, Research Integrity on (08) 9266 7093 or email [hrec@curtin.edu.au](mailto:hrec@curtin.edu.au).

**What if I have further questions about this research project?**

Please do not hesitate to contact any of us if you have any questions about the project. I can be contacted by phone on 9266 7025 or by email ([mark.boyes@curtin.edu.au](mailto:mark.boyes@curtin.edu.au)). You may also wish to contact one of the co-investigators (details below) or a member of the DSF team (9217 2500).

**How do I indicate my willingness for me and my child to be involved in this project?**

If you have had all questions about the research project answered to your satisfaction, and are willing for you and your child to participate, please complete the **Consent Form** attached to this document and email to a member of the research team. We will also have hardcopy consent forms available for you to sign at the start of the assessment session.

Thank you!

Associate Professor Mark Boyes  
[mark.boyes@curtin.edu.au](mailto:mark.boyes@curtin.edu.au)

Associate Professor Suze Leitão  
[suze.leitao@curtin.edu.au](mailto:suze.leitao@curtin.edu.au)

Dr Mary Claessen  
[m.claessen@curtin.edu.au](mailto:m.claessen@curtin.edu.au)

Professor Penelope Hasking  
[penelope.hasking@curtin.edu.au](mailto:penelope.hasking@curtin.edu.au)

Dr Elizabeth Hill  
[elizabeth.hill@curtin.edu.au](mailto:elizabeth.hill@curtin.edu.au)

Adrienne Wilmot  
[adrienne.Wilmot@postgrad.curtin.edu.au](mailto:adrienne.Wilmot@postgrad.curtin.edu.au)



## ***Mental Health during the Transition from Primary to High School***

### **Child Information Sheet**

Hello,

We are a group of researchers working at Curtin University.

We know that moving from primary school to high school can be stressful, particularly for children who have reading difficulties. We are doing a study to try and understand what might make this move a little bit easier. We are interested in the experiences of children with and without reading difficulties. The study is funded by the National Health and Medical Research Council.



#### **What will I be asked to do?**

You will be asked to do a short reading assessment and answer some questions. These questions will be about yourself, about how you feel, about how you cope with your emotions, and about your relationships with friends, family, teachers, and school. There are no right or wrong answers and there will be an adult there if you need any help answering the questions. It will take between **45 to 60 minutes** to do the reading task and answer all the questions, and you will be able to take short breaks if you need to.

As we are interested in the move from primary school to high school, you will be invited to take part in the study again next year and the year after. To say thank you for helping with all of the questions, you will get a \$15 gift voucher each time you take part.

#### **Do I have to take part?**

No, you do not have to take part. If you decide that you do not want to take part, just let your parents/carer know, and they will tell us.

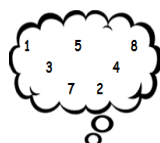


#### **What if I want to change my mind about taking part?**

You can change your mind at any time. If you decide you do not want to take part that is fine. Just let us know and you can stop.

#### **What will you do with the information I give you?**

The information from this study will be stored in a safe place at Curtin University until you are 25 years old. When we talk or write about what we learnt, we will not use your name. Your parent can ask to receive a summary of how you went on the short reading assessment. We will not tell anyone else your answers to the questions, unless your answers tell us that you are having lots of problems with how you think or feel. If they do, we will need to tell your parent/carer, so they can talk to us about how to best help you.



#### **How can I be a part of this study?**

Please talk to your parents/carer about this research and ask them any questions. If you do want to take part, please let your parents/carer know and read and sign the form below. This letter is for you to keep.

Thank you!

Mark Boyes

School of Population Health Curtin University  
 GPO Box U 1987, Perth  
 Western Australia, 6845



## **Identifying predictors of mental health among children with dyslexia: A prospective cohort study**

### **ASSESSMENT INFORMATION SHEET (CHILD and PARENT/CARER)**

This information sheet provides information about each assessment that you or your child will complete if you choose to take part in this project. By completing these tasks, we can see what emotional and social factors are related to mental health outcomes for children with reading difficulties. These factors are important when designing effective treatment programs for children with dyslexia.

You and your child will complete these tasks with the same researcher. All but one of the assessment tasks will be completed in person using an online questionnaire. There is one pen and paper assessment task that is completed by the child. You will be working with a Curtin University researcher who has been trained to administer these tasks and answer any questions that you have.

**It will take approximately 45 to 60 minutes for you and your child to complete all the assessments** (including short breaks, if required). This session will be held at a time and place that is convenient for you and your child. As indicated on the *Information Sheet and Consent Form*, you will be contacted by a registered psychologist if scores on any of the assessments marked with an asterisk (\*) indicate that you or your child may be experiencing significant emotional or social problems.

### **CHILD ASSESSMENT TASKS**

#### **READING**

##### **Reading Self-efficacy Scale**

The Reading Self-efficacy Scale (RSS) is a 19-item questionnaire that will measure your child's their perceived ability to carry out reading-related tasks or reading-related challenges. The RSS will ask your child to rate the strength of their belief that they can carry out reading-related activities on a scale of 1 to 7. An example item from the RSS will ask your child to rate the strength of their belief in themselves to, "*Read out loud in front of the class*". The RSS will take approximately 5 minutes to complete.

##### **Test of Word Reading Efficiency -2**

The Test of Word Reading Efficiency – Second Edition (TOWRE-2) is a standardised reading assessment. This test will measure your child's ability to read real and made-up words accurately and fluently. Accurate and fluent reading are critical in the development of overall reading skills. The TOWRE-2 will take less than 5 minutes to complete.

## **MENTAL HEALTH and WELLBEING**

### **Revised Child Anxiety and Depression Scale (Short) \***

The Revised Child Anxiety and Depression Scale (RCADS) short-version is a 25-item self-report questionnaire that measures whether your child is demonstrating symptoms of depression and anxiety. The questions take approximately 5 minutes to answer.

### **Strengths and Difficulties Questionnaire (Child Report) \***

The Strengths and Difficulties Questionnaire (SDQ-C) is a 25-item behavioural questionnaire that will measure your child's perception of their own social behaviour and emotions, as well as the presence of conduct and peer problem. The SDQ will ask your child to indicate how true each statement is about them. An example item from the SDQ is, *"I try to be nice to people. I care about their feelings"*. The SDQ will take 5 minutes to complete.

## **EMOTION REGULATION and COPING**

### **Emotion Regulation Questionnaire – Children and Adolescents**

The Emotion Regulation Questionnaire (ERQ) is a 10-item questionnaire that measures your child's ability to regulate their emotions. The questions tap into your child's ability to interpret situations in their environment and to control positive and negative feelings of emotion. These skills are related to stress, mental health, and coping. The ERQ takes less than 5 minutes to complete.

### **Emotion Awareness Questionnaire – Differentiating Emotions subscale**

The Differentiating Emotions Subscale of the EAQ is a 7-item scale that identifies how well children understand their emotions. Children are required to rate how true each statement is about them. An example question from the EAQ DES subscale is, *"I feel upset and have no idea why"*. This questionnaire takes less than 5 minutes to complete.

### **Emotion Expression Scale for Children**

The Emotion Expression Scale for Children (EESC) is a set of 16 questions that will measure your child's emotional awareness and the way they express negative emotion. The EESC requires children to rate how true each statement is about them. An example question from the EESC is, *"I know I should show my feelings, but it is too hard"*. This questionnaire takes less than 5 minutes to complete.

### **Difficulties in Emotion Regulation Scale (Short)**

The Difficulties in Emotion Regulation Scale – Short (DERS-short) is an 18-item questionnaire that will measure your child's ability to regulate their own emotions. The questions cover awareness and understanding of different emotions, acceptance of different emotions, and how your child manages negative emotions. The questionnaire takes approximately 5 minutes to complete.

### **Adolescent Coping Scale – 2 (Short)**

The Adolescent Coping Scale -2 (ACS-2 short version) is a 20-item questionnaire that will measure your child's ability to use a range of coping strategies in general and specific situations. The scale will ask your child to indicate how often they use a list of coping strategies. An example item from the ACS-2 asks your child to rate how often they, *"Talk to other people about my concern to help me sort it out"*. The ACS-2 short version takes approximately 5 minutes to complete.

### **SELF-ESTEEM and RESILIENCE**

#### **Rosenberg Self-esteem Scale**

The Rosenberg Self-Esteem Scale (RSS) is a 10-item questionnaire that measures your child's perspective of their self-worth by asking about their positive and negative emotions or feelings about themselves. Your child will be asked to rate how strongly they agree with 10 statements about the way they feel about themselves. An example item from the RSS is, *"I feel that I have a number of good qualities"*. This questionnaire will take approximately 5 minutes to complete.

#### **General Self-efficacy Scale**

The General Self-efficacy Scale (GSS) is a 10-item questionnaire that will measure your child's belief in themselves to cope with a range of situations in daily life. The questionnaire will ask your child to rate how true each statement is about them. An example item from the GSS is, *"I can always manage to solve difficult problems if I try hard enough"*. This questionnaire will take approximately 5 minutes to complete.

#### **Connor-Davidson Resilience Scale - 10**

The Connor-Davidson Resilience Scale – 10 (CD-RISC-10) is a 10-item questionnaire that will measure your child's resilience, or how well they are able to bounce back after a stressful event, tragedy, or trauma in their lives. The CD-RISC-10 will measure your child's ability to adapt to change, deal with things that come along, cope with stress, stay focused, maintain motivation, and handle negative emotions such as anger or pain. The scale will ask your child to rate how true each statement is about them. An example item from the scale is, *"I am not easily discouraged by failure"*. The scale will take less than 5 minutes to complete.

### **CONNECTEDNESS and SOCIAL RELATIONSHIPS**

#### **Illinois Bullying Scale**

The Illinois Bullying Scale is a 16-item self-report questionnaire that measures if, and how often, they experience bullying behaviour, fighting, and bullying victimisation by peers at school. The questionnaire takes less than 5 minutes to answer.

#### **Hemingway Measure of Connectedness**

The Hemingway Measure of Connectedness (HMC) will be used to measure your child's level of 'connectedness' to their school, peers, friends, teachers, siblings, and parents. Your child will complete 35-items that will ask them to rate how true each statement is about themselves. An

example item from this questionnaire is, “*My parents and I get along well*” (parent connectedness). This questionnaire will take approximately 5 minutes to complete.

### **Multidimensional Scale of Perceived Support**

The Multidimensional Scale of Perceived Support (MSPS) is a 12-item questionnaire that measures your child’s perception of the adequacy of social support they receive from family and friends. The MSPS will ask your child to rate how strongly they agree with each statement. An example item from the MSPS is, “*My family really tries to help me*”. These questions take approximately 5 minutes to complete.

## **PARENT/CARER ASSESSMENT TASKS**

### **DEMOGRAPHIC and DEVELOPMENTAL INFORMATION**

#### **Questions related to demographic information**

You will be asked a series of questions relating to demographic and developmental information. Demographic information will include: postcode, child age, name of the child’s school, and current school grade. Developmental information will include: confirmed neurodevelopmental or learning difficulties and history of service access and school supports.

#### **Questions related to academic performance**

You will be asked a series of questions relating to your perceptions of your child’s academic performance. These questions will cover your view on your child’s overall academic performance in the last 6 to 12 months as well as individual performance in literacy (reading and writing) and numeracy (maths). We will also ask you to describe any concerns about your child’s learning that have been raised by teaching staff and any education or learning supports your child receives in the classroom.

### **MENTAL HEALTH and EMOTION**

#### **Revised Child Anxiety and Depression Scale (Long)\***

The Revised Child Anxiety and Depression Scale (RCADS) short-version is a 47-item questionnaire that measures your perception whether your child is showing symptoms of depression and anxiety. The RCADS take approximately 10 minutes to answer.

#### **Strengths and Difficulties Questionnaire – Parent Report \***

The Strengths and Difficulties Questionnaire Parent Report (SDQ-P) is a 25-item behavioural questionnaire that will measure your perceptions of your child’s social behaviour and emotions, as well as the presence of conduct and peer problem. The SDQ will ask you to indicate how true each statement is about your child. An example item from the SDQ is, “*My child is... Considerate of other people’s feelings*”. The SDQ will take 5 minutes to complete.

#### **Depression, Anxiety, and Stress Scale (21-item version) \***

The Depression, Anxiety, and Stress Scale (DASS) is a 21-item questionnaire that will measure your mental health and wellbeing across three domains: depression, anxiety, and stress. The DASS will ask



you to indicate how much a set of statements applies to you over the past week. An example from the DASS-21 is, *"I tended to over-react to situations"*. The DASS-21 will take approximately 5 minutes to complete.

### **Children's Alexithymia Measure**

The Children's Alexithymia Measure (CAM) is a 14-item questionnaire that will measure your perceptions of your child's ability to recognise and describe emotions in themselves and others. The CAM will ask you to rate how often your child does the action described in each statement. An example item from this tool is, *"When asked about how he/she is feeling, instead talks about what he/she has been doing"*. The CAMS will take approximately 5 minutes to complete.

### **CONNECTEDNESS and SOCIAL RELATIONSHIPS**

#### **Hemingway Measure of Connectedness**

The Hemingway Measure of Connectedness (HMC) will be used to measure your child's level of 'connectedness' to their school, peers, friends, teachers, and parents. You will complete 30-items that will ask you to rate how true each statement is about your child. An example item from this questionnaire is, *"My child would say 'our family has fun together'"* (parent connectedness). This questionnaire will take approximately 5 minutes to complete.

#### **Social Skills Improvement System**

You will complete the Social Skills subscales of the Social Skills Improvement System (SSIS). These subscales comprise 46 questions that will ask you about your child's social skills including their communication, cooperation, assertion, responsibility, empathy, engagement, and self-control. The SSIS will ask how often your child does each statement. An example item from the questionnaire is, *"I ask for help from adults"*. The SSIS items will take approximately 10 minutes to complete.

*If you have any questions regarding the assessments above please do not hesitate to contact a member of the research team. Details are provided on information sheet.*