**Research registration form**

All research projects using Personal Data must be registered with the UCL Data Protection Office before the data is collected. Completing this form is part of that process.  
  
For research projects that require a review by a Health Research Authority (HRA), Research Ethics Committee (REC), or if your study involves the processing of special category personal data (sensitive), and you are an undergraduate, or postgraduate student.   
  
Where UCL is a Controller it must comply with the Data Protection Legislation. For students who are processing Personal Data as part of their UCL programme of studies, UCL will be the Controller.  
  
This form should be completed if Personal Data is collected and used as part of the research project. Research registration will not be required when staff or students are only processing Anonymous Data.  
  
Definitions of terms used in this form, such as Personal Data, are given below.   
  
All sections **must** be completed before submitting this form. Please ensure all required supporting documentation is also uploaded. Failing to comply will result in a delay to your research registration.  
  
If you are external to UCL, please complete the following form below instead of completing the online Microsoft form and submit it electronically to [data-protection@ucl.ac.uk](mailto:data-protection@ucl.ac.uk) together with the supporting documentation.

If you are having issues accessing or using this form, please notify us at [data-protection@ucl.ac.uk](mailto:data-protection@ucl.ac.uk).   
  
We may have some questions about the information you provide, but you will normally be provided with a registration number within 10 working days of submitting the form. However, the period leading up to meeting of Ethics Committees is always very busy, and you should allow more time for your application to be processed.   
  
If you are having issues accessing or using this form, please notify us at [data-protection@ucl.ac.uk](mailto:data-protection@ucl.ac.uk)   
  
**Definitions**  
  
**Personal Data**: any information relating to an identified or identifiable living individual.  
  
**Pseudonymised personal data** means:  
  
‘...**personal data** [that] can no longer be attributed to a specific data subject without the use of additional information, provided that such additional information is kept separately and is subject to technical and organisational measures to ensure that the personal data are not attributed to an identified or identifiable natural person'  
[GDPR, Article 4]  
  
**Anonymised data**: data which does not relate to an identified or identifiable natural person or personal data that has been rendered anonymous in such a manner that the data subject is not or no longer identifiable.  
  
**Special categories of personal data**: personal data revealing racial or ethnic origin, political opinions, religious or philosophical beliefs, or trade union membership, and the processing of genetic data, biometric data for the purpose of uniquely identifying a natural person, data concerning health or data concerning a natural person's sex life or sexual orientation.  
  
**Controller**: a person which, alone or jointly with others, determines the purposes and means of the Processing of Personal Data.  
  
**Data Protection Legislation**: all applicable laws and regulations relating to the Processing of Personal Data as the same may be in force from time to time.   
  
**Joint Controller**: a Controller which, jointly with one or more other Controllers, determines the purposes and means of Processing.  
  
**Processing**: any operation or set of operations which is performed on Personal Data or on sets of Personal Data.

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| 1. **STUDY DETAILS** |

1. Title of the study:

|  |
| --- |
| Social Emotions |

1. Proposed start date:

|  |
| --- |
| April 2023 |

1. Proposed end date (if known):

|  |
| --- |
| April 2030 |

|  |
| --- |
| 1. **CHIEF INVESTIGATOR (CI); PRINCIPAL INVESTIGATOR (PI)** |

**Please note:** *students cannot be the CI/PI for Ethics purposes.*  
*If the CI/PI is not a UCL employee you should provide details below of a responsible UCL employee below.*

1. Full Name:

|  |
| --- |
| Professor Argyris Stringaris, MD, PhD, FRCPsych |

1. Position held:

|  |
| --- |
| Professor of Child & Adolescent Psychiatry |

1. Faculty:

|  |
| --- |
| Brain Sciences |

1. Department:

|  |
| --- |
| Divisions of Psychiatry and Psychology and Language Sciences |

1. Email:

|  |
| --- |
| a.stringaris@ucl.ac.uk |

1. Confirm Email:

|  |
| --- |
| a.stringaris@ucl.ac.uk |

1. Telephone:

|  |
| --- |
| 07514851520 |

|  |
| --- |
| 1. **DATA COLLECTOR(S)** |

Data Collector(s) Details *(if Applicant is not the CI/PI e.g. student details)*.  
If the CI/PI is also the Data Collector, applicants are advised to insert **N/A** below.

1. Full Name(s):

|  |
| --- |
| Dr Isobel Ridler; Dr Marjan Biria; Dr Georgina Krebs; Dr Madeleine Payne; Elena Bagdades; Charlotte Burman; Raphaëlle Delpech; Jessica Norman; Miranda Copps; Naomi Tromans |

1. Position held:

|  |
| --- |
| Research Fellow; Research Fellow; Associate Professor; Research Fellow; Research Assistant; Research Assistant; Research Assistant; Research Assistant; Graduate student; Research Assistant |

1. Faculty:

|  |
| --- |
| Brain Sciences |

1. Department:

|  |
| --- |
| Divisions of Psychiatry and Psychology and Language Sciences |

1. Email:

|  |
| --- |
| [i.ridler@ucl.ac.uk](mailto:i.ridler@ucl.ac.uk); [m.biria@ucl.ac.uk](mailto:m.biria@ucl.ac.uk); [g.krebs@ucl.ac.uk](mailto:g.krebs@ucl.ac.uk); [m.payne@ucl.ac.uk](mailto:m.payne@ucl.ac.uk); [elena.bagdades.21@ucl.ac.uk](mailto:elena.bagdades.21@ucl.ac.uk); [charlotte.burman@ucl.ac.uk](mailto:charlotte.burman@ucl.ac.uk); [raphaelle.delpech.18@ucl.ac.uk](mailto:raphaelle.delpech.18@ucl.ac.uk); [jessica.norman.21@ucl.ac.uk](mailto:jessica.norman.21@ucl.ac.uk); miranda.copps.21@ucl.ac.uk; n.tromans@ucl.ac.uk |

1. Confirm Email:

|  |
| --- |
| [i.ridler@ucl.ac.uk](mailto:i.ridler@ucl.ac.uk); [m.biria@ucl.ac.uk](mailto:m.biria@ucl.ac.uk); [g.krebs@ucl.ac.uk](mailto:g.krebs@ucl.ac.uk); [m.payne@ucl.ac.uk](mailto:m.payne@ucl.ac.uk); [elena.bagdades.21@ucl.ac.uk](mailto:elena.bagdades.21@ucl.ac.uk); [charlotte.burman@ucl.ac.uk](mailto:charlotte.burman@ucl.ac.uk); [raphaelle.delpech.18@ucl.ac.uk](mailto:raphaelle.delpech.18@ucl.ac.uk); [jessica.norman.21@ucl.ac.uk](mailto:jessica.norman.21@ucl.ac.uk); miranda.copps.21@ucl.ac.uk; n.tromans@ucl.ac.uk |

1. Telephone:

|  |
| --- |
| 07951499820 |

|  |
| --- |
| 1. **DETAILS OF THE PROJECT** |

1. Please provide a brief summary of the project, including an explanation of the aims, design, methodology and plans for analysis that you propose to use.

|  |
| --- |
| It is well-established that young people are often affected by both social anxiety and depression. This often leads to worse outcomes in terms of inter-personal relationships, education, family life, occupational performance and other physical and mental difficulties or risks. Nevertheless, substantial improvement is also seen in many who receive psychological intervention such as cognitive therapy in social anxiety disorder or behavioural activation therapy in depression. At the finer-grained level, it is also now known that people’s mood tends to drift downwards over time during periods of rest and simple tasks. This mood drift over time also appears to be related to a person’s sensitivity to reward and level of depression.  Our research seeks to understand 1. Why young people with mood and anxiety symptoms see improvements, that is, what causal mechanisms underlie the improvement of mood and anxiety symptoms and how we can maximise these benefits, and 2. Why young people’s mood tends to drift over time during periods of rest and simple tasks, that is, what are the sources of mood dysregulation in young people and can we find targets for future intervention.  We will test this in n = 5,000 in a non-clinical sample of young people (14-25 years old) comparing it to older adults aged 25-65 years old from the general population experiencing varied levels of mood dysregulation and anxiety symptoms, using experimental designs to examine the underlying mechanisms of emotion fluctuation. We focus initially on people aged 14-25 years old because younger people carry a large burden regarding mood dysregulation and anxiety symptoms. However, it is also interesting to test how these phenomenon compares across age groups.  To do this, we aim to:   * + Directly manipulate social surprises and self-processing variables.   + Provide a computational account of surprises and their relationship with anxiety and mood   + Directly manipulate alternative reward environments.   + Develop a computational account of mood at the individual level and elucidate the sources of mood dysregulation in adolescents   + We hypothesise that 1. positive surprises and a shift in self-processing will lead to an improvement in mood and anxiety symptoms, and 2. people’s concept of alternative reward environments and reward sensitivity affect how much their mood drifts over time.   All participants will complete experiments involving computer games, conversations with a virtual or real conversation partner, rest, and simple tasks. Before, during and after the experiments, participants will report on their emotions and thoughts, including level of surprise, motivation, frustration and ideas about alternative things they could be doing.  Our analyses will include pre-registered designs involving quantitative (linear mixed effects modelling and more complex computational models such as those with exponential decay terms) and qualitative (content or thematic) analyses.  Additionally, we would like to collect data on how state and time-of-day effect, in particular feelings of hunger, may affect mood, as such bodily states which can potentially explain some mood dysregulation. To do this we want to develop a questionnaire about how people experience hunger affecting their emotions. The colloquial term “hanger” describes the phenomenon of hunger leading to increased feelings of anger (Swami et al. 2022; Ackermans et al. 2022) or irritability [defined as proneness to anger; Leibenluft et al. (2024)]. Little attention has been paid to how bodily signals, in particular those of hunger and satiety impact on mood regulation. This is surprising given the obvious clinical relevance of such questions for psychopathologies where eating is deployed as a means of mood regulation. A questionnaire on hunger-induced mood changes will be valuable to identify which people are at risk for mood dysregulation and may benefit from intervention. To develop our new questionnaire to measure state and specifically hunger-induced mood changes, participants for this will be recruited through online testing platforms (e.g. Prolific). Previous work from this group (unpublished) will be used to arrive at the first set of questions. This will then be reduced in successive steps using qualitative and multivariate methodologies, such as factor analysis and item response theory (Streiner, Norman, and Cairney 2014). The questionnaire will take about 30 minutes to complete and some participants will be asked to complete it twice with a gap of about two weeks between sessions. To assess test-retest reliability, some participants will answer the same set of questions two weeks apart. The questionnaire will be evaluated for test-retest reliability (kappa coefficient), internal consistency (Cronbach’s alpha), dimensional structure (confirmatory factor analysis) and validity against other questionnaires (correlation). |

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| 1. **PRIVACY IMPACT SCREENING QUESTIONS** |

If the answer to any of these questions is ‘yes’, then a [DPIA](https://www.ucl.ac.uk/data-protection/guidance-staff-students-and-researchers/practical-data-protection-guidance-notices/data-protection) is required.

1. Will the project require individuals to provide information about themselves?

Icon

Description automatically generated[What is personal data](https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/key-definitions/what-is-personal-data/)?

Yes  No

1. Will information about individuals be shared with organisations or people who have not previously had routine access to the information?

Yes  No

1. Will the project use information about individuals for a purpose it is not currently used for, or in a way it is not currently used?

Yes  No

1. Does the project involve you using new technology that might be perceived as being privacy intrusive? For example, the use of biometrics or facial recognition.

Yes  No

1. Will the project result in you making decisions or treating individuals in ways which can have a significant impact on them?

Yes  No

1. Is the information about individuals likely to raise privacy concerns or expectations, e.g. health records or information that people would consider to be particularly private?

Icon

Description automatically generated[Special category data](https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/lawful-basis-for-processing/special-category-data/)

Yes  No

1. Will the project require contact with individuals in ways they may find intrusive, e.g. unexpected telephone calls?

Yes  No

1. Will the project use personal data, including personal data obtained from live or operational systems for access or transfer outside the UK (e.g. use of Cloud, Hybrid or offshore support purposes)?

Yes  No

1. Will the project involve processing [special category personal data](https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/lawful-basis-for-processing/special-category-data/)?

Yes  No

1. Will the project involve the processing of under 18’s personal data?

Icon

Description automatically generated[Children and the UK GDPR](https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/children-and-the-uk-gdpr/)

Yes  No

1. Will your research involve the use of secondary data (e.g. books, personal sources, journals, newspapers, websites, government records etc.)?

Yes  No

1. If your research involves re-analysis of secondary data, please indicate the original purpose for which the data was collected, and comment on whether the original participants were supplied with relevant information at data collection for additional use later on.   
     
   If this section does not apply, applicants are advised to insert **N/A** below.

|  |
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| N/A |

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| 1. **PARTICIPANTS** |

Will the study enrol potentially vulnerable groups (e.g. children, older persons or adults with learning difficulties for those who fall under the remit of the Mental Capacity Act 2005) participants? Vulnerability may be defined in different ways and researchers will need to assess the level of potential vulnerability within the context of the research.

1. Children under 18

Icon

Description automatically generated[Children and the UK GDPR](https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/children-and-the-uk-gdpr/)

Yes  No

1. People lacking capacity (e.g. unable to understand information provided about a particular decision. Retain that information long enough to make a decision. Consider and assess the information to make a decision. Communicate a decision by talking through sign language or any other means.

Yes  No

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| 1. **DETAILS OF PARTICIPANTS** |

Please provide details of the participants for this project, including how they will be selected and recruited.

1. How many participants will be involved in the research?

☐ 1 – 20

☐ 21 – 100

101 – 1000

1001 – 5000

Greater than 5000

|  |
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| 1. **DATA COLLECTION** |

1. What type of information will be collected?  
   *If a mixture of types will be collected, select all that are applicable.*

**Anonymised data** – no personal identifiers with no link between the individual and the data.

**Pseudonymised personal data** – e.g. key-coded data which includes some (often partial) personal identifiers (e.g. initials and DOB) thus potential for indirect identification of participants from the information in combination with other information.

**Fully identifiable personal data** – e.g. data with any of the following; names, addresses, hospital number, and NHS number.

1. If personal identifiers (including within pseudonymised data) will be collected, please list all e.g. *initials, DOB, names, addresses, NHS number.*

Icon

Description automatically generated[What is personal data?](https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/key-definitions/what-is-personal-data/)

|  |
| --- |
| Names, DOB, addresses, telephone numbers, race, ethnicity, descriptions of health diagnosis or conditions, gender, biological sex, sexual orientation, video/audio recordings |

1. Is it intended to include participants who are prisoners or young offenders in the custody of HM Prison Service or supervised by the probation service?

Yes  No

1. Have you completed a [Data Protection Impact Assessment](https://www.ucl.ac.uk/data-protection/guidance-staff-students-and-researchers/practical-data-protection-guidance-notices/data-protection) (DPIA)?

Yes  No  Pending

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| --- |
| 1. **DATA STORAGE** |

1. What type of information will be stored?

*If a mixture of types will be collected, select the most identifiable option.*

Icon

Description automatically generated[What is personal data?](https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/key-definitions/what-is-personal-data/)

Anonymised data

Pseudonymised personal data

Fully identifiable personal data

1. Where will the data be stored by UCL?   
   For data storage outside of UCL, see **section** **M**.

UCL Data Safe Haven

UCL system, e.g. ‘S’ or ‘N’ drive

Hard drive of a portable device

Cloud (inside EU/EEA)

Cloud (outside EU/EEA)

Manual files (e.g. paper) at UCL

Other, please specify in Q40

1. If the data will be stored outside UCL, please provide details below. (This should include any stipulations of the security of the data, such as an encrypted storage facility, geographical location of physical servers; please also outline who will be accessing it for analysis).  
     
   If this section does not apply, applicants are advised to insert **N/A** below.

|  |
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| N/A |

|  |
| --- |
| 1. **PARTNERS AND DATA PROCESSORS** |

Please list all study collaborators / third parties, who will be sending / receiving personal data for study purposes or their own purposes. These can include contract research organisations, funders, other universities involved in the research or in publishing findings from the study.

Icon

Description automatically generated[Key definitions](https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/key-definitions/what-is-personal-data/)  
  
If there are more than one study collaborator involved with the research, please provide details of them all.  
  
If this section does not apply, applicants are advised to insert **N/A** below.

1. Name of third party:

|  |
| --- |
| N/A |

1. Status of party:

Controller

Processor

N/A

1. Location of collaborator:

Inside EU/EEA

Outside EU/EEA

Inside the UK

1. Activity/ purpose (e.g. storage, processing, analysis):

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|  |

1. Method of data transfer (e.g. UCL Data Safe Haven, AES-256 encryption with password):

|  |
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|  |

1. Data storage (e.g. private company computers/ system, NHS computers/ system, home or other personal computers, cloud):

|  |
| --- |
|  |

1. Length of data retention (e.g. duration of trial and archive for x years):

|  |
| --- |
|  |

1. Is there a contract in place. If **Yes,** please upload below:

Yes  No  Pending

|  |
| --- |
| 1. **INTERNATIONAL TRANSFER** |

1. Please indicate if personal data be transferred outside the EU as part of this study:

Yes  No

1. If personal data is transferred outside the EU, confirm you have followed the [guidance on transfers](https://www.ucl.ac.uk/legal-services/sites/legal-services/files/ucl_guidance_note_-_transfers_outside_the_eea.pdf):

Yes  No

|  |
| --- |
| 1. **SPONSOR** |

Please provide details of the sponsor for this research below. This can be an individual, company, institution, funding council, or another organisation which takes responsibility for the initiation, management and/or financing of the research.  
  
If this section does not apply, applicants are advised to insert **N/A** below.

1. Proposed sponsorship arrangement:

|  |
| --- |
| UCL |

1. Details of sponsor:

|  |
| --- |
| AS, GK, MB, IR, MP, EB, CB, MC, JS and RD are all full-time employees of UCL, the university sponsoring this work. NT holds a research visitor contract at UCL and is a full-time employee under the project sponsored by UCL. |

1. Is there a contract in place with the sponsor? If **Yes**, please upload below.

Yes  No

|  |
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| 1. **SUPPORTING DOCUMENTATION AND CHECKLIST** |

1. **Please provide**a summary of the study including:

* A description of the study and any information flows.
* Details of any personal data being collected, e.g. ‘basic identifiers’ or Special Category Data.
* The methods of data collection and analysis.
* A diagram setting out the information flows, if available.
* Details of any partners involved in the study, e.g. other universities or organisations.
* Details of any processors being used, e.g. data storage providers or transcription services.

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| **Protocol, methods of data collection, type of procedure, and analysis**  Flyers (please see attached to this application) and the PI’s link to the Anna Freud National Centre for Children and Families (who have a proven track record of recruiting from hundreds of schools in the UK) will enable us to liaise with young adults online and local schools.  We have two main variants of flyer as we want a sample with high probability of social anxiety, and a contrast group who we recruit more generally, who we expect to vary in terms of mood dysregulation (e.g. irritability, anhedonia). The flyers will have a QR code that links to a form placed on a secure UCL system in which participants will submit their email address and be able to view the information sheet. All participants will be able to take as long as they need to read and contemplate the study information sheet, and ask the research team questions either in person or via email. After this, we will give school based (or school/summer camps) and local community participants a randomly generated ID which they will use to complete testing. Participants from online platforms will be screened using Qualtrics. We will screen for good internet connection and to ensure a percentage of our sample is enriched for people with symptoms of social anxiety and mood dysregulation above population-based thresholds (please see **Screening Questionnaire** section below). We will screen up to 15000 people aged 14–65 until we reach a final sample of n = 5000. Some participants aged 14-18 will be recruited via Children Helping Science platform developed by MIT university, and some adult participants aged 18-65 years will be recruited via online platforms such as CloudResearch, Prolific, Testable Minds, and Amazon Mechanical Turk (MTurk), which the PI has extensive experience with. These people will view the same information presented in the adult flyer and information sheet before proceeding to screening on Qualtrics, Gorilla or via a RedCap link.  For participants who continue past the screening stage, consent will be taken 1) in person at schools or online for participants aged 14-18 years old; 2) in person at the UCL Psychology and Language Sciences division 1-19 Torrington Place, or online for participants aged 18-65 years old recruited via the local communities or online platforms, using consent forms. Those who consent will be asked to complete the same questionnaires and experiments involving computer games, conversations with a virtual or real conversation partner, rest, and simple tasks. Participant emotions and thoughts (including motivation, frustration, surprise, and ideas about alternative things they could be doing) and some questions about appetite, weight and height will be reported before, during and after the experiments. Eye tracking, video and audio recordings will be taken throughout to assess self- and other-focussed attention, and to enable objective assessment of affect. Audio recordings/transcriptions will also be taken of participant descriptions of thoughts and emotions for later qualitative analysis. The full session with questionnaires and experimental tasks will take up to 90 minutes. To manage fatigue in younger participants, we may complete testing with students in two experimental sessions. Otherwise, participants will be asked to complete one session.  Quantitative data analysis will be carried out on UCL laptops and/or DSH using a mixture of R, Python and bash scripting with the main analyses being linear regression and variants thereof (e.g. linear mixed effects models). Qualitative data analysis will be carried out using GDPR compliant transcription software approved by UCL and, depending on the richness of data, possibly content or thematic analysis, using a mix of open and focussed coding.  At the end of the study, all participants will be provided with information about how they can access mental health support via charities, NHS services, or university services.  **Information flows and details of any personal data being collected**  We will collect the following types of data: basic identifiers (for example, name, date of birth, email address, and telephone number); mental health symptom data (special category data); experimental data (including cognitive task data, ratings of emotions and thoughts, eye tracking, video, and audio recordings).  Paper and digital consent forms will be stored securely by our team at UCL. Personally identifiable data such as names, addresses, and phone numbers will not be collected in the same testing session as questionnaire data; all questionnaires will now be completed using a randomly assigned ID (see **Recruitment** section of flow diagram below). Eye tracking, audio and video recordings will be taken using a GDPR compliant recording device or software recommended by UCL and stored in DSH. The document which contains the key linking pseudonymised data to identifiable data will be kept within DSH. Some online participants (a portion of those aged 18+) will be recruited and screened via online platforms, but no name or email will be collected via this route (we will only collect eye tracking, video and audio recordings, age, gender and sex).  Since some of the data that we will collect is “special category” and confidential, such as questions concerning mental health, data will be pseudonymised using alphanumeric codes at the point of data collection. Our team will only retain a file linking the pseudonymised data with identifiable information on Data Safe Haven to minimise risk and protect the privacy of participants.  Mental health and experimental data will be collected online using a web browser hosted on the Pavlovia or Gorilla platforms (some recruited via online platforms such as Prolific, Testable Minds, MTurk, CloudResearch). There will also be an option for testing in person at participating schools (or school/summer camps) for those aged 14-18 (with UCL laptops), and in person at UCL (with UCL laptops) for local community participants over 18. Please see the **Recruitment** and **Participation** sections of the flow diagram below.  Eye tracking, audio and video recordings will be collected in person at participating schools or at UCL and online using GDPR compliant devices and software. The original eye-tracking, audio and video recordings will be stored securely in DSH for the duration of the study and then destroyed. If it should not prove feasible to conduct eye tracking, audio,video analysis quickly within DSH, on recommendation, we will obtain the data from DSH in a secure way by e-mailing a link to ourselves and downloading it to an encrypted hard drive, where we will then analyse the data, with the data being retained there for a limited time before deletion (the original data will stay in DSH, and a copy contained on the drive during analysis).  The pseudonymised data from questionnaires and experiments will be stored on DSH (see **Participation** and **Analysis** sections of flow diagram), and then securely transferred to encrypted hard drives of UCL laptops or the UCL N/S drives. Personal data will be deleted at the end of the study (see **Publication** section in flow diagram).  **Feasibility of sampling**  The PI and a Co-I (G Krebs) have extensive experience in recruiting young people with mood dysregulation and anxiety symptoms from the community via platforms such as MTurk. In addition, the PI is a Senior Advisor to the Anna Freud National Centre for Children and Families, a charity linked with UCL, that has a proven track record of recruiting from hundreds of schools in the UK (<https://bmjopen.bmj.com/content/9/8/e029044.abstract>). There is a general consensus that 14–18-year-olds have the capacity to provide consent and should not require parental opt-in consent. For example, please see other more intensive studies that asked adolescents (aged 16 and older) to consent for themselves: Evans et al 2021, <https://www.sciencedirect.com/science/article/pii/S0005796721001303>; Leigh & Clark 2022, <https://ora.ox.ac.uk/objects/uuid:7c61d3d6-d5a4-4798-a00b-a905a01ceec4>. As an added safeguard, the parents of younger adolescents (aged 14 and 15) will be able to opt-out their child from participating in our study. Further, we also offer the option for schools to choose opt-in parental consent (for children aged 14-15 years) if they prefer this method. In order to raise awareness of participants, we will be transparent about the risks and safeguards involved, tell them clearly what we are doing with their personal data, let them know what to do if they are unhappy or wish to withdraw, and use clear, age-appropriate language at all times.  **Questionnaires**  The following questionnaires will be used (they have all been extensively validated and standardised as reported in the publications linked here, and we remove any questions relating to death or suicide):  Psychosis screening questions ([French et al (2014)](http://iris-initiative.org.uk/wordpress/wp-content/uploads/2018/03/2-Early-Detection-of-Emerging-Psychosis-guidance-2014.pdf))  Liebowitz Social Anxiety Scale (social anxiety: [Heimberg et al (1999)](https://www.cambridge.org/core/journals/psychological-medicine/article/psychometric-properties-of-the-liebowitz-social-anxiety-scale/6891D37D00A9BEC179E61C8BFF30F08A); [Masia-Warner et al (2003)](https://www.sciencedirect.com/science/article/pii/S0890856709610042))  Revised Children’s Anxiety and Depression Scale for young people (depression: [Krause et al (2021)](https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(20)30356-4/fulltext))  Center for Epidemiological Studies Depression Scale for adults (depression: [Radloff (1977)](https://journals.sagepub.com/doi/pdf/10.1177/014662167700100306))  Anhedonia Scale for Adolescents (anhedonia: [Watson et al (2021)](https://psycnet.apa.org/record/2021-31031-001))  Affective Reactivity Index (irritability: [Stringaris et al (2012)](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3484687/))  Strengths and Weaknesses of ADHD-symptoms and Normal-behavior rating scale (attention deficit hyperactivity disorder (ADHD): [Swanson et al (2001)](https://www.sciencedirect.com/science/article/pii/S156627720100007X))  Alcohol Use Disorders Identification Test for Consumption (alcohol use: [National Institute for Care and Excellence (2022)](https://cks.nice.org.uk/topics/alcohol-problem-drinking/diagnosis/how-to-screen/))  Drug Use Disorders Identification Test for Consumption (drug use: [Berman et al (2005)](https://pubmed.ncbi.nlm.nih.gov/15608468/))  Social Phobia Inventory (SPIN; social anxiety: Connor et al (2000))  mini-SPIN (brief screening assessment for social anxiety: Connor et al (2001))  Generalised Anxiety Disorder (GAD-7: anxiety: Spitzer et al. (2006))  Patient Health Questionnaire (PHQ-9: depression: Kroenke et al. (1999))  Adult ADHD Self-Report Scale (ASRS: ADHD: Kessler et al (2005))  State-Trait Anxiety Inventory for Adults ([Skapinakis, 2014](https://link.springer.com/referenceworkentry/10.1007/978-94-007-0753-5_2825))  Behavioral Anger Response Questionnaire ([Miers et al., 2007](https://link.springer.com/article/10.1007/s10802-007-9120-9))  Autism Quotient-short (AQ-28; Hoekstra et al., 2011)  Child and Adolescent Social Behaviour Questionnaire (CASBQ; Chiu et al., 2021a)  Child and Adolescent Social Cognitions Questionnaire (CASCQ; Leigh & Clark, 2022)  Focus of Attention Questionnaire (FAQ; Woody, 1996)  Self-Focused Attention Scale (Bögels et al., 1996)  Short Mood and Feelings Questionnaire (SMFQ; Angold et al., 1995)  Spontaneous Use of Imagery Scale (SUIS; Reisberg et al., 2003)  Vividness of Visual Imagery Questionnaire (VVIQ; Marks, 1973)  Additionally, all participants will be asked about:   * Diagnosis of Depression, Anxiety disorders, ADHD, or any other diagnosis * Medication intake (e.g. Fluoxetine, Sertraline, Prozac, Ritalin) and the dosage * Demographics (i.e. age, sex, gender, race, ethnicity and income bracket)   **Additional Questions/Questionnaires**  Income bracket  Index of multiple deprivation (measure of an individual’s living conditions: [McLennan et al (2019)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/833951/IoD2019_Technical_Report.pdf))  Mood Disorder Questionnaire (bipolar spectrum: [Hirschfeld et al (2003)](https://ajp.psychiatryonline.org/doi/full/10.1176/appi.ajp.160.1.178))  [Cosmetic Procedure Screening Questionnaire](https://www.veale.co.uk/wp-content/uploads/2022/12/33Q-COPS-BIQ-past-week.pdf) (adults body image: [Veale et al (2011)](https://www.jprasurg.com/article/S1748-6815(11)00516-X/fulltext))  Body Image Questionnaire (adolescents body image: [Schneider et al (2018)](https://pubmed.ncbi.nlm.nih.gov/27866170/)) |

1. Data Protection Impact Assessment (DPIA). If **Yes**, please attach.

Yes  No  N/A

1. Participant information sheet(s) (PIS) and Privacy Notice if separate. If **Yes**, please attach.

Yes  N/A

1. Informed consent form(s). If **Yes,**please attach.

Yes  N/A

1. Other documentation being used to invite/inform participants about the research. If **Yes,** please attach.

Yes  N/A

1. Data Sharing/Processor agreements. If **Yes**, please attach.

Yes  N/A

1. Local Data Protection Coordinator notified. **Please confirm.**  
   **Please note:***not all departments have a local data protection coordinator. This role is different from the data protection officer (which is a centralised function) and you should check with your department whether this requirement applies to you.*

Yes  N/A

1. Appropriate [safeguards guidance](https://bit.ly/3yZqo3u)read and implemented. **Please confirm.**

Yes  N/A

1. If this application is linked to a previously approved research registration, please provide the number issued.  
     
   If this question does not apply, applicants are advised to insert **N/A** below.

|  |
| --- |
| N/A |

1. If you have answered **Yes,** to Q48, Q53, Q55 - Q59, please attach relevant documentation to your email to [data-protection@ucl.ac.uk](mailto:data-protection@ucl.ac.uk).