

CHILD Cohort Study Data User Responsibility Checklist

Please complete page 1-2 of the CHILD Cohort Study Data User Responsibility Checklist and include it, along with your proposed publication submission, via the CHILDdb portal. 1) I have included the phrase 'CHILD Cohort Study' in the keyword section for manuscripts with primary CHILD data. Where applicable, I have included the phrase 'CHILD Cohort Study' in the keyword section of the manuscript for manuscripts with secondary CHILD data. (see Endnote 1) 2) I have confirmed appropriate authorship for this manuscript, referring to the ICMJE guidelines. As part of our cohort authorship policy, the CHILD Directors and Site Leads (listed below) should be included as authors on all CHILD publications, unless otherwise directed by the CHILD author, in recognition of their substantial contributions to study design, data acquisition, and cohort leadership, consistent with ICMJE criteria. 3) I have included the references addressing the methodology and design of the CHILD Cohort Study, including references describing the original generation of any biological datasets used in this work, or similar (if applicable). (see Endtnote 2) I have included an accurate description of the sample cohort design, including: 4) Inclusion and exclusion criteria Comparison of the analyzed sample cohort to the whole CHILD cohort (see Endnote 3) I have included an accurate description of ethical approval, using the statement 5) below: Ethical approval for the CHILD Cohort Study, including the oversight of the CHILD biological samples and the CHILD database (CHILDdb), was obtained from the local Research Ethics Board of each study site: the University of British Columbia, the University of Alberta, the University of Manitoba, the Hospital for Sick Children and McMaster University. If the CHILD Cohort Study REB approval number is required, please contact child@mcmaster.ca 6) I have included the CHILD Cohort Study Data Availability Statement, using the statement below: Data described in the manuscript are available by registration to the CHILD database https://childstudy.ca/childdb/ and the submission of a formal request. More information about data access for the CHILD Cohort Study can be found at https://childstudy.ca/for-researchers/dataaccess/. Researchers interested in accessing CHILD Cohort Study data for their research should contact child@mcmaster.ca. I have included the CHILD Cohort Study Participant and Public Involvement 7) Statement in the methods section. (see Endnote 4) 8) The manuscript presents results in accordance with the research objectives of the approved concept proposal.



		Note: If your research scope has sinclude relevant changes before p	since expanded, please update your concept proposal to roceeding.
9)		I have not described and utiless than 10. (see Endnote 5)	lized data in the analyses where the sample size is
10)			aires or clinic data from age 8 onward, where requirements, I have included the REDCap citations.
11)		I have included an accurate funding section. (see Endnote 7)	
12)		I have included the approved Acknowledgment Statement in any publication using CHILD Cohort Study data as-is or in modified form to fit journal requirements. (see Endnote 8)	
13)		coding) and variable descrip	I manuscript and any derived variables (including oftion documentation to child@mcmaster.ca once in press, or a pre-print is available. (see Endnote 9)
14)			nmunication Representative (child@mcmaster.ca) in ess release or media activity. (see Endnote 10)
15)		If other researchers are interested in requesting the data from this publication, I will clarify the data availability for each request. (see Endnote 11)	
		mpleted by publishing Principal b Concept Proposal #:	Investigator:
CHILDdb Concept Proposal #: CHILDdb Publication Proposal #:			
Printed Name:			
Sig	natur	re:	
Current Date:			



ENDNOTES

to the CHILD Cohort Study Data User Responsibility Checklist

Study Co-Directors: Padmaja Subbarao (<u>padmaja.subbarao@sickkids.ca</u>), Stuart Turvey (sturvey@bcchr.ca)

Site Leads: Theo Moraes (theo.moraes@sickkids.ca), Piush Mandhane (mandhane@ualberta.ca), Elinor Simons (elinor.simons@umanitoba.ca), Stuart Turvey

Purpose: This checklist is provided to guide researchers intending to publish CHILD Cohort Study data. Any proposed publication submission (manuscript, abstract, poster, or thesis) that uses CHILD Cohort Study data and/or samples must first be sent to the CHILD National Coordinating Centre (NCC) (child@mcmaster.ca). The NCC will coordinate the sharing of the proposed publication with the CHILD Cohort Study Access and Publications Committee (APC) for approval prior to submission.

Role of the APC: The APC reviews all manuscript submissions to ensure that the CHILD Cohort Study Consortium Inter-Institutional agreement is upheld, participant confidentiality is protected, and that the publication will not bring the study into disrepute. The APC may provide advice and feedback to authors.

Endnote No.	Endnote Description	
1	The definitions of primary and secondary data are provided below; if the applicable category of data is not clear, please contact child@mcmaster.ca for clarification:	
	Primary Data: Original data that has been generated by the CHILD Cohort Study to meet the objectives of the study (i.e. clinical outcomes).	
	Secondary Data: Data that is an interpretation and analysis of the primary CHILD Cohort Study data. This data has been previously published (e.g. published microbiome dataset, dietary patterns dataset).	
2	If possible, within journal requirements, the following references should be cited:	
	 When using data from birth until age five: Subbarao P, Anand SS, Becker AB, Befus AD, Brauer M, Brook JR, Denburg JA, HayGlass KT, Kobor MS, Kollmann TR, Kozyrskyj AL, Lou WY, Mandhane PJ, Miller GE, Moraes TJ, Pare PD, Scott JA, Takaro TK, Turvey SE, Duncan JM, Lefebvre DL, Sears MR; CHILD Study investigators. The Canadian Healthy Infant Longitudinal Development (CHILD) Study: examining developmental origins of allergy and asthma. Thorax. 2015;70(10):998-1000. 	
	 When describing biological samples from birth until age five: Moraes TJ, Lefebvre DL, Chooniedass R, Becker AB, Brook JR, Denburg J, HayGlass KT, Hegele RG, Kollmann TR, Macri J, Mandhane PJ, Scott JA, Subbarao P, Takaro TK, Turvey SE, Duncan JD, Sears MR, Befus AD; CHILD Study Investigators. The Canadian healthy infant longitudinal development birth cohort study: biological samples and biobanking. Paediatr Perinat Epidemiol. 2015;29(1):84-92. 	



	 When describing environmental data from birth until age five: Takaro TK, Scott JA, Allen RW, Anand SS, Becker AB, Befus AD, Brauer M, Duncan J, Lefebvre DL, Lou W, Mandhane PJ, McLean KE, Miller G, Sbihi H, Shu H, Subbarao P, Turvey SE, Wheeler AJ, Zeng L, Sears MR, Brook JR; CHILD study investigators. The Canadian Healthy Infant Longitudinal Development (CHILD) birth cohort study: assessment of environmental exposures. J Expo Sci Environ Epidemiol. 2015;25(6):580-92. When describing data from age eight onward: Miliku K, Reyna ME, Medeleanu M, Dai R, Dubeau A, Lefebvre DL, Wright K, Dawod B, Beck M, Brooks E, Kobor M, Duan Q, Brook JR, Lou W, Brinkman FSL, Winsor GL, Cook J, Becker AB, Simons E, Mandhane PJ, Moraes TJ, Azad MB, Sears MR, Turvey SE, Subbarao P; CHILD Study Investigators. From Fetus to Eight: the CHILD Cohort Study. Am J Epidemiol. 2024. 	
3	CHILD Cohort Study design features, if included in the proposed publication submission, must be described accurately. We recommend the sentences in boat a minimum:	
	The CHILD Cohort Study is a prospective longitudinal birth cohort study, recruited 3621 women with singleton pregnancies from Vancouver, Edmonton, Manitoba (Winnipeg and Morden/Winkler), and Toronto between 2008 and 2012, from which 3454 delivered healthy, full-term infants, and were eligible to commence the study. A total of 167 families were excluded: 84 children were deemed ineligible at birth and withdrawn from the study; 46 families provided no data despite eligibility of their infant, and they withdrew or were withdrawn before they began the study; 37 mothers provided their prenatal data but withdrew from the study before the child was born.	
4	Patient and Public Involvement Statement:	
	The CHILD Cohort Study emphasizes participant and public involvement in all stages of its research. Research questions are informed and generated based on relevance to participants and their families to study those affected by childhood health conditions. Efforts are made to ensure participants' involvement is meaningful, comfortable, and aligned with their preferences. Study results will be shared with participants through various channels, including newsletters and online platforms. Academic and public health publications will also communicate findings. We acknowledge and thank all participant advisers and study participants for their valuable contributions.	
5	If any tables/figures contain sample sizes less than 10, we ask the authors to collapse categories (e.g., ethnicity variables). Please note, this also applies to any imputed data; ensure that exact sample sizes less than 10 cannot be easily inferred or recovered from other information provided in the manuscript.	
6	If possible, within journal requirements, please include the following paragraph and citations for publications submissions that have utilized CHILD Cohort Study data from age eight and onward: The study data were collected and managed using REDCap (Research Electronic Data Capture) hosted at the British Columbia Children's Hospital Research Institute	



	(BCCHR). ^{1,2} REDCap is a secure, web-based software platform designed to support data capture for research studies.		
	¹ Harris PA, Taylor R, Thielke R, Payne J, Gonzalez N, Conde JG. Research electronic data capture (REDCap)a metadata-driven methodology and workflow process for providing translational research informatics support. J Biomed Inform. 2009;42(2):377-81. ² Harris PA, Taylor R, Minor BL, Elliott V, Fernandez M, O'Neal L, McLeod L, Delacqua G, Delacqua F, Kirby J, Duda SN; REDCap Consortium. The REDCap consortium: Building an international community of software platform partners. J Biomed Inform. 2019; 95:103208.		
7	Funding Statement:		
	The CHILD study was initially supported by the Canadian Institutes of Health Research (CIHR), the Allergy, Genes and Environment (AllerGen) Network of Centres of Excellence (NCE), Don & Debbie Morrison. The 8-year visit was supported by: Genome Canada, Genome British Columbia, Genome Alberta, BC Children's Hospital Foundation, the Sick Kids Hospital Foundation, Women and Children's Health Research Institute (University of Manitoba), Simon Fraser University, Compute Canada, the Ontario Research Fund, and the Provincial Health Services Authority. The 13-year visit was supported by CIHR and the Schroeder Foundation.		
8	Acknowledgement Statement:		
	We thank the CHILD Cohort Study (CHILD) participant families for their dedication and commitment to advancing health research. Visit CHILD at childstudy.ca.		
9	Derived variables will be archived by CHILD and will ultimately be made available to future data users. Appropriate documentation detailing the derivation must be provided to the CHILD National Coordinating Centre once the publication is submitted.		
10	Where appropriate, we encourage media coverage of CHILD publications to raise the profile of the CHILD Cohort Study. Please contact the CHILD Communications Representative (child@mcmaster.ca) in advance if you intend to plan a press release about your proposed publication submission.		
11	After publication expectations:		
	Omics raw sequencing data must be publicly available from the methods section/ data availability statement in your publication. The submitted omics raw sequencing data should NOT contain any CHILD 5-digit participant IDs. To allow other researchers to request this data, clear documentation on the preprocessing methods, codes, and minimal technical metadata, including the visit/timepoint, the exact age at the sample collection, and sample processing time, of the published omics should be made available from the authors. For researchers who would like to access any other CHILD Cohort Study data		
	from your publication, please direct them with the following:		



Thank you for your interest in the CHILD Cohort Study. Privacy and confidentiality requirements do not permit approved researchers to share CHILD data beyond their research team. The informed consent obtained from the CHILD participants, in addition to the CHILD Inter-Institutional Agreement (IIA), which has been executed between five Canadian institutions, restricts the sharing of CHILD data. Data described in the manuscript are available by registration to the CHILD database https://childstudy.ca/childdb/ and the submission of a formal request. More information about data access for the CHILD Cohort Study can be found at https://childstudy.ca/for-researchers/data-access/. If you are interested in collaborating on a project and accessing CHILD Cohort Study data, please contact child@mcmaster.ca.