



Individual and Focus Group Interview Consent Form (Qualitative Component)

Research Project Title: **From Risk Factors to Culturally Sensitive Intervention: A Programmatic Approach to Aboriginal Suicide**

Study Team

This research is being conducted by a research team from the Faculty of Medicine at the University of Manitoba under the direction of **Dr. Jitender Sareen** and **Dr. Brenda Elias**. Dr. Sareen can be reached at the PsychHealth Centre, 771 Bannatyne Avenue, Winnipeg, Manitoba, R3E 3N4. Ph: (204) 787-7078/Fax: (204) 787-4879. Dr. Elias can be reached at the Centre for Aboriginal Health Research, Dept. Community Health Sciences, Suite 715, 7th Floor Buhler Building, 727 McDermot Avenue, Winnipeg, Manitoba, R3E 3P3. Ph: (204)-789-3358/Fax: (204)-975-7783.

You are being asked to participate in a research study. Please take your time to review this consent form and discuss any questions you may have, or words you do not clearly understand, with the research study team or staff. You may take your time to make your decision about participating in this study and you may discuss it with your friends or family before you make your decision.

Purpose of the Study

The purpose of the study is to explore personal and community meanings and experiences of suicide in Swampy Cree Tribal Council (SCTC) communities and together with community members, use this knowledge to develop suicide prevention and intervention strategies that are based on the results of the research and are in line with traditional aboriginal values.

Study Procedures

This study involves two ways of interviewing individuals. We will be interviewing individuals, on a one-on-one basis, and asking questions about how it is to live in your communities. Another way we will be interviewing is by asking a group of people to come together into a focus group. In this group, we will also ask questions about how it is to live in your communities. The interviews and focus groups will take place in the Cree or English language, as you prefer. You will have the option to participate in a one-on-one interview, in a focus group, or in both. All information you provide will be kept strictly confidential and will only be used to create a general picture of how it is to live in the community.

We will also ask if you would be willing to be contacted at a later date in case we need to clarify any of the responses given in the interview. This would involve providing your name, address, and phone number, and the name of another contact person in case you move or your phone number changes. All personal information you provide will be kept strictly confidential, separate from the interview data and kept on file for the duration of the study (April 2007 to April 2012). At the conclusion of this research project we will destroy all computer and paper records containing your identifying information.

Access to personal information will be restricted to the research team only and will be secured electronically and physically in a locked office away from public access. **No staff from First Nation organizations or communities will have direct access to your personal information.** The same confidentiality will apply if university students and other researchers later use the data for a research project.

The interview will be approximately one hour long. You can stop participating at any time. However, if you decide to stop participating in the study, we encourage you to talk to the research study staff first.

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Risks and Discomforts

We will make every effort to make certain that there will be no way that people can identify you in the study. However, we cannot guarantee you absolute confidentiality.

Costs

The study procedures are conducted at no cost to you.

Benefits

There may or may not be direct benefit to you from participating in this study. When the research is completed, it will help the researchers to understand what supports (prevention and intervention strategies) can be delivered inside of the communities to improve life and wellness and to decrease suicide behaviours.

Payments for Participation

Participants may receive \$25 to cover travel costs to the interview location. However, participants will not be paid for their participation in the interviews and/or focus groups.

Confidentiality

Information gathered in this research study may be published or presented in public forums; however, your name or other identifying information will not be used or revealed. Despite all efforts to keep information shared in the focus groups confidential, there is a chance that a focus group participant may share the information they have heard. We therefore cannot guarantee absolute confidentiality. Also, your personal information may be disclosed if required by law. The University of Manitoba Research Ethics Board may review records related to the study for quality assurance purposes.

Voluntary Participation/Withdrawal from the Study

Your decision to take part in this study is voluntary. You may refuse to participate or you may withdraw from the study at any time. Your decision not to participate or to withdraw from the study will not affect the health care you receive. If the research study team and staff feel that it is in your best interest to withdraw you from the study, they will remove you without your consent. We will also tell you about any new information that may affect your health, welfare, or willingness to stay in this study.

Questions

You are free to ask any questions that you may have about your rights as a research participant. If any questions come up during or after the study, contact the research team/staff, Dr. Jitender Sareen, Psychiatrist and Primary Investigator, PsychHealth, Health Sciences Centre (204) 787-7078 and/or Dr. Brenda Elias, Centre for Aboriginal Health Research, University of Manitoba (204)789-3358.

For questions about your rights as a research participant, you may contact the University of Manitoba, Bannatyne Campus Research Ethics Board at (204)-789-3389.

Do not sign this consent form unless you have had a chance to ask questions and have received satisfactory answers to all of your questions.

Statement of Consent

Participant:

I have read this consent form. I have had the opportunity to discuss this research study with a staff member or investigator of the research study team. I have had my questions answered by them in the language I understand. The risk and benefits have been explained to me. I understand that I will be given a copy of this consent form after signing it. I understand that my participation in this study is voluntary and that I may choose to withdraw at any time. I freely agree to participate in this research study. I understand that information regarding my personal identity will be kept confidential, but that confidentiality is not guaranteed.

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I (*check*) **consent** to participate in the research study “From Risk Factors to Culturally Sensitive Intervention: A Programmatic Approach to Aboriginal Suicide”.

I (*check one or more*) **consent** to participate in: 1) an individual interview; 2) a focus group; 3) both

I (*check one only*) **consent** **do not consent** to being contacted at a later time for any clarification required on the survey responses.

I (*check one only*) **consent** **do not consent** to providing the name, address, and phone number of contact people for the study team to contact in the event of a move or if a phone number changes.

I authorize the inspection of any of my records that relate to this study by the University of Manitoba Research Ethics Board for quality assurance purposes.

By signing this consent form, I have not waived any of the legal rights that I have as a participant in a research study.

Participant Signature: _____ **Date:** _____

Participant Printed Name: _____

Participant Address (if consented to provide) _____

Consent from the parent or legal guardian and assent for participants who are under the age of fourteen years:

By signing this consent form, I have not waived any of the legal rights that I have as a participant in a research study.

Parent/Legal Guardian’s signature: _____ **Date:** _____

Parent/Legal Guardian’s printed name: _____

Parent/Legal Guardian’s Address (if consented to provide) _____

Additional Contact Name and Address: (if consented to provide) _____

Research Staff

I, the undersigned, have fully explained the relevant details of this research study to the participant named above and believed that the participant has understood and has knowingly given their consent.

Printed Name: _____ **Date:** _____

Signature: _____ **Role in the Study:** _____

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