

Being on the Autism Spectrum – Understanding the Journey in Tasmania

Consent form for focus group participants

1. I agree to take part in the research study named above.
2. I have read and understood the Information Sheet for this study.
3. The nature and possible effects of the study have been explained to me.
4. I understand that the study involves my participation in a group discussion about my experiences and opinions about what it is like to be on the autism spectrum (or for my child to be on the autism spectrum) in Tasmania. I understand that notes will be taken of the discussion to inform a paper to be provided to the Autism Advisory Panel and Tasmanian Government.
5. I understand that participation involves the risk that I may find recounting some of my experiences (or my child's experiences) distressing. I also understand that if I am distressed that I can leave the discussion at any time, and that someone will sit with me if I would like. I have also been provided with the names and phone numbers of some organisations that I could talk to if I would find that useful.
6. I understand that all research data will be securely stored on the Tasmanian Government Department of Health and Human Services' premises for five years from the publication of a short report from the Autism Advisory Panel to the Tasmanian Government, and will then be destroyed.
7. Any questions that I have asked have been answered to my satisfaction.
8. I understand that the researchers will maintain confidentiality and that any information I supply to the researchers will be used only for the purposes of the research. I understand that as a member of a group discussion that there are limits to the confidentiality, but that all participants of the focus group have been asked to respect the confidentiality of one another.
9. I understand that the results of the study will be published so that I cannot be identified as a participant.
10. I understand that my participation is voluntary and that I may withdraw at any time without any effect.

I understand that I will not be able to withdraw my comments after the end of the focus group as the information will not be identifiable or attributed to individual participants in the notes taken during the focus group.

Participant's name: _____

Participant's signature: _____

Date: _____

Statement by Investigator

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I have explained the project and the implications of participation in it to this volunteer and I believe that the consent is informed and that he/she understands the implications of participation.

If the Investigator has not had an opportunity to talk to participants prior to them participating, the following must be ticked.

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The participant has received the Information Sheet where my details have been provided so participants have had the opportunity to contact me prior to consenting to participate in this project.

Investigator's name: _____

Investigator's signature: _____

Date: _____