

Attachment C: Participant Information Sheet and Consent Form

PARTICIPANT INFORMATION SHEET AND CONSENT FORM

Title: Client perspectives on undertaking alcohol and/or other drug (AOD) counselling via phone or video

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Description of the study

This study will investigate clients' experiences of undertaking alcohol and/or other drug (AOD) counselling via phone or video call. This is sometimes referred to as telehealth or digital support. You have been invited to take part in this study if, in the past 12 months, you have:

- (a) received AOD counselling via phone or video call AND
- (b) received AOD counselling face-to-face.

You also need to be aged 18 years or older and live in Australia.

This project has been funded by the Australian Government Department of Health and Aged Care and is being conducted by the National Centre for Education and Training on Addiction (NCETA), Flinders University.

Purpose of the study

This project aims to learn from the experiences of people who have received AOD counselling services via phone or video call to identify benefits and drawbacks to delivering AOD counselling services via phone or video call in Australia.

Benefits of the study

Sharing your experiences will contribute to a greater understanding of clients' experiences of undertaking AOD counselling via phone or video call. Research findings will be translated into a guide for AOD organisations interested in incorporating the use of phone and video within their counselling services, as well as a brief for policymakers regarding the potential role of phone and video calls for AOD counselling.

Participant involvement and potential risks

If you agree to participate in the research study, you will be asked to attend a one-on-one online interview with a researcher, either through the Microsoft Teams platform or via telephone. You will be asked to respond to questions regarding your experiences in undertaking AOD counselling via phone or video call, and how this compares to face-to-face. We estimate that the interview will take up to 30-minutes. With your permission, we will record this interview using either Microsoft Team's in-built recording and transcription function or Google's Recorder app. A member of the research team, or an NCETA-employed research assistant who has signed a confidentiality agreement, will review the automatically generated transcript for accuracy. You will also be given an opportunity to review your transcript and flag any comments that you do not want us to quote directly in any publications, or that you want us to remove from analysis.

We anticipate that the risk to you of taking part is low, and do not expect the questions to cause any harm beyond mild discomfort or anxiety about being interviewed. All questions relate to your experiences of the process of undertaking counselling via phone or video call, not to your personal situation or experiences. We will provide you with a copy of the questions prior to the interview so that you may consider your answers beforehand if you wish. If you do not want to answer a question, you may skip it and go to the next question, or you may stop immediately.

If you do experience feelings of distress as a result of participation in this study, please let the research team know immediately. You can also contact your AOD counselling provider or the following services for support:

- Lifeline 13 11 14, www.lifeline.org.au
- Beyond Blue 1300 22 4636, <u>www.beyondblue.org.au</u>



Alternatively, you may be able to seek support from your state or territory AOD consumer representative body.

Name of the AOD consumer	State	Contact
representative body		
The Canberra Alliance for Harm	ACT	Address: Level 1, Belconnen
Minimisation and Advocacy (CAHMA)		Churches Centre, Cnr Cohen St &,
		Benjamin Way, Belconnen ACT 2617
		E-mail: info@cahma.org.au
		Phone: (02) 6253 3643
Harm Reduction Victoria	VIC	Address: 299-305 Victoria Street,
		Brunswick VIC, 3056
		E-mail: info@hrvic.org.au
		Phone: (03) 9329 1500
The Northern Territory AIDS and	NT	Address: 46 Woods Street, DARWIN
Hepatitis Council Inc.		NT 0800
		E-mail: info@ntahc.org.au
		Phone: 08 8944 7777
The NSW Users and AIDS Association	NSW	Address: 267 Broadway NSW 2037
(NUAA)		Phone: (02) 9171 6650
Peer Based Harm Reduction WA	WA	Address: Suite 22, 7 Aberdeen
(PBHR WA)		Street, Perth WA 6000
		Email: info@harmreductionwa.org
		Phone: (08) 9325 8387
QuIHN	QLD	Phone: 1800 172 076
QuIVAA	_	E-mail: odtp@quivaa.org.au
		Phone: 1800 175 889
Hepatitis SA	SA	Address: Kaurna Country, 3 Hackney
		Road, Hackney SA 5069
		E-mail: admin@hepatitissa.asn.au
		Phone: 1800 437 222 (ask to speak
		to a peer)

Finally, there is a risk that the information you share may need to be disclosed to government or law enforcement agencies and the information could potentially be used against you in legal proceedings or otherwise. For example, researchers must disclose participant information if: (a) they receive a court order, subpoena or search warrant; or (b) where they have a mandatory reporting obligation, such as in cases of notifiable infectious diseases or suspected harm to a child. Further, researchers may have a moral obligation to breach confidentiality where they reasonably believe it is necessary to prevent a serious and imminent threat to anyone's life, health, safety or welfare or that of the community.

Withdrawal rights



You may decline to take part in this research study. If you decide to take part and later change your mind, you may withdraw at any time up until the publication of results without providing an explanation. To withdraw, please contact the Chief Investigator to have your data removed from the study or you may just refuse to answer any questions at any time. Any data collected up to the point of your withdrawal will be securely destroyed. Your decision whether to take part or not to take part, or to take part and then withdraw, will not affect your relationship with the researchers.

Confidentiality and privacy

Only researchers listed on this form have access to the individual information provided by you. Researchers will take all possible steps to ensure privacy and confidentiality will be adhered to at all times. The research outcomes may be presented at conferences, written up for publication or used for other research purposes as described in this information form. These research outputs may include direct quotes from interviews, but you and the person or organisation you received AOD counselling from will not be named. We will carefully select quotes to ensure that they do not include details that may identify you, other people, or organisations. We will also give you an opportunity to read over your interview transcript and tell us if there are any parts that you do not want us to quote directly. No data, including identifiable, non-identifiable and de-identified datasets, will be used in future research projects without your explicit consent. Please provide your consent to this by ticking the appropriate box on the Consent Form at the end of this form. You may complete the consent form by signing and scanning or taking a photo of the form and e-mailing it Dr Ashlea Bartram (Ashlea.Bartram@flinders.edu.au). If you are not able to sign and return the form, you can provide verbal consent at the beginning of the interview, which we will record.

Data storage

Your interview recording and transcript will be stored securely on a password protected Flinders University server throughout the study, which will only be accessible to NCETA staff. A member of the research team will remove personally identifying information such as your name from your transcript and replace this with a de-identified code. Interview recordings will be deleted once analysis is complete. All other data will be stored at Flinders University for up to five years after publication of findings. Following the required data storage period, all data will be securely destroyed according to university protocols.

Recognition of Contribution / Time

If you would like to participate, in recognition of your contribution and time, you will be provided with a \$30 voucher on completion of the interview. You may choose to receive this as a physical Visa gift card sent via post, or an e-voucher for Woolworths or Coles sent via e-mail.

How will I receive feedback?

At the completion of the project, a summary of findings will be provided to all participants via e-mail.

Ethics committee approval

The project has been approved by Flinders University's Human Research Ethics Committee (HREC project number 7484).

Queries and concerns

Queries or concerns regarding the research can be directed to the research team. If you have any complaints or reservations about the ethical conduct of this study, you may contact the Flinders University's Research



Ethics and Compliance Office team either via telephone (08) 8201 2543 or by emailing the Office via human.researchethics@flinders.edu.au.

Thank you for taking the time to read this information sheet which is yours to keep.

If you accept our invitation to be involved, please sign the enclosed Consent Form and return it to Dr Ashlea Bartram (<u>Ashlea.Bartram@flinders.edu.au</u>), or email Ashlea to advise if you want to provide verbal consent.



CONSENT FORM		
Title: Client perspectives on undertaking alcohol and/or other drug counselling via phone or video (HREC project number 7484).		
Consent Statement		
I have read and understood the information about the research, and I understand I am being asked to provide informed consent to participate in this research study. I understand that I can contact the research team if I have further questions about this research study.		
I am not aware of any condition that would prevent my participation, and I agree to participate in this project.		
I understand that I am free to withdraw at any time up until the publication of the study's findings.		
I understand that I can contact Flinders University's Research Ethics and Compliance Office if I have any complaints or reservations about the ethical conduct of this study.		
I understand that my involvement is confidential, and that the information collected may be published. I understand that I will not be identified in any research products.		
I understand that even though information provided will be treated with the strictest confidence, information may need to be disclosed to government or law enforcement agencies.		
I further consent to:		
participating in an interview		
having my information audio and/or video recorded		
my data and information being used in this project and other related projects for an extended period of time (no more than 5 years after publication of the data)		
Signed:		
Name:		
Date:		