

ID Code: _____

**UNIVERSITY OF WASHINGTON
CONSENT FORM
KEY INFORMANT INTERVIEW**

RECEIVED
Human Subjects Division

MAR 01 2005

UW RECEIVED
Human Subjects Division

JAN 01 2006

UW RECEIVED
Human Subjects Division

FEB 25 2005

UW

Researchers:

Karina Walters, Associate Professor, UW School of Social Work, (206) 543-5647
Jane Simoni, Associate Professor, UW Department of Psychology, (206) 685-3291
Teresa Evans-Campbell, Assistant Professor, UW School of Social Work, (206) 543-6075
June Strickland, Associate Professor, UW School of Nursing, (206) 685-0862
Sue-Ellen Jacobs, Professor, UW Women Studies, (206) 685-1956.

Researchers' Statement

We are asking you to be in a research study. The purpose of this consent form is to give you the information you will need to help you decide whether to participate in the study or not. Please read the form carefully. You may ask questions about the purpose of the research, what we will ask you to do as a participant, the possible risks and benefits, your rights as a volunteer, and anything else about the research that is not clear. When we have answered all your questions, you can decide if you want to be in the study or not. This process is called 'informed consent.' We will give you a copy of this form for your records.

PURPOSE AND BENEFITS

The goal of this research project is to study the health needs and concerns of two-spirited Native American men and women. You may benefit from this study by having the opportunity to talk about your experiences as a two-spirit and contributing to the research knowledge in this area and the development of culturally-specific programs for two-spirits at Native agencies.

PROCEDURES

This study involves your participating in a 2- to 3-hour face-to-face interview, for which you will receive \$40.00. During the interview, you will be asked open-ended questions about your experiences as a two-spirited individual and your views about key issues concerns, and needs of the two-spirit community. Topics include health and mental health issues; what it means to be two-spirited; values, beliefs, and cultural practices that are significant in your life; identification of challenges and strengths associated with being two-spirited; relationship with or involvement with American Indian communities, two-spirit communities, and non-Native GLBT communities; discriminatory experiences; identity issues; and parenting or caregiving roles you have in your community. You are free not to discuss any topics you do not wish to discuss. With your permission, the meeting will be recorded on audiotape. The tapes will be heard only by project staff and will be destroyed after they are transcribed and after the study is completed (no later than June, 2012). If you do not want to be audio-taped, the interviewer will take hand-written notes.

APPROVED

MAY 19 2005

UW Human Subjects
Review Committee

RISKS, STRESS, OR DISCOMFORT

There are no risks to your physical health in participating in this study, but you may feel embarrassed or anxious if you choose to disclose personal information about yourself. Everyone involved in the study, including interviewers and research staff has taken an oath of confidentiality and will be required to keep information about others private and confidential. If you desire, you may request a transcript of this meeting and you may delete or change any portions of the interview prior to final analyses.

OTHER INFORMATION

The information you provide will be used for research purposes only. It is confidential and will be linked to an ID code. The only people who will have access to the list of names linked to the ID codes are the research staff, and this list will be destroyed by April 2012. All study forms will be stored in a locked file cabinet in a locked office.

To protect your confidentiality, we have a Certificate of Confidentiality from the federal government. This protects your privacy by allowing us to refuse to disclose your name or other identifying information to anyone outside the research staff. There are two exceptions. First, the human research committee at the University of Washington or the Department of Health and Human Services may inspect your records for audit or program evaluation purposes. Second, if you report an incident of ongoing child or elder abuse or if you indicate a risk of immediate harm to yourself or another identifiable individual, we will take necessary action, which may include reporting to the appropriate authorities.

Your participation in this study is voluntary and you may refuse to participate or withdraw at any time without the loss of any benefits to which you would otherwise be entitled.

Printed name of researcher

Signature of researcher

Date

Subject's Statement

This study has been explained to me. I volunteer to take part in this research and I have had a chance to ask questions. If I have questions later about the research, I can ask one of the researchers listed above. If I have questions about my rights as a research subject, I can call the Human Subjects Division at (206) 543-0098. I will receive a copy of this consent form.

Printed name of subject

Signature of subject

Date

APPROVED

MAY 19 2005

UW Human Subjects
Review Committee

ID Code: _____

Consent to Audio-recording

Please indicate whether it is okay for the interview to be audio-taped.

- Yes, I agree to have this interview audio-taped.
- No, I do not want this interview to be audio-taped.

Initials of subject

Date

Request to contact for future research:

In the future there may be other opportunities to participate in other research activities like focus groups and interviews. May we contact you to tell you more about other parts of the research project? Your agreement to be re-contacted is **not** consent to participate. You are just agreeing to be re-contacted.

- Yes, it is okay for you to re-contact me.
- No, I do not want anyone to re-contact me.

Initials of subject

Date

APPROVED

MAY 19 2005

UW Human Subjects
Review Committee