RESEARCH STUDY INTO Exploring Homeopathic Decision Making

PARTICIPANT INFORMATION STATEMENT

What is this study about?

You are invited to take part in a research study into ‘Exploring Homeopathic Decision Making’. The object is to understand how homeopaths make decisions in clinical practice and the factors that influence these decisions. The study is being conducted by David Levy and will form the basis for the degree of PhD at the University of Sydney under the supervision of primary supervisor Dr Claire Hooker and associate supervisors Dr Rola Ajjawi and Dr Chris Roberts.

What is involved in this study?

If you agree to participate in this study, you will be requested to be available to be observed in your practice and to be interviewed between appointments and at the end of the clinical session. Interview questions will focus on how and why you ask specific questions, how you identify salient information and make meaning from the data collected. With prior consent, you and your patients will be video taped. You will be audio taped between appointments and at the conclusion of your clinic session. Interviews will be conducted and recorded in your private practice.

Are there risks?

No one other than your patients, you and I will be in the interview room. This will minimize the risk, discomfort and inconvenience to all participants. This research will not address or provide any treatment intervention thus there will not be side effects. You, the participant, should not experience any risk, inconvenience or discomfort as the nature of the investigation is to explore and understand your decision making. You will need to be at your private practice for 6 to 8 hours on one typical consulting day. A second shorter thirty minute meeting may be required in order to clarify your answers.

Who will know the results of the study?

All aspects of the study, including results, will be strictly confidential and only the investigators named above will have access to information on participants, except as required by law. A report of the study may be submitted for publication, but individual participants will not be identifiable in such a report.

Can I withdraw from the study?

Participation in this study is entirely voluntary: you are not obliged to participate and you can withdraw at any time. Whatever your decision, it will not affect your relationship with the researcher.
You may stop the interview at any time if you do not wish to continue, the audio recording will be erased and the information provided will not be included in the study.

**What if I have further questions?**

When you have read this information, David will discuss it with you further and answer any questions you may have. If you would like to know more at any stage, please feel free to contact David Levy dclevy@bigpond.net.au or (02)97132633 or Dr Claire Hooker Claire.hooker@sydney.edu.au or (02)90363413

Any person with concerns or complaints about the conduct of a research study can contact the Manager, Ethics Administration, University of Sydney on (02) 9351 4811 (Telephone); (02) 9351 6706 (Facsimile) or gbriody@usyd.edu.au (Email).

This information sheet is for you to keep.
RESEARCH STUDY INTO Exploring Homeopathic Decision Making

PARTICIPANT CONSENT FORM

I, ........................................................................................................ , give consent to my participation in the research project

Name (please print)

TITLE: Exploring Homeopathic Decision Making

In giving my consent I acknowledge that:

1. The participant requirements in this project and the time involved have been explained to me, and any questions I have about the project have been answered to my satisfaction.

2. I have read the Participant Information Statement and have been given the opportunity to discuss the information and my involvement in the project with the researcher/s.

3. I understand that I can withdraw from the study at any time, without affecting my relationship with the researcher(s) now or in the future.

4. I understand that my involvement is strictly confidential and no information about me will be used in any way that reveals my identity.

5. I understand that I will be audio- and video-taped during the clinic session and my details will be de-identified when the tape is transcribed.

Signed: .................................................................................................................................

Name: .................................................................................................................................

Date: .................................................................................................................................
RESEARCH STUDY INTO Exploring Homeopathic Decision Making

PATIENT INFORMATION STATEMENT

What is this study about?
This study seeks to better understand how homeopaths make decisions in practice and the factors that influence these decisions. Understanding how homeopaths make decisions will inform and enhance clinical practice as well as contribute to homeopathic education.

Who is conducting the study?
The study is being conducted by David Levy and will form the basis for the degree of PhD at the University of Sydney under the supervision of Dr Rola Ajjawi and Assoc. Prof. Chris Roberts.

What is involved?
The researchers are interested in how your homeopath makes decisions about your treatment. If you agree to participate, the consultation with your homeopath will be video recorded to enable the researchers to explore how and why your homeopath asks questions and makes particular decisions. Only the researchers named above will have access to the videotape. The video recording will not be used in any other capacity. The research should not affect your consultation in any way.

Can I withdraw from this study?
Participation is entirely voluntary and you are not obliged to participate. If you do not wish to be video recorded you do not have to give your consent. You are able to request the video recording be stopped at any time during the consultation.

Who will know the results of this study?
All aspects of the study, including results, will be strictly confidential and only the investigators named above will have access to information on participants, except as required by law. A report of the study may be submitted for publication, but individual participants will not be identifiable in such a report.

Will the study be of benefit to me?
The study will be of no direct benefit to you.

What if I have further questions?
When you have read this information, David will discuss it with you further and answer any questions you may have. If you would like to know more at any stage, please feel free to contact David Levy dclevy@bigpond.net.au or (02)97132633, Dr Rola Ajjawi rajjawi@med.usyd.edu.au or (02)90367208, or Assoc. Prof. Chris Roberts croberts@med.usyd.edu.au or (02)90369453.

What if I have a complaint or concerns?
Any person with concerns or complaints about the conduct of a research study can contact the Manager, Ethics Administration, University of Sydney on (02) 9351 4811 (Telephone); (02) 9351 6706 (Facsimile) or gbriody@usyd.edu.au (Email).

This information sheet is for you to keep.
RESEARCH STUDY INTO Exploring Homeopathic Decision Making

PATIENT CONSENT FORM

I, ............................................................., give consent to my participation in the research project

Name (please print)

TITLE: Exploring Homeopathic Decision Making

In giving my consent I acknowledge that:

1. The patient requirements in this project and the time involved have been explained to me, and any questions I have about the project have been answered to my satisfaction.

2. I have read the Patient Information Statement and have been given the opportunity to discuss the information and my involvement in the project with the researcher/s.

3. I understand that I can withdraw from the study at any time, without affecting my relationship with the researcher(s) now or in the future.

4. I understand that my involvement is strictly confidential and no information about me will be used in any way that reveals my identity.

5. I understand the session will be audiotaped and my details will be de-identified when the tape is transcribed.

6. I understand the practitioner will also be videotaped during the interview; the video camera will not be focused on me.

Signed: ............................................................................................................................................

Name: ............................................................................................................................................

Date: .............................................................................................................................................
Notice attached at entrance to participant’s clinic

Research in progress at this clinic today.

Please speak to receptionist or your practitioner for further information regarding this research.