



SNEHA Society for Nutrition, Education and Health Action

[REG. NO. E-17858(MUM)]

every woman and child counts.

Participant Information Sheet and Consent Form for participants for an in-depth interview

Title of the study: Norms that perpetuate violence against women: a qualitative study in Mumbai.

Introduction

Namaste.

I am I work with the Society for Nutrition, Education and Health Action (SNEHA). SNEHA is an NGO working for the health of women and children in the slums of Mumbai. I have come to meet you regarding study on norms, attitudes, and beliefs that perpetuate violence against women.

Purpose of study

We are conducting a study of people in Mumbai to understand the attitudes, behaviour, and norms that differ for men and women. We would also like to understand norms that perpetuate violence against women. The study will be for a period of three months. We will talk to 80 – 100 women and men between the ages of 18 and 50 years, living in Dharavi.

We will talk to 12 women individually, which will take approximately 60 to 90 minutes.

We invite you to participate in this study. It is important that you thoroughly understand your role in it and also the benefits and risks to you for participating. Please give your consent to participate only if you have completely understood the nature of this interview and if you are aware of your rights as a participant.

Benefits and risks

There will be no harm to you for participating in this interview. You will get updated information on SNEHA's crisis intervention and counselling services that are available close to you. You will spend some time in giving us information, which will help us to understand the norms, behaviours and attitudes to gender relations and violence against women. This will enable us to challenge discriminatory norms through our interventions to help women live a violence-free life.

Participation

Violence against women is an issue that affects all of us in society; hence we would be grateful if you would agree to participate in this study. Your participation is completely voluntary. You can refuse to participate or to leave the process at any point. If you do this, you will not pay any penalty or be denied any service by SNEHA or any other agency. We will not be paying anyone for their consent or participation in the study.

Confidentiality

All information you give will be kept confidential. We will collect the information on audio recorders and paper, which will then be stored on a computer. Your name will be removed so that nobody knows what you said.

The study has ethical approval from the Ethicos Independent Ethics Committee, Mumbai.

We request your written consent to participate in the study. If you have any questions about the project or need any kind of help, you can contact me or Nayreen Daruwalla at SNEHA's office (Chota Sion hospital, Room 310, 3rd floor, Dharavi, Mumbai 400017) or on telephone number 24042627/24086011.

INFORMED CONSENT FORM

Please read and place a ✓ or X against the following statements before giving consent:

1	I have been informed by the investigators about the study including the nature, period, objective and benefits and risks and I have understood them.	
2	I have been given the opportunity to ask questions and have been given satisfactory responses.	
3	I understand that I am free to participate or not to participate in the study.	
4	I understand that, I can withdraw at any point in the interview and the study and if I withdraw from the study, I can decide whether the information I have shared may be used in the final study.	
5	I understand that I will not be penalised for refusing to participate in this interview or for withdrawing from the study.	
6	I agree for a written record of the interview to be used for the purposes of SNEHA's study.	
7	I agree for a written record of the interview(s) to be shared with other researchers studying similar topics, on application and at the discretion of the SNEHA research committee.	
8	I understand that my personal information will be treated as strictly confidential.	
9	I understand that the information I provide may be published in a report or study and that confidentiality and anonymity will be maintained so that it will not be possible to identify me or any individual in the community.	

Do you agree to participate in this survey? Yes ☐ No ☐

(If No, document the reasons and leave after thanking the person).

Signature:

Thumb Impression (Left):

Name:

Address:

Interviewer's signature:

Interviewer's name:

Date: