

**Committee on Research Ethics**

**PARTICIPANT CONSENT FORM**

|  |  |  |
| --- | --- | --- |
| **Research Project: Maternal Drinking Interviews** |  | **Please initial box** |
| **Researcher(s): TBA** |  |
| 1. I confirm that I have read and have understood the Participant Information sheet for the study: **Maternal Drinking Interviews**. I have had the opportunity to consider the information, ask questions (abirose@liv.ac.uk) and have had these answered satisfactorily. | |  |
| 1. I understand that my participation is voluntary and that I am free to withdraw from the interview at any time without giving any reason, without my rights being affected. Should I not wish to answer/contribute to a particular question or topic, I do not have to. 2. I understand that the interview will be audio recorded for data collection, and that once the data is taken from the recording, the audio footage will be destroyed. 3. I understand that this is a confidential interview 4. I understand that my data is anonymous (it cannot be traced back to me), and may be published (e.g. in a journal article) or presented (e.g. at a conference). 5. I understand that although interviews are confidential, the researchers have a legal responsibility to disclose information relating to harm to myself or others. In this situation, the researchers will inform me of any necessary action. 6. I confirm that I am at least 18 years old and that I am a fluent English speaker 7. I confirm that I am (please tick all that apply) 8. Pregnant 9. A mother of children under 5 years of age 10. A midwife 11. A obstetric clinician 12. A health visitor 13. A GP 14. An alcohol service health worker 15. I agree to take part in the above study | |

Researcher copy / Participant copy (delete as appropriate)

**Participant signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Interview site:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Chief Investigator: Dr Abi Rose**

Work Address: 2.32 2nd Floor Eleanor Rathbone

Email: abirose@liverpool.ac.uk Telephone: 0151 794 1159