



***Inter-Tribal Council of Michigan (ITC) Behavioral
Health
Anishnaabek Healing Circle
Informed Consent for Evaluation***

You are being asked to participate in an effort to evaluate the services you will receive from the Anishnaabek Healing Circle program you have elected to participate in. We have prepared this form to provide you with all of the information you will need to make an informed decision about your participation in the evaluation of the program. Feel free to ask questions during any point of the explanation.

What is the Purpose of the Project?

The Anishnaabek Healing Circle program is designed to provide substance abuse clinical treatment and recovery support services, expand access to a comprehensive array of clinical treatment and recovery support and to increase substance abuse treatment capacity. The program is federally funded by the Center for Substance Abuse Treatment. The Inter-Tribal Council of Michigan is responsible for the management and evaluation of this program. Because you are receiving services from one of the participating providers, you are invited to participate in this evaluation.

What information will I be asked to provide?

To evaluate this program we will need to collect information about your current living situation, your substance abuse (both past and present), your employment or educational status, your legal status, and your health. As part of the program evaluation, you will be asked to complete an initial evaluation interview at intake and an interview at 6 months post intake. Each interview will last about 30 minutes.

How will my privacy be protected?

The information you provide will always be treated confidentially. Specifically, the information you provide will be coded with a special ID number. Only your Care Coordinator will be able to associate your name with the ID number that appears on the data collection forms. If your Care Coordinator requires assistance in locating you for follow-up interviews your name will be given to another member of the treatment program staff to assist with locating you and completing the interview. This person is covered by the same confidentiality requirements as your Care Coordinator and will insure that information you provide in the follow-up interview will be treated confidentially.

In what way will the information gathered be used?

Your responses to the evaluation questions will be kept in your confidential client file at the service provider's program office. Your Care Coordinator will use the initial information collected to help plan services for you. Forms that include your responses only, with no name or other identifying information, will also be provided to the Inter-Tribal Council of Michigan for use in the evaluation of the program. The Inter-Tribal Council staff will enter you data into a database along with other clients. This database will be used by the ITC Management Team to examine program outcomes.

Your name will not come to the attention of representatives of the Federal or State Government or any other persons reading reports produced by this project. Furthermore, the information reported to anyone will always be grouped with information from other people so that you cannot be identified. This project is being conducted by Inter-Tribal Council of Michigan, under Grants #TI080228, #TI081712 and #TI081385 funded by the Substance Abuse and Mental Health Administration (SAMHSA).

Are there any risks involved with my participation?

The main risk associated with your participation in the evaluation is that someone you have not authorized could gain access to the personal information about your life, including any substance use that may have occurred. While it is possible that your confidentiality could be broken, strict measures will be put in place to protect your confidentiality. There are already federal laws which protect the confidentiality of substance abuse treatment clients and anyone who breeches this confidentiality may be liable for a fine. Furthermore, to protect against the risk your responses to evaluation questions will only be identified with a code number, no identifying information such as name, address, or phone number will on the forms. All evaluation records will be kept in locked filing cabinets in secured offices.

Are there any benefits?

All participants in this evaluation may benefit directly from the clinical treatment and recovery support services they receive as well as through increased pride in knowing that they are participating in an effort to help improve counseling and recovery for other Native American people. If we learn how to better treat alcohol and other drug abuse in Native American people, then this evaluation will benefit others across the nation.

Your Participation is Voluntary.

Your participation in this evaluation is strictly voluntary. Your treatment or receipt of recovery support services will not be affected by you choice to participate in the evaluation. However if the project is not able to collect data required by the funding agency the services you receive will not be paid for by the project.

