Guidelines for Informed Consent in Research using Video

Research project Title:

Principal Investigator : (name, address and phone number)

Co-Investigator or Research Supervisor (if applicable) and contact information:

Sponsor (if applicable)

Include the Following Verbatim:

You are being asked to participate in a Research Study in which Video and or pictures of you will be used. The information contained in Video and Pictures is considered personal Information as they present recorded information in which you may be identified. Please take your time to review and read this consent form carefully and any accompanying information. It should give you the basic idea of what the research is about and what your participation will involve. If you would like more detail about something mentioned here, or information not included here, you should feel free to ask the study staff. Although the information captured in video and pictures is non-anonymous, confidentiality can be protected by restricting access to the video and to personal information such as the names of the participants or the institutions in which data will be captured.

Researcher to describe the following information using a non-technical language:

1. A description of the purpose and objectives of the research. Directly relate the use of the video-data in fulfilling the objectives of the project.
2. A detailed description of the procedures involving the participant (Collection, use and disclosure):
   - What specific data will be observed, recorded and accessed
   - How the video-data will be collected
   - Who will do the collecting
   - Frequency, duration and the total time required in research activities
   - Specify who will see the recordings
   - Specify where the recordings will be used
   - How access to the video-data will be implemented and controlled (where and how video-data will be stored, use of locked secure area, password-protected computer or secure servers with Internet Files)
   - Plans for publication explaining possible settings for showing the videotape (For example educational conferences, small videotape viewing rooms, password protected websites or to large audiences during talks)
   - How long records will be kept and possibly plans for destruction when the study is completed
3. A description of the benefits, if any, directly to the participant or to others
4. A description of the potential risks or discomforts to the participants.
5. A description of the safeguards in place to protect the confidentiality of participants. If confidentiality cannot be guaranteed, participants should be made aware of possible consequences.
6. A description of any form of remuneration or payment for participation
7. A description of the costs or expenses, if any, the participants will incur as a result of participation in this study
8. A description of opportunities for participants to view the recording after it is completed and make suggestions or express discomfort with the data captured.
9. A description of how the participant may withdraw at any time from the research, without negative consequences
10. Provide a description of the measures to avoid the inclusion on non-participants.

Include the following statement of consent:

In signing this document I freely agree to participate in a research study in which video recordings containing my image may be distributed to: (list persons, groups or audience using the video-data), and may be used in the following contexts: (list methods of distribution for example: within the research group only, conference presentations, collaboration within research groups, centralized archive, distributed archive or the World Wide Web). I authorize the use of such data and recordings only for the scientific and educational purposes specified above. I have been told that my name will not appear in any report or publication resulting from this study. I have been advised that while all feasible precautions are being taken to restrict the use of this video-data, it is not possible to fully guarantee that distributed materials, especially those distributed via the Internet, will always be used for intended purposes.

I have read this consent form. I have had the opportunity to discuss this research study with the research staff. I have had all my questions answered by them in language I understand. The risks and benefits have been explained to me. I believe that I have not been unduly influenced by any study team member to participate in the research study by any statements or implied statements. Any relationship (such as employer, supervisor or family member) I may have with the study team has not affected my decision to participate and that I may choose to withdraw my consent and decline to be recorded and to participate in any activity related to this study at any time, without penalty, prejudice or consequence. I understand that I will be given a copy of this consent form after signing it. I authorize the inspection of any of my records that relate to this study by the University of Manitoba.

By signing this consent form, I have not waived any of the legal rights that I have as a participant in a research study and I have not released the researchers, sponsors, or involved institutions from their legal and professional responsibilities.
Provide for Signatures as Required:

Participant signature______________________________ Date______________
Participant printed name___________________________

Researcher and/or Delegate’s Signature __________________ Date__________
Researcher and/or Delegate’s printed name___________________________
Role in the study___________________________

This research has been approved by the (insert full name of appropriate REB). If you have any concerns or complaints about this project you may contact any of the above-named persons or the Human Ethics Coordinator at______________.