******Information Letter**

**Example Letter Two - Detailed**

**Project Title**

**Alternately, project title can go here**

**Investigator (s) xxxx**

Contact Person xxxx

Address xxxx

Telephone No. (xx) xxxx xxxx

You are invited to participate in this study.

**Background**

Research has shown that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. A few studies have been conducted on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ demonstrating that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. We are interested to learn whether this is the case with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.so we are inviting you to participate in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ over the next few weeks (specify time frame).

If this is a student’s study, ensure that participants are informed of this and that the level of study and supervisor are specified.

**Aim of the Study**

We would like to know whether there are benefits to you from participating in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. We will ask you to use the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. We will also ask you to answer a few questions about on how you see \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to uncover whether there is any improvement that can be linked to the program.

**What Does Your Participation Involve?**

(Here give a more detailed, plain language description of exactly what you are asking participants to do – e.g. complete surveys, be interviewed, attend a focus group, give tissue samples etc. Give details e.g. example interview questions. Specify what you will do with the material once collected.

**Voluntary Participation and Withdrawal from the Study**

It is important that you understand that your involvement is this study is voluntary. While we would be pleased to have you participate, we respect your right to decline. There will be no consequences to you if you decide not to participate, and this will not affect your treatment / service. If you decide to discontinue participation at any time, you may do so without providing an explanation. If you withdraw, all information you have provided will be destroyed (sometimes data cannot be withdrawn or destroyed after a certain point, if so, indicate this to participants – e.g. If your data has already been de-identified or published, it may not be possible to destroy data that you provided in the earlier stages of the research. In this instance, all your information will be attributed anonymously).

**Your privacy**

Your privacy is very important to us. Your participation in this study and any information will be treated in a confidential manner. Your name and identifying details will not be used in any publication arising out of the research. Following the study the data will be kept in a de-identified

[If this is a study of your students or people whom you supervise, include something along the following lines and modify for different circumstances:] Because some of the research team are staff members associated with this unit, whether you elect to participate or not will be kept entirely confidential. Any members of the research team who are associated with the coordination or administration of this unit will not know whether you have elected to participate and will view only anonymous data. It will thus not be possible to identify you in any publication arising out of this study (modify this sentence for inadvertent identifiability).

**Possible Benefits**

It is possible that you will notice \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ from the program after a certain period of time. This may lead to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. It may also result in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. We will be interested to see if you experience any other benefits from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

If we are able to take the findings of this small study and link them with a wider study, the result may be valuable information for others and it may lead to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**Possible Risks**

There are no specific risks anticipated with participation in this study (alternately, if there are risks, outline them clearly here). However, if you find that you are becoming distressed or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ you will be advised to receive support from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or alternatively, we will arrange for you to see a counsellor at no expense to you.

**Reimbursement** (include this section only if relevant)

If participants will be reimbursed or rewarded in any way for their participation let them know (e.g. participants will each be offered a $00.00 shop voucher / movie tickets or we will hold a raffle of –item– to the value of $00.00 and you have approximately a 1:100 chance of winning this)

**Questions**

If you would like to discuss any aspect of this study please feel free to contact either xxx on ph xxx or xxx on ph xxx (do not given your home contact details). Either of us would be happy to discuss any aspect of the research with you.

Once we have analysed the information from this study we will mail / email / put on our web site a summary of our findings. You can expect to receive this feedback in (timeframe).

We would like to thank you in advance for your assistance with this research project. We look forward to hearing from you soon.

Consider adding an instruction about what participants need to do if they are happy to participate in the study, e.g. please contact us / come to … /

This study has been approved by the Murdoch University Human Research Ethics Committee (Approval xxxx/xxx). If you have any reservation or complaint about the ethical conduct of this research, and wish to talk with an independent person, you may contact Murdoch University’s Research Ethics & Integrity on Tel. 08 9360 6677 (+61 8 9360 6677 for overseas studies) or e-mail human.ethics@murdoch.edu.au. Any issues you raise will be treated in confidence and investigated fully, and you will be informed of the outcome.

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